

August 21, 2013 ~~August 8, 2013~~ ~~June 13, 2013~~

[Certified Letter No.]

[Name]

[Address]

[City, State]

Re: Voluntary Deadline to Comply with ETPS Maintenance and Effluent Testing Requirements

Dear [Name],

[Regulatory Agency Name] has been informed that you are refusing to meet your responsibility and requirements surrounding your [insert manufacturer's name] extended treatment package system (ETPS). As described in this Department's letter sent to you dated [insert letter 1 date] you are responsible for having annual maintenance performed on your ETPS unit and for annual testing of effluent quality discharged by the unit. Per *IDAPA 58.01.03.002.04.a.i* it is the responsibility of the property owner to treat and dispose of wastewater generated on their property in accordance with their subsurface sewage disposal permit.

You are responsible for the completion of your unit's annual maintenance and effluent quality testing. The results of the annual maintenance and testing are required to be submitted to this Department by July 31<sup>st</sup> of each year. As of the issuance of this letter you are delinquent in meeting these requirements by [insert number of days past July 31<sup>st</sup>]. This Department is providing you a 30 day window to voluntarily meet the requirements and responsibilities of your septic permit and member agreement (see enclosure). You have until [insert voluntary compliance date] to accomplish your required annual maintenance and effluent quality testing. **After this date this Department may issue a Notice of Violation to you for failure to meet the requirements of *IDAPA 58.01.03.002.04.a.i, 58.01.03.004.01, 58.01.03.005.14, and 58.01.03.012.01-03.*** To view the requirements of these Rules please reference the Individual/Subsurface Sewage Disposal Rules located at <http://www.deq.idaho.gov/water-quality/wastewater/septic-systems.aspx>.

Please contact your O&M Entity to schedule your required annual maintenance and testing of effluent quality.

O&M Entity:

Entity Contact Name

Entity Business Name

Entity Address

Phone Number

Your O&M Entity should report the status of the completion and compliance of these activities on [insert voluntary compliance date]. Your cooperation in meeting the requirements of your septic permit is appreciated.

Sincerely,

[Regulator Name]

[Regulator Title]

c: [O&M Entity]  
[County Prosecuting Attorney]

enclosure (septic permit and member agreement)