



Indiana Department of Environmental Management

We Protect Hoosiers and Our Environment

100 N. Senate Avenue • Indianapolis, IN 46204

(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Eric J. Holcomb
Governor

Brian C. Rockensuess
Commissioner

August 22, 2024

Mr. & Mrs. Jay & Karen Okayama
Mcdonald's Restaurant
P.O. Box 606
Mishawaka, IN 46546

Dear Mr. & Mrs. Okayama :

Re: Inspection Summary Letter
Mcdonald's Restaurant
PWSID# IN2710921
Granger, St. Joseph County

On **Thursday, August 22, 2024**, an IDEM Office of Water Quality representative conducted an inspection of Mcdonald's Restaurant, located in Granger, Indiana pursuant to IC 13-14-2-2. For your information, and in accordance with IC 13-14-5, an inspection summary is provided below:

Type of Inspection: Sanitary Survey Inspection
Primary Inspector: Kali Young: or (574) 229-7502

Results of Inspection: **IDEM discovered deficiencies that require a submittal from you and/or a follow-up inspection by IDEM.**

Within thirty (30) days of receipt of this letter, a written detailed explanation documenting compliance with each of the requirements noted on the attached survey must be submitted to this office. Failure to respond adequately to this letter may result in further action. Please respond to the primary inspector listed above by email or at the address on the letterhead.

Sincerely,

April Sims
Compliance & Technical Assistance
Drinking Water Branch
Office of Water Quality
ASims@idem.IN.gov
(317) 234-7453

cc: St. Joseph County Health Department
Kali Young, IDEM Field Inspector
File

Summary of Deficiencies Identified

Mcdonalds Restaurant - IN2710921

- 1 A **Minor** deficiency was identified regarding: **Cross connection control devices are not properly installed, tested, or inspection**

The inspector noted: "Deficiency - 327 IAC 8-10 The RPZ backflow preventer on the irrigation line does not have a hang tag with the most recent date of testing. The system is to have the unit tested on an annual basis and submit a photo of the hang tag to IDEM."



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Public Water System Sanitary Survey Report

PWS ID: IN2710921 PWS Name: MCDONALDS RESTAURANT

Source Type: GW System Type: NC Population: 982

County: ST. JOSEPH City: GRANGER

Water System Class:	Service Connections
	1

Points of Contact

Name (Job Title)	POC Type	Address	Phone	Email
OKAYAMA, JAY AND KAREN	AC FC SA	P.O. Box 606 MISHAWAKA 46546	269-240-7362	
WILTROUT, JOHN	OP	61540 Greentree Drive SOUTH BEND 46614	574-904-4074	JPSJTrout@sbcglobal.net
PHYSICAL ADDRESS, IN2710921	PL	12880 State Road 23 GRANGER 46530	574-271-1800	
OKAYAMA, KAREN	EC	P.O. Box 606 MISHAWAKA 46546	269-240-7362	jnkcomcd@comcast.net
OKAYAMA, JAY	OW	71186 Covington Bluff Court NILES 49120	269-240-7360	

Active Water System Facilities

Active WS Facilities Type Name	WS Facility ID	Active Sample Point Name
DISTRIBUTION SYSTEM	DS001	SP002,SP003,SP001,SP004
STORAGE TANK	ST001	
WELL #1	WL001	GW001

Treatment Processes

Active Treatment Plant Name	Objective Name	Process Name
TREATMENT PLANT	SOFTENING	ION EXCHANGE

Sources

Source	Pump Capacity	Depth		Date
WL-WELL #1		Bottom Depth MSR	Diameter	
		0	0	

Finished Water Storage

Type	Comments	Construction Material	Capacity		
Bladder		Steel	NAME	VALUE	VALUE_ CODE
			APCD	740.000	GAL
			APCD	740.000	GAL
			EFTV	740.000	GAL


Unresolved Deficiencies


CODE (NAME)	Visit Date	Identified Date	WSF	Category	Severity
DSDE	8/22/2024	9/9/2014		DS	MIN
SWDE	8/22/2024	9/9/2014		SO	MIN
DS09	8/22/2024	8/30/2019	DISTRIBUTION SYSTEM	DS	MIN
SO08	8/22/2024	8/30/2019	WELL #1	SO	REC

Sanitary Survey Report

Sources

WELL #1


- 1 **Is the source(s) sufficient in quantity?** 


- 2 **Is the source(s) adequate in quality for the primary drinking water standards?** 


If not, does the have adequate treatment installed?


Yes


No


- 3 **Is the top of the well protected so that foreign matter or surface water cannot enter the well?** 


- 4 **Is the grouting or concrete pad surrounding the casing at the well head free from cracks or chips and does it seal tightly to the casing?** 





- 5 **Does the casing extend at least 18 inches above finished grade or at least 36 inches above the regulatory flood elevation?** 

- 9 **Is the site protected against flooding?** 

- 10 **Is the well vent screened and properly constructed?** 



- 11 **Are the pressure and check valves blow off valves and other well system appurtenances maintained and operating properly?** 

- 12 **Does the system own or control the sanitary setback area?** 

- | | | |
|----|--|---|
| 13 | System has no new potential sources of contamination within the sanitary setback area relevant to this system since previous survey? |  |
| 15 | Is there proper grading around the casing to divert surface water? |  |
| 16 | Is there an adequate raw water sample tap for each source? |  |
| 17 | Are there measures put into place to prevent unauthorized access to intakes or wells? |  |



Distribution

DISTRIBUTION SYSTEM

- | | | |
|---|---|--|
| 1 | Are pressures and flows adequate throughout the system under all conditions of flow? (excluding maintenance, system failures, and fireflow) |  |
| 8 | <p>Is the installation, testing, and inspection of cross connection control devices conducted in accordance to 327 IAC 8-10?</p> <p>Deficiency - 327 IAC 8-10
The RPZ backflow preventer on the irrigation line does not have a hang tag with the most recent date of testing. The system is to have the unit tested on an annual basis and submit a photo of the hang tag to IDEM.</p> <p>DS08 Cross connection control devices are not properly installed, tested, or inspection</p> | 

<div style="background-color: orange; padding: 2px; font-size: 0.8em; text-align: center;">MIN
Deficiency</div> |



- | | | |
|----|--|---|
| 9 | Was the distribution system free from uncontrolled cross connections and are backflow prevention devices installed at all appropriate locations? |  |
| 11 | Is the system free from issues with secondary drinking water standards? |  |







If so, are there customer complaints?

No


Yes

Finished Water Storage







STORAGE TANK

- | | | |
|---|--|---|
| 1 | Are storage reservoirs located above ground water level? |  |
| 2 | Are the storage reservoirs protected against flooding? |  |
| 4 | Are storage reservoirs secure? |  |
| 5 | Is the storage reservoir structurally sound? |  |
| 8 | Are all pipes, air vents, and related appurtenances appropriately constructed and located? |  |
| 9 | Is access restricted where necessary to prevent contamination? |  |

MR Data Verification

- | | | |
|---|---|---|
| 1 | Is the system free from any current monitoring and/or reporting violations? |  |
|---|---|---|

Management and Operation

- | | | |
|----|--|---|
| 2 | Are supplies and maintenance parts inventories adequate? |  |
| 3 | Is the financing and budget satisfactory? |  |
| 4 | Are sufficient operation and maintenance records being kept? |  |
| 6 | Are routine maintenance schedules established and adhered to? |  |
| 7 | Is there a current site sampling plan available and on file with IDEM? |  |
| 15 | Inspection completed on time? |  |

16 **Was the system free from additional issues?**



-End of Report-