



**Environmental  
Protection Agency**

John R. Kasich, Governor  
Mary Taylor, Lt. Governor  
Scott J. Nally, Director

July 6, 2011

**RE: 2010 ANNUAL REPORT  
AVON LAKE MUNICIPAL LANDFILL  
NOTICE OF VIOLATION**

**CERTIFIED MAIL**

Mr. Thomas E. Lescher  
Service Director  
City of Avon Lake  
750 Avon Belden Rd.  
Avon Lake, Ohio 44012

Dear Mr. Lescher:

The Ohio Environmental Protection Agency (Ohio EPA) has received the 2010 Annual Post-Closure Report for the closed Avon Lake Landfill located in Avon Lake, Lorain County. This document was received by the Northeast District Office (NEDO) on April 1, 2011. An addendum to the report was received on April 7, 2011.

The technical aspects of the 2010 Annual Post-Closure Report have been reviewed by Ohio EPA to determine compliance with Rule 3745-27-14(A)(6) of the Ohio Administrative Code (OAC). The following violation was noted during the review:

**OAC Rule 3745-27-14(A)(6)**: "Submitting a report to the appropriate Ohio EPA district office and approved health department and placing a copy into the operating record not later than the first day of April of each year, which contains the following:

(c) The most recent updated post-closure cost estimate adjusted for inflation and for any change in the post-closure cost estimate required by rule 3745-27-16 of the Administrative Code.

The owner/operator is not in compliance with this rule. Although financial assurance cost estimates for the facility were adjusted for inflation, the cost estimates were not increased from last year to reflect increases in post closure care costs for the three (3) additional ground water monitoring wells which were installed in April, 2010.

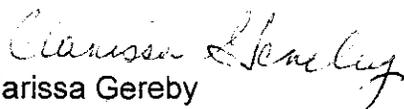
Within 45 days of the receipt of this correspondence, please provide an itemized, post-closure cost estimate which includes the three newly installed ground water monitoring wells. Estimates must be based on a third party conducting the post-closure care activities.

Mr. Thomas E. Lescher  
City of Avon Lake  
July 6, 2011  
Page 2

Nothing in this letter shall be construed to authorize any waiver from the requirements of any applicable state or federal laws or regulations. This letter shall not be interpreted to release the entity from responsibility under Chapters 3704, 3714, 3734, or 6111 of the Ohio Revised Code or under the Federal Clean Water Act or the Resource Conservation and Recovery Act, or the Comprehensive Environmental Response, Compensation, and Liability Act or from other applicable requirements for remedying conditions resulting from any release of contaminants to the environment.

If you have any questions regarding this review, please do not hesitate to call me at (330) 963-1224, or e-mail me at "clarissa.gereby@epa.state.oh.us."

Sincerely,



Clarissa Gereby  
Environmental Specialist  
Division of Materials and Waste Management

CG/cl

cc: Fanny Haritos, DMWM, CO  
Fleming Mosely, Lorain City Health Department  
File:[Kurko/LAND/AVON LAKE LF/ANN/47]  
Project # 3887

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PS Form 3800, August 2006 See Reverse for Instructions

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<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <b>D PHALOS</b></p> <p>C. Date of Delivery  <b>7-7-11</b></p>
<p>1. Article Addressed to:</p> <p><b>Mr. Thomas E. Lescher, Serv. Dir.</b>  <b>City of Avon Lake</b>  <b>750 Avon Belden Rd.</b>  <b>Avon Lake, Ohio 44012</b></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No      If YES, enter delivery address below:</p> <p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number        (Transfer from service label) <b>701010600000008998380. Hereby 7-7-11</b></p>	