



State of Ohio Environmental Protection Agency

Northeast District Office

2110 East Aurora Rd.
Twinsburg, Ohio 44087

TELE: (330) 963-1200 FAX: (330) 487-0769
www.epa.state.oh.us

Ted Strickland, Governor
Lee Fisher, Lieutenant Governor
Chris Korleski, Director

February 22, 2010

CERTIFIED MAIL

Lisa D. Moyer
Lisa D. Johnson
51 S. Forest Street
Youngstown, OH 44506

Ronald Eiselstein
1526 5th Avenue
Youngstown, OH 44504

Ronald Eiselstein
3210 Southern Blvd., Box 65
Youngstown, OH 44507

Ronald Eiselstein
43 E. Earle Ave.
Youngstown, OH 44507

William Downie
1530 5th Avenue
Youngstown, OH 44504

William Downie
3210 Southern Blvd.
Youngstown, OH 44507

William Downie
417 W. Ravenwood Ave.
Youngstown, OH 44511

RE: 726 Farnbauer Ct., Lot 4812, Parcel #53-032-0-189.00-0 - Notice of Violation (NOV)

Dear Ms. Moyer, Ms. Johnson, Mr. Eiselstein and Mr. Downie:

On December 29, 2009, the Ohio Environmental Protection Agency (Ohio EPA) Division of Solid and Infectious Waste Management (DSIWM) inspected the property at 726 Farnbauer Ct. (Lot 4812, Parcel #53-032-0-189.00-0), Youngstown, OH, and observed a large accumulation of scrap tires on the property. Volume 2740, page 333 of the property deed recorded in Mahoning County and the Mahoning County Auditor's office identifies you as the owner of this property.

The storage, transportation and disposal of scrap tires are regulated within the State of Ohio. Scrap tires located on this property are subject to the requirements contained in Ohio Administrative Code (OAC) Rule 3745-27-60 and have been determined to be stored in violation of the following requirements:

Lisa D. Moyer
Lisa D. Johnson
Ronald Eiselstein
William Downie

1. **OAC Rule 3745-27-60(B)** which states in part, "*The storage of scrap tires in any amount outside or inside a trailer, vehicle, or building shall be deemed a nuisance, a hazard to public health or safety, or fire hazard unless the tires are stored in accordance with...*" the standards contained in OAC Rule 3745-27-60(B):
 - Scrap tires stored at the above referenced location are not stored in compliance with OAC Rule 3745-27-60(B), and are thus deemed a nuisance, a hazard to public health and safety, and a fire hazard. You must immediately take action to abate the nuisance, public health, safety and fire hazard by contracting with a registered scrap tire transporter to remove the tires to an appropriately registered or licensed scrap tire facility.
2. **Ohio Revised Code (ORC) Section 3734.03** which states in part, "*No person shall dispose of solid wastes by open burning or open dumping....*"
3. **OAC Rule 3745-27-05(C)** which states, in part, "*[n]o person shall conduct, permit or allow open dumping.*"

Solid Waste in the form of scrap tires are openly dumped on the above referenced property.

Please submit a written response within 15 days of your receipt of this letter, identifying what actions have been or are being taken to correct the above cited violations. Failure to properly remove the scrap tires will result in enforcement action being taken against you by this Agency.

Nothing in this letter shall be construed to authorize any waiver from any requirements of applicable state solid waste laws or regulations. This letter shall not be interpreted to release the owner or operator of the property or others from responsibility under ORC Chapters 3704., 3714., 3734. or 6111; under the Federal Clean Water Act, 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 or comments, please contact me at (330) 963-1103 or at joshua.adams@epa.ohio.gov.

Sincerely,


Joshua D. Adams
Environmental Specialist
Division of Solid and Infectious Waste Management

JDA:cl

cc: Bruce McCoy, DSIWM-CO
Robin Nichols, Legal
File: [Sowers/Tire/Youngstown/Gen/50]

#3109

7009 1680 0000 6381 3330

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here: *GA 2-23-10*

Sent to: *William Downie*
 Street, Apt. No., or PO Box No.: *1530 5th Ave.*
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>2-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p><i>William Downie</i> <i>1530 5th Avenue</i> <i>Youngstown, OH 44504</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label) <i>7009 1680 0000 6381 3330</i></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

MAILED FEB 24 2010

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Restricted Delivery Fee (Endorsement Required)	

Postmark:
 Here
 GA
 2-23-10

Total Postage

Sent To *Ronald Eiselstein*
 Street Apt. No. *1526 5th Ave.*
 City State Zip

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

 Ronald Eiselstein
 1526 5th Avenue
 Youngstown, OH 44504

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) C. Date of Delivery
 _____ *2-24*

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number:
 (Transfer from service label) *7009 1680 0000 6381 3316 9 (domestic 2-23-10)*

U.S. Postal Service™
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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark:
here

9A
2-23-10

Sent To Lisa D. Moyer
 Street, Apt. No.,
 or PO Box No. Lisa D. Johnson
 City, State, ZIP+4® 51 S. Forest St.

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lisa D. Moyer
 Lisa D. Johnson
 51 S. Forest Street
 Youngstown, OH 44506

FEB 23 2010

2. Article Number

(Transfer from service label)

7009 1680 0000 6381 3309 g. Adams 223-10

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Lisa Johnson Agent
 Addressee

B. Received by (Printed Name)

LISA JOHNSON

C. Date of Delivery

2-23

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes