



State of Ohio Environmental Protection Agency

**Northwest District Office**

347 North Dunbridge Road  
Bowling Green, OH 43402-9398

TELE: (419) 352-8461 FAX: (419) 352-8468  
www.epa.state.oh.us

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

Re: Richland County  
MedCentral Health Systems  
335 Glessner Avenue  
Mansfield, OH 44903  
Premise # 03.70.01.0004  
**Notice of Violation/High Priority Facility**

October 5, 2007

**CERTIFIED MAIL**

Mr. Barry J. Mishey  
MedCentral Health Systems  
335 Glessner Avenue  
Mansfield, Ohio 44903

Dear Mr. Mishey:

This letter shall serve as notification of a discovered violation of the above referenced facility. In the process of reviewing the requirements associated with the stack test scheduled for October 16th it was found that MedCentral Health Systems (MedCentral) has failed to meet the following standards:

1. 40 CFR 62.14451(a) - Shall conduct an initial performance test for opacity using the procedures outlined in §62.14452.
2. 40 CFR 62.14451(b)(1) - Determine compliance with the opacity limit by conducting an annual performance test (no more than 12 months following the previous performance test) using the applicable procedures and test methods listed in §62.14452.
3. OAC Rule 3745-75-06(F)(1) - States that an initial compliance test shall be done for opacity restrictions and shall be done annually, thereafter.

The facility has 21 days to respond in writing to Ohio EPA with a compliance plan to remedy the observed situation and prevent this, or any similar such situation, from occurring in the future. The submission of information to respond to this letter does not constitute a waiver of Ohio EPA's authority to seek civil penalties pursuant to ORC section 3704.06. The Ohio EPA will make the decision on whether to pursue or decline to pursue such penalties regarding this matter at a later date.

Mr. Barry J. Mishey  
October 5, 2007  
Page 2

If the company has any questions and/or comments concerning this letter, please contact me at the above address or call (419) 373-3137.

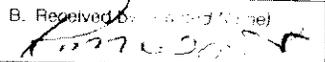
Sincerely,



Thomas C. Cikotte  
Division of Air Pollution Control

/lr

pc: Don Waltermeyer, DAPC-NWDO  
Lisa Holscher, US EPA Region 5  
Samir Araj, DAPC-NWDO  
Tom Kalman, DAPC-CO  
Thomas C. Cikotte, DAPC-NWDO  
Andrea Odendahl, DAPC-NWDO  
DAPC-NWDO file

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>■ Write name and address on the reverse of this envelope and return it to you.</li><li>■ Write name and address of the mailpiece, including zip code, on the front.</li></ul>	A. Signature <input type="checkbox"/> Agent  <input type="checkbox"/> B. Received by (Print Name) <input type="checkbox"/>  C. Date 10/9/07
1. Address MIL LARK MEDICAL CENTER 335 Glassard Avenue Mansfield, Ohio 44903	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No 2. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 3. Restricted Delivery (extra fee) <input type="checkbox"/>
7006 3450 0001 0667 0027	