



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
75 Erieview Plaza, Second Floor
Cleveland, Ohio 44114-1839
216/664-2297 • Fax: 216/420-8047
www.clevelandhealth.org

SERVING OHIO EPA AS AGENCY 13
FOR CUYAHOGA COUNTY

CERTIFIED MAIL 7010 1870 0000 6591 4773
RETURN RECEIPT REQUESTED

April 24, 2012

Eric Witherspoon
Arick's Environmental
19718 Kings Highway
Warrensville Heights, Ohio 44122

PROJECT ID: CL 12 586
NOTICE OF VIOLATION: NESHAP Violations

Dear Mr. Witherspoon:

On April 2, 2012, the Cleveland Division of Air Quality (CDAQ) inspected the asbestos removal/demolition project located at 21501 Emery Road in Cleveland. This letter serves as notification that you are operating sources in violation of the following applicable air statutes, air regulations, or air permit conditions.

Asbestos removal projects are subject to compliance with the Asbestos National Emission Standard for Hazardous Air Pollutants (NESHAP), Title 40 Code of Federal Regulations (CFR) Part 61 Subpart M, the Ohio Administrative Code (OAC) Rule 3745-20, and the Ohio Revised Code (ORC) Chapter 3704.05(G).

The demolition/abatement project at 21501 Emery Road violated 40 CFR Part 61.145(b)(3)(i), and OAC Rule 3745-20-03(A)(3)(a) for failing to provide CDAQ with an Ohio Environmental Protection Agency Notification of Demolition and Renovation (Ohio EPA Notification) at least ten (10) working days before asbestos stripping, or demolition activity. Arick's Environmental began performing asbestos abatement on March 26, 2012, and demolition on April 2, 2012. CDAQ received an Ohio EPA Notification on April 3, 2012.

The asbestos removal project at 21501 Emery Road violated 40 CFR Part 61.145(c)(6)(i) and OAC Rule 3745-20-04(A)(6)(a) for failing to adequately wet all Regulated Asbestos Containing Material (RACM) exposed during removal operations.

Unless you undertake some type of corrective action with respect to the above noted violations, you will remain in non-compliance.



CDAQ requests that Arick's Environmental:

1. Submit a copy of the waste shipment record for the asbestos material taken to Minerva Landfill.
2. Submit a corrective action plan outlining what steps will be taken in the future to avoid the above noted violations.

Please, submit all of the above within fourteen (14) days of receipt of this letter to the following enforcement representative:

Bryan Sokolowski
Cleveland Division of Air Quality
75 Erieview Plaza 2nd Floor
Cleveland, Ohio 44114-1839

If there is insufficient time to correct the alleged violations within this timeframe, a written response must be received within fourteen (14) days of receipt of this letter that includes a timeline for correcting the alleged violations.

Violations of Ohio air pollution laws and /or permit terms and conditions are subject to the penalties stipulated in Ohio Revised Code Section 3704.99(A), which allows fines of not more than twenty-five thousand dollars or imprisonment for not more than one year, or both, for each violation.

CDAQ issues this letter with Ohio EPA's concurrence. The failure to mention any specific violation does not excuse any violations of local, state and federal laws or regulations regarding air pollution control. Violations of air pollution control laws may be pursued in local court or referred to Ohio EPA or U.S. EPA for further enforcement action. Should you have any questions, please call Bryan Sokolowski at (216) 420-7663. All correspondence with CDAQ must include the Ohio EPA project identification number: CL 12 586.

Sincerely,

Valencia White
Chief of Enforcement, CDAQ

VW/BS LK

cc: David Ellsworth, Thistledown, Inc.
George P. Baker, CDAQ
Michael J. Krzywicki, CDAQ
John Paulian, Ohio EPA Central Office
William MacDowell, U.S. EPA Region V
Facility File and L:\Data\Facilities\+ Programs\Asbestos\Notification Reviews\ANTS 2012\CL 12
500 - 599 (ANTS)\CL 12 - 586\2012-4-2 NOV.docx

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:

Eric Witherspoon
Arick's Environmental
19718 Kings Highway
Warrensville Heights, Ohio 44122

2. Article Number

7010 1870 0000 6591 4773

CL 12-586

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

Eric Witherspoon

C. Signature

X *Erica Witherspoon*

Agent
 Addressee

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

Environmental Management Services

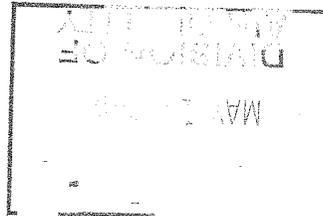
M.B.E

19718 Kings Highway, Warrensville Heights, OH 44122
Office: (216) 751-2118 Fax: (216) 767-1460 Cell: (216) 469-2427
AemsInc19718@aol.com

May 11, 2012

Arick's Environmental Management Services, INC.
19718 Kings Highway
Warrensville Hts., Ohio 44122

RE: Cleveland Division of Air Quality
75 Erieview Plaza
2nd Floor
Cleveland, Ohio 44114



Project ID: CL 12 586

RE: 21501 Emery Rd.
Warrensville Hts., Ohio

In response to the letter received on the 26th day of April 2012 in regards to the property located on 21501 Emery Rd. addressing violations received for the Asbestos Removal Project.

Arick's Environmental Management Services, Inc. performed Asbestos Abatement at the above location. According to the Cleveland Division of Air Quality (CDAQ) they stated that they never received a 10 day notification for the project located on 21501 Emery Rd. At that time I checked with my field supervisor and my office administrator to locate the copy of the notification. At that point I also checked with the Ohio Department of Health, and they advised me that they received it and posted to their website. During the same time we also had submitted 10-day notifications for other projects that were supposed to start around the same time. It was brought to my attention that all notifications were mailed at the same time in the same envelope to ensure that they would all be received at the same time. The Cleveland Division of Air Quality received the notification from the Cuyahoga County Land Bank, However they stated that they never received the notification for 21501 Emery Rd. Due to the severity of this matter it was determined that going forward all high profile jobs will be hand deliver or sent by certified mail to ensure their arrival. At the time of the inspection, we wet down all the material, sealed up boxes and stopped work immediately and re- submitted another 10 day notification.

Environmental Management Services

M.B.E

19718 Kings Highway, Warrensville Heights, OH 44122

Office: (216) 751-2118 Fax: (216) 767-1460 Cell: (216) 469-2427

AemsInc19718@aol.com

Work Plan:

We were contracted to remove 82,000sqft of roofing material, floor tiles, windows and transite ceilings and to demolish 11-horse barns. All workers on this project are licensed and certified with the state of Ohio. All roofing material will be adequately wet, removed and placed into a roll-off box that has been prepped with layers of reinforced with 6 mil poly, all material will be disposed of at Minerva Landfill. We will use the appropriate wet method will taking down the barns. We will cut and lift the roofing material, and all materials will be placed into a leak tight containers. Any material that was on the ground or mixed up in debris piles will be separated and sent to Minerva Landfill. All windows and window glazing will be wrapped in 6mil poly, all floor tiles and transite ceiling will be double bagged and placed into a leak tight container. During the time of inspection, building 7 and 8 had already been started. All material had been adequately wet down and sent to Minerva Landfill.

Enclosed are the dump manifest and pictures of the horse barns.



Eric E. Witherspoon, President

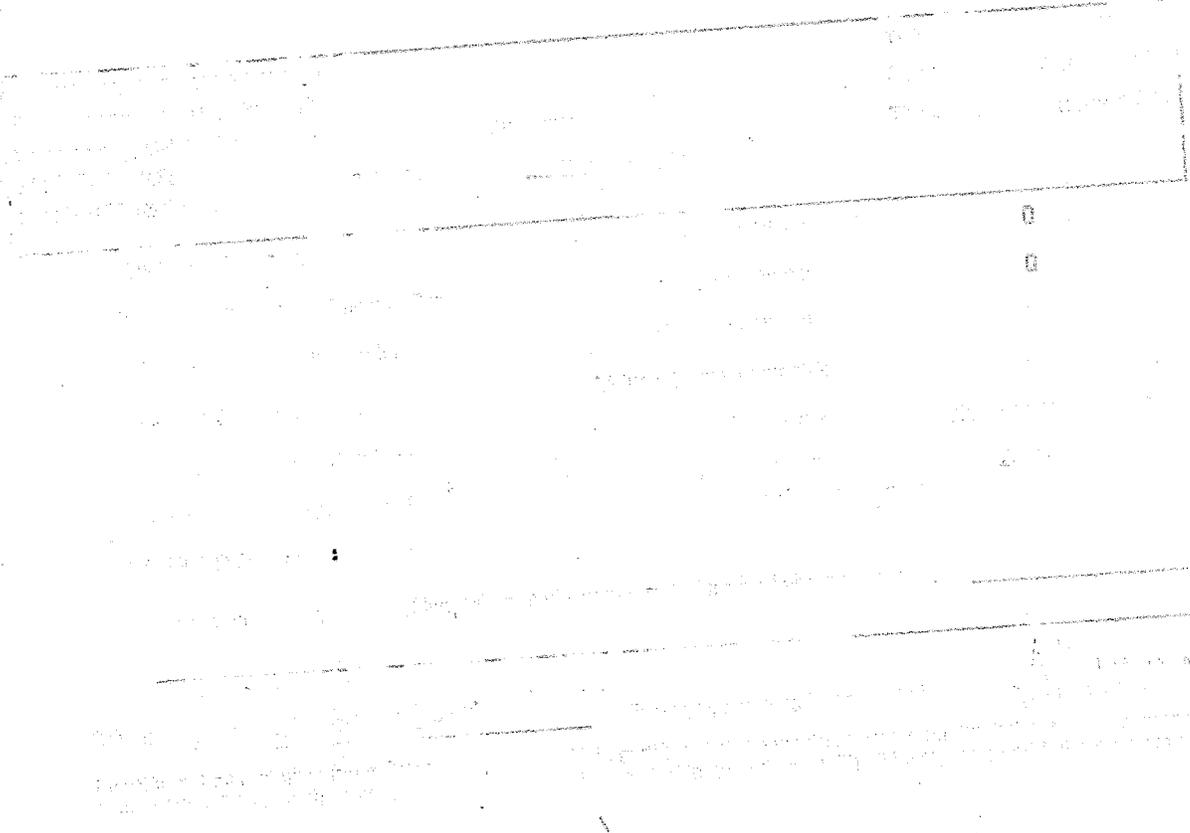


highway to acceptable international and governmental regulations.

TRANSPORTER	Printed typed name & title ERIC L WITHERSPOON		Signature 	Month/Day/Year 4-2-12
	10.A Name of Transporter-1 (Verifies Receipt of above described materials) JMW TRACKING		Printed or Typed Name & Title Faw G. DAVIS	Date: 4-2-12
	Address CANTON OH	Phone 330-484-2428	Fax	Signature
10.B Name of Transporter-2 (Verifies Receipt of above described materials) 11		Printed or Typed Name & Title ROSS CRANK, DRIVER	Date: 4-11-12	
Address		Phone	Fax	Signature

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)
IF NO If Yes (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: Driver Name
SKIP

DISCPLY	13. Waste Disposal Site Owner or Auth. Agent: Certification of Receipt of Asbestos Materials except item 12 notes.	12. Waste Facility Discrepancy Indication Space	
	TICKET # 256924 Certification of Receipt of asbestos materials covered by this manifest except as noted in item 12. Printed typed name - WDS Facility Sharon Dunne	Signature 	Month/Day/Year 4/11/12



contents of this consignment are fully and accurately described by
and are classified, packed, marked, and labeled, and are in all respects in proper condition for transportation by
highway to acceptable international and governmental regulations.

Printed/typed name & title

ERIC H WITHERSPOON

Signature

Month/ Day / Year

4-2-12

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)

JMW

Address

5124 5th St Canton OH
44706

Phone

330 484
2428

Fax

Printed or Typed Name & Title

Dustin Reynolds

Date:

PRUR 4-3-12

Signature

10.B Name of Transporter-2 (Verifies Receipt of above described materials)

Address

Phone

Fax

Printed or Typed Name & Title

Date:

Signature

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)

IF NO If Yes (LIST & Identify Transporter -10.A: Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: Driver Name

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

12. Waste Facility Discrepancy Indication Space

Certification of Receipt of Asbestos Materials except Item 12 notes.

TICKET # 257048

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.

Printed/typed name - WDS Facility

Sharon Dunne

Signature

Month/ Day / Year

4/13/12

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proper snipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transportation by highway to acceptable international and governmental regulations.

Printed/typed name & title

Erie L Witherspoon

Signature

[Signature]

Month/Day/Year

4/2/12

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)

Jmw
Address *512 45th St Canton OH*
44706

Phone *330484-2428* Fax

Printed or Typed Name & Title

Dustin Reynolds

Date: *4-2-12*

Signature

[Signature]

10.B Name of Transporter-2 (Verifies Receipt of above described materials)

Jmw
Address *512 45th St Canton OH*
44706

Phone *330484-2428* Fax

Printed or Typed Name & Title

T. J. [Signature]

Date: *04/07/12*

Signature

[Signature]

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)

IF NO If Yes (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: **Driver Name**

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

Certification of Receipt of Asbestos Materials except item 12 notes.

TICKET # *250751*

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.

Printed/typed name - WDS/Facility

Kristina [Signature]

12. Waste Facility Discrepancy Indication Space

Signature

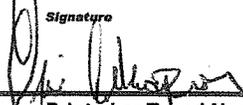
[Signature]

Month/Day/Year

4-7-12

proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transportation by highway to acceptable international and governmental regulations.

Printed/typed name & title
 ERIC WATSON

Signature


Month/Day/Year
 4/19/12

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)

Address: JMW
 CANTON OH
 Phone: 330484
 2428
 Fax:

Printed or Typed Name & Title
 Faw Davis
 DRIVER
 Date: 4-20-12

Signature


10.B Name of Transporter-2 (Verifies Receipt of above described materials)

Address: _____
 Phone: _____
 Fax: _____

Printed or Typed Name & Title

 Date: _____
 Signature

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)

IF NO If Yes (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: Driver Name

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

12. Waste Facility Discrepancy Indication Space

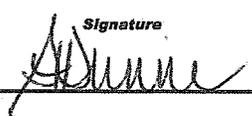
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Certification of Receipt of Asbestos Materials except item 12 notes.

TICKET # 257300

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.

Printed/typed name - WDS Facility
 Sharon Dunne

Signature


Month/Day/Year
 4/20/12

proper shipping name and are class, size, weight, packed, marked, and labeled in accordance with applicable highway to acceptable international and governmental regulations.

Printed typed name & title: **ERIC L WITHERSPOON** Signature: *[Signature]* Month/Day/Year: **4-2-12**

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)
 Address: **JMW**
512 45th Center H
44706
 Phone: **330 484 2428**
 Fax: **330 484 2428**

Printed or Typed Name & Title: **DUSTIN REYNOLDS** Date: **4-13-12**
 Signature: *[Signature]*

10.B Name of Transporter-2 (Verifies Receipt of above described materials)
 Address: **512 45th st Center**
OR 44706
 Phone: **330 484-2428**
 Fax: **330 484-2428**

Printed or Typed Name & Title: **BOB JACKSON** Date: **4-17-12**
 Signature: *[Signature]*

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)
IF YES (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: **Driver Name**

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

12. Waste Facility Discrepancy Indication Space

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Certification of Receipt of Asbestos Materials except item 12 notes.
TICKET # 257135

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.
 Printed typed name - WDS Facility: **Kristina Lofatis**

Signature: *[Signature]* Month/Day/Year: **4-17-12**

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... ..

proper shipping name and are in accordance with applicable highway to acceptable international and governmental regulations.

Printed typed name & title

Signature

Month/Day/Year

ERIC Witherspoon

Eric Witherspoon

4/20/12

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)

Printed or Typed Name & Title

Date:

Jmw
Address Phone Fax

Randy
Signature *Randy*
Date: 4-20-12

10.B Name of Transporter-2 (Verifies Receipt of above described materials)

Printed or Typed Name & Title

Date:

Address Phone Fax

Signature

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)

NO If Yes (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: Driver Name

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

12. Waste Facility Discrepancy Indication Space

Certification of Receipt of Asbestos Materials except item 12 notes.

TICKET # 257324

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.

Yolanele Don
Printed typed name - WDS Facility

Yolanele
Signature

4/20/12
Month/Day/Year

Arick #

highway to acceptable international and governmental regulations.

Printed/typed name & title: **Eric L Witherspoon** Signature: *[Signature]* Month/Day/Year: **4-2-12**

TRANSPORTER

10.A Name of Transporter-1 (Verifies Receipt of above described materials)
 Name: **JMW Trucking** Printed or Typed Name & Title: **Faw Davis** Date: **4-18-12**
 Address: **Canton, OH** Phone: **330 484 2428** Fax: Signature: *[Signature]*

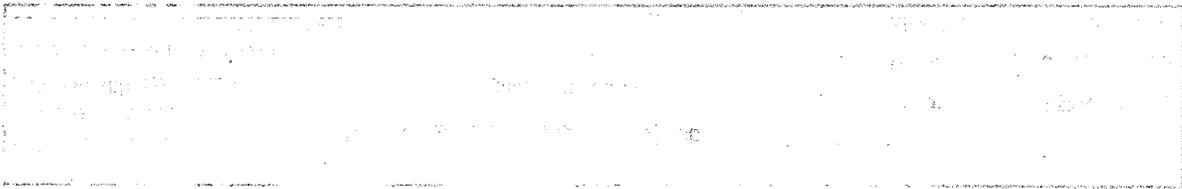
10.B Name of Transporter-2 (Verifies Receipt of above described materials)
 Name: **JMW Trucking** Printed or Typed Name & Title: **Allen Krishna** Date: **4-19-12**
 Address: **ST. WEST** Phone: **330-484-2428** Fax: Signature: *[Signature]*
 Driver Name: **Driver**

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials **ADDED** or **REMOVED** during transit? (EXCEPT Correcting Material Weight at loading location.)
IF NO If Yes (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: **Driver Name**
SKIP

13. Waste Disposal Site Owner or Auth. Agent: Certification of Receipt of Asbestos Materials except item 12 notes.
12. Waste Facility Discrepancy Indication Space

DISPENSATORY

TICKET # **257264**
 Certification of receipt of asbestos materials covered by this manifest except as noted in Item 12.
 Printed/typed name - WDS Facility: **Knizmalakis** Signature: *[Signature]* Month/Day/Year: **4-19-12**



highway to acceptable international and governmental regulations.

Printed/typed name & title

ERIC WITHERSPOON

Signature

Month/Day/Year

Eric Witherspoon 4/20/12

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)

JMW

Printed or Typed Name & Title

Date:

Fawn Davis 4-20-12

Address

Phone

Fax

330 484

2428

CANTON OHIO

Signature

Fawn Davis

10.B Name of Transporter-2 (Verifies Receipt of above described materials)

Printed or Typed Name & Title

Date:

Address

Phone

Fax

Signature

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)

IF NO If Yes (LIST & Identify Transporter -10.A: Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: Driver Name

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

Certification of Receipt of Asbestos Materials except item 12 notes.

TICKET #

257328

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.

Printed/typed name - WDS Facility

Yolande Dem

Signature

Month/Day/Year

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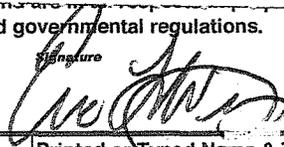
4/20/12

proper shipping name and are classified, packed, marked, and labeled, and are transported on a highway to acceptable international and governmental regulations.

Printed/typed name & title

Eric L Witherspoon

Signature



Month/Day/Year

4/23/12

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)

Jmw
Address Phone Fax

Printed or Typed Name & Title

Ranchy

Date:

4-23-12

Signature



10.B Name of Transporter-2 (Verifies Receipt of above described materials)

Address Phone Fax

Printed or Typed Name & Title

Date:

Signature

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)

IF NO If Yes (LIST & Identify Transporter -10.A: Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: Driver Name

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

Certification of Receipt of Asbestos Materials except item 12 notes.

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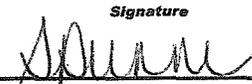
TICKET # 257415

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.

Printed/typed name - WDS Facility

Sharon Dunne

Signature



Month/Day/Year

4/23/12

12. Waste Facility Discrepancy Indication Space

highway to acceptable international and governmental regulations.

Printed typed name & title: Eric L. Witherspoon

Signature: [Signature]

Month/Day/Year: 4-13-12

Yes

TRANSPORTER	10.A Name of Transporter-1 (Verifies Receipt of above described materials) Address: JMW Phone: 3304842428 Fax: CANTON OH		Printed or Typed Name & Title: Faw Davis Date: 4-20-12 Signature: [Signature] Date: 4-23-12
	10.B Name of Transporter-2 (Verifies Receipt of above described materials) Address: _____ Phone: _____ Fax: _____		Printed or Typed Name & Title: _____ Date: _____ Signature: _____
	11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.) If NO: _____ If YES (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: _____ Driver Name: _____ SKIP		

DISPOLSATLY	13. Waste Disposal Site Owner or Auth. Agent: Certification of Receipt of Asbestos Materials except item 12 notes. TICKET # 257407 Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12. Printed typed name - WDS Facility: Kristina [Signature]	12. Waste Facility Discrepancy Indication Space Signature: [Signature] Month/Day/Year: 4-23-12
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highway to acceptable international and governmental regulations.

Printed/typed name & title

Signature

Month/Day/Year

ERIC L. WITHERSPOON

4-23-12

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10.A Name of Transporter-1 (Verifies Receipt of above described materials)

Printed or typed Name & Title

Date:

Address

370-4842428
Phone Fax

BOB JACKSON

4-23-12

JMW Cantonoh

Bob Jackson
Signature

10.B Name of Transporter-2 (Verifies Receipt of above described materials)

Printed or Typed Name & Title

Date:

Address

Phone Fax

Signature

11. ALL TRANSPORTERS: ANY REJECTED OR NON-Listed materials ADDED or REMOVED during transit? (EXCEPT Correcting Material Weight at loading location.)

IF NO If Yes (LIST & Identify Transporter -10.A : Trans-1 or 10.B: Trans-2) Destination Facility for Rejected Materials: Driver Name

SKIP

13. Waste Disposal Site Owner or Auth. Agent:

12. Waste Facility Discrepancy Indication Space

Certification of Receipt of Asbestos Materials except item 12 notes.

TICKET # 257399

Certification of Receipt of asbestos materials covered by this manifest except as noted in Item 12.

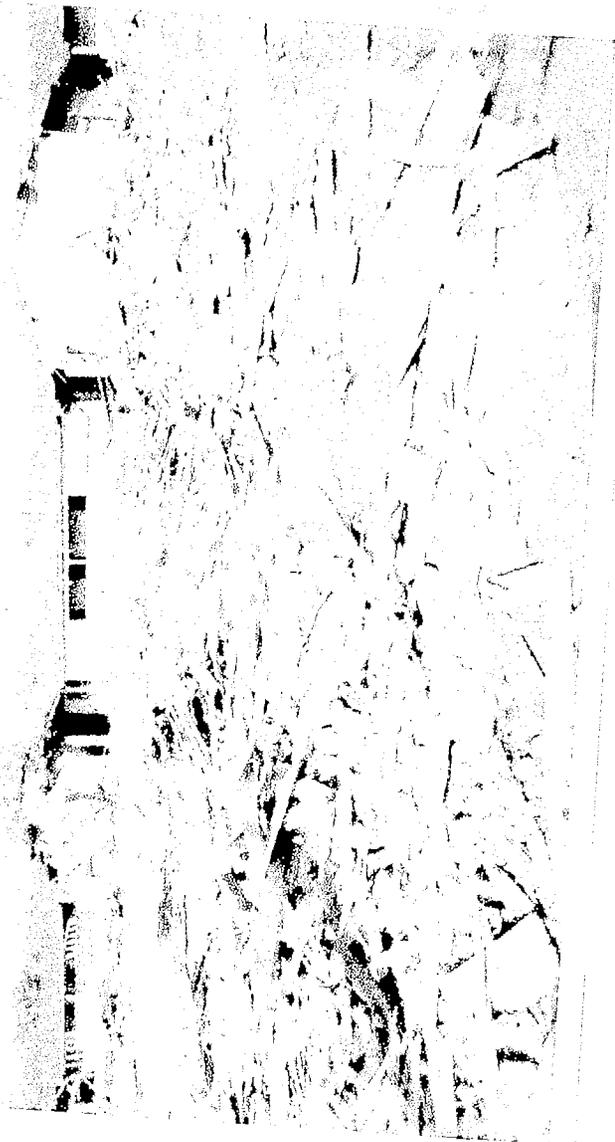
Printed/typed name - WDS Facility

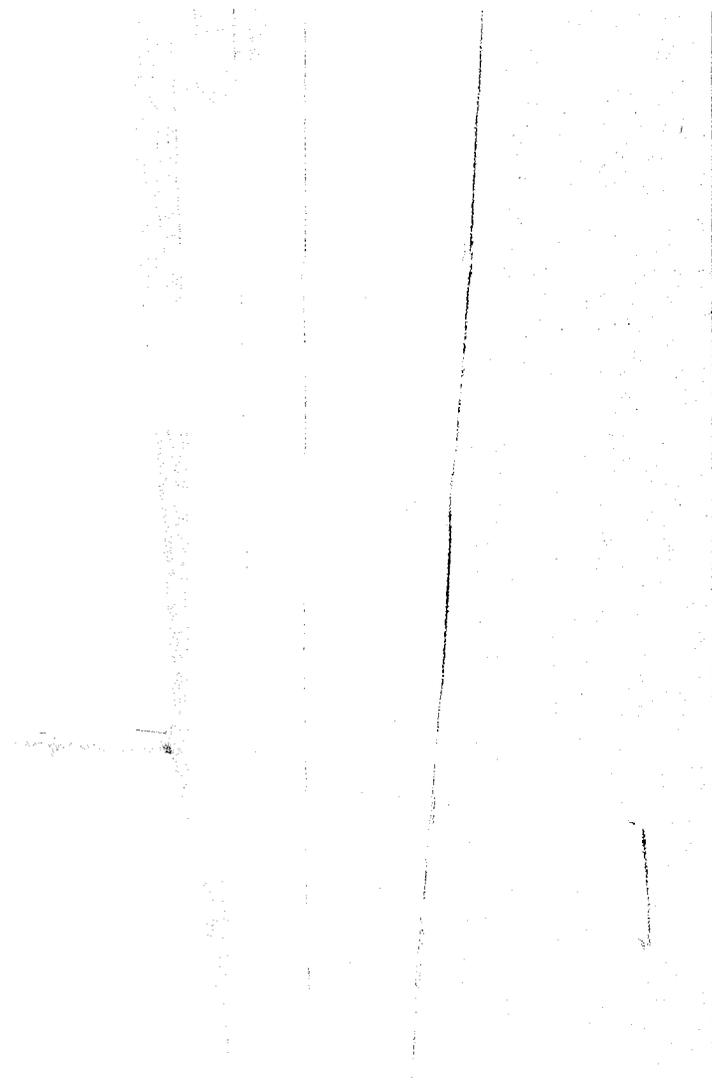
Signature

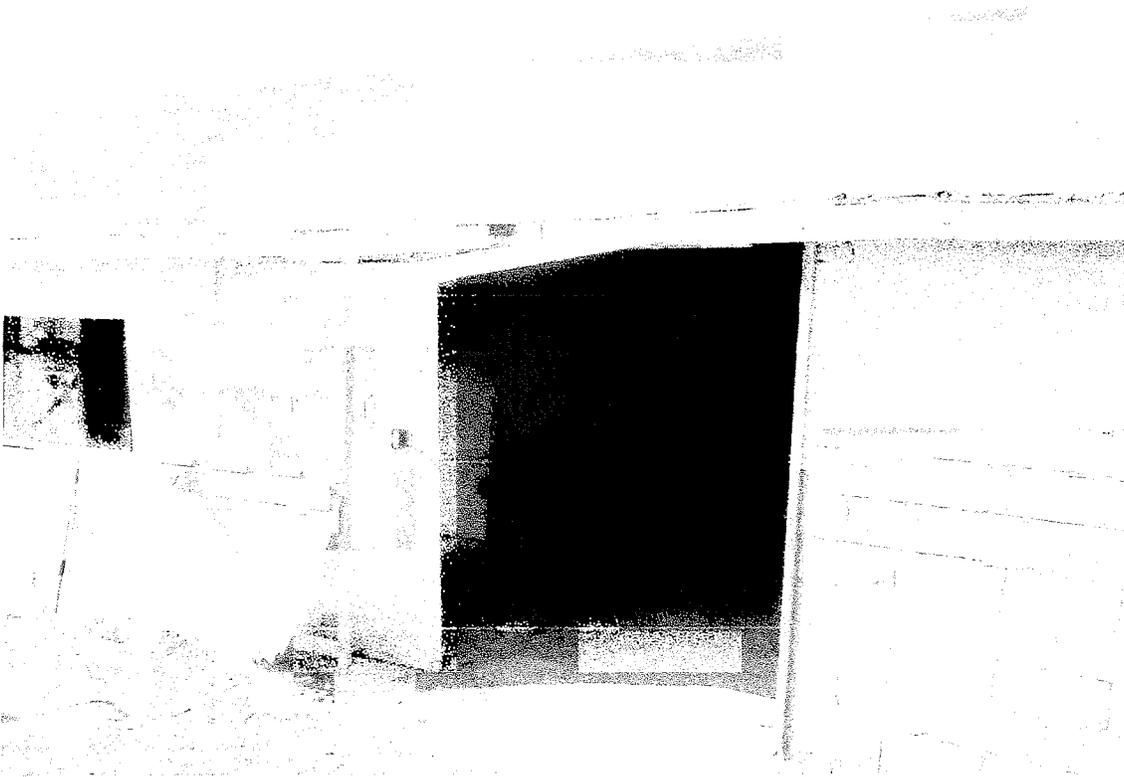
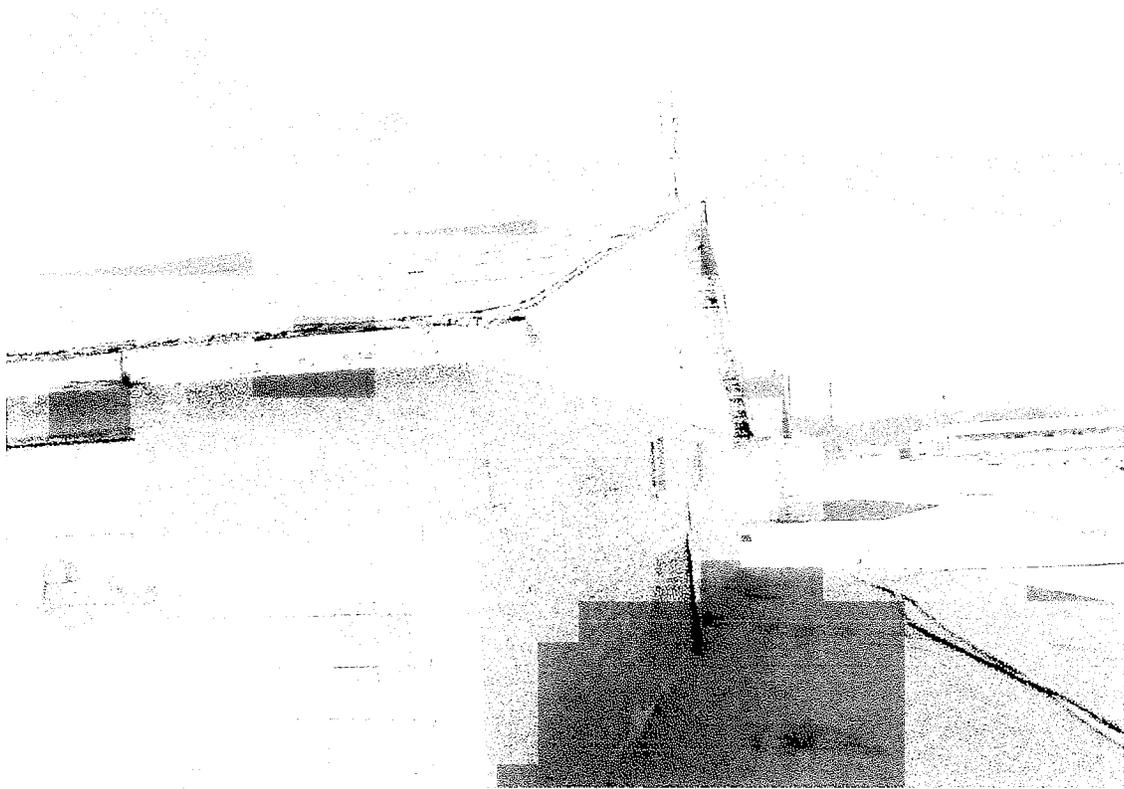
Month/Day/Year

Kristina Loftis

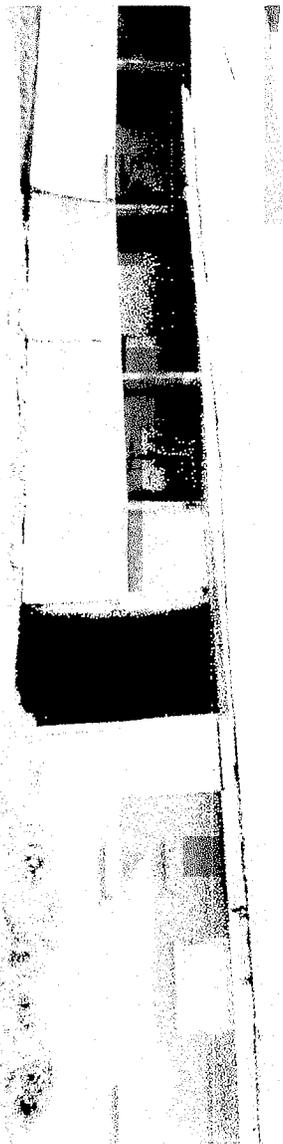
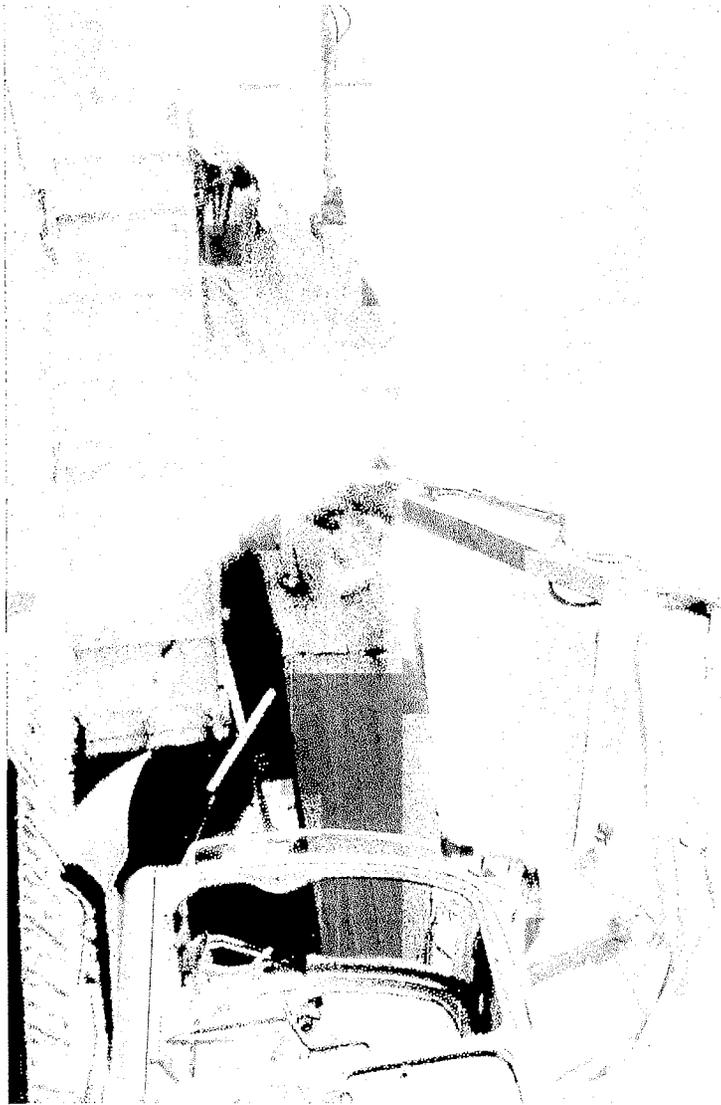
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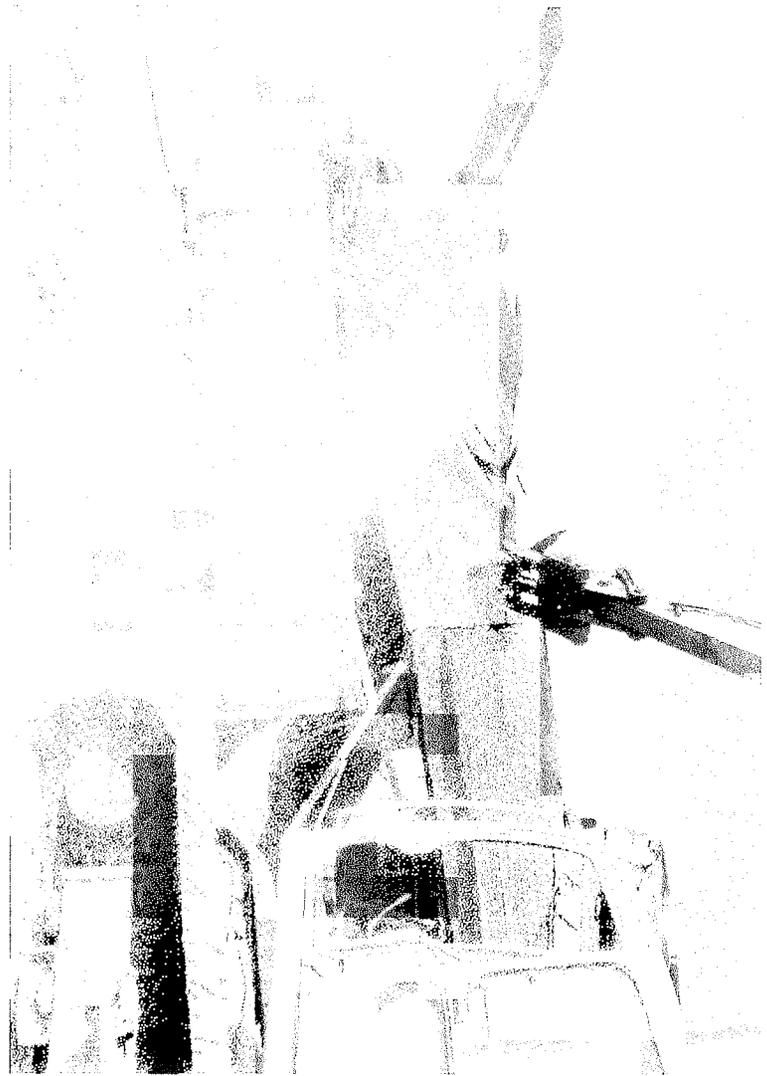














City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
75 Erievue Plaza, Second Floor
Cleveland, Ohio 44114-1839
216/664-2297 • Fax: 216/420-8047
www.clevelandhealth.org

**SERVING OHIO EPA AS AGENCY 13
FOR CUYAHOGA COUNTY**

**CERTIFIED MAIL 7010 1870 0000 6591 4803
RETURN RECEIPT REQUESTED**

May 21, 2012

Eric Witherspoon
Arick's Environmental Management Services, Inc.
19718 Kings Highway
Warrensville Heights, Ohio 44122

**FACILITY ID: CL 12 586
NOTICE OF VIOLATION FOLLOW-UP LETTER**

Dear Mr. Witherspoon:

On April 2, 2012, the Cleveland Division of Air Quality (CDAQ) inspected the asbestos removal/demolition project located at 21501 Emery Road in Cleveland.

On April 24, 2012, CDAQ issued Arick's Environmental Management Services, Inc. (AEMS) a Notice of Violation for failing to provide CDAQ with an Ohio Environmental Protection Agency Notification of Demolition and Renovation (Ohio EPA Notification) at least ten (10) working days before asbestos stripping, or demolition activity, and failing to adequately wet all Regulated Asbestos Containing Materials (RACM) exposed during removal operations. The Notice of Violation required AEMS to submit a copy of the waste shipment records for the asbestos material taken to Minerva Landfill and a corrective action plan outlining what steps will be taken in the future to avoid the above noted violations.

On May 15, 2012, CDAQ received a response letter from AEMS. The letter stated that AEMS thought an Ohio EPA Notification was submitted to CDAQ, and in the future they will either hand deliver or send the Ohio EPA Notification via certified mail. The letter also contained a copy of the waste shipment records for the asbestos material taken to Minerva Landfill.

The corrective action plan was received in a timely manner and appropriate steps were taken to bring the source into compliance. CDAQ has determined that no further enforcement action is warranted at this time, but reserves its right to take such action in the future if necessary.

CDAQ issues this letter with Ohio EPA's concurrence and does not excuse any violations of local, state and federal laws or regulations regarding air pollution control. Violations of air pollution control laws may be pursued in local court or referred to Ohio EPA or U.S. EPA for further enforcement action.



Should you have any questions, please call Bryan Sokolowski at (216) 420-7663. All correspondence with CDAQ must include the Ohio EPA project identification number: CL 12 586.

Sincerely,

A handwritten signature in cursive script that reads "Valencia White".

Valencia White
Chief of Enforcement, CDAQ

VW/BS LK

cc: John Paulian, Ohio EPA Central Office
William MacDowell, U.S. EPA Region V
Facility File and L:\Data\Facilities\+ Programs\Asbestos\Notification
Reviews\ANTS 2012\CL 12 500 - 599 (ANTS)\CL 12 - 586\2012-4-2 NEAR.docx

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. Received by, (Please Print Clearly) <i>ERIC WITHERSPOON</i> B. Date of Delivery</p> <p>C. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</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>Eric Witherspoon Arick's Environmental 19718 Kings Highway Warrensville Heights, OH 44122</i></p>	<p>3. Service Type</p> <p><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 () <i>7010 1870 0000 6591 4803</i></p>	<p><i>CL 12-586</i></p>