



**Environmental  
Protection Agency**

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

July 8, 2011

RE: SUMMIT COUNTY  
CITY OF TALLMADGE  
AHEPA 63- TALLMADGE SENIOR HOUSING  
CONSTRUCTION STORM WATER

Demetri Damaskos  
Ahepa National Housing Corp  
7202 North Shadeland Avenue Suite 100  
Indianapolis, IN 46250

Dear Mr. Damaskos:

On June 23, 2011, I, along with Dan Bogoevski of the Ohio EPA and Cindy Fink of the Summit Soil & Water Conservation District (SWCD), performed an inspection at the above-referenced site to determine compliance with the Ohio EPA General Storm Water National Pollutant Discharge Elimination System (NPDES) Permit for Construction Activities #3GC04547\*AG. Our records indicate that Ahepa National Housing Corp was granted coverage under the NPDES permit on July 15, 2009.

The estimated start date for this project is listed as August 1, 2009, but it appears that construction has not yet started on the project. Please provide me with an indication of your expected construction start date and a copy of the Storm Water Pollution Prevention Plan (SWP3) for the site. Prior to commencing construction activities at the site, please contact Summit SWCD to arrange a pre-construction meeting to discuss SWP3 implementation and the intended construction sequence.

If you have any questions regarding this matter, please contact me at your earliest convenience at (330) 963-1128.

Sincerely,

Michelle Hummel  
Assistant to the District Engineer  
Division of Surface Water

MH:bo

pc: Robert O'Bryan, MS4 Program Manager, City of Tallmadge  
David Kline, Mayor, City of Tallmadge  
Cindy Fink, Summit SWCD

ec: Phil Rhodes, DSW, NEDO

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>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)            KUNILE STEW</p> <p>C. Date of Delivery            5/12</p>
<p>1. Article Addressed to:</p> <p>DAVE KOLAR            CAMBRIDGE SERVICE COMPANY            130 W STREETSBORO ST SUITE 4            HUDSON OH 44236</p>	<p>D. Is delivery address different from return? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. 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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number 7007 2680 0002 2986 7404 (ROGERS 5/11/09)            (Transfer from service label)*</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Included)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To

Street, Apt. No.,  
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7007 2680 0002 2986 7404