

Air Pollution Control Division



Canton City Health Department

420 Market Avenue North • Canton, Ohio • 44702-1544
(330) 489-3385 • Fax: (330) 489-3335

APC Contractual Representative
Serving All of Stark County

Daniel J. Aleman
APCD Administrator

James M. Adams, MPA
Health Commissioner

CERTIFIED MAIL

Attorney Keynon D. Love
323 Court Ave NW
Canton, OH 44702

Re: INFORMATIONAL LETTER: Violation of Ohio Administrative Code 3745-20-02 (A).

Dear Mr. Love,

The Air Pollution Control Division of the Canton City Health Department is authorized to represent the Ohio EPA in matters relating to air issues in Stark County. Asbestos issues are covered by both federal regulation (the Asbestos NESHAP, 40 CFR 61 Subpart M) and the Ohio Administrative Code, 3745-20.

This letter is the result of the ongoing renovation of a building at 1408 Rowland Ave NE. Per our discussion on September 22, 2008, this building was formerly used for commercial purposes.

This structure meets the regulatory definition of a facility per OAC 3745-20-01 (B) (18). As such, prior to any renovation or demolition, the owner or operator is required to conduct a thorough asbestos inspection by a ODH certified Asbestos Hazard Evaluation Specialist. The failure of Love Properties Inc. to accomplish this put Love Properties Inc., in violation of 40 CFR 61.145 (a) and OAC 3745-20-02 (A).

In the case of a renovation, if the quantities of regulated asbestos-containing material exceed certain limits, then a notice to this office is required at least ten working days before the start of renovation. See OAC 3745-20-02 (B). If regulated asbestos-containing materials are not present in these quantities, then no EPA notification is required.

In the case of a demolition, a notification is required in any case - even if the inspector finds no asbestos in the structure. However, in the event of less than the trigger quantities, not all information is required in the notification. See OAC 3745-20-02 (B) (2).

Mr. Kenyon Love
September 23, 2008
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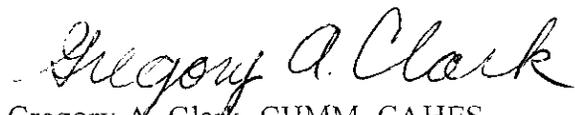
It may be of interest to you to know that the house, if it has no history of being used as part of a commercial enterprise, is specifically exempted from EPA asbestos regulations. However, please be aware that the Ohio Department of Health has their own requirements for notifications and the qualifications of persons engaged in asbestos abatement work. They are governed by OAC 3701-34. Questions about the ODH asbestos program may be addressed to Mr. Josh Koch at 614-466-3770

Finally, there is OSHA. They govern asbestos work through 29 CFR 1910 and 1926. Questions may be addressed to their Cleveland office at 1-216-615-4266.

I have enclosed a copy of the notification form and instructions. The form can be downloaded from the web page of the Ohio EPA, Division of Air Pollution Control. Go to <http://www.epa.state.oh.us/dapc/> then select "asbestos" from the drop-down box. The Ohio relevant portions of the Administrative Code are also available from the DAPC site. Click on "Rules & Laws" in green on the left. The asbestos regulations are under 3745-20. Your asbestos inspector should be familiar with the form and can help you fill it out if it is required.

I also enclose a list of asbestos inspectors and asbestos removal contractors. These are the entities that have made notifications to this office in the past year.

Sincerely,



Gregory A. Clark, CHMM, CAHES
Air Pollution Control Engineer

enclosures: Ohio EPA Asbestos Notification of Demolition and Renovation Form
Instructions for the above
List of asbestos inspectors and/or contractors

pc: Addressee via First Class Mail
Correspondence
G. Clark

**OHIO ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF DEMOLITION AND RENOVATION**

| | | | | | | | |
|--|--------------------|--|----------------|--|-------------|----------|--------|
| Operator Project # | Postmark | Date Received | Notification # | | | | |
| I. Type of Notification (check one): <input type="checkbox"/> Original <input type="checkbox"/> Revised <input type="checkbox"/> Canceled | | | | | | | |
| II. Facility Description (include building name, number, and floor or room number) Building Name: _____ Address: _____ City: _____ State: OHIO Zip Code: _____ County: _____ Site Location (specific): _____ Building Size (square feet): _____ # of Floors: _____ Age in Years: _____ Present Use: _____ Prior Use: _____ | | | | | | | |
| III. Type of Operation (check one): <input type="checkbox"/> Demo <input type="checkbox"/> Ordered Demo <input type="checkbox"/> Renovation <input type="checkbox"/> Emergency Renovation <input type="checkbox"/> Fire Training | | | | | | | |
| IV. Is Asbestos Present? (check one): <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | |
| V. Facility Information Owner Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Contact: _____ Telephone: (____) _____ Fax: (____) _____ Removal Contractor Name: _____ License # _____ Address: _____ City: _____ State: _____ Zip Code: _____ Contact: _____ Telephone: (____) _____ Fax: (____) _____ Other Operator (demolition/general): _____ License # _____ Address: _____ City: _____ State: _____ Zip Code: _____ Contact: _____ Telephone: (____) _____ Fax: (____) _____ | | | | | | | |
| VI. Procedure, including analytical methods, employed to detect the presence of and to estimate the quantity of RACM and Category I and Category II nonfriable ACM: Ohio Asbestos Hazard Evaluation Specialist: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Name Certification # </div> | | | | | | | |
| VII. Approximate Amount of Asbestos Materials: | | | | | | | |
| | RACM to be Removed | Nonfriable Asbestos Material to be Removed | | Nonfriable Asbestos Material NOT to be Removed | | | |
| | | Category I | Category II | Category I | Category II | | |
| Pipes (linear feet) | | | | | | | |
| Surface Area (square feet) | | | | | | | |
| Facility Components (cubic feet) | | | | | | | |
| VIII. Scheduled Dates Demolition or Renovation: Start: _____ Complete: _____ | | | | | | | |
| IX. Dates for Asbestos Removal (MM/DD/YY) Start: _____ Complete: _____ | | | | | | | |
| Days of the Week: | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| Hours of Operation: | | | | | | | |
| Complete all unshaded spaces, except demolitions which involve less than 260 linear feet, 160 square feet, or 35 cubic feet of RACM, need not complete spaces VII, XI, XII, XIII, XIV, and XV. Notifications for Emergency Demolition or Emergency Renovation must supply attachments. | | | | | | | |

**OHIO ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF DEMOLITION AND RENOVATION**

Page 2 of 2

X. Description of planned Demolition or Renovation work to be performed and method(s) to be employed, including demolition or renovation techniques to be used and description of affected facility components:

XI. Description of work practices and engineering controls to be used to comply with the requirements, including asbestos removal and waste handling emission control procedures:

XII. Waste Transporter #1

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Contact: _____ Telephone: (_____) _____ Fax: (_____) _____

Waste Transporter #2

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Contact: _____ Telephone: (_____) _____ Fax: (_____) _____

XIII. Waste Disposal

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Contact: _____ Telephone: (_____) _____ Fax: (_____) _____

XIV. Emergency Demolition (complete Item XIV and all other sections, only if this project is an Emergency Demo.)

1. Attach a copy of the Order to this notice.
2. Name of Authority Issuing Order: _____ Title: _____
3. Authority of Order (Citation of Code): _____
4. Date of Order (MM/DD/YY): _____ Date Ordered to Begin: _____

XV. Emergency Renovation (Attach separate sheet with the following information if project is Emergency Reno.)

1. Date and Hour of the Emergency
2. Description of the Sudden, Unexpected Event
3. Explanation of how the event caused unsafe conditions or equipment damage or an unreasonable financial burden.

XVI. Description of procedures to be followed in the event that unexpected RACM is found or nonfriable ACM becomes crumbled, pulverized or reduced to powder.

XVII. I certify that an individual trained in the provisions of NESHAPS (40 CFR PART 61, SUBPART M) will be on-site during the Demolition or Renovation and evidence that the required training has been accomplished by this person will be available during normal business hours.

Signature of Owner/Operator Date Type or Print Name and Title

XVIII. I acknowledge the existence of laws prohibiting the submission of false or misleading statements and I certify that facts contained in this notification are true, accurate, and complete.

Signature of Owner/Operator Date Type or Print Name and Title

Original Notification must be mailed or hand delivered at least ten working days (Monday-Friday excluding weekends) before demolition or renovation begins, except emergency demolitions and emergency renovations (see regulation) which must be submitted as soon as possible before operations begin. (Form Revised 11/12/97)

INSTRUCTIONS FOR NOTIFICATION OF ASBESTOS DEMOLITION AND RENOVATION OHIO ENVIRONMENTAL PROTECTION AGENCY

Regulatory Requirements:

The Ohio Environmental Protection Agency adopted Chapter 3745-20 of the Ohio Administrative Code (OAC) "Asbestos Emission Control from Renovation Demolition and Waste Disposal Operation" May 29, 1990. Chapter 3745-20 implements the National Emission Standard for Hazardous Air Pollutants (NESHAP) Standard for Asbestos. On November 20, 1990 U.S. EPA revised the asbestos NESHAP. Proper completion and submittal of the Ohio EPA form for notification, meets or exceeds all requirements for notification under the NESHAP and the Ohio Administrative Code. Notification requirements are found in OAC 3745-20-03 and in 40 CFR Section 61.145(b).

Who Must Notify:

Every demolition of a facility requires notification regardless of whether asbestos is involved. Renovation of a facility must be submitted when the amount of regulated asbestos-containing material (RACM) stripped, removed, dislodged, cut, drilled, or similarly disturbed exceeds 260 linear feet on pipes or 160 square feet on other facility components or 35 cubic feet off facility components.

When Must Notification Be Provided:

Notice must be postmarked, delivered or received by the Ohio EPA district office or local air agency with jurisdiction in the county where the operations will occur. A list of the counties and a map is available for reference. All notifications must be submitted at least 10 working days (Monday-Friday excluding weekends) before operations begin. Phone notification is not acceptable for original notification. Notification must be updated when substantive information changes or the amount of asbestos changes by more than 20%. Updated notification may be provided by phone or fax followed in writing before the operations continue. An emergency demolition or emergency renovation notice must be submitted as early as possible before but not later than the following working day, and must include the information required under notice sections XIV and XV.

What Information Must Be Supplied:

Complete all parts of the form except XIV and XV unless the notice is for emergency demolitions or renovations. Demolition which

involves less than 260 linear feet or 160 square feet do not need to complete items XI, XII, and XIII. Before submitting any notice the facility must be thoroughly inspected for asbestos including Category I (nonfriable packing gaskets, floor tile, asphalt roofing) and Category II (all other nonfriable ACM). OAC 3701-34-02(C) prohibits any person not certified as an asbestos hazard evaluation specialist in Ohio from inspecting and identifying asbestos for the purpose of determining the need for an asbestos hazard abatement activity.

Operator Project # -- this is an optional space provided for the person submitting the notice to indicate a project number.

- I. Identify if the notice is an original, revised, or canceled.
- II. A complete facility description must be provided including the specific portion of the facility affected by the operations. Building size must be estimated in square feet, number of floors, and age in years. Also include the present and prior use (i.e., industrial, commercial, institutional, etc.)
- III. Identify the type of operation being notified. If uncertain consult 40 CFR 61.141 and 61.145(a) or OAC 3745-20-01 and 3745-20-02.
- IV. Declare whether or not asbestos is present in any quantity.
- V. All spaces must be completed identifying the Owner, Removal Contractor and other responsible operator (if applicable) such as a demolition contractor or general contractor.
- VI. Include the procedure used to detect and analyze asbestos. All operations should have the records of the inspection and analyses on-site during active operations for inspection. Such records would include a list of materials assessed, locations sampled and the sample results.
- VII. Quantify asbestos in the three columns (RACM, Nonfriable Asbestos Material to be Removed, Nonfriable Asbestos Material NOT to be Removed).
- VIII. The starting and ending date for demolition or renovation must be noted even when asbestos is not being removed.
- IX. Include the scheduled dates for asbestos removal and specify the hours of operation and check off the days of the week operations will be active.
- X. Describe the demolition or renovation which will occur and the methods or operations that will be employed.
- XII. Indicate the names and addresses and phone numbers of any waste transporters. You must also complete a Waste Shipment Record prior to consigning any asbestos waste materials.
- XIII. Identify the waste disposal site and its actual location (may be different from mailing address).
- XIV. This space is only for emergency demolitions that meet the definitions and requirements of the regulation. In addition to completing the notification form, four additional items must be completed or attached to the notice. If a facility is not in imminent danger of collapse, it is not an emergency demolition even though it may be ordered due to hazardous conditions.
- XV. Emergency Renovations must meet criteria described at 40 CFR 61.141 and OAC 3745-20-01. Include an attachment with the three items listed on the notice form.
- XVI. Describe the procedures to be followed in the event unexpected asbestos is found or nonfriable asbestos becomes RACM. This will prevent delays or complete re-notification. In the event asbestos quantities change by 20% or more, you must update the notice.
- XVII. After November 20, 1991 you must certify a NESHAP trained person will be available during normal business hours at the demolition or renovation site. Signature must be by an authorized officer of the owner or operator.

Air Pollution Control Division



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Daniel J. Aleman
APCD Administrator

James M. Adams, MPA
Health Commissioner

July 10, 2008

This is a list of the asbestos inspection and/or removal contractors that have filed notifications to us within approximately the last year. This is not a complete list of the contractors or inspectors available to you nor an endorsement of any of these companies or persons. They are shown in alphabetical order. The list of Ohio Department of Health asbestos inspectors can be found at

http://pubapps.odh.ohio.gov/EnvLicense_Reports/External_License_Search.aspx?Program=Asbestos

Atwell Hicks, Solon, OH 440-349-2000 (Matthew Danus)
BBCM Engineering Inc., Dublin, OH 614-793-2226 (Eric Slosser)
BJAAM Environmental Inc., Canal Fulton, OH 330-854-5300 (Joseph Adelman)
Cardinal Environmental Services, Barberton, OH 330-848-8651 (Ray Brophy)
Chem-Tech Consultants, Inc. Bellville, OH 419 886-4375 (Craig Postel)
Cottrill Wrecking, Massillon OH 330-832-3820 (Shelley Cottrill)
Daniel Terreri & Sons, Inc, North Jackson, OH 330-538-2950 (Frank Carelli)
Diamond Environmental, Ravenna OH 330-422-0799 (Keith Bickel)
Emerald Environmental, Kent, Akron, Cleveland, Marietta 800-570-0690
Environmental Affairs Management, Akron, OH 330-384-9150
Environmental Support Network, Canton OH 330-494-0905 (Bill Racine)
Eslich Wrecking, Louisville, OH 330-488-8300 (John Eslich)
Flamos Enterprises, Inc., Canton OH (330) 478-0009
Flynn Environmental, Canton OH 330- 452-9409 (Jeanne M. Campbell)
GCS Industrial Services Ltd, Brimfield OH 330-673-6226 (Gary Spiker)
Global Insulation, Inc., Canton OH (724) 229-3100
HEPA Environmental Services, Uniontown, OH 330-818-0188 (Rick Kuhlman)
Howard Company, Youngstown, OH 330-747-3975 (John Evan)
JDS Consultants, Cleveland, OH 216-573-5550
Joseph H. Jeffries Co., Canton OH 330-454-6103 (Jeff Wacker)
Karl Rohrer Associates, Akron OH 330-666-1127 (James Prarat)
LEPI Enterprises, Zanesville, OH 740-453-2980 (Brad Bumpus)
M&M Laboratory Services LLC Worthington, OH 614) 906-1300 (Ian Chavez)
MS Consultants, Inc. Youngstown, OH 330-744-1790 (Brian Fischer)
Premium Air, Ashtabula OH 330-854-6378 (Richard Bistline)
Sector Environmental Corp, Dublin, OH 614-210-2000 (John Gram)
Solar Testing Labs Inc., Brooklyn Heights, OH 216-741-7007 (Brian Bostaph)
SUNPRO Inc., North Canton OH 330-966-0910 (Steve Regovich)
Thermal Solutions Inc, Proctorville OH 740-886-2861 (Joe Murphy)
Vadose Environmental Consultants, Canton, OH (330) 454-6706 (William Ullom)
William E. Fink and Associates, Inc., Hubbard, OH 330-568-0901 (Bill Fink)

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:

ATTORNEY KEYNON D. LOVE
323 COURT AVE NW
CANTON OH 44702

2. Article Number

(Transfer from service label)

7008 0150 0001 8204 9434

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sophie A. Filigno* Agent Addressee

B. Received by (Printed Name)

Sophie A. Filigno

C. Date of Delivery

*9-24-08*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**U.S. Postal Service™****CERTIFIED MAIL™ RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

7008 0150 0001 8204 9434

| | |
|---|---------|
| Postage | \$ |
| Certified Fee | 2.70 |
| Return Receipt Fee (Endorsement Required) | 2.20 |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees | \$ 5.90 |



Sent to

ATTORNEY KEYNON D LOVE

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

323 COURT AVE NW

City, State, ZIP+4

CANTON OH 44702

PS Form 3800, August 2006

See Reverse for Instructions