



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 7003 1010 0004 2923 6370
RETURN RECEIPT REQUESTED**

8/3/11

Cheryl Anderson
BP Lehigh 4901 Fleet Cleveland, LLC
1425 Mountain Drive North
Bethlehem, PA 18015

**FACILITY ID: 13-18-00-6901
NOTICE OF VIOLATION FOLLOW-UP LETTER**

Dear Ms. Anderson:

On 6/17/11, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation to BP Lehigh 4901 Fleet Cleveland, LLC for failure to pass Static Leak (SL) testing and failure to maintain Stage II post-test inspection records on site for 2010. CDAQ is in receipt of the required test results on 7/21/11.

The corrective action plan was received 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. If you have any questions, please call Dave DeChant at 216-664-3213. All correspondence with CDAQ must include the Ohio EPA facility identification number for BP Lehigh 4901 Fleet Cleveland, LLC: 13-18-00-6901.

Sincerely,

Linda Kimmy
Field Enforcement Manager

LK/dd



cc: John Paulian, Ohio EPA Central Office
William MacDowell, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318006901\2011-6-7 NEAR.docx



TANK INTEGRITY SERVICES, INC.
 North Royalton, Ohio 44133
 Phone: (440)237-9200
 Fax: (440)582-5119

LOCATION DATA: STAGE II VAPOR RECOVERY SYSTEM TEST DATA FORM

| | | | |
|---------------------------------|---------------------------|-------------------------------|------------------------|
| Location Name: <u>BP</u> | Location #: <u>000271</u> | Job #: <u>15064</u> | Date: <u>7/20/2011</u> |
| Address: <u>4901 FLEET AVE</u> | | Tester: <u>DARRYL JOHNSON</u> | |
| City/State: <u>CLEVELAND OH</u> | <u>44105</u> | Inspector: _____ | |

| | | | | | | |
|----------------|--|--|---|--|-----------------------------|------------------|
| Stage I Type: | Two Point: <input checked="" type="checkbox"/> | Coaxial: <input type="checkbox"/> | Poppeted? <input type="checkbox"/> | Manifolded: UG <input checked="" type="checkbox"/> | AG <input type="checkbox"/> | <u>0</u> Feet AG |
| Stage II Type: | Vapor Balance: <input type="checkbox"/> | Vacuum Assist: <input checked="" type="checkbox"/> | Type: <u>WW</u> | | | |
| | Drop Out: <input checked="" type="checkbox"/> | Sealed: <input checked="" type="checkbox"/> | Syphon: <input checked="" type="checkbox"/> | | | |

STATIC LEAK TEST RESULTS:

| Product Type: | <u>RUL</u> | <u>RUL</u> | <u>PUL</u> | <u>0</u> | TOTALS |
|---|----------------|--------------|--------------|----------|---------------|
| Actual Tank Capacity (Gallons): | <u>9,728</u> | <u>9,728</u> | <u>9,728</u> | <u>0</u> | <u>29,184</u> |
| Gasoline Volume (Gallons): | <u>5,843</u> | <u>6,840</u> | <u>2,554</u> | <u>0</u> | <u>15,237</u> |
| Ullage (Gallons): | <u>3,885</u> | <u>2,888</u> | <u>7,174</u> | <u>0</u> | <u>13,947</u> |
| Initial Pressure of UST: | Inches Water | | | | <u>1.00</u> |
| Nozzle Served by Tank (s): | Quantity | | | | <u>12</u> |
| (A) Stage I Coupler / (B) Stage II Riser: | Test Location | | | | <u>A</u> |
| Initial Pressure: | Inches Water | | | | <u>2.00</u> |
| Pressure After 1 Minute: | Inches Water | | | | <u>2.00</u> |
| Pressure After 2 Minutes: | Inches Water | | | | <u>2.00</u> |
| Pressure After 3 Minutes: | Inches Water | | | | <u>2.00</u> |
| Pressure After 4 Minutes: | Inches Water | | | | <u>2.00</u> |
| Pressure After 5 Minutes: | Inches Water | | | | <u>2.00</u> |
| Allowable Final Pressure: | Table IA or IB | | | | <u>1.92</u> |
| Test Status: | Pass or Fail | | | | PASS |

DYNAMIC PRESSURE TEST RESULTS:

| Riser / Nozzle # | 40 CFH .16 Max | 60 CFH .35 Max | 80 CFH .62 Max | Pass / Fail | Riser / Nozzle # | 40 CFH .16 Max | 60 CFH .35 Max | 80 CFH .62 Max | Pass / Fail |
|------------------|-------------------|-------------------|-------------------|-------------|------------------|-------------------|-------------------|-------------------|-------------|
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Gallons of gasoline introduced into Stage II riser. _____ Did gauge pulsate or peg at any flow rate during test? _____

COMMENTS: _____

DeChant, Dave

From: Cheryl Anderson <canderson@lehighgas.com>
Sent: Thursday, July 21, 2011 2:50 PM
To: DeChant, Dave
Cc: Karen Dilley; Lorrie Brecker
Subject: Notice of Violation - Facility ID 13-18-00-6901 - 4901 Fleet Ave Cleveland - 6/17/2011
Attachments: Lehigh BP #271 passing SL 2011.pdf; 4901 FLEET Avenue City of Cleveland 6-17-2011 v1_0.pdf

Mr. DeChant,

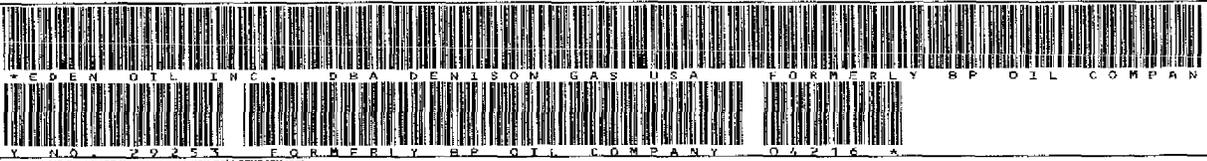
In response to the attached notice of violation letter, also attached please find passing static leak test results dated 7/20/2011. Also, passing test results from 2010 have been made available on site as required. Please advise if all outstanding violations have been resolved.

Thank you,

*Cheryl Anderson
Lehigh Gas Corporation
1425 Mountain Drive North
Bethlehem, PA 18015
610-625-8022
610-841-0014 Fax*

CDAQ DAPC Office Patch Sheet

CDAQ staff notes: Place a copy of this sheet on top of each **NOV** document for each NOV that matches the Record ID identified below.

| | | |
|------------------|-------------|---|
| Department* | DAPC |  * D A P C * |
| Sub Department | |  * * |
| Office location | CDAQ |  * C D A Q * |
| Media | Air |  * A I R * |
| Document Type | NOV |  * N O V * |
| Document subtype | Permit |  * P E R M I T * |
| Program | Enforcement |  * * |
| County | County |  * C O U N T Y A H O G A * |
| ID info | 1318006895 |  * 1 3 1 8 0 0 6 8 9 5 * |
| Name | |  * E D E N O I L I N C . D B A D E N I S O N G A S U S A F O R M E R L Y B P O I L C O M P A N Y N O . 2 2 2 5 3 F O R M E R L Y B P O I L C O M P A N Y 0 4 2 1 6 * |
| Date: | 12/30/2009 |  * 1 2 / 3 0 / 2 0 0 9 * |
| Record ID | CDAQ_11006 |  * C D A Q 1 1 0 0 6 * |