

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:

Joe Zigman
 Euclid Marathon
 818 Bayridge Blvd.
 Willowick, OH 4409

13-18-10-6209

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Joe A. Zigman* Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

7009 3410 0002 1934 1417



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
75 Erieview Plaza, Suite 200
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 7009 3410 0002 1934 1417
RETURN RECEIPT REQUESTED**

3/8/11

Joe Zigman
Euclid Marathon
818 Bayridge Blvd.
Willowick, OH 44095

**FACILITY ID: 13-18-20-6209
NOTICE OF VIOLATION FOLLOW-UP LETTER**

Dear Mr. Zigman,

On 2/18/11, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requiring Euclid Marathon to complete necessary repairs then conduct a re-test of the Static Leak (SL) test and the Air to Liquid Ratio (A/L) test for dispenser #6. CDAQ witnessed successful SL and A/L re-testing 3/4/11.

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 Dave DeChant at 216-664-3213. All correspondence with CDAQ must include the Ohio EPA facility identification number for Euclid Marathon: 13-18-20-6209.

Sincerely,

A handwritten signature in cursive script that reads "Linda Kimmy".

Linda Kimmy
Field Enforcement Manager, CDAQ

LK/dd

cc: John Paulian, Ohio EPA Central Office
William MacDowell, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318206209\2011-2-16 NEAR.docx



Cleveland Division of Air Quality
GDF Inspection Report

Form Revised: 11/09/2010



DAPC - APPENDIX N (GDF)

Date: 3/4/11 Inspected by: S. DECHANT
 Premise Number: 13-18-20-6009 Type of System: COLTRACO
 Facility Name: ZIGMAN AUTOMOTIVE / RECEIVED Testing Company: ECT
 Facility Address: 470 E. 200TH ST

STATIC LEAK TEST RESULTS

Stage II System: Vapor Balance [] Vacuum Assist []
 Stage I System: Two point [] Coaxial [] Manifold? Aboveground [] Underground []

| Tank # | 1 | 2 | 3 | |
|--|------|------|------|-------|
| Product Grade | REG. | REG. | PREM | |
| Actual Tank Capacity, gallons | 7950 | 7950 | 7950 | 23850 |
| Gasoline Volume | 2404 | 2380 | 747 | 5531 |
| Ullage, gallons (#2-#3) | 5546 | 5570 | 703 | 18389 |
| Initial Pressure, inches H ₂ O | | | | 2.00 |
| Number of Nozzles Served by Tank | | | | 8 |
| Test Location: Stage I VC or Stage II Riser | | | | I |
| Pressure After 1 Minute, inches H ₂ O | | | | 2.03 |
| Pressure After 2 Minutes, inches H ₂ O | | | | 2.04 |
| Pressure After 3 Minutes, inches H ₂ O | | | | 2.04 |
| Pressure After 4 Minutes, inches H ₂ O | | | | 2.05 |
| Final Pressure After 5 Min., inches H ₂ O | | | | 2.06 |
| Allowable Final Pressure | | | | 1.94 |

Static Leak Test Results: Pass [] Fail [] Which tanks failed? _____

Notes: _____

DYNAMIC PRESSURE TEST RESULTS

Quantity of gasoline introduced into Stage II, (gallons): _____ Riser [] Bellows []

| Nozzle # | 40 CFH 0.16" Max | 60 CFH 0.35" Max | 80 CFH 0.62" Max | Pass / Fail |
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| Nozzle # | 40 CFH 0.16" Max | 60 CFH 0.35" Max | 80 CFH 0.62" Max | Pass / Fail |
|----------|---------------------|---------------------|---------------------|-------------|
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Did the gauge needle pulsate or peg at any flow rate during the test? Yes [] No []

Dynamic Pressure Results: Pass [] Fail []

Notes: _____

