



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 1933 8752
RETURN RECEIPT REQUESTED

June 2, 2010

David Nye
True North # 375
3710 Lecharps Road
Youngstown, OH 44515

FACILITY ID: 13-18-00-6858
NOTICE OF VIOLATION FOLLOW-UP LETTER

Dear Mr. Nye:

On April 27, 2010, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requiring True North #375 to make the necessary repairs to dispensers #7 and #8, then conduct a re-test of the A/L Ratio test and submit test results within thirty (30) days of receipt of the letter. CDAQ is in receipt of a corrective action plan dated May 28, 2010 at which time True North #375 submitted passing test results for the A/L Ratio test on dispensers #7 and #8.

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 Megan Murphy at 216-664-4258. All correspondence with CDAQ must include the Ohio EPA facility identification number for True North #375: 13-18-00-6858.

Sincerely,

George Baker
Chief of Enforcement, CDAQ

GB/mm

cc: John Paulian, Ohio EPA Central Office
Lisa Holscher, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318006858\2010-4-22 NEAR.doc

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, & 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:

David Nye
 True North #375
 3710 Leharps Rd.
 Youngstown, OH 44515

2. Article Number
(Transfer from service label)

7009 3410 0002 1933 8752

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 X *Katrina Patterson* Agent Address
- B. Received by (Printed Name)
Katrina Patterson
- C. Date of Delivery
6-4-11
- D. Is delivery address different from item 1? Yes
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