



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 7003 1010 0004 2923 5069
RETURN RECEIPT REQUESTED**

5/27/11

David Nye
True North Shell #375
3711 Leharps Rd.
Youngstown, OH 44515

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

Dear Mr. Nye:

On 5/17/11, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation to True North Shell #375 located at 17212 Lorain Rd. in Cleveland for failure to conduct a successful Air-to-Liquid Ratio test for dispenser #8. CDAQ witnessed a successful Air-to-Liquid Ratio test for dispenser #8 on 5/25/11.

Although the testing deficiencies that existed have been corrected, future correspondence will be issued regarding the failure of Stage II tests in two consecutive attempts (4/22/10, 4/13/11 and 5/13/11).

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 True North Shell #375: 13-18-00-6858.

Sincerely,

A handwritten signature in black ink that reads "Linda Kimmy".

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\1318006858\2011-5-13 NEAR.docx

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:

David Nye
 True North Shell #375
 3711 Leharps Rd.
 Youngstown, OH 44515

13-18-00-6858

2. Article Number
(Transfer from service label)

7003 1010 0004 2923 5069

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *K. Patterson* Agent Addressee

B. Received by (Printed Name) *K. Patterson* C. Date of Delivery *6/2/11*

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