



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
75 Erieview Plaza, Suite 200
Cleveland, Ohio 44114-1839
216/564-2297 • Fax: 216/420-8047
www.clevelandhealth.org

**SERVING OHIO EPA AS AGENCY 13
FOR CUYAHOGA COUNTY**

**CERTIFIED MAIL 7003 1010 0004 2923 6875
RETURN RECEIPT REQUESTED**

June 27, 2011

Cheryl Anderson
3100 W. 14th Cleveland, LLC
1425 Mountain Drive North
Bethlehem, PA 18015

NON-HPV

FACILITY ID: 13-18-00-6935

NOTICE OF VIOLATION: Failure to have an employee trained in operating and maintaining the Stage II control equipment; Failure to conspicuously post "No Topping Off" instructions

Dear Ms. Anderson:

On June 24, 2011, the Cleveland Division of Air Quality (CDAQ) inspected 3100 W. 14th Cleveland, LLC located at 3100 W. 14th Street in Cleveland. This letter serves as notification that you are operating sources in violation of the following applicable air statutes, air regulations, or air permit conditions.

The operation of the gasoline dispensing facility (GDF) located at 3100 W. 14th Street, is in violation of Ohio Administration Code (OAC) Rules 3745-21-09(DDD)(3)(a)(vi) and 3745-21-09(DDD)(1)(d), in that, proof of attendance and completion of the training required by the Ohio EPA for the operator or local manager of the GDF could not be verified, and instructions for the vapor control system, specifically prohibiting the "topping off" of the motor vehicle tank, were not conspicuously posted in each gasoline dispensing area. Both are also violations of Ohio Revised Code (ORC) Section 3704.05(G).

Unless you undertake some type of corrective action with respect to the above noted violations, you will remain in non-compliance. CDAQ requests that 3100 W. 14th Cleveland, LLC complete and submit a copy of the training required by the Ohio EPA for the operator or local manager of the GDF, to the following enforcement representative:



Valerie Shaffer
Cleveland Division of Air Quality
75 Erieview Plaza 2nd Floor
Cleveland, Ohio 44114-1839

Additionally, the posting of operating instructions which specifically prohibit the topping off of the motor vehicle tank is required in each gasoline dispensing area.

Your written response to this letter must be received by CDAQ within fourteen (14) days of your receipt of this letter. If there is insufficient time to correct the alleged violations within this timeframe, your response must include a timeline for correcting the alleged violations.

Violations of Ohio air pollution laws and /or permit terms and conditions are subject to the penalties stipulated in Ohio Revised Code Section 3704.99(A), which allows fines of not more than twenty-five thousand dollars or imprisonment for not more than one year, or both, for each violation.

CDAQ issues this letter with Ohio EPA's concurrence. The failure to mention any specific violation 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 Valerie Shaffer at (216) 664-6292. All correspondence with CDAQ must include the Ohio EPA facility identification number for 3100 W. 14th Cleveland, LLC: 13-18-00-6935.

Sincerely,

Linda Kimmy
Field Enforcement Manager

LK/vls

cc: Mack Patel, 3100 W. 14th Cleveland, LLC
John Paulian, Ohio EPA Central Office
William MacDowell, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318006935\2011-06-24 NOV.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.

Article Addressed to:

Cheryl Anderson
Leop Lehigh GAS

1425 Mountain Dr. North
Bethlehem, PA 18015

Article Number

(Transfer from service label)

7003 1010 0004 2923 6875

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Eileen Watson Addressee

B. Received by (Printed Name) Yes
 Eileen Watson No

C. Date of Delivery Yes
 7/5/11 No

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