



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
75 Erievue 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 1073
RETURN RECEIPT REQUESTED**

December 1, 2010

Richard Burke
Orlando Baking Company
7777 Grand Avenue
Cleveland, OH 44101

NON-HPV

FACILITY ID: 13-18-00-7764

**NOTICE OF VIOLATION / NOTICE OF VIOLATION FOLLOW-UP LETTER: FAILURE
TO SUBMIT TIMELY PERMIT APPLICATION FOR BAKING OVEN #9 / PERMIT
APPLICATION RECEIVED ON JUNE 16, 2009.**

Dear Mr. Burke:

On November 11, 2010, the Cleveland Division of Air Quality (CDAQ) inspected Orlando Baking Company (Orlando Baking) located at 7777 Grand Avenue 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.

Orlando Baking failed to timely apply for the installation and operation of emissions unit P006: Baking Oven #9. Installation of P006 commenced on January 03, 2007; however, CDAQ did not receive a permit-to-install/operate (PTIO) application until June 16, 2009. This is a violation of Ohio Administrative Code rule 3745-31-02(A) and Ohio Revised Code 3704.05(F). However, PTIO No. P0105059 was issued and effective on October 15, 2009, properly permitting P006. 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.

However, Orlando Baking is operating in violation of City of Cleveland Codified Ordinances 259.01 and 263.01, in that Orlando Baking has failed to obtain City of Cleveland permits-to-operate by submitting City of Cleveland Air Contaminant fees for the following calendar years: 2006, 2007, and 2008.

Unless you undertake some type of corrective action with respect to the above noted violation, you will remain in non-compliance. CDAQ requests that Orlando Baking obtain City of Cleveland permits-to-operate by submitting City of Cleveland Air Contaminant fees within thirty (30) days of receipt of this letter to the following address:

City Permit Fee Invoices
Cleveland Division of Air Quality
75 Erievue Plaza, 2nd Floor
Cleveland, Ohio 44114-1839



If there is insufficient time to correct the alleged violations within this timeframe, a response which includes a timeline for correcting the alleged violations must be received by the following enforcement representative within the thirty (30) days of receipt of this letter:

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

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 Valerie Shaffer at (216) 664-6292. All correspondence with CDAQ must include the Ohio EPA facility identification number for Orlando Baking: 13-18-00-7764.

Sincerely,

Linda Kimmey for G.B.

George Baker
Chief of Enforcement, CDAQ

GB/vls

cc: Kathy Plautz, Orlando Baking Company
John Paulian, Ohio EPA Central Office
William MacDowell, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318007764\2010-11-05 NOV+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:

Orlando Baking Co.
 Attn: Richard Buske
 7777 Grand Avenue
 Cleveland, OH 44101

2. Article Number

(Transfer from service label)

7009 3410 0002 1934 1073

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

X

12/3/10

D. Is delivery address different from item 1? YesIf 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