



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
75 Frieview 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 #70022030000118088541
RETURN RECEIPT REQUESTED

February 24, 2010

Eugene Schoenmeyer
Abel Metal Processing, Inc.
2105 E 77th Street
Cleveland, OH 44103

FACILITY ID: 13-18-00-8036
RECEIPT OF CORRECTIVE ACTION PLAN: NOTICE OF VIOLATION

Dear Mr. Schoenmeyer:

On January 20, 2010, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requesting that Abel Metal Processing, Inc. (Abel) undertake some type of corrective action regarding the following violation, within 30 days of the receipt of the letter:

Abel is in violation of Ohio Revised Code 3704.05(F) and (G), Ohio Administrative Code 3745-31-02(A)(1) and the City of Cleveland Codified Ordinance 259.02 for operating emission sources without first applying for and obtaining a permit-to-install/operate (PTIO) for each of the following emission units:

- One 300 gallon Bright Nickel electroplating tank,
- One 80 gallon Bright Chrome plating tank (Trivalent),
- One 200 gallon Copper Electroplating tank,
- Two 300 gallon Electros-Nickel lines,
- One 80 gallon Aluminum Pickle tank,
- One 80 gallon Aluminum Cleaner tank,
- One 60 gallon Bright Dip tank,
- Two 400 gallon Electro polish tanks,
- One Electro less Nickel line and
- One Aluminum Pickle line

CDAQ is in receipt of a Corrective Action Plan dated February 17, 2010, stating that Abel has contacted Ohio EPA Office of Compliance Assistance and Pollution Prevention (OCAPP) and will submit PTIO applications by March 31, 2010. You are expected to comply with submitting PTIO applications for each of the above mentioned emission units by March 31, 2010. Failure to do so may result in referral to Ohio EPA or U.S. EPA for further enforcement action. Fulfillment of your



commitments included in the corrective action plan and/or any modifications contained within this letter does not constitute a waiver of CDAQ's ability to refer this matter to Ohio EPA or U.S. EPA for further enforcement action. Please Submit the PTIO applications to the following address:

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

Please submit future correspondence other than PTIO applications related to this matter to the following enforcement representative:

Andrew Kenney
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 Andrew Kenney at 216-420-7683. All correspondence with CDAQ must include the Ohio EPA facility identification number for Abel: 13-18-00-8036.

Sincerely,

George Baker
Chief of Enforcement, CDAQ

GB/ak

cc: John Paulian, Ohio EPA Central Office
Lisa Holscher, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318008036\2009-12-30 RCAP.doc

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>[Signature]</i></p>	
<p>1. Article Addressed to:</p> <p style="text-align: center;"><i>Eugene Schoenmeyer Abel Metal Processing 2105 E 77th St Cleveland, OH 44103</i></p>	<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p> <p style="text-align: center;"><i>3-11-10</i></p>
<p>2. Article Number (Tra. from servc)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p style="text-align: center;">7002 2030 0001 1808 8541</p>		