



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 4413
RETURN RECEIPT REQUESTED**

September 28, 2010

Simone Abounader
Lee Miles Service, Inc.
4360 Lee Road
Cleveland, OH 44128

**FACILITY ID: 13-18-00-8140
NOTICE OF VIOLATION FOLLOW-UP LETTER**

Dear Mr. Abounader:

On August 23, 2010, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requiring Lee Miles Service, Inc. to perform annual Stage II testing. CDAQ is in receipt of annual Stage II test results from September 27, 2010 dated September 28, 2010 from Environmental Compliance Technologies via e-mail.

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 Andrew Marantides at (216) 420-8049. All correspondence with CDAQ must include the Ohio EPA facility identification number for Lee Miles Service, Inc.: 13-18-00-8140.

Sincerely,

Linda Kimmy for G.B.

George Baker
Chief of Enforcement, CDAQ

GB/AM

cc: John Paulian, Ohio EPA Central Office
Lisa Holscher, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318008140\2010-8-18 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:

Simone Abounader
Lee Miles Service, Inc.
4360 Lee Road
Cleveland, OH 44128

2. Article Number
(Transfer from service label)

7003 1010 0004 2923 5748

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

SIMONE ABOUNADER

C. Date of Delivery

8/25

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

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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S,

C. Date of Delivery

1 Oct 10

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