



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 7009 3410 0002 1934 1592
RETURN RECEIPT REQUESTED**

March 17, 2011

John Daher
Freeway Sunoco
15504 Waterloo Road
Cleveland, OH 44110

**FACILITY ID: 13-18-00-8353
NOTICE OF VIOLATION FOLLOW-UP LETTER**

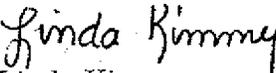
Dear Mr. Daher:

On February 16, 2011, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requiring Freeway Sunoco to submit proof of attendance and completion of training, records of maintenance, and a plan outlining how records will be maintained in the future within thirty (30) days of receipt of the letter. CDAQ is in receipt of a corrective action plan dated March 16, 2011 at which time CDAQ received a stage II compliance specialist certificate and records of maintenance for calendar year 2010. CDAQ has also been informed that all records will be maintained at the facility in the future.

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 Megan Murphy at 216-664-4258. All correspondence with CDAQ must include the Ohio EPA facility identification number for Freeway Sunoco: 13-18-00-8353.

Sincerely,


Linda Kimmy
Field Enforcement Manager, CDAQ

LK/mm

cc: John Paulian, Ohio EPA Central Office
William MacDowell, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318008353\2011-1-21 NEAR.doc

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:
 John Daher
 Freeway Sunoco
 15504 Waterloo Rd.
 Cleveland, OH 44110

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *V. Cottrell* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

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

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A. Signature
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B. Received by (Printed Name) C. Date of Delivery
 2.18.4

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

7009 3410 0002 1934 1530