



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
1925 St. Clair Avenue
Cleveland, Ohio 44114-2080
216/664-2297 • Fax: 216/420-8047
www.clevelandhealth.org

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

**CERTIFIED MAIL 7002 0860 0006 9069 3279
RETURN RECEIPT REQUESTED**

February 28, 2007

Everett and Kimberly Carrington
Custom Polishing and Plating
13204 Silver Road
Garfield Heights, Ohio 44125

FACILITY ID: 13-18-00-8435

2nd Notice of Violation for not complying with the terms and conditions of permit-to-install (PTI) #13-04520

Dear Mr.&Mrs. Carrington:

On January 9, 2007, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requesting Custom Polishing and Plating to submit quarterly deviation reports, an Operation & Maintenance (O&M) plan, a Notification of Compliance Status report, and semi-annual compliance status reports by February 1, 2007. **You are expected to respond to this NOV by March 16, 2007. Failure to do so may result in referral to Ohio EPA or U.S. EPA for further enforcement action.**

Custom Polishing and Plating's operation of emissions unit P001: Decorative Chrome Plating Line is in violation of Title 40 of the Code of Federal Regulations, Part 63 (40 CFR 63), Subpart N; and the terms and conditions of PTI #13-04520 since April 20, 2006 for not maintaining required records and submitting required reports. Failure to comply with permit terms and conditions is also a violation of the Ohio Revised Code § 3704.05 (C) and (F).

PTI #13-04520, Part I (A) (2) requires submittal of quarterly deviation reports; Part II (B) requires implementation of an O&M plan; Part II (D) requires the submittal of a Notification of Compliance Status report and submittal of semi-annual compliance status reports until a request to reduce reporting frequency is approved by CDAQ.

Unless you undertake some type of corrective action with respect to the above noted violations, you will remain in non-compliance. CDAQ requests that Custom Polishing and Plating submit quarterly deviation reports, an O&M plan, a Notification of Compliance Status report, and semi-annual compliance status reports to the following enforcement representative:

Valencia White
Cleveland Division of Air Quality
1925 St. Clair Avenue NE
Cleveland, Ohio 44114-2080



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 **finest of not more than twenty-five thousand dollars or imprisonment for not more than one year, or both, for each violation.**

Free assistance with state and/or federal regulations, rules, laws or permit conditions can be provided at no charge through Ohio EPA Office of Compliance Assistance and Pollution Prevention (OCAPP). OCAPP can be contacted at <http://www.epa.state.oh.us/ocapp> or (614) 644-3469 or (800) 329-7518. CDAQ makes no guarantee that the facility will meet the qualifying guidelines established by the OCAPP.

Facilities that want to investigate methods of pollution prevention to reduce raw material usage and waste production can contact the Ohio EPA Office of Compliance Assistance and Pollution Prevention (OCAPP). OCAPP can be contacted at <http://www.epa.state.oh.us/ocapp> or (614) 644-3469 or (800) 329-7518 and there is no charge for their services.

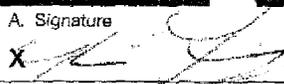
CDAQ issues this letter with Ohio EPA's concurrence. The failure to mention any specific violation does not excuse any violations of local, state and federal laws or regulations regarding air pollution control. Violations of air pollution control laws may be pursued in local court or referred to Ohio EPA or U.S. EPA for further enforcement action. Should you have any questions, please call Valencia White at 216-664-2953. All correspondence with CDAQ must include the Ohio EPA facility identification number for Custom Polishing and Plating: 13-18-00-8435.

Sincerely,

Valencia White
Acting Field Enforcement Manager, CDAQ

cc: Richard Nemeth and Michael J. Krzywicki, CDAQ
John Paulian, Ohio EPA Central Office
Lisa Holscher, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318008435\2nd NOV.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. 	A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: <p style="text-align: center;">Kim Carrington Custom Polishing & Plating 13204 Silver Road Garfield Hts, Oh 44125</p>	B. Received by (Printed Name) _____ C. Date of Delivery _____
2. Article Number (transfer from service label)	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
PS Form 3811, August 2001	3. Service Type <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.
Domestic Return Receipt	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes 7002 0860 0006 9069 3255 (13-18-00-8435)
102595-02-M-0835	

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. 	A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: <p style="text-align: center;">Mr & Mrs. Carrington Custom Plating & Polishing 13204 Silver Road Garfield, Oh 44125</p>	B. Received by (Printed Name) _____ C. Date of Delivery <u>8/3/01</u>
2. Article Number (transfer from service label)	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
PS Form 3811, August 2001	3. Service Type <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.
Domestic Return Receipt	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes 7002 0860 0006 9069 3279 (13-18-00-8435)
102595-02-M-0835	

Notification of Compliance Status

Applicable Rule: 40 CFR Part 63, Subpart N--National Emission Standards for Chromium Emissions from Hard and Decorative Chromium Electroplating and Chromium Anodizing Tanks

1. Complete one form for each plant in which chromium electroplating and/or chromium anodizing operations are performed.

Owner/Operator/Title: Kim Carrington / AION Carrington
 Street Address: 13204 Silver Rd.
 City: Carefield #13 State: OH Zip code: 44125
 Plant Name: Custom Polishing - Plating Plant Phone Number: 216-255-8606
 Plant Contact/Title: Kim Carrington Plant
 Address (if different from owner/operator's): Street Address: 9911 Elk Ave
 City: Cleveland State: OH Zip code: 44119

2. Complete the following table, if additional lines are required make copies of this page.

Tank ID #	Type of tank	Applicable emission limit	Type of control technique	Control System ID #	Method to determine compliance ¹	Test method followed	Type and quantity of HAP emitted ²
POO1	decorative chrome	45 dynes/cm	wetting agent fume suppressant	11	surface tension	EPA Method 306B	Cr 40 dynes/cm

¹ If a performance test was conducted, submit the test report containing the elements required by 40 CFR 63.344(a).

² If the compliance procedures of 40 CFR 63.344(e) are being followed, attach the calculations needed to support the emission limits expressed in mg/hr.

Example response:

Tank ID #	Type of tank	Applicable emission limit	Type of control technique	Control System ID #	Method to determine compliance ¹	Test method followed	Type and quantity of HAP emitted ²
1	hard chrome plating	0.015 mg/dscm	composite mesh-pad system	10	performance test	EPA Method 306	Cr 0.009 mg/dscm
2	chrome anodizing	45 dynes/cm	wetting agent fume suppressant	N/A	surface tension measurement	EPA Method 306B	Cr 40 dynes/cm
3	decorative chrome plating	0.01 mg/dscm	foam blanket	N/A	performance test	EPA Method 306A	Cr 0.005 mg/dscm

3. Complete the following table for each control technique used. If additional lines are needed, make copies of this page.

Control system ID #	Tank ID # (s)	Range of site-specific operating parameter values ¹			
		Pressure drop	Velocity pressure	Surface tension	Foam blanket thickness

¹ If the applicable monitoring and reporting requirements to demonstrate continuous compliance differ from those in 40 CFR Part 63, Subpart N, attach a description. Parameter value ranges are established through initial performance testing and are those that correspond to emissions at or below the level of the standard(s).

Example response:

Control system ID #	Tank ID # (s)	Range of site-specific operating parameter values ¹			
		Pressure drop	Velocity pressure	Surface tension	Foam blanket thickness
10	1	7 in. w.c. ± 1 in.	N/A	N/A	N/A
N/A	2	N/A	N/A	≤45 dynes/cm	N/A
N/A	3	N/A	N/A	N/A	≥1 inch

4. Complete the following if hard chromium electroplating tanks are operated (indicate yes/no).

_____ The maximum cumulative potential rectifier capacity of the hard chromium electroplating tanks is greater than or equal to 60 million amp-hr/yr. This was determined by taking the sum of the total installed rectifier capacity (amperes) multiplied by 8,400 hours/yr and by 0.7 for each tank.

_____ The maximum cumulative potential rectifier capacity of the hard chromium electroplating tanks is less than 60 million amp-hr/yr. This was determined by taking the sum of the total installed rectifier capacity (amperes) multiplied by 8,400 hours/yr and by 0.7 for each tank.

_____ Records indicate that the facility's previous twelve-month cumulative current usage for the hard chromium electroplating tanks was less than 60 million amp-hr.

_____ The facility wishes to accept a Federally-enforceable limit of less than 60 million amp-hr/yr on the maximum cumulative potential rectifier capacity of the hard chromium electroplating tanks.

5. Indicate which item describes the facility's compliance status (indicate yes/no).

_____ The facility is in compliance with the provisions of 40 CFR Part 63, Subpart N.

_____ The facility is not in compliance with the provisions of 40 CFR Part 63, Subpart N.

