



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 1752  
RETURN RECEIPT REQUESTED**

March 31, 2011

Assed Tayeh  
Quick Pik Valero  
1930 East 79<sup>th</sup> Street  
Cleveland, OH 44103

**NON-HPV**

**FACILITY ID: 13-18-00-8669**

**SECOND NOTICE OF VIOLATION: Failing Stage II testing; Failure to provide proof of attendance and completion of training required by Ohio EPA; Failure to provide proof of maintenance; Failure to conspicuously post operating instructions which clearly state "Do Not Top Off"; Failure to obtain city operating permits by submitting city permit fees for calendar year 2010**

Dear Mr. Tayeh:

On February 15, 2011, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requesting that Quick Pik Valero complete the following requirements within thirty (30) days of receipt of the letter:

- Conduct a re-test of the Static Leak test and Air-to-Liquid ratio on dispenser #2 and submit test results
- Begin conducting weekly maintenance checks and maintain corresponding logs, and submit a copy of a completed maintenance log
- Submit a copy of the Stage II compliance specialist certificate for Quick Pik Valero once the required training has been completed
- Obtain city permits to operate by submitting city permit fees for calendar year 2010
- Conspicuously post operating instructions which clearly state "Do Not Top Off"

CDAQ has not received a response from Quick Pik Valero as of March 30, 2011. Unless you undertake some type of corrective action with respect to the above noted violations, you will remain in non-compliance. CDAQ requests that Quick Pik Valero submit the requirements detailed above to the following enforcement representative within fourteen (14) days of receipt of this letter:



Megan Murphy  
Cleveland Division of Air Quality  
75 Erieview Plaza 2<sup>nd</sup> Floor  
Cleveland, Ohio 44114-1839

If there is insufficient time to correct the alleged violations within this timeframe, a written response which includes a timeline for correcting the alleged violations must be received within fourteen (14) days of receipt of this letter.

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

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 Megan Murphy at 216-664-4258. All correspondence with CDAQ must include the Ohio EPA facility identification number for Quick Pik Valero: 13-18-00-8669.

Sincerely,

Linda Kimmy  
Field Enforcement Manager

LK/mm

cc: George P. Baker, CDAQ  
Michael J. Krzywicki, CDAQ  
John Paulian, Ohio EPA Central Office  
William MacDowell, U.S. EPA Region V  
Facility File and L:\Data\Facilities\1318008669\2011-2-14 2<sup>nd</sup> NOV.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:

Assed Tayeh  
 Quick Pik Valero  
 1930 E. 79th St.  
 Cleveland, OH 44103

2. Article Number  
(Transfer from service label)

7009 3410 0002 1934 1752

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Delle*

- 
- Agent
- 
- 
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-5-10

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