



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
75 Erieview Plaza, Second Floor
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 6356
RETURN RECEIPT REQUESTED

8/2/11

Cliff Brehm
Automated Packaging Systems, Inc.
13555 McCracken Rd.
Garfield Heights, OH 44125

NON-HPV

FACILITY ID: 13-18-22-6136

NOTICE OF VIOLATION: Failure to electronically submit required annual, semi-annual and quarterly reports since the first quarter of 2008; Failure to maintain the individual rolling 12-month volatile organic compound (VOC) emission summary for Emissions Unit (EU) K016 (formerly K013)

Dear Mr. Brehm:

On 7/13/11, the Cleveland Division of Air Quality (CDAQ) inspected Automated Packaging Systems, Inc. (Automated) located at 13555 McCracken Rd. in Garfield Heights. This letter serves as notification that you are operating sources in violation of the following applicable air statutes, air regulations, or air permit conditions.

Automated has failed to electronically submit the required annual, semi-annual and quarterly reports since the first quarter of 2008. This is a violation of the Title V Permit, Permit to Install (PTI) #13- 04751, the Ohio Revised Code (ORC) Sections 3704.05(C), 3704.05(J)(2) and the Ohio Administrative Code (OAC) rule 3745-15-03(A).

Also, Automated was not maintaining the individual rolling 12-month VOC emission records for EU K016 as required by the Title V permit, Part III (A)(III)(4)(n). This is a violation of the Title V Permit and the ORC Section 3704.05(C). The rolling 12-month records for K013/K016 were received by CDAQ via email on 7/25/11.

Unless you undertake some type of corrective action with respect to the above noted violations, you will remain in non-compliance. CDAQ requests that Automated electronically submit all required annual, semi-annual and quarterly reports dating back to the first quarter of 2008 through the State of Ohio EPA's eBusiness site.



Please provide notification of the completed electronic report submissions to the following enforcement representative:

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

Additionally, as noted at the time of the inspection, please submit a Permit to Install/Operate (PTIO) application specific to the planned laminating process that is to be added to the existing slitter operation.

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

Permit-to-install/operate (PTIO) applications are to be completed through the Ohio EPA eBusiness Center at <https://ebiz.epa.ohio.gov/>.

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 Dave DeChant at 216-664-3213. All correspondence with CDAQ must include the Ohio EPA facility identification number for Automated Packaging Systems, Inc.: 13-18-22-6136.

Sincerely,

Linda Kimmy
Field Enforcement Manager

LK/dd

cc: Paul Banfield, Automated
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\1318226136\2011-7-13 NOV.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:

Cliff Brehm
 Automated Packaging Systems, Inc.
 13555 McCracken Rd.
 Garfield Heights, OH 44125

13-18-02-6136

 2. Article Number
 (Transfer from service label)

7003 1010 0004 2923 6356

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

 Cliff Brehm
 Agent Addressee

B. Received by (Printed Name)

Laurie Harley

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