

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>6-9</p>	
<p>1. Article Addressed to:</p> <p>Mike Matejka Mayfield Corners Summit 6665 Mayfield Rd. Mayfield Heights, OH 44124</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (transfer from service label)</p>	<p>7009 3410 0002 1933 8776</p>	



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 1933 8776
RETURN RECEIPT REQUESTED**

June 3, 2010

Mike Matejka
Mayfield Corners Sunmart
6665 Mayfield Road
Mayfield Heights, OH 44124

**FACILITY ID: 13-18-31-8277
NOTICE OF VIOLATION FOLLOW-UP LETTER**

Dear Mr. Matejka:

On April 29, 2010, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation requiring Mayfield Corners Sunmart to conduct Stage II testing and submit the test results within thirty (30) days of receipt of the letter. CDAQ witnessed Stage II testing on May 27, 2010. The Static Leak, Blockage, and Air-to-Liquid Ratio tests passed at this time.

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 Mayfield Corners Sunmart: 13-18-31-8277.

Sincerely,

George Baker
Chief of Enforcement, CDAQ

GB/mm

cc: John Paulian, Ohio EPA Central Office
Lisa Holscher, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318318277\2010-4-27 NEAR.doc



CLEVELAND DIVISION OF AIR QUALITY
GDF INSPECTION REPORT

REVISED: 05/16/2007



DAPC - APPENDIX N (GDF)

5/27/10

STATIC LEAK TEST RESULTS

13 18 31 8 277

Sunmart Mayfield

Stage II System: Vapor Balance [] Vacuum Assist []

Stage I System: Two point [] Coaxial [] Manifold? Aboveground [] Underground []

Tank #	1	2	3	
Product Grade	Reg Unl	Plu Unl	DSL	
Actual Tank Capacity, gallons	11682	7950	---	19632
Gasoline Volume	7729	1837	---	9566
Ullage, gallons (#2-#3)	3953	6113	---	10,066
Initial Pressure, inches H ₂ O				2.00
Number of Nozzles Served by Tank				10
Test Location: <u>Stage I VC</u> or Stage II Riser				Stage I VC
Pressure After 1 Minute, inches H ₂ O				2.00
Pressure After 2 Minutes, inches H ₂ O				2.00
Pressure After 3 Minutes, inches H ₂ O				2.00
Pressure After 4 Minutes, inches H ₂ O				2.00
Final Pressure After 5 Minutes, inches H ₂ O				2.00
Allowable Final Pressure				1.90

Static Leak Test Results: Pass [] Fail [] which tanks failed? _____

Notes: facility has stage II cert for this and Solon location

DYNAMIC PRESSURE TEST RESULTS

Quantity of gasoline introduced into Stage II, (gallons): 2 Riser [] Bellows []

Nozzle #	40 CFH 0.16" Max	60 CFH 0.35" Max	80 CFH 0.62" Max	Pass / Fail
1+2	.04	.10	.12	Pass
3+4	.06	.10	.14	Pass
5+6	.06	.10	.18	Pass
7+8	.06	.10	.14	Pass
9+10	.08	.18	.28	Pass

Nozzle #	40 CFH 0.16" Max	60 CFH 0.35" Max	80 CFH 0.62" Max	Pass / Fail

Did the gauge needle pulsate or peg at any flow rate during the test? Yes [] No []

Dynamic Pressure Results: Pass [] Fail []

Notes: Wayne / Dresser - Wayne G-70-153-AD

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1. Article Addressed to:

Mike Matzjka
Mayfield Corners Summit
6685 Mayfield Rd.
Mayfield Hts., OH 44124

2. Article Number

(Transfer from service label)

7009 3410 0002 1933 8479

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Alfred Keut

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

5-4-10

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

G.O.D.

4. Restricted Delivery? (Extra Fee)

Yes