



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 6479  
RETURN RECEIPT REQUESTED

9/2/11

Ibrahim Alqehim  
Randall Gas  
4889 Northfield Rd.  
North Randall, 44128

FACILITY ID: 13-18-38-8275  
NOTICE OF VIOLATION FOLLOW-UP LETTER

Dear Mr. Alqehim:

On 6/7/11, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation to Randall Gas located at 4889 Northfield Rd. in North Randall for failure to conduct a successful Air-to-Liquid Ratio test for dispensers #6, #7 and #8. CDAQ witnessed a successful Air-to-Liquid Ratio test for dispenser #6 on 7/5/11, however, dispensers #7 and #8 both failed due to no vacuum.

On 8/25/11, CDAQ received electronic copies of successful A/L re-test results for dispensers #7 and #8 for testing conducted 7/14/11.

Although the testing deficiencies that existed have been corrected, future correspondence will be issued regarding the failure of Stage II tests in two consecutive attempts (6/6/11, 7/5/11).

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. If 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 Randall Gas: 13-18-38-8275.

Sincerely,

Handwritten signature of Linda Kimmy in black ink.

Linda Kimmy  
Field Enforcement Manager

LK/dd



cc: John Paulian, Ohio EPA Central Office  
William MacDowell, U.S. EPA Region V  
✓ Facility File and L:\Data\Facilities\1318388275\2011-6-6 NEAR.docx

UNITED STATES P



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Cleveland Department of Public Health  
Division of Air Quality  
75 Erieview Plaza, 2<sup>nd</sup> Floor  
Cleveland, OH 44114-1839

Att: Dave DeChant



**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:

Ibrahim Algehim  
 Randall Gas  
 4889 Northfield Rd.  
 North Randall, OH 44128

13-18-38-8275

2. Article Number  
(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery  
 Bill Wessner 09/09/11

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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