



City of Cleveland
Frank G. Jackson, Mayor

Department of Public Health
Division of Air Quality
73 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 0397
RETURN RECEIPT REQUESTED

June 29, 2010

Gregg Budoï
Easy Energy USA, AM/PM #2408
PO Box 2508
Mansfield, OH 44906

NON-HPV

FACILITY ID: 13-18-53-7024

SECOND NOTICE OF VIOLATION : Failure to conduct Annual Stage II testing

Dear Mr. Budoï:

On May 12, 2010, the Cleveland Division of Air Quality (CDAQ) issued a Notice of Violation to Easy Energy USA dba AM/PM #2408 (AM/PM #2408) located at 34050 Aurora Road in Solon. This letter serves as notification that you are still operating sources in violation of the following applicable air statutes, air regulations, or air permit conditions.

AM/PM #2408 is in violation of Ohio Administrative Code (OAC) Rule 3745-21-09(DDD)(1)(c) which states that no owner or operator of a gasoline dispensing facility (GDF) may cause, allow, or permit the transfer of gasoline from a stationary tank at a GDF into a motor vehicle unless the vapor control system successfully passes the testing requirements contained in OAC Rule 3745-21-09(DDD)(2).

AM/PM #2408 has failed to conduct Stage II testing as required by Ohio Administrative Code (OAC) Rule 3745-21-09(DDD)(2)(f) at the frequency specified in the California Air Resources Board (CARB) certification for the Stage II vapor recovery equipment. Executive Order G-70-153-AD states that the owner or operator of the installation shall conduct, and pass, an Air-to-Liquid (A/L) Ratio test as specified in TP-201.5 and a Static Pressure Decay (SL) test as specified in Exhibit 3, no later than 60 days after startup and at least once in each twelve month period thereafter. An A/L Ratio and a Static Leak test were last conducted on January 5, 2009.

You remain in non-compliance unless you undertake some type of corrective action with respect to the above noted violations. CDAQ requests that AM/PM #2408 conduct Stage II testing and submit the test results within fourteen (14) days to the following enforcement representative:



Megan Murphy
Cleveland Division of Air Quality
75 Erieview Plaza 2nd 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 AM/PM #2408: 13-18-53-7024.

Sincerely,

Linda Kimmy for G.B.

George Baker
Chief of Enforcement

GB/mm

cc: Michael J. Krzywicki, CDAQ
John Paulian, Ohio EPA Central Office
Lisa Holscher, U.S. EPA Region V
Facility File and L:\Data\Facilities\1318537024\2010-5-7 2nd NOV.doc

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Gregg Budoi
AM/PM #2408
PO Box 2508
Mansfield, OH 44906

2. Article Number
(Transfer from service label)

7009 3410 0002 1934 0397

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Dawley Addressee

B. Received by (Printed Name) C. Date of Delivery
7/5/10

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

UNITED STATES POSTAL SERVICE



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

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

CDAQ
Attn: Megan Murphy
75 Erieview Plaza 2nd Floor
Cleveland, OH 44114

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2010-5-7 2nd NOV