



FORMAL COMPLAINT

Before the Illinois Pollution Control Board

Susanne M. Kirkham)
 Steven C. Kirkham)
)
)
 [Insert your name(s) in the space above])
 Complainant(s),)
)
 v.)
)
 Village of Poplar Grove, IL)
)
)
 [Insert name(s) of alleged polluter(s) in)
 the space above])
)
 Respondent(s))

RECEIVED
 CLERK'S OFFICE
 NOV 07 2018
 STATE OF ILLINOIS
 Pollution Control Board

PCB 20 19 - 70
 [For Board use only]

Note to the Complainant: If you do not use this Formal Complaint form and instead draft and type your own, it must contain all of the information requested by this form. All items must be completed. If there is insufficient space to complete any item, you may attach additional sheets, specifying the number of the item you are completing. Once you have completed the Formal Complaint, the Notice of Filing, and the Documentation of Service, you must "file" these three documents with the Clerk of the Board and "serve" a copy of each document on each respondent. Specific requirements for the filing, service, and contents of these documents are set forth in the Board's procedural rules (35 Ill. Adm. Code 101, 103) and addressed in the explanatory materials accompanying this form.

1. Your Contact Information

Name: Susanne M. and Steven C. Kirkham
Street Address: 19704 Dunham Rd.
Woodstock, IL 60098
County: McHenry
State: Illinois
Phone Number: (815) 341 - 4653

2. Place where you can be contacted during normal business hours (if different from above)

Name: _____
Street Address: _____
County: _____
State: _____
Phone Number: () - _____

3. Name and address of the respondent (alleged polluter)

Name: Village of Poplar Grove
Street Address: 200 Hill Street
Poplar Grove, IL 61065
County: Boone
State: Illinois
Phone Number: (815) 765 - 3201

4. Describe the type of business or activity that you allege is causing or allowing pollution (e.g., manufacturing company, home repair shop) and give the address of the pollution source if different than the address above.

The Sewer Treatment Plant operated by the Village of Poplar Grove

5. List specific sections of the Environmental Protection Act, Board regulations, Board order, or permit that you allege have been or are being violated.

Title 35 of the Illinois Administrative Code: Environment Protection;
Part 370: Illinois Recommended Standards for Sewage Works;
Subpart D: Sewage Pumping Stations;
Section 370.450: Emergency Operation

6. Describe the type of pollution that you allege (e.g., air, odor, noise, water, sewer back-ups, hazardous waste) and the location of the alleged pollution. Be as specific as you reasonably can in describing the alleged pollution.

Sewer back-up due to a power disruption (acknowledged by the Village, ref Exhibit I) that caused the discharge of raw untreated sewage that polluted the basement of the residence at 915 Beech Bay Road in Poplar Grove.

The photos of Exhibit II show the residual sewage and pollution left behind when the water receded.

7. Describe the duration and frequency of the alleged pollution. Be as specific as you reasonably can about when you first noticed the alleged pollution, how frequently it occurs, and whether it is still continuing (include seasons of the year, dates, and times of day if known).

Having recently purchased the property, this is our first experience. More disconcerting however (referring again to Exhibit I) is the Village's encouragement to all residents to install check valves to prevent back-ups. This implies a past history of such incidents. Check valves do not address the root cause of the problem, but as more residents install them it just diverts the sewage upstream to other unsuspecting residents, perpetuating the pollution.

8. Describe any bad effects that you believe the alleged pollution has or has had on human health, on plant or animal life, on the environment, on the enjoyment of life or property, or on any lawful business or activity.

The discharge of raw sewage into the basement left an odor and unknown bacteria and mold as evidence by the photos (ref again Exhibit II). All of which is harmful to human health and diminishes enjoyment and value of the property.

9. Describe the relief that you seek from the Board (e.g., an order requiring that the respondent stop polluting, take pollution abatement measures, perform a cleanup, reimburse cleanup costs, change its operation, or pay a civil penalty (note that the Board cannot order the respondent to pay your attorney fees or any out-of-pocket expenses that you incur by pursuing an enforcement action)).

We are requesting \$5,000 reimbursement for the initial cleanup (Ref Exhibit III – Mitigation Breakdown and Exhibit IV – Duraclean’s Invoice).

Plus \$8,862,12 for the repairs to rebuild the finished basement to it’s previous state (Ref Exhibit V – Put Back Breakdown).

The Board should also review the Village’s compliance to Section 370.450 and require any corrective action to prevent reoccurrences.

10. Identify any identical or substantially similar case you know of brought before the Board or in another forum against this respondent for the same alleged pollution (note that you need not include any complaints made to the Illinois Environmental Protection Agency or any unit of local government).

11. State whether you are representing (a) yourself as an individual or (b) your unincorporated sole proprietorship. Also, state whether you are an attorney and, if so, whether you are licensed and registered to practice law in Illinois. (Under Illinois law, an association, citizens group, unit of local government, or corporation must be represented before the Board by an attorney. Also, an individual who is not an attorney cannot represent another individual or other individuals before the Board. However, an individual who is not an attorney is allowed to represent (a) himself or herself as an individual or (b) his or her unincorporated sole proprietorship, though the individual may prefer having attorney representation.)

We are representing ourselves:

Susanne M. Kirkham – Property owner

Steven C. Kirkham – Spouse of Susanne

12. Susanne M Kirkham Steven C. Kirkham
(Complainant's signature)

CERTIFICATION
(optional but encouraged)

I, Susanne M Kirkham STEVEN C. KIRKHAM, on oath or affirmation, state that I have read the foregoing and that it is accurate to the best of my knowledge.

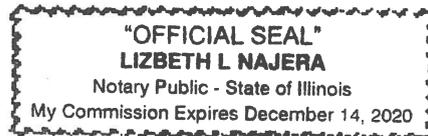
Susanne M Kirkham Steven C. Kirkham
(Complainant's signature)

Subscribed to and sworn before me

this 23rd day

of October, 2018.

[Signature]
Notary Public



My commission expires: December 14, 2020

RECEIVED
CLERK'S OFFICE

NOV 07 2018

TRANSMISSION



NOTICE OF FILING STATE OF ILLINOIS
Pollution Control Board

Note to the Complainant: This Notice of Filing must accompany the Formal Complaint and the Documentation of Service. Once you have completed the Notice of Filing, the Formal Complaint, and the Documentation of Service, you must file these three documents with the Board's Clerk *and* serve a copy of each document on each respondent.

Please take notice that today I, Susanne M. & Steven C. Kirkham, filed with the Clerk of the Illinois Pollution Control Board (Board) a Formal Complaint, a copy of which is served on you along with this Notice of Filing. You may be required to attend a hearing on a date set by the Board.

Failure to file an answer to this complaint within 60 days may have severe consequences. Failure to answer will mean that all allegations in the complaint will be taken as if admitted for purposes of this proceeding. If you have any questions about this procedure, you should contact the hearing officer assigned to this proceeding, the Clerk's Office or an attorney. 35 Ill. Adm. Code 103.204(f).

Susanne M. Kirkham Steven C. Kirkham
Complainant's signature

Street 19704 Dunham Rd.

City, state, zip code Woodstock, IL 60098

Date 10-23-18

INFORMATION FOR RESPONDENT RECEIVING FORMAL COMPLAINT

The following information has been prepared by the Board for general informational purposes only and does not constitute legal advice or substitute for the provisions of any statute, rule, or regulation. Information about the Formal Complaint process before the Board is found in the Environmental Protection Act (Act) (415 ILCS 5) and the Board's procedural rules (35 Ill. Adm. Code 101, 103). These can be accessed on the Board's website (www.ipcb.state.il.us). The following is a summary of some of the most important points in the Act and the Board's procedural rules.

Board Accepting Formal Complaint for Hearing; Motions

The Board will not accept this Formal Complaint for hearing if the Board finds that it is either "duplicative" or "frivolous" within the meaning of Section 31(d)(1) of the Act (415 ILCS 5/31(d)(1)) and Section 101.202 of the Board's procedural rules (35 Ill. Adm. Code 101.202 (definitions of the terms "duplicative" and "frivolous")). "Duplicative" means the complaint is identical or substantially similar to a case brought before the Board or another forum. See 35 Ill. Adm. Code 103.212(a) and item 10 of the Formal Complaint.

“Frivolous” means that the Formal Complaint seeks relief that the Board does not have the authority to grant or fails to state a cause of action upon which the Board can grant relief. For example, the Board has the authority to order a respondent to stop polluting and pay a civil penalty, to implement pollution abatement measures, or to perform a cleanup or reimburse cleanup costs. The Board does not have the authority, however, to award attorney fees to a citizen complainant. See 35 Ill. Adm. Code 103.212(a) and items 5 through 9 of the Formal Complaint.

If you believe that this Formal Complaint is duplicative or frivolous, you may file a motion with the Board, within 30 days after the date you received the complaint, requesting that the Board not accept the complaint for hearing. The motion must state the facts supporting your belief that the complaint is duplicative or frivolous. Memoranda, affidavits, and any other relevant documents may accompany the motion. See 35 Ill. Adm. Code 101.504, 103.212(b). If you need more than 30 days to file a motion alleging that the complaint is duplicative or frivolous, you must file a motion for an extension of time within 30 days after you received the complaint. A motion for an extension of time must state why you need more time and the amount of additional time you need. Timely filing a motion alleging that the Formal Complaint is duplicative or frivolous will stay the 60-day period for filing an Answer to the complaint. See 35 Ill. Adm. Code 103.204(e), 103.212(b); see *also* 35 Ill. Adm. Code 101.506 (generally, all motions to strike, dismiss, or challenge the sufficiency of any pleading must be filed within 30 days after service of the challenged document).

The party making a motion must “file” the motion with the Board’s Clerk and “serve” a copy of the motion on each of the other parties to the proceeding. The Board’s filing and service requirements are set forth in its procedural rules (35 Ill. Adm. Code 101.300, 101.302, 101.304), which are located on the Board’s website (www.ipcb.state.il.us).

If you do not file a motion with the Board within 30 days after the date on which you received the Formal Complaint, the Board may find that the complaint is not duplicative or frivolous and accept the case for hearing without any input from you. The Board will then assign a hearing officer who will contact you to schedule times for holding telephone status conferences and a hearing. See 35 Ill. Adm. Code 103.212(a).

Answer to Complaint

You have the right to file an Answer to this Formal Complaint within 60 days after you receive the complaint. If you timely file a motion alleging that the complaint is duplicative or frivolous, or a motion to strike, dismiss, or challenge the sufficiency of the complaint, then you may file an Answer within 60 days after the Board rules on your motion. See 35 Ill. Adm. Code 101.506, 103.204(d), (e), 103.212(b).

Failing to file an Answer to the Formal Complaint within 60 days after you were served with the complaint may have severe consequences. Failure to timely file an Answer will mean that all allegations in the Formal Complaint will be taken as if you admitted them

for purposes of this proceeding. If you have any questions about this procedure, you should contact the hearing officer assigned to this proceeding, the Clerk's Office, or an attorney. See 35 Ill. Adm. Code 103.204(f).

Necessity of an Attorney

Under Illinois law, an association, citizens group, unit of local government, or corporation must be represented before the Board by an attorney. In addition, an individual who is not an attorney cannot represent another individual or other individuals before the Board. However, even if an individual is not an attorney, he or she is allowed to represent (1) himself or herself as an individual or (2) his or her unincorporated sole proprietorship. See 35 Ill. Adm. Code 101.400(a). Such an individual may nevertheless wish to have an attorney prepare an Answer and any motions or briefs, and present a defense at hearing.

Costs

In defending against this Formal Complaint, you are responsible for your attorney fees, duplicating charges, travel expenses, witness fees, and any other costs that you or your attorney may incur. The Board requires no filing fee to file with the Board your Answer or any other document in the enforcement proceeding. The Board will pay its own hearing costs (e.g., hearing room rental, court reporting fees, hearing officer expenses).

If you have any questions, please contact the Clerk's Office at (312) 814-3461.

_____ [month/date], 20___. [Attach the other person's signed affidavit or declaration showing the date of delivery.]

E. _____ Personal service and another person made or will make the personal delivery. However, the affidavit of service signed by the other person (or the declaration of service signed by the process server) who made or will make the personal delivery is not available to me at this time. On _____ [month/date], 20__, by the time of __:__ AM/PM, at

[address where you provided the documents to the person making the personal delivery], copies of the attached Formal Complaint and Notice of Filing were provided to _____ [name of the person making the personal delivery], with the respondent's address appearing on the envelope or package containing these documents, and with proper delivery charge prepaid. [Within seven days after it becomes available to you, file with the Board's Clerk the affidavit or declaration of service—containing the signature of the person who made personal delivery and showing the date of delivery—and identify the Formal Complaint to which that affidavit or declaration corresponds.]

RESPONDENT'S ADDRESS:

Name Village of Poplar Grove

Street 200 Hill Street

City, state, zip code Poplar Grove, IL 61065
(list each respondent's name and address if multiple respondents)

Suparna M. Kulkarni Steven C. Kirkham
Complainant's signature

Street 19704 Dunham Rd.

City, state, zip code Woodstock, IL 60098

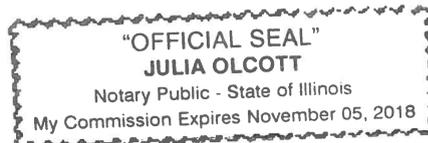
Date Oct 31, 2018

Subscribed to and sworn before me

this 31 day

of Oct, 2018

[Signature]
Notary Public



My commission expires: 11/05/18

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ 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.		A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: VILLAGE OF POPLAR GROVE, IL 200 N. HILL STREET POPLAR GROVE, IL 61065 ATTN: OWEN COSTANZA PRESIDENT		B. Received by (Printed Name) Katelyn Taster	C. Date of Delivery
2. Article Number (Transfer from service label) 7017 0530 0001 0646 2745		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Mail Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		Domestic Return Receipt	

USPS Tracking®

FAQs > (<https://www.usps.com/faqs/uspstracking-faqs.htm>)

Track Another Package +

Tracking Number: 70170530000106462745

Remove X

On Time

Expected Delivery on

FRIDAY

26 OCTOBER
2018 ⓘ

See Product Information ∨

Feedback

✓ Delivered

October 26, 2018 at 1:16 pm
Delivered, Left with Individual
POPLAR GROVE, IL 61065

Get Updates ∨

Text & Email Updates



Tracking History



Product Information



See Less ^

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WOODSTOCK
1050 COUNTRY CLUB RD
WOODSTOCK
IL
60098-6402
1686160098
(800)275-8777 9:17 AM

10/24/2018

=====

Product Description	Sale Qty	Final Price
First-Class Mail Large Envelope (Domestic) (POPLAR GROVE, IL 61065) (Weight:0 Lb 6.50 Oz) (Estimated Delivery Date) (Friday 10/26/2018)	1	\$2.26
Certified (®®USPS Certified Mail #) (70170530000106462745)	1	\$3.45
Return Receipt (®®USPS Return Receipt #) (9590940241458092794522)	1	\$2.75
Total		\$8.46
Cash		\$8.46

=====

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

7017 0530 0001 0646 2745

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
POPLAR GROVE, IL 61065	
Certified Mail Fee \$3.45	
Extra Services & Fees (check box, add fee \$ appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$0.00	
<input type="checkbox"/> Return Receipt (electronic) \$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery \$0.00	
<input type="checkbox"/> Adult Signature Required \$0.00	Postage \$2.26
<input type="checkbox"/> Adult Signature Restricted Delivery \$0.00	Total Postage and Fees \$8.46
Sent To VILLAGE OF POPLAR GROVE, IL Street and Apt. No., or PO Box No. 200 N. HILL STREET City, State, ZIP+4® POPLAR GROVE, IL 61065	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for instructions	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
VILLAGE OF POPLAR GROVE, IL
200 N. HILL STREET
POPLAR GROVE, IL 61065
ATTN: OWEN COSTANZA
PRESIDENT



9590 9402 4145 8092 7945 22

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Katelyn Jaster Agent Addressee

B. Received by (Printed Name)
Katelyn Jaster

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

2. Article Number (Transfer from service label)
7017 0530 0001 0646 2745

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery



VILLAGE OF POPLAR GROVE

"A Great Place to Call Home"

200 Hill Street, P.O. Box 1, Poplar Grove, IL 61065

Phone: (815) 765-3201 – Fax: (815)765-3571

www.villageofpoplargo.com

May 16, 2018

TWINSINO

RE: Sanitary Sewer Back-Up – Bel Air Subdivision

Dear Residents:

Some residents recently experienced a sanitary sewer back-up in their home on April 28. Upon information provided to the Village, it appears at this time that a vehicular collision caused a power line disruption which then caused a power surge that tripped the breaker controlling the pump actuation device at the Village lift station.

As soon as the Village was made aware of the power disruption, Village staff immediately responded to the situation and assessed what action needed to be taken to restore power to the lift station. Please see the enclosed ComEd claim form to submit a reimbursement request from the utility provider

The Village realizes that back-ups can cause serious inconvenience for residents. Every attempt is made to prevent backups in the public wastewater system before they occur. Sewer lines are specially designed to prevent accumulation and stoppages.

In addition, we have maintenance crews that are devoted to inspecting and cleaning wastewater lines throughout the Village on a regular schedule. Even with our maintenance schedule, however, backups are often beyond the Village's control. Most that do occur are confined to the sewage pipeline, rather than backing up into a home. In the majority of cases, a special rider will need to be added to your homeowner's or renter's insurance policy to cover damages related to sewage backups or water damage. This optional coverage is usually not very expensive, but you must usually request that it be added to your policy. Check with your insurance agent about this policy provision.

Finally, as a precautionary measure, a check-valve installed by a licensed plumber would serve to alleviate further back-up issues. They are relatively inexpensive to purchase and install. Several residents in the area have installed the valves providing adequate protection in issues where back-ups have surfaced. We would encourage all residents to consider this measure as these devices can assist in the prevention of back-ups.

If you do decide to request reimbursement from the Village for damages incurred, contact the Public Works Department during normal working hours at 815-765-3201 and ask for the Village of Poplar Grove's insurance contact information.

All requests for reimbursement will be filed with the Village's insurance carrier. The Village considers all determinations made by the insurance carrier to be final.

EXHIBIT I



VILLAGE OF POPLAR GROVE

"A Great Place to Call Home"

200 Hill Street, P.O. Box 1, Poplar Grove, IL 61065

Phone: (815) 765-3201 – Fax: (815) 765-3571

www.villageofpoplargo.com

Should you have any further questions, please do not hesitate to call my office.

Respectfully,

A handwritten signature in black ink, appearing to read "Joseph Capovilla". The signature is fluid and cursive, with a large initial "J" and "C".

Joseph Capovilla, MBA
Director of Public Works
Village of Poplar Grove

EXHIBIT I

Bathroom

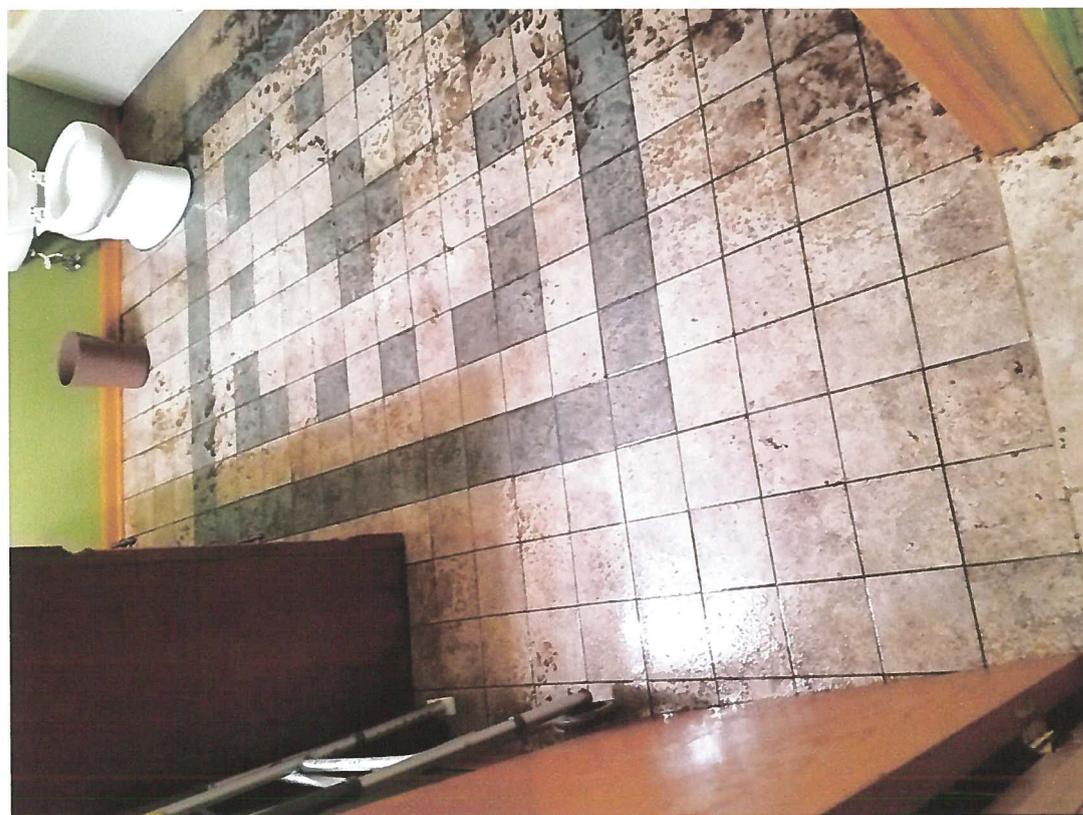
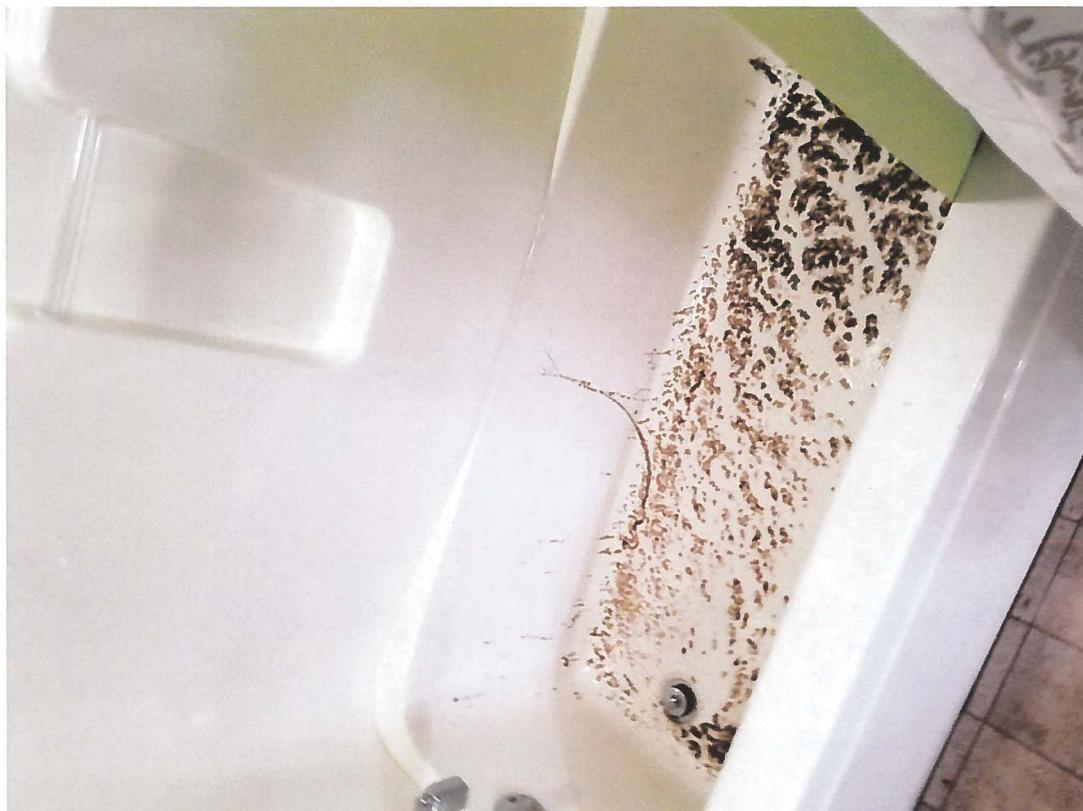


EXHIBIT II

Bathroom

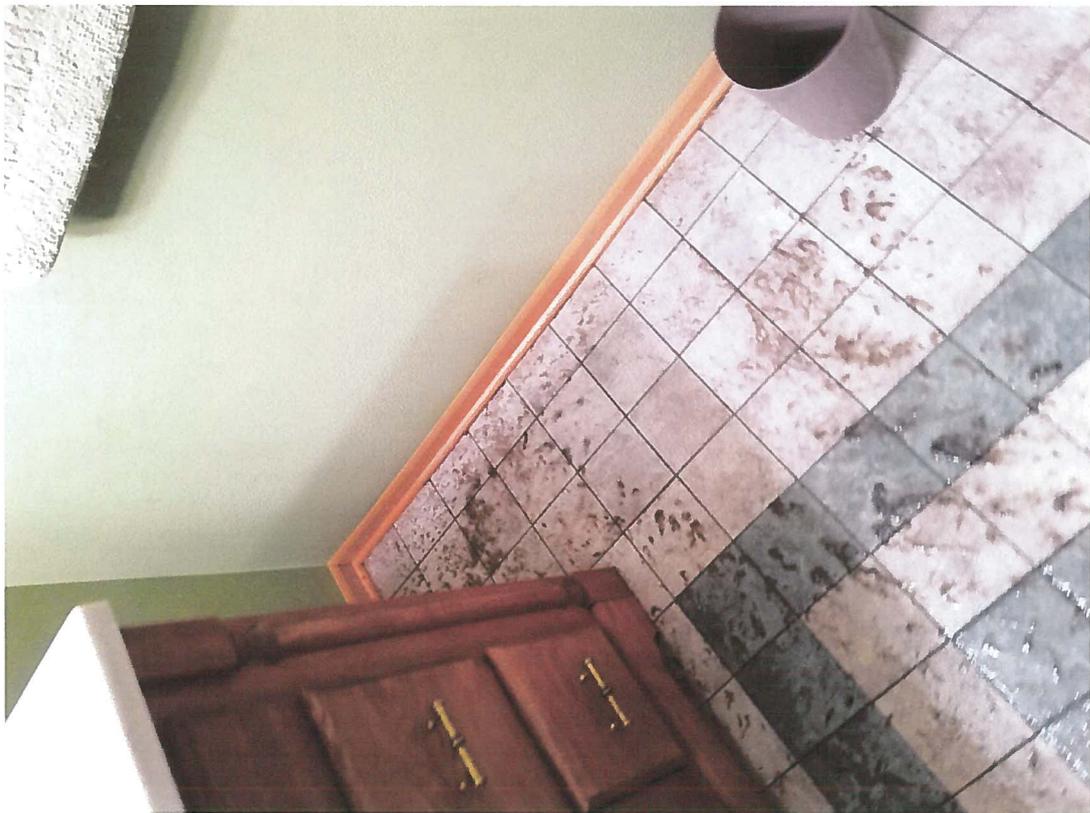
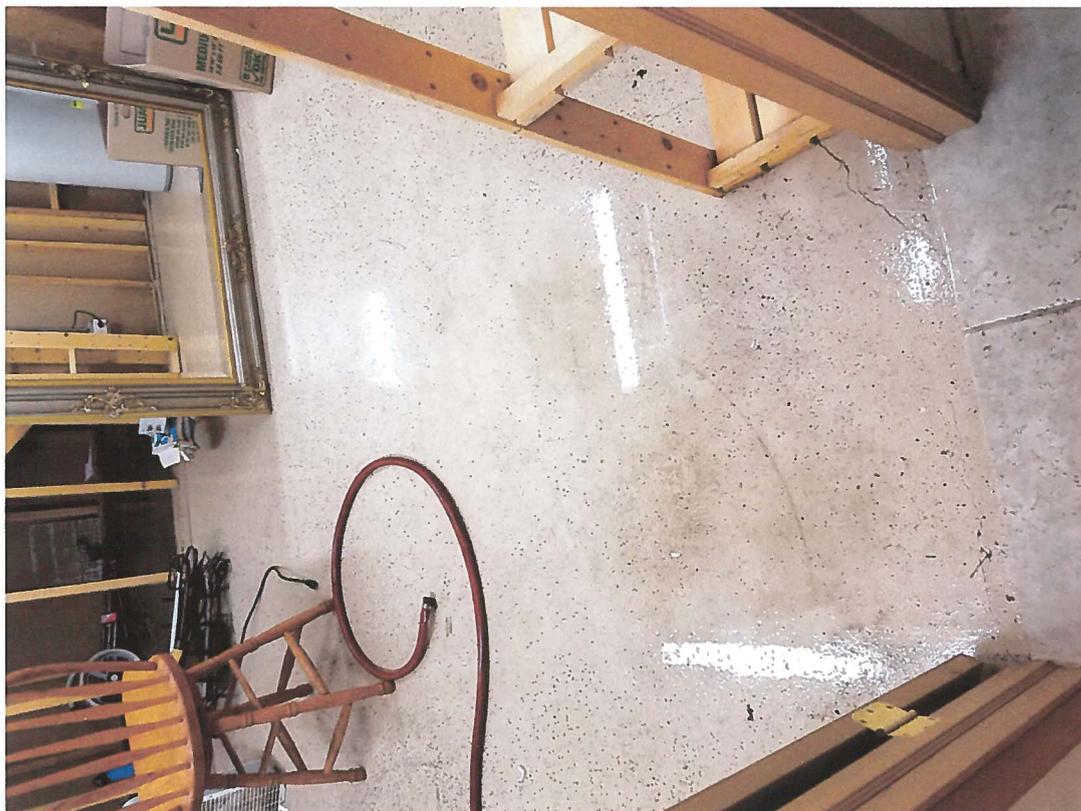


EXHIBIT II

Mech Room



Bathroom

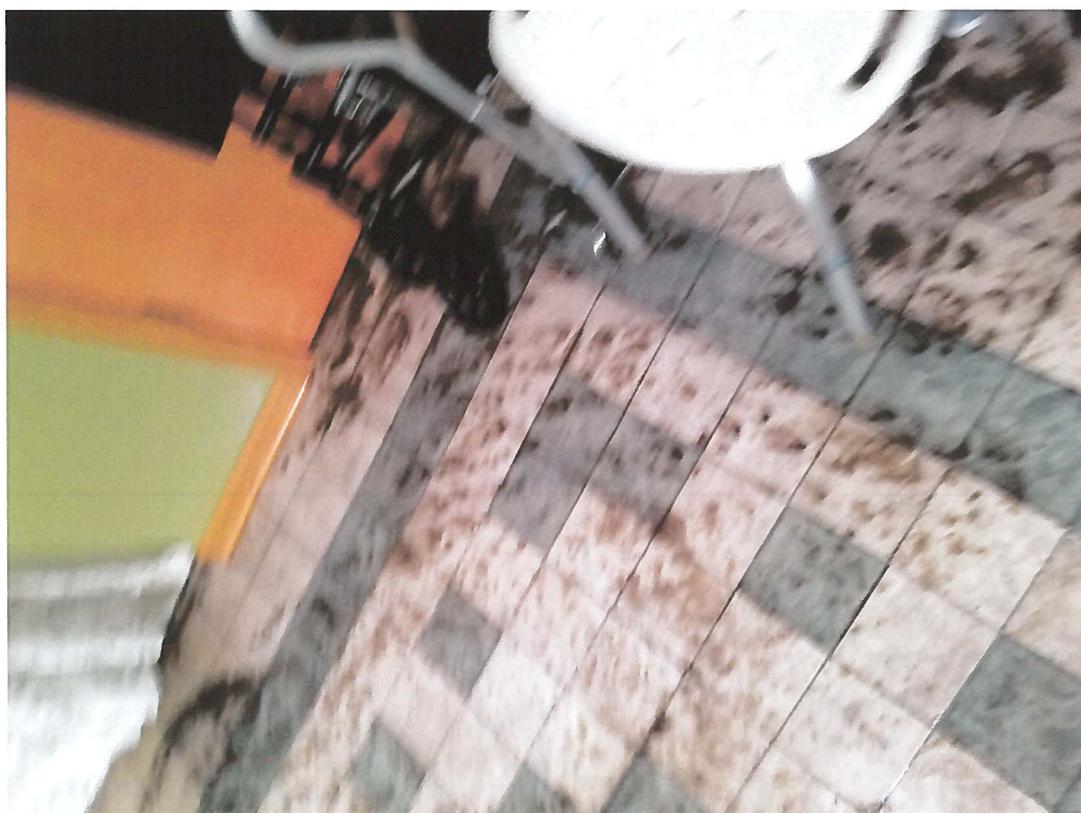


EXHIBIT II

Hallway

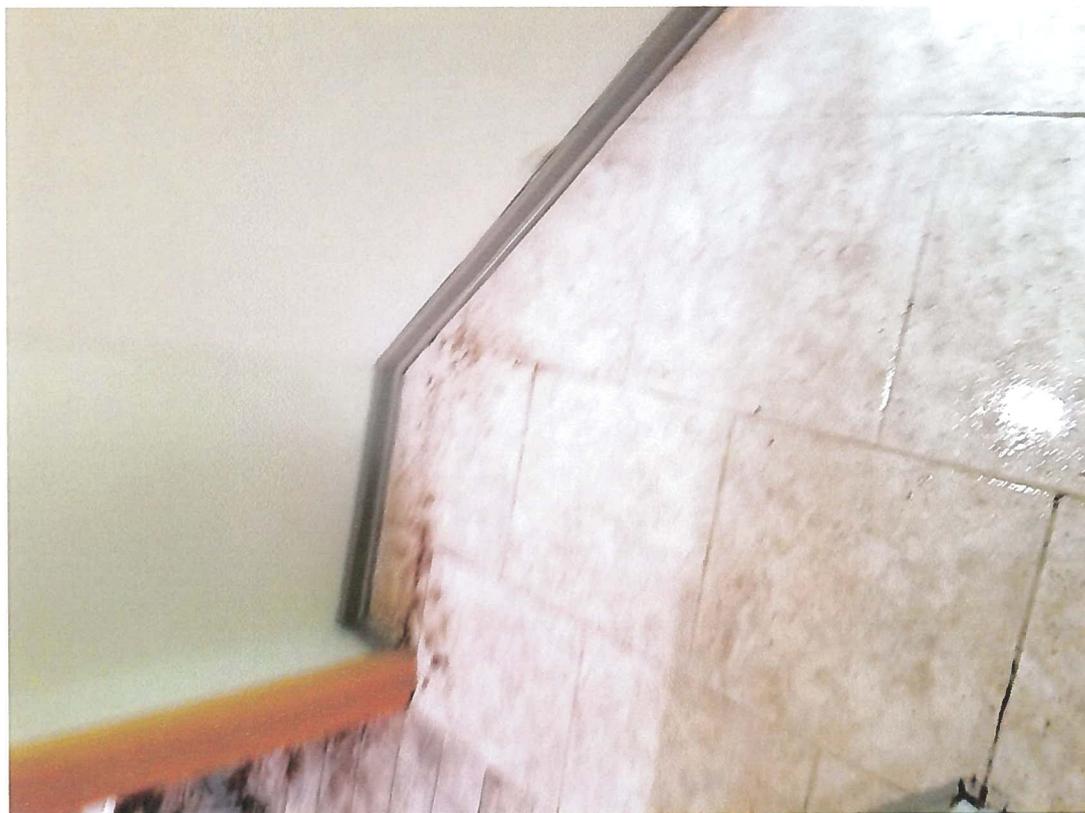
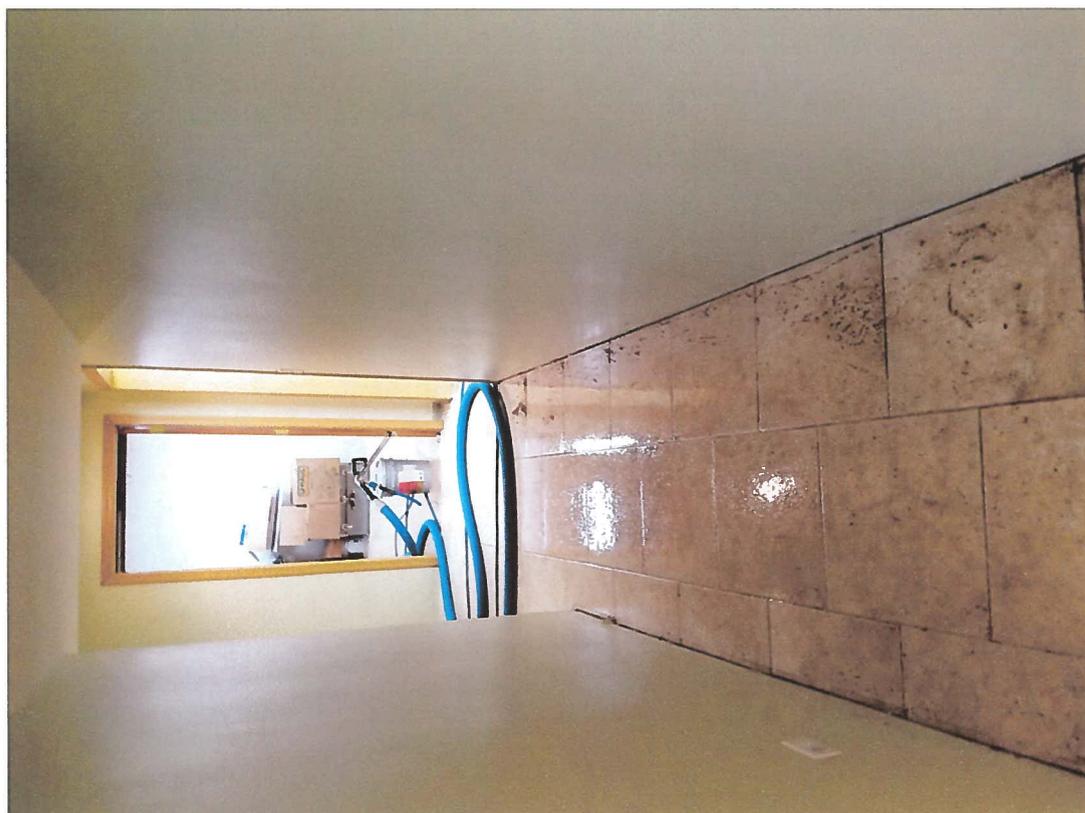


EXHIBIT II

Work Room

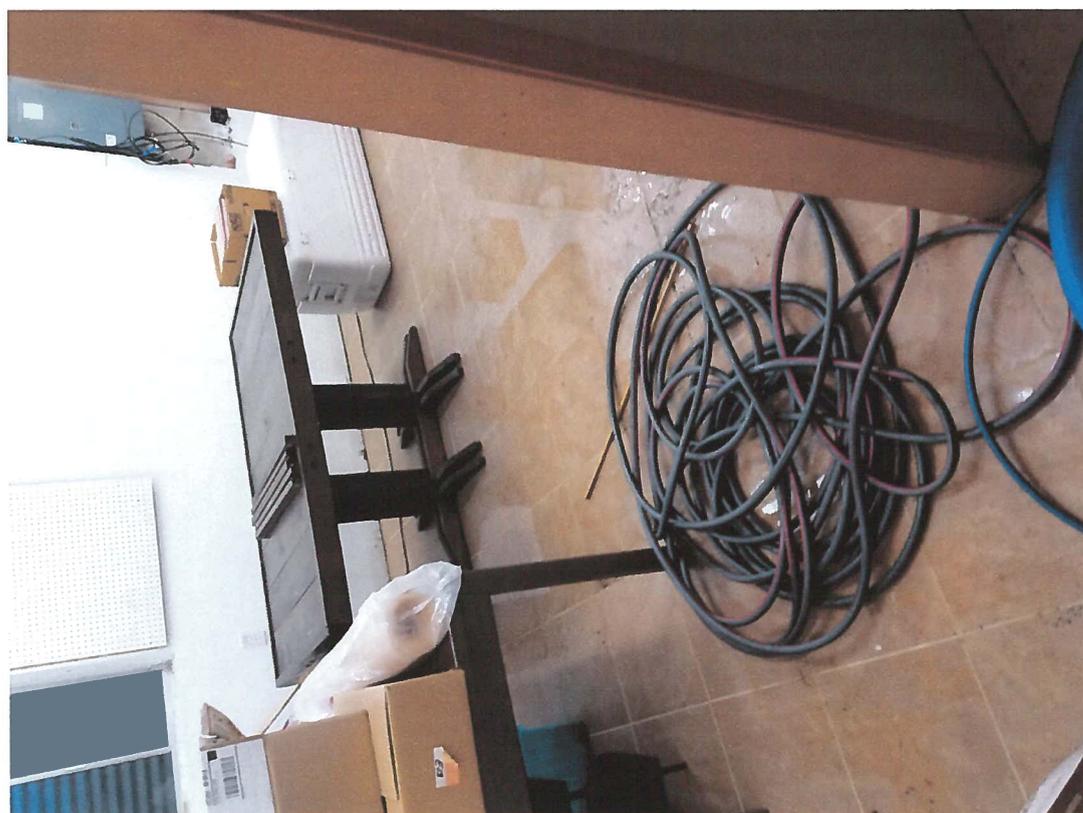
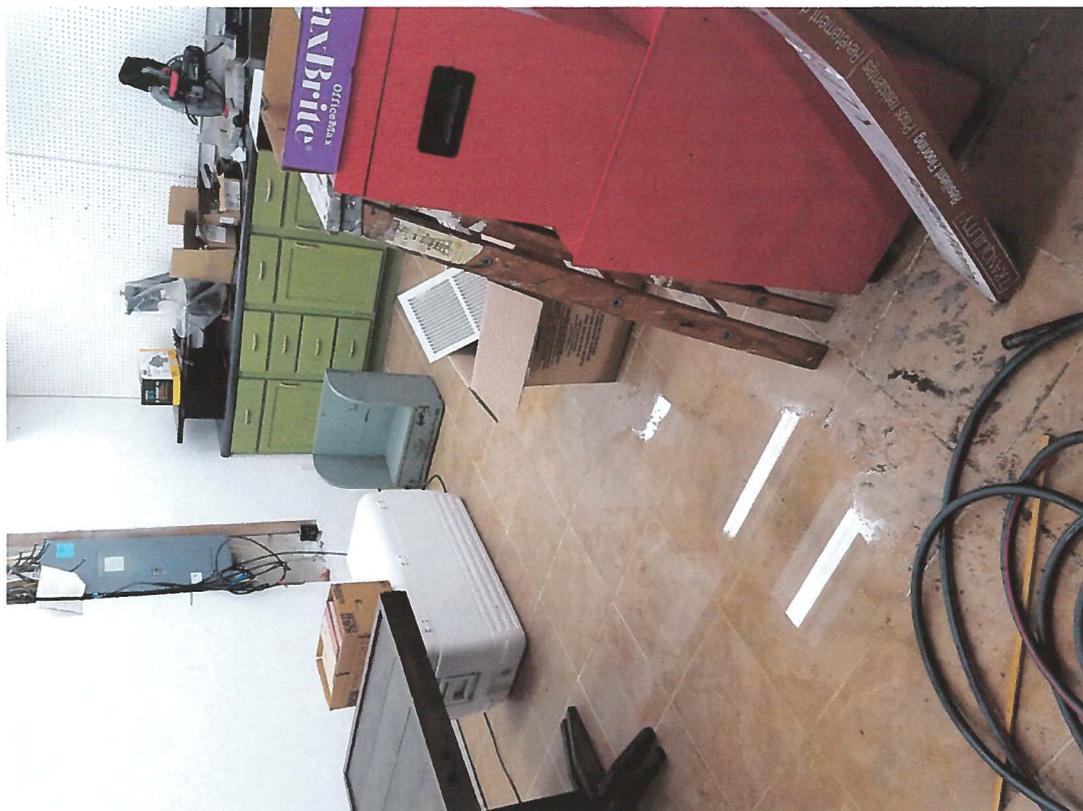


EXHIBIT II

Work Room



EXHIBIT II

Work Room



EXHIBIT II



DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
1989 Belford North Drive
Belvidere, IL 61008
815-544-9244

Client: Susanne Kirkham
Property: 915 Beechbay Road
Poplar Grove, IL 61065
Billing: 19704 Dunham Road
Woodstock, IL 60098

Home: (815) 943-1176

Operator Info:
Operator: JOE

Type of Estimate:
Date Entered: 4/30/2018 Date Assigned:

Price List: ILR07X_APR18
Labor Efficiency: Restoration/Service/Remodel
Estimate: 2018-04-17-2053

Mitigation Breakdown

Thank you for allowing Duraclean to serve your restoration needs. There is never a convenient time to experience water damage in your home or office. In order to minimize damage and "preserve and protect" your furnishings, proper steps must be taken in a timely manner. Duraclean's experienced and knowledgeable staff can help you through this stressful time.

If you have any questions please feel free to contact us at 815-544-9244 or 866-544-9244

Our Tax I.D. number is 36-4162277

EXHIBIT III



DURACLEAN SPECIALISTS, INC.

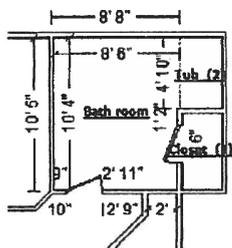
Your "After the Disaster Team"
 1989 Belford North Drive
 Belvidere, IL 61008
 815-544-9244

2018-04-17-2053

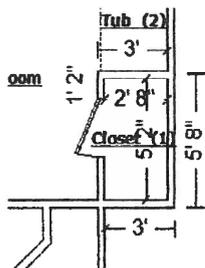
2018-04-17-2053

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
1. Emergency service call - after business hours	1.00 EA	0.00	200.68	200.68
2. Equip. setup, take down & monitoring - after hrs 2 man hrs set up	2.00 HR	0.00	71.73	143.46
3. Equipment setup, take down, and monitoring (hourly charge) 1 monitoring trip 2 man hrs take down	3.00 HR	0.00	47.79	143.37
4. Haul debris - per pickup truck load - including dump fees	1.00 EA	136.17	0.00	136.17
Total: 2018-04-17-2053				623.68

Main Level



Bath room		Height: 8'
261.07 SF Walls	86.75 SF Ceiling	
347.82 SF Walls & Ceiling	86.75 SF Floor	
9.64 SY Flooring	32.63 LF Floor Perimeter	
32.63 LF Ceil. Perimeter		



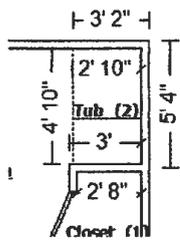
Subroom: Closet (1)		Height: 8'
125.33 SF Walls	13.78 SF Ceiling	
139.11 SF Walls & Ceiling	13.78 SF Floor	
1.53 SY Flooring	15.67 LF Floor Perimeter	
15.67 LF Ceil. Perimeter		



DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
 1989 Belford North Drive
 Belvidere, IL 61008
 815-544-9244

CONTINUED - Bath room



Subroom: Tub (2)

Height: 8'

85.33 SF Walls	13.69 SF Ceiling
99.03 SF Walls & Ceiling	13.69 SF Floor
1.52 SY Flooring	10.67 LF Floor Perimeter
10.67 LF Ceil. Perimeter	

Missing Wall

4' 10" X 8'

Opens into BATH_ROOM

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
5. Apply anti-microbial agent to more than the floor - after hours floor, toilet, tub and wall cavities for a CAT 3 loss	228.44 SF	0.00	0.30	68.53
6. Water extract from hard surf flr - Cat 3 wtr - aft bus hrs	114.22 SF	0.00	1.13	129.07
7. Content Manipulation charge - per hour - after hours	0.50 HR	0.00	56.45	28.23
8. Clean floor - Heavy	114.22 SF	0.00	0.49	55.97
9. Tear out baseboard and bag for disp. - up to Cat 3 aft hrs	58.97 LF	1.10	0.00	64.87
10. Cabinet - vanity unit - Detach	3.00 LF	0.00	13.38	40.14
11. Countertop - flat laid plastic laminate - Detach	3.00 LF	0.00	5.06	15.18
12. Toilet - Detach	1.00 EA	0.00	38.72	38.72
13. Interior door slab only - Detach	2.00 EA	0.00	5.11	10.22
14. Dehumidifier (per 24 hour period) - XLarge - No monitoring 1 unit for 3 days	3.00 EA	0.00	114.72	344.16
15. Air mover axial fan (per 24 hour period) - No monitoring 2 units for 3 days each	6.00 EA	0.00	29.78	178.68
16. Tear out wet drywall, cleanup, bag, per LF - up to 2' tall	58.97 LF	4.34	0.00	255.93
Totals: Bath room				1,229.70

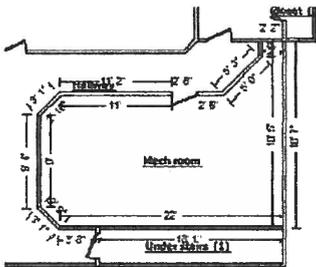


DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
 1989 Belford North Drive
 Belvidere, IL 61008
 815-544-9244

CONTINUED - Work room

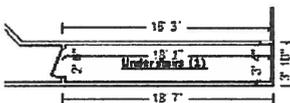
DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
26. Tear out baseboard - after business hours	63.41 LF	0.59	0.00	37.41
27. Content Manipulation charge - per hour - after hours	1.00 HR	0.00	56.45	56.45
28. Clean floor - Heavy	235.37 SF	0.00	0.49	115.33
29. Air mover axial fan (per 24 hour period) - No monitoring 3 units for 3 days each	9.00 EA	0.00	29.78	268.02
30. Dehumidifier (per 24 hour period) - XLarge - No monitoring 1 unit for 3 days	3.00 EA	0.00	114.72	344.16
31. Cabinet - lower (base) unit - Detach	10.00 LF	0.00	15.65	156.50
32. Countertop - flat laid plastic laminate - Detach	10.00 LF	0.00	5.06	50.60
33. Tear out wet drywall, cleanup, bag, per LF - up to 2' tall	14.00 LF	4.34	0.00	60.76
Totals: Work room				1,369.32



Mech room

Height: 8'

640.57 SF Walls	325.36 SF Ceiling
965.93 SF Walls & Ceiling	325.36 SF Floor
36.15 SY Flooring	80.07 LF Floor Perimeter
80.07 LF Ceil. Perimeter	



Subroom: Under stairs (1)

Height: 8'

342.67 SF Walls	60.28 SF Ceiling
402.94 SF Walls & Ceiling	60.28 SF Floor
6.70 SY Flooring	42.83 LF Floor Perimeter
42.83 LF Ceil. Perimeter	

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
34. Apply anti-microbial agent to more than the floor - after hours	771.27 SF	0.00	0.30	231.38

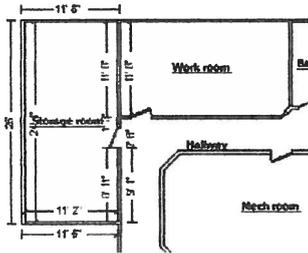


DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
 1989 Belford North Drive
 Belvidere, IL 61008
 815-544-9244

CONTINUED - Mech room

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
For a CAT 2 grey water loss				
35. Water extract from hard surf flr - Cat 3 wtr - aft bus hrs	385.64 SF	0.00	1.13	435.77
36. Clean floor - Heavy	385.64 SF	0.00	0.49	188.96
37. Content Manipulation charge - per hour - after hours	1.00 HR	0.00	56.45	56.45
38. Air mover axial fan (per 24 hour period) - No monitoring 2 units for 3 days each	6.00 EA	0.00	29.78	178.68
Totals: Mech room				1,091.24



Storage room

Height: 8'

568.00 SF Walls	271.72 SF Ceiling
839.72 SF Walls & Ceiling	271.72 SF Floor
30.19 SY Flooring	71.00 LF Floor Perimeter
71.00 LF Ceil. Perimeter	

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
39. Apply anti-microbial agent to more than the floor - after hours	543.44 SF	0.00	0.30	163.03
For a CAT 2 grey water loss				
40. Water extract from hrd surf flr - Cat 2 wtr - aft bus hrs	271.72 SF	0.00	0.59	160.31
41. Clean floor - Heavy	271.72 SF	0.00	0.49	133.14
42. Content Manipulation charge - per hour - after hours	1.00 HR	0.00	56.45	56.45
43. Air mover axial fan (per 24 hour period) - No monitoring 2 units for 3 days each	6.00 EA	0.00	29.78	178.68
Totals: Storage room				691.61

Total: Main Level 5,284.08

Line Item Totals: 2018-04-17-2053 5,907.76



DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
1989 Belford North Drive
Belvidere, IL 61008
815-544-9244

Grand Total Areas:

3,363.08 SF Walls	1,220.79 SF Ceiling	4,583.87 SF Walls and Ceiling
1,220.79 SF Floor	135.64 SY Flooring	420.39 LF Floor Perimeter
0.00 SF Long Wall	0.00 SF Short Wall	420.39 LF Ceil. Perimeter
1,220.79 Floor Area	1,317.43 Total Area	3,363.08 Interior Wall Area
1,399.50 Exterior Wall Area	155.50 Exterior Perimeter of Walls	
0.00 Surface Area	0.00 Number of Squares	0.00 Total Perimeter Length
0.00 Total Ridge Length	0.00 Total Hip Length	



Duraclean Specialists, Inc.
 1989 Belford North Drive
 Belvidere, IL 61008
 815.544.9244; 866.544.9244
 Fax: 815.544.5834
 info@duraclean.us

Service Slip / Invoice

ORDER: 107803
WORK DATE: 04/27/18
 Friday

Bill-To: [106900]
 Steve Anderson
 915 Beech Bay Rd
 Poplar Grove, IL 61065-8240

Work Location: [106900] 815-262-3424
 Steve Anderson
 915 Beech Bay Rd
 Poplar Grove, IL 61065-8240

Work Date: 04/27/18 Time: Technician: JOE Time In: Joseph Bartz

Purchase Order: Terms: UPON COMPLETION Last Service: 10/24/16 Map Code: Time Out:

Quantity	Item	Description	Price	Total
1	WR.	Water Damage Restoration Service per Breakdown	\$5,907.7600	\$5,907.76
1	RS.DEDUCT	Deductible for Insurance Work	(\$1,000.0000)	(\$1,000.00)
1	WR.PD	Self pay discount	\$0.0000	\$0.00

(-907.76)

SUBTOTAL \$4,907.76
TAX \$0.00
TOTAL \$4,907.76
AMOUNT DUE ~~\$4,907.76~~

Pal ✓ # 7084

4,000.00

Thank you for letting us serve you

* Charges outstanding over 30 days from the date of service are subject to a FINANCE CHARGE. The annual percentage rate is 18.0%. Customer agrees to pay accrued expenses in the event of collection.

I hereby acknowledge the satisfactory completion of all services rendered, and agree to pay the cost of services as specified above.

PLEASE PAY FROM THIS INVOICE

X _____
 CUSTOMER SIGNATURE

EXHIBIT IV

View Posted Transaction Printable View

View Posted Transaction Printable View

Description: REGULAR CHECK
 From Account: BMO Harris Select Money Market - *4734
 Amount: \$1,000.00
 Status: Posted
 Date/Time Posted: May 1, 2018 11:59 PM CDT
 Cust Reference #: 1073

Check

Enlarge Save

Enlarge Save

View:



8015281991743

152830025600 04-30
 Alpine Bank & Trust
 Rockford, IL

ANY TO BE DEPOSITED
 MUST BE DEPOSITED
 WITHIN 60 DAYS
 OF THE DATE OF
 ISSUANCE
 OTHERWISE THE
 PAYEE MAY BE
 RESPONSIBLE FOR
 THE LOSS OF THE
 FUNDS

View Posted Transaction Printable View

View Posted Transaction Printable View

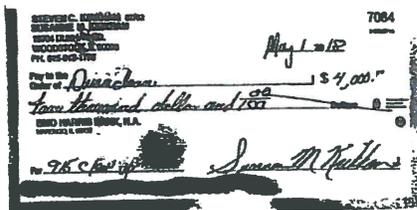
Description: REGULAR CHECK
 From Account: BMO Harris Portfolio Checking - *0555
 Amount: \$4,000.00
 Status: Posted
 Date/Time Posted: May 1, 2018 11:59 PM CDT
 Cust Reference #: 7084

Check

Enlarge Save

Enlarge Save

View:



8015281991743

152900011100 05-01-2018 >07193207C
 Alpine Bank & Trust Company
 Rockford, IL

For Deposit

EXHIBIT IV



DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
1989 Belford North Drive
Belvidere, IL 61008
815-544-9244

Client: Susanne Kirkham
Property: 915 Beechbay Road
Poplar Grove, IL 61065
Billing: 19704 Dunham Road
Woodstock, IL 60098

Home: (815) 943-1176

Operator Info:
Operator: JOE

Type of Estimate:
Date Entered: 4/30/2018 Date Assigned:

Price List: ILRO7X_APR18
Labor Efficiency: Restoration/Service/Remodel
Estimate: 2018-04-17-2054

Put back Breakdown

Thank you for allowing Duraclean to serve your restoration needs. There is never a convenient time to experience water damage in your home or office. In order to minimize damage and "preserve and protect" your furnishings, proper steps must be taken in a timely manner. **Duraclean's** experienced and knowledgeable staff can help you through this stressful time.

If you have any questions please feel free to contact us at 815-544-9244 or 866-544-9244

Our Tax I.D. number is 36-4162277

EXHIBIT V

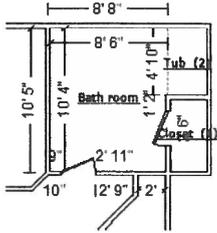


DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
 1989 Belford North Drive
 Belvidere, IL 61008
 815-544-9244

2018-04-17-2054

Main Level



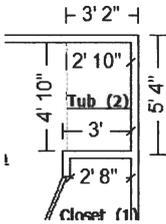
Bath room **Height: 8'**

261.07 SF Walls	86.75 SF Ceiling
347.82 SF Walls & Ceiling	86.75 SF Floor
9.64 SY Flooring	32.63 LF Floor Perimeter
32.63 LF Ceil. Perimeter	



Subroom: Closet (1) **Height: 8'**

125.33 SF Walls	13.78 SF Ceiling
139.11 SF Walls & Ceiling	13.78 SF Floor
1.53 SY Flooring	15.67 LF Floor Perimeter
15.67 LF Ceil. Perimeter	



Subroom: Tub (2) **Height: 8'**

85.33 SF Walls	13.69 SF Ceiling
99.03 SF Walls & Ceiling	13.69 SF Floor
1.52 SY Flooring	10.67 LF Floor Perimeter
10.67 LF Ceil. Perimeter	

Missing Wall

4' 10" X 8'

Opens into BATH_ROOM

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
44. R&R 1/2" drywall - hung, taped, with smooth wall finish	117.93 SF	0.37	2.45	332.56
45. Seal the walls w/latex based stain blocker - one coat	471.74 SF	0.00	0.51	240.59
46. Paint the walls - one coat	471.74 SF	0.00	0.55	259.46
47. Toilet - Reset	1.00 EA	0.00	137.74	137.74
48. Countertop - post formed plastic laminate - Reset	3.00 LF	0.00	9.60	28.80
49. Detach & Reset Custom cabinets - vanity units	3.00 LF	0.00	0.00	153.33
50. R&R Baseboard - 2 1/4" stain grade	58.97 LF	0.37	2.90	192.83
51. R&R Casing - 2 1/4" stain grade	51.00 LF	0.44	2.27	138.21

EXHIBIT V

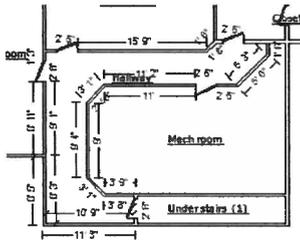


DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
 1989 Belford North Drive
 Belvidere, IL 61008
 815-544-9244

CONTINUED - Bath room

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
52. R&R Base shoe - stain grade	58.97 LF	0.15	1.33	87.28
54. Stain & finish baseboard	58.97 LF	0.00	1.31	77.25
55. Stain & finish base shoe or quarter round	58.97 LF	0.00	1.06	62.51
56. Stain & finish casing	51.00 LF	0.00	1.31	66.81
Totals: Bath room				1,777.37



Hallway

Height: 8'

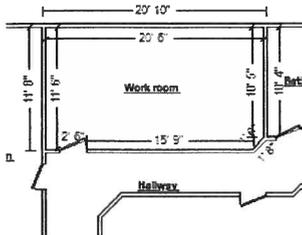
832.86 SF Walls	213.84 SF Ceiling
1,046.70 SF Walls & Ceiling	213.84 SF Floor
23.76 SY Flooring	104.11 LF Floor Perimeter
104.11 LF Ceil. Perimeter	

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
57. R&R 1/2" drywall - hung, taped, with smooth wall finish	20.00 SF	0.37	2.45	56.40
58. Seal the walls w/latex based stain blocker - one coat	832.86 SF	0.00	0.51	424.76
59. Paint the walls - one coat	832.86 SF	0.00	0.55	458.07
60. R&R Baseboard - 2 1/4" stain grade	104.11 LF	0.37	2.90	340.44
61. R&R Casing - 2 1/4" stain grade	34.00 LF	0.44	2.27	92.14
62. R&R Base shoe - stain grade	104.11 LF	0.15	1.33	154.09
63. Stain & finish baseboard	104.11 LF	0.00	1.31	136.38
64. Stain & finish base shoe or quarter round	104.11 LF	0.00	1.06	110.36
65. Stain & finish casing	34.00 LF	0.00	1.31	44.54
Totals: Hallway				1,817.18



DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
 1989 Belford North Drive
 Belvidere, IL 61008
 815-544-9244



Work room

Height: 8'

507.25 SF Walls	235.37 SF Ceiling
742.62 SF Walls & Ceiling	235.37 SF Floor
26.15 SY Flooring	63.41 LF Floor Perimeter
63.41 LF Ceil. Perimeter	

DESCRIPTION	QNTY	REMOVE	REPLACE	TOTAL
66. R&R 1/2" drywall - hung, taped, with smooth wall finish	126.81 SF	0.37	2.45	357.60
67. Seal the walls w/latex based stain blocker - one coat	507.25 SF	0.00	0.51	258.70
68. Paint the walls - one coat	507.25 SF	0.00	0.55	278.99
69. R&R Baseboard - 2 1/4" stain grade	63.41 LF	0.37	2.90	207.35
71. R&R Base shoe - stain grade	63.41 LF	0.15	1.33	93.85
72. Stain & finish baseboard	63.41 LF	0.00	1.31	83.07
73. Stain & finish base shoe or quarter round	63.41 LF	0.00	1.06	67.21
75. R&R Cabinetry - lower (base) units	11.00 LF	6.61	162.24	1,857.35
76. R&R Countertop - post formed plastic laminate	11.00 LF	3.65	44.11	525.36
Totals: Work room				3,729.48
Total: Main Level				7,324.03
Line Item Totals: 2018-04-17-2054				7,324.03

Grand Total Areas:

3,363.08 SF Walls	1,220.79 SF Ceiling	4,583.87 SF Walls and Ceiling
1,220.79 SF Floor	135.64 SY Flooring	420.39 LF Floor Perimeter
0.00 SF Long Wall	0.00 SF Short Wall	420.39 LF Ceil. Perimeter
1,220.79 Floor Area	1,317.43 Total Area	3,363.08 Interior Wall Area
1,399.50 Exterior Wall Area	155.50 Exterior Perimeter of Walls	
0.00 Surface Area	0.00 Number of Squares	0.00 Total Perimeter Length
0.00 Total Ridge Length	0.00 Total Hip Length	

EXHIBIT V



DURACLEAN SPECIALISTS, INC.

Your "After the Disaster Team"
1989 Belford North Drive
Belvidere, IL 61008
815-544-9244

Summary

Line Item Total			7,324.03
Overhead	@	10.0%	732.41
Profit	@	10.0%	805.68
Replacement Cost Value			\$8,862.12
Net Claim			\$8,862.12

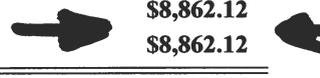


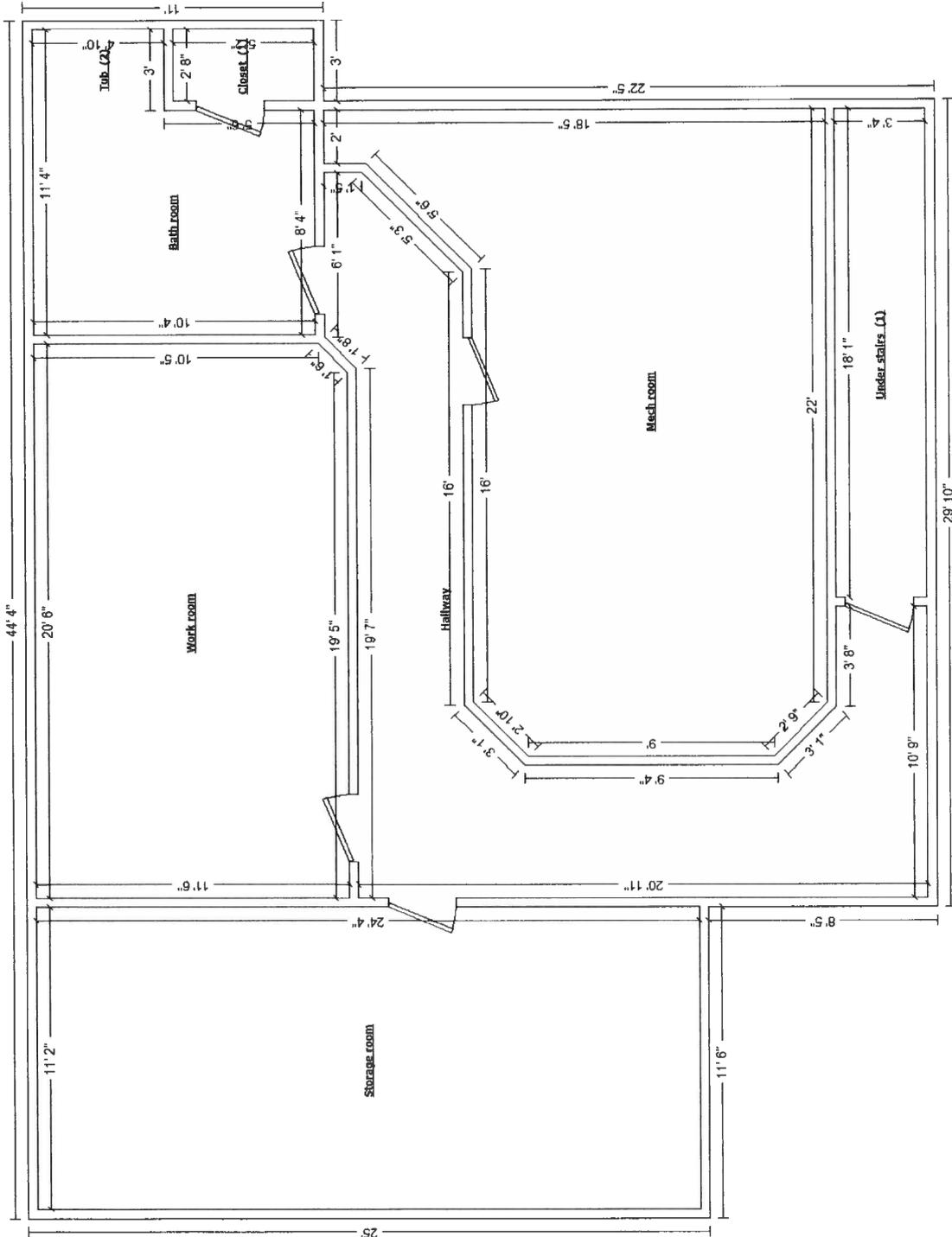
EXHIBIT V



Main Level

Page: 6

5/3/2018



Main Level

EXHIBIT II

2018-04-17-2054