

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

ILLINOIS STATE TOLL HIGHWAY)
AUTHORITY (Belvidere Oasis- South Side))
)
Petitioner,)
)
v.)
)
ILLINOIS ENVIRONMENTAL PROTECTION)
AGENCY,)
)
Respondent.)

PCB 08-040
(UST Appeal)

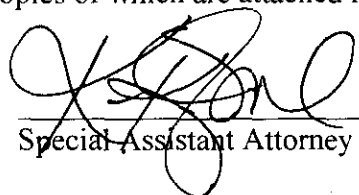
RECEIVED
CLERK'S OFFICE
JAN 23 2008
STATE OF ILLINOIS
Pollution Control Board

NOTICE OF FILING

To: Douglas P. Scott, Director
Illinois Environmental Protection Agency
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794

Division of Legal Counsel
Illinois Environmental Protection Agency
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794

PLEASE TAKE NOTICE that on January 23, 2008, we filed with the Clerk of the Illinois Pollution Control Board the original and nine (9) copies, via personal delivery, of **Proof of Service on Defendant** for filing the above-entitled cause, copies of which are attached hereto.

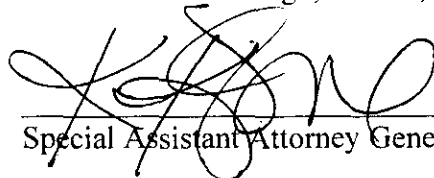


Special Assistant Attorney General

Kenneth W. Funk
Karen Kavanagh Mack
Special Assistant Attorneys General
Deutsch, Levy & Engel, Chartered
225 W. Washington Street, Suite 1700
Chicago, IL 60606
(312) 346-1460

CERTIFICATE OF SERVICE

The undersigned hereby certifies that true and correct copies of the Notice of Filing, together with copies of the documents described above, were served upon the above-named Respondent by enclosing same in an envelope addressed to said Respondent, certified mail, return receipt requested, and by depositing said envelopes in a U.S. Post Office Mail Box at Chicago, Illinois, with postage fully prepaid on the 23rd day of January, 2008.


Special Assistant Attorney General

Kenneth W. Funk
Karen Kavanagh Mack
Deutsch, Levy & Engel, Chartered
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225 W. Washington Street, Suite 1700
Chicago, IL 60606
(312) 346-146
Firm No. 90235

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STATE OF ILLINOIS
Pollution Control Board

ILLINOIS STATE TOLL HIGHWAY)
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PROOF OF SERVICE

I, Karen Kavanagh Mack, an attorney, certify and state that a true and correct copy of Petitioner's **Petition for Review of Agency Modification of High Priority Corrective Action Plan and Budget for Belvidere Oasis South** was served on Respondent by certified mail, return receipt on December 28, 2007. A copy of the return receipt cards, evidencing delivery, are attached hereto as Exhibit "A."

Respectfully Submitted,

THE ILLINOIS STATE TOLL
HIGHWAY AUTHORITY



Karen Kavanagh Mack
Special Assistant Attorney General

Kenneth W. Funk, Esq.
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Special Assistant Attorneys General
Deutsch, Levy & Engel, Chartered
225 W. Washington Street
Suite 1700
Chicago, IL 60606
(312) 346-1460

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:

Division of Legal Counsel
 IEPA
 1021 North Grand Ave East
 P.O. Box 14276
 Springfield, IL 62714

2. Article Number

(Transfer from service label)

7006 2760 0003 5425 2492

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

RECEIVED

DEC 28 2007

MAIL ROOM

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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:

Douglas P. Scott, Director
 IEPA
 1021 North Grand Ave. East
 P.O. Box 14276
 Springfield, IL 62714

2. Article Number

(Transfer from service label)

7005 3110 0002 5478 2050

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

RECEIVED

DEC 28 2007

MAIL ROOM

3. Service Type

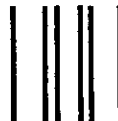
Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes



STATES POSTAL SERVICE

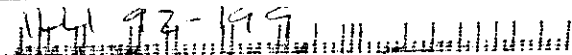


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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

Emily N. Masalski
DLEC
225 W. Washington St.
Suite 1700
Chicago, IL 60606

14



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 •

Emily N. Masalski
DLEC
225 W. Washington St.
Suite 1700
Chicago, IL 60606

14

