

State of Illinois **Pollution Control Board** James R. Thompson Center 100 W. Randolph Street, Suite 11-500 Chicago, Illinois 60601

http://www.ipcb.state.il.us/

## DORIGINAL FORMAL COMPLAINT

## BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

In The Matter Of: TERRID. GREGORY (Insert your name(s) in the space above) Complainant(s), REGIONAL READY MIX (insert name(s) of alleged polluter(s))

PCB 20 10 - 10( (For Board use only)

Note: 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 completed, you must file the original and nine copies of the formal complaint, notice to respondent, and certificate of service with the Clerk of the Board at the above address.



Respondent(s)

1.	Your Contact Information		
	Name: Street Address:	TERRI D'GREGORY 208 Roy Avenue	
	County: State:	OGLE ILLINOIS	
	Phone Number:	(815)761-1462	
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 respondent (alleged polluter)		
	Name: Street Address:	KEGIONAL KEADY MIX 415 RIVER RD	
	County: State:	OGLE ILLONOIS	
	Phone Number:	(815)562-1901	
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		
	REGIONAL	READY MIX IS A PORTLAND BATCH PLANT CONCRETE BATCHING	
	PLANT	OIS ADMINISTRATIVE CODE SII	
192	SUBTIT	LEB - SECTION 2114950	

\* 1

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

\*\*REGIONAL HAS VIOLATED SEC. 24 + SEC. 25-h of the ACT (415 ILCS 5/34, 35-h (3008) Sec. 24-NO PERSON SHALL EMIT BEYOND THE BOUNDARIES OF HIS PROPERTY ANY NOISE THAT UNREASONABLY INTERFERES WITH THE ENJOYMENT OF LIFE OR WITH

ANY LAWFUL BUSINESS OR ACTIVITY, SO AS TO VIOL ANY REGULATION OR STANDARD ADOPTED BY THE BOARD UNDER THE ACT

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

REGIONALS OPERATION IS CAUSING AIR (CEMENT DUST) TITLE 35 SUBTITLE B AND NOISE TITLE 35 SUBTITLE H YOLKNTION AT 415
RIVER RD, ROCHELLE, IL. 61068 to OUR PROPERTY (TERRI GREGORY) AT JOB ROY AVE ROCHELLE, IL 61068 Which WE ARE JUST 80 FEET FROM REGIONALS PLANT. CEMENT DUST AND THE NOISE FROM REGIONALS EQUIPTMENT IS A HEALTH FACTOR.

Describe the duration and frequency of the alleged pollution. Be as

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)

REDIONAL HAS BEEN IN OPERATION SINCE
JULY 2006. THE DUST AND NOISE ITS OPERATION
CAUSES HAB BEEN ONGOING TO THE PRESENT.
THEY (REGIONAL) OPERATES MON-SAT, AS A
PULLY OPERATIONAL READY MIX PLANT,
SPRING, SUMMER, FALL AND SOME WINTER
DAYS. REGIONALS HOURS ARE VARYING FROM
AS EARLY AS 6 A TO WORKING AS LATE AS
DUSK. THE DUST AND NOISE STARTED
IMMEDIATELY ONCE THEY STARTED OPERATIONS
IN July of JOOG AND CONTINUES TO THIS
DAY, NOV. 5, JOOG.

Describe any bad effects that you believe the alleged pollution has 8. 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 REGIONAN VIOLATES TITLE VI: NOISE (415 ILCS 5/23 ENDANGERS PHUSICAL EMOTIONAL HEALTH AND WELL-BEING, DEPRESSES ROPERTY VALUES OFFENDS THE SENSES, CREATES REDUCES THE QUALITY OF OUR FOUR THE GREGORY RESIDENCE HAS BEEN SEVERELL AFFECTED BY REGIONALS PRESENCE. Describe the relief that you seek from the Board (e.g., an order 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)) KEGIONAL NEEDS!THE BOARD) TO TAKE YOUUTION AND SOURCES OF NOISE EMISSIONS THAT KEASONABLY INTERFERE WITH ENJOYMENT LIFE AND SHALL PRESCRIBE FOR EACH CATEGORY THE MAXIMUM PERMISSIABLE LIMITS ON SUCH 10. Identify any identical or substantially similar case you know of that is NOISE already pending before the Board or in another forum against this EMISSIONS. respondent for the same alleged pollution (note that you need not/CONTINUED) include any complaints made to the Illinois Environmental Protection Agency or any unit of local government) PROCEDURAL RULES (35 ILL. ADM CODE) SECTION 103.212 HEARING ON COMPLAINT BITHE BOARD IN ITS DISCRETION MAY HOLD A HEARING ON THE VIOLATION AND A SEPERATE HEARING ON THE REMEDY. THIS IS THE RELIEF I SEEK, TERRI GREGORY.

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.) omplainant's signature) **CERTIFICATION** (optional but encouraged) I, <u>FRRI D GREGORY</u>, on oath or affirmation, state that I have read the foregoing and that it is accurate to the best of my knowledge. (Complainant's signature) Subscribed to and sworn before me day OFFICIAL SEAL **BONNIE S. CARSON** Notary Public - State of Illinois My Commission Expires Aug 15, 2013 **Notary Public** 

8-15-2013

My commission expires:

11. State whether you are representing (a) yourself as an individual or (b) your unincorporated sole proprietorship. Also, state whether you

## **CERTIFICATE OF SERVICE**

I, the undersigned, on oath or affirmation, state that on $\frac{\sqrt{0}\sqrt{.5}}{.}$ , 20 $\frac{10}{.}$ , I served the attached formal complaint and notice on the respondent by			
certified mail (attach copy of receipt if available,  otherwise you must file receipt later with Clerk)			
registered mail (attach copy of receipt if available, otherwise you must file receipt later with Clerk)			
messenger service (attach copy of receipt if available, otherwise you must file receipt later with Clerk)			
personal service (attach affidavit if available, otherwise you must file affidavit later with Clerk)			
at the address below:			
RESPONDENT'S ADDRESS:			
Name REGIONAL REASY MIX			
Street 415 RIVER RD			
City, state, zip code <u>RocHELLE, 1L. (21068-9715</u> (list each respondent's name and address if multiple respondents)			
Maria de Mar			
Complainant's signature			
Street 208 Roy Ave			
City, state, zip code <u>Rochelle</u> , Il. 101068-9715			
Subscribed to and sworn before me			
this 5 day			
of Normal Services Aug 15, 2013  OFFICIAL SEAL BONNIE S. CARSON Notary Public - State of Illinois My Commission Expires Aug 15, 2013			
Notary Public  8-15 7017			
My commission expires: 0-15-2005			