

Macon County State's Attorney's Office

Macon County Courthouse 253 E. Wood St., Decatur, IL 62523 Telephone: 217/424-1400 FAX: 217/424-1402

October 26, 2011

Mr. John Therriault, Asst. Clerk of the Board Illinois Pollution Control Board 100 West Randolph Street James R. Thompson Center, Suite 11-500 Chicago, Illinois 60601-3218

Re: County of Macon v. Essie Neal

MCEMD File No. 2011-001-AC: LPC1158045029 - Macon County

IPCB Case: AC 2012-009

Dear Mr. Therriault:

Please be advised that service was had on Respondent, Essie Neal, on October 21, 2011. In order to avoid a default, a Petition for Review must be filed with the Illinois Pollution Control Board on or before November 28, 2011.

A copy of the returned Certified Mail Receipt is attached herto.

Sincerely,

Michael Baggett

Assistant State's Attorney

Attachment

Cc:

Laurie Rasmus, Macon County Environmental Management Dept. Jeff Turner, IEPA Champaign Regional Office

Ellen Robinson, IEPA

FOS File

Electronic Filing - Received, Clerk's Office, 10/26/2011

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD ADMINISTRATIVE CITATION

MACON COUNTY ENVIRONMENTAL MGT. DEPT.,)
Complainant,) AC) (MCEMD No. 2011-001: 1158045029)
V.)
Essie Neal,)
Respondent.)

NOTICE OF FILING

To: Essie Neal

1464 E. Leafland Ave. Decatur, IL 62521

PLEASE TAKE NOTICE that on this date I mailed for filing with the Clerk of the Pollution Control Board of the State of Illinois the following instrument(s) entitled CERTIFIED MAIL RECEIPT.

Respectfully submitted,

Michael Baggett, Asst. State's Attorney

Macon County State's Attorney's Office Macon County Courthouse 253 E. Wood Street Decatur, IL 62523-1496 217/424-1400

Dated: October 26, 2011

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. Article Addressed to: Ms. Essie Neal	Electronic Filing - Received, A. Signature X Jall Mal Addressee B. Inserved by (Printer Name) C. Date of Delivery D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: No	lerk's Office,	10/26/2011
1464 E. Leafland Ave Decatur, IL 62521	3. Service Type Certified Mail		
2. Article Number 7007 0220 0001	7337 5355 ~		
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540		

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

Macon County Environmental Mont. Deb 141 S. Main St., Room 408 Decatur, IL 62523

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