



ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

1021 NORTH GRAND AVENUE EAST, P.O. BOX 19276, SPRINGFIELD, ILLINOIS 62794-9276 • (217) 782-2829
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PAT QUINN, GOVERNOR

LISA BONNETT, DIRECTOR

(217) 782-9817
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CLERK'S OFFICE

SEP 09 2013

STATE OF ILLINOIS
Pollution Control Board

September 4, 2013

 ORIGINAL

AC14-14

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

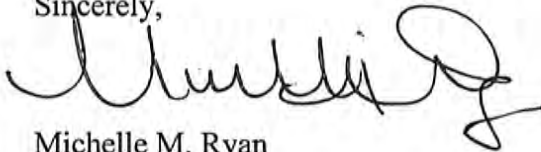
Re: Illinois Environmental Protection Agency v. Flossie E. Hayes and Kevin E. Stine
IEPA File No. 225-13-AC; 0250150004—Clay County

Dear Mr. Therriault:

Please be advised that service was had on Respondents, Flossie E. Hayes and Kevin E. Stine, on August 30, 2013. In order to avoid default, a Petition for Review must be filed with the Illinois Pollution Control Board on or before October 4, 2013.

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

Sincerely,



Michelle M. Ryan
Assistant Counsel

Enclosures

bcc: Susan Konzelmann, DLC #21

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature <input checked="" type="checkbox"/> Flossie Hayes <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Flossie E. Hayes 505 Peacock Drive Farina, IL 62838	B. Received by (Printed Name) Flossie Hayes	C. Date of Delivery 8/30/13
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	7011 1150 0001 0862 2995	
	PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature <input checked="" type="checkbox"/> Jennifer Stine <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Kevin E. Stine 303 South Clay St Farina, IL 62838	B. Received by (Printed Name) Jennifer Stine	C. Date of Delivery 8/30/13
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	7011 1150 0001 0862 2988	
	PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

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PROOF OF SERVICE

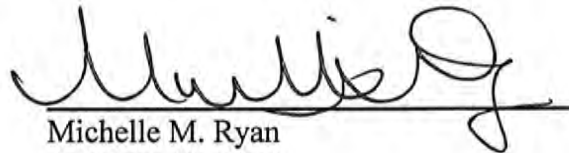
I hereby certify that I did on the 4th day of September 2013, send by U.S. Mail, with postage thereon fully prepaid, by depositing in a United States Post Office Box a true and correct copy of the following instrument(s) entitled CERTIFIED MAIL RECEIPT

To: Flossie E. Hayes
505 Peacock Drive
Farina, IL 62838

Kevin E. Stine
303 South Clay Street
Farina, IL 62838

and the original and nine (9) true and correct copies of the same foregoing instruments on the same date by U.S. Mail, with postage thereon fully prepaid

To: John Therriault, Clerk
Pollution Control Board
James R. Thompson Center
100 West Randolph Street, Suite 11-500
Chicago, Illinois 60601



Michelle M. Ryan
Assistant Counsel

Illinois Environmental Protection Agency
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