

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

RECEIVED CLERK'S OFFICE

JUL 0 8 2004

1021 North Grand Avenue East, P.O. Box 19276, Springfield, Illinois 62794-9276, 217-782-3 JAMES R. THOMPSON CENTER, 100 WEST RANDOLPH, SUITE 11-300, CHICAGO, IL 60601, 312-8148 TATE OF ILLINOIS

ROD R. BLAGOIEVICH, GOVERNOR

RENEE CIPRIANO, DIRECTOR

Pollution Control Board

(217) 782-5544

TDD: (217) 782-9143

July 6, 2004

The Honorable Dorothy Gunn, Clerk Illinois Pollution Control Board

State of Illinois Center 100 West Randolph, Suite 11-500

Chicago, IL 60601

Re:

Illinois Environmental Protection Agency v. Michael Boone

IEPA File No. 300-04-AC 1258015002—Mason County

Dear Clerk Gunn:

Please be advised that service was had on Respondent, Michael Boone, on July 1, 2004. In order to avoid default, a Petition for Review must be filed with the Illinois Pollution Control Board on or before August 5, 2004.

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

Sincerely,

Michelle M. Ryan

Assistant Counsel

Attachment



JUL 0 8 2004

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

STATE OF ILLINOIS Pollution Control Board

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY,)	
Complainant,)	AC 05-01
v.)	(IEPA No. 300-04-AC)
MICHAEL E. BOONE,)	
Respondent.)	

NOTICE OF FILING

To: Michael E. Boone

5457 SR 78

Bath, Illinois 62617

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,

Michelle M. Ryan

Special Assistant Attorney General

Illinois Environmental Protection Agency 1021 North Grand Avenue East P.O. Box 19276 Springfield, Illinois 62794-9276 (217) 782-5544

Dated: July 6, 2004

1 to the second	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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 X Agent Addressee B. Received by (Printed Name) C. Date of Delivery 07/01/04
Article Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below: No
Michael E. Boone 5457 SR 78	
Bath, IL 62617 (300-04-AC)	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7000 0520 0012 5645 (7,62
PS Form 3811, August 2001 Domestic Retu	ırn Receipt 102595-02-M-1540

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PROOF OF SERVICE

I hereby certify that I did on the 6th day of July 2004, 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: Michael E. Boone

5457 SR 78

Bath, Illinois 62617

and the original and nine (9) true and correct copies of the same foregoing instruments on the same date by Certified Mail, Return Receipt Requested, with postage thereon fully prepaid

To: Dorothy Gunn, Clerk

Pollution Control Board James R. Thompson Center

100 West Randolph Street, Suite 11-500

Chicago, Illinois 60601

Michelle M. Ryan

Special Assistant Attorney General

Illinois Environmental Protection Agency 1021 North Grand Avenue East P.O. Box 19276 Springfield, Illinois 62794-9276 (217) 782-5544