



Electronic Filing: Received, Clerk's Office 03/29/2023

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

1021 NORTH GRAND AVENUE EAST, P.O. BOX 19276, SPRINGFIELD, ILLINOIS 62794-9276 • (217)782-3397

BRUCE RAUNER, GOVERNOR

ALEC MESSINA, DIRECTOR

(217) 782-5544
TDD: (217) 782-9143

March 29, 2023

The Honorable Don Brown, Clerk
Illinois Pollution Control Board
60 E. Van Buren St., Ste. 630
Chicago, IL 60605

Re: Illinois Environmental Protection Agency v. Cody Smith
IEPA File No. 36-23-AC
1690055005 – Schuyler County

Dear Clerk Brown:

Please be advised that service was had on Respondent, Cody Smith, on March 27, 2023. In order to avoid default, a Petition for Review must be filed with the Illinois Pollution Control Board on or before May 1, 2023.

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

Sincerely,

e-signature valid for IPCB e-filings ONLY

Michelle M. Ryan
Assistant Counsel

Attachment

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

ILLINOIS ENVIRONMENTAL
PROTECTION AGENCY,

Complainant,

v.

CODY SMITH

Respondent.

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AC 2023-008

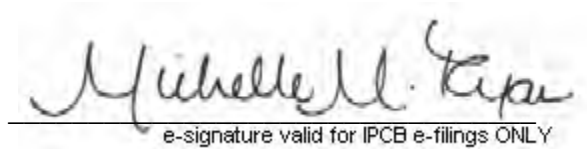
(IEPA No. 36-23-AC)

NOTICE OF FILING

To: Cody Smith
P.O. Box 54
Browning, IL 62624

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

Respectfully submitted,



e-signature valid for IPCB e-filings ONLY

Michelle M. Ryan
Assistant Counsel

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

Dated: March 29, 2023

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

MAR 23 2023

USPS

Postmark Here

7015 0640 0005 6905 7920

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Se: Cody Smith

St: P.O. Box 54

City: Browning, IL 62624

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ 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. <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p style="text-align: center;">Cody Smith P.O. Box 54 Browning, IL 62624</p> </div> <div style="text-align: center; margin: 5px 0;"> <p>9590 9402 6959 1104 1433 86</p> </div> <p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7015 0640 0005 6905 7920</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>[Signature]</i></p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p style="text-align: right; font-weight: bold;">3.27.23</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

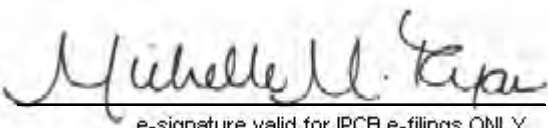
PROOF OF SERVICE

I hereby certify that I did on the 29th day of March 2023, 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: Cody Smith
P.O. Box 54
Browning, IL 62624

and an electronic copy of the same foregoing instrument on the same date via electronic filing

To: Don Brown, Clerk
Pollution Control Board
60 E. Van Buren St., Ste. 630
Chicago, IL 60605



e-signature valid for IPCB e-filings ONLY

Michelle M. Ryan
Assistant Counsel

Illinois Environmental Protection Agency
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