

BEFORE THE ILLINOIS POLLUTION CONTROL BOARD

PEOPLE OF THE STATE OF ILLINOIS,)
 by KWAME RAOUL, Attorney General)
 of the State of Illinois,)
)
 Complainant,)
)
 v.)
)
 ROBERT WIETHOLDER, an individual,)
 DESMOND JARVIS, an individual, and)
 BOB JARVIS, an individual)
)
 Respondents.)

**PCB No. 2023-134
(Enforcement-Land)**

NOTICE OF FILING

TO: See attached service list:

PLEASE TAKE NOTICE that I did on July 24, 2023, file with the Office of the Clerk of the Illinois Pollution Control Board by electronic filing the following Notice of Filing and Certified Mail Cards showing service of Complaint, copies of which are hereby served upon you.

Respectfully submitted,

PEOPLE OF THE STATE OF ILLINOIS,
ex rel. KWAME RAOUL,
Attorney General of the State of Illinois

MATTHEW J. DUNN, Chief
Environmental Enforcement/
Asbestos Litigation Division

By: /s/ Bridget I. Flynn
Bridget I. Flynn
Assistant Attorney General
Environmental Bureau
ARDC # 6332314
500 South Second Street
Springfield, Illinois 62701
(217) 782-9033
Bridget.Flynn@ilag.gov

Date: July 24, 2023

Service List


For the Respondents

Robert Wietholder
326 W. Mill Street
Mendon, IL 62351

Desmond Davis
205 S. Main Street
Coatsburg, IL 62355


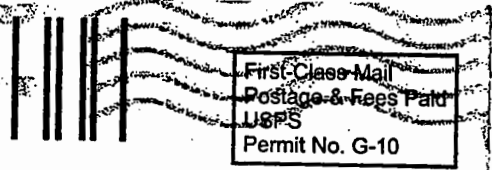
Bob Jarvis
222 N. Chestnut Street
Mendon, IL 62351

Carol Webb
Hearing Officer
Illinois Pollution Control Board
1021 North Grand Avenue East
Springfield, IL 62794
Carol.Webb@illinois.gov

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. 		A. Signature <input checked="" type="checkbox"/> <i>S. Flynn</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Robert Wielchoder 326 W. Mill Street Mendon, IL 62351		B. Received by (Printed Name) SCOTT DONNELLY	C. Date of Delivery 7-19-23
2. Article Number (Transfer from service label) 7020 3160 0001 5205 0095		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
 9590 9402 6480 0346 1546 98		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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9590 9402 6480 0346 1546 98

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 JUL 21 2023
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• Sender: Please print your name, address, and ZIP+4® in this box•

Bridget Flynn
 Assistant Attorney General
 Environmental Bureau
 500 South Second Street
 Springfield, IL 62701


Wielchoder

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<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>A. Signature</p> <p><input checked="" type="checkbox"/> D Davis <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>																	
<p>1. Article Addressed to:</p> <p>Desmond Davis 205 S. Main Street Coatsburg, IL 62355</p>	<p>B. Received by (Printed Name)</p> <p>D Davis</p>	<p>C. Date of Delivery</p> <p>7/27/23</p>																
 <p>9590 9402 6480 0346 1546 74</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>2. Article Number (Transfer from service label)</p> <p>7020 3160 0001 5205 0118</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
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CHAMPAIGN IL 618



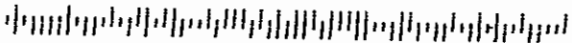
9590 9402 6480 0346 1546 74

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Bridget Lynn
Assistant Attorney General
Environmental Bureau
500 South Second Street
Springfield, IL 62701



Wietzholder, et. al.

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<p>1. Article Addressed to: <i>Bob Jarvis</i> <i>222 N. Chestnut St.</i> <i>Mendon, IL 62351.</i></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>2. Article Number (Transfer from service label) 9590 9402 6480 0346 1546 67 7020 3160 0001 5205 0101</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
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Bridget Flynn
Assistant Attorney General
Environmental Bureau
500 South Second Street
Springfield, IL 62701

Wichtholder, et al.

CERTIFICATE OF SERVICE

I hereby certify that I did on July 24, 2023, send by e-mail and First Class Mail, with postage thereon fully prepaid, by depositing in a United States Post Office Box in Springfield, Illinois, a true and correct copy of the document entitled Notice of Filing and certified mail cards to:

Robert Wietholder
326 W. Mill Street
Mendon, IL 62351

Desmond Davis
205 S. Main Street
Coatsburg, IL 62355

Bob Jarvis
222 N. Chestnut Street
Mendon, IL 62351

Carol Webb
Hearing Officer
Illinois Pollution Control Board
1021 North Grand Avenue East
Springfield, IL 62794
Carol.Webb@illinois.gov

/s/Lilia M.Brown
Lilia M. Brown
Administrative Secretary
Environmental Bureau

Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this certificate of service are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that she verily believes the same to be true.

/s/Lilia M.Brown
Lilia M. Brown
Administrative Secretary
Environmental Bureau