



## REGIONAL AIR POLLUTION CONTROL AGENCY

Serving Clark, Darke, Greene, Miami, Montgomery & Preble Counties

117 South Main Street, Dayton, Ohio 45422-1280

937-225-4435 — Fax: 937-225-3486

www.rapca.org

May 29, 2007

**Certified Mail**

Juanita Wheldon

12001 Old Columbus

South Vienna, OH 45369

**WARNING LETTER**

Dear Ms. Wheldon:

On May 8, 2007, the Regional Air Pollution Control Agency (RAPCA), received a complaint from the Clark County Combined Health District regarding illegal open burning at 12001 Old Columbus Rd, South Vienna, Ohio. An inspection was performed by RAPCA on May 11, 2007 and it was determined that open burning had occurred within 1,000 feet of the nearest neighboring inhabited residence.

Pursuant to Ohio Administrative Code (OAC) rule and Clark County Combined Health District Air Pollution Control Regulations (CCCHDAPCR) 3745-19-04, Open burning in unrestricted areas, open burning for waste disposal purposes within 1,000 feet of the nearest neighboring inhabited residence is prohibited. Additionally, the open burning of residential waste containing petroleum based products, including plastics, is prohibited.

This is the second open burning violation documented at this address. The first investigation occurred on July 22, 2005 and documented the open burning of tires, garbage, and other miscellaneous debris. Orders were issued to you on July 27, 2005.

This letter serves as notification to you of the above mentioned violations. You are hereby ordered to cease all illegal open burning activities. **Any further actions in violation of the above mentioned rules may result in an enforcement action with civil and/or criminal penalties.** If you have any questions, please contact me at 937-225-4004.

Sincerely,

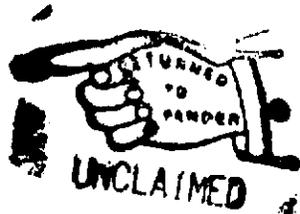
Eileen C. Moran

Air Pollution Control Specialist

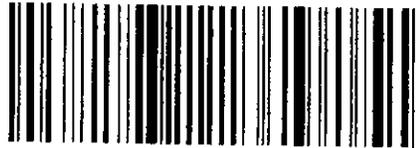
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**REGIONAL AIR POLLUTION  
CONTROL AGENCY**  
117 South Main Street  
Dayton, Ohio 45422-1280



**CERTIFIED MAIL™**



7004 1160 0000 6164 9838



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02 1A \$ 05.21<sup>0</sup>  
0004385214 MAY 29 2007  
MAILED FROM ZIP CODE 45402

Juanita Wheldon  
12001 Old Columbus  
South Vienna, OH 45369

Name \_\_\_\_\_  
1st Notice 6-2  
2nd Notice JUN 07 2007  
Return JUN 16 2007

RECEIVED  
JUL 06 2007  
REGIONAL AIR  
POLLUTION CONTROL

NIXTE 454 5A 1 25 07/02/07  
RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD

453699550 45369  
45422@1280

BC: 454221280 \*0496-01595-29-34



TOP OF ENVELOPE TO THE RIGHT  
TURN ADDRESS FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <hr/> <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>1. Article Addressed to:</p> <p style="text-align: center;">Juanita Wheldon 12001 Old Columbus South Vienna, OH 45369</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7004 1160 0000 6164 9838</p>
<p>PS Form 3811, February 2004 <span style="margin-left: 150px;">Domestic Return Receipt</span> <span style="float: right;">102595-02-M-1540</span></p>	

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OFFICIAL USE

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">Postage</td> <td style="width: 20%;">\$</td> </tr> <tr> <td>Certified Fee</td> <td></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td><b>Total</b></td> <td></td> </tr> </table>	Postage	\$	Certified Fee		Return Receipt Fee (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)		<b>Total</b>		<p style="text-align: center;">Postmark Here</p>
Postage	\$										
Certified Fee											
Return Receipt Fee (Endorsement Required)											
Restricted Delivery Fee (Endorsement Required)											
<b>Total</b>											

Sent To \_\_\_\_\_  
 Juanita Wheldon  
 Street, or POB \_\_\_\_\_  
 12001 Old Columbus  
 City, St \_\_\_\_\_  
 South Vienna, OH 45369

PS Form 3800, June 2002 See Reverse for Instructions

7004 1160 0000 6164 9838