



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 1, 2008

CERTIFIED MAIL

Susy Thomas
2150 Swailes Rd.
Troy, OH 45373

WARNING LETTER

Dear Ms. Thomas:

On April 29, 2008, the Regional Air Pollution Control Agency (RAPCA), received an incident report from the Troy Fire Department regarding illegal open burning at 2471 Thornhill Rd, Troy, Ohio. The incident report documented that on April 26, 2008 at approximately 8:15 PM, the Troy Fire Department responded to a call and found a very large pile of wood from a fence and a shed being burned.

Pursuant to Ohio Administrative Code (OAC) rule and the Miami County Board of Health Local Air Pollution Control Regulations (MBCHLAPCR) 3745-19-03, Open burning in restricted areas, open burning of residential waste for the purpose of waste disposal is prohibited. Residential waste includes, but is not limited to, paper, building materials, wood, leaves, grass, and brush. The open burning documented on April 24 2008 by the Troy Fire Department is a violation of OAC rule and MCBHLAPCR rule 3745-19-03.

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

cc: Matt Simmons, Troy Fire Department

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

Susy Thomas
2150 Swailes Road
Troy, OH 45373

2. Article Number
(Transfer from service label)

7004 1160 0000 6165 5723

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Susy Thomas Agent Addressee

B. Received by (Printed Name)

Thomas

C. Date of Delivery

*5-2-08*D. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

