



State of Ohio Environmental Protection Agency

Northwest District Office

347 North Dunbridge Road
Bowling Green, OH 43402-9398

TELE: (419) 352-8461 FAX: (419) 352-8468
www.epa.state.oh.us

Ted Strickland, Governor
Lee Fisher, Lieutenant Governor
Chris Korleski, Director

Re: Open Burning Complaint
Ashland County
Notice of Violation

August 17, 2007

CERTIFIED MAIL

Ms. Linda Blodgett
897 State Route 58
Ashland, Ohio 44805

Dear Ms. Blodgett:

This office has received two reports from the Nankin Fire Department concerning open burning of a vehicle, oil, plastic pipe, hydraulic lines and railroad ties on your property. By means of this letter we hope to inform you of the seriousness of open burning, and inform you that open burning is a strictly regulated activity in Ohio, regulated pursuant to Ohio Administrative Code 3745-19 (copy enclosed).

Ms. Blodgett, you have been found in violation of OAC 3745-19.

At this time, we ask that you submit a written response to the Ohio EPA, regarding this report, your understanding of the regulations, and what measures will be taken to prevent any further violations. Your response should be received by this Agency by August 31, 2007.

Please be advised that the submission of information to respond to this letter does not constitute waiver of Ohio EPA's authority to seek civil penalties pursuant to ORC Section 3704.06. The Ohio EPA will make a decision on whether to pursue or decline to pursue such penalties regarding this matter at a later date.

Keep in mind that penalties of up to \$25,000 could be assessed.

If you have any questions concerning this letter or the regulations, please call me at (419) 373-3120.

Sincerely,

Joseph L. Grob
Environmental Specialist 3
Division of Air Pollution Control

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Enclosure

pc: Ashland County Health Department
Lisa Holscher, U.S. EPA, Region V
Tom Kalman, DAPC, CO
DAPC-NWDO File
NWDO Follow-up File
ec: Tom Sattler, Supervisor

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <i>MS. LINDA BLODGET</i> <i>897 STATE ROUTE 58</i> <i>Ashland, Ohio 44805</i>	B. Received by (Printed Name)	C. Date of Delivery
2. Article No. <i>7006 3450 0001 0611 3197</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, February 2004	3. Service Type <input checked="" 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.	
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PS Form 3800, August 2006		See Reverse for Instructions