

Air Pollution Control Division



APC Contractual Representative
Serving All of Stark County

Canton City Health Department

420 Market Avenue North • Canton, Ohio • 44702-1544
(330) 489-3385 • Fax: (330) 489-3335

Robert E. Pattison, MPA
Health Commissioner

Daniel J. Aleman
APCD Administrator

CERTIFIED MAIL

April 26, 2007

Mr. Joe Campbell
2827 Baldwin Avenue NE
Canton, OH 44705-4159

Re: INFORMATION RELATING TO OPEN BURNING IN RESTRICTED AREAS

Dear Mr. Campbell:

This office is in receipt of a report indicating that the Canton Fire Department was called to your outdoor fire of wood chips in a barrel on the evening of April 22, 2007.

The city has ordinances against open burning for waste disposal. Open burning is permitted for cooking food for human consumption. Except for common barbeque grills, the city requires verbal application made to the local fire department in your area at least 48 hours prior to the time the recreational fire is set. You do this by calling the Canton Fire Department at (330) 489-3400. There are city restrictions on the locations, size, fuel, and duration of the fire. Enclosed is a copy of Canton City Ordinance 15 13 on Recreational Fires. Also enclosed is a copy of the form that the fire department will fill out when you call in your verbal application to them. You might find this helpful as a guide to facilitate the process.

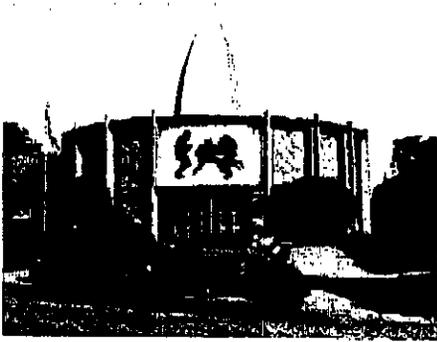
By copy of this letter to the listed owners of the property, they are advised that property owners are responsible for open burning violations of their tenants and they are supplied with the City's recreational fire ordinances.

Sincerely,

Gregory A. Clark, CHMM, CAHES
Air Pollution Control Engineer

- Enclosures:
1. Canton Ordinances 15 13. 01, .02, .03, and .99.00
 2. Recreational Fire information form

cc: Roger P. and Jo A. Campbell, 2827 Baldwin Ave NE, Canton OH 44705-4159 (Certified)
Chief Steven J. Rich, Canton Fire Department, 110 Seventh St. SW, Canton OH 44702



1937 Ahrens-Fox

JANET WEIR CREIGHTON
Mayor

BERNARD L. HUNT
Safety Director

CITY OF CANTON
DIVISION OF FIRE

STEPHEN J. RICH, Chief

110 SEVENTH STREET S.W. CANTON, OHIO 44702
PHONE (330) 489-3411 • FAX (330) 489-3147
www.ci.canton.oh.us/safetyservice/fire/

FIRE REPORT

April 23, 2007

To Whom It May Concern:

On Sunday, April 22, 2007 at 1825 hrs., Engine 6 to 2827 Baldwin Ave. NE to check smoke in the area. Crew found resident burning wood chips in a barrel. Crew directed resident Joe Campbell to extinguish fire. All ok 1833 hrs.

The above information was obtained from the Official Log Book on page 263 from the Chief's Office.

Respectfully,

Stephen J. Rich
Chief
DIVISION OF FIRE

SJR:cap

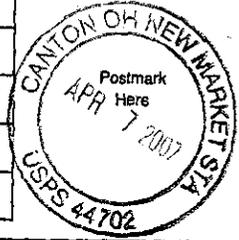
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Return Receipt Fee (Endorsement Required)	2.40
Restricted Delivery Fee (Endorsement Required)	1.85
Total Postage & Fees	\$ 4.64



Sent To
 Street, Apt. No., or PO Box No. MR. JO CAMPBELL
 2827 BALDWIN AVE NE
 City, State, ZIP+4 CANTON OH 44705

PS Form 3800, June 2002 See Reverse for Instructions

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:
 MR. JO CAMPBELL
 2827 BALDWIN AVE NE
 CANTON OH 44705

2. Article Number
 (Transfer from service label)

7005 1160 0000 8900 0658

PS Form 3811, August 2001

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 X Edward Murphy Addressee
 B. Received by (Printed Name) EDWARD MURPHY
 C. Date of Delivery 4/28/07
 D. Is delivery address different from item 1? Yes
 if 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

Domestic Return Receipt

102595-02-M-1540

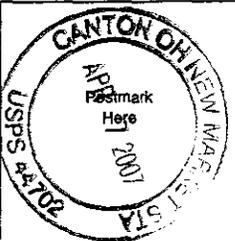
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Sent To
ROGER P. & JO A. CAMPBELL
 Street, Apt. No., or PO Box No. **2827 BALDWIN AVE NE**
 City, State, ZIP+4 **CANTON OH 44705**

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

**ROGER P. & JO A. CAMPBELL
 2327 BALDWIN AVE NE
 CANTON OH 44705**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Edward Murphy Addressee

B. Received by (Printed Name) **Edward Murphy** C. Date of Delivery **4/28/07**

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
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