

Air Pollution Control Division

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

Car
OhioEPA

APC Contractual Representative
Serving All of Stark County

CERTIFIED MAIL

March 23, 2007

Joshua Stevens
921 Shorb Ave, Apt. B
Canton, OH 44703-2259

Re: Open Burning Violation, 921 Shorb Ave.

Dear Mr. Stevens:

On March 22, 2007, this office received an anonymous complaint about the open burn fire in the driveway at the rear of this property.

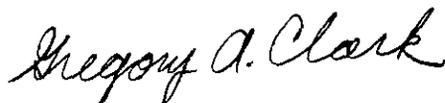
In response, I was at the property at about 1:45 that afternoon. At the time of my visit, the fire was out and there was no odor. However, as evidenced by the automotive-type oil filter and the aluminum beverage cans, this was not a legal cook-out type fire. Open burning is allowed for cooking and recreational purposes, but there must be no attempt to burn residential waste. Also, the law does not allow for the combustion of gasoline, oil, or other hydrocarbons.

I enclose copies of 1) The Canton City Ordinance covering open burning, 2) The Ohio Administrative Code 3745-19 which covers open burning, and 3) "Before You Light It...", an open burning educational pamphlet produced by Ohio EPA.

This agency requests that you ensure that future violations do not occur.

By copy of this letter, the property owner is advised that compliance with regulations ultimately lies with the property owner.

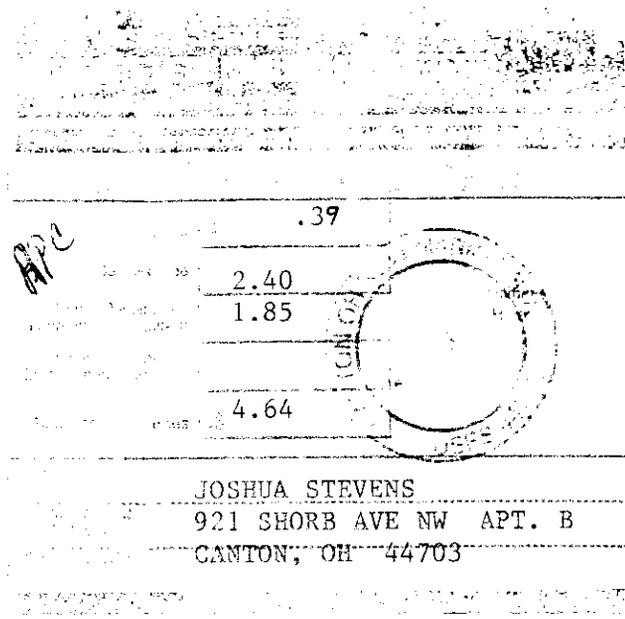
Sincerely,



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

cc: Chief Stephen J. Rich, Canton Fire Department, 110 Seventh Street SW Canton, OH 44702
Mr. Thomas R. Kramer, 921 Shorb Ave NW, Canton, OH 44703-2259 (with enclosures)
1204 Elm St, Suite 400, Dallas, TX 75270

7005 1160 0000 8900 0511



JOSHUA STEVENS
921 SHORB AVE NW APT. B
CANTON, OH 44703

SENDER: COMPLETE THIS SECTION

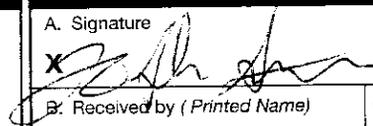
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JOSHUA STEVENS
921 SHORB AVE NW APT. B
CANTON, OH 44703

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
3-24-05

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

7005 1160 0000 8900 0511