

FILED

Aug 05, 2025

3:26 pm

**U.S. EPA REGION 8
HEARING CLERK**

IN THE MATTER OF: JACK'S SERVICE CENTER
RCRA-08-2025-0007

CERTIFICATE OF SERVICE

The undersigned certifies that one true and correct copy of the COMPLAINT, COMPLIANCE ORDER, AND NOTICE OF OPPORTUNITY FOR HEARING in this case was delivered via electronic mail to the Regional Hearing Clerk, EPA Region 8, 1595 Wynkoop Street, Denver, Colorado and that a true copy of the same was delivered via certified mail to the following person, as indicated below:

to:

Jack Anderson, Owner
Jack's Service Center
409 N. Madison Ave
Isabel, South Dakota 57633

CERTIFIED MAIL # 7012 2210 0000 5374 0710 (delivered July 15, 2025)

Date: August 5, 2025

By: _____
Matt Castelli

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Jack Anderson
409 N Madison Ave
Isabel SD 57633

A(06/30/25)



9590 9402 5844 0038 6225 18

2 Article Number (Transfer from service label)

7012 2210 0000 5374 0710

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jack Anderson*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Jack Anderson

C. Date of Delivery

7-15-25

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery
(over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted
Delivery☐ Return Receipt for
Merchandise☐ Signature Confirmation™☐ Signature Confirmation
Restricted Delivery