

**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. David Brickett  
 11111 Jacks Septic Services, LLC  
 39825 Goid Ridge Road  
 Pomeroy, OH 45769

CWA-05-2010-0012

2. Article Number

(Transfer from service label)

7001 0302 0000 0190 9787

PS Form 3811, March 2001

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

John Beantz

B. Date of Delivery

6/7/10

C. Signature

*[Signature]*

Agent

Addressee

D. Is delivery address different from item 1? If YES, enter delivery address below.

Yes  
 No

**RECEIVED**  
 JUN 10 2010

REGIONAL HEARING CLERK

U.S. ENVIRONMENTAL PROTECTION AGENCY

Registered Mail

Express Mail

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

Domestic Return Receipt

102595-01-M-1424