

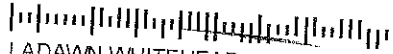
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <i>X Donald Bennett</i> <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>Donald Bennett  Vice President  Bennett Quality Homes, Inc.  27899 Clemens Road  Westlake, OH 44145-1141</p> <p><i>CWA-05-2017-0010</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No  If Yes, enter delivery address below: _____</p> <p>U.S. ENVIRONMENTAL PROTECTION AGENCY  REGIONAL HEARING CLERK  AUG 11 2017</p> <p>3. Service Type  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™  <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) <u>7009 1680 0000 7662 6880</u></p> <p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

UNITED STATES POSTAL SERVICE  
OH 440  
07 AUG '17  
PM 31



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box®

  
LADAWN WHITEHEAD  
REGIONAL HEARING CLERK  
U.S. EPA - REGION 5 - E19J  
77 WEST JACKSON BLVD  
CHICAGO, IL 60604

REGIONAL HEARING CLERK  
RECEIVED  
AUG 11 2017  
U.S. ENVIRONMENTAL PROTECTION AGENCY  
REGION 5