

1021 North Grand Avenue East Springfield, Illinois 62702

ILLINOIS EPA

CITIZEN POLLUTION COMPLAINT FORM

If you are reporting an environmental emergency, please also contact the Illinois Emergency Management Agency at 1-800-782-7860.

You may submit this form anonymously. However, if you provide us with information on how to reach you, Illinois EPA can keep you updated on the investigation into the complaint. In addition, we may need additional information from you in order to conduct an adequate investigation. You may also submit this form online at: www.epa.state.il.us.

Please note that your local/county health department may have ordinances/regulations which address: asbestos, septic tanks, private wells and lead paint.

Your Contact Information

Name				
Street Address				
	County			
Telephone (with are	a code)			
Phone Number Type	e Home 🗌 Work 🗌 Co	ell Phone 🔲		
Email Address				
	eve to be responsible for			
Responsible Party/C	Company Name			
Street Address				
City (Nearest city or	town if known)			
County			Zip Code	
I don't know				

Nature of Complaint (Please check all that apply)

Air (dust/particles, open burning, and industrial emissions)

- Land (open dumping, hazardous waste, landfill)
- □ Water (stream/lake pollution, illegal discharges into waterways)
- **Public Drinking Water** (issues affecting quality or quantity of drinking water)
- ☐ Agricultural Problems (odors, mismanagement of animal manure, water, ammonia, and pesticides)

Briefly describe the problem. Please provide as much detail as possible regarding the description of the event and its location. Please indicate any evidence or documentation (i.e., photos, logs, etc.) of pollution that you will be able to provide. If you remember the specific times when the problem occurred, please list the time of day and date.

Has the problem affected your health? No \Box Yes \Box				
Have you consulted a doctor? No \Box Yes \Box				
Has the problem damaged your property? No \Box Yes \Box				
Have you ever worked for the suspected source? No 🔲 Yes 🗌				
Have you ever filed a claim against the responsible party? No \Box Yes \Box				
Have you contacted the source and complained? No \Box Yes \Box				
Are you willing to testify under oath at an enforcement hearing? No \Box Yes \Box				

Please use additional sheets of paper as necessary.

REQUIRED:

Unless you consent to its release, Illinois EPA will regard your identity within the complaint form as exempt from disclosure under the Freedom of Information Act and regulations. However, your identity may be discovered if there is any lawsuit about the facility that is the subject of your complaint.

Do you consent to Illinois EPA disclosing your identity as a complaining party? No \Box Yes \Box

Please return this form to the following address:

Citizen Pollution Complaint Illinois EPA Office of Community Relations #5 P.O. Box 19276 Springfield, Illinois 62794-9276

Fax: 217-785-7725