

Mr. Duane Vanderwerf
Creation Housing, Elkhart Door Division
P.O. Box 4543
Elkhart, Indiana 46514

Re: 039-13989-00287
Second Administrative Amendment to
FESOP 039-5747-00287

Dear Mr. Vanderwerf:

Vern's Quality Products, Inc. was issued a Federally Enforceable State Operating Permit December 6, 1996 for a fiber reinforced plastic (FRP), metal and wood door laminating source. This Amendment is to change the name of the company after a recent change in ownership by Creation Housing, Elkhart Door Division. Pursuant to the provisions of 326 IAC 2-8-10 the permit is hereby administratively amended as follows:

The name of the company has been changed on the FESOP from Vern's Quality Products, Inc., 54347 Highland Blvd., Elkhart, Indiana 46514 to the new name of Creation Housing, Elkhart Door Division at the same address. The appropriate Reporting Forms were changed also to reflect the new owners name.

All other conditions of the permit shall remain unchanged and in effect. Please attach a copy of this amendment to the front of the original permit.

This decision is subject to the Indiana Administrative Orders and Procedures Act - IC 4-21.5-3-5. If you have any questions on this matter, please contact Gary Freeman, of my staff, at 317-233-5334 or 1-800-451-6027, press 0 and ask for extension 3-5334.

Sincerely,

Paul Dubenetzky, Chief
Permits Branch
Office of Air Quality

Attachments: Reporting Forms
PD/gkf

cc: File -Elkhart County
Elkhart County Health Department
Air Compliance Section - Paul Karkiewicz
Compliance Data Section - Karen Nowak
IDEM Northern Regional Office
Permit Review Section 1 - Gary Freeman

FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP) OFFICE OF AIR QUALITY

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

100 North Senate Avenue, P. O. Box 6015
Indianapolis, Indiana 46206-6015
Phone: 1-800-451-6027

**Creation Housing, Elkhart Door Division
54347 Highland Blvd.
Elkhart, Indiana 46514**

Creation Housing, Elkhart Door Division is hereby authorized to operate subject to the conditions contained herein, the facilities listed in Section A (Source Summary) of this permit.

This permit is issued in accordance with 326 IAC 2 and 40 CFR Part 70 and contains the conditions and provisions specified in 326 IAC 2-8 and 40 CFR Part 70.6 as required by 42 U.S.C. 7401, et. seq. (Clean Air Act as amended by the 1990 Clean Air Act Amendments) and IC 13-15 and IC 13-17 (prior to July 1, 1996, IC 13-1-1-4 and IC 13-7-10).

Operation Permit No.: F 039-5747-00287	
Issued by: Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: December 6, 1996

First Administrative Amendment 039-10755-00287, issued April 10, 1999

Second Administrative Amendment: 039-13989-00287	Pages Affected: 22, 23, 24, and 25
Issued by:Original signed by Paul Dubenetzky Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: May 15, 2001

State Form 47738 (5-96)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION**

**FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
CERTIFICATION**

Source Name: Creation Housing, Elkhart Door Division
Source Address: 54347 Highland Blvd., Elkhart, Indiana 46514
FESOP No.: F 039-5747-00287

This certification shall be included when submitting monitoring, testing reports/results or other documents as required by this permit.

Please check what document is being certified:

- 9 Deviation Occurrence Reporting Form (For Control Equipment Monitoring)
- 9 Deviation Occurrence Reporting Form (For Material Usage, Quality, Etc.)
- 9 Relocation Notification
- 9 Test Result (specify)
- 9 Report (specify)
- 9 Notification (specify)
- 9 Other (specify)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

Signature:

Printed Name:

Title/Position:

Date:

State Form 47741 (5-96)

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION**

**FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
DEVIATION OCCURRENCE REPORTING FORM**

Source Name: Creation Housing, Elkhart Door Division
Source Address: 54347 Highland Blvd., Elkhart, Indiana 46514
FESOP No.: F 039-5747-00287

A separate copy of this report must be submitted for **each** material type, quantity usage and operation limitation (except control equipment monitoring) listed in this permit.
Attach a signed certification to complete this report.

Stack/Vent ID:

Equipment/Operation:

Parameter Subject to Material Type, Quantity Usage or Operation Limitations Specified in the Permit:
(ex: 2500 pounds per day, 300 hours per year, 5000 gallons per month)

Determination Period for this Parameter:
(ex: 365-day rolling sum, fixed monthly rate)

9 Permit Has No Rate Limitations for this Parameter.

Content Restriction for this Parameter:
(ex: maximum of 40 percent VOC in inks, 0.5 percent sulfur content)

Demonstration Method for this Parameter:
(ex: MSDS, Supplier, material sampling & analysis)

9 Permit Has No Content Limitations for this Parameter.

Comments:

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION**

FESOP Quarterly Report

Source Name: Creation Housing, Elkhart Door Division
Source Address: 54347 Highland Blvd., Elkhart, Indiana 46514
FESOP No.: F 039-5747-00287
Facility: Lamination Booth
Parameter: VOC and HAPs Delivered to the Applicators
Limit: 0.75 tons per month of any single HAP.
2.00 tons per month of any combination of HAPs.
2.00 tons per month of VOC.

Year: _____

Month	VOC (tons per month)	Combination of HAPs (tons per month)	Worst Case Single HAP (tons per month)

- 9 No deviation occurred in this quarter.
- 9 Deviation/s occurred in this quarter.
Deviation has been reported on: _____

Submitted by: _____

Title/Position: _____

Signature: _____

Date: _____

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE DATA SECTION**

FESOP Monthly Report

Source Name: Creation Housing, Elkhart Door Division
Source Address: 54347 Highland Blvd., Elkhart, Indiana 46514
FESOP No.: F 039-5747-00287
Facility: Lamination Booth
Parameter: VOC Delivered to the Applicators for Metal Coating
Limit: 14.9 pounds per day

Month: _____ Year: _____

Day	VOC (pounds per day)	Day	VOC (pounds per day)
1		17	
2		18	
3		19	
4		20	
5		21	
6		22	
7		23	
8		24	
9		25	
10		26	
11		27	
12		28	
13		29	
14		30	
15		31	
16		no. of deviations	

9 No deviation occurred in this month.

9 Deviation/s occurred in this month.
Deviation has been reported on: _____

Submitted by: _____

Title/Position: _____

Signature: _____

Date: _____