



Joseph E. Kernan
Governor

Lori F. Kaplan
Commissioner

June 4, 2004

100 North Senate Avenue
P.O. Box 6015
Indianapolis, Indiana 46206-6015
(317) 232-8603
(800) 451-6027
www.in.gov/idem

TO: Interested Parties / Applicant

RE: Midwest Environmental Services, Inc / 019-18963-00110

FROM: Paul Dubenetzky
Chief, Permits Branch
Office of Air Quality

Notice of Decision – Approval

Please be advised that on behalf of the Commissioner of the Department of Environmental Management, I have issued a decision regarding the enclosed matter. Pursuant to 326 IAC 2, this approval was effective immediately upon submittal of the application.

If you wish to challenge this decision, IC 4-21.5-3-7 requires that you file a petition for administrative review. This petition may include a request for stay of effectiveness and must be submitted to the Office of Environmental Adjudication, 100 North Senate Avenue, Government Center North, Room 1049, Indianapolis, IN 46204, **within eighteen (18) calendar days from the mailing of this notice**. The filing of a petition for administrative review is complete on the earliest of the following dates that apply to the filing:

- (1) the date the document is delivered to the Office of Environmental Adjudication (OEA);
- (2) the date of the postmark on the envelope containing the document, if the document is mailed to OEA by U.S. mail; or
- (3) The date on which the document is deposited with a private carrier, as shown by receipt issued by the carrier, if the document is sent to the OEA by private carrier.

The petition must include facts demonstrating that you are either the applicant, a person aggrieved or adversely affected by the decision or otherwise entitled to review by law. Please identify the permit, decision, or other order for which you seek review by permit number, name of the applicant, location, date of this notice and all of the following:

- (1) the name and address of the person making the request;
- (2) the interest of the person making the request;
- (3) identification of any persons represented by the person making the request;
- (4) the reasons, with particularity, for the request;
- (5) the issues, with particularity, proposed for considerations at any hearing; and
- (6) identification of the terms and conditions which, in the judgment of the person making the request, would be appropriate in the case in question to satisfy the requirements of the law governing documents of the type issued by the Commissioner.

If you have technical questions regarding the enclosed documents, please contact the Office of Air Quality, Permits Branch at (317) 233-0178. Callers from within Indiana may call toll-free at 1-800-451-6027, ext. 3-0178.

Enclosures
FNPER-AM.dot 9/16/03

June 4, 2004

Mr. Dennis Sterling
Midwest Environmental Services, Inc.
P.O. Box 219
Brownstown, Indiana 47220

Re: 019-18963-00110
First Administrative Amendment to
FESOP F019-16434-00110

Dear Mr. Sterling:

Southern Indiana Chemical Resources, LLC was issued a FESOP permit on March 12, 2003 for a stationary commercial liquid storage and transfer operation. A letter requesting a transfer of ownership was received on April 21, 2004. Pursuant to the provisions of 326 IAC 2-8-10(a)(4) the permit is hereby administratively amended as follows:

A.1 General Information [326 IAC 2-8-3(b)]

The Permittee owns and operates a stationary commercial liquid storage and transfer operation.

Authorized individual:	Paul Knowlson Dennis Sterling
Source Address:	10600 Highway 62, Charlestown, Indiana 47111
Mailing Address:	3375 Merriam Avenue, Muskegon, Michigan 49444 P.O. Box 219, Brownstown, Indiana 47220
General Source Phone:	317-737-3400 812-358-5160
SIC Code:	4226
County:	Clark
Source Location Status:	Attainment for all criteria pollutants
Source Status:	Federally Enforceable State Operating Permit (FESOP) Minor Source under PSD Rules; Minor Source, Section 112 of the Clean Air Act

Mr. Sterling replaces Mr. Knowlson as the Authorized Individual. Mr. Sterling is the President of Midwest Environmental Services, Inc. and meets the requirements of 326 IAC 2-1.1-1(1) as an Authorized Individual. The mailing address was changed to reflect the new owner's address for mailing and telephone number. changed for the new owner.

Effective April 1, 2004, Midwest Environmental Services, Inc. become the owner and operator of the commercial liquid storage and transfer operation located at 10600 Highway 62, Charlestown, Indiana 47111. They will operate under the name of Midwest Environmental Services, Inc. The appropriate reporting forms were changed to show the new mailing address and operating name.

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

Midwest Environmental Services, Inc.
Charlestown, Indiana

Page 2 of 2
019-18963-00110

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, at (800) 451-6027, and ask for Gary Freeman or extension (3-5334), or dial (317) 233-5334.

Sincerely,

Original signed by
Paul Dubenetzky, Chief
Permits Branch
Office of Air Quality

Attachments: Updated Pages
PD/gkf

cc: File -Clark County
Clark County Health Department
Air Compliance Section Inspector – Raymond Schick
Compliance Data Section
Billing, Licensing and Training Section - Chet Bohannon
Permit Review Section 1 - Gary Freeman

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

**Midwest Environmental Services, Inc.
10600 Highway 62
Charlestown, Indiana 47111**

(herein known as the Permittee) is hereby authorized to operate subject to the conditions contained herein, the source described in Section A (Source Summary) of this permit.

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

Operation Permit No.: F019-16434-00110	
Issued by: Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: March 11, 2003 Expiration Date: March 11, 2008

First Administrative Amendment: 019-18963-00110	Pages Affected: 4, 26, 27, 28, 29, 30, 31, and 32
Issued by: Original signed by Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: June 4, 2004

SECTION A SOURCE SUMMARY

This permit is based on information requested by the Indiana Department of Environmental Management (IDEM), Office of Air Quality (OAQ). The information describing the source contained in conditions A.1 and A.2 is descriptive information and does not constitute enforceable conditions. However, the Permittee should be aware that a physical change or a change in the method of operation that may render this descriptive information obsolete or inaccurate may trigger requirements for the Permittee to obtain additional permits or seek modification of this permit pursuant to 326 IAC 2, or change other applicable requirements presented in the permit application.

A.1 General Information [326 IAC 2-8-3(b)]

The Permittee owns and operates a stationary commercial liquid storage and transfer operation.

Authorized individual: Dennis Sterling
Source Address: 10600 Highway 62, Charlestown, Indiana 47111
Mailing Address: P.O. Box 219, Brownstown, Indiana 47220
General Source Phone: 812-358-5160
SIC Code: 4226
County: Clark
Source Location Status: Attainment for all criteria pollutants
Source Status: Federally Enforceable State Operating Permit (FESOP)
Minor Source under PSD Rules;
Minor Source, Section 112 of the Clean Air Act

A.2 Emission Units and Pollution Control Equipment Summary [326 IAC 2-8-3(c)(3)]

This stationary source consists of the following emission units and pollution control devices:

- (a) One (1) railcar/truck/barge liquid raw material loading/unloading system, identified as the Winston Yard, loading and unloading methyl ethyl ketone (MEK), glycols, glycol ethers, alcohols, ethanalamines, surfactants, and other viscous organics with a maximum design throughput of 11,000,001 gallons per year;

and

- (b) One (1) raw material liquid storage system including:

- (1) the Midwest Storage Area, with a maximum design throughput of 7,501,859 gallons per year, consisting of:

- (A) One (1) 342,005 gallon vertical raw material storage tank, identified as Tank 10, and
(B) Two (1) 67,682 gallon vertical raw material storage tanks, identified as Tanks 11 and 12,

with the worst case material stored being propylene glycol.

- (2) Storage Area 2596, with a maximum design throughput of 4,404,529 gallons per year, consisting of:

- (A) Three (3) 81,218 gallon vertical raw material storage tanks, identified as Tanks 25, 26, and 27, and
(B) Two (2) 22,533 gallon vertical raw material storage tanks, identified as Tanks 28 and 29,

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY**

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

Source Name: Midwest Environmental Services, Inc.
Source Address: 10600 Highway 62, Charlestown Indiana 47111
Mailing Address: P.O. Box 219, Brownstown, Indiana 47220
FESOP No.: 019-16434-00110

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:

- Annual Compliance Certification Letter
- Test Result (specify) _____
- Report (specify) _____
- Notification (specify) _____
- Affidavit (specify) _____
- Other (specify) _____

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

Signature:

Printed Name:

Title/Position:

Date:

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE BRANCH
P.O. Box 6015
100 North Senate Avenue
Indianapolis, Indiana 46206-6015
Phone: 317-233-5674
Fax: 317-233-5967**

**FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
EMERGENCY OCCURRENCE REPORT**

Source Name: Midwest Environmental Services, Inc.
Source Address: 10600 Highway 62, Charlestown Indiana 47111
Mailing Address: P.O. Box 219, Brownstown, Indiana 47220
FESOP No.: 019-16434-00110

This form consists of 2 pages

Page 1 of 2

9 This is an emergency as defined in 326 IAC 2-7-1(12)
 The Permittee must notify the Office of Air Quality (OAQ), within four (4) business hours (1-800-451-6027 or 317-233-5674, ask for Compliance Section); and
 The Permittee must submit notice in writing or by facsimile within two (2) working days (Facsimile Number: 317-233-5967), and follow the other requirements of 326 IAC 2-7-16

If any of the following are not applicable, mark N/A

Facility/Equipment/Operation:

Control Equipment:

Permit Condition or Operation Limitation in Permit:

Description of the Emergency:

Describe the cause of the Emergency:

If any of the following are not applicable, mark N/A

Page 2 of 2

Date/Time Emergency started:
Date/Time Emergency was corrected:
Was the facility being properly operated at the time of the emergency? Y N Describe:
Type of Pollutants Emitted: TSP, PM-10, SO ₂ , VOC, NO _x , CO, Pb, other:
Estimated amount of pollutant(s) emitted during emergency:
Describe the steps taken to mitigate the problem:
Describe the corrective actions/response steps taken:
Describe the measures taken to minimize emissions:
If applicable, describe the reasons why continued operation of the facilities are necessary to prevent imminent injury to persons, severe damage to equipment, substantial loss of capital investment, or loss of product or raw materials of substantial economic value:

Form Completed by: _____
Title / Position: _____
Date: _____
Phone: _____

A certification is not required for this report.

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

FESOP Quarterly Report

Source Name: Midwest Environmental Services, Inc.
Source Address: 10600 Highway 62, Charlestown Indiana 47111
Mailing Address: P.O. Box 219, Brownstown, Indiana 47220
FESOP No.: 019-16434-00110
Facility: Source Emission Units
Parameter: Worst Case Single HAP Emissions for the Consecutive 12 Month Period
Limit: Less Than 10 Tons Per Year per Consecutive 12 Month Period

YEAR: _____

Month	Worst Case Single HAP Emissions for the Consecutive 12 Month Period (Tons)
1	
2	
3	

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: _____

Phone: _____

Attach a signed certification to complete this report.

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

FESOP Quarterly Report

Source Name: Midwest Environmental Services, Inc.
Source Address: 10600 Highway 62, Charlestown Indiana 47111
Mailing Address: P.O. Box 219, Brownstown, Indiana 47220
FESOP No.: 019-16434-00110
Facility: Source Emission Units
Parameter: Combined HAP Emissions for the Consecutive 12 Month Period
Limit: Less Than 25 Tons Per Year per Consecutive 12 Month Period

YEAR: _____

Month	(a) Combined HAP Emissions This Month (Tons)	(b) Combined HAP Emissions From the Previous 11 Months (Tons)	(a) + (b) Combined HAP Emissions for the Consecutive 12 Month Period (Tons)
1			
2			
3			

☛ **No deviation occurred in this quarter.**

☛ **Deviation/s occurred in this quarter.**

Deviation has been reported on: _____

Submitted by: _____

Title / Position: _____

Signature: _____

Date: _____

Phone: _____

Attach a signed certification to complete this report.

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

**FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
QUARTERLY DEVIATION AND COMPLIANCE MONITORING REPORT**

Source Name: Midwest Environmental Services, Inc.
Source Address: 10600 Highway 62, Charlestown Indiana 47111
Mailing Address: P.O. Box 219, Brownstown, Indiana 47220
FESOP No.: 019-16434-00110

Months: _____ to _____ Year: _____

Page 1 of 2

This report shall be submitted quarterly based on a calendar year. Any deviation from the requirements, the date(s) of each deviation, the probable cause of the deviation, and the response steps taken must be reported. Deviations that are required to be reported by an applicable requirement shall be reported according to the schedule stated in the applicable requirement and do not need to be included in this report. Additional pages may be attached if necessary. If no deviations occurred, please specify in the box marked "No deviations occurred this reporting period".

NO DEVIATIONS OCCURRED THIS REPORTING PERIOD.

THE FOLLOWING DEVIATIONS OCCURRED THIS REPORTING PERIOD

Permit Requirement (specify permit condition #)

Date of Deviation:

Duration of Deviation:

Number of Deviations:

Probable Cause of Deviation:

Response Steps Taken:

Permit Requirement (specify permit condition #)

Date of Deviation:

Duration of Deviation:

Number of Deviations:

Probable Cause of Deviation:

Response Steps Taken:

Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	

Form Completed By: _____

Title/Position: _____

Date: _____

Phone: _____

Attach a signed certification to complete this report.