



Mitchell E. Daniels, Jr.
Governor

Thomas W. Easterly
Commissioner

100 North Senate Avenue
Indianapolis, Indiana 46204
(317) 232-8603
(800) 451-6027
www.IN.gov/idem

TO: Interested Parties / Applicant
DATE: May 05, 2005
RE: Total Fleet Service, LLC / 003-21008-00208
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 1/10/05



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
We make Indiana a cleaner, healthier place to live.

Mitchell E. Daniels, Jr.
 Governor

Thomas W. Easterly
 Commissioner

May 05, 2005

100 North Senate Avenue
 Indianapolis, Indiana 46204
 (317) 232-8603
 (800) 451-6027
 www.IN.gov/idem

Mr. Kevin Smith
 Total Fleet Service, LLC
 4808 Kroemer Road,
 Fort Wayne, Indiana 46818

Re: 003-21008-00208
 Second Administrative Amendment to
 FESOP F003-13899-00208

Dear Mr. Smith:

North American Van Lines was issued a FESOP permit on August 19, 2002 for a stationary motor freight and warehousing source. A letter requesting a transfer of ownership and a change in Authorized Individual was received on March 17, 2005. Pursuant to the provisions of 326 IAC 2-8-10 (a)(2) and (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 motor freight and warehousing source.

Authorized Individual:	Vice President of Fleet Services Kevin Smith
Source Address:	5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
Mailing Address:	P.O. Box 988, Fort Wayne, Indiana 46801-0988 4808 Kroemer Road, Fort Wayne, Indiana 46818
General Source Phone Number:	260 - 429 - 1390
SIC Code:	4213
County Location:	Allen County
Source Location Status:	Nonattainment for all other criteria Attainment for all criteria pollutants
Source Status:	Federally Enforceable State Operating Permit (FESOP) Minor Source, under PSD Rules and Nonattainment NSR; Minor Source, Section 112 of the Clean Air Act

North American Van Lines , Inc. transferred ownership of the source located at 5001 U.S. Highway 30 West, Fort Wayne, Indiana to Total Fleet Service LLC, effective March 30, 2005. This transfers responsibility, coverage and liability to the new owner effective March 30, 2005. The mailing address was changed to reflect the new owners mailing address.

Mr. Kevin Smith part owner of Total Fleet Service, LLC replaces the position of Vice President of Fleet Services as the Authorized Individual. Mr. Smith meets the requirements of 326 IAC 2-1.1-1(1) as an Authorized Individual.

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.

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, press 0 and ask for Gary Freeman or extension (3-5334), or dial (317) 233-5334.

Sincerely,

Original signed by
Nysa L. James, Section Chief
Permits Branch
Office of Air Quality

Attachments: Updated Pages
NLJ/gkf

cc: File -Allen County
Allen County Health Department
Air Compliance Section Inspector – Patrick Burton
Billing, Licensing and Training Section - Chet Bohannon
Permit Review Section 1 - Gary Freeman



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

**Total Fleet Service, LLC
 5001 U.S. Highway 30 West
 Fort Wayne, Indiana 46818**

(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.: F 003-13899-00208	
Issued by Original Signed by Paul Dubenetzky Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: August 19, 2002 Expiration Date: August 19, 2007

First Minor Permit Revision 003-16790-00208, issued on April 9, 2003
 First Administrative Amendment 003-16621-00208, issued June 15, 2004
 Second Minor Permit Revision 003-19659-00208, issued November 10, 2004

Second Administrative Amendment: 003-21008-00208	Pages Affected: 5, 31, 32, 33, 34, 35, 36, 37, and 38
Issued by: Original signed by Nysa L. James, Section Chief Office of Air Quality	Issuance Date: May 05, 2005

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 through A.3 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 motor freight and warehousing source.

Authorized Individual:	Kevin Smith
Source Address:	5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
Mailing Address:	4804 Kroemer Road , Fort Wayne, Indiana 46818
General Source Phone Number:	260 - 429 - 1390
SIC Code:	4213
County Location:	Allen County
Source Location Status:	Nonattainment for ozone under the 8-hour standard Attainment for all criteria pollutants
Source Status:	Federally Enforceable State Operating Permit (FESOP) Minor Source, under PSD Rules and Nonattainment NSR; 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) Three (3) spray paint booths, known as E1 (Paint Rooms A and D), E2 (Paint Room B) and E3 (Paint Room C), constructed prior to 1975, equipped with three (3) low pressure air atomized spray guns that operate one (1) at a time, and dry filters for overspray control, exhausting to stacks E1, E2, and E3, respectively, capacity: 0.38 trailers per hour, each.
- (b) One (1) spray booth, known as E4 (Paint Room E), consisting of undercoat, topcoat, or washdown operations that operate one (1) at a time, equipped with low pressure air atomized spray guns and dry filters to control particulate overspray, exhausting to Stacks E4a, E4b, E4c, and E4d, capacity: 0.25 trailers per hour
- (c) One (1) spray paint booth, known as E5 (Paint Room F), equipped with one (1) low pressure air atomized spray gun and dry filters to control particulate overspray, exhausting to Stacks E5a and E5b, capacity: 0.25 trailer parts of various substrates (metal, fiberglass, etc.) per hour.
- (d) Two (2) fuel oil storage tanks, known as Tanks 1 and 2, constructed in 1990, capacity: 15,000 gallons, each.

A.3 Insignificant Activities [326 IAC 2-7-1(21)] [326 IAC 2-8-3(c)(3)(I)]

This stationary source also includes the following insignificant activities, as defined in 326 IAC 2-7-1(21):

- (a) Natural gas-fired combustion sources with heat input equal to or less than ten million (10,000,000) British thermal units per hour. including the following.
 - (1) Two (2) natural gas fired air make up units, heat input capacity: 3.85 million British thermal units per hour, each;

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

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

Source Name: Total Fleet Service, LLC
Source Address: 5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
Mailing Address: 4808 Kroemer Road, Fort Wayne, Indiana 46818
FESOP No.: F 003-13899-00208

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:

Phone:

Date:

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE BRANCH
100 North Senate Avenue
Indianapolis, Indiana 46204
Phone: 317-233-5674
Fax: 317-233-5967**

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

Source Name: Total Fleet Service, LLC
Source Address: 5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
Mailing Address: 4808 Kroemer Road, Fort Wayne, Indiana 46818
FESOP No.: F 003-13899-00208

This form consists of 2 pages

Page 1 of 2

- 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) 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: Total Fleet Service, LLC
Source Address: 5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
Mailing Address: 4808 Kroemer Road, Fort Wayne, Indiana 46818
FESOP No.: F 003-13899-00208
Facilities: Five (5) spray paint booths, known as E1, E2, E3 E4, and E5
Parameter: VOC delivered to the applicators
Limit: Total not to exceed 95.5 tons per twelve (12) consecutive month period with compliance determined at the end of each month.

YEAR:

Month	Total VOC usage (tons)	Total VOC usage (tons)	Total VOC usage (tons)
	This Month	Previous 11 Months	12 Month Total

- 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**

FESOP Quarterly Report

Source Name: Total Fleet Service, LLC
 Source Address: 5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
 Mailing Address: 4808 Kroemer Road, Fort Wayne, Indiana 46818
 FESOP No.: F 003-13899-00208
 Facilities: Five (5) spray paint booths, known as E1, E2, E3 E4, and E5
 Parameter: Individual HAP delivered to the applicators
 Limit: Total not to exceed 9.0 tons per twelve (12) consecutive month period with compliance determined at the end of each month.

YEAR:

Month	Individual HAP Usage (tons)	Individual HAP Usage (tons)	Individual HAP Usage (tons)
	This Month	Previous 11 Months	12 Month Total

- 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**

FESOP Quarterly Report

Source Name: Total Fleet Service, LLC
 Source Address: 5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
 Mailing Address: 4808 Kroemer Road, Fort Wayne, Indiana 46818
 FESOP No.: F 003-13899-00208
 Facilities: Five (5) spray paint booths, known as E1, E2, E3 E4, and E5
 Parameter: Combination of HAPs delivered to the applicators
 Limit: Total not to exceed 24.0 tons per twelve (12) consecutive month period with compliance determined at the end of each month.

YEAR:

Month	Combination of HAPs Usage (tons)	Combination of HAPs Usage (tons)	Combination of HAPs Usage (tons)
	This Month	Previous 11 Months	12 Month Total

- 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: Total Fleet Service, LLC
Source Address: 5001 U.S. Highway 30 West, Fort Wayne, Indiana 46818
Mailing Address: 4808 Kroemer Road, Fort Wayne, Indiana 46818
FESOP No.: F 003-13899-00208

Months: _____ to _____ Year: _____

Page 1 of 2

This report is an affirmation that the source has met all the requirements stated in this permit. 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:	

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

Form Completed By: _____

Title/Position: _____

Date: _____

Phone: _____

Attach a signed certification to complete this report.