



*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: December 05, 2005  
RE: American Cargo, LLC / 039-22005-00255  
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

December 05, 2005

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Thomas W. Easterly  
 Commissioner

Mr. Jack Rogers  
 American Cargo, LLC  
 2109 Lincolnway East  
 Elkhart, IN 46526-6427

Re: 039-22005-00255  
 Sixth Administrative Amendment to  
 FESOP 039-12923-00255

Dear Mr. Rogers:

American Cargo, LLC was issued a FESOP on January 16, 2002 for a stationary truck body manufacturing facility located at 64141 U S Highway 33, Goshen, Indiana. A letter requesting a change in the Authorized Individual was received on November 9, 2005. A letter requesting a change in the address was received November 16, 2005. The change in address was due to USPS redesignation, not a relocation of the source. Pursuant to the provisions of 326 IAC 2-8-10 the permit is hereby administratively amended as follows (new language shown in **bold** and deleted language shown in ~~strikeout~~):

1. The Authorized Individual changed from John Morgan, Owner to Jack Rogers, General Manager
2. The address changed from 64141 U S Highway 33, to 2109 Lincolnway East

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

The Permittee owns and operates a stationary truck body manufacturing plant.

Authorized individual:	<del>John Morgan, Owner</del> <b>Jack Rogers, General Manager</b>
Source Address:	<del>64141 U. S. Highway 33</del> <b>2109 Lincolnway East</b> , Goshen Indiana 46526- <del>6427</del>
Mailing Address:	<del>64141 U. S. Highway 33</del> <b>2109 Lincolnway East</b> , Goshen Indiana 46526- <del>6427</del>
General Source Phone Number:	574-534-2414
SIC Code:	3710
Source Location Status:	Elkhart
County Status:	<del>Maintenance for</del> <b>Basic Nonattainment for 8-hour</b> Ozone and Attainment for all other criteria pollutants
Source Status:	Federally Enforceable State Operating Permit (FESOP) Minor under PSD Rules; Area Source under Section 112

3. IDEM's address has also been revised as follows:

Compliance Data Section  
 Office of Air Quality  
 100 North Senate Avenue  
~~P.O. Box 6015~~  
 Indianapolis, IN 46206-~~60154~~

4. All references to the IDEM, Office of Air Quality have been updated as follows:

Office of Air ~~Management~~ **Quality**

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 renewed 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 Cynthia Bymaster, at (800) 451-6027, press 0 and ask for Cynthia Bymaster or extension (3-2641), or dial (317) 233-2641.

Sincerely,

Original signed by  
Nysa L. James  
Section Chief  
Permits Branch

Attachments

NLJ/clb

Cc: File -Adams County  
Adams County Health Department  
Air Compliance Section Inspector – Ryan Hillman  
Billing, Licensing and Training Section - Chet Bohannon  
Permit Review Section 1 – Cynthia Bymaster



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

**American Cargo L L C  
2109 Lincolnway East  
Goshen, Indiana 46526**

(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.: F039-12923-00255	
Issued by: Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: January 16, 2002 Expiration Date: January 16, 2007
First Administrative Amendment: 039-16277-00255	Issued: August 15, 2002
Second Administrative Amendment: 039-16226-00255	Issued: November 4, 2002
Third Administrative Amendment: 039-18164-00255	Issued: December 3, 2003
Fourth Administrative Amendment: 039-20137-00255	Issued: February 16, 2005
Fifth Administrative Amendment: 039-20038-00255	Issued: October 21, 2004
Sixth Administrative Amendment: 039-22005-00255	Pages Affected: 5, 30-37
Issued by: Original signed by  Nysa L. James, Section Chief Office of Air Quality	Issuance Date: December 05, 2005 Expiration Date: January 16, 2007

## 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)]

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The Permittee owns and operates a stationary truck body manufacturing plant.

Authorized individual:	Jack Rogers, General Manager
Source Address:	2109 Lincolnway East, Goshen Indiana 46526
Mailing Address:	2109 Lincolnway East, Goshen Indiana 46526
General Source Phone Number:	574-534-2414
SIC Code:	3710
Source Location Status:	Elkhart
County Status:	Basic Nonattainment for 8-hour Ozone and Attainment for all other criteria pollutants
Source Status:	Federally Enforceable State Operating Permit (FESOP) Minor under PSD Rules; Area Source under Section 112

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

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

- (a) Two (2) spray booths identified as E2 and E3 each equipped with seven (7) HVLP spray guns using dry filters for control. The spray booths have a maximum capacity of 2.25 units per hour and vent to stacks E2 and E3, respectively.
- (b) General undercoating, caulking, adhesive spray and hand applications throughout the plant, excluding any operations requiring spray guns. (All operations requiring spray guns will take place in spray booths.)
- (c) A woodworking operation consisting of the following woodworking facilities.
  - (1) Three (3) table saws.
  - (2) Three (3) drill presses.
  - (3) Six (6) chop saws.
  - (4) Five (5) radial air saws.
  - (5) Five (5) band saws.
  - (6) Five (5) abrasive cutoff saws.
  - (7) Three (3) up cut saws.
  - (8) Miscellaneous trimming, drilling, and grinding of wood and some metal/aluminum.

## INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY

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

Source Name: American Cargo Corporation  
Source Address: 2109 Lincolnway East, Goshen Indiana 46526  
Mailing Address: 2109 Lincolnway East, Goshen Indiana 46526  
FESOP No.: 039-12923-00255

**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  
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: American Cargo Corporation  
Source Address: 2109 Lincolnway East, Goshen Indiana 46526  
Mailing Address: 2109 Lincolnway East, Goshen Indiana 46526  
FESOP No.: 039-12923-00255

**This form consists of 2 pages**

**Page 1 of 2**

<input type="checkbox"/> This is an emergency as defined in 326 IAC 2-7-1(12) <ul style="list-style-type: none"><li>• 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</li><li>• 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</li></ul>
---

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 <sub>2</sub> , VOC, NO <sub>x</sub> , 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: American Cargo Corporation  
 Source Address: 2109 Lincolnway East, Goshen Indiana 46526  
 Mailing Address: 2109 Lincolnway East, Goshen Indiana 46526  
 FESOP No.: 039-12923-00255  
 Facility: Spray booths E2 and E3 and undercoating, caulking, and adhesive spray operations (all in D.1) and the degreaser (D.2)  
 Parameter: Volatile Organic Compounds  
 Limit: Less than 100 tons per 12 consecutive month period

YEAR: \_\_\_\_\_

Month	Column 1	Column 2	Column 1 + Column 2
	This Month	Previous 11 Months	12 Month Total
Month 1			
Month 2			
Month 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

### FESOP Quarterly Report

Source Name: American Cargo Corporation  
Source Address: 2109 Lincolnway East, Goshen Indiana 46526  
Mailing Address: 2109 Lincolnway East, Goshen Indiana 46526  
FESOP No.: 039-12923-00255  
Facility: Spray booths E2 and E3 and undercoating, caulking, and adhesive spray operations  
(all in D.1) and the degreaser (D.2)  
Parameter: Hazardous Air Pollutants (HAPs)  
Limit: Less than ten (10) tons per 12 consecutive month period for each individual HAP

YEAR: \_\_\_\_\_

Month	Column 1	Column 2	Column 1 + Column 2
	This Month	Previous 11 Months	12 Month Total
Month 1			
Month 2			
Month 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

### FESOP Quarterly Report

Source Name: American Cargo Corporation  
 Source Address: 2109 Lincolnway East, Goshen Indiana 46526  
 Mailing Address: 2109 Lincolnway East, Goshen Indiana 46526  
 FESOP No.: 039-12923-00255  
 Facility: Spray booths E2 and E3 and undercoating, caulking, and adhesive spray operations  
 (all in D.1) and the degreaser (D.2)  
 Parameter: Hazardous Air Pollutants (HAPs)  
 Limit: Less than twenty-five (25) tons per 12 consecutive month period for a combination of HAPs

YEAR: \_\_\_\_\_

Month	Column 1	Column 2	Column 1 + Column 2
	This Month	Previous 11 Months	12 Month Total
Month 1			
Month 2			
Month 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: American Cargo Corporation  
Source Address: 2109 Lincolnway East, Goshen Indiana 46526  
Mailing Address: 2109 Lincolnway East, Goshen Indiana 46526  
FESOP No.: 039-12923-00255

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:**

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

Form Completed by: \_\_\_\_\_  
Title / Position: \_\_\_\_\_  
Date: \_\_\_\_\_  
Phone: \_\_\_\_\_

Attach a signed certification to complete this report.