



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 17, 2007
RE: Clarian North Medical Center / 057-25461-00065
FROM: Matthew Stuckey, Deputy Branch Chief
Permits Branch
Office of Air Quality

Notice of Decision: Revocation

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 IC 4-21.5-3-5(f) this revocation is effective fifteen (15) days after it is served. When served by U.S. mail, the order is effective eighteen (18) calendar days from the mailing of this notice pursuant to IC 4-21.5-3-2(e).

If you wish to challenge this decision, IC 4-21.5-3-7 and IC 13-15-7-3 require that you file a petition for administrative review. This petition describing your intent must be submitted to the Office of Environmental Adjudication, 100 North Senate Avenue, Government Center North, Suite N 501E, 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-REV.dot12/3/07



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We make Indiana a cleaner, healthier place to live.

Mitchell E. Daniels, Jr.
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Mark McLean
Clarian North Medical Center
11700 North Meridian Street
Carmel, IN 46032

December 17, 2007

Re: 057-25461-00065
Revocation of MSOP No. 057-19469-00065

Dear Mr. McLean:

On December 8, 2004, Clarian North Medical Center was issued a Minor Source Operating Permit (MSOP) No. 057-19469-00065 for a stationary medical center, located at 100 West 116th Street, Carmel, IN 46032. On October 4, 2007, Clarian North Medical Center submitted an application for a Source Specific Operating Agreement (SSOA). Accordingly, Clarian North Medical Center, has been issued a SSOA No. 057-25367-00065 that supersedes MSOP No. 057-19469-00065.

Pursuant to 326 IAC 2-1.1-9, any permit to construct or operate or any permit revision approval granted by the commissioner may be revoked for any cause that establishes in the judgment of the commissioner the fact that continuance of the permit or permit revision approval is not consistent with the purposes of 326 IAC 2. Since the source has been issued a SSOA, the MSOP is now superseded and is no longer needed.

The MSOP No. 057-19469-00065 issued on December 8, 2004, is hereby revoked. Pursuant to IC 4-21.5-3-5(a) and (b), this revocation letter is effective in eighteen (18) days from the date of this letter.

If there are any questions about this revocation, please contact Brian Williams, at 317-234-5375 or at 1-800-451-6027 (ext 45375).

Sincerely/Original Signed By:

Iryn Calilung, Section Chief
Permits Branch
Office of Air Quality

IC/BMW

cc: File - Hamilton County
Hamilton County Health Department
Air Compliance Section - Larry Howard
Compliance Data Section
Program Planning and Policy – Scott Delaney
Billing Licensing and Training Section – Dan Stamatkin