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Received by State of Indiana IDEM-OAQ via email March 6, 2023 MJ-2

March 3, 2023

Indiana Department of Environmental Management Office of Air Quality Permits Branch 100 N. Senate Avenue MC 61-53 Room 1003 Indianapolis, IN 46204-2251

Re: Arcosa LW HPB, LLC

Source ID 109-00007

Control Device Replacement Application

Dear Sir or Madam:

On behalf of Arcosa LW HPB, LLC (Arcosa), B-WISE Consulting LLC (B-WISE) is submitting the enclosed permit application to request the replacement of an existing control device.

The baghouse currently in commission is identified in Section D.1(c) of Permit T109-39783-00007 as follows:

"One (1) rotary kiln, identified as K5, constructed in 1966, with a maximum heat input of 100 MMBtu per hour burning natural gas or bituminous coal, with a maximum capacity of 30 tons of raw shale per hour, using a cloth baghouse as control, and exhausting to stack ST5."

The facility will be replacing the cloth baghouse controlling emissions from rotary kiln K5. Construction on the new baghouse will take place while the currently permitted baghouse is operating. Once the new baghouse is fully constructed, the source will disconnect the currently permitted baghouse and commission the newly constructed baghouse. This transition is expected to occur in June of 2023. This baghouse replacement will not cause an increase in emissions, and during the transition phase, the facility will not be operating rotary kiln K5.

Thank you for your assistance with this matter. Please contact me by telephone at 317-509-2762 or via e-mail at cwise@b-wiseconsulting.com if you have any questions.

Sincerely,

Cherge Wise

Cheryl Wise

Co-Founder | C.E.O.

Enclosure

Cc: Ralph Hulsizer, Arcosa via e-mail

Jim Martin, Arcosa via e-mail Dainae Prejean, Arcosa via e-mail

AIR PERMIT APPLICATION COVER SHEET

State Form 50639 (R4 / 1-10)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch

100 N. Senate Avenue, MC 61-53 Room 1003 Indianapolis, IN 46204-2251 Telephone: (317) 233-0178 or Toll Free: 1-800-451-6027 x30178 (within Indiana)

Facsimile Number: (317) 232-6749

www.IN.gov/idem

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- The purpose of this cover sheet is to obtain the core information needed to
 process the air permit application. This cover sheet is required for <u>all</u> air
 permit applications submitted to IDEM, OAQ. Place this cover sheet on
 top of all subsequent forms and attachments that encompass your air
 permit application packet.
- Submit the completed air permit application packet, including all forms and attachments, to IDEM Air Permits Administration using the address in the upper right hand comer of this page.
- IDEM will send a bill to collect the filing fee and any other applicable fees.
- Detailed instructions for this form are available on the Air Permit Application Forms website.

FOR OFFICE USE ONLY
PERMIT NUMBER:
109-46380-00007_
DATE APPLICATION WAS RECEIVED:
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1.	Tax ID Number:
	PART A: Purpose of Application
	rt A identifies the purpose of this air permit application. For the purposes of this form, the term
"sc	ource" refers to the plant site as a whole and NOT to individual emissions units.
2.	Source / Company Name: Arcosa LW HPB, LLC 3. Plant ID: 109 — 00007
4.	Billing Address: 6618 Tidewater Road
	City: Mooresville State: IN ZIP Code: 46158 –
5.	Permit Level: ☐ Exemption ☐ Registration ☐ SSOA ☐ MSOP ☐ FESOP ☑ TVOP ☐ PBR
6.	Application Summary: Check all that apply. Multiple permit numbers may be assigned as needed based on the choices selected below.
	☐ Initial Permit ☐ Renewal of Operating Permit ☐ Asphalt General Permit
	Review Request Revocation of Operating Permit Alternate Emission Factor Request
	☐ Interim Approval ☐ Relocation of Portable Source ☐ Acid Deposition (Phase II)
	Site Closure Emission Reduction Credit Registry
	☐ Transition (between permit levels) From: To:
	Administrative Amendment: Company Name Change Change Change Change of Responsible Official
	☐ Correction to Non-Technical Information ☐ Notice Only Change
	Other (specify):
	☐ New Applicable Permit Requirement ☐ Change to Applicability of a Permit Requirement
	☐ Prevention of Significant Deterioration ☐ Emission Offset ☐ MACT Preconstruction Review
	☐ Minor Source Modification ☐ Significant Source Modification
	☐ Minor Permit Modification ☐ Significant Permit Modification
	Other (specify):
7.	Is this an application for an initial construction and/or operating permit for a "Greenfield" Source? ☐ Yes ☒ No
8.	Is this an application for construction of a new emissions unit at an Existing Source? ☐ Yes ☒ No

			PART B: Pre-Application Meeting
Part	B specifies	whether a	meeting was held or is being requested to discuss the permit application.
9. V			en the company and IDEM prior to submitting this application to discuss the details of the
D	⊠ No	☐ Yes:	Date:
10. V	Would you like project?	to schedule	a meeting with IDEM management and your permit writer to discuss the details of this
	⊠ No	Yes:	Proposed Date for Meeting:
			PART C: Confidential Business Information
Part infor	C identifies mation is ke	permit ap ept separa	plications that require special care to ensure that confidential business te from the public file.
Set ou	ut in the Indian information re in types of bus	na Administra egarding subi	e made at the time the information is submitted to IDEM, and must follow the requirements ative Code (IAC). To ensure that your information remains confidential, refer to the IDEM, mittal of confidential business information. For more information on confidentiality for nation, please review IDEM's Nonrule Policy Document Air-031-NPD regarding Emission
11. k	s any of the Business In	informatio formation	on contained within this application being claimed as Confidential
	⊠ No 🔲	Yes	
		PART D	: Certification Of Truth, Accuracy, and Completeness
is tru certif For a	uthful, accura fication will b Part 70 Opera	cial certific ate, and co be deemed ating Permit (cation that the information contained within the air permit application packet omplete. Any air permit application packet that we receive without a signed d incomplete and may result in denial of the permit. (TVOP) or a Source Specific Operating Agreement (SSOA), a "responsible official" as
Individ	dual" as define	ed in 326 IAC	ust certify the air permit application. For all other applicants, this person is an "authorized 2-1.1-1(1).
\boxtimes	I certify und statements	der penalty 3 and inforn	of law that, based on information and belief formed after reasonable inquiry, the nation contained in this application are true, accurate, and complete.
	Dowden e (typed)	7 6	Vice President - Operations Title 3-6-20-3
Signa	iture		Date



OAQ GENERAL SOURCE DATA APPLICATION GSD-01: Basic Source Level Information

State Form 50640 (R5 / 1-10)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch 100 N. Senate Avenue, MC 61-53 Room 1003 Indianapolis, IN 46204-2251 Telephone: (317) 233-0178 or

Toll Free: 1-800-451-6027 x30178 (within Indiana) Facsimile Number: (317) 232-6749 www.IN.gov/idem

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NOTES:

- The purpose of GSD-01 is to provide essential information about the entire source of air pollutant emissions. GSD-01 is a required form.
- Detailed instructions for this form are available on the Air Permit Application Forms website.
- All information submitted to IDEM will be made available to the public unless it is submitted under a claim of confidentiality. Claims
 of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in 326
 IAC 17.1-4-1. Failure to follow these requirements exactly will result in your information becoming a public record, available for
 public inspection.

109-46380-00007

PART A: Source / Company Location Information					
1. Source / Company Name: Arcosa	LW HPB, LLC	2	. Plant ID:	109 – 00007	
3. Location Address: 6618 North Tide	3. Location Address: 6618 North Tidewater Road				
City: Mooresville		State: IN	ZIP Code: 46	3158 –	
4. County Name: Morgan		5. Township Na	me: Clay		
6. Geographic Coordinates:					
Latitude: 39 31' 37"		Longitude: 86	22' 43.06"		
7. Universal Transferal Mercadum C	oordinates (if known):			
Zone:	Horizontal:		Vertical:		
8. Adjacent States: Is the source loca	ted within 50 miles of	an adjacent state?			
No ☐ Yes – Indicate Adjacent Sta	te(s): Illinois (IL)	☐ Michigan (MI)	Ohio (OH)	☐ Kentucky (KY)	
9. Attainment Area Designation: Is the	e source located within	a non-attainment area	a for any of the o	criteria air pollutants?	
No ☐ Yes – Indicate Nonattainme.	nt Pollutant(s):	O Pb NOx	O ₃ PM	I ☐ PM ₁₀ ☐ PM _{2.5} ☐ SO ₂	
10. Portable / Stationary: Is this a porta	able or stationary sou	rce?	Portable	Stationary	
	DART R. Cour				
44. Commonwhatermat Address (outline	PART B: Sour	ce Summary			
11. Company Internet Address (option			١٥.		
12. Company Name History: Has this s		-		N 1 15-4	
□ No □ Yes – Provide inform					
13. Portable Source Location History	_				
☑ Not Applicable ☐ No	Yes – Complete F			istory, and on of Portable Source.	
14. Existing Approvals: Have any exemptions, registrations, or permits been issued to this source?					
☐ No ☐ Yes – List these permits and their corresponding emissions units in Part M, Existing Approvals.					
15. Unpermitted Emissions Units: Does this source have any unpermitted emissions units?					
No ☐ Yes – List all unpermitted emissions units in Part N, Unpermitted Emissions Units.					
16. New Source Review: Is this source proposing to construct or modify any emissions units?					
No ☐ Yes – List all proposed new construction in Part O, New or Modified Emissions Units.					
17. Risk Management Plan: Has this source submitted a Risk Management Plan?					
Not Required ☐ No ☐ Yes	→ Date submitted:	EPA	Facility Identifie	er: – –	

PART C: Source Contact Information					
IDEM will send the original, signed permit decision to the person identified in this section. This person MUST be an employee of the permitted source.					
18. Name of Source Contact Person: Dainae Prejean					
19. Title (optional): Environmental Manager					
20. Mailing Address: PO Box 190					
City: Erwinville	State: LA	ZIP Code : 70729 –			
21. Electronic Mail Address (optional): dainae.prejean@ard	cosa.com				
22. Telephone Number: (225) 627 - 4242	23. Facsimile Number	(optional): () –			
IDEM will send a copy of the permit decision to the Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual is different from the Company of the permit decision to the Individual or Responsible Official is different from the Company of the Post of Authorized Individual or Responsible Official is different from the Company of the Post of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual or Responsible Official is different from the Company of Authorized Individual Indi	person indicated in the Source Contact sp	his section, if the Authorized			
25. Title: Vice President - Operations					
26. Mailing Address: 12652 Hwy 190 West					
City: Erwinville	State: LA	ZIP Code : 70757 –			
27. Telephone Number: (225) 627 - 6242	28. Facsimile Number	(optional): () –			
29. Request to Change the Authorized Individual or Respondence the person designated as the Authorized Individual IDEM, OAQ? The permit may list the title of the Authorized In □ No □ Yes - Change Responsible Official to:	ual or Responsible Official adividual or Responsible Official	in the official documents issued by			
PART E: Own	er Information				
30. Company Name of Owner: Arcosa LW HPB, LLC					
31. Name of Owner Contact Person:					
32. Mailing Address:	ı				
City:	State:	ZIP Code: –			
33. Telephone Number: () –	34. Facsimile Number	(optional): () –			
34. Operator: Does the "Owner" company also operate the s	ource to which this applic	ation applies?			
No − Proceed to Part F below. Yes − Enter "SAN	ME AS OWNER" on line 35 and	d proceed to Part G below.			
	PART F: Operator Information				
, ,					
36. Name of Operator Contact Person:					
37. Mailing Address: City:					
38. Telephone Number: () –	39. Facsimile Number				

PART G: Age	nt Information	
40. Company Name of Agent: B-WISE Consulting LLC		
41. Type of Agent:	Attorney	ecify):
42. Name of Agent Contact Person: Cheryl Wise		
43. Mailing Address: 272 Suncrest Drive		
City: Greenwood	State: IN	ZIP Code : 46143 –
44. Electronic Mail Address (optional): cwise@b-w	iseconsulting.com	
45. Telephone Number: (317) 509 - 2762	46. Facsimile Number	(optional): () –
47. Request for Follow-up: Does the "Agent" wish to receive during the public notice period (if applicable) and a copy		· ·
PART H: Local I	ibrary Information	
48. Date application packet was filed with the local libra		of permit application submission
49. Name of Library: Mooresville Public Library	y. Within ten (10) days	эг регинг аррноацон зарингэлон
50. Name of Librarian (optional):		
51. Mailing Address: 220 West Harrison Street		
City: Mooresville	State: IN	ZIP Code: 46158 –
52. Internet Address (optional):		
53. Electronic Mail Address (optional):		
54. Telephone Number: (317) 831 - 7323	55. Facsimile Number	(optional): () –
Complete this section only if the source has previously opera above in Section A.	ne History (if applicable) ated under a legal name th	at is different from the name listed
56. Legal Name of Company		57. Dates of Use
TRN LW HPB, LLC		2017 to 2019
Hydraulic Press Brick Company		1954 to 2017
		to
		10
58. Company Name Change Request: Is the source official on all official documents issued by IDEM, OAQ? ☑ No ☐ Yes – Change Company Name to:	Illy requesting to change th	

PART J: Portable Source Location History (if applicable)

Complete this section only if the source is portable and the location has changed since the previous permit was issued. The current location of the source should be listed in Section A.

59. Plant ID	60. Location of the Portable Source	61. Dates at this Location
_		to
-		to
_		to
_		to

PART K: Request to Change Location of Portable Source (if applicable)					
Complete this section to request a change of location for a po	ortable source.				
62. Current Location:					
Address:					
City:	City: State: ZIP Code: -				
County Name:					
63. New Location:					
Address:					
City: State: ZIP Code: -					
County Name:					

PART L: Source Process Description							
Complete this section to summarize the main pro	ocesses at the source.						
64. Process Description	64. Process Description 65. Products 66. SIC Code 67. NAICS Code						
Lightweight Expanded Shale Processing	Expanded Shale	3295	327992				

PART M: Existing Approvals (if applicable)					
Complete this se	Complete this section to summarize the approvals issued to the source since issuance of the main operating permit.				
68. Permit ID	68. Permit ID 69. Emissions Unit IDs 70. Expiration Date				
39783	Facility Wide - Renewal	2/21/2024			
41865	Facility Wide - Significant Permit Modification	2/21/2024			
41882	Facility Wide - Significant Permit Modification	2/21/2024			
43754	Facility Wide - Significant Permit Modification	2/21/2024			

	PART N: Unpermitted Emissions Units (if applicable)					
Complete this se	ction only if the source has emission units that	are not listed in any pern	nit issued by IDEM	, OAQ.		
73. Actual Dates						
71. Emissions Unit ID	72. Type of Emissions Unit	Began Construction	Began Completed Beg Construction Construction Opera			

Complete this se	75. NEW	76. MOD	77. Type of Emissions Unit	78. Estimated Dates		
74. Emissions Unit ID				Begin Constructio	Complete Construction	Begin Operation