

Department of Environmental Management OFFICE OF AIR QUALITY

April 30, 2024

7761 7893 4279

Indiana Department of Environmental Management Compliance and Enforcement Branch Office of Air Quality 100 North Senate Avenue MC 61-53 IGCN 1003 Indianapolis, Indiana 46204-2251

RE: Title V Quarterly Deviation Report (01/01/2024 - 03/31/2024) Part 70 Quarterly Report (01/01/2024 - 3/31/2024) Arcosa LW HPB, LLC dba Arcosa Lightweight – Brooklyn, IN Permit No. Tl 09-46609-00007

Dear Sir or Madam,

Please find attached the Quarterly Deviation and Compliance Monitoring Report for the reporting period of January 1, 2024 through March 31, 2024. Pursuant of Section Dl.1 (a) (l), Condition 4.a.(a) and (b) and 326 IAC 2-2 has complied with said permit conditions.

If you have any questions or comments, please do not hesitate to contact me at anna.solsvig@arcosa.com or at 615-792-8332

Sincerely,

Anna Solsvig Dugas Corporate Environmental Analyst

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE AND ENFORCEMENT BRANCH PART 70 OPERATING PERMIT CERTIFICATION

 Source Name:
 Arcosa LW HPB, LLC

 Source Address:
 6618 North Tidewater Road, Mooresville, Indiana 46158

 Part 70 Permit No.:
 109-46609-00007

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)	
D Report (specify)	
Notification (specify)	
Affidavit (specify)	
x Other (specify) Quarterly Part 70 Deviation and Compliance Monitoring Reports	
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: Jeri Shull

Title/Position: VP, Corporate Environmental

Phone: 615-792-8288

Date: 4 30/2024

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE AND ENFORCEMENT BRANCH

Part 70 Quarterly Report

Source Name: Source Address: Part 70 Permit No.: Facility: Parameter: Limit: Arcosa LW HPB, LLC 6618 North Tidewater Road, Mooresville, Indiana 46158 109-46609-00007 Sorbent Storage Silos #1 and #2 Sorbent throughput in tons The sorbent throughput to the sorbent silos #1 and #2 shall not exceed

twenty-four thousand (24,000) tons per twelve (12) month consecutive period with compliance determined at the end of each month.

QUARTER:

YEAR: 2024_

	Column 1	Column 2	Column 1 + Column 2
Month	(Sorbent throughput) (tons)	(Sorbent throughput) (tons)	(Sorbent throughput) (tons)
	This Month	Previous 11 Months	12 Month Total
Jan	86.592	697.81	784.40
Feb	61.704	742.40	804.11
Mar	65,64	725.11	790.75

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

Submitted by: Jeri Shull______ Title / Position: VP, Corporate Environmental______ Signature: _______ Date: _______ Phone: 615-792-8288

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE AND ENFORCEMENT BRANCH

Part 70 Quarterly Report

Source Name:	Arcosa LW HPB, LLC
Source Address:	6618 North Tidewater Road, Mooresville, Indiana 46158
Part 70 Permit No:	109-46609-00007
Facility:	Aggregate Silos (Clinker Bin, Ax Bin, and B Bin)
Parameter:	Aggregate throughput in tons
Limit:	The combined aggregate shale throughput to the silos Clinker Bin, Ax Bin,
	and B Bin shall not exceed seven hundred eighty-eight thousand, four
	hundred (788,00) tons per twelve (12) month consecutive period with
	compliance determined at the end of each month.

QUARTER: 1______YEAR: 2024_

	Column 1	Column 2	Column 1 + Column 2
Month	(Aggregate throughput) (tons)	(Aggregate throughput) (tons)	(Aggregate throughput) (tons)
	This Month	Previous 11 Months	12 Month Total
Jan	7478.5	86933	94411.5
Feb	5033	90917.5	95950.5
Mar	6431	87955.5	94386.5

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

Submitted by: Jeri Shull_____

Title / Position: VP, Corporate Environmental_____

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Signature Date:

Phone: 615-792-8288_

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE AND ENFORCEMENT BRANCH

Part 70 Quarterly Report

Source Name: Source Address: Part 70 Permit No. Facility: Parameter: Limit: Arcosa LW HPB, LLC 6618 North Tidewater Road, Mooresville, Indiana 46158 109-46609-00007 Haydite Screener (HCR 9) Expanded shale throughput in tons The raw shale throughput to the haydite screener HCR 9 shall not exceed eight hundred seventy -six thousand (876,000) tons per twelve (12) month

consecutive period with compliance determined at the end of each month.

QUARTER: 1______YEAR: 2024_____

Column 1	Column 2	Column 1 + Column 2
(Expanded shale throughput) (tons)	(Expanded shale throughput) (tons)	(Expanded shale throughput) (tons)
This Month	Previous 11 Months	12 Month Total
3739.25	43467	47206.25
2516.5	45459.25	47975.75
3215.5	43977.75	47193.25
	(Expanded shale throughput) (tons) This Month 3739.25 2516.5	(Expanded shale throughput) (tons)(Expanded shale throughput) (tons)This MonthPrevious 11 Months3739.25434672516.545459.25

No deviation occurred in this guarter.

Deviation/s occurred in this quarter. Deviation has been reported on: _____

Submitted by: Jeri Shull

Corporate Environmental_____ Title / Position, V P Signature: _____ Date:

Phone: 615-792-8288_

Acoresville, Indiana	Page 58
Permit Reviewer: Colleen Carey	
	ENVIRONMENTAL MANAGEMENT
	OF AIR QUALITY
	ENFORCEMENT BRANCH ERATING PERMIT
	COMPLIANCE MONITORING REPORT
Source Name: Arcosa LW HPB, LLC	
ource Address: 6618 North Tidewate art 70 Permit No.: 109-46609-00007	er Road, Mooresville, Indiana 46158
•	
Months: to Y	Much Year: 2244
	Page 1
This report shall be submitted quarterly based	on a calendar year. Proper notice submittal under
Section B - Emergency Provisions satisfies the	reporting requirements of paragraph (a) of Section (
the probable cause of the deviation and the requ	uirements of this permit, the date(s) of each deviation sponse steps taken must be reported. A deviation
required to be reported pursuant to an applicab	ble requirement that exists independent of the permit,
shall be reported according to the schedule sta	ted in the applicable requirement and does not need
please specify in the box marked "No deviation	y be attached if necessary. If no deviations occurred is occurred this reporting period.
NO DEVIATIONS OCCURRED THIS REPOR	
THE FOLLOWING DEVIATIONS OCCURRE	······································
Permit Requirement (specify permit condition a	#)
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Number of Deviations: Probable Cause of Deviation:	
Probable Cause of Deviation:	
Probable Cause of Deviation:	#)
Probable Cause of Deviation: Response Steps Taken:	#) Duration of Deviation:
Probable Cause of Deviation: Response Steps Taken: Permit Requirement (specify permit condition a	
Probable Cause of Deviation: Response Steps Taken: Permit Requirement (specify permit condition a Date of Deviation:	
Probable Cause of Deviation: Response Steps Taken: Permit Requirement (specify permit condition i Date of Deviation: Number of Deviations:	

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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: VP, Curp. Currinone	mtl		
Date: 4/20/2024			
Phone: 615-792-8288			

R ORIGIN ID:RNCA ANNA SOLSVIG ARCOSA, INC. 1050 TRINITY RD SHIP DATE: 30APR24 ACTWGT: 1.00 LB CAD: 113716477/INET4535 (615) 792-8332 ASHLAND CITY, TN 37015 UNITED STATES US BILL SENDER TO IDEM OFFICE OF AIR QUALITY 583J3/C137/BAE3 **100 NORTH SENATE AVENUE** INDIANAPOLIS IN 46204 (615) 792-8332 INV: PO: DEPT Fed Ex. Express 46204 46204 8 8 8 8 8 Wed – 01 may a/ Standard overnight IN---US TRK# 0201 XS 1. 1. 000 - **(S GSHA** FedEx TRK# 7761 7893 4279 *3775752 04/30 583J3/C137/9AE3