

**From:** [Amanda Dant](#)  
**To:** [IDEM OAQ Annual Compliance Certifications](#)  
**Cc:** [Adams, Shawn](#)  
**Subject:** Cook Inc. (Park 48): RY2023 Annual Compliance Certification  
**Date:** Tuesday, June 25, 2024 2:45:59 PM  
**Attachments:** [Cook Inc. Annual Compliance Certification RY2023.pdf](#)

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On behalf of Cook Inc. (Park 48)(105-00047), Cornerstone respectfully submits the RY 2023 Annual Compliance Certification.

If you have questions or comments concerning this submittal, please contact myself or Shawn Adams, Cook's EHS Manager, copied on this submittal.

Thank You,  
**Amanda Dant**  
Environmental Specialist  
(812) 569-3123  
[adant@corner-enviro.com](mailto:adant@corner-enviro.com)

**Cornerstone Environmental, Health and Safety**  
cornerstone-ehs.com

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June 25, 2024

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

Re: **Annual Compliance Certification RY 2023**  
Cook Incorporated Park 48  
750 Daniels Way  
Bloomington, IN 47404

Dear Sir/Madam:

Cornerstone Environmental, Health and Safety, Inc. is contracted to assist Cook Incorporated in the reporting requirements contained in their FESOP #44578. Enclosed, please find the Annual Compliance Certification for RY 2023.

If you have questions or comments, please do not hesitate to contact me directly at (812) 569-3123 or [adant@corner-enviro.com](mailto:adant@corner-enviro.com).

Best regards,

Amanda Dant  
Environmental Specialist

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

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

Source Name: Cook Incorporated  
Source Address: 750 Daniels Way and 301 North Curry Pike, Bloomington, Indiana 47404  
FESOP Permit No.: F105-42265-00047

**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: Kyle Kerber

Title/Position: Director, Environmental, Health, Safety and Facilities

Date:

25 JUNE 2024

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  
OFFICE OF AIR QUALITY  
COMPLIANCE BRANCH  
100 North Senate Avenue  
MC 61-53 IGCN 1003  
Indianapolis, IN 46204-2251

### SAMPLE

#### PART 70 / FESOP PERMIT- ANNUAL COMPLIANCE CERTIFICATION

This form can be used to satisfy the annual compliance certification requirements for Part 70 sources under 326 IAC 2-7-5, 326 IAC 2-7-6(5)(C) and FESOP sources under 326 IAC 2-8-5(a)(1)(C).

SOURCE INFORMATION					
(1) Source name:	Cook Incorporated Park 48				
(2) Source address:	750 Daniels Way				
(3) City:	Bloomington	(4) State:	IN	(5) Zip code:	47404
(6) Mailing address: (if different from above)					
(7) Mailing City:		(8) Mailing State:		(9) Mailing Zip code:	
(10) Permit numbers:	105-44578-00047	(11) Reporting Period:	1/1/2023 - 12/31/2023		
(12) Contact person:	Shawn Adams	(13) Email Address:	shawn.adams@cookmedical.com		
(14) Phone number:	(812) 339-2235 x 105290	(15) Fax number:			
(16) Comments:					

SOURCE COMPLIANCE INFORMATION	
(17) CHECK THE BOX NEXT TO EITHER (A) OR (B) BELOW. (The terms "continuous compliance" and "intermittent compliance" are defined on the Definitions page).	
(A) This source was in <b>CONTINUOUS COMPLIANCE</b> with all of the permit terms and conditions that impose a work practice or emission standard or requires performance testing, monitoring, record keeping or reporting based on the monitoring methods in the permit.	X
(B) This source was in <b>CONTINUOUS COMPLIANCE</b> with all of the permit terms and conditions that impose a work practice or emission standard or requires performance testing, monitoring, record keeping or reporting based on the monitoring methods in the permit, <b>except</b> for the terms and conditions listed in the following table for which the source reported intermittent compliance.	
<b>IMPORTANT:</b> If you select option (B), you must complete the following table in which you list any permit terms for which compliance was intermittent during the permit for the reporting period covered by this Compliance Certification.	

(18) PERMIT TERMS FOR WHICH COMPLIANCE WAS INTERMITTENT

[illegible]



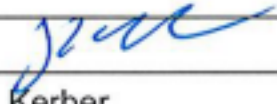
(18) PERMIT TERMS FOR WHICH COMPLIANCE WAS INTERMITTENT (Continued) – Attach additional sheets if necessary

Source Name:		Source Permit Number:	
Permit Term/Condition	Description of Permit Condition	*Method Codes	Report Date/Comments

**\*Method Codes:**  
Monitoring methods: CEMS = continuous emissions monitoring system; COMS = continuous opacity monitoring system; ST = stack test;  
VE = visible emissions; RK = record keeping; RR = review of records; MB = mass balance; EF = emissions factor; Insp = inspections; FA = fuel analysis; WP = work practice; PM = parametric monitoring;  
Calc = calculations; O = other (specify in Comments)

**For Part 70 sources:** The submittal by the Permittee requires the certification by the "responsible official" as defined by 326 IAC 2-7-1(34).

**For FESOP sources:** The notification which shall be submitted by the Permittee requires the certification by the "authorized individual" as defined by 326 IAC 2-1.1-1(1).

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:		Title/Position:	Director, Environmental, Health, Safety and Facilities
Printed Name:	Kyle Kerber	Date:	25 June 2024
Phone number:	(812) 322-9818	Email Address:	kyle.kerber@cookmedical.com

PLEASE NOTE: YOU MUST EITHER SIGN THIS FORM OR ATTACH THE CERTIFICATION FORM INCLUDED IN YOUR PERMIT.

## Title V / FESOP Annual Compliance Certification Review Sheet

To: IDEM Virtual File Cabinet	Through: Supervisor	Patrick Austin	ACES ID:	299082
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Source Information			
Source Name:	Cook Incorporated (Park 48)	Plant ID:	105-00047
Permit Number(s):	44578	County:	Monroe
Certification Year:	2023	Date ACC postmarked:	06/25/2024
Reviewer:	Raplee, Melanie C	Date compliance review started:	07/09/2024

Compliance Review		
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Was the ACC submitted late?
		If submitted late, what action will be taken? <input type="checkbox"/> Violation Letter <input type="checkbox"/> Enforcement Action Letter <input type="checkbox"/> Other:
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Did the source identify any deviations in the ACC?
		If yes, has OAQ already addressed the identified deviations? If so, what actions were taken, including the date the action was taken (e.g., VL; EAL, other)?  If no action was previously taken by OAQ, what action will be taken to follow-up (e.g., VL; EAL, other)?
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Did you identify any violations not reported in the ACC?
		If yes, describe the violation(s):  What action has been/will be taken to address the violation(s) (e.g., VL; EAL, other)?
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Was a revised ACC required to be submitted?
		Date(s) the source submitted the revised ACC:
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Did the source identify any emergencies in the ACC?
		If yes, does the reported emergency qualify as an emergency under 326 IAC 2-7-1(12)? <input type="checkbox"/> Yes <input type="checkbox"/> No  If the reported emergency does not qualify as an emergency under 326 IAC 2-7-1(12), or relevant federal regulation, what action has been/will be taken?
07/09/2024		Date compliance review completed
		Additional comments: