

Received State of Indiana

OCT 24 2024

Department of Environmental Management
OFFICE OF AIR QUALITY



October 21, 2024

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: **Part 70 Quarterly Deviation and Compliance Monitoring Report – 3rd Quarter 2024**
Ryobi De Casting USA, Inc. (Ryobi)
800 Mausoleum Road, Shelbyville, IN 46176
T141-47377-00031
CEHS Project No.: 1720-13764-35

Dear Sir/Madam:

Cornerstone, a Foresight Company, is contracted to assist Ryobi in the recordkeeping and reporting requirements contained in Title V Operating Permit (TVOP) T145-47377-00031, issued June 24, 2024. Accordingly, enclosed, please find the 3rd Quarter Report for 2024.

If you have questions or comments, please do not hesitate to contact me directly at (317) 288-3891 or qbaig@corner-enviro.com.

Best regards,

Qaiser Baig
Sr. Environmental Engineer, PE

cc: Aiden Lian and Trent Heller, Ryobi

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

Source Name: Ryobi Die Casting U.S.A, Inc.
Source Address: 800 West Mausoleum Road, Shelbyville, Indiana 46176
Part 70 Permit No.: T145-47377-00031

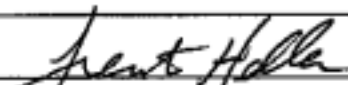
This certification shall be included when submitting monitoring, testing reports/results or other documents as required by this permit.

Please check what document is being certified:

- ☐ Annual Compliance Certification Letter
- ☐ Test Result (specify)
- ☒ Report (specify) 3rd Quarter 2024 Deviation and Compliance Monitoring Report
- ☐ 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: Trent Heller

Title/Position: EH&S and Facility Maintenance Director

Phone: (317) 392-8408

Date:

10/21/24

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE AND ENFORCEMENT BRANCH
PART 70 OPERATING PERMIT
QUARTERLY DEVIATION AND COMPLIANCE MONITORING REPORT**

Source Name: Ryobi Die Casting U.S.A, Inc.
Source Address: 800 West Mausoleum Road, Shelbyville, Indiana 46176
Part 70 Permit No.: T145-47377-00031

Months: July to September Year: 2024

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<p>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 C-General Reporting. Any deviation from the requirements of this permit, the date(s) of each deviation, the probable cause of the deviation, and the response steps taken must be reported. A deviation required to be reported pursuant to an applicable requirement that exists independent of the permit, shall be reported according to the schedule stated in the applicable requirement and does 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".</p>	
<input checked="checked" type="checkbox"/> NO DEVIATIONS OCCURRED THIS REPORTING PERIOD.	
<input type="checkbox"/> 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:	

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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: Alden Lian

Title / Position: EHS Specialist

Date: 10/21/2024

Phone: (317) 392-8316

Extremely Urgent



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