

6-27
JUN 30 2025

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: | GXO | | | |
| (2) Source address: | 135 S Mt Zion Rd | | | |
| (3) City: | Lebanon | (4) State: | IN | (5) Zip code: 46052 |
| (6) Mailing address: (if different from above) | | | | |
| (7) Mailing City: | | (8) Mailing State: | | (9) Mailing Zip code: |
| (10) Permit numbers: | F011-48042-00081 | (11) Reporting Period: | 9/27/24-12/31/24 | |
| (12) Contact person: | Jeff Carlson | (13) Email Address: | jeff.carlson@gxo.com | |
| (14) Phone number: | 765-432-6642 | (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 CONTINUOUS COMPLIANCE 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 CONTINUOUS COMPLIANCE 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, except for the terms and conditions listed in the following table for which the source reported intermittent compliance. | |
| IMPORTANT: 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. | |

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

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

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

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6-27-25

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE AND ENFORCEMENT BRANCH
MINOR SOURCE OPERATING PERMIT
ANNUAL NOTIFICATION

Received State of Indiana
6-27
JUN 30 2025
Department of Environmental Management
OFFICE OF AIR QUALITY

This form should be used to comply with the notification requirements under 326 IAC 2-6.1-5(a)(5). The initial notification shall cover the time period from the date of final permit issuance through December 31 of the same year. All subsequent notifications shall cover the time period from January 1 to December 31 of the previous year.

| | |
|-----------------|------------------------|
| Company Name: | GXO |
| Source Address: | 135 S Mt. Zion Rd |
| City: | Lebanon, Indiana 46052 |
| Phone #: | (317) 864-4480 |
| MSOP #: | M 011-44748-00081 |

I hereby certify that GXO is:

still in operation.

no longer in operation.

I hereby certify that GXO is:

in compliance with the requirements of MSOP M 011-44748-00081.

not in compliance with the requirements of MSOP M 011-44748-00081.

| |
|---|
| Authorized Individual (typed): |
| Title: <i>Jr Manager EHS</i> |
| Signature: <i>[Handwritten Signature]</i> |
| Date: <i>6-27-25</i> |

If there are any conditions or requirements for which the source is not in compliance, provide a narrative description of how the source did or will achieve compliance and the date compliance was, or will be achieved.

| |
|---|
| No noncompliance |
| <i>This is for the time period of 1-4-24 to 9-26-24. On 9-27-24 we went from a MSOP to a FESOP permit</i> |

ORIGIN: CTNA (844) 761-2400
GXO FEROUND
GXO FEROUND
35 SOUTH MOUNT ZION ROAD

SHIP DATE: 27 JUN 25
ACTWGT: 1.001 LB
CAD: 262R20553/NET4535

LEBANON, IN 46052
UNITED STATES

BILL SENDER

TO OFFICE OF AIR QUALITY
INDIANA DEPT OF ENVIRONMENTAL MGT
100 NORTH SENATE AVENUE
COMPLIANCE & ENFORCEMENT BRANCE
INDIANAPOLIS IN 46204

586J110CF555F2

0001 586.0009
REF:
NOPT:



TUE - 01 JUL 5:00P

** 2DAY **

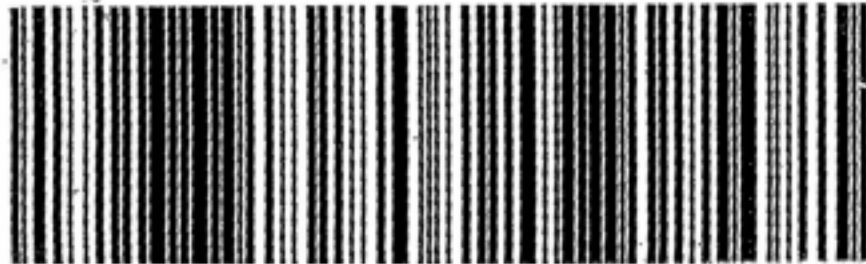
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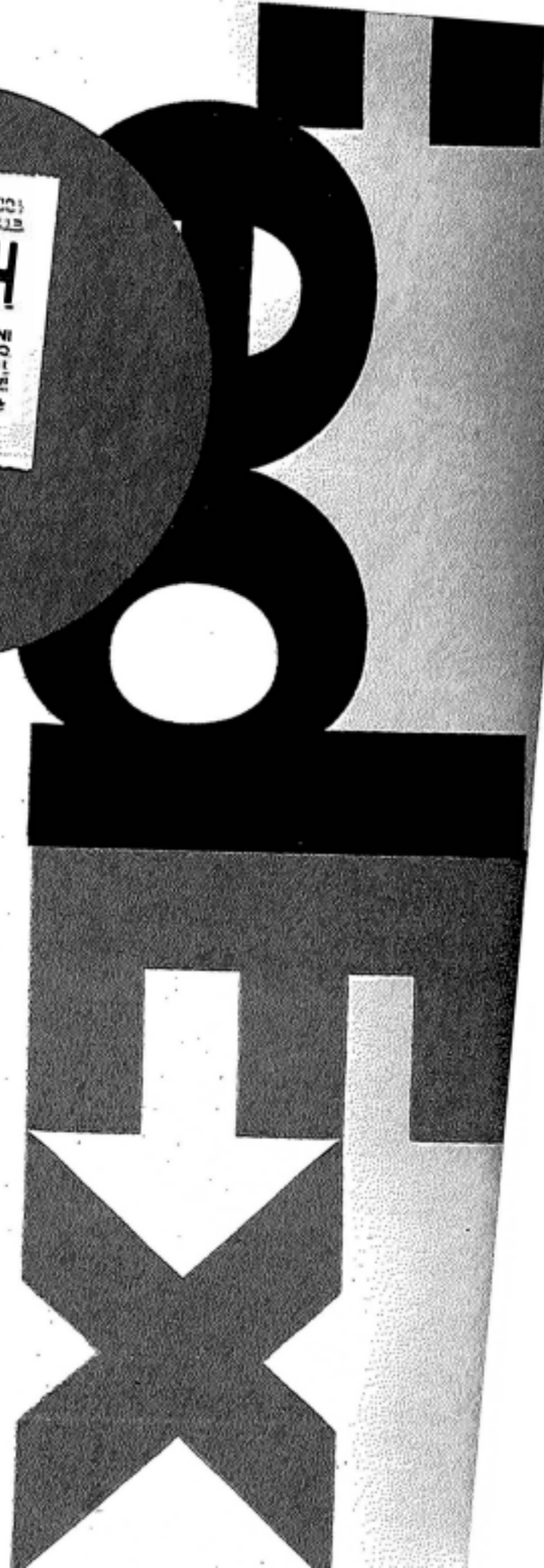


Received at New York

JUN 30 2013

INDIANAPOLIS IN 46204

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0201 586.0009
REF:
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INDIANAPOLIS IN
COMPLIANCE & ENFORCEMENT
100 N SENATE AVE
INDIANA DEPT OF ENVIRONMENTAL
46204
MCH 08/20/04
41708



Title V / FESOP Annual Compliance Certification Review Sheet

| | | | | |
|-------------------------------|---------------------|----------------|----------|--------|
| To: IDEM Virtual File Cabinet | Through: Supervisor | Patrick Austin | ACES ID: | 311880 |
|-------------------------------|---------------------|----------------|----------|--------|

| Source Information | | | |
|---------------------|-------------------|---------------------------------|------------|
| Source Name: | GXO | Plant ID: | 011-00081 |
| Permit Number(s): | 48042 | County: | Boone |
| Certification Year: | 2024 | Date ACC postmarked: | 6/27/2025 |
| Reviewer: | Seyyedi, Mirmehdi | Date compliance review started: | 11/18/2025 |

| 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: N/A |
| <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)? N/A |
| | | If no action was previously taken by OAQ, what action will be taken to follow-up (e.g., VL; EAL, other)? N/A |
| <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): N/A |
| | | What action has been/will be taken to address the violation(s) (e.g., VL; EAL, other)? N/A |
| <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: N/A |
| <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? N/A |
| 11/18/2025 | | Date compliance review completed |
| | | Additional comments: Please note that the FESOP permit was issued on 9/27/2024. Before this date, the source was operating under an MSOP permit. No violation has been identified from 9/27/2024 to the end of 2024 calendar year. |