

777-48002-05390

AI ID: 107830



Received  
State of Indiana

JUN 25 2024 KB-3

Dept of Environmental Mgmt  
Office of Air Quality

Received State of Indiana

JUN 25 2024 HD

Department of Environmental Management  
OFFICE OF AIR QUALITY

70

June 25, 2024

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

Hand Delivered

Re: Martin Marietta Materials, Inc.  
SSOA Administrative Amendment Application (S057-46321-00121)

Enclosed is the Air Permit Application Sheet (State Form 50639) and General Source Data Application Form (State Form 50640) requesting an Administrative Amendment to Permit Number S057-46321-00121. Martin Marietta is requesting a correction to the permit. The location of the plant was represented in the initial application as Noblesville and in Hamilton County; however, the plant is physically located near Perkinsville and in Madison County.

Please contact me if you need any additional information.

Sincerely,

A handwritten signature in black ink, appearing to read 'Dana Armstrong'.

Dana Armstrong  
Senior Environmental Engineer

Enclosures

Indiana District  
12220 North Meridian Street, Suite 100, Carmel, IN 46032  
t. (317) 575-5713 f. (317) 573-5975  
www.martinmarietta.com



**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](http://www.IN.gov/idem)

**NOTES:**

- 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 all 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 corner 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:	777-48002-05390
DATE APPLICATION WAS RECEIVED:	State of Indiana JUN 25 2024 HD KB-3
Dept of Environmental Mgmt Office of Air Quality	

1. Tax ID Number: \_\_\_\_\_

**PART A: Purpose of Application**

Part A identifies the purpose of this air permit application. For the purposes of this form, the term "source" refers to the plant site as a whole and NOT to individual emissions units.

2. Source / Company Name: Martin Marietta Materials, Inc.	3. Plant ID: 777 – 5390	
4. Billing Address: 12220 North Meridian Street, Suite 100		
City: Carmel	State: IN	ZIP Code: 46032 – 6905
5. Permit Level: <input type="checkbox"/> Exemption <input type="checkbox"/> Registration <input checked="" type="checkbox"/> SSOA <input type="checkbox"/> MSOP <input type="checkbox"/> FESOP <input type="checkbox"/> TVOP <input type="checkbox"/> PBR		
6. Application Summary: Check all that apply. Multiple permit numbers may be assigned as needed based on the choices selected below.		
<input type="checkbox"/> Initial Permit	<input type="checkbox"/> Renewal of Operating Permit	<input type="checkbox"/> Asphalt General Permit
<input type="checkbox"/> Review Request	<input type="checkbox"/> Revocation of Operating Permit	<input type="checkbox"/> Alternate Emission Factor Request
<input type="checkbox"/> Interim Approval	<input checked="" type="checkbox"/> Relocation of Portable Source	<input type="checkbox"/> Acid Deposition (Phase II)
<input type="checkbox"/> Site Closure	<input type="checkbox"/> Emission Reduction Credit Registry	
<input type="checkbox"/> Transition (between permit levels) From: _____ To: _____		
<input type="checkbox"/> Administrative Amendment: <input type="checkbox"/> Company Name Change <input type="checkbox"/> Change of Responsible Official		
<input type="checkbox"/> <input type="checkbox"/> Correction to Non-Technical Information <input type="checkbox"/> Notice Only Change		
<input type="checkbox"/> <input type="checkbox"/> Other (specify): _____		
<input type="checkbox"/> Modification: <input type="checkbox"/> New Emission Unit or Control Device <input type="checkbox"/> Modified Emission Unit or Control Device		
<input type="checkbox"/> New Applicable Permit Requirement <input type="checkbox"/> Change to Applicability of a Permit Requirement		
<input type="checkbox"/> Prevention of Significant Deterioration <input type="checkbox"/> Emission Offset <input type="checkbox"/> MACT Preconstruction Review		
<input type="checkbox"/> Minor Source Modification <input type="checkbox"/> Significant Source Modification		
<input type="checkbox"/> Minor Permit Modification <input type="checkbox"/> Significant Permit Modification		
<input type="checkbox"/> Other (specify): _____		
7. Is this an application for an initial construction and/or operating permit for a "Greenfield" Source? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. Is this an application for construction of a new emissions unit at an Existing Source? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

### PART B: Pre-Application Meeting

Part B specifies whether a meeting was held or is being requested to discuss the permit application.

9. Was a meeting held between the company and IDEM prior to submitting this application to discuss the details of the project?

No       Yes:    *Date:*

10. Would you like to schedule a meeting with IDEM management and your permit writer to discuss the details of this project?

No       Yes:    *Proposed Date for Meeting:*

### PART C: Confidential Business Information

Part C identifies permit applications that require special care to ensure that confidential business information is kept separate from the public file.

Claims of confidentiality must be made at the time the information is submitted to IDEM, and must follow the requirements set out in the Indiana Administrative Code (IAC). To ensure that your information remains confidential, refer to the IDEM, OAQ information regarding submittal of confidential business information. For more information on confidentiality for certain types of business information, please review IDEM's Nonrule Policy Document Air-031-NPD regarding Emission Data.

11. Is any of the information contained within this application being claimed as **Confidential Business Information**?

No       Yes

### PART D: Certification Of Truth, Accuracy, and Completeness

Part D is the official certification that the information contained within the air permit application packet is truthful, accurate, and complete. Any air permit application packet that we receive without a signed certification will be deemed incomplete and may result in denial of the permit.

For a Part 70 Operating Permit (TVOP) or a Source Specific Operating Agreement (SSOA), a "responsible official" as defined in 326 IAC 2-7-1(34) must certify the air permit application. For all other applicants, this person is an "authorized Individual" as defined in 326 IAC 2-1.1-1(1).

*I certify under penalty of law that, based on information and belief formed after reasonable inquiry, the statements and information contained in this application are true, accurate, and complete.*

Franz Peters  
Name (typed)

Regional Vice President / General Manager  
Title

Signature

6/19/2024  
Date



**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-01: Basic Source Level Information**  
 State Form 50640 (R5 / 1-10)  
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Received  
 State of Indiana  
 JUN 25 2024 HD  
 KB 3  
 Dept of Environmental Mgmt  
 Office of Air Quality

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 Facsimile Number: (317) 232-6749  
[www.IN.gov/idem](http://www.IN.gov/idem)

**NOTES:**

- The purpose of GSD-01 is to provide 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.

777-48002-05390

**PART A: Source / Company Location Information**

1. <b>Source / Company Name:</b> Martin Marietta Materials Inc.		2. <b>Plant ID:</b> 777 – 5390	
3. <b>Location Address:</b> 2350 West County Road 50 South			
City:	Kokomo	State:	IN
4. <b>County Name:</b> Howard		5. <b>Township Name:</b> Center	
6. <b>Geographic Coordinates:</b>			
Latitude:		Longitude:	
7. <b>Universal Transferal Mercadum Coordinates (if known):</b>			
Zone:	16 T	Horizontal:	570497
		Vertical:	4480309
8. <b>Adjacent States:</b> Is the source located within 50 miles of an adjacent state?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>Indicate Adjacent State(s):</i> <input type="checkbox"/> Illinois (IL) <input type="checkbox"/> Michigan (MI) <input type="checkbox"/> Ohio (OH) <input type="checkbox"/> Kentucky (KY)			
9. <b>Attainment Area Designation:</b> Is the source located within a non-attainment area for any of the criteria air pollutants?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>Indicate Nonattainment Pollutant(s):</i> <input type="checkbox"/> CO <input type="checkbox"/> Pb <input type="checkbox"/> NO <sub>x</sub> <input type="checkbox"/> O <sub>3</sub> <input type="checkbox"/> PM <input type="checkbox"/> PM <sub>10</sub> <input type="checkbox"/> PM <sub>2.5</sub> <input type="checkbox"/> SO <sub>2</sub>			
10. <b>Portable / Stationary:</b> Is this a portable or stationary source?			
		<input checked="" type="checkbox"/> Portable <input type="checkbox"/> Stationary	

**PART B: Source Summary**

11. <b>Company Internet Address (optional):</b>	
12. <b>Company Name History:</b> Has this source operated under any other name(s)?	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>Provide information regarding past company names in Part I, Company Name History.</i>	
13. <b>Portable Source Location History:</b> Will the location of the portable source be changing in the near future?	
<input type="checkbox"/> Not Applicable <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes – <i>Complete Part J, Portable Source Location History, and Part K, Request to Change Location of Portable Source.</i>	
14. <b>Existing Approvals:</b> Have any exemptions, registrations, or permits been issued to this source?	
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes – <i>List these permits and their corresponding emissions units in Part M, Existing Approvals.</i>	
15. <b>Unpermitted Emissions Units:</b> Does this source have any unpermitted emissions units?	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>List all unpermitted emissions units in Part N, Unpermitted Emissions Units.</i>	
16. <b>New Source Review:</b> Is this source proposing to construct or modify any emissions units?	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>List all proposed new construction in Part O, New or Modified Emissions Units.</i>	
17. <b>Risk Management Plan:</b> Has this source submitted a Risk Management Plan?	
<input checked="" type="checkbox"/> Not Required <input type="checkbox"/> No <input type="checkbox"/> Yes → Date submitted:                      EPA Facility Identifier:                      –                      –	

**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: Dana Armstrong		
19. Title (optional): Senior Environmental Engineer		
20. Mailing Address: 12220 North Meridian Street, Suite 100		
City: Carmel	State: IN	ZIP Code: 46032 -
21. Electronic Mail Address (optional): dana.armstrong@martinmarietta.com		
22. Telephone Number: ( 463 ) 276 - 8861	23. Facsimile Number (optional): ( 317 ) 573 - 5975	

**PART D: Authorized Individual/Responsible Official Information**

IDEM will send a copy of the permit decision to the person indicated in this section, if the Authorized Individual or Responsible Official is different from the Source Contact specified in Part C.

24. Name of Authorized Individual or Responsible Official: Franz Peters		
25. Title: Regional Vice President / General Manager		
26. Mailing Address: 12220 North Meridian Street		
City: Carmel	State: IN	ZIP Code: 46032 -
27. Telephone Number: ( 317 ) 575 - 5711	28. Facsimile Number (optional): ( ) -	
29. Request to Change the Authorized Individual or Responsible Official: Is the source officially requesting to change the person designated as the Authorized Individual or Responsible Official in the official documents issued by IDEM, OAQ? <i>The permit may list the title of the Authorized Individual or Responsible Official in lieu of a specific name.</i>		
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes - <b>Change Responsible Official to:</b> Franz Peters		

**PART E: Owner Information**

30. Company Name of Owner: Same as Source		
31. Name of Owner Contact Person: Dana Armstrong		
32. Mailing Address: 12220 North Meridian Street, Suite 100		
City: Carmel	State: IN	ZIP Code: 46032 -
33. Telephone Number: ( 463 ) 276 - 8861	34. Facsimile Number (optional): ( 317 ) 573 - 5975	
34. Operator: Does the "Owner" company also operate the source to which this application applies?		
<input type="checkbox"/> No - Proceed to Part F below. <input checked="" type="checkbox"/> Yes - Enter "SAME AS OWNER" on line 35 and proceed to Part G below.		

**PART F: Operator Information**

35. Company Name of Operator: Same as Owner		
36. Name of Operator Contact Person:		
37. Mailing Address:		
City:	State:	ZIP Code: -
38. Telephone Number: ( ) -	39. Facsimile Number (optional): ( ) -	

PART G: Agent Information		
40. <b>Company Name of Agent:</b> Not applicable		
41. <b>Type of Agent:</b> <input type="checkbox"/> Environmental Consultant <input type="checkbox"/> Attorney <input type="checkbox"/> Other (specify):		
42. <b>Name of Agent Contact Person:</b>		
43. <b>Mailing Address:</b>		
<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b> -
44. <b>Electronic Mail Address (optional):</b>		
45. <b>Telephone Number:</b> (    )    -	46. <b>Facsimile Number (optional):</b> (    )    -	
47. <b>Request for Follow-up:</b> Does the "Agent" wish to receive a copy of the preliminary findings during the public notice period (if applicable) and a copy of the final determination? <input type="checkbox"/> No <input type="checkbox"/> Yes		

PART H: Local Library Information		
48. <b>Date application packet was filed with the local library:</b> To be sent by June 26, 2024		
49. <b>Name of Library:</b> Kokomo-Howard County Library South Branch		
50. <b>Name of Librarian (optional):</b>		
51. <b>Mailing Address:</b> 1755 E Center Rd		
<b>City:</b> Kokomo	<b>State:</b> IN	<b>ZIP Code:</b> 46902 -
52. <b>Internet Address (optional):</b>		
53. <b>Electronic Mail Address (optional):</b>		
54. <b>Telephone Number:</b> ( 765 ) 453 - 4150	55. <b>Facsimile Number (optional):</b> (    )    -	

PART I: Company Name History (if applicable)	
Complete this section only if the source has previously operated under a legal name that is different from the name listed above in Section A.	
<b>56. Legal Name of Company</b>	<b>57. Dates of Use</b>
	to
	to
	to
	to
	to
	to
	to
	to
	to
	to
58. <b>Company Name Change Request:</b> Is the source officially requesting to change the legal name that will be printed on all official documents issued by IDEM, OAQ? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - <b>Change Company Name to:</b>	



**PART L: Source Process Description**

Complete this section to summarize the main processes at the source.

64. Process Description	65. Products	66. SIC Code	67. NAICS Code
Aggregate processing plant	Recycled Asphalt Pavement	1422 & 1795	212312 & 238910

**PART M: Existing Approvals (if applicable)**

Complete this section to summarize the approvals issued to the source since issuance of the main operating permit.

68. Permit ID	69. Emissions Unit IDs	70. Expiration Date
44783	Aggregate processing plant (No expiration date)	

**PART N: Unpermitted Emissions Units (if applicable)**

Complete this section only if the source has emission units that are not listed in any permit issued by IDEM, OAQ.

71. Emissions Unit ID	72. Type of Emissions Unit	73. Actual Dates		
		Began Construction	Completed Construction	Began Operation

**PART O: New or Modified Emissions Units (if applicable)**

Complete this section only if the source is proposing to add new emission units or modify existing emission units.

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





**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-14: Owners and Occupants Notified**  
 State Form 51809 (R2 / 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](http://www.IN.gov/idem)

- NOTES:**
- The purpose of GSD-14 is to identify adjacent landowners and occupants that are to be notified that an air permit application has been submitted.
  - 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.

Owners And Occupants Notified		
Use this table to identify adjacent landowners and occupants that you have notified of your intent to construct pursuant to Indiana Code (IC) 13-15-8. If you need additional space, you may make copies of this form.		
1. Owner / Occupant Name: Howard M. & Barbara J. VanDenbark Trust		2. Date Notified: 6/26/2024
3. Address: 3435 Lia Lana		
City: The Villages	State: FL	ZIP Code: 32163-0156
4. Electronic Mail:	5. Telephone Number: ( ) -	
6. Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Mr. Ronald H. Costello		Date Notified: 6/26/2024
Address: 1200 South Dixon Road		
City: Kokomo	State: IN	ZIP Code: 46901
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Mr. Ronald H. Costello		Date Notified: 6/26/2024
Address: 1150 South Dixon Road		
City: Kokomo	State: IN	ZIP Code: 46902
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Mr. Larry D. Wimmer		Date Notified: 6/26/2024
Address: 1230 South Dixon Road		
City: Kokomo	State: IN	ZIP Code: 46902
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify): 6/26/2024		
Owner / Occupant Name: Mr. Larry D. Wimmer		Date Notified:
Address: 3604 West Alto Road		
City: Kokomo	State: IN	ZIP Code: 46902
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		



**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-14: Owners and Occupants Notified**  
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 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

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**NOTES:**

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- 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.

Owners And Occupants Notified		
Use this table to identify adjacent landowners and occupants that you have notified of your intent to construct pursuant to Indiana Code (IC) 13-15-8. If you need additional space, you may make copies of this form.		
1. Owner / Occupant Name: Vernon L. Graves, Trustee		2. Date Notified: 6/26/2024
3. Address: 1114 South Dixon Road		
City: Kokomo	State: IN	ZIP Code: 46902
4. Electronic Mail:	5. Telephone Number: ( ) -	
6. Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Wildcat Country, LLC		Date Notified: 6/26/2024
Address: 4220 Coventry Drive		
City: Kokomo	State: IN	ZIP Code: 46902
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Mr. Michael A. Hough		Date Notified: 6/26/2024
Address: 1204 South Dixon		
City: Kokomo	State: IN	ZIP Code: 46902
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Ms. Viola J. Auler		Date Notified: 6/26/2024
Address: 859 1000		
City: Bunker Hill	State: IN	ZIP Code: 46914-9695
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Ms. Viola J. Auler		Date Notified:
Address: 1202 South Dixon Road		
City: Kokomo	State: IN	ZIP Code: 46902
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		



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**GSD-14: Owners and Occupants Notified**  
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- NOTES:**
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Owners And Occupants Notified		
Use this table to identify adjacent landowners and occupants that you have notified of your intent to construct pursuant to Indiana Code (IC) 13-15-8. If you need additional space, you may make copies of this form.		
1. Owner / Occupant Name: SJ Indiana, LLC		2. Date Notified: 6/26/2024
3. Address: 5912 Hillcroft		
City: Houston	State: TX	ZIP Code: 77306-3345
4. Electronic Mail:	5. Telephone Number: ( ) -	
6. Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Bunn Real Estate Holdings, LLC		Date Notified: 6/26/2024
Address: 3204 Lower Huntington		
City: Fort Wayne	State: IN	ZIP Code: 46901
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Lollipop Food Shop, LLC		Date Notified: 6/26/2024
Address: 108 Lee		
City: Sharpsville	State: IN	ZIP Code: 46068-9307
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Mr. Richard Auler		Date Notified: 6/26/2024
Address: 1037 Webster		
City: Kokomo	State: IN	ZIP Code: 46902-6356
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify): 6/26/2024		
Owner / Occupant Name: Raymin E. & Janice L. Harp		Date Notified:
Address: 717 Lakeside		
City: Kokomo	State: IN	ZIP Code: 46901-7034
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		



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Owners And Occupants Notified		
Use this table to identify adjacent landowners and occupants that you have notified of your intent to construct pursuant to Indiana Code (IC) 13-15-8. If you need additional space, you may make copies of this form.		
1. Owner / Occupant Name: XTerrain, LLC		2. Date Notified: 6/26/2024
3. Address: 816 Millbrook		
City: Kokomo	State: IN	ZIP Code: 46901
4. Electronic Mail:	5. Telephone Number: ( ) -	
6. Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: XTerrain, LLC		Date Notified: 6/26/2024
Address: 725 S. Dixon Rd.		
City: Kokomo	State: IN	ZIP Code: 46898
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name: Martin Marietta Materials, Inc.		Date Notified: 6/26/2024
Address: 250 W. County Road 00		
City: Kokomo	State: IN	ZIP Code: 46902
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Owner / Occupant Name:		Date Notified: 6/26/2024
Address:		
City:	State:	ZIP Code:
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify): 6/26/2024		
Owner / Occupant Name:		Date Notified:
Address:		
City:	State:	ZIP Code:
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		

**MARTIN MARIETTA MATERIALS, INC.  
RECYCLE PLANT ID NO. 777-05390  
ADJACENT LANDOWNERS AND OCCUPANTS TO BE NOTIFIED**

Howard M. & Barbara J. VanDenbark Trust  
3435 Lia Lana  
The Villages, FL 32163-0156

Mr. Ronald H. Costello  
1200 South Dixon Road  
Kokomo, IN 46902

Howard County Board of Commissioners  
220 North Main Street, Room 222  
Kokomo, IN 46901

Mr. Ronald H. Costello  
1150 South Dixon Road  
Kokomo, IN 46902

Mr. Larry D. Wimmer  
1230 South Dixon Road  
Kokomo, IN 46902

Mr. Larry D. Wimmer  
3604 West Alto Road  
Kokomo, IN 46902

Vernon L. Graves, Trustee  
4510 Lakeshore Drive  
Kokomo, IN 46901

Vernon L. Graves, Trustee  
1114 South Dixon Road  
Kokomo, IN 46902

Wildcat Country, LLC  
4220 Coventry Drive  
Kokomo, IN 46902

Raymin E. & Janice L. Harp  
1206 South Dixon Road  
Kokomo, IN 46902

Mr. Michael A. Hough  
1204 South Dixon  
Kokomo, IN 46902

Ms. Viola J. Auler  
859 1000  
Bunker Hill, IN 46914-9695

Ms. Viola J. Auler  
1202 South Dixon Road  
Kokomo, IN 46902

Uptown Investors, LLC  
PO Box 932  
Kokomo, IN 46903

**MARTIN MARIETTA MATERIALS, INC.  
RECYCLE PLANT ID NO. 777-05390  
ADJACENT LANDOWNERS AND OCCUPANTS TO BE NOTIFIED**

Bunn Real Estate Holdings, LLC  
3204 Lower Huntington  
Fort Wayne, IN 46809-2434

Lollipop Food Shop, LLC  
2333 W. Markland Ave  
Kokomo, IN 46901

Lollipop Food Shop, LLC  
108 Lee  
Sharpsville, IN 46068-9307

Mr. Richard Auler  
1037 Webster  
Kokomo, IN 46902-6356

Raymin E. & Janice L. Harp  
717 Lakeside  
Kokomo, IN 46901-7034

Wildcat Country, LLC  
1220 S Dixon Rd  
Kokomo, IN 46902

XTerrain, LLC  
816 Millbrook  
Kokomo, IN 46901

XTerrain, LLC  
725 S. Dixon Rd.  
Kokomo, IN 46901

Martin Marietta Materials, Inc.  
8040 Po Box  
Fort Wayne, IN 46898

Martin Marietta Materials, Inc.  
250 W. County Road 00  
Kokomo, IN 46902



June xx, 2024

Name  
Address  
City, State, Zip Code

Re: Martin Marietta Materials, Inc.  
Portable Source Relocation

Dear (Name):

As an adjacent landowner or occupant, and pursuant to IC 13-15-8 of the Indiana Code, Martin Marietta Materials, Inc. is notifying you of our intent to locate a portable crushing plant to 2350 West County Road 50 South, Kokomo, Indiana, 46902. This plant will be working at the E&B Paving plant site. Contact me per the information on the letterhead if you have any questions regarding this matter.

Contact me if you have any questions regarding this matter.

Sincerely,

A handwritten signature in cursive script that reads 'Dana Armstrong'.

Dana Armstrong  
Senior Environmental Engineer



Dana Armstrong  
Senior Environmental Engineer

6/20/2024

Kokomo-Howard County Library South Branch  
1755 E Center Rd  
Kokomo, IN 46902

Re: Environmental Permit Application

To Whom It May Concern:

The Indiana Department of Environmental Management requires that environmental permit applications be filed in a local library closest to the applicable site. Enclosed is such an application.

Please file this application accordingly. Contact me if you have any questions regarding this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Dana Armstrong'.

Dana Armstrong  
Senior Environmental Engineer

Enclosures





**OAQ GENERAL SOURCE DATA APPLICATION**  
**GSD-15: Government Officials Notified**  
 State Form 51608 (R3 / 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](http://www.IN.gov/idem)

- NOTES:**
- The purpose of GSD-15 is to identify local government officials that are to be notified that an air permit application has been submitted.
  - 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.

Government Officials Notified		
Use this table to identify local government officials that should be notified pursuant to Indiana Code (IC) 13-15-3-1 that an air permit application has been submitted. If you need additional space, you may make copies of this form.		
1. Name: TO BE COMPLETED BY IDEM		2. Date Notified:
3. Title:		
4. Address:		
City:	State:	ZIP Code: --
5. Electronic Mail:	6. Telephone Number: ( ) -	
7. Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Name:		Date Notified:
Title:		
Address:		
City:	State:	ZIP Code: --
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Name:		Date Notified:
Title:		
Address:		
City:	State:	ZIP Code: --
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		
Name:		Date Notified:
Title:		
Address:		
City:	State:	ZIP Code: --
Electronic Mail:	Telephone Number: ( ) -	
Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):		