

### INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue • Indianapolis, IN 46204 (800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Eric J. Holcomb

Brian C. Rockensuess

Commissioner

July 1, 2024

VIA ELECTRONIC MAIL
Chris Faust, Division Chief of Training and Safety
Greenfield Fire Territory
17 W South St
Greenfield, Indiana 46140
cfaust@greenfieldin.org

Open Burning Approval Pursuant to 326 IAC 4-1

FT-298232

Jackson Training Facility
Greenfield, Hancock County

Dear Chris Faust:

The Indiana Department of Environmental Management (IDEM), Office of Air Quality (OAQ), received an open burning approval request from the Greenfield Fire Territory. At this time, IDEM approves the request to conduct live fire training at the Jackson Training Facility, located at 2070 Fields Blvd in Greenfield, Hancock County. The following fuel types and amounts are approved, per training evolution, for live fire training purposes:

Re:

5 clean wood pallets, 1 bale of straw, and 3 sheets of OSB.

The following contacts must be notified at least twenty-four (24) hours in advance of the date and time of the burning:

- Hancock County Health Department
- Hancock County Sheriff's Department
- IDHS Fire Academy

Following are the conditions for burning:

- 1) Only the above material will be burned.
- 2) The use of Class B firefighting foam containing intentionally added PFAS chemical for training or testing purposes is prohibited (IC 36-8-10.7-6).
- 3) All burning shall be conducted in a manner to prevent soil contamination.
- 4) If at any time the burning creates an air pollution problem, a threat to public health, a nuisance, or a fire hazard, the burning shall be extinguished.
- 5) No burning shall be conducted:
  - a. When an Air Quality Action Day (AQAD) has been issued for ozone and/or PM<sub>2.5</sub>. An AQAD is declared when health levels are forecasted to be "Unhealthy for Sensitive Groups" or greater;
  - b. When an open burning ban has been declared by either state or local officials (<a href="www.IN.gov/dhs/burnban/">www.IN.gov/dhs/burnban/</a>); or
  - c. During unfavorable meteorological conditions (high winds, temperature inversions, and/or air stagnation).

Visit apps.idem.in.gov/smogwatch/Today.aspx, or contact Mark Derf at (317) 233-5682, for additional information.

- 6) Burning may be conducted during daytime and nighttime hours.
- 7) All fires shall be extinguished upon completion of training.
- 8) This approval letter shall be made available at the burning site to state or local officials upon request.
- 9) All burning must comply with other federal, state, and local laws, regulations, and ordinances, including 40 CFR 61, Subpart M (National Emissions Standards for Asbestos).
- 10) Burning may take place within one hundred (100) feet of any structure or powerline; or three hundred (300) feet of a frequently traveled road, fuel storage area, or pipeline only if adequate precautions are taken. Wind speed, direction, mixing height, and transport winds shall be considered prior to beginning the burn so that there is minimal or no impact to nearby roads, structures, powerlines, fuel storage areas, or pipelines.
- 11) This approval does not become effective until after eighteen (18) days from the date at the top of this letter.





### This approval expires on July 1, 2025.

Please direct any questions to David Mulinaro, Compliance Inspector, at (317) 232-7204 or DMulinar@idem.IN.gov.

Sincerely,

Janusz Johnson, Chief

Compliance and Enforcement Branch

Office of Air Quality

cc: Hancock County Health Department (cbaker@hancockcoingov.org)

Hancock County Sheriff's Department (pweiler@hancockcoingov.org)

Greenfield Power and Light (<a href="mailto:syost@greenfieldin.org">syost@greenfieldin.org</a>)
Property Owner: (<a href="mailto:jashorning@greenfieldin.org">jashorning@greenfieldin.org</a>)

IDHS Fire Academy (Director: JoShafer@dhs.IN.gov) (Program Manager: DOwens1@dhs.IN.gov)

Christopher Cissell, IDEM OAQ (<u>ccissell@idem.IN.gov</u>)
David Mulinaro, IDEM OAQ (<u>DMulinar@idem.IN.gov</u>)
Brock Jones, IDEM OAQ (<u>BJones2@idem.in.gov</u>)



# REQUEST FOR FIRE TRAINING APPROVAL UNDER 326 IAC 4-1 – STATIONARY FACILITY

State Form 55543 (R2 / 1-22)

NOTES:

This form is used to request an approval to conduct live fire training at a stationary facility, in accordance with 326 IAC 4-1. Complete and return this form, along with the Identification of Potentially Affected Persons (State Form 49635) form, to the Office of Air Quality email address provided in the upper right-hand corner.

In case of questions, call (317) 233-5672 or e-mail burnapprovals@idem.IN.gov.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY - COMPLIANCE & ENFORCEMENT

100 N. Senate Avenue
MC 61-50, Room 1003
Indianapolis, IN 46204-2251
Telephone (317) 233-5672
E-mail: <u>burnapprovals@idem.IN.gov</u>
Website: <u>www.in.gov/idem/openburning</u>

| FOR OFFICE USE ONLY |             |  |  |
|---------------------|-------------|--|--|
| APPROVAL ID NUMBER  | ASSIGNED TO |  |  |
| FT-298232           | DVM         |  |  |

#### **INSTRUCTIONS**

▶ Part A requires contact information of the responsible party conducting the fire training. Part B requires information on the physical location of the stationary fire training facility and training information. If required, include a mitigation statement describing steps that will be taken to ensure the identified item(s)/area(s) are protected from adverse impacts from smoke and fire during trainings. Part C requires the duration of the open burning approval being requested. Part D requires information on the fuel type(s) and amount(s) to be used during each training evolution. Part E is a checklist of supporting documentation to be included with the approval request. Once completed, sign and date this form in Part F and submit it, along with the signed "Identification of Potentially Affected Persons" (State Form 49635), at least sixty (60) days prior to the projected training start date to burnapprovals@idem.IN.gov.

| training start date to <u>burnapprovals@idem.IN.gov</u> .   |   |  |                         |  |  |
|---|---|--|-------------------------|--|--|
| PART A: RESPONSIBLE PARTY CONDUCTING FIRE TRAINING  |   |  |                         |  |  |
| Name:   | Title:  |  | E-mail Address:         |  |  |
| Chris Faust   | Division Chief of Train                                       | ing and Safety   | cfaust@greenfieldin.org |  |  |
| Company Name:   | Company Mailing Add   | lress:   | Telephone Number:       |  |  |
| Greenfield Fire Territory   | 17 W South St Greenfield, IN 46140                            |  | 317-477-4434            |  |  |
| PART B: STATIONARY F  | IRE TRAINING FACILI   | TY LOCATION AND T  | RAINING INFORMATION     |  |  |
| Site Name:  |   | Site Physical Address  | /Location:              |  |  |
| Jackson Training Facility   | 2070 Fields BLVD Gre  |  | enfield, IN 46140       |  |  |
| County:   | Number of Students P  |  | er Training Event:      |  |  |
| Hancock   | 25-30   |  |                         |  |  |
| Number of Evolutions Conducted Per Training   | f Evolutions Conducted Per Training Day: Number of Training D |  | ays Per Year:           |  |  |
| 5-6   | j-6   |  | 30-50                   |  |  |
| The training facility is located within (*mitigation statement required):   |   | Mitigation Statement (if applicable):  |                         |  |  |
| An incorporated area  |   | After all fire suspression is completed. Burn Rooms will be  |                         |  |  |
| 100 feet of a structure   |   | cleaned out completely of any debree and romoved from the building. The training facility will be walked through and checked for hot spots. Building will be left open for 24 hours and checked periodicly to make sure nothing was missed during clean-up. At anytime that we receive a complaint about smoke the training event can be stopped and moved to another day. |                         |  |  |
| 100 feet of a power line  |   |  |                         |  |  |
| 300 feet of a fuel storage area or pipeline   | P ⊠ Yes* □ No   |  |                         |  |  |
| 300 feet of a frequently traveled road  | ☐ Yes* ⊠ No   |  |                         |  |  |
| Name(s) of other fire departments and/or organizations utilizing the training facility:   |   | Sugar Creek Township, Buck Creek Township, Vernon Township, Charlottesville Vol Fire Dept, Wilkinson Vol Fire Dept, Shirley Vol Fire Dept, Greentownship Vol Fire Dept,  |                         |  |  |
| PART C: BURN APPROVAL DURATION  |   |  |                         |  |  |
| Requested approval duration (years):  |   | ⊠1 □2 □3 □   | □ 4 □ 5                 |  |  |
| Nighttime training approval requested:  | ted: ⊠ Yes □ No   |  |                         |  |  |
| Note: An approval cannot be issued for more than one year if the fire training facility is located in Lake, Porter, Clark, or Floyd counties. |   |  |                         |  |  |

<sup>&</sup>lt;sup>1</sup> Identification of Potentially Affected Persons (State Form 49635) available online at <a href="https://www.in.gov/idem/forms/idem-agency-forms/#oag\_compliance">www.in.gov/idem/forms/idem-agency-forms/#oag\_compliance</a>

| PART D: FUEL USAGE INFORMATION  |                            |  |                           |            |                     |  |  |
|---|----------------------------|--|---------------------------|------------|---------------------|--|--|
| Provide information on fuel type(s) and amounts used per training evolution for each training structure and / or prop.                                  |                            |  |                           |            |                     |  |  |
| Live Fire Training Structure/Prop:  | Fuel Type(s)               | Fuel Use (Per Evolution) F                 |                           | Fuel U     | Fuel Use (Per Year) |  |  |
| ☐ Training Structure (i.e., tower)  |                            |  |                           |            |                     |  |  |
| ☐ Training Structure (i.e., container)  | Class A fuels              | 5 Pallets, 1 bale of<br>7/16 sheets of OSB |                           |            |                     |  |  |
| ☐ Training Prop:  |                            |  |                           |            |                     |  |  |
| ☐ Training Prop:  |                            |  |                           |            |                     |  |  |
| ☐ Training Prop:  |                            |  |                           |            |                     |  |  |
| ☐ Other:  |                            |  |                           |            |                     |  |  |
| ☐ Other:  |                            |  |                           |            |                     |  |  |
| PART E: SUPPORTING DOCUMENTATION CHECKLIST  |                            |  |                           |            |                     |  |  |
| The following supporting documentation should be included as part of the burn approval request, as applicable: Included:                                |                            |  |                           | Included:  |                     |  |  |
| Detailed burn plan (required to be submitted for approvals more than one (1) year in duration)  |                            |  |                           | ☐ Yes ☒ No |                     |  |  |
| <ul> <li>Training facility site map, with legend, identifying training structures/props, roads, right of ways, and smoke<br/>sensitive areas</li> </ul> |                            |  |                           |            | ⊠ Yes □ No          |  |  |
| Identification of Potentially Affected Persons (State Form 49635)   |                            |  | ⊠ Yes □ No                |            |                     |  |  |
| PART F: SIGNATURE   |                            |  |                           |            |                     |  |  |
| I hereby certify the information above and attached is accurate to the best of my knowledge.  |                            |  |                           |            |                     |  |  |
| Signaturę:  | Title:                     |  | Company Name:             |            |                     |  |  |
| Opms Your   | Division Chief of Training |  | Greenfield Fire Territory |            |                     |  |  |
| Printed Name:   | E-mail Address:            |  | Date:                     | 7 1/       |                     |  |  |
| Chris Faust   | cfaust@greenfieldin.org    | II.  | 6-7-                      | C4         |                     |  |  |



X

## IDENTIFICATION OF POTENTIALLY AFFECTED PERSONS

State Form 49635 (R7 / 1-22)

#### NOTES

- This form identifies surrounding property owners who may be considered an affected person upon issuance of an open burning approval. As part of the open burning approval process, and to comply with the Administrative Orders and Procedures Act (IC 4-21.5-3-5), this form must be included when submitting an open burning approval request. This form, along with the applicable open burning request form, should be submitted to the Office of Air Quality email address provided in the upper right-hand corner.
- In case of questions, call (317) 233-5672 or e-mail <u>burnapprovals@idem.IN.gov</u>.

## INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY - COMPLIANCE & ENFORCEMENT

100 N. Senate Avenue MC 61-50, Room 1003 Indianapolis, IN 46204-2251 Telephone: (317) 233-5672 nail: burnapprovals@idem.IN.

E-mail: <u>burnapprovals@idem.IN.gov</u>
Website: <u>www.in.gov/idem/openburning</u>

### way (ROW) owner contact information if the burn site is located within 100 feet of a roadway or power or communication line, within 300 feet of a pipeline, or within 500 feet of a railroad. Part C identifies the total number of affected persons located within 500 feet of the burn site. If there are fifteen (15) affected persons or fewer located within 500 feet of the burn site, each property owner and mailing address should be included in Part D. The Office of Air Quality will provide those listed in Part D with a copy of the decision. If there are more than fifteen (15) affected persons, select the appropriate box and skip Part D as a public notice of the approval will be issued. Once completed, sign and date this form in Part E and submit it, along with the applicable open burning request form<sup>1</sup>, at least sixty (60) days prior to the projected burn start date to burnapprovals@idem.IN.gov. PART A: BURN SITE PROPERTY INFORMATION Property Name: Burn Site Property Physical Address: **Jackson Training Facility** 2070 Fields BLVD, Greenfield, IN 46140 Property Owner Name: Property Owner Mailing Address: City of Greenfield 2070 Fields BLVD, Greenfield, IN 46140 Property Owner Telephone Number: Property Owner E-mail Address: 317-462-8870 jashorning@greenfieldin.org PART B: PUBLIC UTILITY/RIGHT OF WAY (ROW) OWNERS CONTACT INFORMATION Provide public utility/right of way (ROW) owner contact information if burn site is located within 100 feet of roadway, power, or communication line, 300 feet of pipeline, or 500 feet of a railroad. ROW Company: **ROW Company Mailing Address:** Greenfiled Power and Light 333 S Franklin St. Greenfiled IN 46140 **ROW Contact Name:** E-mail Address: syost@greenfieldin.org Scott Yost **ROW Company: ROW Company Mailing Address: ROW Contact Name:** E-mail Address: Telephone Number: **ROW Company: ROW Company Mailing Address: ROW Contact Name:** E-mail Address: Telephone Number: PART C: NUMBER OF AFFECTED PERSONS

More than fifteen (15) affected persons are located within 500 feet of the burn site. Approval will be public noticed,

INSTRUCTIONS

▶ Part A requires the name, physical location, and owner contact information of the burn site property. Part B requires the public utility/right of

Fifteen (15) affected persons or fewer are located within 500 feet of the burn site.

All affected persons are to be listed in Part D.

Do not list all affected persons in Part D.

<sup>&</sup>lt;sup>1</sup> Open burning approval request forms available online at <a href="https://www.in.gov/idem/forms/idem-agency-forms/#oag\_compliance">www.in.gov/idem/forms/idem-agency-forms/#oag\_compliance</a>

| P  | ART D: POTENTIAL           | LY AFFECTED PERSON                       | IS                        |  |
|--|----------------------------|--|---------------------------|--|
| Property Owner Name and Mailing Address:   |                            | Property Owner Name a                    | nd Mailing Address:       |  |
| Keihin IPT Mfg Inc   |                            | Monroe-Cowan Real Estate, Inc.           |                           |  |
| 400 W New Rd   |                            | 936 West 375 North                       |                           |  |
| Greenfield, IN 46140   |                            | Greenfield, IN 4614                      | 40                        |  |
| Property Owner Name and Mailing Address:   |                            | Property Owner Name and Mailing Address: |                           |  |
| Singh, Gurdeep & Varinderjit Kau   |                            | Everest Hotel Grou                       | ıp Inc.                   |  |
| 2100 N State Street  |                            | 2070 N State St                          |                           |  |
| Greenfield, IN 46140   |                            | Greenfield, IN 4614                      | 40                        |  |
| Property Owner Name and Mailing Address:   |                            | Property Owner Name a                    | nd Mailing Address:       |  |
| STNL Greenfield, LLC   |                            | Enterkin Leasing LLC                     |                           |  |
| Greenfield Daily Reporter  |                            | 165 W New Rd<br>Greenfield, IN 46140     |                           |  |
| Greenfield, IN, 46140  |                            | Greenileia, IN 40140                     |                           |  |
| Property Owner Name and Mailing Address:   |                            | Property Owner Name a                    | nd Mailing Address:       |  |
| Modernfold Inc   |                            |  | Bastian Development LLC   |  |
| 215 W New Rd   |                            | 315 W New Rd                             |                           |  |
| Greenfield, IN 46140   | Greenfield, IN 46140       |  | Greenfield, IN, 46140     |  |
| Property Owner Name and Mailing Address:   |                            | Property Owner Name a                    | nd Mailing Address:       |  |
| Hancock Regional Hospital  |                            |  |                           |  |
| W New Rd   |                            |  |                           |  |
| 1.24 Acres   |                            |  |                           |  |
| Property Owner Name and Mailing Address:   |                            | Property Owner Name a                    | nd Mailing Address:       |  |
|  |                            |  |                           |  |
|  |                            |  |                           |  |
|  |                            |  |                           |  |
| Property Owner Name and Mailing Address:   |                            | Property Owner Name a                    | nd Mailing Address:       |  |
|  |                            |  |                           |  |
|  |                            |  |                           |  |
|  |                            |  |                           |  |
| PART E: SIGNATURE  |                            |  |                           |  |
| I hereby state that I have listed all affected persons to the best of my knowledge. If none are listed, it signifies that no such persons own or rent property within 500 feet of the burn site. |                            |  |                           |  |
| Signature:   | Title:                     |  | Company Name:             |  |
| Chris faust  | Division Chief of Training |  | Greenfield Fire Territory |  |
| Printed Name:  | E-mail Address:            |  | Date:                     |  |
| Chris Faust  | cfaust@greenfieldin.org    |  | 6-24-24                   |  |



