

D&B Environmental Consulting, Inc.

**401 Lincoln Way West
Osceola, Indiana 46561
(574) 674-0161**

June 28, 2024

Indiana Department of Environmental Management
Office of Air Quality, Permits Branch
Mail Code 61-53, IGCN 1003
100 N. Senate Ave.
Indianapolis, IN 46204-2251

Received by State of Indiana IDEM-OAQ
via email June 28, 2024 MJ-5

**RE: Application for Operating Air Permit
Precision Wood Finishing**

To Whom It May Concern:

Precision Wood Finishing is submitting the enclosed application for the purpose of obtaining a Registration Operating Permit with the Indiana Department of Environmental Management. Precision Wood Finishing operations include WOOD surface coating operations.

A copy of this letter and the attached application has been submitted to the Lagrange County Public Library – Shpshewana Branch at the address below for public review. This letter (without the application attachment) has been submitted to the list of adjacent landowners and governmental officials to fulfill the requirements of public notification.

Please review this information and should you have any further questions, please do not hesitate to contact me at 574-674-0161 or via pollymishler@dbesi.com. Thank you for your consideration in this matter.

Sincerely,



Polly Mishler
Project Manager

Enclosure: Two (2) Copies of the Registration Application

CC: Lagrange County Public Library – Shpshewana Branch, Reference Desk,
250 Depot Street, 46565 w/Enclosure

Adjacent Landowners/Government Officials w/out Enclosure

Mr. Lavon Lehman, Precision Wood Finishing, w/Enclosure



AIR PERMIT APPLICATION COVER SHEET
 State Form 50839 (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

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:

087-48027-00739

DATE APPLICATION WAS RECEIVED:

Received by State of Indiana IDEM-OAQ
 via email June 28, 2024 MJ-5

1. **Tax ID Number:** [REDACTED]

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:** Precision Wood Finishing

3. **Plant ID:** -

4. **Billing Address:** 5350 W 450 N

City: Shpshewana **State:** IN **ZIP Code:** 46565 -

5. **Permit Level:** Exemption Registration SSOA MSOP FESOP TVOP PBR

6. **Application Summary:** Check all that apply. Multiple permit numbers may be assigned as needed based on the choices selected below.

- | | | |
|--|---|--|
| <input checked="" 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 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 | |

Transition (between permit levels) *From:* _____ *To:* _____

- Administrative Amendment:
- | | |
|--|---|
| <input type="checkbox"/> Company Name Change | <input type="checkbox"/> Change of Responsible Official |
| <input type="checkbox"/> Correction to Non-Technical Information | <input type="checkbox"/> Notice Only Change |
| <input type="checkbox"/> Other (specify): _____ | |

- 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? Yes No

8. Is this an application for construction of a new emissions unit at an Existing Source? Yes 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

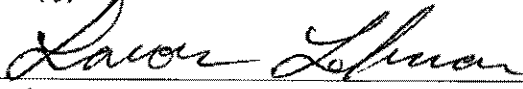
PART D: Certification Of Truth, Accuracy, and Completeness

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.

Lavon Lehman
Name (typed)


Signature

Owner
Title

6-28-24
Date



OAQ GENERAL SOURCE DATA APPLICATION
GSD-01: Basic Source Level Information
 State Form 50640 (R5 / 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

Received by State of Indiana IDEM-OAQ
 via email June 28, 2024 MJ-5

087-48027-00739

- NOTES:**
- The purpose of GSD-01 is to provide essential 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.

PART A: Source / Company Location Information			
1. Source / Company Name: Precision Wood Finishing		2. Plant ID: -	
3. Location Address: 5350 West 450 North			
City: Shipshewana	State: IN	ZIP Code: 46565 -	
4. County Name: Lagrange		5. Township Name:	
6. Geographic Coordinates			
Latitude:		Longitude:	
7. Universal Transferred Mercator Coordinates (if known):			
Zone:	Horizontal:	Vertical:	
8. Adjacent States: Is the source located within 50 miles of an adjacent state? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes – Indicate Adjacent State(s): <input type="checkbox"/> Illinois (IL) <input checked="" type="checkbox"/> Michigan (MI) <input type="checkbox"/> Ohio (OH) <input type="checkbox"/> Kentucky (KY)			
9. Attainment Area Designation: 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 – Indicate Nonattainment Pollutant(s): <input checked="" type="checkbox"/> CO <input type="checkbox"/> Pb <input type="checkbox"/> NO _x <input type="checkbox"/> O ₃ <input type="checkbox"/> PM <input type="checkbox"/> PM ₁₀ <input type="checkbox"/> PM _{2.5} <input type="checkbox"/> SO ₂			
10. Portable / Stationary: Is this a portable or stationary source? <input type="checkbox"/> Portable <input checked="" type="checkbox"/> Stationary			

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

19. Title (optional): Owner

20. Mailing Address: 5350 West 450 North

City: Shipshewana

State: IN

ZIP Code: 46565 -

21. Electronic Mail Address (optional):

22. Telephone Number: (260) 562 - 2726

23. Facsimile Number (optional): (260) 562 - 2085

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: Lavon Lehman

25. Title: Owner

26. Mailing Address: 5350 West 450 North

City: Shipshewana

State: IN

ZIP Code: 46565 -

27. Telephone Number: (260) 562 - 2726

28. Facsimile Number (optional): (260) 562 - 2085

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? *The permit may list the title of the Authorized Individual or Responsible Official in lieu of a specific name.*

No Yes - *Change Responsible Official to:*

PART E: Owner Information

30. Company Name of Owner: Precision Wood Finishing

31. Name of Owner Contact Person: Lavon Lehman

32. Mailing Address: 5350 West 450 North

City: Shipshewana

State: IN

ZIP Code: 46565 -

33. Telephone Number: (260) 562 - 2726

34. Facsimile Number (optional): (260) 562 - 2085

34. Operator: Does the "Owner" company also operate the source to which this application applies?

No - *Proceed to Part F below.* 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. **Company Name of Agent:** D&B Environmental Consulting, LLC

41. **Type of Agent:** Environmental Consultant Attorney Other (specify):

42. **Name of Agent Contact Person:** Polly Mishler

43. **Mailing Address:** 401 Lincoln Way West

City: Osceola

State: IN

ZIP Code: 46561 -

44. **Electronic Mail Address (optional):** pollymishler@dbesi.com

45. **Telephone Number:** (574) 674 - 0161

46. **Facsimile Number (optional):** () -

47. **Request for Follow-up:** 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? No Yes

PART H: Local Library Information

48. **Date application packet was filed with the local library:** Within ten (10) Day of the date of Application

49. **Name of Library:** Lagrange County Public Library - Shipshewana Branch

50. **Name of Librarian (optional):**

51. **Mailing Address:** 250 Depot Street

City: Shipshewana

State: IN

ZIP Code: 46565 -

52. **Internet Address (optional):**

53. **Electronic Mail Address (optional):** shipshe@lagrange.lib.in.us

54. **Telephone Number:** (260) 768 - 7444

55. **Facsimile Number (optional):** (260) 768 - 7290

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.

56. **Legal Name of Company**

57. **Dates of Use**

to

to

to

to

to

to

to

to

to

to

58. **Company Name Change Request:** Is the source officially requesting to change the legal name that will be printed on all official documents issued by IDEM, OAQ?

No Yes - **Change Company Name to:**

PART J: Portable Source Location History *(if applicable)*

Complete this section only if the source is portable and the location has changed since the previous permit was issued. The current location of the source should be listed in Section A.

59. Plant ID	60. Location of the Portable Source	61. Dates at this Location
--		to
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--		to

PART K: Request to Change Location of Portable Source *(if applicable)*

Complete this section to request a change of location for a portable source.

62. Current Location:

Address:

City:

State:

ZIP Code: --

County Name:

63. New Location:

Address:

City:

State:

ZIP Code: --

County Name:

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
Wood Finishing	Furniture	2499	321999

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

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
HS1 & HS2	Two (2) Hand Sanders Please see below for other unpermitted new units	6/1/2023	1/7/2024	1/8/2024

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
SB1	X		One (1) Surface Coating Booth	6/1/2023	1/7/2024	1/8/2024
SB2	X		One (1) Surface Coating Booth	6/1/2023	1/7/2024	1/8/2024
DGen1	X		One (1) Diesel Generator	6/1/2023	1/7/2024	1/8/2024
AMU1	X		One (1) LP air make up unit	6/1/2023	1/7/2024	1/8/2024
WH1	X		One (1) LP Water Heater	6/1/2023	1/7/2024	1/8/2024



**GSD-02 GENERAL SOURCE DATA —
PLANT LAYOUT DIAGRAM**
State Form 51605 (2-04)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch
100 N. Senate Avenue
P.O. Box 6015
Indianapolis, IN 46206-6015
Telephone: (317) 233-0178 or
Toll Free: 1-800-451-6027 x30178 (within Indiana)
Facsimile Number: (317) 232-6749
[Http://www.IN.gov/idem/air/permits/index.html](http://www.IN.gov/idem/air/permits/index.html)



- NOTES:**
- This form and the Plant Layout diagram are required for all applications. If you do not provide the necessary information, applicable to your source, the application process may be stopped.
 - Detailed instructions for this form are available online at <http://www.IN.gov/idem/air/permits/apps/instructions/gsd02instructions.pdf>
 - A Detailed example Plant Layout Diagram is available online at <http://www.IN.gov/idem/air/permits/apps/instructions/PLDexample.pdf>
 - 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.

FOR OFFICE USE ONLY	
PERMIT NUMBER:	

Part A: Basic Plant Layout

Part A is intended to provide IDEM, OAQ with the appropriate information about all buildings and access-limiting features in and around the plant site. **Please use this table as a checklist.** You must provide scaled drawings, with the actual scale shown. All dimensions and units must be clearly indicated with a brief explanation of what is being shown. Include the following (*All measurements should be given in feet.*)

1. Building Dimensions 60 feet X 80 Feet	2. Building Distance to Property Lines
3. Surrounding Building Dimensions	4. Distance to the Nearest Residence
5. UTM Location Coordinates	6. Compass (pointing North)
7. Access-Limiting Features:	Identification Distance Length

Part B: Stack Information

Part B is intended to provide IDEM, OAQ with the appropriate information about all stacks, roof monitors, control devices, and process vents at the plant site. **Please use this table as a checklist.** You must show the location of all applicable emission points and include all relevant stack and emissions unit identification numbers for each. In addition, you will need to identify each of these emission points under "Stack Identification" on form GSD-04, Stack/Vent Information. Include the following (*All measurements should be in feet.*)

8. Exhaust Stacks wall stack	9. Process Vents
10. Roof Monitors	11. X Control Devices Paint filters
12. Doors Windows	Interior Vents

Part C: Roadway Information

Part C is intended to provide IDEM, OAQ with the appropriate information about the roadways in and around the plant site. **Please use this table as a checklist.** Include the following (*All measurements should be in feet.*)

13. Adjacent Roadways Interior Roadways
14. X Roadway Surface Description (gravel, dirt, paved, etc.) Unpaved crushed asphalt
15. Number of Lanes 1

Part D: Source Building Information

This table is intended to provide detailed information about each building at the plant site that is part of the source. If additional space is needed, you may make a copy of this table. (All measurements should be given in feet.)

16. Building ID	17. Building Description	18. Building Dimensions			19. Distance & direction to the nearest property line (feet & compass coordinate)	20. Distance & direction to the nearest access limiting feature (feet & compass coordinate)	21. Distance & direction to the nearest residence (feet & compass coordinate)
		Length (feet)	Width (feet)	Height (feet)			

Please See Attached

Part E: Surrounding Building / Residence Information

This table is intended to provide detailed information about each building or residence surrounding the plant site. If additional space is needed, you may make a copy of this table. (All measurements should be given in feet.)

22. Surrounding Building / Residence Description	23. Surrounding Building / Residence Property Dimensions			24. Distance & direction to the nearest property line (feet & compass coordinate)	25. Distance & direction to the nearest access limiting feature (feet & compass coordinate)	26. Building ID of nearest building on the plant site	27. Distance & direction to the nearest building on the plant site (feet & compass coordinate)
	Length (feet)	Width (feet)	Height (feet)				

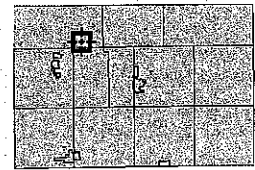
Part F: Plant Layout Diagram

This space is intended to provide a place for a hand drawn plant layout diagram. It is **optional** to use this space to create your plant layout.

See Attached



Overview



Legend

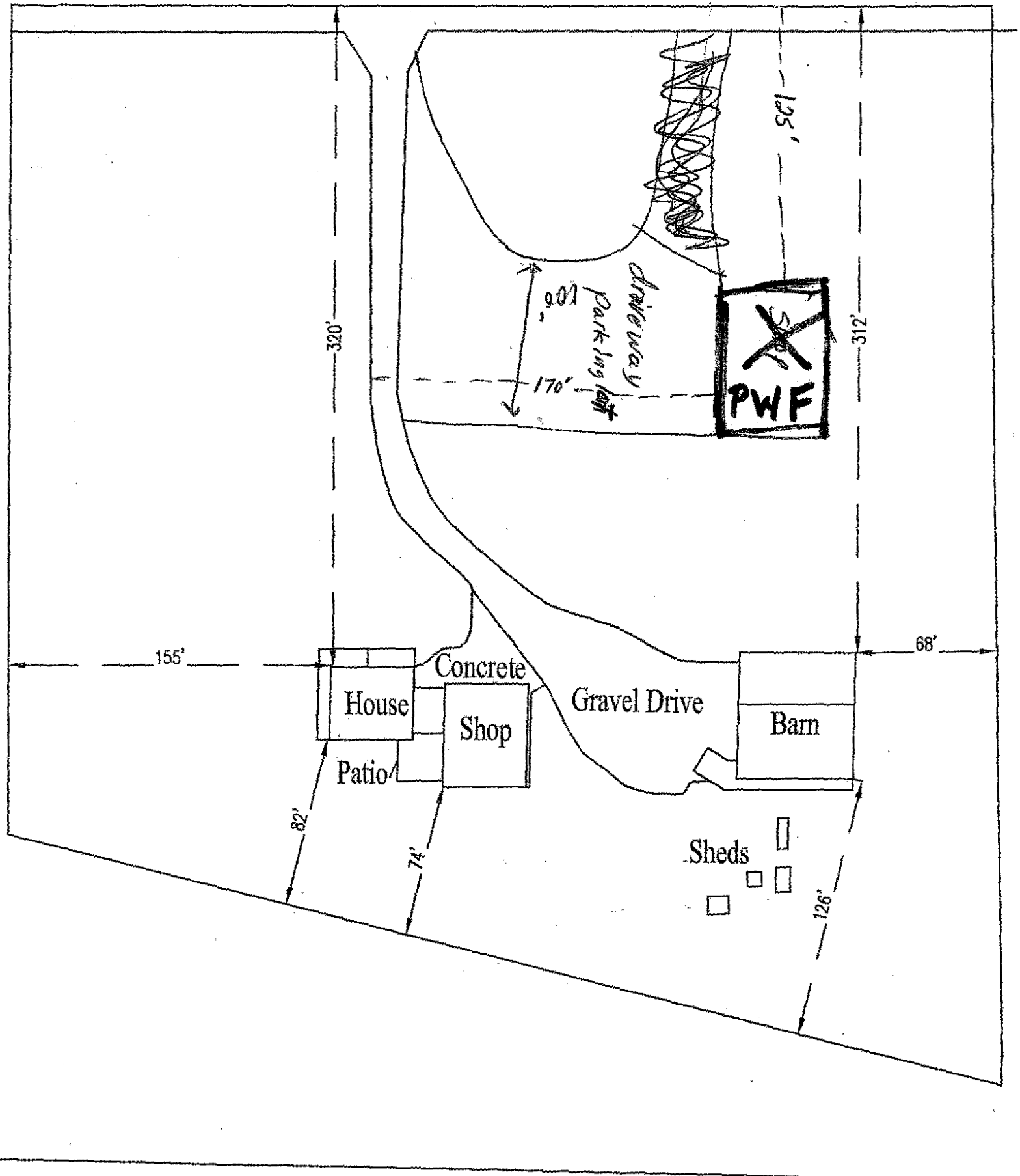
- Parcels
- Roads**
- Federal
- State
- County
- Local
- - Private
- Unknown

Parcel ID	44-03-31-400-017.001-017	Alternate ID	44-03-31-400-017.001-017	Owner Address	Lehman, Lavon R & Karen L
Sec/Twp/Rng	31-38N-09E	Class	AGRICULTURAL - CASH GRAIN/GENERAL FARM		5350 W 450 N
Property Address	Shipshewana	Acreage	4.95		Shipshewana, IN 46565
District	Van Buren Township				
Brief Tax Description	L & K HOUSING LOT 1 4.95 AC (Note: Not to be used on legal documents)				

The information in this web site represents current data from a working file which is updated continuously. Its accuracy cannot be guaranteed. No warranty, expressed or implied, is provided for the data herein, or its use. LaGrange County digital cadastral data are a representation of recorded plats and surveys for use within the Geographic Information System for purposes of data access and analysis. These and other digital data do not replace or modify land surveys, deeds, and/or other legal instruments defining land ownership or use

Date created: 6/20/2024
Last Data Uploaded: 6/20/2024 6:48:34 AM

Developed by **Schneider**
GEO SPATIAL





OAQ GENERAL SOURCE DATA APPLICATION
GSD-03: Process Flow Diagram
 State Form 51599 (R2 / 9-08)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch
 100 N. Senate Avenue, 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/permits/air/index.html



NOTES:

- The purpose of GSD-03 is to provide a checklist for identifying the information to be included on each Process Flow diagram.
- Complete this form and submit a process flow diagram for each process included in your air permit application.
- IDEM, OAQ has provided detailed instructions for this form and an example of a basic process flow diagram on the Air Permit Applications 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.

Part A: Process Flow Diagram

Part A provides basic information to understanding the nature of the process. Please use this table as a checklist to indicate that you have included the following items on your process flow diagram (*All throughputs should be given in pounds per hour.*)

- | | | |
|--|--|---|
| 1. <input checked="" type="checkbox"/> Process Description: wood custom furniture surface coating | 3. <input checked="" type="checkbox"/> Raw Material Input | 4. <input checked="" type="checkbox"/> Process Throughput |
| 2. <input checked="" type="checkbox"/> Process Equipment | 5. <input checked="" type="checkbox"/> Additions <input type="checkbox"/> Deletions <input type="checkbox"/> Modifications | |

Use the space below to briefly explain the impacts of the additional equipment, the reason for removing any equipment, and/or the reason for the proposed modification. (*If additional space is needed, please attach a separate sheet with the information and indicate in the space below that additional information is attached.*)

This is a new surface coating facility coating WOOD furniture.

Part B: Process Operation Schedule

Part B indicates the actual (or estimated actual) hours of operation for the process

- | |
|--|
| 6. <input checked="" type="checkbox"/> Process Operation Schedule <u>8</u> Hours per Day <u>5</u> Days per Week <u>50</u> Weeks Per Year |
|--|

7. **Scheduled Downtime:** Use the space below to include as much information as is known about scheduled periods of downtime for this process. (*If additional space is needed, please attach a separate sheet with the information and indicate in the space below that additional information is attached.*)

Shut down is scheduled for July 4th week and Christmas Week

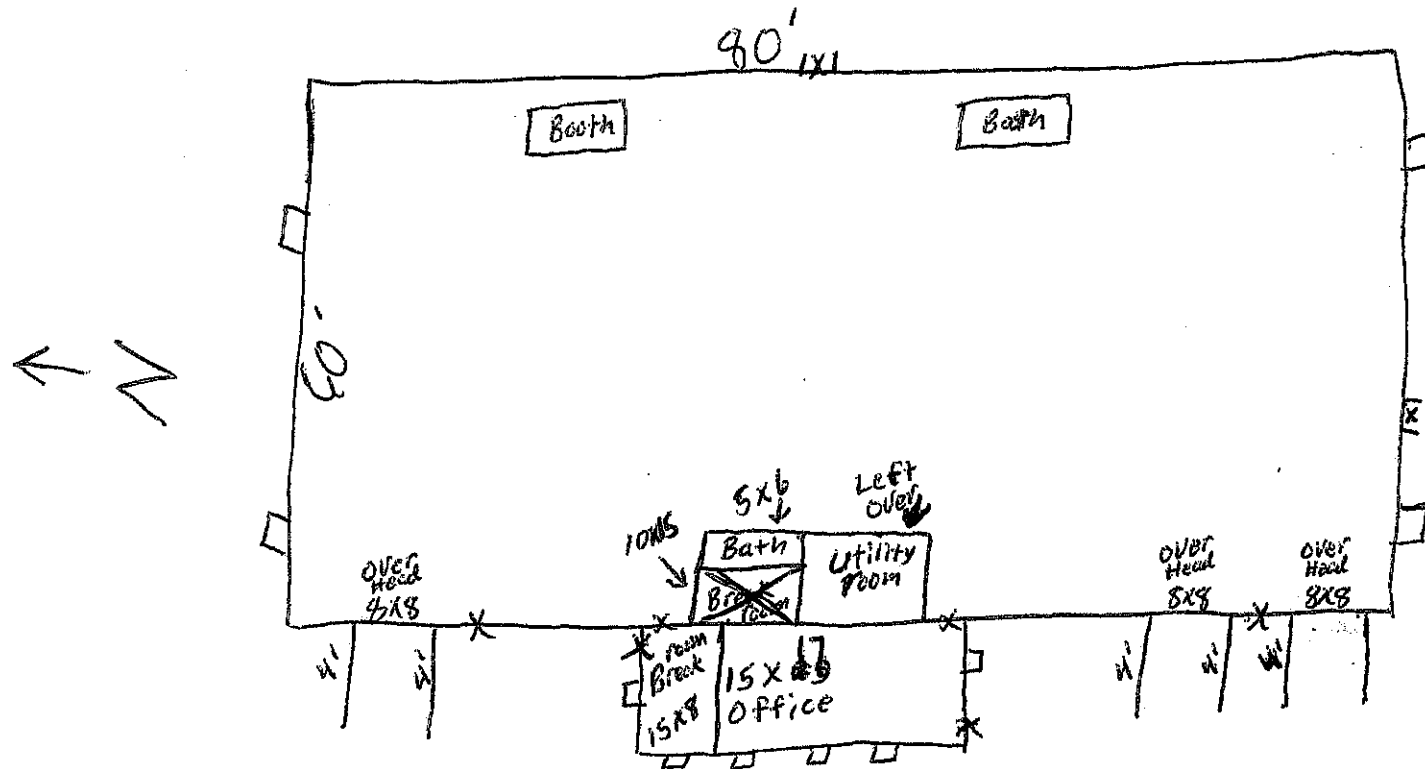
Part C: Emissions Point Information

Part C provides information about each potential outlet of air pollutant emissions to the atmosphere. Please use this table as a checklist to indicate that you have included the following items on your process flow diagram (*All throughputs should be given in pounds per hour.*)

- | |
|---|
| 8. <input checked="" type="checkbox"/> Stack / Vent Information |
| 9. <input checked="" type="checkbox"/> Pollutants Emitted |
| 10. <input checked="" type="checkbox"/> Air Pollution Control |

William 574-233-2119 x31

Forum Architects



12' side wall

Precision Wood Finishing

LAVON Lehman
5350 W 450N
Shipshewana, IN, 46565

ph 260-562-2726
Fax 260-562-2085

L Window
X passage



**GSD-04 GENERAL SOURCE DATA —
STACK / VENT INFORMATION**
State Form 51606 (2-04)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch
100 N. Senate Avenue
P.O. Box 6015
Indianapolis, IN 46206-6015
Telephone: (317) 233-0178 or
Toll Free: 1-800-451-6027 x30178 (within Indiana)
Facsimile Number: (317) 232-6749
[Http://www.IN.gov/idem/air/permits/index.html](http://www.IN.gov/idem/air/permits/index.html)



NOTES:

- This form is required for all air permit applications.
- The purpose of this form is to provide basic information about each stack or vent that has the potential to emit air pollutants. If you do not provide the enough information to adequately describe each process vent and/or stack, the application process may be stopped.
- Detailed instructions for this form are available online at <http://www.IN.gov/idem/air/permits/apps/instructions/gsd04instructions.pdf>.
- 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.

FOR OFFICE USE ONLY
PERMIT NUMBER:

Stack / Vent Information							
This table is intended to provide detailed information about each stack or vent through which air pollutants could be released into the atmosphere. If an air stream is vented inside a building, the vent does not need to be listed on this form. If additional space is needed, you may make a copy of this form.							
1. Stack / Vent ID	2. Type (V H W O)	3. Shape (C R O)	4. Outlet Dimensions (feet)	5. Height (feet)	6. Maximum Outlet Flow Rate (acfm)	7. Outlet Gas Temperature (Degrees F)	8. Related Stacks / Vents (B P O)
SBS1	V	C	2.8	20	12000	Ambient	None
SBS2	V	C	2.8	20	12000	Ambient	None



**GSD-05 GENERAL SOURCE DATA —
EMISSIONS UNIT INFORMATION**
State Form 51610 (2-04)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch
100 N. Senate Avenue
P.O. Box 6015
Indianapolis, IN 46206-6015
Telephone: (317) 233-0178 or
Toll Free: 1-800-451-6027 x30178 (within Indiana)
Facsimile Number: (317) 232-6749
[Http://www.IN.gov/idem/air/permits/index.html](http://www.IN.gov/idem/air/permits/index.html)



NOTES:

- This form is required for all air permit applications.
- The purpose of this form is to provide basic information about each emissions unit that has the potential to emit air pollutants.
- Detailed instructions for this form are available online at <http://www.IN.gov/idem/air/permits/apps/instructions/gsd05instructions.pdf>.
- 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.

FOR OFFICE USE ONLY

PERMIT NUMBER:

_____ - _____ - _____

Emissions Unit Information

This table is intended to provide detailed information about each emissions unit that has the potential to emit air pollutants to the atmosphere. Accurate information is needed to determine the total potential to emit. If you do not provide the enough information to adequately describe each emissions unit, the application process may be stopped. If additional space is needed, you may make a copy of this form.

1. Unit ID	2. Model No.	3. Serial No.	4. Description	5. Manufacturer	6. Installation Date	7. Maximum Capacity	8. Stack / Vent ID
SB1 & SB2	NA	NA	One (1) surface coating booth equipped with airless Applicators		6/2023	2.5 gallons/ hour shift	SBS1 & SBS2
HS1 & HS2	NA	NA	Two (2) Hand Sanders, uncontrolled		6/2023	20 lb/hour	None
AMU1	NA	NA	One (1) LP Air Make up unit		6/2023	2.50 MMBtu/hr	None
WH1	NA	NA	One (1) LP Water heater for floor heating		6/2023	0.183 MMBtu/hr	None
DGen 1	NA	NA	One (1) Diesel Fired Generator		6/2023	126 HP	None



GSD-06 GENERAL SOURCE DATA — PARTICULATE EMISSIONS
 State Form 51612 (2-04)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch
 100 N. Senate Avenue
 P.O. Box 6015
 Indianapolis, IN 46206-6015
 Telephone: (317) 233-0178 or
 Toll Free: 1-800-451-6027 x30178 (within Indiana)
 Facsimile Number: (317) 232-6749
[Http://www.IN.gov/idem/air/permits/index.html](http://www.IN.gov/idem/air/permits/index.html)



NOTES:

- This form is required for all air permit applications.
- The purpose of this form is to provide basic information about each source of particulate emissions.
- Detailed instructions for this form are available online at <http://www.IN.gov/idem/air/permits/apps/instructions/gsd06instructions.pdf>.
- 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.

FOR OFFICE USE ONLY	
PERMIT NUMBER:	

Part A: Particulate Matter Emissions

Part A is intended to provide a summary of the type and amount of particulate emissions at the source. The state rules on particulate emissions are found in Title 326 of the Indiana Administrative Code, Article 6, Particulate Rules. If you do not provide the enough information to adequately describe each source of particulate emissions, the application process may be stopped. If additional space is needed, you may make a copy of this table.

Emissions Point		Potential To Emit (tons per year)						
1. ID	2. Description	3. PM	4. PM-10	5. PM-2.5	6. TSP	7. Fugitive Dust	8. Fugitive PM	9. HAP PM
SB1	See Attached Calculations							
SB2	See Attached Calculations							
HS1 & HS2	See Attached Calculations							
DGen1	See Attached Calculations							
WH1	See Attached Calculations							
AMU1	See Attached Calculations							

Part C: Control of Particulate Emissions

Part C is intended to gather information about how each source of particulate emissions is controlled. If you do not provide the enough information to adequately describe how each source of particulate emissions is controlled, the application process may be stopped. If additional space is needed, you may make a copy of this table.

10. Emissions Point ID	11. Control Measure	12. Control Measure Description	13. Control Plan
SB1-SB2	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Dry Fabric Filter</u>	Particulate matter emissions from the surface coating operation, identified as SB1 & SB2, will be controlled by a dry fabric filter capture and collection system, identified as FF1 & FF2, exhausting through stack SBS1 & SBS2, respectfully.	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Date Submitted:
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression Other: _____		<input type="checkbox"/> No <input type="checkbox"/> Yes Date Submitted:
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> No <input type="checkbox"/> Yes Date Submitted:
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> No <input type="checkbox"/> Yes Date Submitted:
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> No <input type="checkbox"/> Yes Date Submitted:
	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input type="checkbox"/> Other: _____		<input type="checkbox"/> No <input type="checkbox"/> Yes Date Submitted:



**GSD-07 GENERAL SOURCE DATA —
CRITERIA POLLUTANT EMISSIONS SUMMARY**
State Form 51602 (2-04)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch
100 N. Senate Avenue
P.O. Box 6015
Indianapolis, IN 46206-6015
Telephone: (317) 233-0178 or
Toll Free: 1-800-451-6027 x30178 (within Indiana)
Facsimile Number: (317) 232-6749
[Http://www.IN.gov/idem/air/permits/index.html](http://www.IN.gov/idem/air/permits/index.html)



NOTES:

- This form is required for all air permit applications.
- The purpose of this form is to provide the actual and potential emissions of each criteria pollutant emitted from the source.
- Detailed instructions for this form are available online at <http://www.IN.gov/idem/air/permits/apps/instructions/gsd07instructions.pdf>.
- 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.

FOR OFFICE USE ONLY	
PERMIT NUMBER:	

Part A: Unit Emissions Summary

Part A is intended to provide the actual and potential emissions of each criteria pollutant emitted from each emissions unit. If you do not provide the enough information to adequately describe the emissions from each emissions unit, the application process may be stopped.

1. Unit ID	2. Stack / Vent ID	3. Criteria Pollutant	4. Actual Emissions		5. Potential To Emit	
			Standard Units	Tons Per Year	Standard Units	Tons Per Year
SB1 – SB2	SBS1 & SBS2	See Attached Calculations				
AMU1		See Attached Calculations				
DGen1		See Attached Calculations				
WH1		See Attached Calculations				
HS1 & HS2		See Attached Calculations				

Part B: Pollutant Emissions Summary

Part B is intended to provide the total actual and potential emissions of each criteria pollutant emitted from the source, (including all emissions units and fugitive emissions at the source). If you do not provide the enough information to adequately describe the total source emissions, the application process may be stopped.

6. Criteria Pollutant	7. Actual Emissions		8. Potential To Emit	
	Standard Units	Tons Per Year	Standard Units	Tons Per Year
VOC				
NOx				
PM/PM10				
HAPs				
CO				



**GSD-08 GENERAL SOURCE DATA —
HAZARDOUS AIR POLLUTANT EMISSIONS SUMMARY**
State Form 51604 (2-04)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM - Office of Air Quality - Permits Branch
100 N. Senate Avenue
P.O. Box 6015
Indianapolis, IN 46206-6015
Telephone: (317) 233-0178 or
Toll Free: 1-800-451-6027 x30178 (within Indiana)
Facsimile Number: (317) 232-6749
[Http://www.IN.gov/idem/air/permits/index.html](http://www.IN.gov/idem/air/permits/index.html)



NOTES:

- This form is required for all air permit applications.
- The purpose of this form is to provide the actual and potential emissions of each hazardous air pollutant emitted from the source.
- Detailed instructions for this form are available online at <http://www.IN.gov/idem/air/permits/apps/instructions/gsd08instructions.pdf>.
- 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.

FOR OFFICE USE ONLY
PERMIT NUMBER: _____
_____ - _____ - _____

Part A: Unit Emissions Summary

Part A is intended to provide the actual and potential emissions of each hazardous air pollutant emitted from each emissions unit. If you do not provide the enough information to adequately describe the emissions from each emissions unit, the application process may be stopped.

1. Unit ID	2. Stack / Vent ID	3. Hazardous Air Pollutant	4. CAS No.	5. Actual Emissions		6. Potential To Emit	
				Standard Units	Tons Per Year	Standard Units	Tons Per Year
SB1-SB2	SBS1 & SBS2	See Attached Calculations					
DGen 1		See Attached Calculations					
AMU1		See Attached Calculations					
WH1		See Attached Calculations					

Part B: Pollutant Emissions Summary

Part B is intended to provide the total actual and potential emissions of each hazardous air pollutant emitted from the source (including all emissions units and fugitive emissions at the source). If you do not provide the enough information to adequately describe the total source emissions, the application process may be stopped.

7. Hazardous Air Pollutant	8. CAS No.	9. Actual Emissions		10. Potential To Emit	
		Standard Units	Tons Per Year	Standard Units	Tons Per Year



OAQ GENERAL SOURCE DATA APPLICATION
GSD-13: Affidavit of Applicability
 State Form 51603 (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

- NOTES:**
- The purpose of GSD-13 is to certify that the requirement to notify adjacent landowners and occupants is applicable to the source of air pollutant emissions.
 - 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.

PART A: Affidavit Of Applicability

Complete this form to certify that the requirement to notify adjacent landowners and occupants pursuant to Indiana Code (IC) 13-15-8 is applicable to the source of air pollutant emissions. This form must be notarized by a public notary.

Levon Lehman, being first duly sworn upon oath, deposes and says:

1. I live in Lagrange County, State of Indiana, and being of sound mind and over twenty-one (21) years of age, I am competent to give this affidavit.
2. I hold the position of Owner for Precision Wood Finishing (permit applicant's or facility's name).
3. By virtue of my position with Precision Wood Finishing (permit applicant's name), I am authorized to make the representation contained in this affidavit on behalf of the facility.
4. I understand that the notice requirements of Ind. Code §13-15-8 applies to Precision Wood Finishing (permit applicant's or facility's name) for purposes of the accompanying permit application.
5. As required by Indiana Code § 13-15-8, the permit applicant will send written notice to adjacent landowners not more than ten (10) days after submission of the accompanying application for Registration Operating Air Permit (briefly describe type of permit application) filed on behalf of Precision Wood Finishing (permit applicant's or facility's name).

6. Further Affiant Saith Not.

I affirm under the penalty for perjury that the representations contained in this affidavit are true, to the best of my information and belief.

Levon
Name (typed)

Lehman
Title

Levon Lehman
Signature

6-28-24
Date

STATE OF Indiana

COUNTY OF Elkhart

PART B: Notarization

This section must be completed by a Public Notary.

Before me a notary Public in and for said County and State, personally appeared _____, and being first duly sworn by me upon oath, says that the fact stated in the foregoing instrument are true. Signed and sealed this _____ of _____, 20____

Printed: _____

My Commission Expires: _____

Residence of _____

County _____



OAQ GENERAL SOURCE DATA APPLICATION
GSD-14: Owners And Occupants Notified
 State Form 51809 (R2 / 9-06)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT



IDEM - Office of Air Quality - Permits Branch
 100 N. Senate Avenue, 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/permits/air/index.html

- 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 online at www.in.gov/idem/permits/air/apps/instructions/gsd14instructions.html.
 - 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: Resident		2. Date Notified: 6/28/2024	
3. Address: 5435 W 450 N			
City: Shipshewana		State: IN	ZIP Code: 46565 -
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: Resident		Date Notified: 6/28/2024	
Address: 5534 W 450 N			
City: Shipshewana		State: IN	ZIP Code: 46565 -
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: Resident		Date Notified: 6/28/2024	
Address: 4360 N 500 W			
City: Shipshewana		State: IN	ZIP Code: 46565 -
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: Resident		Date Notified: 6/28/2024	
Address: 5230 W 450 N			
City: Shipshewana		State: IN	ZIP Code: 46565 -
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:	
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):			



OAQ GENERAL SOURCE DATA APPLICATION
GSD-15: Government Officials Notified
 State Form 51608 (R3 / 9-06)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT



IDEM - Office of Air Quality - Permits Branch
 100 N. Senate Avenue, 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/permits/air/index.html

- 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 online at www.in.gov/idem/permits/air/apps/instructions/gsd15instructions.html.
 - 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: Lagrange County Planning and Zoning		2. Date Notified: 6/28/2024	
3. Title: Planning and Zoning Commission			
4. Address: 114 West Michigan Street			
City: Lagrange		State: IN	ZIP Code: 46761 -
5. Electronic Mail: NA		6. Telephone Number: (260) 499 - 6346	
7. Method of Notification: <input type="checkbox"/> Telephone <input type="checkbox"/> Electronic Mail <input checked="" type="checkbox"/> Standard Mail <input type="checkbox"/> Other (specify):			
Name: Town of Shipshewana		Date Notified: 6/28/2024	
Title: Town Manager			
Address: 345 Morton Street			
City: Shipshewana		State: IN	ZIP Code: 46565 -
Electronic Mail:		Telephone Number: (260) 768 - 4743	
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):			



OAQ CONTROL EQUIPMENT APPLICATION
CE-01: Control Equipment Summary
 State Form 51904 (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

- NOTES:
- The purpose of CE-01 is to summarize all of the equipment used to control emissions. This 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 anyone to inspect and photocopy.

Summary of Control Equipment

This table summarizes all of the equipment used to control air pollutant emissions. The identification numbers listed on this form should correspond to the emissions unit identified on the Plant Layout diagram and Process Flow diagram.

1. Control Equipment ID	2. Control Equipment Description	3. Pollutant Controlled	4. Emission Unit ID	5. Stack / Vent ID	6. Applicable Rule
FF1	Spray Booth Fabric Filters	PM	SB1	SBS1	
FF2	Spray Booth Fabric Filters	PM	SB2	SBS2	



OAQ CONTROL EQUIPMENT APPLICATION
CE-10: Miscellaneous Control Equipment
 State Form 52436 (R/3-06)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT



IDEM - Office of Air Quality - Permits Branch
 100 N. Senate Avenue, Indianapolis, IN 46204

Telephone: (317) 233-0178 or
 Toll Free: 1-800-451-6027 x30178 (within Indiana)
 Facsimile Number: (317) 232-6749
www.in.gov/idem/permits/air/index.html

- NOTES:
- The purpose of CE-10 is to identify all the parameters that describe the control device.
 - Complete this form once for each control device not covered by CE-02 through CE-09.
 - Detailed instructions for this form are available online at www.in.gov/idem/permits/air/apps/instructions/ce10instructions.html.
 - 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment

Part A identifies the control device and describes its physical properties

1. **Control Equipment ID:** FF1 – FF2 – Dry Filters
 2. **Installation Date:** 6/1/2023
 3. **Description of Control Device:** Dry Filters

PART B: Operational Parameters

Part B provides the operational parameters of the control device and the pollutant laden gas stream. Appropriate units must be included if the standard units are not used

	A. Units	B. Inlet	C. Outlet	D. Differential
4. Gas Stream Flow Rate	ACFM	12000	12000	0
5. Gas Stream Temperature	°F	Ambient	ambient	0
6. Gas Stream Pressure	inches of water	0	0	to
7. Moisture Content	%	0	0	
8. Particle Size Range	micrometers	<100	<10	to
9. Other (specify):				

PART C: Pollutant Concentrations

Part C provides the pollutant concentrations of the pollutant laden gas stream.

	10. Units	11. Inlet	12. Outlet	13. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Carbon Monoxide (CO)					
<input type="checkbox"/> b. Lead (Pb)					
<input type="checkbox"/> c. Hazardous Air Pollutant (HAP) (specify):					
<input type="checkbox"/> d. Nitrogen Oxides (NO _x)					
<input type="checkbox"/> e. Mercury (Hg)					
<input checked="" type="checkbox"/> f. Particulate Matter (PM)	TPY	0.30	0.01	100	95
<input checked="" type="checkbox"/> g. Particulate Matter less than 10µm (PM ₁₀)	TPY	0.30	0.01	100	95
<input checked="" type="checkbox"/> h. Particulate Matter less than 2.5µm (PM _{2.5})	TPY	0.30	0.01	100	95
<input type="checkbox"/> i. Sulfur Dioxide (SO ₂)					
<input type="checkbox"/> j. Volatile Organic Compounds (VOC)					
<input type="checkbox"/> k. Other Pollutant (specify):					

PART D: Monitoring, Record Keeping, & Testing Procedures

Part D identifies any existing or proposed monitoring, record keeping, & testing procedures that may need to be included in the permit.

14. Item(s) Monitored:	Integrity/ Placement/ Loading	Stack Characteristics	Overspray Accumulation	
15. Monitoring Frequency:	Daily	Weekly	Monthly	
16. Item(s) Recorded:	Integrity/ Placement/ Loading	Abnormal Conditions	Overspray Accumulation	
17. Record Keeping Frequency:	Daily	Weekly	Monthly	
18. Pollutant(s) Tested:	None	None	None	
19. Test Method(s):	NA	NA	NA	
20. Testing Frequency:	NA	NA	NA	

PART E: Preventive Maintenance Plan

Part E verifies that a complete Preventive Maintenance Plan (PMP) has been prepared for the control device, if applicable. Use this table as a checklist to ensure that the PMP is complete.

21. Do you have a Preventive Maintenance Plan (PMP)?

No PMP is needed. Yes – the following items are identified on the PMP:

A. Identification of the individual(s) responsible for inspecting, maintaining and repairing emission control devices.

B. Description of the items or conditions that will be inspected.

C. Schedule for inspection of items or conditions described above.

D. Identification and quantification of the replacement parts that will be maintained in inventory for quick replacement.

PART F: Determination of Integral Control

Part F provides explanation to determine whether the control device should be considered integral to the process.

22. Has IDEM already made an integral control determination for this device?

If "Yes", provide the following:

No Yes

Permit Number: _____

Issuance Date: _____

Determination:

Integral Not Integral

23. Is this device integral to the process?

If "Yes", provide the reason(s) why the device is integral.

No Yes



OAQ PROCESS INFORMATION APPLICATION
PI-19: Surface Coating & Printing Operations
 State Form 52580 (R / 10-06)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT



IDEM – Office of Air Quality – Permits Branch
 100 N. Senate Avenue, Indianapolis, IN 46204

Telephone: (317) 233-0178 or
 Toll Free: 1-800-451-6027 x30178 (within Indiana)
 Facsimile Number: (317) 232-6749
www.in.gov/idem/permits/air/index.html

- NOTES:
- The purpose of this form is to obtain detailed information about the surface coating process. Complete one form for each coating operation (or group of identical coating operations).
 - Detailed instructions for this form are available online at www.in.gov/idem/permits/air/apps/instructions/pi19instructions.html.
 - 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 any one to inspect and photocopy.

PART A: Surface Coating Operations

Part A summarizes the surface coating process. If there are multiple coating operations that are identical in nature, capacity, and use, you may use one form to summarize the data for the identical coating operations units.

1. Unit ID:	SB1 and SB2	
2. Installation Date <i>(actual or anticipated):</i>	6/1/2023	
3. Number of Identical Units:	2	
4. Application Method:	<input type="checkbox"/> Dipping <input type="checkbox"/> Brushing <input type="checkbox"/> Roll-coating <input type="checkbox"/> Flow-coating <input checked="" type="checkbox"/> Spraying	
5. If spray application is used, further specify the coating application method below:	<input type="checkbox"/> Not Applicable <input type="checkbox"/> Air Atomization <input checked="" type="checkbox"/> Airless <input type="checkbox"/> Electrostatic Air Atomized <input type="checkbox"/> Electrostatic Airless <input type="checkbox"/> Electrostatic Disc <input type="checkbox"/> High Volume Low Pressure (HVLV) <input type="checkbox"/> Low Pressure Air Atomization <input checked="" type="checkbox"/> Other: <i>(specify)</i> wiping	
6. Number of Guns Used when coating:	4	<input type="checkbox"/> Not Applicable
7. Number of Guns Supported by the compressor:	6	<input type="checkbox"/> Not Applicable
8. Type of Product and Material Coated:	Wood Products	
9. Gallons of Coating Used per Unit Coated:	3.00	
10. Maximum Production Rate: <i>(specify units)</i>	0.30	

PART B: Summary of Printing Process

Part B summarizes the printing process. If there are multiple printing operations that are identical in nature, capacity, and use, you may use one form to summarize the data for the identical printing operations units.

11. Unit ID:	Not Applicable	
12. Installation Date <i>(actual or anticipated):</i>		
13. Number of Identical Units:		
14. Press Type:	<input type="checkbox"/> Flexographic <input type="checkbox"/> Heatset Lithographic <input type="checkbox"/> Non-Heatset Lithographic <input type="checkbox"/> Rotogravure <input type="checkbox"/> Other: <i>(specify)</i>	
15. Paper Feed Type:	<input type="checkbox"/> Sheet <input type="checkbox"/> Web	
16. Maximum Line Speed:	feet per minute (<i>fpm</i>)	
17. Maximum Printing Width:	feet (<i>ft</i>)	
18. Ink Type: <i>(include MSDS)</i>		

PART C: Coating Data

Part C provides data about the coatings used in this process. **Complete this table once for each of the worst case coatings** and provide an MSDS for all of the coatings used in the process.

19. Worst Case Coating <i>Indicate which of the worst case emissions scenario(s) that this coating represents</i>	<input checked="" type="checkbox"/> Highest VOC Content	<input checked="" type="checkbox"/> Highest Single HAP Content
	<input checked="" type="checkbox"/> Highest PM	<input checked="" type="checkbox"/> Highest Combined HAP Content
20. Coating Manufacturer:		
21. Material Identification:	Attached	
22. Batch Identification:	MSDS	
23. Is the Coating Polymeric?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24. Is this a Multipart Coating?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
A. What are the parts?	Attached	
B. What are the ratios of the parts?		
C. What is the flash-off?	<input type="checkbox"/> 100% (default) <input type="checkbox"/> Other (specify):	
25. Is the Coating Thinned or Diluted prior to application?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
A. What is the thinner?		
B. What is the dilution ratio?		
C. What is the flash-off?	<input type="checkbox"/> 100% (default) <input type="checkbox"/> Other (specify):	
For the following items, provide as much of the data as is known about the coating. The instructions for this form include the formulas needed for these calculations.		
	A. As Supplied	B. As Applied
26. Material Density (lbs/gal) (D_c)		
27. Weight % Total Volatiles (water and organics) (W_v)		
28. Weight % Water (W_w)		
29. Weight % Solids (W_n)		
30. Weight % VOC (W_o)		
31. Volume % Total Volatiles (water and organics) (V_v)		
32. Volume % Water (V_w)		
33. Volume % Solids (V_n)		
34. Volume % VOC (V_o)		
35. VOC Content, less water (lbs/gal) (VOC)		
36. Weighted Average Density of the Dilution Solvent (D_D)	Not applicable	
37. Dilution Solvent Ratio (R_D)	Not applicable	

This space was intentionally left blank.

PART D: Emission Factors and Control Equipment

Part D identifies all emission factors used to calculate air emissions, as well as any control equipment or control technique for this process.

38. Air Pollutant:	39. Emission Factor		40. Source of Emission Factor <i>(if not using AP-42, include calculations)</i>		
	value	units			
Particulate Matter (PM)	0.01	TPY	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 10µm (PM ₁₀)	0.01	TPY	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> N/A
Particulate Matter less than 2.5µm (PM _{2.5})	0.01	TPY	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> N/A
Hazardous Air Pollutants <i>(specify):</i> Combo	0.91	TPY	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> N/A
Volatile Organic Compounds (VOC)	10.16	TPY	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i> HAP: Single	0.56	TPY	<input type="checkbox"/> AP-42	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> N/A
Other <i>(specify):</i>			<input type="checkbox"/> AP-42	<input type="checkbox"/> Other	<input type="checkbox"/> N/A

41. Add-On Control Technology: *Identify all control technologies used for this unit, and attach completed CE-01 (unless "none").*

- None
- Baghouse / Fabric Filter – Attach CE-02.
- Oxidizer / Incinerator – Attach CE-06.
- Condenser – Attach CE-08.
- Dry Filters – Attach CE-10.
- Other *(specify):*
- Absorption / Wet Collector / Scrubber – Attach CE-05.
- Adsorber – Attach CE-07.
- NO_x Reduction – Attach CE-09.
- Waterwash – Attach CE-10.
- Attach CE-10.

42. Control Techniques: *Identify all control techniques used for this process.*

Dry Fabric filters, FF1 & FF2

43. Process Limitations / Additional Information: *Identify any acceptable process limitations. Attach additional information if necessary.*

None

This space was intentionally left blank.

PART E: Federal Rule Applicability

Part E identifies any federal rules that apply to the process

44. Is a New Source Performance Standard (NSPS) applicable to this source? <i>If yes, attach a completed FED-01 for each rule that applies.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	45. Unit ID
<input type="checkbox"/> 40 CFR Part 60, Subpart Kb	Volatile Organic Liquid Storage	
<input type="checkbox"/> 40 CFR Part 60, Subpart EE	Surface Coating of Metal Furniture	
<input type="checkbox"/> 40 CFR Part 60, Subpart MM	Auto and Light Duty Truck Surface Coating Operations	
<input type="checkbox"/> 40 CFR Part 60, Subpart QQ	Graphic Arts Industry: Publication Rotogravure Printing	
<input type="checkbox"/> 40 CFR Part 60, Subpart RR	Pressure Sensitive Tape and Label Surface Coating Operations	
<input type="checkbox"/> 40 CFR Part 60, Subpart SS	Industrial Surface Coating: Large Appliances	
<input type="checkbox"/> 40 CFR Part 60, Subpart TT	Metal Coil Surface Coating	
<input type="checkbox"/> 40 CFR Part 60, Subpart WW	Beverage Can Surface Coating Industry	
<input type="checkbox"/> 40 CFR Part 60, Subpart FFF	Flexible Vinyl and Urethane Coating and Printing	
<input type="checkbox"/> 40 CFR Part 60, Subpart SSS	Magnetic Tape Coating Facilities	
<input type="checkbox"/> 40 CFR Part 60, Subpart TTT	Industrial Surface Coating: Surface Coating of Plastic Parts for Business Machines	
<input type="checkbox"/> 40 CFR Part 60, Subpart VVV	Polymeric Coating of Supporting Substrates Facilities	

46. Is a National Emission Standard for Hazardous Air Pollutants (NESHAP) applicable to this source? <i>If yes, attach a completed FED-01 for each rule that applies.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	47. Unit ID
<input type="checkbox"/> 40 CFR Part 63, Subpart GG	Aerospace	
<input type="checkbox"/> 40 CFR Part 63, Subpart IIII	Auto and Light Duty Truck Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart VVVV	Boat Manufacturing	
<input type="checkbox"/> 40 CFR Part 63, Subpart OOOO	Fabric Printing Coating and Dyeing	
<input type="checkbox"/> 40 CFR Part 63, Subpart NNNN	Large Appliances Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart EE	Magnetic Tape Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart KKKK	Metal Can Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart SSSS	Metal Coil Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart RRRR	Metal Furniture Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart MMMM	Miscellaneous Metal Parts and Products Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart JJJJ	Paper and Other Web Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart PPPP	Plastic Parts Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart KK	Printing and Publishing Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart WWWW	Reinforced Plastic Composites Production	
<input type="checkbox"/> 40 CFR Part 63, Subpart II	Ship Building and Ship Repair Surface Coating	
<input type="checkbox"/> 40 CFR Part 63, Subpart QQQQ	Wood Building Products	
<input type="checkbox"/> 40 CFR Part 63, Subpart JJ	Wood Furniture Surface Coating	

48. Non-Applicability Determination: *Provide an explanation if the process unit appears subject to a rule (based on the rule title or the source category), but the rule will not apply.*

Source is not major for HAP.

CERTIFIED PRODUCT DATA SHEET

FC-47872 BEL AIR PC

PRODUCT NAME: FC-47872 BEL AIR PC
PRODUCT CODE: D22N06984

HMIS CODES: H F R P
2 3 0 X

SECTION ONE -- MANUFACTURE IDENTIFICATION

MANUFACTURER'S NAME: RPM Industrial Coatings Group DATE PRINTED: 8/2/2023
ADDRESS: 2220 US Hwy 70 SE Suite 100, Hickory, NC 28602
CONTACT INFORMATION: ehs@rpmicg.com

SECTION TWO -- REPORTABLE CHEMICALS

REPORTABLE VOLATILE HAP	CAS NUMBERS	VOLATILE HAP WT. %	LEVELS VOL %
CUMENE	98-82-8	0.01	0.01
ETHYLBENZENE	100-41-4	1.13	1.07
M-XYLENE	108-38-3	3.16	2.98
O-XYLENE	95-47-6	1.44	1.34
P-XYLENE	106-42-3	1.25	1.19
TOLUENE	108-88-3	0.03	0.03

SECTION THREE -- PHYSICAL/CHEMICAL CHARACTERISTICS

SPECIFIC GRAVITY (H ₂ O = 1) :	0.83	LBS / GAL :	6.96
VOLATILE WEIGHT :	87.48	GRAMS / LITER :	833.60
VOC WEIGHT % :	87.44	VOLATILE VOLUME :	90.38
COATING V.O.C. (Lbs/Gal) :	6.08	MATERIAL V.O.C. (Lbs/Gal) :	6.08
COATING V.O.C. (Grams/Liter) :	729.10	MATERIAL V.O.C. (Grams/Liter) :	728.85
LBS. VOC / LB. SOLID :	6.98	LBS. VHAPS / LB. SOLID :	0.56
%SOLID BY WEIGHT :	12.52	WEIGHT % VHAPS :	7.02
%SOLID BY VOLUME :	9.62	LBS. VHAP / GAL SOLIDS :	5.07
%VOC-EXEMPT CHEMICALS :	0.00	GRAMS VHAP / LITER SOLIDS :	87.41
%WATER :	0.04	VHAPS (Lbs/Gal) :	0.49

For more information contact the RPM Industrial Coatings Group Environmental Health & Safety Department at ehs@rpmicg.com

Disclaimer: While the data and information contained herein are presented in good faith and believed to be accurate, it is provided for your guidance only. The data and information provided are calculated using the most recent formula version for each product. Certified Product Data Sheets (CPDS) follow the Federal guidelines for classification of materials. Some state and local communities have guidelines more stringent than Federal regulations. Therefore, it remains the responsibility of the user to determine compliance. We recommend that you perform an assessment to determine the suitability of the product and data for your particular requirements.

The information contained in this document is provided to assist the user of the product in complying with appropriate federal, state and local laws and regulations. While RPM Industrial Coatings Group believes that data contained herein is accurate and derived from qualified sources, the data is not to be taken as warranty or representation for which RPM Industrial Coatings Group assumes legal responsibility. Any use of this data and information must be determined by the user to be appropriate and in accordance with the applicable laws and regulations.

The data contained on this report is based on the product delivered to the ship to location. Each customer must take responsibility for verifying use at any location other than the ship to location.

CERTIFIED PRODUCT DATA SHEET

HC WASH THINNER

PRODUCT NAME: HC WASH THINNER
PRODUCT CODE: T84C00017

HMIS CODES: H F R P
2 3 0 X

SECTION ONE -- MANUFACTURE IDENTIFICATION

MANUFACTURER'S NAME: RPM Industrial Coatings Group . DATE PRINTED: 10/5/2023
ADDRESS: 2220 US Hwy 70 SE Suite 100, Hickory, NC 28602
CONTACT INFORMATION: ehs@rpmicg.com

SECTION TWO -- REPORTABLE CHEMICALS

REPORTABLE VOLATILE HAP	CAS NUMBERS	VOLATILE HAP WT %	LEVELS VOL %
ETHYLBENZENE	100-41-4	0.01	0.01
METHANOL	67-56-1	3.41	3.59
TOLUENE	108-88-3	5.44	5.22

SECTION THREE -- PHYSICAL/CHEMICAL CHARACTERISTICS

SPECIFIC GRAVITY (H2O = 1) :	0.83	LBS / GAL :	6.94
VOLATILE WEIGHT :	100.00	GRAMS / LITER :	832.00
VOC WEIGHT % :	69.09	VOLATILE VOLUME :	100.00
COATING V.O.C. (Lbs/Gal) :	7.07	MATERIAL V.O.C. (Lbs/Gal) :	4.80
COATING V.O.C. (Grams/Liter) :	847.29	MATERIAL V.O.C. (Grams/Liter) :	574.77
LBS. VOC / LB. SOLID :	0.00	LBS. VHAPS / LB. SOLID :	0.00
%SOLID BY WEIGHT :	0.00	WEIGHT % VHAPS :	8.86
%SOLID BY VOLUME :	0.00	LBS. VHAP / GAL SOLIDS :	0.00
%VOC-EXEMPT CHEMICALS :	30.86	GRAMS VHAP / LITER SOLIDS :	0.00
%WATER :	0.06	VHAPS (Lbs/Gal) :	0.62

For more information contact the RPM Industrial Coatings Group Environmental Health & Safety Department at ehs@rpmicg.com

Disclaimer: While the data and information contained herein are presented in good faith and believed to be accurate, it is provided for your guidance only. The data and information provided are calculated using the most recent formula version for each product. Certified Product Data Sheets (CPDS) follow the Federal guidelines for classification of materials. Some state and local communities have guidelines more stringent than Federal regulations. Therefore, it remains the responsibility of the user to determine compliance. We recommend that you perform an assessment to determine the suitability of the product and data for your particular requirements.

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The data contained on this report is based on the product delivered to the ship to location. Each customer must take responsibility for verifying use at any location other than the ship to location.

**Appendix A: Emissions Calculations
Emissions Summary**

Company Name: Precision Wood Finishing
Source Address: 5350 W 450 N, Shipshewana, IN 46565
Submitted by: D&B Environmental Consulting

Emission Unit	PM	PM10	PM2.5	SO2	NOx	VOC	CO	Total HAPs	Worst Single HAP	
Surface Coating (SB1 and SB2)	0.30	0.30	0.30	-	-	10.16	-	0.91	0.56	xylene
Hand Sanding (HS1 & HS2)	0.08	0.08	0.08	-	-	-	-	-	-	-
Diesel Generator (DGen1)	1.21	1.21	1.21	1.13	17.11	1.39	3.69	0.01	0.00	Formaldehyde
Propane Combustion (WH1 & AMU1)	0.03	0.09	0.09	0.01	1.67	0.13	0.96	-	-	-
Unpaved Roads	0.26	0.07	0.01	-	-	-	-	-	-	-
Total	1.88	1.75	1.69	1.14	18.78	11.68	4.65	0.92	0.56	Xylene

**Appendix A: Emissions Calculations
VOC and Particulate
Surface Coating Booth**

Company Name: Precision Wood Finishing
Source Address: 5350 W 450 N, Shipshewana, IN 46565
Submitted by: D&B Environmental Consulting

SB1 & SB2

Material	Density (lbs/gal)	Weight % Volatile (water, VOC, and exempt compounds*)	Weight % water and exempt compounds*	Weight % VOC	Volume % water and exempt compounds*	Volume % Solids	Maximum Material Usage (gal/shift)	Maximum Material Usage (gal/day)	Pounds VOC per gallon of coating less water and exempt compounds	Pounds VOC per gallon of coating	PTE of VOC (lbs/day)	PTE of VOC (tons/year)	Uncontrolled PTE of PM/PM10/PM2.5 (tons/year)	Transfer Efficiency
worse case coating	6.96	87.44%	0.04%	87.40%	0.00%	9.62%	2.500	7.500	6.08	6.08	45.62	8.33	0.30	75%
Wash Thinner	6.94	100.00%	30.92%	69.08%	0.06%	0.00%	0.700	2.100	4.80	4.79	10.07	1.84	0.00	100%
Total:												10.16	0.30	

* Stain or Sealer or Topcoat will be used. The worse case coating is used in the PTE Calculations

Control Efficiency =	95.0%
Total Controlled Potential to Emit (PTE) (tons/year) =	0.01

Methodology

Weight % VOC = [Weight % Volatile (water, VOC, and exempt Compounds*)] - [Weight % water and exempt Compounds]
shift time = 8 hours

Maximum Material Usage (gal/day) = [Maximum Material Usage (gal/shift)] * [3 shifts/day]

Pounds of VOC per gallon coating less water and exempt Compounds = [Density (lbs/gal)] * [Weight % VOC] / [1 - (Volume % water and exempt Compounds)]

Pounds of VOC per gallon coating = [Density (lbs/gal)] * [Weight % VOC]

PTE of VOC (lbs/day) = Maximum Material Usage (gal/day) x 3 (# of shifts/day) x Weight % VOC

PTE of VOC (tons/year) = PTE of VOC (lbs/day) x 365 (days/yr) x 1/2000 (ton/lb)

Uncontrolled PTE of PM/PM10/PM2.5 (tons/year) = [Density (lbs/gal)] * [Maximum Material Usage (gal/day)] * [1 - Weight % Volatile]] * [1 - Transfer Efficiency]] * [365 hour/year] * [1 ton/2000 lbs]

**Appendix A: Emissions Calculations
Hazardous Air Pollutants (HAPs)
Surface Coating Booth**

Company Name: Precision Wood Finishing
Source Address: 5350 W 450 N, Shipshewana, IN 46565
Submitted by: D&B Environmental Consulting

SB1 & SB2

Material	Density (lbs/gal)	Maximum Material Usage (gal/shift)	Weight % Xylene	Weight % Toluene	Weight % Formaldehyde	Weight % Ethylbenzene	Weight % Methanol	PTE of Xylene (tons/year)	PTE of Toluene (tons/year)	PTE of Formaldehyde (tons/year)	PTE of Ethylbenzene (tons/year)	PTE of Methanol (tons/year)	PTE of Total HAPs (tons/year)
worse case coating	6.96	2500	5.85%	0.03%	0.00%	1.13%	0.00%	0.56	0.00	0.00	0.11	0.00	0.67
Wash Thinner	6.94	0700	0.00%	5.44%	0.00%	0.01%	3.59%	0.00	0.14	0.00	0.00	0.10	0.24
							Totals	0.56	0.15	0.00	0.11	0.10	0.91

Methodology

*Shift = 8 hours

PTE of HAP (tons/year) = [(Density (lbs/gal) * Maximum Material Usage (gal/shift) * 3 shifts/day) * (Weight % HAP) * (365 days/year)] [1 ton/2000 lbs]

PTE of Total HAPs (tons/year) = SUM (PTE of Each Single HAP (tons/year))

Hazardous air pollutant (HAP) is defined by Section 112(b) of the Clean Air Act.

**Appendix A: Emission Calculations
 Reciprocating Internal Combustion Engines - Diesel Fuel
 Output Rating (<=600 HP)
 Maximum Input Rate (<=4.2 MMBtu/hr)**

**Company Name: Precision Wood Finishing
 Source Address: 5350 W 450 N, Shipshewana, IN 46565
 Submitted by: D&B Environmental Consulting**

Emissions calculated based on output rating (hp)

Output Horsepower Rating (hp)	126.0	Gen Set
Maximum Hours Operated per Year	8760	
Potential Throughput (hp-hr/yr)	1,103,760	

	Pollutant						
	PM*	PM10*	direct PM2.5*	SO2	NOx	VOC	CO
Emission Factor in lb/hp-hr	0.0022	0.0022	0.0022	0.0021	0.0310	0.0025	0.0067
Potential Emission in tons/yr	1.21	1.21	1.21	1.13	17.11	1.39	3.69

*PM and PM2.5 emission factors are assumed to be equivalent to PM10 emission factors. No information was given regarding which method was used to determine the factor or the fraction of PM10 which is condensable.

Hazardous Air Pollutants (HAPs)

	Pollutant							
	Benzene	Toluene	Xylene	1,3-Butadiene	Formaldehyde	Acetaldehyde	Acrolein	Total PAH HAPs***
Emission Factor in lb/hp-hr****	6.53E-06	2.86E-06	2.00E-06	2.74E-07	8.26E-06	5.37E-06	6.48E-07	1.18E-06
Potential Emission in tons/yr	3.60E-03	1.58E-03	1.10E-03	1.51E-04	4.56E-03	2.96E-03	3.57E-04	6.49E-04

***PAH = Polyaromatic Hydrocarbon (PAHs are considered HAPs, since they are considered Polycyclic Organic Matter)

****Emission factors in lb/hp-hr were calculated using emission factors in lb/MMBtu and a brake specific fuel consumption of 7,000 Btu / hp-hr (AP-42 Table 3.3-1).

Potential Emission of Total HAPs (tons/yr)	1.50E-02
---	-----------------

Methodology

Emission Factors are from AP 42 (Supplement B 10/96) Tables 3.4-1, 3.4-2, 3.4-3, and 3.4-4.

Potential Throughput (hp-hr/yr) = [Output Horsepower Rating (hp)] * [Maximum Hours Operated per Year]

Potential Emission (tons/yr) = [Potential Throughput (hp-hr/yr)] * [Emission Factor (lb/hp-hr)] / [2,000 lb/ton]

**Appendix A: Emissions Calculations
LPG-Propane**

Company Name: Precision Wood Finishing
Source Address: 5350 W 450 N, Shipshewana, IN 46565
Submitted by: D&B Environmental Consulting

Unit ID	Number of Units	Maximum Capacity (Each) MMBtu/hr	Maximum Capacity (Total) MMBtu/hr
Water Heater (WH1)	1	0.183	0.183
Air Makeup Unit (AMU1)	1	2.5	2.5
Total:			2.683

MMBtu/hr	kgals/year	SO2 Emission factor = 0.10 x S
2.683	256.9	S = Sulfur Content = 0.007 grains/100ft ³

Emission Factor in lb/kgal	Pollutant						
	PM*	PM10*	direct PM2.5**	SO2	NOx	VOC	CO
	0.2	0.7	0.7	0.1 (0.10S)	13.0	1.0	7.5
Potential Emission in tons/yr	0.03	0.09	0.09	0.01	1.67	0.13 **TOC value	0.96

*PM emission factor is filterable PM only. PM emissions are stated to be all less than 10 microns in aerodynamic equivalent diameter, footnote in Table 1.5-1, therefore PM10 is based on the filterable and condensable PM emission factors.

** No direct PM2.5 emission factor was given. Direct PM2.5 is a subset of PM10. If one assumes all PM10 to be all direct PM2.5, then a worst case assumption of direct PM2.5 can be made.

**The VOC value given is TOC. The methane emission factor is 0.2 lb/kgal.

Methodology

1 gallon of LPG has a heating value of 94,000 Btu

1 gallon of propane has a heating value of 91,500 Btu (use this to convert emission factors to an energy basis for propane)

(Source - AP-42 (Supplement B 10/96) page 1.5-1)

Potential Throughput (kgals/year) = Heat Input Capacity (MMBtu/hr) x 8,760 hrs/yr x 1kgal per 1000 gallon x 1 gal per 0.0915 MMBtu

Emission Factors are from AP42 (7/08), Table 1.5-1 (SCC #1-02-010-02)

Propane Emission Factors shown. Please see AP-42 for butane.

Emission (tons/yr) = Throughput (kgals/yr) x Emission Factor (lb/kgal) / 2,000 lb/ton

**Appendix A: Emission Calculations
Particulate Emissions - Hand Sanders**

**Company Name: Precision Wood Finishing
Source Address: 5350 W 450 N, Shipshewana, IN 46565
Submitted by: D&B Environmental Consulting**

Process	Units	ID	Material Input (lb/hour)	Depth Removed (in)	Sander Width (in)	Process Rate (in/hr)	Material Loss (in ³ /hr)	Material Density (lb/in ³)	Material Loss Emissions (lb/hr)	Material Loss Emissions (ton/year)
Woodworking	Two (2) Hand Sanders	HS1, HS2	20	0.002	4	100	0.80	0.024	0.02	0.08
Total Emissions									0.02	0.08

Methodology

Wood Material Density (lb/in³) = 42 lb/ft³ / 1728 in³/ft³

Material Loss (in³/hr) = Depth Removed (in) * Sander Width (in) * Process Rate (in/hr)

Material Loss Emissions (lb/hr) = Material Loss (in³/hr) * Material Density (lb/in³)

Emissions (ton/year) = Material Loss Emissions (lb/hr) * 8760 (hr/year) / 2000 (lb/ton)

Appendix A: Emission Calculations
Fugitive Dust Emissions - Unpaved Roads

Company Name: Precision Wood Finishing
 Source Address: 5350 W 450 N, Shipshewana, IN 46565
 Submitted by: D&B Environmental Consulting

Unpaved Roads at Industrial Site

The following calculations determine the amount of emissions created by unpaved roads, based on 8,760 hours of use and AP-42, Ch 13.2.2 (11/2006).

Vehicle Information (provided by source)

Type	Maximum number of vehicles	Number of one-way trips per day per vehicle	Maximum trips per day (trip/day)	Maximum Weight Loaded (tons/trip)	Total Weight driven per day (ton/day)	Maximum one-way distance (feet/trip)	Maximum one-way distance (mi/trip)	Maximum one-way miles (miles/day)	Maximum one-way miles (miles/yr)
Vehicle (entering plant) (one-way trip)	5.0	1.0	5.0	10.0	50.0	170	0.032	0.2	58.8
Vehicle (leaving plant) (one-way trip)	5.0	1.0	5.0	10.0	50.0	170	0.032	0.2	58.8
Totals			10.0		100.0			0.3	117.5

Average Vehicle Weight Per Trip = 10.0 tons/trip
 Average Miles Per Trip = 0.03 miles/trip

Unmitigated Emission Factor, $E_f = k[(s/12)^a][(W/3)^b]$ (Equation 1a from AP-42 13.2.2)

	PM	PM10	PM2.5	
where k =	4.9	1.5	0.15	lb/mi = particle size multiplier (AP-42 Table 13.2.2-2 for Industrial Roads)
s =	4.8	4.8	4.8	% = mean % silt content of unpaved roads (AP-42 Table 13.2.2-1 Sand/Gravel Processing Plant)
a =	0.7	0.9	0.9	= constant (AP-42 Table 13.2.2-2 for Industrial Roads)
W =	10.0	10.0	10.0	tons = average vehicle weight (provided by source)
b =	0.45	0.45	0.45	= constant (AP-42 Table 13.2.2-2 for Industrial Roads)

Taking natural mitigation due to precipitation into consideration, Mitigated Emission Factor, $E_{ext} = E * [(365 - P)/365]$ (Equation 2 from AP-42 13.2.2)

Mitigated Emission Factor, $E_{ext} = E * [(365 - P)/365]$
 where P = 125 days of rain greater than or equal to 0.01 inches (see Fig. 13.2.2-1)

	PM	PM10	PM2.5	
Unmitigated Emission Factor, $E_f =$	4.44	1.13	0.11	lb/mile
Mitigated Emission Factor, $E_{ext} =$	2.92	0.74	0.07	lb/mile

Process	Unmitigated PTE of PM (tons/yr)	Unmitigated PTE of PM10 (tons/yr)	Unmitigated PTE of PM2.5 (tons/yr)	Mitigated PTE of PM (tons/yr)	Mitigated PTE of PM10 (tons/yr)	Mitigated PTE of PM2.5 (tons/yr)
Vehicle (entering plant) (one-way trip)	0.13	0.03	0.003	0.09	0.02	0.002
Vehicle (leaving plant) (one-way trip)	0.13	0.03	0.003	0.09	0.02	0.002
Totals	0.26	0.07	0.007	0.17	0.04	0.004

Methodology

Total Weight driven per day (ton/day) = [Maximum Weight Loaded (tons/trip)] * [Maximum trips per day (trip/day)]
 Maximum one-way distance (mi/trip) = [Maximum one-way distance (feet/trip)] / [5280 ft/mile]
 Maximum one-way miles (miles/day) = [Maximum trips per year (trip/day)] * [Maximum one-way distance (mi/trip)]
 Average Vehicle Weight Per Trip (ton/trip) = SUM[Total Weight driven per day (ton/day)] / SUM[Maximum trips per day (trip/day)]
 Average Miles Per Trip (miles/trip) = SUM[Maximum one-way miles (miles/day)] / SUM[Maximum trips per year (trip/day)]
 Unmitigated PTE (tons/yr) = (Maximum one-way miles (miles/yr)) * (Unmitigated Emission Factor (lb/mile)) * (ton/2000 lbs)
 Mitigated PTE (tons/yr) = (Maximum one-way miles (miles/yr)) * (Mitigated Emission Factor (lb/mile)) * (ton/2000 lbs)
 Controlled PTE (tons/yr) = (Mitigated PTE (tons/yr)) * (1 - Dust Control Efficiency)

Abbreviations

PM = Particulate Matter
 PM10 = Particulate Matter (<10 um)
 PM2.5 = Particulate Matter (<2.5 um)