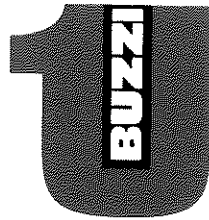


AC #13457 133-48021-00002



Received
State of Indiana

JUL 01 2024

Dept of Environmental Mgmt
Office of Air Quality

HC
LG

**Significant Permit Modification
For
Part 70 Permit T133-33667-00002**

Submitted By:

Lone Star Industries, Inc.
dba Buzzi Unicem USA
3301 S. County Road 150 West
Greencastle, IN 46135

Submitted To:

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

June 2024

Prepared By:





June 27, 2024

Indiana Department of Environmental Management
Office of Air Quality – Air Permitting Group
100 N. Senate Avenue – IGCN 1003
Indianapolis, IN 46204

Re: Lone Star Industries, Inc., dba Buzzi Unicem USA
Significant Permit Modification
Part 70 Permit: T133-41298-00002
Greencastle, IN – Putnam County

Dear Air Permitting Group,

Lone Star Industries, Inc. is submitting the following application to add a new Clinker Storage Silo system and a Clinker Reclaim system in our permit. These new units will tie directly in to our existing Clinker Storage Silo system.

There is no increase in throughput and the existing throughput limits should serve to address emissions from the new units as well.

If you have any questions or need any additional information, please feel free to contact me at 765-655-0428 / miriam.press@buzziunicemusa.com

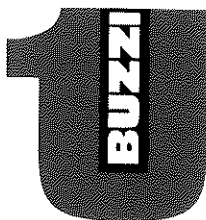
Sincerely,
Lone Star Industries, Inc.

A handwritten signature in cursive script that reads 'Miriam Press'.

Miriam Press
Environmental Engineer

cc: Tim Menke; Plant Manager
Paul Schell; Senior Corporate Environmental Manager

Buzzi Unicem USA
Greencastle Plant
3301 S. County Road 150
Greencastle, IN 46135



**Significant Permit Modification
For
Part 70 Permit T133-33667-00002**

Submitted By:

Lone Star Industries, Inc.
dba Buzzi Unicem USA
3301 S. County Road 150 West
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100 North Senate Avenue, MC 61-53 Room 1003
Indianapolis, IN 46204-2251

June 2024

Prepared By:



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3.0	IDEM FORMS	4

ATTACHMENT A - SUPPORTING EMISSION CALCULATION TABLES

1.0 Introduction

This Part 70 Operating Permit Significant Modification Application (Application) is being submitted to the Indiana Department of Environmental Management (IDEM), Office of Air Quality - Air Permits Administration to request a permit modification of the Part 70 Operating Permit T133-33667-00002 issued to Lone Star Industries, Inc. dba Buzzi Unicem USA (Lone Star), for their Portland cement manufacturing plant located in Greencastle, Indiana.

Lone Star is requesting a permit modification to construct a new clinker storage silo with associated conveyors and a hopper. The proposed changes will include the addition of eight new sources, each with a corresponding baghouse to control particulate emissions. Pursuant to 326 IAC 2-7-12(b)(1), these proposed changes require a permit modification.

2.0 Project Description

Lone Star is proposing to construct a new clinker storage silo directly east of the existing clinker storage silos to allow for additional operational flexibility in the quantity of clinker that can be stored at any one time as well as reduce the amount of clinker stored outside and subsequently re-introduced to the silos through the existing outside clinker reclaim system. No increase in the production throughput of clinker is proposed for this project, it is simply to allow for greater storage capabilities and to protect the clinker quality.

The new equipment and modifications associated with the project include the new clinker storage silo itself and new conveyor belts to feed clinker to, and transfer clinker from, the silo to the Finish Mills. All equipment associated with the project will be equipped with baghouses for the control of particulate emissions.

The following is an overview of the proposed changes:

- Silo 8 (nominal capacity 50,000 tons) will be installed to store clinker in addition to the existing Silos 1-7 (nominal capacity 5,000 tons each).
- Existing Belt 510V which currently transfers clinker to the existing Silos 1-7 will be extended to transfer clinker to a new bucket conveyor, Belt GC509723. The transfer point from Belt 510V to Belt GC509723 will be equipped with Baghouse GC509715.
- Belt GC509273 will be installed to transfer the clinker from Belt 510V into Silo 8. The transfer point from the bucket conveyor into the silo will be equipped with Baghouse GC509801.
- Two parallel pan conveyors, Belt GC509773 (south) and Belt 509785 (north), will be installed in a tunnel constructed below Silo 8 to transfer clinker out of Silo 8. There will be two pick-up points for each conveyor, one on the west side of the silo and one on the east side of the silo. Each pickup point will have a separate baghouse.
 - For Belt GC509773, the west side pickup point will be equipped with Baghouse GC509767 and the east side pickup point will be equipped with Baghouse GC509769.
 - For Belt GC509785, the west side pickup point will be equipped with Baghouse GC509787 and the east side pickup point will be equipped with Baghouse GC509789.
- Belt GC509749 will be installed to transfer clinker from both Belts GC509773 and GC509785 to existing Belt 511V. The transfer point to Belt GC509749 will be equipped with Baghouse GC509729.
- Existing Belt 511V which transfers clinker from the existing silos to the finish mills will be extended to pick up clinker from Belt GC509749. The pickup point onto Belt 511V will be equipped with Baghouse GC509737.

The project also includes small clinker reclaim system which will be added to allow clinker to be returned directly to the finish mills for processing when necessary. This

system includes a hopper and a feeder belt and will discharge to Belt 509749. The hopper system will be equipped with Baghouse GC509805 to keep all equipment under negative pressure to control fugitive dust emissions.

Table 1 below provides a list of the new emission units proposed to be added associated with the project and their associated baghouses.

Table 1 - Emission Units to be Added

Stack ID	Emission Unit ID	Baghouse	Description	Flowrate (ACFM)
FF3-40	3-40	GC509715	BELT 510V TRANSFER TO BELT GC509723	3,500
FF3-41	3-41	GC509801	BELT GC509273 TRANSFER INTO SILO 8	15,000
FF3-42	3-42	GC509767	WESTERN SILO 8 TRANSFER TO BELT GC509773	850
FF3-43	3-43	GC509769	EASTERN SILO 8 TRANSFER TO BELT GC509773	850
FF3-44	3-44	GC509787	WESTERN SILO 8 TRANSFER TO BELT GC509785	850
FF3-45	3-45	GC509789	EASTERN SILO 8 TRANSFER TO BELT GC509785	850
FF3-46	3-46	GC509729	BELTS GC509773 AND GC509785 TRANSFER TO BELT GC509749	5,700
FF3-47	3-47	GC509737	BELT GC509749 TO BELT 511V	2,300
FF3-48	3-48	GC509805	RECLAIM HOPPER GC509755 TO BELT GC509743 TO BELT GC509749	8,000

The new clinker silo will have a nominal storage capacity of 50,000 tons. The annual throughput of the new clinker silo is expected to be 1,500,000 tons/year. The new silo is intended to reduce or eliminate the necessity for storing clinker outside, thereby reducing fugitive emissions from transfer in / transfer out activities and also improving the quality of stored clinker. There is no proposed increase in total clinker production or throughput associated with the project. The existing PSD limits for clinker production and clinker input to the finish mills should provide adequate assurance for the units proposed in this project as well.

Lone Star is proposing to begin construction by November 2024 and complete construction by March 2026. Lone Star may begin operation of the transfer in and storage only operations of the new Silo 8 during the December 2025 - January 2026 timeframe if needed rather than store clinker outside.

3.0 IDEM Forms

Per the IDEM Air Permits webpage, this section of the Application includes the following IDEM forms for the proposed modification.

- IDEM Form 50639 (COVER) - Application Cover Sheet
- IDEM Form 51607 (Checklist) - Forms Checklist
- IDEM Form 50640 (GSD-01) - Basic Source Level Information
- IDEM Form 51605 (GSD-02) - Plant Layout Diagram
- IDEM Form 51599 (GSD-03) - Process Flow Diagram
- IDEM Form 51606 (GSD-04) - Stack/Vent Information
- IDEM Form 51610 (GSD-05) - Emission Unit Information
- IDEM Form 51612 (GSD-06) - Particulate Emissions Summary
- IDEM Form 52543 (PI-03) - Bulk Handling Storage
- IDEM Form 51904 (CE-01) - Control Equipment Summary
- IDEM Form 51953 (CE-02) - Particulate Control - Baghouse/Fabric Filter
- IDEM Form 53512 (FED-1) - Summary of Federal Requirements - NSPS & NESHAP
- IDEM Form 51905 (FED-02) - MACT Pre-Construction Review
- IDEM Form 51861 (CD-01) - Emission Unit Compliance Status
- IDEM Form 51864 (CD-04) - Compliance Schedule and Certification



AIR PERMIT APPLICATION COVER SHEET
 State Form 50639 (R4 / 1-10)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

41 # 13457

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:	133 - 48021 - 00002
DATE APPLICATION WAS RECEIVED:	JUL 01 2024
Received State of Indiana Dept of Environmental Mgmt Office of Air Quality	

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:	Lone Star Industries, Inc. dba Buzzi Unicem USA	3. Plant ID:	133 - 00002
4. Billing Address:	3301 South County Road 150 West		
City:	Greencastle	State:	IN
		ZIP Code:	46135 -
5. Permit Level:	<input type="checkbox"/> Exemption <input type="checkbox"/> Registration <input type="checkbox"/> SSOA <input type="checkbox"/> MSOP <input type="checkbox"/> FESOP <input checked="" type="checkbox"/> TVOP <input type="checkbox"/> PBR		
6. Application Summary:	Check all that apply. Multiple permit numbers may be assigned as needed based on the choices selected below.		
	<input type="checkbox"/> Initial Permit <input type="checkbox"/> Renewal of Operating Permit <input type="checkbox"/> Asphalt General Permit		
	<input type="checkbox"/> Review Request <input type="checkbox"/> Revocation of Operating Permit <input type="checkbox"/> Alternate Emission Factor Request		
	<input type="checkbox"/> Interim Approval <input type="checkbox"/> Relocation of Portable Source <input type="checkbox"/> Acid Deposition (Phase II)		
	<input type="checkbox"/> Site Closure <input type="checkbox"/> Emission Reduction Credit Registry		
	<input type="checkbox"/> Transition (between permit levels) From: To:		
	<input type="checkbox"/> Administrative Amendment: <input type="checkbox"/> Company Name Change <input type="checkbox"/> Change of Responsible Official		
	<input type="checkbox"/> Correction to Non-Technical Information <input type="checkbox"/> Notice Only Change		
	<input type="checkbox"/> Other (specify):		
<input checked="" type="checkbox"/> Modification:	<input checked="" 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 checked="" type="checkbox"/> Significant Permit Modification		
	<input type="checkbox"/> Other (specify):		
7. Is this an application for an initial construction and/or operating permit for a "Greenfield" Source?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. Is this an application for construction of a new emissions unit at an Existing Source?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

PART B: Pre-Application Meeting

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

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

No Yes: Date:

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

No Yes: Proposed Date for Meeting:

PART C: Confidential Business Information

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

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

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

No Yes

PART D: Certification Of Truth, Accuracy, and Completeness

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

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

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

Tim Menke _____

Name (typed)

Plant Manager _____

Title

Signature

6/25/2024 _____

Date



OAQ AIR PERMIT APPLICATION – FORMS CHECKLIST

State Form 51607 (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

- NOTES:**
- The purpose of this checklist is to help the applicant and IDEM, OAQ ensure that the air permit application packet is administratively complete. This checklist is a required form.
 - Check the appropriate box indicating whether each application form is applicable for the current permit application. The source must submit only those forms pertinent to the current permit application.
 - Place this checklist between the cover sheet and all subsequent forms and attachments that encompass your air permit application packet.

Part A: General Source Data

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	COVER	Application Cover Sheet	50639	Include for every application, modification, and renewal, including source specific operating agreements (SSOA).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CHECKLIST	Forms Checklist	51607	Include for every application, modification, and renewal, including SSOA.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-01	Basic Source Level Information	50640	Include for every application, modification, and renewal, including SSOA.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-02	Plant Layout Diagram	51605	Include for every new source application, and modification.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-03	Process Flow Diagram	51599	Include one for every process covered by the application.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-04	Stack / Vent Information	51606	Include for every new source application, and modification.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-05	Emissions Unit Information	51610	Include for every process covered by the application.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	GSD-06	Particulate Emissions Summary	51612	Include if the process has particulate emissions (PM).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-07	Criteria Pollutant Emissions Summary	51602	Include if the process has criteria pollutant emissions.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-08	HAP Emissions Summary	51604	Include if the process has hazardous air pollutant emissions (HAP).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-09	Summary of Additional Information	51611	Include if the additional information is included.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-10	Insignificant Activities	51596	Include if there are unpermitted insignificant activities.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-11	Alternative Operating Scenario	51601	Include if an AOS is requested.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-12	Affidavit of Nonapplicability	51600	Include if the standard notification requirements do not apply.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-13	Affidavit of Applicability	51603	Include if the standard notification requirements apply.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-14	Owners and Occupants Notified	51609	Include if the standard notification requirements apply.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	GSD-15	Government Officials Notified	51608	Include if the standard notification requirements apply.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	RENEWAL	Renewal Checklist	51755	Include with every operating permit renewal packet.

Part B: Process Information

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	AEF-01	Alternate Emission Factor Request	51860	Submit if you are requesting to use an emission factor other than AP-42.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-01	Miscellaneous Processes	52534	Include one form for each process for which there is not a specific PI form.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02A	Combustion Unit Summary	52535	Include one form to summarize all combustion units (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02B	<i>Combustion:</i> Boilers, Process Heaters, & Furnaces	52536	Include one form for each boiler, process heater, or furnace (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02C	<i>Combustion:</i> Turbines & Internal Combustion Engines	52537	Include one form for each turbine or internal combustion engine (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02D	<i>Combustion:</i> Incinerators & Combustors	52538	Include one form for each incinerator or combustor (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02E	<i>Combustion:</i> Kilns	52539	Include one form for each kiln (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02F	<i>Combustion:</i> Fuel Use	52540	Include one form for each combustion unit (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02G	<i>Combustion:</i> Emission Factors	52541	Include one form for each combustion unit (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-02H	<i>Combustion:</i> Federal Rule Applicability	52542	Include one form for each combustion unit (<i>unless SSOA</i>).
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	PI-03	Storage and Handling of Bulk Material	52543	Include if the process involves the storage and handling of bulk materials.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-04	Asphalt Plants	52544	Include for each asphalt plant process (<i>unless general permit</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-05	Brick / Clay Products	52545	Include for each brick and/or clay products process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-06	Electroplating Operations	52546	Include for each electroplating process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-07	Welding Operations	52547	Include for each welding process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-08	Concrete Batchers	52548	Include for each concrete batcher (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-09	Degreasing	52549	Include for each degreasing process (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-10	Dry Cleaners	52550	Include for each dry cleaning process
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-11	Foundry Operations	52551	Include for each foundry process
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-12	Grain Elevators	52552	Include for each grain elevator (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-13	Lime Manufacturing	52553	Include for each lime manufacturing process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-14	Liquid Organic Compound Storage	52554 (doc)	Include if the process involves the storage of liquid organic compounds.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-14ALT	Alternate version of Liquid Organic Compound Storage	52555 (xls)	Include if the process involves the storage of liquid organic compounds and there are several storage vessels.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-15	Portland Cement Manufacturing	52556	Include for each Portland cement manufacturing process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-16	Reinforced Plastics & Composites	52557	Include for each reinforced plastics and composites process.

Continued on Next Page

Part B: Process Information

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-17	Blasting Operations	52558	Include for each blasting process (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-18	Mineral Processing	52559	Include if the process involves mineral processing (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-19	Surface Coating & Printing Operations	52560	Include for each surface coating or printing process (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-20	Woodworking / Plastic Machining	52561	Include for each woodworking or plastic machining process (<i>unless SSOA</i>).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-21	Site Remediation	52570	Include for each soil remediation process.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PI-22	Ethanol Plants (<i>Under Development</i>)	None	Include for each ethanol plant.

Part C: Control Equipment

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CE-01	Control Equipment Summary	51904	Include if add-on control equipment will be used for the process.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CE-02	Particulates – Baghouse / Fabric Filter	51953	Include for each baghouse or fabric filter.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-03	Particulates – Cyclone	52620	Include for each cyclone.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-04	Particulates – Electrostatic Precipitator	52621	Include for each electrostatic precipitator.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-05	Particulates – Wet Collector / Scrubber / Absorber	52622	Include for each wet collector, scrubber, or absorber.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-06	Organics – Flare / Oxidizer / Incinerator	52623	Include for each flare, oxidizer, or incinerator.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-07	Organics – Adsorbers	52624	Include for each adsorber.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-08	Organics – Condenser	52625	Include for each condenser.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-09	Reduction Technology	52626	Include for each control device using reduction technology (e.g., SCR, SNCR).
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CE-10	Miscellaneous Control Equipment	52436	Include one form for equipment for which there is not a specific CE form.

Part D: Compliance Determination for Part 70 Sources

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CD-01	Emissions Unit Compliance Status	51861	Include for every Title V application, including modifications.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CD-02	Compliance Plan by Applicable Requirement	51862	Include for every Title V application, including modifications.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	CD-03	Compliance Plan by Emissions Unit	51863	Include for every Title V application, including modifications.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CD-04	Compliance Schedule and Certification	51864	Include for every Title V application, including modifications and renewal.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	FED-03	Compliance Assurance Monitoring	53377	Include for every Title V application, including modifications.

Part E: Best Available Control Technology

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-01	Analysis of Best Available Control Technology	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-01a	Background Search: Existing BACT Determinations	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-01b	Cost/Economic Impact Analysis	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	BACT-02	Summary of Best Available Control Technology	None	Include for every BACT application.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PSD / EO-01	PSD / Emission Offset Checklist	None	Include for every PSD application and every NSR application that requires emission offsets.

Part F: Emission Credit Registry

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-01	Generation of Emission Credits	51783	Include if the modification results in emission reductions.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-02	Transfer of Emission Credits	51784	Submit whenever registered emission credits are transferred.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-03	Use of Emission Credits	51785	Include if the modification requires the use of emission credits for offsets.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	EC-04	Emission Credit Request	51906	Submit if you are looking for emission credits for offsets.

Part G: Plantwide Applicability Limits

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-01	Actuals Plantwide Applicability Limit	52451	Include if the modification results in emission reductions.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-02	Revised Plantwide Applicability Limit	52452	Submit whenever registered emission credits are transferred.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-03	Plantwide Applicability Limit Renewal	52453	Include if the modification requires the use of emission credits for offsets.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	PAL-04	Request for Termination of Plantwide Applicability Limit	52454	Submit if you are looking for emission credits for offsets.

Part H: Air Toxics

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	FED-01	Summary of Federal Requirements – NSPS & NESHAP	53512	Include for each 40 CFR Part 60 NSPS, 40 CFR Part 61 NESHAP, and 40 CFR Part 63 NESHAP applicable to the process.
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	FED-02	MACT Pre-Construction Review	51905	Include if constructing or modifying a process subject to a Part 63 NESHAP.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	No Form ID	MACT Initial Notification	None	This form is available on the U.S. EPA website. Completed notifications should be submitted to the IDEM Compliance Branch.

Part I: Special Permits

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	INTERIM	Interim Approval	None	Submit if you are applying for interim operating approval.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	ASPHALT	Asphalt General Permit	None	Submit if you are applying for or modifying an asphalt plant general permit.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	NOXBTP	NO _x Budget Permit	None	Submit if you are a power plant or if you have opted in to the NO _x budget trading program.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	ACIDRAIN	Phase 2 Acid Rain Permit	None	Submit if you are applying for, modifying, or renewing a Phase 2 Acid Rain permit.

Part J: Source Specific Operating Agreements (SSOA)

Applicable?	Form ID	Title of Form	State Form Number	When should this form be included in my application packet?
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-01	Summary of Application and Existing Agreements	53438	Submit if you are applying for or modifying a Source Specific Operating Agreement.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-02	Industrial / Commercial Surface Coating Operations -OR- Graphic Arts Operations (326 IAC 2-9-2.5)	53439	Submit if you are applying for or modifying a SSOA for industrial or commercial surface coating operations not subject to 326 IAC 8-2; or graphic arts operations not subject to 326 IAC 8-5-5.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-03	Surface Coating or Graphic Arts Operations (326 IAC 2-9-3)	53440	Submit if you are applying for or modifying a SSOA for surface coating or graphic arts operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-04	Woodworking Operations (326 IAC 2-9-4)	53441	Submit if you are applying for or modifying a SSOA for woodworking operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-05	Abrasive Cleaning Operations (326 IAC 2-9-5)	53442	Submit if you are applying for or modifying a SSOA for abrasive cleaning operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-06	Grain Elevators (326 IAC 2-9-6)	53443	Submit if you are applying for or modifying a SSOA for grain elevators.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-07	Sand And Gravel Plants (326 IAC 2-9-7)	53444	Submit if you are applying for or modifying a SSOA for sand and gravel plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-08	Crushed Stone Processing Plants (326 IAC 2-9-8)	53445	Submit if you are applying for or modifying a SSOA for crushed stone processing plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-09	Ready-Mix Concrete Batch Plants (326 IAC 2-9-9)	53446	Submit if you are applying for or modifying a SSOA for ready-mix concrete batch plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-10	Coal Mines And Coal Preparation Plants (326 IAC 2-9-10)	53447	Submit if you are applying for or modifying a SSOA for coal mines and coal preparation plants.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-11	Automobile Refinishing Operations (326 IAC 2-9-11)	53448	Submit if you are applying for or modifying a SSOA for automobile refinishing operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-12	Degreasing Operations (326 IAC 2-9-12)	53449	Submit if you are applying for or modifying a SSOA for degreasing operations.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-13	External Combustion Sources (326 IAC 2-9-13)	53450	Submit if you are applying for or modifying a SSOA for external combustion sources.
<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	OA-14	Internal Combustion Sources (326 IAC 2-9-14)	53451	Submit if you are applying for or modifying a SSOA for internal combustion sources.



OAQ GENERAL SOURCE DATA APPLICATION
GSD-01: Basic Source Level Information
 State Form 5064 (R5 / 1-10)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

JUL 01 2024

Dept of Environmental Mgmt

Office of Air Quality

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-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: Lone Star Industries, Inc. dba Buzzi Unicem USA	2. Plant ID: 133 – 00002
3. Location Address: 3301 South County Road 150 West	
City: Greencastle	State: IN ZIP Code: 46135 –
4. County Name: Putnam	5. Township Name: Greencastle
6. Geographic Coordinates:	
Latitude: 39.615907	Longitude: -86.869086
7. Universal Transverse Mercator Coordinates (if known):	
Zone: 16	Horizontal: 511 km Vertical: 4385 km
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 checked="" type="checkbox"/> Illinois (IL) <input 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 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 checked="" type="checkbox"/> No <input 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 checked="" type="checkbox"/> No <input 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: Miriam Press

19. Title (optional): Environmental Engineer

20. Mailing Address: 3301 South County Road 150 West

City: Greencastle

State: IN

ZIP Code: 46135 -

21. Electronic Mail Address (optional): miriam.press@buzziunicemusa.com

22. Telephone Number: (765) 655 - 0428

23. Facsimile Number (optional): () -

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: Tim Menke

25. Title: Plant Manager

26. Mailing Address: 3301 South County Road 150 West

City: Greencastle

State: IN

ZIP Code: 46135 -

27. Telephone Number: (765) 653 - 9766

28. Facsimile Number (optional): () -

29. Request to Change the Authorized Individual or Responsible Official: Is the source officially requesting to change the person designated as the Authorized Individual or Responsible Official in the official documents issued by IDEM, OAQ? *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: Lone Star Industries, Inc. dba Buzzi Unicem USA

31. Name of Owner Contact Person: Fabio Rizzi, Sr. VP, Operations

32. Mailing Address: 100 Brodhead Road

City: Bethlehem

State: PA

ZIP Code: 18017 -

33. Telephone Number: (610) 882 - 5000

34. Facsimile Number (optional): () -

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: Spectrum Environmental Sciences, Inc.		
41. Type of Agent: <input checked="" type="checkbox"/> Environmental Consultant <input type="checkbox"/> Attorney <input type="checkbox"/> Other (specify):		
42. Name of Agent Contact Person: Miranda Brown		
43. Mailing Address: 110 Water Street PO Box 46		
City: Thurmont	State: MD	ZIP Code: 21788 –
44. Electronic Mail Address (optional): mbrown@spectrumenv.com		
45. Telephone Number: (240) 446 – 3492	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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

PART H: Local Library Information		
48. Date application packet was filed with the local library: Date of Permit Submittal		
49. Name of Library: Putnam County Library		
50. Name of Librarian (optional):		
51. Mailing Address: 103 E. Poplar Street		
City: Greencastle	State: IN	ZIP Code: 46135 –
52. Internet Address (optional):		
53. Electronic Mail Address (optional):		
54. Telephone Number: (765) 653 – 2755	55. Facsimile Number (optional): () –	

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? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – <i>Change Company Name to:</i>	

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
Portland Cement Manufacturing	Portland Cement	3241	32731

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
	Administrative amendment approved 09/08/2022	

PART N: Unpermitted Emissions Units (if applicable)				
Complete this section only if the source has emission units that are not listed in any permit issued by IDEM, OAQ.				
71. Emissions Unit ID	72. Type of Emissions Unit	73. Actual Dates		
		Began Construction	Completed Construction	Began Operation

PART O: New or Modified Emissions Units (if applicable)						
Complete this section only if the source is proposing to add new emission units or modify existing emission units.						
74. Emissions Unit ID	75. NEW	76. MOD	77. Type of Emissions Unit	78. Estimated Dates		
				Begin Construction	Complete Construction	Begin Operation
3-40, 3-41, 3-42, 3-43, 3-44, 3-45, 3-46, 3-47, 3-48	X		Clinker Silo System	11/1/2024	3/1/2026	12/1/2025



OAQ GENERAL SOURCE DATA APPLICATION

GSD-02: Plant Layout Diagram

State Form 51605 (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 GSD-02 is to provide a diagram of the entire plant site. This form and a Plant Layout diagram are required for all air permit applications. If you do not provide the necessary information, applicable to your source, the application process may be stopped.
- IDEM, OAQ has provided detailed instructions for this form and an example of a basic plant layout diagram 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: Basic Plant Layout

Part A provides 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. <input checked="" type="checkbox"/> Building Location and Dimensions		
2. <input checked="" type="checkbox"/> Property Lines and Access-Limiting Features		
3. <input checked="" type="checkbox"/> Surrounding Building Location and Dimensions		
4. <input checked="" type="checkbox"/> Distances to Property Lines and Access-Limiting Features		
5. <input checked="" type="checkbox"/> UTM Location Coordinates	6. <input checked="" type="checkbox"/> Compass (pointing North)	7. <input checked="" type="checkbox"/> Scale

Part B: Stack Information

Part B provides 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. <input checked="" type="checkbox"/> Exhaust Stacks		
9. <input type="checkbox"/> Process Vents		
10. <input type="checkbox"/> Roof Monitors	<input checked="" type="checkbox"/> No Roof Monitors	
11. <input checked="" type="checkbox"/> Control Devices	<input type="checkbox"/> No Control Devices	
12. <input checked="" type="checkbox"/> Interior Vents	<input type="checkbox"/> No Interior Vents	<input type="checkbox"/> Doors and Windows (<i>for processes vented inside a building</i>)

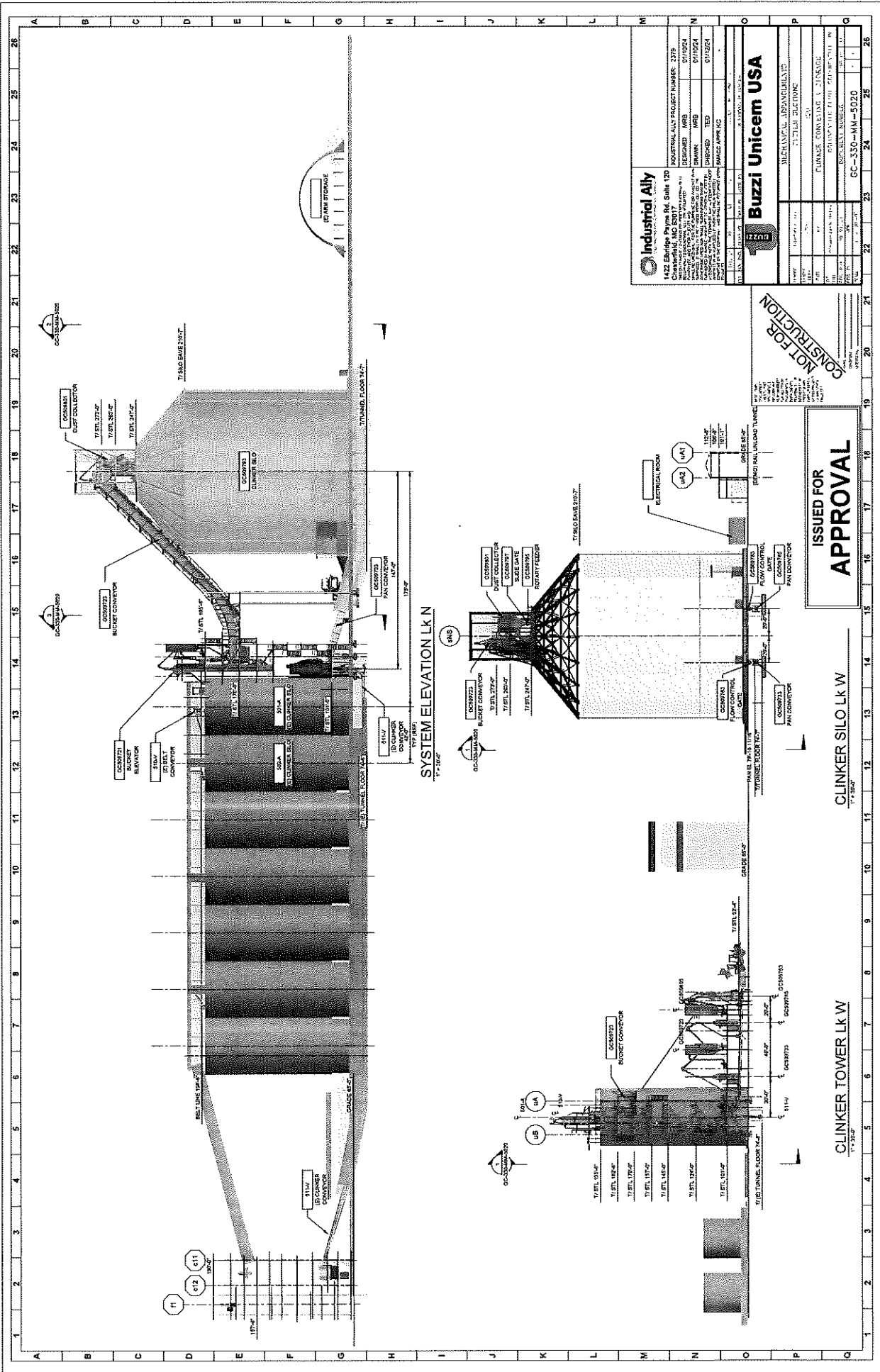
Part C: Roadway Information

Part C provides 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. <input type="checkbox"/> Adjacent Roadways	<input type="checkbox"/> Interior Roadways
14. <input type="checkbox"/> Roadway Surface Description (gravel, dirt, paved, etc.)	
15. <input type="checkbox"/> Number of Lanes	

Part F: Plant Layout Diagram

This space provides a place for a hand drawn plant layout diagram. It is **optional** to use this space to create your plant layout, but you must include the diagram with your application. If you choose to submit the plant layout in a different format, state "plant layout attached" in the space provided, and submit the information with your completed application. IDEM, OAQ has provided an example of a basic plant layout diagram on the Air Permit Applications Forms website.



Industrial Ally
 1422 Barlowe Pkwy Rd, Suite 170
 Chesapeake, MD 20762
 PHONE: 410-326-1100
 FAX: 410-326-1101
 WWW: www.industrialally.com

INDUSTRIAL ALLY PROJECT NUMBER: 2075
 DESIGNED: JMS
 DRAWN: JMS
 CHECKED: TED
 DATE: 01/22/24

Buzzi Unicem USA
 MECHANICAL APPENDIX 175
 CLINKER CONCRETE S. 3.10.10.175
 PROJECT TITLE: CLINKER CONCRETE S. 3.10.10.175
 DRAWING NUMBER: CC-530-MN-5020

ISSUED FOR APPROVAL

CLINKER SILO LK W

CLINKER TOWER LK W

NOT FOR CONSTRUCTION



OAQ GENERAL SOURCE DATA APPLICATION

GSD-03: Process Flow Diagram

State Form 51599 (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 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 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: 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: Clinker Silo System | | |
| 2. <input checked="" type="checkbox"/> Process Equipment | 3. <input type="checkbox"/> Raw Material Input | 4. <input checked="" type="checkbox"/> Process Throughput |
| 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.*)

See Section 2.0 of the Application for a detailed description of all new equipment being added. The attached process flow diagram identifies all the new equipment for the new clinker silo system.

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>24</u> Hours per Day <u>7</u> Days per Week <u>52</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.*)

NA

Part C: Emissions Point Information

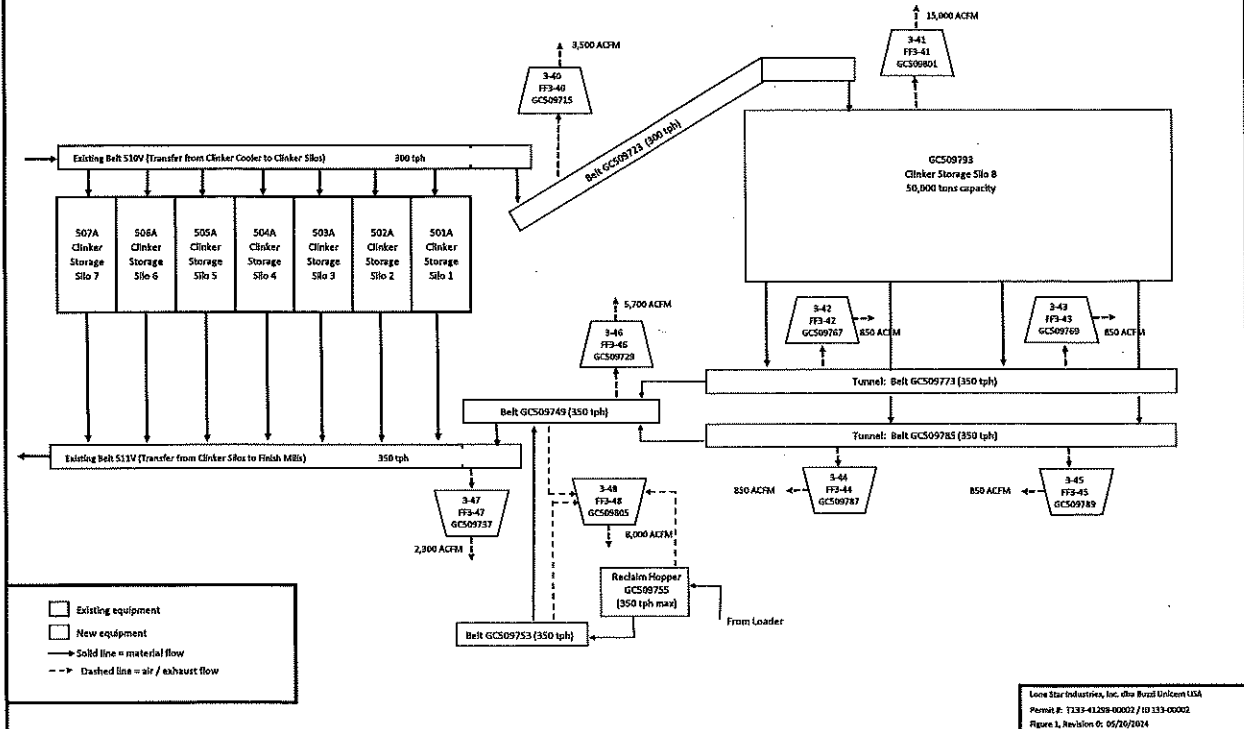
Part C provides information about each potential outlet of air pollutant emissions to the atmosphere. Please use this table as a checklist to indicate that you have included the following items on your process flow diagram (*All throughputs should be given in pounds per hour.*):

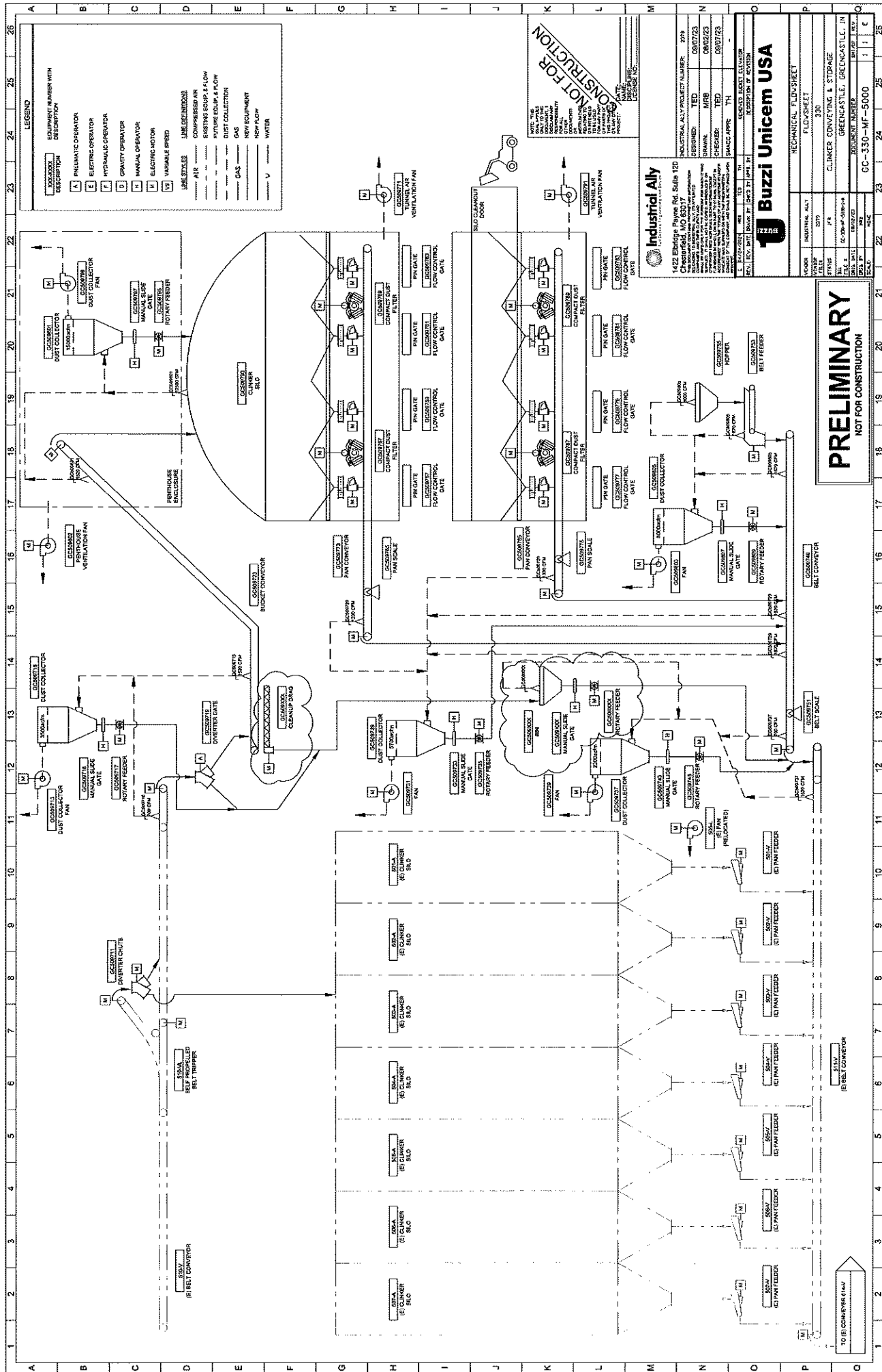
- | |
|--|
| 8. <input checked="" type="checkbox"/> Stack / Vent Information |
| 9. <input type="checkbox"/> Pollutants Emitted |
| 10. <input checked="" type="checkbox"/> Air Pollution Control |

Part D: Process Flow Diagram

This space provides a place for a hand drawn process flow diagram. It is **optional** to use this space to create your process flow diagram, but you must include the diagram with your application. If you choose to submit the process flow diagram in a different format, state "process flow diagram attached" in the space provided, and submit the information with your completed application. IDEM, OAQ has provided an example of a basic process flow diagram on the Air Permit Applications Forms website.

Figure 1 - New Clinker Storage Silo
Process Flow Diagram





LEGEND

EQUIPMENT NUMBER WITH DESCRIPTION	LINE DESCRIPTIONS
1 PNEUMATIC OPERATOR	AIR
2 ELECTRIC OPERATOR	COMPRESSED AIR
3 HYDRAULIC OPERATOR	EXISTING EQUIP. & FLOW
4 MANUAL OPERATOR	FUTURE EQUIP. & FLOW
5 GRAVITY OPERATOR	DUST COLLECTION
6 ELECTRIC MOTOR	GAS
7 VARIABLE SPEED	NEW EQUIPMENT
8	NEW FLOW
9	WATER

NOT FOR CONSTRUCTION

INDUSTRIAL ALLY
1422 Bridge Plave Rd, Suite 120
Chesterfield, MO 63017
PHONE: (636) 261-1100
FAX: (636) 261-1101
WWW.INDUSTRIALALLY.COM

DESIGNED: TED
DRAWN: MFB
CHECKED: TED
DATE: 08/27/23
PROJECT: SHALCO APPR. TH

INDUSTRIAL ALLY PROJECT NUMBER: 2319
INDUSTRIAL ALLY PROJECT NUMBER: 08/27/23
INDUSTRIAL ALLY PROJECT NUMBER: 08/27/23
INDUSTRIAL ALLY PROJECT NUMBER: 08/27/23

Buzzi Unicem USA

MECHANICAL FLOW SHEET
320

PRELIMINARY
NOT FOR CONSTRUCTION

INDUSTRIAL ALLY	320	MECHANICAL FLOW SHEET
FILE	320	
DATE	08/27/23	
SCALE	AS SHOWN	
PROJECT	GC-330-MF-5000	
CLIENT	CLINGER CONVEYING & STORAGE	
LOCATION	GREENCASTLE, GREENCASTLE, IN	
PROJECT NUMBER	GC-330-MF-5000	
REV		
BY		
CHK		
APP		



OAQ GENERAL SOURCE DATA APPLICATION

GSD-04: Stack / Vent Information

State Form 51606 (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 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 enough information to adequately describe each process vent and/or stack, the application process may be stopped. This form is required for all air permit applications.
- Detailed instructions for this form are available online 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.

Stack / Vent Information

This table provides 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)
FF3-40	V	R	1.3x1.3	137.30	3531.00	68.0	
FF3-41	V	R	1.3x3.6	191.20	15009.00	68.0	
FF3-42	H	C	0.66	-2.00	850.00	68.0	
FF3-43	H	C	0.66	-2.00	850.00	68.0	
FF3-44	H	C	0.66	-2.00	850.00	68.0	
FF3-45	H	C	0.66	-2.00	850.00	68.0	
FF3-46	V	R	1.3x1.6	25.00	5709.00	68.0	
FF3-47	V	R	1.3x1	22.60	2295.00	68.0	
FF3-48	V	R	1.3x2.6	26.60	8005.00	68.0	



OAQ GENERAL SOURCE DATA APPLICATION
GSD-05: Emissions Unit Information
 State Form 51610 (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 this form is to provide basic information about each emissions unit that has the potential to emit air pollutants. This form is required for all air permit applications.
- Detailed instructions for this form are available online 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.

Emissions Unit Information

This table provides 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 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 Number	3. Serial Number	4. Description	5. Manufacturer	6. Installation Date	7. Maximum Capacity	8. Stack / Vent ID
3-40	PNF 8x8-3-H-WI (Fabric Filter)	NA	BELT 510V TRANSFER TO BELT GC509723	Redecam	11/1/24	300.00 TPH	FF3-40
3-41	PNF 11x14-4.5-SW-H (Fabric Filter)	NA	BELT GC509273 TRANSFER INTO SILO 8	Redecam	11/1/24	300.00 TPH	FF3-41
3-42	NA (Fabric Filter)	NA	WESTERN SILO 8 TRANSFER TO BELT GC509773	DCL	11/1/24	350.00 TPH	FF3-42
3-43	NA (Fabric Filter)	NA	EASTERN SILO 8 TRANSFER TO BELT GC509773	DCL	11/1/24	350.00 TPH	FF3-43
3-44	NA (Fabric Filter)	NA	WESTERN SILO 8 TRANSFER TO BELT GC509785	DCL	11/1/24	350.00 TPH	FF3-44
3-45	NA (Fabric Filter)	NA	EASTERN SILO 8 TRANSFER TO BELT GC509785	DCL	11/1/24	350.00 TPH	FF3-45
3-46	PNF 9x9-3-H-WI (Fabric Filter)	NA	BELTS GC509773 AND GC509785 TRANSFER TO BELT GC509749	Redecam	11/1/24	350.00 TPH	FF3-46
3-47	PNF 6x6-3-H-WI (Fabric Filter)	NA	BELT GC509749 TO BELT 511V	Redecam	11/1/24	350.00 TPH	FF3-47
3-48	PNF 10x12-3-H-WI (Fabric Filter)	NA	RECLAIM HOPPER GC509755 TO BELT GC509743 TO BELT GC509749	Redecam	11/1/24	350.00 TPH	FF3-48



OAQ GENERAL SOURCE DATA APPLICATION
GSD-06: Particulate Emissions Summary
 State Form 51612 (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 this form is to provide basic information about each source of particulate emissions. This form is required for all air permit applications.
- 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: Particulate Matter Emissions

Part A provides 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 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
3-40	BELT 510V TRANSFER TO BELT GC509723	1.31	1.12	0.39				
3-41	BELT GC509273 TRANSFER INTO SILO 8	5.63	4.79	1.69				
3-42	WESTERN SILO 8 TRANSFER TO BELT GC509773	0.03	0.03	0.01				
3-43	EASTERN SILO 8 TRANSFER TO BELT GC509773	0.03	0.03	0.00				
3-44	WESTERN SILO 8 TRANSFER TO BELT GC509785	0.03	0.03	0.01				
3-45	EASTERN SILO 8 TRANSFER TO BELT GC509785	0.03	0.03	0.01				
3-46	BELTS GC509773 AND GC509785 TRANSFER TO BELT GC509749	2.14	1.82	0.64				
3-47	BELT GC509749 TO BELT 511V	0.86	0.73	0.26				
3-48	RECLAIM HOPPER GC509755 TO BELT GC509743 TO BELT GC509749	3.00	2.55	0.90				

Part B: Control of Particulate Emissions

Part C gathers information about how each source of particulate emissions is controlled. If you do not provide 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
3-40	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509715, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>
3-41	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509801, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>
3-42	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509767, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>
3-43	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509769, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>
3-44	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509787, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>
3-45	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509789, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>
3-46	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509729, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>
3-47, 3-48	<input type="checkbox"/> No Control <input type="checkbox"/> Dust Suppression <input checked="" type="checkbox"/> Other: <u>Baghouse</u>	Fabric Filter GC509737, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024 Fabric Filter GC509805, subject to 40 CFR 63 Subpart LLL and operated per the Operations & Maintenance Plan last submitted to IDEM in May 2024	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date Submitted: <u>June 2024</u>



OAQ PROCESS INFORMATION APPLICATION

PI-03: Storage & Handling of Bulk Material

State Form 52543 (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 this form is to obtain detailed information about the storage and handling of bulk materials. Complete one form for each process (or group of identical processes). Use additional forms if necessary. 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.

PART A: Storage & Handling Information

Part A identifies all process units associated with storage and handling process for bulk materials. If there are multiple process units that are identical in nature, capacity, and use, you may use one form to summarize the data.

1. Equipment / Component Type	2. Unit ID	3. Number of Identical Units	4. Installation Date <i>(see instructions)</i>	5. Material Handled/ Stored	6. Maximum Materials Throughput Rate <i>(tons/year)</i>
Silo	3-40 through 3-48		11/1/2024	Clinker	1500000.00

7. 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.*
 Cyclone – *Attach CE-03.*
 Electrostatic Precipitator – *Attach CE-04.*
 Absorption / Wet Collector / Scrubber – *Attach CE-05.*
 Adsorber – *Attach CE-07.*
 Other *(specify):* _____ – *Attach CE-10.*

8. Control Techniques: *Identify any other air emission control options used for the process.*

The silo and associated conveyors and hoppers will be enclosed to minimize dust emissions. All equipment will be controlled by fabric filters.

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

PART B: Process Material Information

Part B summarizes the process material information. Provide the information in the items below for each material stored and/or handled in this process.

10. Material Handled/Stored <i>(from table above)</i>	11. Method of Handling	12. Type of Storage	13. Storage Capacity <i>(tons)</i>	14. Pile Acreage	15. Silt Content <i>(% by weight)</i>	16. Moisture Content <i>(% by weight)</i>
Clinker	Silo	Silo	50000.00			

PART C: Emission Factors

Part C identifies all emission factors used to calculate air emissions from the process units listed on this form.

17. Process Equipment & ID <i>(complete for all units listed in Part A of this form)</i>	18. Air Pollutant	19. Emission Factor		20. Source of Emission Factor <i>(if not using AP-42, include calculations)</i>	
		value	units		
3-40 through 3-48	PM	0.01	gr/acf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other
3-40 through 3-48	PM-10	0.0085	gr/acf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other
3-40 through 3-48	PM-2.5	0.003	gr/acf	<input checked="" type="checkbox"/> AP-42	<input type="checkbox"/> Other
				<input type="checkbox"/> AP-42	<input type="checkbox"/> Other

PART D: Federal Rule Applicability

Part D identifies any federal rules that apply to the process.

21. Is a New Source Performance Standard (NSPS) applicable to this source? Yes No

If yes, attach a completed FED-01 for each rule that applies.

- 40 CFR Part 60, Subpart CC Glass Manufacturing Plants
- 40 CFR Part 60, Subpart DD Grain Elevators
- 40 CFR Part 60, Subpart HH Lime Manufacturing Plants
- 40 CFR Part 60, Subpart LL Metallic Mineral Processing Plants
- 40 CFR Part 60, Subpart UU Asphalt Processing and Asphalt Roofing Manufacture
- 40 CFR Part 60, Subpart OOO Non-Metallic Mineral Processing Plants
- 40 CFR Part 60, Subpart UUU Calciners and Dryers in Mineral Industries

22. Is a National Emission Standard for Hazardous Air Pollutants (NESHAP) applicable to this source? Yes No

If yes, attach a completed FED-01 for each rule that applies.

- 40 CFR Part 61, Subpart _____ (Specify):
- 40 CFR Part 63, Subpart LLL (Specify):

23. 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.

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OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (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 CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment	
Part A identifies the particulate control device and describes its physical properties.	
1. Control Equipment ID:	GC509767
2. Installation Date:	11/1/2024
3. Bags or Cartridges?	<input type="checkbox"/> Bags <input checked="" type="checkbox"/> Cartridges
4. Filter Material:	Polyester/PTFE
5. Number of Bags/Cartridges per Compartment:	4
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	3.7 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.				
	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		850	
16. Gas Stream Temperature	°F		68	
17. Gas Stream Pressure	inches of water			0.00 to 10.00
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. Has IDEM already made an integral control determination for this device? No Yes
 If "Yes", provide the following:

Permit Number: Issuance Date: Determination: Integral Not Integral

36. Is this device integral to the process? No Yes
 If "Yes", provide the reason(s) why the device is integral.

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (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 CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment	
Part A identifies the particulate control device and describes its physical properties.	
1. Control Equipment ID:	GC509769
2. Installation Date:	11/1/2024
3. Bags or Cartridges?	<input type="checkbox"/> Bags <input checked="" type="checkbox"/> Cartridges
4. Filter Material:	Polyester/PTFE
5. Number of Bags/Cartridges per Compartment:	4
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	3.7 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.				
	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		850	
16. Gas Stream Temperature	°F		68	
17. Gas Stream Pressure	inches of water			0.00 to 10.00
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. Has IDEM already made an integral control determination for this device? No Yes
 If "Yes", provide the following:

Permit Number:	Issuance Date:	Determination: <input type="checkbox"/> Integral <input type="checkbox"/> Not Integral
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36. Is this device integral to the process? No Yes
 If "Yes", provide the reason(s) why the device is integral.

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (R2 / 1-10)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM – Office of Air Quality – Permits Branch
 100 N. Senate Avenue, MC 61-53 Room 1003
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 Facsimile Number: (317) 232-6749
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NOTES:

- The purpose of CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment	
Part A identifies the particulate control device and describes its physical properties.	
1. Control Equipment ID:	GC509787
2. Installation Date:	11/1/24
3. Bags or Cartridges?	<input type="checkbox"/> Bags <input checked="" type="checkbox"/> Cartridges
4. Filter Material:	Polyester/PTFE
5. Number of Bags/Cartridges per Compartment:	4
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	3.7 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.				
	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		850.00	
16. Gas Stream Temperature	°F		68	
17. Gas Stream Pressure	inches of water			0.00 to 10.00
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. Has IDEM already made an integral control determination for this device? No Yes
 If "Yes", provide the following:

Permit Number: Issuance Date: Determination: Integral Not Integral

36. Is this device integral to the process? No Yes
 If "Yes", provide the reason(s) why the device is integral.

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (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 CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment

Part A identifies the particulate control device and describes its physical properties.

1. Control Equipment ID:	GC509789
2. Installation Date:	11/1/24
3. Bags or Cartridges?	<input type="checkbox"/> Bags <input checked="" type="checkbox"/> Cartridges
4. Filter Material:	Polyester/PTFE
5. Number of Bags/Cartridges per Compartment:	4
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	3.7 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.

	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		850	
16. Gas Stream Temperature	°F		68	
17. Gas Stream Pressure	inches of water			0.00 to 10.00
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. Has IDEM already made an integral control determination for this device? No Yes
 If "Yes", provide the following:

Permit Number: Issuance Date: Determination: Integral Not Integral

36. Is this device integral to the process? No Yes
 If "Yes", provide the reason(s) why the device is integral.

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (R2 / 1-10)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM – Office of Air Quality – Permits Branch
 100 N. Senate Avenue, MC 61-53 Room 1003
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 Toll Free: 1-800-451-6027 x30178 (within Indiana)
 Facsimile Number: (317) 232-6749
www.IN.gov/idem

NOTES:

- The purpose of CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment

Part A identifies the particulate control device and describes its physical properties.

1. Control Equipment ID:	GC509715
2. Installation Date:	11/1/2024
3. Bags or Cartridges?	<input checked="" type="checkbox"/> Bags <input type="checkbox"/> Cartridges
4. Filter Material:	Polyester
5. Number of Bags/Cartridges per Compartment:	64
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	3.6 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.

	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		3500.00	
16. Gas Stream Temperature	°F		68.00	
17. Gas Stream Pressure	inches of water	-11.20		to
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. Has IDEM already made an integral control determination for this device? No Yes
If "Yes", provide the following:

Permit Number: Issuance Date: Determination: Integral Not Integral

36. Is this device integral to the process? No Yes
If "Yes", provide the reason(s) why the device is integral.

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (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 CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment

Part A identifies the particulate control device and describes its physical properties.

1. Control Equipment ID:	GC509729
2. Installation Date:	11/1/2024
3. Bags or Cartridges?	<input checked="" type="checkbox"/> Bags <input type="checkbox"/> Cartridges
4. Filter Material:	Polyester
5. Number of Bags/Cartridges per Compartment:	81
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	4.6 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.

	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		5700.00	
16. Gas Stream Temperature	°F		68.00	
17. Gas Stream Pressure	inches of water	-12.00		to
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. Has IDEM already made an integral control determination for this device? No Yes

If "Yes", provide the following:

Permit Number:	Issuance Date:	Determination: <input type="checkbox"/> Integral <input type="checkbox"/> Not Integral
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36. Is this device integral to the process? No Yes

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

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (R2 / 1-10)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

IDEM – Office of Air Quality – Permits Branch
 100 N. Senate Avenue, MC 61-53 Room 1003
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 Toll Free: 1-800-451-6027 x30178 (within Indiana)
 Facsimile Number: (317) 232-6749
www.IN.gov/idem

NOTES:

- The purpose of CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment

Part A identifies the particulate control device and describes its physical properties.

1. Control Equipment ID:	GC509737
2. Installation Date:	11/1/2024
3. Bags or Cartridges?	<input checked="" type="checkbox"/> Bags <input type="checkbox"/> Cartridges
4. Filter Material:	Polyester
5. Number of Bags/Cartridges per Compartment:	36
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	4.1 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.

	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		2300.00	
16. Gas Stream Temperature	°F		68.00	
17. Gas Stream Pressure	inches of water	-12.00		to
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

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

No Yes

If "Yes", provide the following:

Permit Number: Issuance Date: Determination: Integral Not Integral

36. Is this device integral to the process?

No Yes

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

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (R2 / 1-10)
 INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

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NOTES:

- The purpose of CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- Detailed instructions for this form are available on the Air Permit Application Forms website.
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PART A: Identification and Description of Control Equipment	
Part A identifies the particulate control device and describes its physical properties.	
1. Control Equipment ID:	GC509801
2. Installation Date:	11/1/2024
3. Bags or Cartridges?	<input checked="" type="checkbox"/> Bags <input type="checkbox"/> Cartridges
4. Filter Material:	Polyester
5. Number of Bags/Cartridges per Compartment:	154
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	4.2 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.				
	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		15000.00	
16. Gas Stream Temperature	°F		68.00	
17. Gas Stream Pressure	inches of water	-12.00		to
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.00	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. 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

36. Is this device integral to the process?

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

No Yes

A properly functioning baghouse is required to operate the clinker silo.



OAQ CONTROL EQUIPMENT APPLICATION
CE-02: Particulate Control – Baghouse / Fabric Filter
 State Form 51953 (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 CE-02 is to identify all the parameters that describe the baghouse or fabric filter. This is a required form.
- Complete this form once for each baghouse or fabric filter (or once for each set of identical baghouses or fabric filters).
- 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 any one to inspect and photocopy.

PART A: Identification and Description of Control Equipment

Part A identifies the particulate control device and describes its physical properties.

1. Control Equipment ID:	GC509805
2. Installation Date:	11/1/2024
3. Bags or Cartridges?	<input checked="" type="checkbox"/> Bags <input type="checkbox"/> Cartridges
4. Filter Material:	Polyester
5. Number of Bags/Cartridges per Compartment:	120
6. Number of Compartments:	1
7. Mode of Operation:	<input type="checkbox"/> Intermittent <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous
8. Cleaning Method:	<input type="checkbox"/> Shaking <input type="checkbox"/> Reverse Pulse <input type="checkbox"/> Reverse Air <input checked="" type="checkbox"/> Jet Pulse
9. Cleaning Cycle / Frequency (specify units):	TBD
10. Is a bag leak detector installed on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11. Type / Description of Bag Leak Detector:	<input type="checkbox"/> Positive Pressure <input type="checkbox"/> Negative Pressure
12. Air to Cloth Ratio (Ex: 1.3 : 1.0):	4.3 : 1.0
13. Is Lime Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14. Is Carbon Injection used on this device?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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. For each applicable parameter, provide the inlet and outlet values or provide the differential value.

	A. Units	B. Inlet	C. Outlet	D. Differential
15. Gas Stream Flow Rate	ACFM		8000.00	
16. Gas Stream Temperature	°F		68.00	
17. Gas Stream Pressure	inches of water	-12.00		to
18. Moisture Content	%		0.10%	
19. Particle Size Range	gr/acf		0.01	to
20. Lime Injection Rate (if applicable)	lb/hr			
21. Carbon Injection Rate (if applicable)	lb/hr			
22. Other (specify):				

PART C: Pollutant Concentrations

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

	23. Units	24. Inlet	25. Outlet	26. Efficiency (%):	
				Capture	Control
<input type="checkbox"/> a. Lead (Pb)					
<input type="checkbox"/> b. Hazardous Air Pollutant (HAP) (specify):					
<input checked="" type="checkbox"/> c. Particulate Matter (PM)	gr/acf	1.00	0.01	100.0%	99.0%
<input checked="" type="checkbox"/> d. Particulate Matter less than 10µm (PM ₁₀)	gr/acf	1.00	0.0085	100.0%	99.0%
<input checked="" type="checkbox"/> e. Particulate Matter less than 2.5µm (PM _{2.5})	gr/acf	1.00	0.003	100.0%	99.0%
<input type="checkbox"/> f. 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.

27. Item(s) Monitored:	Opacity			
28. Monitoring Frequency:	Monthly			
29. Item(s) Recorded:	Visible Emissions			
30. Record Keeping Frequency:	Monthly			
31. Pollutant(s) Tested:	Opacity			
32. Test Method(s):	22			
33. Testing Frequency:	Monthly			

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.

34. 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.

35. 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

36. Is this device integral to the process?

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

No Yes

A properly functioning baghouse is required to operate the clinker silo.



OAQ COMPLIANCE DETERMINATION APPLICATION
CD-01: Emissions Unit Compliance Status
 State Form 51861 (R / 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 CD-01 is to identify the requirements that apply to each emissions unit at the permitted source and to determine the compliance status of these emissions units.
- This is required form for each initial Title V permit application as well as each modification and every renewal.
- 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 any one to inspect and photocopy.

PART A: Identification of Source and Emissions Unit

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

1. Source Name: Lone Star Industries, Inc. dba Buzzi Unicem USA	2. Source ID: 133 – 00002
3. Emissions Unit Description: Clinker Silo System	4. Unit ID: 3-40 through 3-48

PART B: Regulatory Compliance Status

Part B identifies the regulatory requirements that apply to the emissions unit and to determine the compliance status of the emissions unit. These "regulatory requirements" are those required by federal, state, or local law.

5. Rule Cite	6. Description	7. State / Local Only	8. Limitation	9. Test Method	10. In Compliance (y/n)
40 CFR 63 Subpart LLL	Monthly 10-minute Method 22 visible emission observations	N	10% Opacity	Method 22/9	Y

PART C: Compliance Status – Other Requirements

Part C identifies any other requirements that apply to the emissions unit and to determine the compliance status of the emissions unit. These "other requirements" would not be required by federal, state, or local law.

11. Other Requirements	12. State / Local Only	13. In Compliance (y/n)



OAQ COMPLIANCE DETERMINATION APPLICATION
CD-04: Compliance Schedule and Certification
 State Form 51864 (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 CD-04 is to provide a schedule of for compliance certification submittals, a certification of the source's compliance status with all applicable requirements, and a compliance schedule that details the measures a source will use to address non-compliance.
- Complete this form once per application (not once for each emissions unit) with respect to all applicable requirements at the source.
- This is required form for each initial Title V permit application as well as each modification and every renewal.
- 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 any one to inspect and photocopy.

PART A: Source Identification and Compliance Schedule	
Part A identifies the permitted source and the permit term compliance certification schedule.	
1. Source Name: Lone Star Industries, Inc. dba Buzzi Unicem USA	2. Source ID: 133 – 00002
3. Permit Term Compliance Certification Schedule	
Date of first certification submittal:	Frequency of future submittals:

PART B: Risk Management Plan		
Part B indicates whether sources subject to section 112(r), Accidental Release Prevention, are complying with the requirement to submit a Risk Management Plan (RMP).		
4. Statement of Applicability / Non-Applicability: Indicate whether the source is subject to Section 112(r) and the requirement to submit and RMP.		
<input type="checkbox"/> Source is subject to Section 112(r) and a Risk Management Plan (RMP) is required.		
<input checked="" type="checkbox"/> Source is not subject to Section 112(r) and a Risk Management Plan (RMP) is not required.		
RMP Submittal Information: Indicate when the RMP was submitted to each of the following agencies. If the RMP has not yet been submitted to any of the listed agencies, indicate the date when the RMP will be mailed to that agency. If the RMP for IDEM is attached to this application, please write "attached" in the Date Submitted column.		
5. Agency Name	6. Date Submitted	7. Expected Submittal Date
Chemical Safety and Hazard Investigation Board (CSHIB)		
United States Environmental Protection Agency (U.S. EPA)		
Indiana Department of Environmental Management (IDEM)		
Local Agency responsible for permitting:		
8. EPA Facility Identifier: — —		

PART C: Certification of Source Compliance Status

Part C states whether the source is or is not in full compliance with all applicable requirements and to identify corrective actions to be taken in cases of noncompliance.

9. Check the Most Accurate Statement.

- The source described in this air pollution control permit application is fully in compliance with all applicable requirements and will continue to comply with those requirements.
- FORM CD-01 includes new requirements that apply or will apply to the emissions unit during the term of the permit. The source will meet such requirements on a timely basis.
- The source described in this air pollution control permit application is fully in compliance with all applicable requirements, except for the emissions unit(s) listed below. Compliance will be achieved according to the schedule identified below.

10. Unit ID	11. Applicable Requirement	12. Corrective Action	13. Deadline	14. Progress Reports	
				Start Date	Frequency

15. Signature of Responsible Official

I certify that, based on information and belief formed after reasonable inquiry, the statements and information presented are true, accurate and complete.

Tim Menke _____
 Name (typed)

Plant Manager _____
 Title

 Signature

 Date



**OAQ FEDERAL RULE INCORPORATION APPLICATION
FED-01: Summary of Federal Requirements – NSPS &
NESHAP**

State Form 53512 (R / 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 form is to provide a standardized way for sources to identify the NSPS or NESHAP requirements that are applicable to the regulated source. Complete one (1) form for each federal rule that applies to the source. 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.

Part A: Identification of Applicable Standard

Part A identifies the applicable standard and affected source.

1. Type of Standard:	<input type="checkbox"/> Part 60 NSPS	<input type="checkbox"/> Part 61 NESHAP	<input checked="" type="checkbox"/> Part 63 NESHAP (MACT)
2. Subpart Letter:	LLL		
3. Source Category Name:	National Emission Standards for Hazardous Air Pollutants from the Portland Cement Manufacturing Industry		
4. Affected Source (Include all applicable emission unit IDs):	3-40, 3-41, 3-42, 3-43, 3-44, 3-45, 3-46, 3-47, 3-48		

Part B: Applicable Requirements

Part B specifies the specific requirements of the federal rule that are applicable to the process or emission unit.

5. Applicable Requirements: Identify the section of the federal standard that is applicable at the lowest subsection level. For example, if all of 40 CFR 63.342(c) is applicable, "40 CFR 63.342(c)" is the appropriate citation. If only paragraph 2 of 40 CFR 63.342(c) is applicable, then the appropriate citation is 40 CFR 63.342(c)(2).

- | | | |
|---------------------------|---|---|
| • 40 CFR 63.1340 | • | • |
| • 40 CFR 63.1341 | • | • |
| • 40 CR 63.1345 | • | • |
| • 40 CFR 63.1347 | • | • |
| • 40 CFR 63.1348 | • | • |
| • 40 CR 63.149(a), (b)(2) | • | • |
| • 40 CFR 63.1350(f) | • | • |
| • 40 CFR 63.1351 | • | • |
| • 40 CFR 63.1353 | • | • |
| • 40 CFR 63.1354 | • | • |
| • 40 CFR 63.1355 | • | • |
| • | • | • |
| • | • | • |

Part C: Performance Testing Requirements

Part C identifies the performance testing requirements that are applicable to the process or emission unit.

- | | |
|---|---|
| 6. Performance Testing: | Opacity |
| 7. Date of Initial Performance Test: | Within 180 days of startup |
| 8. Test Methods: | Method 9 |
| 9. Was the initial performance test approved by IDEM? | <input type="checkbox"/> Yes: <i>Date approved:</i> _____ <input type="checkbox"/> No |
| 10. Did the initial performance test show compliance with the rule? | <input type="checkbox"/> Yes <input type="checkbox"/> No: <i>Date of next performance test:</i> _____ |

Part D: Important Dates

Part D identifies specific dates associated with the federal standard that are applicable to the process or emission unit.

- | | |
|--|---|
| 11. Date Initial Notification was Submitted: | |
| 12. Initial Compliance Date: | <input type="checkbox"/> Startup: _____ <input type="checkbox"/> Other: _____ |
| | Description: _____ Date: _____ |
| 13. Other Dates | Description: _____ Date: _____ |
| | Description: _____ Date: _____ |

Part E: Other Information

Part E identifies any additional information pertaining to the applicable federal rule. Attach additional information using form GSD-09 as necessary.



OAQ FEDERAL RULE INCORPORATION APPLICATION
FED-02: MACT Pre-Construction Review
 State Form 51905 (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 this form is to provide a standardized way for sources to request MACT preconstruction approval per 40 CFR 63.5.
 - This is a required form for sources subject to the MACT pre-construction review requirements in 40 CFR 63.5.
 - 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.

Part A: General Information	
Part A identifies the applicable MACT standard and affected source, and determines whether 40 CFR Section 63.5 of the General Provisions is applicable to the affected source.	
1. MACT Subpart Letter:	LLL
MACT Source Category Name:	National Emission Standards for Hazardous Air Pollutants from the Portland Cement Manufacturing Industry
2. Affected Source(s):	3-40, 3-41, 3-42, 3-43, 3-44, 3-45, 3-46, 3-47, 3-48
3. Will the proposed construction be a major source of HAP emissions? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part B: Emissions Unit Information			
Part B identifies those emissions units that are part of the affected source and will be constructed or reconstructed:			
4. Unit ID:	5. HAP Name or Type of HAP	6. Quantity of HAP Emitted (<i>specify units</i>)	
		Actual Emissions	Potential To Emit
	NA		

Attachment A - Supporting Emission Calculation Tables

Supporting calculation tables are provided in this attachment for the potential emissions from the new clinker silo system and the addition clinker reclaim system.

Buzzi Unicem USA - Greencastle Plant
Proposed Clinker Silo Emission Sources - Potential Emissions Calculations

Maximum Hourly Production Rate (tons/hour)	350
Maximum Annual Hours of Operation (hours/year)	8,760

Point ID	Source Description	Baghouse Point ID	Baghouse Equipment ID	PM Emission Factor (gr/acf) ^{1,2}	Flow Rate (acfm)	Control Efficiency	Building Control % ³	Controlled Emissions ⁴				Uncontrolled Emissions ⁴			
								PM Emission Rate (lbs/hr)	PM (ton/yr)	PM ₁₀ (ton/yr)	PM _{2.5} (ton/yr)	PM Emission Rate (lbs/hr)	PM (ton/yr)	PM ₁₀ (ton/yr)	PM _{2.5} (ton/yr)
3-40	Belt 510V Transfer To Belt GC509723	FF3-40	GC509715	0.01	3,500	99.0%		0.30	1.31	1.12	0.39	30.00	131.40	111.69	39.42
3-41	Belt GC509273 Transfer Into Silo 8	FF3-41	GC509801	0.01	15,000	99.0%		1.29	5.63	4.79	1.69	128.57	563.14	478.67	168.94
3-42	Western Silo 8 Transfer To Belt GC509773	FF3-42	GC509767	0.01	850	99.0%	90%	0.01	0.03	0.03	0.01	7.29	31.91	27.12	9.57
3-43	Eastern Silo 8 Transfer To Belt GC509773	FF3-43	GC509769	0.01	850	99.0%	90%	0.01	0.03	0.03	0.01	7.29	31.91	27.12	9.57
3-44	Western Silo 8 Transfer To Belt GC509785	FF3-44	GC509787	0.01	850	99.0%	90%	0.01	0.03	0.03	0.01	7.29	31.91	27.12	9.57
3-45	Eastern Silo 8 Transfer To Belt GC509785	FF3-45	GC509789	0.01	850	99.0%	90%	0.01	0.03	0.03	0.01	7.29	31.91	27.12	9.57
3-46	Belts GC509773 And GC509785 Transfer To Belt GC509749	FF3-46	GC509729	0.01	5,700	99.0%		0.49	2.14	1.82	0.64	48.86	213.99	181.90	64.20
3-47	Belt GC509749 To Belt 511V	FF3-47	GC509737	0.01	2,300	99.0%		0.20	0.86	0.73	0.26	19.71	86.35	73.40	25.90
3-48	Reclaim Hopper GC509755 To Belt GC509743 To Belt GC509749	FF3-48	GC509805	0.01	8,000	99.0%		0.69	3.00	2.55	0.90	68.57	300.34	255.29	90.10
TOTALS:									13.08	11.12	3.92		1,422.87	1,209.44	426.86

Note 1: PM₁₀ and PM_{2.5} emissions were calculated assuming PM₁₀ is 85% of PM and PM_{2.5} is 30% of PM per AP-42 Appendix B.2 Category 4.

Note 2: The 0.01 gr/acfm PM emission factor incorporates a baghouse control efficiency of 99.0%.

Note 3: The transfer points and associated baghouses exhaust within a tunnel, so an additional 90% control efficiency is applied to account for the building enclosure.

Note 4: The baghouses will be used whenever the associated belts are in operation to ensure environmental compliance, but also to protect product quality and the safety of employees in the area.

Buzzi Unicem USA
3301 S. County Road 150 W.
Greencastle, IN 46135

Received
State of Indiana
JUL 01 2024
Dept of Environmental Mgmt
Office of Air Quality

Indiana Department of Environmental
Management
Office of Air Quality, Air Permits Administration
ATTN: Incoming Application
100 North Senate Avenue, IGCN 1003
Indianapolis, IN 46204-2251

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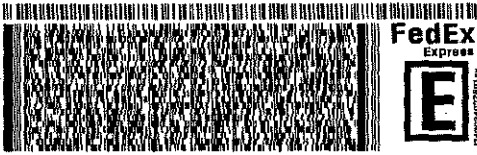
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