



April 17, 2023

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

Re: Quarterly Report – First Quarter 2023
AISIN Chemical Indiana, LLC
FESOP No. – 071-39411-00047

To Whom It May Concern:

Cornerstone Environmental is contracted to provide environmental services to AISIN Chemical Indiana, LLC (AISIN). On behalf of AISIN, we are providing the above referenced report. Mr. Tim Carter, Vice President of AISIN Chemical Indiana, LLC, is the Authorized Individual signing the report.

2023 Enclosed, please find AISIN's Quarterly Report for the first quarter, covering the period from January 1, 2022 through March 31, 2022. This report is required by Condition D.2.11 of AISIN's FESOP Permit Number 071-39411-00047. *2023*

If there are any questions or additional information needed, please do not hesitate to contact me at (513) 808-4097 or jnuckels@corner-enviro.com.

Sincerely,

A handwritten signature in blue ink that reads "John H. Nuckels".

John H. Nuckels
Senior Environmental Engineer

2627-16738-05

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE AND ENFORCEMENT BRANCH
FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
CERTIFICATION**

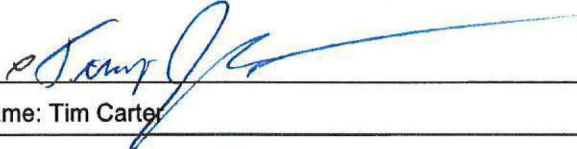
Source Name: Aisin Chemical Indiana, LLC
Source Address: 1004 Industrial Way, Crothersville, Indiana 47229
FESOP Permit No.: F071-35461-00047

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

Please check what document is being certified:

- Annual Compliance Certification Letter
- Test Result (specify) _____
- Report (specify) Fourth Quarter 2022 1st Quarter 2023
- Notification (specify) _____
- Affidavit (specify) _____
- Other (specify) _____

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

Signature: 

Printed Name: Tim Carter

Title/Position: Vice President

Date: 4-17-2023

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

FESOP Quarterly Report

Source Name: Aisin Chemical Indiana, LLC
 Source Address: 1004 Industrial Way, Crothersville, IN 47229
 FESOP Permit No.: F071-35461-00047
 Facility: Paper Saturation Line PA02
 Parameter: VOC Emissions
 Limit: The total input of VOC at paper saturation line shall not exceed 10 tons per twelve (12) consecutive month period, with compliance determined at the end of each month.

In order to determine compliance with this VOC limit, the Permittee shall calculate the VOC emissions using the following equation:

$$\text{Total VOC emitted} = [\text{VOC input to PA02} \times (1 - \text{control efficiency of thermal oxidizer from the most recent valid compliance demonstration})]$$

When the thermal oxidizer is not operating, the control efficiency = 0.


YEAR: 2023, 1Q

Month	Column 1	Column 2	Column 1 + Column 2
	This Month	Previous 11 Months	12 Month Total
January	0.068	0.666	0.734
February	0.051	0.677	0.728
March	0.052	0.652	0.704

No deviation occurred in this quarter.

Deviation/s occurred in this quarter.

Deviation has been reported on: _____

Submitted by: Corey McNew
 Title / Position: Safety/Environmental Specialist
 Signature: 
 Date: 4-17-23
 Phone: 812 525 7082

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

FESOP Quarterly Report

Source Name: Aisin Chemical Indiana, LLC
 Source Address: 1004 Industrial Way, Crothersville, IN 47229
 FESOP Permit No.: F071-35461-00047
 Facility: Paper Saturation Line PA02
 Parameter: Combined HAP Emissions
 Limit: The combination of HAPs delivered to the paper saturation line shall not exceed 21 tons per twelve (12) consecutive month period, with compliance determined at the end of each month.


In order to determine compliance with this combined HAP limit, the Permittee shall calculate the combined HAP emissions using the following equation:

Combined HAPs emitted = [HAP input to PA02 x (1- overall control efficiency of thermal oxidizer from the most recent valid compliance demonstration, when TO is in operation)] + Uncontrolled HAP input to PA02 when TO is not in operation.

YEAR: 2023, 1Q

Month	Column 1	Column 2	Column 1 + Column 2
	This Month	Previous 11 Months	12 Month Total
January	0.068	0.666	0.734
February	0.051	0.677	0.728
March	0.052	0.652	0.704

- No deviation occurred in this quarter.
- Deviation/s occurred in this quarter.
 Deviation has been reported on: _____

Submitted by: Corey McNew
 Title / Position: Safety/Environmental Specialist
 Signature: 
 Date: 4-17-23
 Phone: 812 525 7082

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

FESOP Quarterly Report

Source Name: Aisin Chemical Indiana, LLC
 Source Address: 1004 Industrial Way, Crothersville, IN 47229
 FESOP Permit No.: F071-35461-00047
 Facility: Paper Saturation Line PA02
 Parameter: Single HAP
 Limit: The worst case single HAP delivered to the paper saturation line shall not exceed 9 tons per twelve (12) consecutive month period, with compliance determined at the end of each month.

In order to determine compliance with this worst case single HAP limit, the Permittee shall calculate the worst case single HAP emissions using the following equation:

Single HAP emitted = [Single HAP input to PA02 x (1 - overall control efficiency of thermal oxidizer from the most recent valid compliance demonstration, when TO is in operation)] + Uncontrolled Single HAP input to PA02 when TO is not in operation.


YEAR: ~~2022, 4Q~~ 2023, 1Q

Month	Column 1	Column 2	Column 1 + Column 2
	This Month	Previous 11 Months	12 Month Total
January	0.059	0.581	0.640
February	0.045	0.590	0.635
March	0.045	0.569	0.614

No deviation occurred in this quarter.

Deviation/s occurred in this quarter.

Deviation has been reported on: _____

Submitted by: Corey McNew
 Title / Position: Safety/Environmental Specialist
 Signature: 
 Date: 4-17-23
 Phone: 812 525 7082

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
COMPLIANCE AND ENFORCEMENT BRANCH
FEDERALLY ENFORCEABLE STATE OPERATING PERMIT (FESOP)
QUARTERLY DEVIATION AND COMPLIANCE MONITORING REPORT**

Source Name: Aisin Chemical Indiana, LLC
 Source Address: 1004 Industrial Way, Crothersville, Indiana 47229
 FESOP Permit No.: F071-35461-00047

Months: January to March Year: 2023

<p>This report shall be submitted quarterly based on a calendar year. Proper notice submittal under Section B –Emergency Provisions satisfies the reporting requirements of paragraph (a) of Section C- General Reporting. Any deviation from the requirements of this permit, the date(s) of each deviation, the probable cause of the deviation, and the response steps taken must be reported. A deviation required to be reported pursuant to an applicable requirement that exists independent of the permit, shall be reported according to the schedule stated in the applicable requirement and does not need to be included in this report. Additional pages may be attached if necessary. If no deviations occurred, please specify in the box marked "No deviations occurred this reporting period".</p>	
<input checked="" type="checkbox"/> NO DEVIATIONS OCCURRED THIS REPORTING PERIOD.	
<input type="checkbox"/> THE FOLLOWING DEVIATIONS OCCURRED THIS REPORTING PERIOD	
Permit Requirement (specify permit condition #))	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	

Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	

Form Completed by: Corey McNew

Title / Position: Safety/Environmental Specialist

Date: 4-10-2023

Phone: 812 525 7082