

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

RECOMMENDATION TO REVOKE AIR PERMIT MEMORANDUM

Date: May 29, 2018

To: Joanne Smiddie-Brush, Section Chief
Permits Administration Support Section
Permits Branch
Office of Air Quality

Thru: Phil Perry, Branch Chief *PP*
Compliance and Enforcement *5/30/18*
Branch
Office of Air Quality

From: Brooke A. Myer, Air Compliance Inspector *BAM*
Roger Letterman, Section Chief
Compliance and Enforcement Branch
Office of Air Quality

Source Name: Oak Rite Manufacturing Company

Source ID: 063-00044

Source Location address: 701 North Carr Road, Plainfield, IN 46168

Operating Permit # to be revoked: SSOA No. S063-8884-00044

Based upon reviewing 326 IAC 2-1.1-9 and those methods to verify closure identified on the attached Air Permit Revocation Supporting Documentation Log, the source is permanently closed and the operating air permit for Oak Rite Manufacturing Company can be revoked. Please revoke the air permit and issue a Revocation and Notice of Decision.

☐ Revocation and Notice of Decision should be mailed to:

Name:

Title:

Address:

City:

State:

Zip Code:

OR

☒ There is no person identified with the source to receive the Revocation. The Revocation should take the form of a Memo to File.

cc:

**Indiana Department of Environmental Management
Office of Air Quality
Air Permit Revocation Supporting Documentation Log**

Source Name	Oak Rite Manufacturing Company	OAQ Inspector	Brooke A. Myer
Source ID	063-00044	Date of Review	5/29/2018

Methods used to determine/verify source closure (Check all that apply.)

	Method (From Step 3 in SOP)	Verification	Comments
<input checked="" type="checkbox"/>	(a) Inspection/Site visit	Inspection Date:	11/3/2017
<input type="checkbox"/>	(b) Corporate staff contact	Contact Date: Name: Title: Contact submitting information for Permit Revocation? Other Comments	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/>	(c) Internet search (attach any article found)	Date of Search:	
<input type="checkbox"/>	(c) County Health Department	Contact & Date:	
<input checked="" type="checkbox"/>	(d) Secretary of State's website operating status	Operating?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<input type="checkbox"/>	(e) Commenced construction	Commenced within 18 months? Date of Issuance of Permit:	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input checked="" type="checkbox"/>	(f) Disconnected phone number?	Phone number: Date verified	(317) 839-2301 November 3, 2017
<input type="checkbox"/>	(f) Returned U.S. Mail/Email	Document(s) type: Date(s) of returned mail:	
<input type="checkbox"/>	(g) Non-payment of permit fees	Year(s) not paid	
<input type="checkbox"/>	(h) Non-submittal of Emission Statements, Quarterly Report, Annual Compliance Certifications, Annual Notifications	Year(s) not submitted	
<input type="checkbox"/>	Other Information		
<input type="checkbox"/>	Other Information		

Comments: