

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
RECOMMENDATION TO REVOKE AIR PERMIT MEMORANDUM

Date: September 20, 2019

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

Thru: Phil Perry, Branch Chief
Compliance and Enforcement
Branch
Office of Air Quality

From: Paul Karkiewicz, Air Compliance Inspector
James Weingart, Director - NRO

Source Name: Classic Restorations

Source ID: 039-00482

Source Location address: 68226 U.S. Highway 33, Goshen, IN 46526

Operating Permit # to be revoked: SSOA No.: S 039-9277-00482

Based upon reviewing 326 IAC 2-1.1-9 and methods to verify closure (on the Air Permit Revocation Supporting Documentation Log below)], the source is permanently closed and the operating air permit for Classic Restorations 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: Mr. Robert Eastman
Title: Owner
Address: 68226 U.S. Highway 33
City: Goshen
State: IN
Zip Code: 46526

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	Classic Restorations	OAQ Inspector	Paul Karkiewicz
Source ID	039-00482	Date of Review	09/20/2019

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:	09/19/2019
<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 type="checkbox"/>	(d) Secretary of State's website operating status	Operating?	Yes <input type="checkbox"/> No <input 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 type="checkbox"/>	(f) Disconnected phone number?	Phone number: Date verified	
<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: