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CERTIFIED MAIL – RETURN RECEIPT REQUESTED
7012 0470 0002 3768 7899

February 11, 2016

Todd Zynda
Michigan Department of Environmental Quality
Air Quality Division
Cadillac Place
3058 West Grand Boulevard
Suite 2-300
Detroit, Michigan 48202

Re: ROP Forms M-001 AND C-001
BASF Corporation, Wyandotte, MI

Dear Mr. Zynda:

BASF Corporation recently received a PTI modification for a baghouse at our WRDC building (PTI-174-08A). We would like to have the PTI incorporated into MI-ROP-B4359-2003b. I have attached MDEQ Forms M-001 and C-001 for your use.

If you have any questions, please feel free to call (734-324-6523) or e-mail me (bryan.hughes@basf.com).

Sincerely,

A handwritten signature in black ink, appearing to read "Bryan J. Hughes".

Bryan J. Hughes
EHS Team Leader, OHMICAN Hub

Enclosures (2)

201600079



Michigan Department of Environmental Quality
Air Quality Division

**RENEWABLE OPERATING PERMIT
M-001: RULE 215 CHANGE NOTIFICATION
RULE 216 AMENDMENT/MODIFICATION APPLICATION**

This information is required by Part 55, Air Pollution Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, and the Federal Clean Air Act of 1990. Failure to obtain a permit required by Part 55 may result in penalties and/or imprisonment.

1. SRN B4359	2. ROP Number MI-ROP-B4359-2003b	3. County Wayne
4. Stationary Source Name BASF Corporation - Chemical Plants		
5. Location Address 1609 Biddle Avenue	6. City Wyandotte	
<p>7. Submittal Type - <i>The submittal must meet the criteria for the box checked below. Check only one box. Attach a mark-up of the affected ROP pages for applications for Rule 216 changes.</i></p> <p><input type="checkbox"/> Rule 215(1) Notification of change. Complete Items 7 – 10.</p> <p><input type="checkbox"/> Rule 215(2) Notification of change. Complete Items 7 – 10.</p> <p><input type="checkbox"/> Rule 215(3) Notification of change. Complete Items 7 – 11.</p> <p><input type="checkbox"/> Rule 216(1)(a)(i)-(iv) Administrative Amendment. Complete Items 7 – 10.</p> <p><input type="checkbox"/> Rule 216(1)(a)(v) Administrative Amendment. Complete Items 7 – 13. Results of testing, monitoring & recordkeeping must be submitted. See detailed instructions.</p> <p><input checked="" type="checkbox"/> Rule 216(2) Minor Modification. Complete Items 7 – 12.</p> <p><input type="checkbox"/> Rule 216(3) Significant Modification. Complete Items 7 – 12 and provide any additional information needed on ROP application forms. See detailed instructions.</p> <p><input type="checkbox"/> Rule 216(4) State-Only Modification. Complete Items 7 – 12.</p>		
8. Effective date of the change. (MM/DD/YYYY) <i>See detailed instructions.</i> 01/11/2016	9. Change in emissions? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>10. Description of Change - <i>Describe any changes or additions to the ROP, including any changes in emissions and/or pollutants that will occur. If additional space is needed, complete an Additional Information form (AI-001).</i></p> <p>Incorporate PTI No. 174-08A into the ROP.</p>		
11. New Source Review Permit(s) to Install (PTI) associated with this application?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, enter the PTI Number(s) <u>174-08A</u> - - - - -		
12. Compliance Status - <i>A narrative compliance plan, including a schedule for compliance, must be submitted using an AI-001 if any of the following are checked No.</i>		
a. Is the change identified above in compliance with the associated applicable requirement(s)?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Will the change identified above continue to be in compliance with the associated applicable requirement(s)?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c. If the change includes a future applicable requirement(s), will timely compliance be achieved?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13. Operator's Additional Information ID - <i>Create an Additional Information (AI) ID for the associated AI-001 form used to provide supplemental information.</i>		AI
14. Contact Name Bryan J. Hughes	Telephone No. 734-324-6523	E-mail Address bryan.hughes@basf.com
15. This submittal also updates the ROP renewal application submitted on ___/___/___		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
<i>(If yes, a mark-up of the affected pages of the ROP must be attached.)</i>		

NOTE: A CERTIFICATION FORM (C-001) SIGNED BY A RESPONSIBLE OFFICIAL MUST ACCOMPANY ALL SUBMITTALS

DEQ Environmental Assistance Center
Phone: 800-662-9278

www.michigan.gov/deq

EQP 5775 (Rev.04-2014)

201600079



Michigan Department Of Environmental Quality - Air Quality Division

RENEWABLE OPERATING PERMIT APPLICATION C-001: CERTIFICATION

This information is required by Article II, Chapter 1, part 55 (Air Pollution Control) of P.A. 451 of 1994, as amended, and the Federal Clean Air Act of 1990. Failure to provide this information may result in civil and/or criminal penalties. Please type or print clearly.


This form is completed and included as part of Renewable Operating Permit (ROP) initial and renewal applications, notifications of change, amendments, modifications, and additional information.

Form Type C-001	SRN B4359
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Stationary Source Name BASF Corporation - Chemical Plants	
City Wyandotte	County Wayne

SUBMITTAL CERTIFICATION INFORMATION	
1. Type of Submittal <i>Check only one box.</i>	
<input type="checkbox"/> Initial Application (Rule 210)	<input checked="" type="checkbox"/> Notification / Administrative Amendment / Modification (Rules 215/216)
<input type="checkbox"/> Renewal (Rule 210)	<input type="checkbox"/> Other, describe on AI-001
2. If this ROP has more than one Section, list the Section(s) that this Certification applies to _____	
3. Submittal Media <input type="checkbox"/> E-mail <input type="checkbox"/> FTP <input type="checkbox"/> Disk <input checked="" type="checkbox"/> Paper	
4. Operator's Additional Information ID - Create an Additional Information (AI) ID that is used to provide supplemental information on AI-001 regarding a submittal.	
AI	

CONTACT INFORMATION	
Contact Name Bryan J. Hughes	Title EHS Team Leader
Phone number 734-324-6523	E-mail address bryan.hughes@basf.com

This form must be signed and dated by a Responsible Official.				
Responsible Official Name Greg Pflum			Title Vice President and General Manager	
Mailing address 1609 Biddle Avenue				
City Wyandotte	State MI	ZIP Code 48192	County Wayne	Country USA
As a Responsible Official, I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this submittal are true, accurate and complete.				
 _____ Signature of Responsible Official			February 11, 2016 _____ Date	