

201700004

**Cadillac Plant** 603 W. 7<sup>th</sup> Street Cadillac, MI 49601-1300

Tel: (231) 775-6571 Fax: (231) 775-8731



December 12, 2016

Caryn Owens Environmental Quality Analyst MDEQ Air Quality Division Cadillac District Office 120 W. Chapin Street Cadillac, MI. 49601-2158

Ms. Owens,

Please find enclosed with this letter, Avon Automotive Cadillac Division's M-001 Change Notification, Amendment & Modification Application and the signed C-001 Certification form for PTI 87-16A. Avon Automotive will be replacing Autoclave6 during the week of December 26<sup>th</sup>, 2016.

Respectfully Submitted,

Greg Shay HSE<sup>2</sup> Engineer MGI COUTIER- AVON AUTOMOTIVE 603 West 7<sup>th</sup> st Cadillac, MI, 49601 USA Office: (+1) 231-876-1496 Cell: (+1) 231-429-9785 www.mgicoutier.com

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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 A9365			SRN A9365
Stationary Source Name			•
Avon Automotive Cadillac Division			
City		County	
Cadillac		Wexford	
		_	
SUBMITTAL CERTIFICATION INFORM	IATION		
1. Type of Submittal Check only one box.			
Initial Application (Rule 210)	Notification / Administrative Am	nendment /	Modification (Rules 215/216)
Renewal (Rule 210)	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	🔲 E-mail	FTP	Disk	🛛 Paper
4.	Operator's Additional on Al-001 regarding a		e an Additional Informati	on (AI) ID that is used to	provide supplemental information

CONTACT INFORMATION			
Contact Name		Title	
Greg Shay		HSE Engineer	
Phone number	E-mail addres	SS	
231-876-1496	Greg.Shay@	na.mgicoutier.com	

This form must be sig	ned and dated by	y a Responsible	e Official.	
Responsible Official Name     Title       Greg Spencer     General Manager				
Mailing address 603 West 7 <sup>th</sup> Ave.			•	
City Cadillac	State MI	ZIP Code 49601	County Wexford	Country USA
As a Responsible Of inquiry, the statement				ef formed after reasonable te and complete.
Signature of Responsible Officia	al			Date



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## 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 A9365	2. ROP Number	MI-ROP-A9365-2012	3. County	Wexford	k	
4. Stationary Source Name	Avon Automotive Ca	adillac Division	•			
5. Location Address	603 West 7 <sup>th</sup> Ave.	·	6. City	Cadillac	;	
<ul> <li>7. Submittal Type - The subrup of the affected ROP pa</li> <li>☐ Rule 215(1) Notification</li> </ul>	ges for applications fo		d below. Check of	nly one bo	x. Attach	a mark-
Rule 215(1) Notification	•	e Items 7 – 10. e Items 7 – 10.				
Rule 215(2) Notification		e Items 7 – 11.				
	•	enterns 7 – 77. ent. Complete Items 7 – 10	)			
	nistrative Amendment.	Complete Items 7 – 13. F		nitoring & r	ecordkeep	ing must
🛛 Rule 216(2) Minor Mod	ification. Complete	e Items 7 – 12.				
	applicat	e Items 7 – 12 and provide tion forms. See detailed ins		ation neede	ed on ROF	>
Rule 216(4) State-Only		e Items 7 – 12.				<u> </u>
8. Effective date of the change See detailed instructions.	ge. (MM/DD/YYYY)	<u>10/20/2016</u>	9. Change in emis	ssions?	□ Yes	🛛 No
10. Description of Change - <i>pollutants that will occur.</i> Al-001 Form Attached	Describe any changes If additional space is	s or additions to the ROF needed, complete an Ad	P, including any cha Aditional Informatio	nges in ei n form (Al-	missions a -001).	and/or
11. New Source Review Per	mit(s) to Install (PTI) a	associated with this appli	cation?		Yes 🛛	No
If Yes, enter the PTI Num						
12. Compliance Status - A n Al-001 if any of the follow		lan, including a schedule	for compliance, m	ust be sut	omitted us	sing an
a. Is the change identifie	d above in compliance	e with the associated ap	plicable requiremer	nt(s)?	🛛 Yes	🗌 No
b. Will the change identifind requirement(s)?	fied above continue to	be in compliance with the	ne associated appli	cable	🛛 Yes	🗌 No
c. If the change includes	a future applicable re	quirement(s), will timely	compliance be ach	ieved?	🛛 Yes	□ No
13. Operator's Additional Inf Al-001 form used to prov			(AI) ID for the asso	ociated	AI	
14. Contact Name	Telephone	No.	E-mail Address			
Greg Shay	231-876-1	496	Greg.Shay@na.m	gicoutier.c		
15. This submittal also upda (If yes, a mark-up of the				-	🗌 Yes	□ N/A

NOTE: A CERTIFICATION FORM (C-001) SIGNED BY A RESPONSIBLE OFFICIAL MUST ACCOMPANY ALL SUBMITTALS DEQ Environmental Assistance Center www.michigan.gov/deq

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## RENEWABLE OPERATING PERMIT APPLICATION AI-001: ADDITIONAL INFORMATION

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 obtain a permit required by Part 55 may result in penalties and/or imprisonment. Please type or print clearly. Refer to instructions for additional information to complete this form.

	SRN: A9365	Section Number (if applicable):
1. Additional Information ID AI-001		
	· · · · · · · · · · · · · · · · · · ·	

## Additional Information

2. Is This Information Confidential?

🗌 Yes 🛛 No

3. Narrative

Emission Unit ID	Emission Unit Description (Process Equipment & Control Devices)	Installation Date / Modification Date	Flexible Group ID
EUAUTOCLAVE1	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	5-19-1997	FGAUTOCLAVE
EUAUTOCLAVE2	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	5-19-1997	FGAUTOCLAVE
EUAUTOCLAVE3	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	to be determined	FGAUTOCLAVE
EUAUTOCLAVE4	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	to be determined	FGAUTOCLAVE
EUAUTOCLAVE5	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	to be determined	FGAUTOCLAVE
EUAUTOCLAVE6	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	to be determined	FGAUTOCLAVE
EUAUTOCLAVE7	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	5-19-1997	FGAUTOCLAVE
EUAUTOCLAVE8	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	10-10-2016	FGAUTOCLAVE
EUAUTOCLAVE9	Autoclave steam pressure vessel used for the curing of unvulcanized rubber.	5-19-1997	FGAUTOCLAVE

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