



September 25, 2023

DEQ – Division for Air Quality
Permits Review Branch,
300 Sower Boulevard, 2nd Floor
Frankfort, KY 40601

Re: Industrial Tech Services
Permit # F-18-057
Air Permit Renewal Application

To Whom It May Concern:

Industrial Tech Services (ITS) is a stationary source located at 321 Triport Road, Georgetown, Kentucky 40324. ITS currently operates under the air permit F-18-057 and is submitting the attached application to renew their air permit.

The only equipment change that has been identified is for EP 02 Gas Metal Arc Welding there used to be 12 MIG welders and now there are only six. No new units or processes have been installed at the facility.

The applicable permit forms are attached in Attachment A. Should you have any questions or concerns regarding this permit application, please contact me at (513) 808-4081 or ckoucky@corner-enviro.com.

Sincerely,

A handwritten signature in black ink, appearing to read "Chris Koucky", is written over a light blue horizontal line.

Christopher Koucky
Environmental Engineer

Enclosures

cc: Bryan Walls, ITS
2563-16746-01

ATTACHMENT A

Division for Air Quality

300 Sower Boulevard
 Frankfort, KY 40601
 (502) 564-3999

DEP7007AI

Administrative Information

- Section AI.1: Source Information
- Section AI.2: Applicant Information
- Section AI.3: Owner Information
- Section AI.4: Type of Application
- Section AI.5: Other Required Information
- Section AI.6: Signature Block
- Section AI.7: Notes, Comments, and Explanations

Additional Documentation

Additional Documentation attached

Source Name: Industrial Tech Services

KY EIS (AFS) #: 21- 209-00033

Permit #: F-18-057

Agency Interest (AI) ID: 39870

Date: 9/25/2023

Section AI.1: Source Information

Physical Location	Street:	<u>321 Triport Road</u>			
Address:	City:	<u>Georgetown</u>	County:	<u>Scott</u>	Zip Code: <u>40324</u>
Mailing Address:	Street or P.O. Box:	<u>321 Triport Road</u>			
	City:	<u>Georgetown</u>	State:	<u>KY</u>	Zip Code: <u>40324</u>

Standard Coordinates for Source Physical Location

Longitude: 38.28292 (decimal degrees) **Latitude:** -84.55056 (decimal degrees)

Primary (NAICS) Category: 332 - Fabricated Metal Product Manufacturing **Primary NAICS #:** NAICS Code 332999 - All Other Miscellaneous Fabricated Metal

Classification (SIC) Category:	34 - Fabricated Metal Products, except Machinery and Transportation Equipment	Primary SIC #:	3499 - Fabricated Metal Products, Not Elsewhere Classified
Briefly discuss the type of business conducted at this site:			
Description of Area Surrounding Source:	<input type="checkbox"/> Rural Area <input type="checkbox"/> Industrial Park <input type="checkbox"/> Residential Area <input type="checkbox"/> Urban Area <input checked="" type="checkbox"/> Industrial Area <input type="checkbox"/> Commercial Area	Is any part of the source located on federal land?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Approximate distance to nearest residence or commercial property:	<u>100 yards</u>	Property Area:	<u>4.9 acres</u>
		Is this source portable?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
What other environmental permits or registrations does this source currently hold or need to obtain in Kentucky?			
NPDES/KPDES:	<input checked="" type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input type="checkbox"/> N/A
Solid Waste:	<input type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input checked="" type="checkbox"/> N/A
RCRA:	<input type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input checked="" type="checkbox"/> N/A
UST:	<input type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input checked="" type="checkbox"/> N/A
Type of Regulated Waste Activity:	<input type="checkbox"/> Mixed Waste Generator	<input type="checkbox"/> Generator	<input type="checkbox"/> Recycler
	<input type="checkbox"/> U.S. Importer of Hazardous Waste	<input type="checkbox"/> Transporter	<input type="checkbox"/> Treatment/Storage/Disposal Facility
			<input checked="" type="checkbox"/> Other: <u>VSQG</u>
			<input type="checkbox"/> N/A

Number of Employees: 75

Section AI.2: Applicant Information

Applicant Name: Industrial Tech Services

Title: (if individual) _____

Mailing Address: **Street or P.O. Box:** 321 Triport Road

City: Georgetown **State:** KY **Zip Code:** 40324

Email: (if individual) _____

Phone: 502-867-5880

Technical Contact

Name: Bryan Walls

Title: Shinmei Division Manager

Mailing Address: **Street or P.O. Box:** 321 Triport Road

City: Georgetown **State:** KY **Zip Code:** 40324

Email: bwalls@islex.com

Phone: (502) 863-4941 x 555

Air Permit Contact for Source

Name: Bryan Walls

Title: Shinmei Division Manager

Mailing Address: **Street or P.O. Box:** 321 Triport Road

City: Georgetown **State:** KY **Zip Code:** 40324

Email: bwalls@islex.com

Phone: (502) 863-4941 x 555

Section AI.3: Owner Information

Owner same as applicant

Name: _____

Title: _____

Mailing Address: **Street or P.O. Box:** _____
City: _____ **State:** _____ **Zip Code:** _____

Email: _____

Phone: _____

List names of owners and officers of the company who have an interest in the company of 5% or more.

Name

Position

Section AI.4: Type of Application

Current Status: Title Conditional Major State-Origin General Permit Registration None

Requested Action: Name Change Initial Registration Significant Revision Administrative Permit Amendment
(check all that apply) Renewal Permit Revised Registration Minor Revision Initial Source-wide Operating Permit
 502(b)(10) Change Extension Request Addition of New Facility Portable Plant Relocation Notice
 Revision Off Permit Change Landfill Alternate Compliance Submittal Modification of Existing Facilities
 Ownership Change Closure

Requested Status: Title Conditional Major State-Origin PSD NSR Other: _____

Is the source requesting a limitation of potential emissions? Yes No

Pollutant:	Requested Limit:	Pollutant:	Requested Limit:
<input type="checkbox"/> Particulate Matter	_____	<input checked="" type="checkbox"/> Single HAP	<u>9 tons/year</u>
<input checked="" type="checkbox"/> Volatile Organic Compounds (VOC)	<u>90 tons/year</u>	<input checked="" type="checkbox"/> Combined HAPs	<u>22.5 tons/year</u>
<input type="checkbox"/> Carbon Monoxide	_____	<input type="checkbox"/> Air Toxics (40 CFR 68, Subpart F)	_____
<input type="checkbox"/> Nitrogen Oxides	_____	<input type="checkbox"/> Carbon Dioxide	_____
<input type="checkbox"/> Sulfur Dioxide	_____	<input type="checkbox"/> Greenhouse Gases (GHG)	_____
<input type="checkbox"/> Lead	_____	<input type="checkbox"/> Other	_____

For New Construction:

Proposed Start Date of Construction: *(MM/YYYY)* _____ **Proposed Operation Start-Up Date:** *(MM/YYYY)* _____

NA NA

For Modifications:

Proposed Start Date of Modification: *(MM/YYYY)* _____ **Proposed Operation Start-Up Date:** *(MM/YYYY)* _____

NA NA

Applicant is seeking coverage under a permit shield. Yes No **Identify any non-applicable requirements for which permit shield is sought on a separate attachment to the application.**

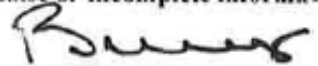
Section A1.5 Other Required Information

Indicate the documents attached as part of this application:

- | | |
|--|---|
| <input type="checkbox"/> DEP7007A Indirect Heat Exchangers and Turbines | <input type="checkbox"/> DEP7007CC Compliance Certification |
| <input type="checkbox"/> DEP7007B Manufacturing or Processing Operations | <input type="checkbox"/> DEP7007DD Insignificant Activities |
| <input type="checkbox"/> DEP7007C Incinerators and Waste Burners | <input type="checkbox"/> DEP7007EE Internal Combustion Engines |
| <input type="checkbox"/> DEP7007F Episode Standby Plan | <input type="checkbox"/> DEP7007FF Secondary Aluminum Processing |
| <input type="checkbox"/> DEP7007J Volatile Liquid Storage | <input type="checkbox"/> DEP7007GG Control Equipment |
| <input type="checkbox"/> DEP7007K Surface Coating or Printing Operations | <input type="checkbox"/> DEP7007HH Haul Roads |
| <input type="checkbox"/> DEP7007L Mineral Processes | <input type="checkbox"/> Confidentiality Claim |
| <input type="checkbox"/> DEP7007M Metal Cleaning Degreasers | <input type="checkbox"/> Ownership Change Form |
| <input type="checkbox"/> DEP7007N Source Emissions Profile | <input type="checkbox"/> Secretary of State Certificate |
| <input type="checkbox"/> DEP7007P Perchloroethylene Dry Cleaning Systems | <input type="checkbox"/> Flowcharts or diagrams depicting process |
| <input type="checkbox"/> DEP7007R Emission Offset Credit | <input type="checkbox"/> Digital Line Graphs (DLG) files of buldings, roads, etc. |
| <input type="checkbox"/> DEP7007S Service Stations | <input type="checkbox"/> Site Map |
| <input type="checkbox"/> DEP7007T Metal Plating and Surface Treatment Operations | <input type="checkbox"/> Map or drawing depicting location of facility |
| <input type="checkbox"/> DEP7007V Applicable Requirements and Compliance Activities | <input type="checkbox"/> Safety Data Sheet (SDS) |
| <input type="checkbox"/> DEP7007Y Good Engineering Practice and Stack Height Determination | <input type="checkbox"/> Emergency Response Plan |
| <input type="checkbox"/> DEP7007AA Compliance Schedule for Non-complying Emission Units | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> DEP7007BB Certified Progress Report | |

Section A1.6: Signature Block

I, the undersigned, hereby certify under penalty of law, that I am a responsible official*, and that I have personally examined, and am familiar with, the information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the information is on knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false or incomplete information, including the possibility of fine or imprisonment.



 Authorized Signature

Bryan Walls

 Type or Printed Name of Signatory

9/25/23

 Date

Shinmei Division Manager

 Title of Signatory

*Responsible official as defined by 401 KAR 52:001.

