

<p>Division for Air Quality</p> <p>300 Sower Boulevard</p> <p>Frankfort, KY 40601</p> <p>(502) 564-3999</p>	<p><b>DEP7007AI</b></p> <p><b>Administrative Information</b></p> <p><input checked="" type="checkbox"/> Section AI.1: Source Information</p> <p><input checked="" type="checkbox"/> Section AI.2: Applicant Information</p> <p><input checked="" type="checkbox"/> Section AI.3: Owner Information</p> <p><input checked="" type="checkbox"/> Section AI.4: Type of Application</p> <p><input checked="" type="checkbox"/> Section AI.5: Other Required Information</p> <p><input checked="" type="checkbox"/> Section AI.6: Signature Block</p> <p><input type="checkbox"/> Section AI.7: Notes, Comments, and Explanations</p>	<p><b>Additional Documentation</b></p> <p><input type="checkbox"/> Additional Documentation attached</p>																														
<p><b>Source Name:</b> <u>Schneider Electric USA, Inc.</u></p> <p><b>KY EIS (AFS) #:</b> <u>21- 067-00041</u></p> <p><b>Permit #:</b> <u>F-18-036 R1</u></p> <p><b>Agency Interest (AI) ID:</b> <u>1098</u></p> <p><b>Date:</b> <u>6/26/2023</u></p>																																
<p><b>Section AI.1: Source Information</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><b>Physical Location</b></td> <td style="width: 15%;"><b>Street:</b></td> <td colspan="3">1601 Mercer Road</td> </tr> <tr> <td><b>Address:</b></td> <td><b>City:</b></td> <td>Lexington</td> <td><b>County:</b></td> <td>Fayette</td> </tr> <tr> <td></td> <td></td> <td></td> <td><b>Zip Code:</b></td> <td>40511</td> </tr> <tr> <td><b>Mailing Address:</b></td> <td><b>Street or P.O. Box:</b></td> <td colspan="3">1601 Mercer Road</td> </tr> <tr> <td></td> <td><b>City:</b></td> <td>Lexington</td> <td><b>State:</b></td> <td>Kentucky</td> </tr> <tr> <td></td> <td></td> <td></td> <td><b>Zip Code:</b></td> <td>40511</td> </tr> </table>			<b>Physical Location</b>	<b>Street:</b>	1601 Mercer Road			<b>Address:</b>	<b>City:</b>	Lexington	<b>County:</b>	Fayette				<b>Zip Code:</b>	40511	<b>Mailing Address:</b>	<b>Street or P.O. Box:</b>	1601 Mercer Road				<b>City:</b>	Lexington	<b>State:</b>	Kentucky				<b>Zip Code:</b>	40511
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<p><b>Standard Coordinates for Source Physical Location</b></p> <p><b>Longitude:</b> <u>-84.523214</u> (decimal degrees)      <b>Latitude:</b> <u>38.077233</u> (decimal degrees)</p>																																
<p><b>Primary (NAICS) Category:</b> <u>Switchgear and Switchboard Apparatus Manufacturing</u>      <b>Primary NAICS #:</b> <u>335313</u></p>																																

<b>Classification (SIC) Category:</b>		<u>Switchgear and Switchboard Apparatus</u>		<b>Primary SIC #:</b> <u>3613</u>	
<b>Briefly discuss the type of business conducted at this site:</b>		A manufacturing company that makes switchgear and switchboard apparatus			
<b>Description of Area Surrounding Source:</b>	<input type="checkbox"/> Rural Area	<input type="checkbox"/> Industrial Park	<input type="checkbox"/> Residential Area	<b>Is any part of the source located on federal land?</b>	<input type="checkbox"/> Yes
	<input type="checkbox"/> Urban Area	<input checked="" type="checkbox"/> Industrial Area	<input type="checkbox"/> Commercial Area		<input checked="" type="checkbox"/> No
<b>Approximate distance to nearest residence or commercial property:</b> <u>50 yards</u>		<b>Property Area:</b> <u>26</u>		<b>Is this source portable?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>What other environmental permits or registrations does this source currently hold or need to obtain in Kentucky?</b>					
<b>NPDES/KPDES:</b>	<input checked="" type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input type="checkbox"/> N/A	KPDES Permit # KYR003427	
<b>Solid Waste:</b>	<input type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input checked="" type="checkbox"/> N/A		
<b>RCRA:</b>	<input checked="" type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input type="checkbox"/> N/A		
<b>UST:</b>	<input type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input checked="" type="checkbox"/> N/A		
<b>Type of Regulated Waste Activity:</b>	<input type="checkbox"/> Mixed Waste Generator	<input checked="" type="checkbox"/> Generator	<input type="checkbox"/> Recycler	<input type="checkbox"/> Other: _____	
	<input type="checkbox"/> U.S. Importer of Hazardous Waste	<input type="checkbox"/> Transporter	<input type="checkbox"/> Treatment/Storage/Disposal Facility	<input type="checkbox"/> N/A	

## Section AI.2: Applicant Information

**Applicant Name:** Schneider Electric USA, Inc.  
**Title:** (if individual) \_\_\_\_\_  
**Mailing Address:** **Street or P.O. Box:** 1601 Mercer Road  
**City:** Lexington **State:** Kentucky **Zip Code:** 40511  
**Email:** (if individual) \_\_\_\_\_  
**Phone:** (859) 243-8000

### Technical Contact

**Name:** Mr. Lawrence Wright  
**Title:** Safety, Health & Environmental Manager  
**Mailing Address:** **Street or P.O. Box:** 1601 Mercer Road  
**City:** Lexington **State:** Kentucky **Zip Code:** 40511  
**Email:** lawrence.wright@se.com  
**Phone:** (859) 243-8082

### Air Permit Contact for Source

**Name:** Nicole Galavotti, P.E.  
**Title:** Principal/Sr. Environmental Engineer  
**Mailing Address:** **Street or P.O. Box:** 948 Floyd Dr.  
**City:** Lexington **State:** Kentucky **Zip Code:** 40505  
**Email:** nicole\_galavotti@shieldmw.com  
**Phone:** (859) 294-5155 ext. 105

**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**

<b>Current Status:</b>	<input type="checkbox"/> Title	<input checked="" type="checkbox"/> Conditional Major	<input type="checkbox"/> State-Origin	<input type="checkbox"/> General Permit	<input type="checkbox"/> Registration	<input type="checkbox"/> None
	<input type="checkbox"/> Name Change	<input type="checkbox"/> Initial Registration	<input type="checkbox"/> Significant Revision	<input type="checkbox"/> Administrative Permit Amendment		
<b>Requested Action:</b> <i>(check all that apply)</i>	<input checked="" type="checkbox"/> Renewal Permit	<input type="checkbox"/> Revised Registration	<input type="checkbox"/> Minor Revision	<input type="checkbox"/> Initial Source-wide Operating Permit		
	<input type="checkbox"/> 502(b)(10)Change	<input type="checkbox"/> Extension Request	<input type="checkbox"/> Addition of New Facility	<input type="checkbox"/> Portable Plant Relocation Notice		
	<input type="checkbox"/> Revision	<input type="checkbox"/> Off Permit Change	<input type="checkbox"/> Landfill Alternate Compliance Submittal	<input type="checkbox"/> Modification of Existing Facilities		
	<input type="checkbox"/> Ownership Change	<input type="checkbox"/> Closure				
<b>Requested Status:</b>	<input type="checkbox"/> Title	<input checked="" type="checkbox"/> Conditional Major	<input type="checkbox"/> State-Origin	<input type="checkbox"/> PSD	<input type="checkbox"/> NSR	<input type="checkbox"/> Other: _____

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

<b>Pollutant:</b>	<b>Requested Limit:</b>	<b>Pollutant:</b>	<b>Requested Limit:</b>
<input type="checkbox"/> Particulate Matter	_____	<input type="checkbox"/> Single HAP	_____
<input checked="" type="checkbox"/> Volatile Organic Compounds (VOC)	90 TPY	<input type="checkbox"/> Combined HAPs	_____
<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) \_\_\_\_\_

**For Modifications:**

**Proposed Start Date of Modification:** (MM/YYYY) \_\_\_\_\_

**Proposed Operation Start-Up Date:** (MM/YYYY) \_\_\_\_\_

**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.**

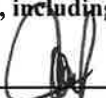
**Section AI.5 Other Required Information**

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 buildings, 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 AI.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  
 \_\_\_\_\_  
 Jorge Luis Romero Avila  
 \_\_\_\_\_  
 Type or Printed Name of Signatory

\_\_\_\_\_  
 06/26/2023  
 \_\_\_\_\_  
 Date  
 \_\_\_\_\_  
 Plant Manager  
 \_\_\_\_\_  
 Title of Signatory

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