



July 29, 2024

Division of Air Quality  
Florence Regional Office  
8020 Veterans Memorial Drive, Suite 110  
Florence, Kentucky 41042

**RE: Permit No. F-19-033 R1 Renewal Application  
Greif Packaging, LLC (Source AI No. 272)  
7425 Industrial Rd., Florence, Kentucky 41042**

To whom it may concern,

Greif Packaging, LLC (Greif) is submitting a permit renewal application for Synthetic Minor Permit No. F-19-033 R1. The permit renewal application package will be submitted electronically through the Kentucky Energy and Environment Cabinet's (EEC) electronic submittal system E-Forms. Greif is submitting this permit application to fulfill permit condition no. Section G 2.a. Per conversation with the Kentucky EEC air compliance personnel, since there are no changes to the current permit, only form DEP7007AI and a cover letter must accompany the online application.

If you have any questions or want additional clarification please contact Dan Glazer at (614) 202-4484 or by email at [Daniel.Glazer@greif.com](mailto:Daniel.Glazer@greif.com).

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Sincerely,

A handwritten signature in black ink, appearing to read "Ricardo Goldenberg", is written over a large, stylized, circular scribble.

Ricardo Goldenberg  
Vice President North America



Classification (SIC) Category:		Metal Drum Manufacturing	Primary SIC #:	3412
Briefly discuss the type of business conducted at this site:		Greif manufacturers and coats drums		
Description of Area Surrounding Source:	<input type="checkbox"/> Rural Area	<input checked="" type="checkbox"/> Industrial Park	<input type="checkbox"/> Residential Area	Is any part of the source located on federal land? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Urban Area	<input type="checkbox"/> Industrial Area	<input type="checkbox"/> Commercial Area	
Approximate distance to nearest residence or commercial property:		1400 ft	Property Area:	24.3
		Is this source portable?		<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>				
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 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:** Ricardo Goldenberg

**Title: (if individual)** Vice President North America

**Mailing Address:** **Street or P.O. Box:** 7425 Industrial Road  
**City:** Florence **State:** Kentucky **Zip Code:** 41042

**Email: (if individual)** ricardo.goldenberg@greif.com

**Phone:** (859) 282-9988

**Technical Contact**

**Name:** Daniel Glazer

**Title:** Environmental Specialist

**Mailing Address:** **Street or P.O. Box:** 366 Greif Parkway  
**City:** Delaware **State:** Ohio **Zip Code:** 43015

**Email:** Daniel.Glazer@greif.com

**Phone:** (614) 202-4484

**Air Permit Contact for Source**

**Name:** Daniel Glazer

**Title:** Environmental Specialist

**Mailing Address:** **Street or P.O. Box:** 366 Greif Parkway  
**City:** Delaware **State:** Ohio **Zip Code:** 43015

**Email:** Daniel.Glazer@greif.com

**Phone:** (614) 202-4484

**Section AI.3: Owner Information**

Owner same as applicant

Name: Greif, Inc.

Title:

Mailing Address: Street or P.O. Box: 366 Greif Parkway  
City: Delaware State: Ohio Zip Code: 43015

Email:

Phone: (740) 549-6000

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

Name	Position
N/A	

**Section AI.4: Type of Application**

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

**Requested Action:**  
(check all that apply)

Name Change       Initial Registration       Significant Revision       Administrative Permit Amendment

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 V     Conditional Major     State-Origin       PSD       NSR       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 checked="" type="checkbox"/> Single HAP	<u>9 tons/yr (Current Limit)</u>
<input checked="" type="checkbox"/> Volatile Organic Compounds (VOC)	<u>99 tons/yr (Current Limit)</u>	<input checked="" type="checkbox"/> Combined HAPs	<u>22.5 tons/yr (Current Limit)</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:** \_\_\_\_\_ **Proposed Operation Start-Up Date:** (MM/YYYY) \_\_\_\_\_  
(MM/YYYY)

**For Modifications:**

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

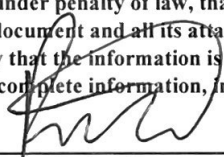
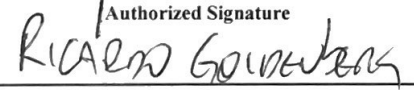
**Section AI.5 Other Required Information**

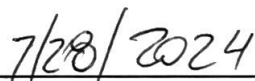
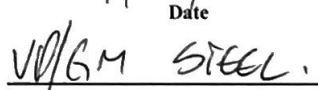
Indicate the documents attached as part of this application:

- |  |  |
|--|--|
| <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  
  
\_\_\_\_\_  
Type or Printed Name of Signatory

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Title of Signatory

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

**Section AI.7: Notes, Comments, and Explanations**

Current Synthetic Minor limits are not being adjusted, this renewal will not change any of the current permit limitations.