



December 29, 2020

Division for Air Quality
Permit Review Branch
200 Fair Oaks Lane, 1st Floor
Frankfort, KY 40601
502-564-3999 ext. 4485
Attn: Mr. Jonathon Hughes

Re: McKechnie Vehicle Components
Source ID: 21-113-00017
AI #: 2297
Permit V-15-043 R3
801 John C. Watts
Nicholasville, KY 40356

Mr. Hughes / DAQ Personnel,

MVC is submitting the DEP7007AI Form Application for our Title V Permit renewal.

Please note that the form is part of the submittal in Kentucky EEC eForms data base.

Thank you for our permit renewal request, and note if you need anything that my contact information is below.

Best Regards,

Les Wilson
EHS MGR
MVC
(859) 887-6264

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: MVC

KY EIS (AFS) #: 21- 113-00017

Permit #: V-15-043 R3

Agency Interest (AI) ID: 2297

Date: 7/16/2020

Section AI.1: Source Information

Physical Location	Street:	<u>801 John C. Watts Dr.</u>		
Address:	City:	<u>Nicholasville</u>	County:	<u>Jessamine</u>
			Zip Code:	<u>40356</u>
Mailing Address:	Street or P.O. Box:	<u>801 John C. Watts Dr.</u>		
	City:	<u>Nicholasville</u>	State:	<u>Kentucky</u>
			Zip Code:	<u>40356</u>

Standard Coordinates for Source Physical Location

Longitude: 51 (decimal degrees) **Latitude:** 37 (decimal degrees)

Primary (NAICS) Category: 3363 **Primary NAICS #:** 336390

Classification (SIC) Category: 3714

Primary SIC #: 3714

Briefly discuss the type of business conducted at this site:

Injection molding, paint and plating of automotive interior and exterior components.

Description of Area Surrounding Source: Rural Area Industrial Park Residential Area Urban Area Industrial Area Commercial Area

Is any part of the source located on federal land? Yes No

Number of Employees: 325

Approximate distance to nearest residence or commercial property: on southern property bou

Property Area: Approx: 16 acres

Is this source portable? Yes No

What other environmental permits or registrations does this source currently hold or need to obtain in Kentucky?

NPDES/KPDES: Currently Hold Need N/A

Solid Waste: Currently Hold Need N/A

RCRA: Currently Hold Need N/A

UST: Currently Hold Need N/A

Type of Regulated Waste Activity: Mixed Waste Generator Generator Recycler Other: _____ U.S. Importer of Hazardous Waste Transporter Treatment/Storage/Disposal Facility N/A

Section A1.2: Applicant Information

Applicant Name: Les Wilson
Title: (if individual) EHS MGR.
Mailing Address: **Street or P.O. Box:** 801 John C. Watts Dr.
City: Nicholasville **State:** Kentucky **Zip Code:** 40356
Email: (if individual) lwilson@mvcusa.com
Phone: 859-887-6264

Technical Contact

Name: Les Wilson
Title: EHS MGR.
Mailing Address: **Street or P.O. Box:** 801 John C. Watts Dr.
City: Nicholasville **State:** Kentucky **Zip Code:** 40356
Email: lwilson@mvcusa.com
Phone: 859-887-6264

Air Permit Contact for Source

Name: Les Wilson
Title: EHS MGR.
Mailing Address: **Street or P.O. Box:** 801 John C. Watts Dr.
City: Nicholasville **State:** Kentucky **Zip Code:** 40356
Email: lwilson@mvcusa.com
Phone: 859-887-6264

Section AI.3: Owner Information

Owner same as applicant

Name: Mike and Linda Torakis

Title: Board and CEO

Mailing Address: **Street or P.O. Box:** 27087 Gratiot Ave. Floor 2
City: Roseville **State:** Michigan **Zip Code:** 48066

Email: ltorakis@mvcusa.com

Phone: 586-491-2602

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 V 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 V 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 type="checkbox"/> Single HAP	_____
<input type="checkbox"/> Volatile Organic Compounds (VOC)	_____	<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: **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 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 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 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.

Les Wilson

Authorized Signature

7/16/2020

Date

Les Wilson

Type or Printed Name of Signatory

EHS MGR.

Title of Signatory

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

