



December 6, 2022

Division for Air Quality  
200 Fair Oaks Lane, 1<sup>st</sup> Floor  
Frankfort, KY 40601

Re: **Title V Permit Renewal Application for Safety-Kleen Systems, Inc.**  
**Source ID: 21-103-00005**  
**Source A.I. #: 1854**

Dear Sir/Madam:

In accordance with 401 KAR 52:020 Section 4(2)(c), Safety-Kleen is providing only the information that is new or different from the most recent source-wide permit application and the certification included in the DEP7007AI Form as to the truth, accuracy and completeness of our application based on information and belief formed after reasonable inquiry.

Since there are no changes being requested, Safety-Kleen is requesting renewal of the most recent source-wide permit application.

If you have any questions or comments regarding this submittal, please contact me at (630) 854-2549.

Sincerely,

James R. Laubsted  
Sr. Environmental Compliance Manager

**Commonwealth of Kentucky  
Natural Resources & Environmental Protection Cabinet  
Department for Environmental Protection**

**Division for Air Quality  
200 Fair Oaks Lane, 1<sup>st</sup> Floor  
Frankfort, Kentucky 40601**

<b>DEP7007AI</b>
<b>Administrative Information</b>
<i>Enter if known</i> AFS Plant ID# 104-1780-0005
<b>Agency Use Only</b>
Date Received
Log#
Permit#

<b>PERMIT APPLICATION</b>
The completion of this form is required under Regulations 401 KAR 52:020, 52:030, and 52:040 pursuant to KRS 224. Applications are incomplete unless accompanied by copies of all plans, specifications, and drawings requested herein. Failure to supply information required or deemed necessary by the division to enable it to act upon the application shall result in denial of the permit and ensuing administrative and legal action. Applications shall be submitted in triplicate.

**1) APPLICATION INFORMATION**

Note: The applicant must be the owner or operator. (The owner/operator may be individual(s) or a corporation.)

**Name:** Safety-Kleen Systems, Inc. - Smithfield Recycle Center

**Title:** \_\_\_\_\_ **Phone:** (502) 845-2453

*(If applicant is an individual)*

**Mailing Address:** Safety-Kleen Systems, Inc.  
**Company**

**Street or P.O. Box:** 3700 LaGrange Road

**City:** Smithfield **State:** KY **Zip Code:** 40068

**Is the applicant (check one):**  Owner  Operator  Owner & Operator  Corporation/LLC\*  LP\*\*

\* If the applicant is a Corporation or a Limited Liability Corporation, submit a copy of the current Certificate of Authority from the Kentucky Secretary of State.  
 \*\* If the applicant is a Limited Partnership, submit a copy of the current Certificate of Limited Partnership from the Kentucky Secretary of State.

**Person to contact for technical information relating to application:**

**Name:** James R. Laubsted

**Title:** Sr. Environmental Compliance Manager **Phone:** (630) 854-2549

**2) OPERATOR INFORMATION**

Note: The applicant must be the owner or operator. (The owner/operator may be individual(s) or a corporation.)

**Name:** Same as applicant

**Title:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
**Company**

**Street or P.O. Box:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**3) TYPE OF PERMIT APPLICATION**

For new sources that currently *do not* hold any air quality permits in Kentucky and are required to obtain a permit prior to construction pursuant to 401 KAR 52:020, 52:030, or 52:040.

Initial Operating Permit (the permit will authorize both construction and operation of the new source)

Type of Source (Check all that apply):  Major  Conditional Major  Synthetic Minor  Minor

For existing sources that do not have a source-wide Operating Permit required by 401 KAR 52:020, 52:030, or 52:040.

Type of Source (Check all that apply):  Major  Conditional Major  Synthetic Minor  Minor

(Check one only)

Initial Source-wide Operating Permit  Construction of New Facilities at Existing Plant

Construction of New Facilities at Existing Plant  Modification of Existing Facilities at Existing Plant

Other (explain) \_\_\_\_\_

For existing sources that currently have a source-wide Operating Permit.

Type of Source (Check all that apply):  Major  Conditional Major  Synthetic Minor  Minor

Current Operating Permit # \_\_\_\_\_

Administrative Revision (describe type of revision requested, e.g. name change): \_\_\_\_\_

Permit Renewal  Significant Revision  Minor Revision

Addition of New Facilities  Modification of Existing Facilities

For all construction and modification requiring a permit pursuant to 401 KAR 52:020, 52:030, or 52:040.

Proposed Date for Start  
of Construction or Modification: \_\_\_\_\_

Proposed date for  
Operation Start-up: \_\_\_\_\_

**4) SOURCE INFORMATION**

Source Name: Safety-Kleen Systems, Inc. - Smithfield Recycle Center

Source Street Address: 3700 LaGrange Road

City: Smithfield Zip Code: 40068 County: Henry

Primary Standard Industrial

Classification (SIC) Category: Refuse systems, recycling, waste materials Primary SIC #: 4953

Property Area  
(Acres or Square Feet): 104 acres Number of  
Employees: 110

Description of Area Surrounding Source (check one):

Commercial Area  Residential Area  Industrial Area  Industrial Park  Rural Area  Urban Area

Approximate Distance to Nearest

Residence or Commercial Property: 1900 feet

UTM or Standard Location Coordinates: (Include topographical map showing property boundaries)

UTM Coordinates: Zone \_\_\_\_\_ Horizontal (km) \_\_\_\_\_ Vertical (km) \_\_\_\_\_

Standard Coordinates: Latitude 38 Degrees 26 Minutes 02 Seconds

Longitude 085 Degrees 13 Minutes 53 Seconds

**4) SOURCE INFORMATION (CONTINUED)**

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

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

KPDES Discharge Permit  
RCRA Part B Permit  
PCB Storage Permit

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

None

**5) OTHER REQUIRED INFORMATION**

Indicate the type(s) and number of forms attached as part of this application.

- |  |  |
|--|--|
| <p>___ DEP7007A Indirect Heat Exchanger, Turbine, Internal Combustion Engine</p> <p>___ DEP7007B Manufacturing or Processing Operations</p> <p>___ DEP7007C Incinerators &amp; Waste Burners</p> <p>___ DEP7007F Episode Standby Plan</p> <p>___ DEP7007J Volatile Liquid Storage</p> <p>___ DEP7007K Surface Coating or Printing Operations</p> <p>___ DEP7007L Concrete, Asphalt, Coal, Aggregate, Feed, Corn, Flour, Grain, &amp; Fertilizer</p> <p>___ DEP7007M Metal Cleaning Degreasers</p> <p>___ DEP7007N Emissions, Stacks, and Controls Information</p> <p>___ DEP7007P Perchloroethylene Dry Cleaning Systems</p> | <p>___ DEP7007R Emission Reduction Credit</p> <p>___ DEP7007S Service Stations</p> <p>___ DEP7007T Metal Plating &amp; Surface Treatment Operations</p> <p>___ DEP7007V Applicable Requirements &amp; Compliance Activities</p> <p>___ DEP7007Y Good Engineering Practice (GEP) Stack Height Determination</p> <p>___ DEP7007AA Compliance Schedule for Noncomplying Emission Units</p> <p>___ DEP7007BB Certified Progress Report</p> <p>___ DEP7007CC Compliance Certification</p> <p>___ DEP7007DD Insignificant Activities</p> |
|--|--|

Check other attachments that are part of this application.

- | <u>Required Data</u>  | <u>Supplemental Data</u>   |
|---|--|
| <input type="checkbox"/> Map or Drawing Showing Location            | <input type="checkbox"/> Stack Test Report   |
| <input type="checkbox"/> Process Flow Diagram and Description       | <input type="checkbox"/> Certificate of Authority from the Secretary of State (for Corporations and Limited Liability Companies) |
| <input type="checkbox"/> Site Plan Showing Stack Data and Locations | <input type="checkbox"/> Certificate of Limited Partnership from the Secretary of State (for Limited Partnerships)               |
| <input type="checkbox"/> Emission Calculation Sheets                | <input type="checkbox"/> Claim of Confidentiality (See 400 KAR 1:060)  |
| <input type="checkbox"/> Material Safety Data Sheets (MSDS)         | <input type="checkbox"/> Other (Specify) _____   |

Indicate if you expect to emit, in any amount, hazardous or toxic materials or compounds or such materials into the atmosphere from any operation or process at this location.

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Pollutants regulated under 401 KAR 57:002 (NESHAP) | <input checked="" type="checkbox"/> Pollutants listed in 401 KAR 63:060 (HAPS) |
| <input type="checkbox"/> Pollutants listed in 40 CFR 68 Subpart F [112(r) pollutants]  | <input type="checkbox"/> Other   |

Has your company filed an emergency response plan with local and/or state and federal officials outlining the measures that would be implemented to mitigate an emergency release?

Yes     No

Check whether your company is seeking coverage under a permit shield. If "Yes" is checked, applicable requirements must be identified on Form DEP7007V. Identify any non-applicable requirements for which you are seeking permit shield coverage on a separate attachment to the application.

Yes     No     A list of non-applicable requirements is attached

**6) OWNER INFORMATION**

Note: If the applicant is the owner, write "same as applicant" on the name line.

Name: Same as applicant

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Company \_\_\_\_\_

Street or P.O. Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

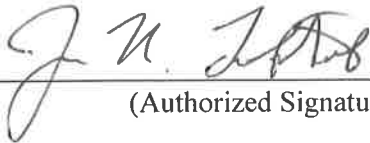
List names of owners and officers of your company who have an interest in the company of 5% or more.

<u>Name</u>	<u>Position (owner, partner, president, CEO, treasurer, etc.)</u>
None	

(attach another sheet if necessary)

**7) 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.

BY:   
(Authorized Signature)

December 6, 2022  
(Date)

James R. Laubsted  
(Typed or Printed Name of Signatory)

Sr. Compliance Manager  
(Title of Signatory)

## 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: Safety-Kleen Systems, Inc. - Smithfield Recycle Center

KY EIS (AFS) #: 21- 103-00005

Permit #: V-17-045

Agency Interest (AI) ID: 1854

Date: 1/3/2022

**Section AI.1: Source Information**

Physical Location	Street:	<u>3700 LaGrange Road</u>		
Address:	City:	<u>Smithfield</u>	County:	<u>Henry</u>
			Zip Code:	<u>40068</u>
Mailing Address:	Street or P.O. Box:	<u>3700 LaGrange Road</u>		
	City:	<u>Smithfield</u>	State:	<u>KY</u>
			Zip Code:	<u>40068</u>

**Standard Coordinates for Source Physical Location**

Longitude: 085° 13' 53" (decimal degrees)      Latitude: 38° 26' 02" (decimal degrees)

Primary (NAICS) Category: Hazardous Waste Treatment and Disposal      Primary NAICS #: 562211

<b>Classification (SIC) Category:</b>		Refuse systems, recycling, waste materials		<b>Primary SIC #:</b> 4953	
<b>Briefly discuss the type of business conducted at this site:</b>		The facility blends hazardous wastes with fuel value into hazardous waste fuels that can be reused as a fuel at offsite facilities.			
<b>Description of Area Surrounding Source:</b>	<input checked="" 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 type="checkbox"/> Industrial Area	<input type="checkbox"/> Commercial Area		<input checked="" type="checkbox"/> No
<b>Approximate distance to nearest residence or commercial property:</b> 1900 feet		<b>Property Area:</b> 104 acres		<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		
<b>Solid Waste:</b>	<input checked="" type="checkbox"/> Currently Hold	<input type="checkbox"/> Need	<input 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 checked="" type="checkbox"/> U.S. Importer of Hazardous Waste	<input checked="" type="checkbox"/> Transporter	<input checked="" type="checkbox"/> Treatment/Storage/Disposal Facility	<input type="checkbox"/> N/A	

**Section AI.2: Applicant Information**

**Applicant Name:** Safety-Kleen Systems, Inc. - Smithfield Recycle Center

**Title:** (if individual) \_\_\_\_\_

**Mailing Address:** **Street or P.O. Box:** 3700 LaGrange Road  
**City:** Smithfield **State:** KY **Zip Code:** 40068

**Email:** (if individual) \_\_\_\_\_

**Phone:** (502) 845-2453

**Technical Contact**

**Name:** James Laubsted

**Title:** Sr. Environmental Compliance Manager

**Mailing Address:** **Street or P.O. Box:** 3700 LaGrange Road  
**City:** Smithfield **State:** KY **Zip Code:** 40068

**Email:** laubstedj@cleanharbors.com

**Phone:** 630-854-2549

**Air Permit Contact for Source**

**Name:** James Laubsted

**Title:** Sr. Environmental Compliance Manager

**Mailing Address:** **Street or P.O. Box:** 3700 LaGrange Road  
**City:** Smithfield **State:** KY **Zip Code:** 40068

**Email:** laubstedj@cleanharbors.com

**Phone:** 630-854-2549



**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 A1.4: Type of Application**

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

Name Change       Initial Registration       Significant Revision                       Administrative Permit Amendment

**Requested Action:**       Renewal Permit       Revised Registration       Minor Revision                       Initial Source-wide Operating Permit  
*(check all that apply)*

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 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 AI.5 Other Required Information**

**Indicate the documents attached as part of this application:**

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

**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

1/3/23  
\_\_\_\_\_  
Date

James R. Laubsted  
\_\_\_\_\_  
Type or Printed Name of Signatory

Sr. Environmental Compliance Mgr.  
\_\_\_\_\_  
Title of Signatory

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





December 6, 2022

KY Division for Air Quality  
ATTN: Permit Support Section – 2<sup>nd</sup> Floor  
300 Sower Blvd.  
Frankfort, KY 40601

Re: **Title V Permit Renewal Application for Safety-Kleen Systems, Inc.**  
**Source ID: 21-103-00005**  
**Source A.I. #: 1854**

Dear Sir/Madam:

In accordance with 401 KAR 52:020 Section 4(2)(c), Safety-Kleen is providing only the information that is new or different from the most recent source-wide permit application and the certification included in the DEP7007AI Form as to the truth, accuracy and completeness of our application based on information and belief formed after reasonable inquiry.

Since there are no changes being requested, Safety-Kleen is requesting renewal of the most recent source-wide permit application.

If you have any questions or comments regarding this submittal, please contact me at (630) 854-2549.

Sincerely,

James R. Laubsted  
Sr. Environmental Compliance Manager

**From:** [Laubsted, James](#)  
**To:** [Patil, Durga D \(EEC\)](#)  
**Cc:** [Bittner, Zachary P \(EEC\)](#)  
**Subject:** RE: AI 1854 renewal application queries  
**Date:** Monday, December 2, 2024 2:12:28 PM  
**Attachments:** [DEP 7007V form.xls](#)

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**This Message Originated from Outside the Organization**

This Message Is From an External Sender.

[Report Suspicious](#)

See below.

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**From:** Patil, Durga D (EEC) <Durga.Patil@ky.gov>  
**Sent:** Saturday, November 30, 2024 10:03 AM  
**To:** Laubsted, James <laubstedj@cleanharbors.com>  
**Cc:** Bittner, Zachary P (EEC) <Zachary.Bittner@ky.gov>  
**Subject:** AI 1854 renewal application queries

Good morning:

I am working on the renewal permit application for the above facility in Smithfield, KY and had a couple of questions:

1. Since the application was received in end of 2022, would like to confirm that there were no changes at the facility since that submittal. **There have been no changes.**
2. With regards to emission unit EP 022 pipeline equipment, the only items listed in the previous permit are flanges, valves, pumps and open ended line. Would like to know if there any pressure relief valves in gas/vapors service subject to 40 CFR 61.242-4. **Each tank has a conservation vent (opens when the tank is filled) and an emergency vent (would only open in an emergency situation).**
3. With regards to insignificant activities – 500 gallon gasoline storage tank, would like to know what it is used for.... If for fueling vehicles, then is there a dispensing station subject to federal regulations? **It's used for equipment that need gasoline, principally power washers.**
4. The AI form of the recent renewal application identifies a request for permit shield, however I do not see an attachment citing the non-applicable regulation for which permit shield is being requested. I could not locate the attachment in previous applications submitted to the Division and available in our database. Please provide a list of regulations which are non-applicable for which a permit shield is being requested. **I am unsure of what a permit shield was requested for because it was before my time. I did the previous renewal also, but there were no changes then either. I did find the attached DEP7007V.**

Once I receive a response, and complete drafting the permit package, I will send you a courtesy predraft for review of the updates made from the previous permit.

Thanks

*Durga Patil*

Environmental Scientist Consultant

Permit Review Branch

Department for Environmental Protection

Division for Air Quality

300 Sower Blvd

Frankfort, KY 40601

Phone: (502)- 782-6730