From: <u>Air.Pollution Control</u>
To: <u>APC Permitting</u>

Subject: FW: CN_0730 (APC 100)/93-0118 **Date:** Tuesday, November 15, 2022 1:13:18 PM

Attachments: 1071 001.pdf

From: Tidwell, Dusty <d.tidwell@hormann.us> **Sent:** Tuesday, November 15, 2022 10:56 AM

To: Air.Pollution Control <Air.Pollution.Control@tn.gov> **Cc:** David S. Bradshaw <David.S.Bradshaw@tn.gov>

Subject: [EXTERNAL] CN_0730 (APC 100)

*** This is an EXTERNAL email. Please exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email - STS-Security. ***

CN-0730 (APC 100) Facility Indication permit From Hormann LLC 000932606 for the 003 Polyurethane Foam Injection, Heat Tunnel, and Sawing Operation 450 Airport Road Sparta TN 38583. Thank you.

Facility ID # 93-0118 Permit Number 974979

Regards,

Dusty Tidwell

Maintenance Manager

Main: +1 931 345-2050 ext. 403

Direct: 1-931-316-6632

Email: <u>d.tidwell@hormann.us</u>

Web: <u>www.hormann.us</u>

Hörmann LLC - Sparta Manufacturing Facility 450 Airport Road Sparta, Tennessee 38583



DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF AIR POLLUTION CONTROL

APC 100

William R. Snodgrass Tennessee Tower 312 Rosa L. Parks Avenue, 15th Floor, Nashville, TN 37243 Telephone: (615) 532-0554, Email: Air.Pollution.Control@TN.gov

NON-TITLE V PERMIT APPLICATION FACILITY IDENTIFICATION

Type or print and submit. Attach appropriate source description forms.								
SITE INFORMATION								
1. Organization's legal name and SOS control number [as registered with the TN Secretary of State (SOS)] Hormann 000932606								
2.	2. Site name (if different from legal name)							
3.	Is a construction permit application fee being submitted? Yes No vertical No v							
	Site address (St./Rd. Airport Road	/Hwy.)		County name White				
City Zip code Sparta 38583						5. NAICS or SIC code 332321		
6.	Site location Latitude (in lat. /long.) Latitude			Longitude 85.52171 W				
	CONTACT INFORMATION (RESPONSIBLE PERSON)							
7. Responsible person/Authorized contact Dusty Tidwell						Phone number with area code 931-316-6632		
Mailing address (St./Rd./Hwy.) 450 Airort Road					Fax number v NA	Fax number with area code NA		
,			State Zip code TN 38583		Email address d.tidwell@hormann.us			
		CONT	ACT INF	ORM	ATION (TEC	HNICAL)		
8. Principal technical contact Dusty Tidwell						Phone number with area code 931-316-6632		
Mailing address (St./Rd./Hwy.) 450 Air Port Road					Fax number with area code NA			
' '			State TN		Zip code 38583	Email address d.tidwell@hor		
CONTACT INFORMATION (BILLING)								
9. Billing contact Tina Jones					Phone number with area code 932-345-2028			
Mailing address (St./Rd./Hwy.) 450 Air Port Road						Fax number with area code NA		
City Sparta					Zip code 38583	Email address t.jones@horm		

AID CONTAMINANT SOURCE(S) INFORMATION							
AIR CONTAMINANT SOURCE(S) INFORMATION 10. Description of air contaminant source(s) and Unique Source ID(s). List, identify, and briefly describe process emission sources, fuel burning installations, and incinerators that are contained in this application and include a Unique Source ID for each source. The Unique Source ID is a name/number/letter, which uniquely identifies the air contaminant source(s), like Boiler #1, Paint Line #1, Engine #1, etc. (see instructions for more details)							
Polyurethane Foam Injection, Heat Tunnel, and Sawing Operation: Polyurethane foam is injected into a Cavity between two door panels resulting in a release of VOC emissions. Foam is cured in a NG fired Heat Tunnel. Sections are cut in the sawing process and a Baghoused controls particulate emissions.							
11. Is the air contaminant source(s) in a nonattainment area? If "Yes", then minor source BACT must be addressed. Yes No							
12. Normal operation:	Hours/Day 10	Days 5	/Week		Weeks/Year 52	Days/Year 260	
13. Percent annual throughput	Dec. – Feb. 25	Marc 25	th – May	/	June – August 25	Sept. – Nov. 25	
	TYPE OF PERMI	T REO	UESTED	(check a	ppropriate box)		
14. Operating permit	Date construction star 10-05-2020			ompleted	pleted Date of ownership change (if applicable)		
	Last permit number(s)			Emission Source Reference Number(s)			
Construction permit	Last permit number(s)			Emission Source Reference Number(s)			
If you chose Construction permit above, then choose either New Construction, Modification, or Location Transfer							
New Construction Starting date C					Completion date		
Modification D	dification Date modification started or will start			Date completed or will complete			
Location Transfer	cation Transfer Transfer date			Address of last location			

15.	Describe changes that have been made to this equipment or operation(s) since the last construction					
	or operating permit application:					
NA						
16.	Comments					
10023		CICNATURE				
SIGNATURE SIGNATURE						
Based upon information and belief formed after a reasonable inquiry, I, as the responsible person of the above						
mentioned facility, certify that the information contained in this application is accurate and true to the best of my						
knowledge. As specified in TCA Section 39-16-702(a)(4), this declaration is made under penalty of perjury.						
17. 9	Signature (application must be signed	Date				
	(1) - 7·1/11		11-15-2022			
	Signaple name (hina av nyint)	Title	Phone number with area code			
3	Signer's name (type or print)	little	Phone number with area code			
D	usty Tidwell	Maintenance Manager	931-316-6632			
		The state of the s				