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Michigan Department Of Environmental Quality - Air Quality Division

RENEWABLE OPERATING PERMIT APPLICATION APR 12 2019
C-001: CERTIFICATION

MACES _____ MAERS _____

This information is required by Article II, Chapter 1, part 55 (Air Pollution Control) of P.A. 451 of 1994, as amended, and the Federal Clean Air Act of 1990. Failure to provide this information may result in civil and/or criminal penalties. Please type or print clearly.


This form is completed and included as part of Renewable Operating Permit (ROP) initial and renewal applications, notifications of change, amendments, modifications, and additional information.

Form Type C-001	SRN A9365
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Stationary Source Name AKWEL	
City Cadillac	County Wexford

SUBMITTAL CERTIFICATION INFORMATION	
1. Type of Submittal <i>Check only one box.</i>	
<input type="checkbox"/> Initial Application (Rule 210)	<input checked="" type="checkbox"/> Notification / Administrative Amendment / Modification (Rules 215/216)
<input type="checkbox"/> Renewal (Rule 210)	<input type="checkbox"/> Other, describe on AI-001
2. If this ROP has more than one Section, list the Section(s) that this Certification applies to _____	
3. Submittal Media <input checked="" type="checkbox"/> E-mail <input type="checkbox"/> FTP <input type="checkbox"/> Disk <input checked="" type="checkbox"/> Paper	
4. Operator's Additional Information ID - Create an Additional Information (AI) ID that is used to provide supplemental information on AI-001 regarding a submittal.	
AI	

CONTACT INFORMATION	
Contact Name Eric Vincke	Title Consultant
Phone number 231.933.5114	E-mail address etvincke@goslingczubak.com

This form must be signed and dated by a Responsible Official.				
Responsible Official Name Greg Spencer			Title General Manager	
Mailing address 603 West Seventh Street				
City Cadillac	State MI	ZIP Code 49601	County Wexford	Country U.S.A.
As a Responsible Official, I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this submittal are true, accurate and complete.				
 Signature of Responsible Official			4-9-19 Date	



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RENEWABLE OPERATING PERMIT M-001: RULE 215 CHANGE NOTIFICATION RULE 216 AMENDMENT/MODIFICATION APPLICATION

This information is required by Part 55, Air Pollution Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, and the Federal Clean Air Act of 1990. Failure to obtain a permit required by Part 55 may result in penalties and/or imprisonment.

1. SRN A9365	2. ROP Number MI-ROP-A9365-2012	3. County Wexford
4. Stationary Source Name AKWEL		
5. Location Address 603 West Seventh St.	6. City Cadillac	
<p>7. Submittal Type - <i>The submittal must meet the criteria for the box checked below. Check only one box. Attach a mark-up of the affected ROP pages for applications for Rule 216 changes.</i></p> <p><input type="checkbox"/> Rule 215(1) Notification of change. <i>Complete Items 8 – 10 and 14</i></p> <p><input type="checkbox"/> Rule 215(2) Notification of change. <i>Complete Items 8 – 10 and 14</i></p> <p><input type="checkbox"/> Rule 215(3) Notification of change. <i>Complete Items 8 – 11 and 14</i></p> <p><input type="checkbox"/> Rule 215(5) Notification of change. <i>Complete Items 8 – 10 and 14</i></p> <p><input checked="" type="checkbox"/> Rule 216(1)(a)(i)-(iv) Administrative Amendment. <i>Complete Items 8 – 10 and 14</i></p> <p><input type="checkbox"/> Rule 216(1)(a)(v) Administrative Amendment. <i>Complete Items 8 – 14. Results of testing, monitoring & recordkeeping must be submitted. See detailed instructions.</i></p> <p><input type="checkbox"/> Rule 216(2) Minor Modification. <i>Complete Items 8 – 12 and 14</i></p> <p><input type="checkbox"/> Rule 216(3) Significant Modification. <i>Complete Items 8 – 12 and 14, and provide any additional information needed on ROP application forms. See detailed instructions.</i></p> <p><input type="checkbox"/> Rule 216(4) State-Only Modification. <i>Complete Items 8 – 12 and 14</i></p>		
8. Effective date of the change. (MM/DD/YYYY) <i>See detailed instructions.</i> 01/22/2019		9. Change in emissions? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10. Description of Change - <i>Describe any changes or additions to the ROP, including any changes in emissions and/or pollutants that will occur. If additional space is needed, complete an Additional Information form (AI-001).</i> Official name change for facility. The official name of the facility is now: AKWEL Cadillac USA, Inc.		
11. New Source Review Permit(s) to Install (PTI) associated with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, enter the PTI Number(s) _____ - _____ - _____ - _____ - _____		
12. Compliance Status - <i>A narrative compliance plan, including a schedule for compliance, must be submitted using an AI-001 if any of the following are checked No.</i>		
a. Is the change identified above in compliance with the associated applicable requirement(s)?		<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Will the change identified above continue to be in compliance with the associated applicable requirement(s)?		<input type="checkbox"/> Yes <input type="checkbox"/> No
c. If the change includes a future applicable requirement(s), will timely compliance be achieved?		<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Operator's Additional Information ID - <i>Create an Additional Information (AI) ID for the associated AI-001 form used to provide supplemental information.</i> AI		
14. Contact Name Eric Vincke	Telephone No. 231.933.5114	E-mail Address etvincke@goslingczubak.com
15. This submittal also updates the ROP renewal application submitted on 02/22/2017 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A <i>(If yes, a mark-up of the affected pages of the ROP must be attached.)</i>		

NOTE: A CERTIFICATION FORM (C-001) SIGNED BY A RESPONSIBLE OFFICIAL MUST ACCOMPANY ALL SUBMITTALS



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Michigan Department of Environmental Quality
Air Quality Division
Cadillac District Office
120 W. Chapin Street
Cadillac, MI 49601-2158

MACES _____ MAERS _____
File _____

Attn: Caryn Owens

Project: Akwel Automotive- Name Change

Job No.: 2018607004

Date: April 11, 2019

Sending: Attached Under separate cover via _____

Copies	Date	Description
1	4-9-19	ROP Forms for name change

Remarks:

Caryn

Please find attached the C-001 and M-001 for the Akwel Automotive ROP to reflect the changes to the company name. Please call with any questions.


Eric Vincke
Project Scientist