

**DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**  
**RECOMMENDATION TO REVOKE AIR PERMIT MEMORANDUM**

Date: 9/11/2023

To: Joanne Smiddie-Brush, Section Chief  
Permits Administration Support Section  
Permits Branch  
Office of Air Quality

Thru: Janusz Johnson, Branch Chief  
Compliance and Enforcement  
Branch  
Office of Air Quality

From: Daniel Roos, Air Compliance Inspector  
Randy Hoffman, Section Chief  
Compliance and Enforcement Branch  
Office of Air Quality

Source Name: Southern Indiana Materials

Source ID: 051-03318

Source Location address: Sr 57 & CR 250 S Oakland City, IN

Operating Permit # to be revoked: 61-50

Based upon reviewing 326 IAC 2-1.1-9 and [method(s) to verify closure (on the Air Permit Revocation Supporting Documentation Log below)], the source is [permanently closed/never constructed] and the operating air permit for Southern Indiana Materials can be revoked. Please revoke the air permit and issue a Revocation and Notice of Decision.

☐ Revocation and Notice of Decision should be mailed to:

Name: none

Title:

Address:

City:

State:

Zip Code:

OR

☒ There is no person identified with the source to receive the Revocation. The Revocation should take the form of a Memo to File.

cc:

**Indiana Department of Environmental Management  
Office of Air Quality  
Air Permit Revocation Supporting Documentation Log**

|                    |                               |                       |             |
|--------------------|-------------------------------|-----------------------|-------------|
| <b>Source Name</b> | Southern Indiana<br>Materials | <b>OAQ Inspector</b>  | Daniel Roos |
| <b>Source ID</b>   | 051-03318                     | <b>Date of Review</b> | 9/11/2023   |

**Methods used to determine/verify source closure (Check all that apply.)**

|                                     | Method (From Step 3 in SOP)  | Verification  | Comments  |
|-------------------------------------|--|---|---|
| <input checked="" type="checkbox"/> | (a) Inspection/Site visit  | Inspection Date:  | 8/31/2023   |
| <input type="checkbox"/>            | (b) Corporate staff contact  | Contact Date:<br>Name:<br>Title:<br>Contact submitting information for Permit Revocation?<br>Other Comments | Yes <input type="checkbox"/><br>No <input type="checkbox"/> |
| <input type="checkbox"/>            | (c) Internet search (attach any article found)   | Date of Search:   |   |
| <input type="checkbox"/>            | (c) County Health Department   | Contact & Date:   |   |
| <input type="checkbox"/>            | (d) Secretary of State's website operating status  | Operating?  | Yes <input type="checkbox"/><br>No <input type="checkbox"/> |
| <input type="checkbox"/>            | (e) Commenced construction   | Commenced within 18 months?<br>Date of Issuance of Permit:  | Yes <input type="checkbox"/><br>No <input type="checkbox"/> |
| <input type="checkbox"/>            | (f) Disconnected phone number?   | Phone number:<br>Date verified  |   |
| <input type="checkbox"/>            | (f) Returned U.S. Mail/Email   | Document(s) type:<br>Date(s) of returned mail:  |   |
| <input type="checkbox"/>            | (g) Non-payment of permit fees   | Year(s) not paid  |   |
| <input type="checkbox"/>            | (h) Non-submittal of Emission Statements, Quarterly Report, Annual Compliance Certifications, Annual Notifications | Year(s) not submitted   |   |
| <input checked="" type="checkbox"/> | Other Information  | Previous Air Inspection   | July 13, 1995   |
| <input type="checkbox"/>            | Other Information  |   |   |

**Comments:**