Severstal
International

March 15, 2013

Ms. Wilhemina McLemore
Supervisor, Detroit Field Office
MDEQ, Air Quality Division
Cadillac Place, Suite 2-300
3058 West Grand Boulevard
Detroit, Michigan 48202-6058

Subject: Severstal Dearborn, LLC – Annual ROP Certification

Dear Ms. McLemore:

Attached is our annual ROP certification and semi-annual deviation reports for 2012.

Should you need additional information or wish to discuss this matter further, please contact me at (313) 845-3217.

Very truly yours,

James E. Earl, Manager
Environmental Engineering

Attachments:

ROP Certification
January 1 – June 30, 2012 Deviation Report
July 1 – December 31, 2012 Deviation Report

cc: USEPA, Region 5

Severstal Dearborn
14661 Rotunda Drive
P. O. Box 1699
Dearborn, MI 48120-1699

T: (313) 845-3217
F: (313) 337-9375
E: jim.earl@severstalna.com
www.severstalna.com

DEQ

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

RENEWABLE OPERATING PERMIT REPORT CERTIFICATION

Authorized by 1994 P.A. 451, as amended. Failure to provide this information may result in civil and/or criminal penalties.

Reports submitted pursuant to R 336.1213 (Rule 213), subrules (3)(c) and/or (4)(c), of Michigan's Renewable Operating Permit (ROP) program must be certified by a responsible official. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division upon request.

Source Name Severstal Dearborn, LLC County Wayne

Source Address 4001 Miller Road City Dearborn

AQD Source ID (SRN) A8640 ROP No. 199700004 ROP Section No. 1

Please check the appropriate box(es):

☒ **Annual Compliance Certification (Pursuant to Rule 213(4)(c))**

Reporting period (provide inclusive dates): From 01/01/12 To 12/31/12

☐ 1. During the entire reporting period, this source was in compliance with **ALL** terms and conditions contained in the ROP, each term and condition of which is identified and included by this reference. The method(s) used to determine compliance is/are the method(s) specified in the ROP.

☒ 2. During the entire reporting period this source was in compliance with all terms and conditions contained in the ROP, each term and condition of which is identified and included by this reference, **EXCEPT** for the deviations identified on the enclosed deviation report(s). The method used to determine compliance for each term and condition is the method specified in the ROP, unless otherwise indicated and described on the enclosed deviation report(s).

☒ **Semi-Annual (or More Frequent) Report Certification (Pursuant to Rule 213(3)(c))**

Reporting period (provide inclusive dates): From 07/01/12 To 12/31/12

☐ 1. During the entire reporting period, **ALL** monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred.

☒ 2. During the entire reporting period, all monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred, **EXCEPT** for the deviations identified on the enclosed deviation report(s).

☐ **Other Report Certification**

Reporting period (provide inclusive dates): From _____ To _____

Additional monitoring reports or other applicable documents required by the ROP are attached as described:

_____

_____

_____

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this report and the supporting enclosures are true, accurate and complete

Bruce L. Black	V. P. and General Manager	(313) 317-8955
Name of Responsible Official (print or type)	Title	Phone Number

Signature of Responsible Official — Date: 3/14/13

* Photocopy this form as needed.

EQP 5736 (Rev 11-04)

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

RENEWABLE OPERATING PERMIT DEVIATION REPORT

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This form may be submitted in conjunction with the Renewable Operating Permit Report Certification form (EQP 5736) to report deviations from all general conditions and special conditions in the Renewable Operating Permit (ROP) for which deviations required to be reported by R 336.1213 (Rule 213) subrule (3)(c) have occurred. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division, upon request. Items 1 - 8 must be completed for all deviations being reported.

Source Name: Severstal Dearborn, LLC County: Wayne

Source Address: 4001 Miller Road City: Dearborn

AQD Source ID (SRN): A8640 ROP No.: 199700004 ROP Section No.: 1

ROP Section Contact: James E. Earl Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGCBFCASTHOUSE	E-01.02 II.B.2	9/11/12	☒Yes ☐ No September 12,2012	Portion of one cast/ not longer than 1 - 2 hours

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
Photo received from MDEQ	Based upon photographic evidence it is possible that the casthouse roof monitor may have exceeded 20% opacity (6 min ave).

8. Reason for Deviation and Description of Corrective Action Taken
Photo received of the cast house taken on 9/11/12 showing dust coming from the casthouse. The root cause has been identified as a wet tap hole. The clay did not have time to dry between casts when using a single taphole. Severstal has reprogrammed the single taphole drill-out to drill 4.5 to 5 feet, then pause before continuing to drill, in order to heat up the clay so it can cure before the taphole is open.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
FGB&CCASTHOUSE	F-01.01 III.A.3.1	7/1/12 - 12/31/12	☐Yes ☒ No	6 monthly calculations

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Did not calculate PM-10, manganese, arsenic, and chromium VI emissions by the end of each calendar month from the casthouses.

8. Reason for Deviation and Description of Corrective Action Taken
The calculations for these emissions no longer apply since Permit 182-05B has newer calculations. Permit 182-05B conditions were included in the most recent ROP application.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
FGB&CCASTHOUSE	B-1 VI.3. F-01.01 VI.1. F-01.01 VI.3.	1/1/12 - 12/31/12	☐ Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Documentation of a number of inspections required by Severstal's Iron and Steel MACT operation and maintenance plan for C Blast Furnace Casthouse Baghouse have not been located sufficient to confirm that these inspections were completed. Daily monitoring of compressed air supply are missing from 1/1/12 - 8/15/12. Daily monitoring of cleaning cycles is missing for 87 days in the first half of the year and 4 days the second half of the year. Bag leak detection corrective actions have not been located. Weekly capture system inspections are missing for 18 weeks in the first half year and 12 weeks in the second half year. Weekly confirmation that dust is removed from hoppers has not been found. Monthly cleaning mechanism inspections were missing for April and May. Quarterly checks for leaks in tubesheets and bags, calibration of fan amperage and damper position and inspection of interior of baghouse are missing. Annual inspections of baghouse access doors and exterior have not been located.

8. Reason for Deviation and Description of Corrective Action Taken

Most data is collected and inspections are performed. It is believed that more inspections were completed than can be documented at this time. Certain inspections are known to have been done, but data retrieval has been hindered due to software and personnel issues. Severstal is working to improve the documentation and retrieval system.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGCBFCASTHOUSE	E-01.02 VI. 1.	1/1/12 - 12/31/12	☐Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Missing electronic data for damper position and fan amperage for 68% of 1st quarter, 43% of 2nd quarter, 20% of 3rd quarter, and 7% of 4th quarter.

8. Reason for Deviation and Description of Corrective Action Taken

A review of damper positions during the operations shows general agreement with the operation and maintenance plan. Dampers were within the range specified in the MACT operation and maintenance plan 98% to 100% (depending on which damper) of the time for all of 2012. Slight deviations can be the result of damper positions being captured while they were travelling between scenarios. The system complies with fan current settings 99% of the time for all of 2012. Compliance was based on data review of trended damper positions and fan amperage. Data was sampled at fifteen minute intervals per MACT requirement. This technique was successful in providing data for the casthouse baghouse at every scenario it encountered as well as to verify the existence of historical records. To protect against data loss in the future, Severstal plans to download data more frequently from the blast furnace data historian server.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGCBFCASTHOUSE	E-01.02 V.4. E-01.02 VI.1.	1/1/12 - 12/31/12	☐Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Documentation of a number of inspections required by Iron and Steel MACT have not been located as indicated in the deviation box above and on page 2.

8. Reason for Deviation and Description of Corrective Action Taken

Data is collected and many inspections are performed. It is believed that more inspections were completed than can be documented at this time. Certain inspections are known to have been done, but data retrieval has been hindered by software and personnel issues. Severstal is working to improve the documentation and retrieval system.

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Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
EGBOF	E-01.04 VI.1	4/11/12 - 4/16/12 4/28/12 - 5/1/12	Quarterly report dated July 30, 2012	171 hours

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Deviation from 10% 1-hour opacity limit required by Iron and Steel MACT.

8. Reason for Deviation and Description of Corrective Action Taken

See previously submitted BOF ESP COMS Q2 2012 report dated July 30, 2012. Severstal hired TRK Engineering in April 2012 and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and were completed on November 26, 2012. Severstal has hired a consultant to develop enhanced and more detailed operation and maintenance practices for the ESP. An updated plan has been developed and circulated to the EPA and DEQ for their review.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
EGBOF	E-01.04 VI.1	8/30/12 - 9/4/412 9/6/12 - 9/9/12	If Yes, Date Quarterly report dated October 30, 2012	141 hours

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Deviation from 10% 1-hour opacity limit required by Iron and Steel MACT.

8. Reason for Deviation and Description of Corrective Action Taken

See previously submitted BOF ESP COMS Q3 2012 report dated October 30, 2012. Severstal hired TRK Engineering in April 2012 and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and were completed on November 26, 2012. Severstal has hired a consultant to develop enhanced and more detailed operation and maintenance practices for the ESP. An updated plan has been developed and circulated to the EPA and DEQ for their review.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
EGBOF	General Condition 2.a.	8/25/12	If Yes, Date 10/5/12 and 10/26/12 NOV responses	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated September 13, 2012: 41% was the highest 6-minute average opacity from the ESP stack during the time of observation.

8. Reason for Deviation and Description of Corrective Action Taken

See NOV responses dated October 5, 2012 and October 26, 2012. On the date of the violation, repairs were in progress on the ESP. The AVC #5A tripped out and had to be reset. The major repairs to the ESP were completed as of November 26, 2012. Severstal has hired a consultant to develop enhanced and more detailed operation and maintenance practices for the ESP. An updated plan has been developed and circulated to the EPA and DEQ for their review.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
EGBOF	E-01.04 V.1.	3/1/12 - 11/26/13	8/27/12, 9/4/12, 10/5/12, 10/26/12, 2/20/13 NOV responses	9 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOVs dated 9/13/2012 and 1/30/2013: Alleged failure to properly install, maintain and operate the ESP.

8. Reason for Deviation and Description of Corrective Action Taken

See NOV responses dated August 27, 2012, September 4, 2012, October 5, 2012, October 26, 2012 and February 20, 2013.Severstal initially discovered problems with operation of the ESP in March of 2012. Severstal hired TRK Engineering in April 2012 and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and were completed on November 26, 2012. Severstal has hired a consultant to develop enhanced and more detailed operation and maintenance practices for the ESP. An updated plan has been developed and circulated to the EPA and DEQ for their review.

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ROP Section Contact: James E. Earl Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04.II.B.2	8/8/12	NOV response 9/4/12	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated August 14, 2012: 41% was the highest 3-minute average opacity from the BOF roof monitor.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV response dated September 4, 2012. The excess opacity resulted from restart of an oxygen blow after it had been aborted. Procedures have been revised to reduce the flow rate of oxygen and change the lance height to reduce emissions. The next roof monitor observation on 8/13/2012 had no roof monitor emissions above 20% 3-minute average.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04.II.B.2	7/27/12	NOV responses 8/27/12 and 9/4/12	3 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated July 31, 2012: 31% was the highest 3-minute average opacity from the BOF roof monitor.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated August 27, 2012 and September 4, 2012. It appears that the excess opacity resulted from the dumping of a desulf slag pot. It appears that the pour height of the desulf slag was higher than usual. Severstal has implemented a procedure to address pour height and pour rate to reduce emissions. The next roof monitor observation on 7/31/2012 had no roof monitor emissions above 20% 3-minute average.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No If Yes, Date	5. Duration of Deviation
EGBOF	General Condition 2.a	7/27/12	NOV responses 8/27/12 and 9/4/12	15 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated July 31, 2012: 42% was the highest 6-minute average opacity from the BOF ESP stack.

8. Reason for Deviation and Description of Corrective Action Taken

See NOV responses dated August 27, 2012 and September 4, 2012. During this time period, the ESP was in the process of being repaired. Severstal hired TRK Engineering in April 2012 and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and were completed on November 26, 2012. Severstal has hired a consultant to develop enhanced and more detailed operation and maintenance practices for the ESP. An updated plan has been developed and circulated to the EPA and DEQ for their review.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04.II.B.2	7/6/12	NOV response 8/9/12	3 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated July 19, 2012: 43% was the highest 3-minute average opacity at the BOF roof monitor.

8. Reason for Deviation and Description of Corrective Action Taken

See NOV response dated August 9, 2012. The excess opacity resulted from restart of an oxygen blow after it had been aborted. Initially procedures were revised to assure that the main exhaust damper is 100% opened to reduce fugitive emissions escaping from the BOF. The next roof monitor observation on 7/12/2012 had no roof monitor emissions above 20% 3-minute average.

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EGBOF	E-01.04 III.A.3.6	January to December 2012	☐Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Did not perform all preventative maintenance on the ESP as specified in the operation and maintenance plan for the ESP. Monthly inspections for checking pressure sensor vs. manometer and checking boiler hood for leaks not performed. Daily checks are made of steam usage, but not of steam flow.

8. Reason for Deviation and Description of Corrective Action Taken
On a going-forward basis the approach to inspections at the ESP has been thoroughly reviewed, revised and enhanced. An updated plan has been developed and circulated to the EPA and DEQ for their review.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	E-01.04 V.3.	8/1/12 -8/31/12	☐Yes ☒ No	31 days

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Precipitator dust was not wetted when moved in a covered truck.

8. Reason for Deviation and Description of Corrective Action Taken
ESP dust not wetted due to operator error. Operators have been retrained.

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EGBOF	E-01.04 V.3.	12/1/12 - 12/31/12	☐Yes ☒ No	31 days

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Precipitator dust was not wetted when moved in a covered truck.

8. Reason for Deviation and Description of Corrective Action Taken
ESP dust not wetted due to problems with water spray system. Water system has been repaired.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	General Conditions 2.a.	8/28/12	☐Yes ☒ No	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 30% from the BOF ESP stack.

8. Reason for Deviation and Description of Corrective Action Taken
During this time period, the ESP was in the process of being repaired. Severstal hired TRK Engineering in April 2012 and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and were completed on November 26, 2012. Severstal has hired a consultant to develop enhanced and more detailed operation and maintenance practices for the ESP. An updated plan has been developed and circulated to the EPA and DEQ for their review.

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

RENEWABLE OPERATING PERMIT DEVIATION REPORT

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Source Name: Severstal Dearborn, LLC County: Wayne

Source Address: 4001 Miller Road City: Dearborn

AQD Source ID (SRN): A8640 ROP No.: 199700004 ROP Section No.: 1

ROP Section Contact: James E. Earl Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	7/2/12		3 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min)limit

8. Reason for Deviation and Description of Corrective Action Taken
The emission occurred during a hot metal charge on B Vessel, which appeared to be performed quicker than normal. The operators have been re-instructed to follow the correct procedure for hot metal charging. The next roof monitor observation on 7/3/2012 had no roof monitor emissions above 20% 3-minute average.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	7/10/12	12/28/12 and 2/7/13 NOV responses	15 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min) limit.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated 12/28/12 and 2/7/13. Slag conditioner was added after tapping. The tapping damper was not immediately reopened, contributing to roof monitor emissions. Once the tapping damper was reopened, emissions subsided. The operators were reinstructed to keep the ladle under the tapping hood and keep the tapping damper open until the emissions subside. The next roof monitor observation on 7/12/2012 had no roof monitor emissions above 20% 3-minute average.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	7/11/12	☒Yes ☐ No If Yes, Date 12/28/12 and 2/7/13 NOV responses	3 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min) limit.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated 12/28/12 and 2/7/13. Emissions occurred during a hot metal charge on "A" Vessel. Severstal retained Hatch to evaluate the cause of the roof monitor emissions. Hatch issued a final report on February 7th, 2013. A combination of damper position changes and operating practices has been instituted to improve emission capture. The next roof monitor observation on 7/12/2012 had no roof monitor emissions above 20% 3-minute average.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	7/24/12	☐Yes ☒ No If Yes, Date	3 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min) limit.

8. Reason for Deviation and Description of Corrective Action Taken
Severstal retained Hatch to evaluate the cause of the roof monitor emissions. Hatch issued a final report on February 7th, 2013. A combination of damper position changes and operating practices has been instituted to improve emission capture. The next roof monitor observation on 7/31/2012 had no roof monitor emissions above 20% 3-minute average.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	8/9/12		3 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min) limit.

8. Reason for Deviation and Description of Corrective Action Taken
Severstal retained Hatch to evaluate the cause of the roof monitor emissions. Hatch issued a final report on February 7th, 2013. A combination of damper position changes and operating practices has been instituted to improve emission capture. The next roof monitor observation on 8/13/2012 had no roof monitor emissions above 20% 3-minute average.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	9/18/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min)

8. Reason for Deviation and Description of Corrective Action Taken
The primary damper was set at 20% in instead of 35%. Severstal retained Hatch to evaluate the cause of the roof monitor emissions. Hatch issued a final report on February 7th, 2013. A combination of damper position changes and operating practices has been instituted to improve emission capture. The next roof monitor observation on 9/20/2012 had no roof monitor emissions above 20% 3-minute average.

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Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	10/8/12		9 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min)

8. Reason for Deviation and Description of Corrective Action Taken

One occurrence may have been due to a desulf slag pot dump. The other incidences were apparently due to charging emissions escaping through the boiler hood. It was noted that the primary damper was set at 25% versus 35% as recommended by Hatch during hot metal charging. The damper position was re-adjusted. The next roof monitor observation on 10/12/2012 had no roof monitor emissions above 20% 3-minute average.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	10/30/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min) on the dates noted.

8. Reason for Deviation and Description of Corrective Action Taken

Severstal retained Hatch to evaluate the cause of the roof monitor emissions. Hatch issued a final report on February 7th, 2013. A combination of damper position changes and operating practices has been instituted to improve emission capture. The next roof monitor observation on 10/31/2012 had no roof monitor emissions above 20% 3-minute average.

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ROP Section Contact: James E. Earl Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	11/1/12		9 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min) limit

8. Reason for Deviation and Description of Corrective Action Taken

The first of three occurrences involved emissions from the lance hole and boiler hood during a blow on "A" Vessel. This occurred upon re-ignition after ignition was lost 1 minute into the oxygen blow. The other two occurrences involved emissions through the lance hole and boiler hood immediately after charging, when the vessel was up righted. Severstal retained Hatch to evaluate the cause of the roof monitor emissions. Hatch made an operating change recommendation to resolve emissions after a hot metal charge by not up righting the vessel immediately, allowing time for the primary damper to open. The next roof monitor observation on 11/21/2012 had no roof monitor emissions above 20% 3-minute average.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No If Yes, Date	5. Duration of Deviation
EGBOF	E-01.04 II.B.2.	12/31/12	1/18/13 letter to MDEQ	9 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Roof monitor exceeded 20% opacity (3 min) limit

8. Reason for Deviation and Description of Corrective Action Taken

See letter to MDEQ dated 1/18/13. A small fire near some of the control wiring that provides signals to the Secondary Emission control system collection hood damper position caused the system to malfunction. As a result, the emission capture was affected. The problem was discovered on December 31st and repaired completed on January 1st. The next roof monitor observation on 1/9/2013 had no roof monitor emissions above 20% 3-minute average.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGBOF	General Condition 2.a.	11/28/12	If Yes, Date	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	Highest 6-minute average opacity was 28% from the BOF ESP stack

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGBOF	General Condition 2.a.	11/29/12	If Yes, Date	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	Highest 6-minute average opacity was 21% from the BOF ESP stack, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGBOF	General Condition 2.a.	11/30/12	If Yes, Date	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	Highest 6-minute average opacity was 23% from the BOF ESP stack, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/3/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	Highest 6-minute average opacity was 24% from the BOF ESP stack, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/6/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	35% was the highest 6-minute average opacity from the BOF ESP Stack.

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/9/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	32% 6-minute average opacity from the BOF ESP Stack.

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

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EGBOF	General Condition 2.a.	12/9/12	If Yes, Date	12 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	22% was the highest 6-minute average opacity from the BOF ESP Stack, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/9/12	If Yes, Date	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	27% 6-minute average opacity from the BOF ESP Stack, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/11/12	If Yes, Date	24 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	48% was the highest 6-minute average opacity from the BOF ESP Stack.

8. Reason for Deviation and Description of Corrective Action Taken
#2 Compartment taken offline at 8:00 AM to clear ground in 2C. Brought back online at 11:45 AM. COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/17/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	28% 6-minute average opacity from the BOF ESP Stack.

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/19/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	28% was the highest 6-minute average opacity from the BOF ESP Stack.

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/22/12		6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	21% 6-minute average opacity from the BOF ESP Stack, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/23/12	☐Yes ☒ No If Yes, Date	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	27% 6-minute average opacity from the BOF ESP Stack opacity monitor, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/25/12	☐Yes ☒ No If Yes, Date	12 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	36% was the highest 6-minute average opacity from the BOF ESP Stack opacity monitor.

8. Reason for Deviation and Description of Corrective Action Taken
Heat aborted due to high stack temp. Discovered problem with air on spray water. Operation re-started at 11:55 AM. COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	General Condition 2.a.	12/28/12	☐Yes ☒ No If Yes, Date	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	23% 6-minute average opacity from the BOF ESP Stack opacity monitor, except for one 6-minute average per hour of 27%

8. Reason for Deviation and Description of Corrective Action Taken
COMS data indicated opacity potentially in excess of Rule 301(a). There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS.

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

RENEWABLE OPERATING PERMIT DEVIATION REPORT

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Source Name: Severstal Dearborn, LLC County: Wayne

Source Address: 4001 Miller Road City: Dearborn

AQD Source ID (SRN): A8640 ROP No.: 199700004 ROP Section No.: 1

ROP Section Contact: James E. Earl Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	General Condition 2.a.	1/1/12 - 11/26/12	☐Yes ☒ No If Yes, Date	An aggregated total of 615 hours

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
COMS data	Recurrent 6-minute average opacity above 20% detected from the BOF ESP Stack opacity monitor.

8. Reason for Deviation and Description of Corrective Action Taken
There was no method 9 reading corresponding to the time period and no basis to confirm that it was not steam or other interference with the COMS. Severstal hired TRK Engineering in April 2012 and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and were completed on November 26, 2012.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	E-01.04 VI.1	1/1/12 - 12/31/12	☐Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Some inspections required by Severstal's Iron and Steel MACT operation and maintenance plan for the secondary emission control baghouse have either not been performed or documentation not been located. These include: daily inspections of rotating equipment; weekly capture system and alarm inspection, monthly check of air cylinders for leaks and checking baghouse hoppers, quarterly checks for CPMS and PT calibration and nitrogen line leakage; semi-annual inspection of ductwork, solenoid and damper valves; annual inspection of dust collection housing, fan motors, structural members and gear motors. Missing 8 of 12 month of checking bag tension, checking inspection doors and checking reverse air fan drive.

8. Reason for Deviation and Description of Corrective Action Taken
The approach to inspections has been reviewed, revised and enhanced. Outside contractors have been retained to assist with monthly and quarterly inspections.

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Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	B-1 VI.3.	1/1/12 - 12/31/12	☐Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	A review of the suction pressure and damper positions during operation indicates that the system has operated outside the range specified in Severstal's MACT operation and maintenance plan.

8. Reason for Deviation and Description of Corrective Action Taken

The set points for the secondary baghouse dampers has been reviewed and enhanced since the adoption of the MACT operation and maintenance plan. The set points have also been studied by Hatch, and further modifications to the damper set points have been recommended. Severstal will be updating both the MACT plan, and the programmable damper controls to reflect the latest recommendations. The system has been operating as designed at the fan speed settings 100% of the time. However, the system has operated at lower suction pressure than specified in the MACT plan. The suction pressure has been lower primarily as a result of the baghouse operating at a lower differential pressure than anticipated. A review of the suction pressure during operation indicates that the system has operated outside the range specified in the MACT operation and maintenance plan. The system designer (Hatch) was contacted and noted that the original fan suction values were based on theoretical calculations, not actual pressure readings. The actual suction pressure has been lower than expected, primarily, as a result of the baghouse operating at a lower differential pressure than anticipated. It appears that actual system resistance is less than the theoretical calculations used to develop the suction pressure guidelines in the MACT operation and maintenance plan. As a result, the secondary baghouse is able to move the same amount of air with less pressure drop, resulting in a lower vacuum at the plenum. The system met the minimum suction pressure specified in the MACT operation and maintenance plan 27% of the time over the reporting period. Data was available for 96% of the reporting period.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	B-1 VI.3.	Jan and Feb inclusive and weeks of 4/29/12 and 5/27/12,	☐Yes ☒ No	10 weeks

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Weekly inspections records confirming that the dust is being removed from hoppers as required by Iron and Steel MACT were not located.

8. Reason for Deviation and Description of Corrective Action Taken

Missing inspection reports for the 10 weeks noted. Inspection reports were located for other weeks.

DEQ

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Source Address: 4001 Miller Road — City: Dearborn

AQD Source ID (SRN): A8640 — ROP No.: 199700004 — ROP Section No.: 1

ROP Section Contact: James E. Earl — Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported?	5. Duration of Deviation
EGDESULFURIZATION	E-01.13 III.A.3.10	April and October	☐ Yes ☒ No	2 months in 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	2 monthly inspections of the bag tension required by Iron and Steel MACT were not done.

8. Reason for Deviation and Description of Corrective Action Taken
Missing inspection report for two months. On a going-forward basis, the approach to inspections is being reviewed and enhanced. Outside contractors have been retained to assist with monthly inspections.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported?	5. Duration of Deviation
EGDESULFURIZATION	E-01.13 III.A.3.12	April, July and September	☐ Yes ☒ No If Yes, Date	3 months in 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	3 monthly inspections of the baghouse cleaning mechanism required by Iron and Steel MACT were not done.

8. Reason for Deviation and Description of Corrective Action Taken
Missing inspection reports for 3 months. On a going-forward basis, the approach to inspections is being reviewed and enhanced. Outside contractors have been retained to assist with monthly inspections.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported?	5. Duration of Deviation
EGDESULFURIZATION	E-01.13 VI.2	Jan and Feb inclusive and weeks of 4/29/12 and 5/27/12,	☐ Yes ☒ No	10 weeks

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Weekly inspection records confirming that the dust is being removed from hoppers as required by Iron and Steel MACT were not located.

8. Reason for Deviation and Description of Corrective Action Taken
Missing inspection reports for the 10 weeks noted. Inspection reports were located the other weeks.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGNO1LRF	E-01.05 III.VI.1 E-01.05 III.B.3.4	5/31/12, 6/23/12, 7/3/12	☐Yes ☒ No	3 alarm events in 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	It is possible no corrective action was taken in response to bag leak detection alarms; it cannot be determined whether it was a legitimate alarm on these dates.

8. Reason for Deviation and Description of Corrective Action Taken
Alarms are acknowledged by operations. It was discovered that alarms were not automatically e-mailed to the maintenance manager for corrective action and documentation as was intended. This has been corrected and now all bag leak detection alarms are e-mailed to maintenance staff for corrective action and documentation.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGNO1LRF	E-01.05 III.A.2.	7/10/12, 7/17/12, 7/24/12, 7/31/12, 8/14/12, 8/21/12, 9/4/12, 9/11/12,	☐Yes ☒ No If Yes, Date	8 weekly readings

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	8 weekly readings greater than 9 in w.c.

8. Reason for Deviation and Description of Corrective Action Taken
Investigation noted that there was some leakage in the pulse jet compressed air system at the baghouse. Repairs were made and there were no high differential pressure readings noted after September.

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ROP Section Contact: James E. Earl Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGNO1LRF	E-01.05 VI.2.	Weeks of 6/10/12, 7/22/12 and 8/19/12	☐Yes ☒ No If Yes, Date	3 weeks in 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Inspection records confirming that dust is being removed from hoppers was not located during the weeks noted.

8. Reason for Deviation and Description of Corrective Action Taken
The inspection records for the weeks noted were not located, but two were completed either the preceding week or the following week.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGNO1LRF	E-01-05, III.A.3.2 E-01-05, III.A.3.13	January, April, July, October and December	☒Yes ☐ No 12/28/12 and 2/7/13 NOV Response letters	5 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated November 14, 2012, LRF # 1 Baghouse was not consistently inspected once every month to determine its operational and physical condition, as well as the cleaning mechanisms and written records maintained.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated December 28, 2012 and February 7, 2013. For the calendar year 2012, 5 months of inspections were missed. Outside contractors have been retained to assist with LRF No. 1 monthly and quarterly inspections.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBNO1LRF	E-01.05 V.1. E-01.05 V.2. E-01.05 VI.2.	1/1/12 - 12/31/12	☐Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Documentation of a number of inspections required by Iron and Steel MACT have not been located. Some missing inspections, noted in deviations on pages 23, 24 and 25

8. Reason for Deviation and Description of Corrective Action Taken
Unable to document compliance with these requirements at this time. Severstal is pursuing collecting the data required. On a going-forward basis the approach to inspections at the LRF1 has been thoroughly reviewed, revised and enhanced.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGLADLEREFINE2	E.01.11 III.A.3.2 E.01.11 III.A.3.13	January, October and December	☒Yes ☐ No 12/28/12 and 2/7/13 NOV Response letters	3 months in 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated November 14, 2012, LRF # 2 baghouse was not consistently inspected once every month to determine its operational and physical condition, as well as the cleaning mechanisms and written records maintained

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated December 28, 2012 and February 7, 2013. For the calendar year 2012, 3 months of inspections were missed. Outside contractors have been retained to assist with LRF No. 2 monthly and quarterly inspections

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
EGNO1LRF	E-01.05, III.A.3.6	1/1/12 to 8/31/12 as alleged in NOV	12/28/12 and 2/7/13 NOV Response letters	8 months in 2012 alleged in NOV

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated November 14, 2012, re: Alleged failure to properly operate and maintain bag leak detectors, and keep records of corrective actions for bag leak detectors at No. 1 LRF baghouse

8. Reason for Deviation and Description of Corrective Action Taken
Bag leak detector system is meeting permit requirements. See NOV responses dated December 28, 2012 and February 7, 2013.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
EGLADLEREFINE2	E-01.11, III.A.3.6	1/1/12 to 8/31/12 as alleged in NOV	12/28/12 and 2/7/13 NOV Response letters	8 months in 2012 alleged in NOV

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated November 14, 2012, re: Alleged failure to properly operate and maintain bag leak detectors, and keep records of corrective actions for bag leak detectors at No. 2 LRF baghouse.

8. Reason for Deviation and Description of Corrective Action Taken
Bag leak detector system is meeting permit requirements see NOV responses dated December 28, 2012 and February 7, 2013.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGNO1LRF	E-01.05 II.B.4.1	January - September	☒Yes ☐ No If Yes, Date 12/28/12 and 2/7/13 NOV Response letters	No earlier than January 2012 through September 27, 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Particulate Stack testing results at EGNO1LRF were above the 0.005 gr./dscf limit.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV response dated December 28, 2012. After the stack test, a contractor was retained to inspect the baghouse. This inspection identified some failed bags and some incorrectly installed bags in LRF # 1 baghouse. Follow-up stack test conducted September 25-27, 2012 met emission limit.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGLADLEREFINE2	E-01.11 II.B.1. 2. and 4.	May - September	☒Yes ☐ No If Yes, Date 12/28/12 and 2/7/13 NOV Response letters	No earlier than May 2012 through September 27, 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Particulate stack testing results at EGLADLEREFINE2 were above the 3.03 pounds per hour limit, as well as the 0.01 gr/dscf MACT limit.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated December 28, 2012. After the stack test, a contractor was retained to inspect the baghouse. This inspection identified some failed bags in LRF # 2 baghouse. The problem was immediately corrected. Follow-up stack test conducted September 25-27, 2012 met emission limit.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

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EGNO1LRF	E-01.05.V.1 and 2	January to September 2012	12/28/12 and 2/7/13 NOV Response letters	9 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV, failure to properly install, operate and maintain baghouse based on failed stack testing.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated December 28, 2012 and February 7, 2013. Repairs made after July stack test and follow-up stack test conducted September 25-27, 2012 met emission limit. Estimated start date of January is conservative because the last stack test was done in December of 2011 and all emission limits were met at that time.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No If Yes, Date	5. Duration of Deviation
EGLADLEREFINE2	E-01.11.V.2	May to September 2012	12/28/12 and 2/7/13 NOV Response letters	5 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV, Failure to properly install, operate and maintain baghouse based on failed stack testing.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated December 28, 2012 and February 7, 2013. Repairs made after July stack test and follow-up stack test conducted September 25-27, 2012 met emission limit. The estimated start date of May is conservative. Bags were replaced in May as a result of a bag leak detection, and the equipment was operating properly at that time.

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AIR QUALITY DIVISION

RENEWABLE OPERATING PERMIT DEVIATION REPORT

Authorized by 1994 P.A. 451, as amended. Failure to provide this information may result in civil and/or criminal penalties.

This form may be submitted in conjunction with the Renewable Operating Permit Report Certification form (EQP 5736) to report deviations from all general conditions and special conditions in the Renewable Operating Permit (ROP) for which deviations required to be reported by R 336.1213 (Rule 213) subrule (3)(c) have occurred. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division, upon request. Items 1 - 8 must be completed for all deviations being reported.

Source Name: Severstal Dearborn, LLC — County: Wayne

Source Address: 4001 Miller Road — City: Dearborn

AQD Source ID (SRN): A8640 — ROP No.: 199700004 — ROP Section No.: 1

ROP Section Contact: James E. Earl — Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGNO1LRF EGLADLEREFINE2	E-01.11.IV.2	Dates deviation reports filed	☒Yes ☐ No If Yes, Date 12/28/12 and 2/7/13 NOV Response letters	Since filing of allegedly incomplete deviation reports

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV, failure to report deviations for missing inspections, failure to properly operate and maintain bag leak detector and not locating records for every bag leak detection response.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated December 28, 2012 and February 7, 2013. Severstal has hired an outside consultant to assist with preparing deviation reports and in identifying and verifying compliance issues. Bag leak detector alarm responses have been located and going forward will be made more readily available for inspection.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGLADLEREFINE2	E-01.11 III.A.3.11	7/1/12 - 12/31/12	☐Yes ☒ No	6 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The LRF #2 compressed air pressure was not confirmed to be operating properly on a daily basis.

8. Reason for Deviation and Description of Corrective Action Taken
The LRF #1 compressed air pressure is continuously measured and recorded. Because the baghouse for LRF #2 is near the baghouse for LRF #1, it was incorrectly understood that this would be the same for both units. A pressure gage has been installed and the compressed air pressure is now being recorded separately for LRF #2 baghouse.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGLADLEREFINE2	E-01.11 VI.2	Jun 3,12,13	If Yes, Date	3 days

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Daily monitoring of cleaning cycles is done by the PLC. Records are missing for the dates indicated.

8. Reason for Deviation and Description of Corrective Action Taken
Data trending information incomplete. Cleaning cycles are monitored, no evidence of any problem with the bag cleaning systems. Severstal is investigating PLC and data retention issues.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGLADLEREFINE2	E-01-11 III.B.3.5	10/26/12		1 day

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	No corrective action was taken in response to an alarm from bag leak detection.

8. Reason for Deviation and Description of Corrective Action Taken
Every other alarm was responded to correctly. The operators have been retrained to respond and record corrective action for every alarm.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGLADLEREFINE2	E-01.11 VI.2.	Weeks of 6/10/12, 7/22/12 and 8/19/12		3 weeks in 2012

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Records confirming that the dust is being removed from hoppers during the week noted were not located.

8. Reason for Deviation and Description of Corrective Action Taken
Inspection records for the weeks noted were not located. Two inspections were done the following week in each case.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGLADLEREFINE2	E-01.11 V.1. E-01.11 V.2. E-01.11 VI.2.	1/1/12 - 12/31/12	☐Yes ☒ No	12 months

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Documentation of a number of inspections required by Iron and Steel MACT has not been located. Some missing inspections, noted in the deviations on pages 29 and 30.

8. Reason for Deviation and Description of Corrective Action Taken
Unable to document compliance with these requirements at this time. Severstal is pursuing collecting the data required. On a going-forward basis the approach to inspections at the LRF2 has been thoroughly reviewed, revised and enhanced.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
Source Wide	B.1 II.B	11/15/12 and 11/16/12	☐Yes ☒ No If Yes, Date	119 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	20% opacity was exceeded for 85minutes on 11/15/12 from beaching of iron and for 34 minutes on 11/16/12 from subsequent handling of beached iron outside NE of BOF

8. Reason for Deviation and Description of Corrective Action Taken:
Emissions resulted from beaching of iron and digging of beached iron associated with the start-up of the C Blast Furnace after an extended outage. Trials are being performed using Dust Bosses when beaching iron and digging beached iron in order to minimize emissions.

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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
Source Wide	B.1 II.B	9/5/12	10/5/12 and 11/16/12 NOV responses	20 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Per NOV dated September 13, 2012: 29% was the highest 3-min average opacity, recorded twice during the time of observation.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV responses dated October 5, 2012 and November 16, 2012. Due to upset conditions at the continuous caster, the slag contractor was handling beached iron, not desulf slag, at the time of the alleged violation. Trials are being performed using Dust Bosses when digging beached iron in order to minimize emissions.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒Yes ☐ No	5. Duration of Deviation
Source Wide	General Conditions 7(b)	September 9 and 29, 2012	12/21/13 NOV Response Letter	2 days

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Particulate fallout attributed to either Severstal or Levy on September 9 and 29, 2012.

8. Reason for Deviation and Description of Corrective Action Taken
See NOV response dated December 21, 2012. The September 9 alleged fallout incident was determined to have possibly been related to handling of material that resulted from beaching of molten iron. Severstal is now doing trial operations using Dust Bosses when handling beached iron. The fallout alleged on September 29 was possibly due to a procedure error while dumping a desulf slag pot. Camera recordings show the operator was pouring the slag from a height higher than normal. The operators have been reinstructed regarding the importance of using proper pour height and pour rate for the desulf slag.

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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 12/31/12

Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGRAWMATERIALHANDLING	E-01.10 III.A.2.1	7/1/12-12/31/12	If Yes, Date	26 readings

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Pressure drop across baghouse was not between 5 and 8 inches w.c. without initiation of maintenance activity.

8. Reason for Deviation and Description of Corrective Action Taken
This deviation was voluntary disclosed as an environmental audit finding on March 12, 2009. Normal baghouse differential pressure is less than 5 inches. As allowed in the ROP, a letter to the District supervisor was sent on March 20, 2009 to request a change to the pressure drop range to between 2 and 6 inches w.c. This range has been incorporated into the latest ROP draft that was issued by MDEQ for public comment.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No	5. Duration of Deviation
EGCOKESCREENBLDGDD	E-01.17 III.A.2.1	October	If Yes, Date	1 month

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Incomplete monthly VE observation

8. Reason for Deviation and Description of Corrective Action Taken
The monthly VE form was incomplete. Visible emission observation was made, but the smoke reader did a Method 22, instantaneous reading. The smoke reader has been retrained on proper reading method.

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Report Type: ☒ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
EGTREADWELLCAR	E-01.16.III.A.3	October		1 month

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Missing monthly visible emission reading

8. Reason for Deviation and Description of Corrective Action Taken
October VE form is not completed, however, two documented VE were done in September. The second September reading taken on 9/24 may have been intended for October.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
Source Wide	B-1 IV. 4. B-1.V. & App 1.9 B.2	Beginning on each of the following 12 day periods: 8/1/12, 9/1/12, 10/1/12		Three 12 day intervals

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Missed dust suppressant treatments for 12 day periods only in specific areas on unpaved roads

8. Reason for Deviation and Description of Corrective Action Taken
August dust suppressant treatment missed HI-Lo repair area, September treatment missed CC Locker Rd. October treatment was not made for Klein repair, west yard and slag haul Rd.

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MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

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MAR 25 2013
AIR ENFORCEMENT BRANCH
U.S. EPA REGION 5

RENEWABLE OPERATING PERMIT REPORT CERTIFICATION

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Reports submitted pursuant to R 336.1213 (Rule 213), subrules (3)(c) and/or (4)(c), of Michigan's Renewable Operating Permit (ROP) program must be certified by a responsible official. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division upon request.

Source Name Severstal Dearborn, LLC County Wayne

Source Address 4001 Miller Road City Dearborn

AQD Source ID (SRN) A8640 ROP No. 199700004 ROP Section No. 1

Please check the appropriate box(es):

☐ **Annual Compliance Certification (Pursuant to Rule 213(4)(c))**

Reporting period (provide inclusive dates): From _____ To _____

☐ 1. During the entire reporting period, this source was in compliance with **ALL** terms and conditions contained in the ROP, each term and condition of which is identified and included by this reference. The method(s) used to determine compliance is/are the method(s) specified in the ROP.

☐ 2. During the entire reporting period this source was in compliance with all terms and conditions contained in the ROP, each term and condition of which is identified and included by this reference, **EXCEPT** for the deviations identified on the enclosed deviation report(s). The method used to determine compliance for each term and condition is the method specified in the ROP, unless otherwise indicated and described on the enclosed deviation report(s).

☒ **Semi-Annual (or More Frequent) Report Certification (Pursuant to Rule 213(3)(c))**

Reporting period (provide inclusive dates): From 01/01/12 To 06/30/12

☐ 1. During the entire reporting period, **ALL** monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred.

☒ 2. During the entire reporting period, all monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred, **EXCEPT** for the deviations identified on the enclosed deviation report(s).

☐ **Other Report Certification**

Reporting period (provide inclusive dates): From _____ To _____

Additional monitoring reports or other applicable documents required by the ROP are attached as described:

_____

_____

_____

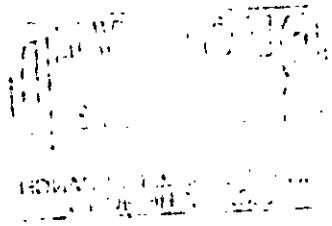
I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this report and the supporting enclosures are true, accurate and complete

Bruce L. Black	V. P. and General Manager	(313) 317-8955
Name of Responsible Official (print or type)	Title	Phone Number

Signature of Responsible Official — Date 9/14/12

* Photocopy this form as needed.

EQP 5736 (Rev 11-04)



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1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
FGB&CCASTHOUSE	III.A.3.1	1/1-6/30/12	☐Yes ☒ No	6 monthly calculations

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Did not calculate PM-10, manganese, arsenic, and chromium VI emissions by the end of each calendar month from the casthouses.

8. Reason for Deviation and Description of Corrective Action Taken
The calculations for these emissions no longer apply since Permit 182-05B has newer calculations. Permit 182-05B conditions were included in the most recent ROP application.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGRAWMATERIALHANDLING	III.A.2.1	1/1/12-6/30/12	☐Yes ☒ No If Yes, Date	26 readings

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Pressure drop across baghouse was not between 5 and 8 inches w.c. and no appropriate maintenance activity was initiated.

8. Reason for Deviation and Description of Corrective Action Taken
This deviation was voluntary disclosed as an environmental audit finding on March 12, 2009. Normal baghouse differential pressure is less than 5 inches. As allowed in the ROP, a letter to the District supervisor was sent on March 20, 2009 to request a change to the pressure drop range to between 2 and 6 inches w.c. This range has been incorporated into the latest ROP draft.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	II.B.2	6/27/12	☐Yes ☒ No	3 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest three minute opacity average was 33% from the BOF Roof Monitors.

8. Reason for Deviation and Description of Corrective Action Taken
Occurred after charging "A" vessel when the vessel was up righted emissions escaped through lance hole. Severstal has hired the contractor that designed the secondary emissions control system to evaluate the system.

*Photocopy this form as needed.

EQP 5737 (2/10)

DEQ

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General Condition	2.a	4/13/12		24 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 48% from the BOF ESP stack.

8. Reason for Deviation and Description of Corrective Action Taken
Severstal hired TRK Engineering in April and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and are expected to be completed by September 28. The 4/16/12 VE reading was below 20% opacity.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
General Condition	2.a	6/19/12		18 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 33% from the BOF ESP stack.

8. Reason for Deviation and Description of Corrective Action Taken
On 6/28 it was discovered the inlet damper to ESP compartment #5 was 50% closed causing uneven flow distribution through the ESP. The damper was fully opened. The 6/20/12 VE reading was below 20% opacity.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☐Yes ☒ No If Yes, Date	5. Duration of Deviation
General Condition	2.a	6/25/12		30 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 29% from the BOF ESP stack.

8. Reason for Deviation and Description of Corrective Action Taken
On 6/28 it was discovered the inlet damper to ESP compartment #5 was 50% closed causing uneven flow distribution through the ESP. The damper was fully opened. The 6/28/12 VE reading was below 20%.

*Photocopy this form as needed.

EQP 5737 (2/10)

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General Condition	2.a	6/27/12	☐Yes ☒ No If Yes, Date	24 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 34% from the BOF ESP stack.

8. Reason for Deviation and Description of Corrective Action Taken
On 6/28 it was discovered the inlet damper to ESP compartment #5 was 50% closed causing uneven flow distribution through the ESP. The damper was fully opened. The 6/28/12 VE reading was below 20% opacity.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGBOF	II.B.2	6/27/12	☐Yes ☒ No If Yes, Date	9 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest three minute opacity average was 31% from the BOF Roof Monitors.

8. Reason for Deviation and Description of Corrective Action Taken
It appears this occurred during the desulf process where some emissions were not being captured by the hood. Investigation did not show any abnormal circumstances that could have led to these emissions.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
General Condition	2.a	4/13/12	☒Yes ☐ No If Yes, Date 6/5/12	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 50% from the BOF ESP stack. See our letter to MDEQ dated 6/5/2012 for details.

8. Reason for Deviation and Description of Corrective Action Taken
Severstal hired TRK Engineering in April and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and are expected to be completed by September 28. The 4/16/12 VE reading was below 20% opacity.

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

RENEWABLE OPERATING PERMIT DEVIATION REPORT

Authorized by 1994 P.A. 451, as amended. Failure to provide this information may result in civil and/or criminal penalties.

This form may be submitted in conjunction with the Renewable Operating Permit Report Certification form (EQP 5736) to report deviations from all general conditions and special conditions in the Renewable Operating Permit (ROP) for which deviations required to be reported by R 336.1213 (Rule 213) subrule (3)(c) have occurred. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division, upon request. Items 1 - 8 must be completed for all deviations being reported.

Source Name: Severstal Dearborn, LLC County: Wayne

Source Address: 4001 Miller Road City: Dearborn

AQD Source ID (SRN): A8640 ROP No.: 199700004 ROP Section No.: 1

ROP Section Contact: James E. Earl Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 06/30/12

Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
General Condition	2.a	5/3/12	☒ Yes ☐ No If Yes, Date 6/5/12	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 34% from the BOF ESP stack. See our letter to MDEQ dated 6/5/2012 for details.

8. Reason for Deviation and Description of Corrective Action Taken
Severstal hired TRK Engineering in April and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and are expected to be completed by September 28. The 5/7/12 VE reading was below 20% opacity.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
EGNOlLRF	III.A.2	5/8/12, 5/15/12 6/5/12, 6/12/12	☐ Yes ☒ No If Yes, Date	4 weekly readings

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	Pressure drop across baghouse filter was above the normal range of 9 inches.

8. Reason for Deviation and Description of Corrective Action Taken
Baghouse operation was observed and it was determined no maintenance activity was required.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
			☐ Yes ☐ No If Yes, Date	

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation

8. Reason for Deviation and Description of Corrective Action Taken

*Photocopy this form as needed.

EQP 5737 (2/10)

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
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RENEWABLE OPERATING PERMIT DEVIATION REPORT

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Source Name: Severstal Dearborn, LLC — County: Wayne

Source Address: 4001 Miller Road — City: Dearborn

AQD Source ID (SRN): A8640 — ROP No.: 199700004 — ROP Section No.: 1

ROP Section Contact: James E. Earl — Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 06/30/12

Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
General Condition	2.a	3/19/12	☒Yes ☐ No If Yes, Date 4/26/12	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 34% from the BOF, B Vessel. See our letter to MDEQ dated 4/26/2012 for details.

8. Reason for Deviation and Description of Corrective Action Taken
Emissions were from "B" vessel relief damper due to a leaking guillotine. The 3/21/12 VE reading was below 20%.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ?	5. Duration of Deviation
General Condition	2.a	3/19/12	☒Yes ☐ No If Yes, Date 4/26/12	18 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 49% from the BOF ESP stack. See our letter to MDEQ dated 4/26/2012.

8. Reason for Deviation and Description of Corrective Action Taken
Severstal hired TRK Engineering in April and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and are expected to be completed by September 28. The 4/16/12 VE reading was below 20% opacity.

DEQ

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

RENEWABLE OPERATING PERMIT DEVIATION REPORT

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Source Name: Severstal Dearborn, LLC — County: Wayne

Source Address: 4001 Miller Road — City: Dearborn

AQD Source ID (SRN): A8640 — ROP No.: 199700004 — ROP Section No.: 1

ROP Section Contact: James E. Earl — Contact Phone No.: (313) 845-3217

Reporting Period (provide inclusive dates): From 01/01/12 to 06/30/12

Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe)

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒ Yes ☐ No If Yes, Date	5. Duration of Deviation
General Condition	2.a	5/6/12	6/5/12	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 44%. See our letter to MDEQ dated 6/5/2012.

8. Reason for Deviation and Description of Corrective Action Taken
Severstal hired TRK Engineering in April and they performed an interior inspection of the ESP on June 13. This inspection resulted in repairs that began on July 23, 2012 and are expected to be completed by September 28. The 5/7/12 VE reading was below 20% opacity.

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? ☒ Yes ☐ No If Yes, Date	5. Duration of Deviation
General Condition	2.a	5/6/12	6/5/12	6 minutes

6. Method Used to Determine Compliance Status (if different from method specified in ROP)	7. Description of Deviation
	The highest six minute opacity average was 32.5% from the BOF Roof Monitors. See our letter to MDEQ dated 6/5/2012 for details.

8. Reason for Deviation and Description of Corrective Action Taken
Roof emissions likely the result of an unusual level of slopping that took place during a heat at the desulfurization (desulf) station. Corrective action was the installation of a camera monitor in the desulf station pulpit so operators can immediately become aware of any releases at the desulf station that reach the roof monitors, and the event can be properly documented and addressed to prevent future occurrences. The 5/8/12 VE reading was below 20% opacity.