

Facility ID: 0830103


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D. OWNER/CONTACT INFORMATION

1. Owner or Authorized Representative		DIVISION OF AIR RESOURCES MANAGEMENT
Name and Title MICHAEL W ARNOLD DIRECTOR OF SAFETY AND RISK MANAGEMENT		RECEIVED
Mailing Address Organization/Firm: LIPPERT COMPONENTS, INC. Street Address: 2703 COLLEGE AVENUE City: GOSHEN State: IN Zip Code: 46528		MAR 03 2008 DEP Central Dist.
Telephone: (574) 535-1125	Ext. 6310	Fax: (574) 312-6310
Email (optional): marnold@lci1.com		
2. Facility Contact		
Name and Title RICK CROTON GENERAL MANAGER		
Mailing Address Organization/Firm: LIPPERT COMPONENTS, INC. Street Address: 1818 S.W. 9TH AVENUE City: OCALA State: FL Zip Code: 34474		
Telephone: (352) 629-5300	Ext.	Fax: (352) 629-9660
Email (optional):		

E. OWNER OR AUTHORIZED REPRESENTATIVE STATEMENT

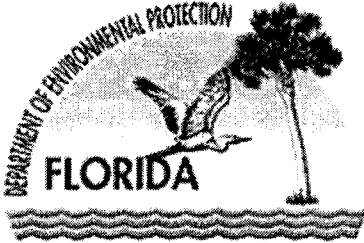
I hereby certify that the information given in this report is correct to the best of my knowledge.	
	<u>2-15-08</u>
Signature	Date

CD

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DIVISION OF AIR
RESOURCES MANAGEMENT



**Florida Department of
Environmental Protection**

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie C.
Governor

Jeff Kottka
Lt. Governor

Michael W. S.
Secretary

EAOR Submission Receipt

Facility ID: **0830103**
Facility Name: **LIPPERT COMPONENTS INC - FLORIDA**
Reporting Year: **2007**
File Name: **0830103_2007_1.sub**
Received at: **2/8/2008 2:44:51 PM**

Signature pages must be mailed to the following address.

*Department of Environmental Protection
Division of Air Resource Management, MS 5500
2600 Blair Stone Road
Tallahassee, Florida 32399-2400*