Table 2-1, Summary of Compliance Requirements

ST. VINCENT'S MEDICAL CENTER

REVISED DRAFT/PROPOSED Permit No.: 0310068-008-AV
Facility ID No.: 0310068

This table summarizes information for convenience purposes only. This table does not supersede any of the terms or conditions of this permit.
Notes: * The frequency base date is established for planning purposes only; see Rule 62-297.310, FAC
**CMS [=] continuous monitoring system

EU ID No.	Pollutant Name or Parameter	Fuel(s)	Compliance Method	Testing Time Frequency	Frequency Base Date *	Min. Compliance Test Duration	CMS**	See permit condition(s)
002	VE	No. 2 F. O.	EPA RM 9	Annually	1-Sep-10			III., EU002, 6.& 7.
003	VE	No. 2 F. O.	EPA RM 9	Annually	1-Sep-10			III., EU003, 6.& 7.
004	VE	No. 2 F. O.	EPA RM 9	Annually	1-Sep-10			III., EU004, 6.& 7.
005	NO_x	NG	EPA RM 20	Annually	1-Feb-10			III., EU005, 11. & 13.
	SO_2	NG	EPA RM 20	Annually	1-Feb-10			III., EU005, 11. & 13.
	O_2	NG	EPA RM 20	Annually	1-Feb-10			III., EU005, 11. & 13.
	VE	NG	EPA RM 9	Annually	1-Feb-10			III., EU005, 12. & 13.