



Florida Department of Environmental Protection

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

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

May 2, 2008

Mr. Tim Turbeville, Manager
Salter Marine Specialist, Incorporated
803 (SR) State Road 16 East
Green Cove Springs, Florida 32043

Dear Mr. Turbeville:

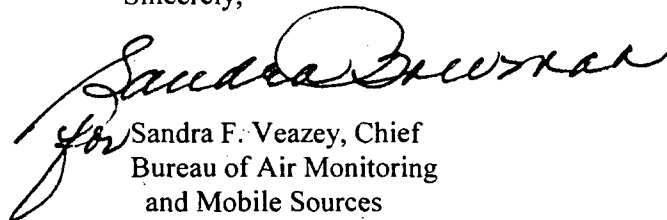
This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on March 28, 2008. We have assigned ARMS No. 0190066-002 to this facility.

As you know, pursuant to Florida Statutes section 403.814, authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have any additional questions, please contact Dickson Dibble at 850/921-9586.

Sincerely,



Sandra F. Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SFV/pg

cc: Mr. Rick Banks, Northeast District

REINFORCED POLYESTER RESIN OPERATIONS AIR GENERAL PERMIT REGISTRATION FORM

Part II. Notification to Permitting Office

(Detach and submit to appropriate permitting office; keep copy onsite)

Instructions: To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050, F.A.C. (\$100 as of the effective date of this form)

Bureau of Air Monitoring
& Mobile Sources

APR 01 2008

RECEIVED

0190066-002

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit).

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C., or any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only

If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.

- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):

No air operation permits currently exist for this facility.

? EXPIRED? 2 months Ago?

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

SALTER marine Spec Inc

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)

SALTER marine

Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: 803 SR166

City: GCS FL

County: clay

Zip Code: 32043

Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for existing facility)

Owner/Authorized Representative

<u>Name and Position Title</u> (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.) Print Name and Title: Tim Turbeville, mngr. #173032	
<u>Owner/Authorized Representative Mailing Address</u> Organization/Firm: SALTER marine Street Address: 803 S.R. 16 E City: GCS FL 32043 County: clay Zip Code: 32043	
<u>Owner/Authorized Representative Telephone Numbers</u> Telephone: 904-284-0155 Fax: 904-284-0113 Cell phone (optional):	

Facility Contact (If different from Owner/Authorized Representative)


<u>Name and Position Title</u> (Plant manager or person to be contacted regarding day-to-day operations at the facility.) Print Name and Title: Tim Turbeville	
<u>Facility Contact Mailing Address</u> Organization/Firm: Street Address: Same as above City: County: Zip Code:	
<u>Facility Contact Telephone Numbers</u> Telephone: Fax: Cell phone (optional): Same as above	

Owner/Authorized Representative Statement

This statement must be signed and dated by the person named above as owner or authorized representative

I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.

I will promptly notify the Department of any changes to the information contained in this registration form.

Signature:  Date: 2-15-08

Material Usage Rates

If this is an **initial registration** for a reinforced polyester resin operation, provide an estimate of the total quantity, in pounds, of styrene-containing materials (resin and gelcoat) expected to be used over a 12-month period. Note: the general permit limits the usage of such material to 76,000 pounds (38 tons) in any consecutive 12 months.

If this is a **re-registration** for a reinforced polyester resin operation, provide the highest 12-month total quantity, in pounds, of styrene-containing materials (resin and gelcoat) used in the last five years. Indicate the 12-month period over which this usage occurred.

10,000 LBS. 2003

Description of Facility

Below, or as an attachment to this form, provide a description of the reinforced polyester resin operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

Small skiff construction, minor
Fiberglass repairs.

Please send the Air General Permit Registration Form to the address below.

FDEP
RECEIPTS
POST OFFICE BOX 3070
TALLAHASSEE, FL 32315-3070

Please contact Dickson E. Dibble at (850) 921-9586 or email
Dickson.dibble@dep.state.fl.us If you have any question.

**Florida Department of Environmental Protection
Cash Receiving Application (CRA)
Cashlisting by Deposit #: 281553 thru 281553
Printed: 3/28/2008 3:49:39 PM - Page 10**

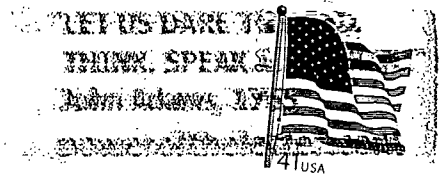
Cashlisting: 67552 Cashlist Area: 3755 Description: DIV OF AIR RESOURCES MGMT.
Deposit No: 281553 Date Deposited: 03/28/2008 Contact: E. WALKER

Object	Transmittal	Dep_DD	Receipt Number	Pre- Numbered Receipt	Name	Check Number	Payment Amount	Reference Account	Payment Number	Remittance Number	Fund
002272	47637	481589	620211		KELLY FOLSOM	132	\$100.00		867452	770431	PFTF
	47637	481600	620222		SALTER MARINE SPECIALIST INC	5486	\$100.00	0190066-002	867467	770442	PFTF
	47637	481603	620225		BPCS, INC	2694	\$100.00	4/4/2008 - PR	867473	770445	PFTF
	47644		620316		PRESTIGE AB READY MIX	45005	\$900.00		867496	770544	PFTF
Object Code 002272 Subtotal:							\$1,200.00				
002303	47637	481599	620221		HILLSBOROUGH COUNTY BOCC	03109549	\$960.00		867464	770441	PFTF
Object Code 002303 Subtotal:							\$960.00				
002304	47637	481599	620221		HILLSBOROUGH COUNTY BOCC	03109549	\$1,201.67		867465	770441	PFTF
Object Code 002304 Subtotal:							\$1,201.67				
002309	47637	481599	620221		HILLSBOROUGH COUNTY BOCC	03109549	\$40.00		867466	770441	PFTF
Object Code 002309 Subtotal:							\$40.00				
Cashlisting 67552 Total:							\$3,401.67				

Salter Marine Specialist, Inc.
803 State Road 16 East
Green Cove Springs, Florida 32043

JACKSONVILLE FL 322

26 MAR 2008 PM 6 L



F.D.E.P.
Receipts
P.O. Box 3070
Tallahassee, FL 32315-3070