

500 Bayfront Parkway
Pensacola, FL 32520

Tel 904.444.6000



April 7, 1997

Mr. Scott M. Sheplak
Florida Department of Environmental Protection
Division of Air Resources Management
2600 Blair Stone Road
Tallahassee, FL 32399-2400

RECEIVED
APR 10 1997
BUREAU OF
AIR REGULATION

Dear Mr. Sheplak:

Re: GULF POWER COMPANY TITLE V APPLICATION REVISION
GULF POWER COMPANY ACID RAIN PHASE II APPLICATION REVISION
PLANT CRIST, PLANT SCHOLZ, PLANT LANSING SMITH

Gulf Power Company hereby requests a revision of our active Acid Rain Phase II and Title V permit applications on file with the Florida Department of Environmental Protection. Our request is pursuant to a change of the "Designated Representative" for Gulf Power under the Acid Rain Program. These revisions (3) were submitted to the Environmental Protection Agency on April 3, 1997 as required under 40 CFR 72.24 of the Clean Air Act Amendments of 1990. Copies are attached for your review. Please update Gulf Power's active Acid Rain Phase II and Title V permit applications for Plant Crist, Plant Scholz and Plant Lansing Smith regarding this change.

If you have questions or need further information regarding the Designated Representative under the Acid Rain Program, please call me at (904) 444-6527.

Sincerely,

G. Dwain Waters
Air Quality Programs Coordinator, QEP

Attachments (3)
See Distribution Sheet

DISTRIBUTION SHEET

cc w/oatt: G. Edison Holland, Jr, Gulf Power Company
J. O. Vick, Gulf Power Company
J. M. Dominey, Gulf Power Company
S. H. Houston, Gulf Power Company
K. Peacock, Gulf Power Company
C. R. Lee, Gulf Power Company
Joseph W. Martin, Gulf Power Company
Lewis A. Jeffers, Gulf Power Company

cc: w/att: K. F. Kosky, KBN Engineering
Angela Morrison, Hopping, Green, Sams & Smith
Danny Herrin, Southern Company Services



Certificate of Representation

For more information, see instructions and refer to 40 CFR 72.24

This submission is: New Revised

This submission includes combustion or process sources under 40 CFR part 74

STEP 1
Identify the source by plant name, State, and, if applicable, ORIS code from NADB.

Crist Electric Generating Plant Plant Name	FL State	641 ORIS Code
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STEP 2
Enter requested information for the designated representative.

Name G. Edison Holland, Jr.	
Address 500 Bayfront Parkway Pensacola, Florida 32520-0100	
Phone Number (904) 444-6393	Fax Number (904) 444-6744

STEP 3
Enter requested information for the alternate designated representative, if applicable.

Name	
Address	
Phone Number	Fax Number

STEP 4
Complete Step 5, read the certifications, and sign and date. For a designated representative of a combustion or process source under 40 CFR part 74, the references in the certifications to "affected unit" or "affected units" also apply to the combustion or process source under 40 CFR part 74 and the references to "affected source" also apply to the source at which the combustion or process source is located.

I certify that I was selected as the designated representative or alternate designated representative, as applicable, by an agreement binding on the owners and operators of the affected source and each affected unit at the source.

I certify that I have given notice of the agreement, selecting me as the designated representative or alternate designated representative, as applicable, for the affected source and each affected unit at the source identified in this certificate of representation, daily for a period of one week in a newspaper of general circulation in the area where the source is located or in a State publication designed to give general public notice.

I certify that I have all necessary authority to carry out my duties and responsibilities under the Acid Rain Program on behalf of the owners and operators of the affected source and of each affected unit at the source and that each such owner and operator shall be fully bound by my actions, inactions, or submissions.

I certify that I shall abide by any fiduciary responsibilities imposed by the agreement by which I was selected as designated representative or alternate designated representative, as applicable.

I certify that the owners and operators of the affected source and of each affected unit at the source shall be bound by any order issued to me by the Administrator, the permitting authority, or a court regarding the source or unit.

Where there are multiple holders of a legal or equitable title to, or a leasehold interest in, an affected unit, or where a utility or industrial customer purchases power from an affected unit under life-of-the-unit, firm power contractual arrangements, I certify that:

I have given a written notice of my selection as the designated representative or alternate designated representative, as applicable, and of the agreement by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and

Allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement or, if such multiple holders have expressly provided for a different distribution of allowances by contract, that allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in accordance with the contract.

Crist Electric Generating Plant
 Plant Name (from Step 1)

The agreement by which I was selected as the alternate designated representative, if applicable, includes a procedure for the owners and operators of the source and affected units at the source to authorize the alternate designated representative to act in lieu of the designated representative.

I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

<i>Edison Hall</i> Signature (designated representative)	4/2/97 Date
Signature (alternate designated representative)	Date

STEP 5
 Provide the name of every owner and operator of the source and each affected unit (or combustion or process source) at the source. Identify the units they own and/or operate by boiler ID# from NADB, if applicable. For owners only, identify each state or local utility regulatory authority with ratemaking jurisdiction over each owner, if applicable.

Name Crist Electric Generating Plant					<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# 1	ID# 2	ID# 3	ID# 4	ID# 5	ID# 6	ID# 7
ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities Florida Public Service Commission						

Name					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities						

Name					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities						

Name					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities						



Certificate of Representation

For more information, see instructions and refer to 40 CFR 72.24

This submission is: New Revised

This submission includes combustion or process sources under 40 CFR part 74

STEP 1
Identify the source by plant name, State, and, if applicable, ORIS code from NADB.

Scholz Electric Generating Plant Plant Name	FL State	642 ORIS Code
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STEP 2
Enter requested information for the designated representative.

Name G. Edison Holland, Jr.	
Address 500 Bayfront Parkway Pensacola, Florida 32520-0100	
Phone Number (904) 444-6393	Fax Number (904) 444-6744

STEP 3
Enter requested information for the alternate designated representative, if applicable.

Name	
Address	
Phone Number	Fax Number

STEP 4
Complete Step 5, read the certifications, and sign and date. For a designated representative of a combustion or process source under 40 CFR part 74, the references in the certifications to "affected unit" or "affected units" also apply to the combustion or process source under 40 CFR part 74 and the references to "affected source" also apply to the source at which the combustion or process source is located.

I certify that I was selected as the designated representative or alternate designated representative, as applicable, by an agreement binding on the owners and operators of the affected source and each affected unit at the source.

I certify that I have given notice of the agreement, selecting me as the designated representative or alternate designated representative, as applicable, for the affected source and each affected unit at the source identified in this certificate of representation, daily for a period of one week in a newspaper of general circulation in the area where the source is located or in a State publication designed to give general public notice.

I certify that I have all necessary authority to carry out my duties and responsibilities under the Acid Rain Program on behalf of the owners and operators of the affected source and of each affected unit at the source and that each such owner and operator shall be fully bound by my actions, inactions, or submissions.

I certify that I shall abide by any fiduciary responsibilities imposed by the agreement by which I was selected as designated representative or alternate designated representative, as applicable.

I certify that the owners and operators of the affected source and of each affected unit at the source shall be bound by any order issued to me by the Administrator, the permitting authority, or a court regarding the source or unit.

Where there are multiple holders of a legal or equitable title to, or a leasehold interest in, an affected unit, or where a utility or industrial customer purchases power from an affected unit under life-of-the-unit, firm power contractual arrangements, I certify that:

I have given a written notice of my selection as the designated representative or alternate designated representative, as applicable, and of the agreement by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and

Allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement or, if such multiple holders have expressly provided for a different distribution of allowances by contract, that allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in accordance with the contract.

Scholz Electric Generating Plant
 Plant Name (from Step 1)

The agreement by which I was selected as the alternate designated representative, if applicable, includes a procedure for the owners and operators of the source and affected units at the source to authorize the alternate designated representative to act in lieu of the designated representative.

I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

<i>[Signature]</i> Signature (designated representative)	4/2/97 Date
Signature (alternate designated representative)	Date

STEP 5
 Provide the name of every owner and operator of the source and each affected unit (or combustion or process source) at the source. Identify the units they own and/or operate by boiler ID# from NADB, if applicable. For owners only, identify each state or local utility regulatory authority with ratemaking jurisdiction over each owner, if applicable.

Name Scholz Electric Generating Plant						<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# 1	ID# 2	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	
Regulatory Authorities Florida Public Service Commission							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	
Regulatory Authorities							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	
Regulatory Authorities							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	
Regulatory Authorities							



Certificate of Representation

For more information, see instructions and refer to 40 CFR 72.24

This submission is: New Revised

This submission includes combustion or process sources under 40 CFR part 74

STEP 1
Identify the source by plant name, State, and, if applicable, ORIS code from NADB.

Lansing Smith Electric Generating Plant Plant Name	FL State	643 Oris Code
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STEP 2
Enter requested information for the designated representative.

Name G. Edison Holland, Jr.	
Address 500 Bayfront Parkway Pensacola, Florida 32520-0100	
Phone Number (904) 444-6393	Fax Number (904) 444-6744

STEP 3
Enter requested information for the alternate designated representative, if applicable.

Name	
Address	
Phone Number	Fax Number

STEP 4
Complete Step 5, read the certifications, and sign and date. For a designated representative of a combustion or process source under 40 CFR part 74, the references in the certifications to "affected unit" or "affected units" also apply to the combustion or process source under 40 CFR part 74 and the references to "affected source" also apply to the source at which the combustion or process source is located.

I certify that I was selected as the designated representative or alternate designated representative, as applicable, by an agreement binding on the owners and operators of the affected source and each affected unit at the source.

I certify that I have given notice of the agreement, selecting me as the designated representative or alternate designated representative, as applicable, for the affected source and each affected unit at the source identified in this certificate of representation, daily for a period of one week in a newspaper of general circulation in the area where the source is located or in a State publication designed to give general public notice.

I certify that I have all necessary authority to carry out my duties and responsibilities under the Acid Rain Program on behalf of the owners and operators of the affected source and of each affected unit at the source and that each such owner and operator shall be fully bound by my actions, inactions, or submissions.

I certify that I shall abide by any fiduciary responsibilities imposed by the agreement by which I was selected as designated representative or alternate designated representative, as applicable.

I certify that the owners and operators of the affected source and of each affected unit at the source shall be bound by any order issued to me by the Administrator, the permitting authority, or a court regarding the source or unit.

Where there are multiple holders of a legal or equitable title to, or a leasehold interest in, an affected unit, or where a utility or industrial customer purchases power from an affected unit under life-of-the-unit, firm power contractual arrangements, I certify that:

I have given a written notice of my selection as the designated representative or alternate designated representative, as applicable, and of the agreement by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and


Allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement or, if such multiple holders have expressly provided for a different distribution of allowances by contract, that allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in accordance with the contract.

Lansing Smith Electric Generating Plant

Plant Name (from Step 1)

The agreement by which I was selected as the alternate designated representative, if applicable, includes a procedure for the owners and operators of the source and affected units at the source to authorize the alternate designated representative to act in lieu of the designated representative.

I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

	4/2/99
Signature (designated representative)	Date
Signature (alternate designated representative)	Date

STEP 5

Provide the name of every owner and operator of the source and each affected unit (or combustion or process source) at the source. Identify the units they own and/or operate by boiler ID# from NADB, if applicable. For owners only, identify each state or local utility regulatory authority with ratemaking jurisdiction over each owner, if applicable.

Name Lansing Smith Electric Generating Plant						<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# 1	ID# 2	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities Florida Public Service Commission							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities							