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Certified Mail

February 15, 2011

Ms. Trina Vielhauer Bureau Air Regulation, Chief Florida Department of Environmental Protection Division of Air Resource Management 2600 Blair Stone Road, MS 5500 Tallahassee, FL 32399-2400

RECEIVED

FEB 18 2011

BUREAU OF AIR REGULATION

Dear Ms. Vielhauer:

Re: Updated Title V Responsible Official

Oleander Power Project

Permit No.: 0090180-006-AV

Enclose please find a completed copy of the Department of Environmental Protection Form 62-213.900(8). Please revise your records to designate Mr. E. Scott Dial as the Primary Responsible Official and James O. King as an Additional Responsible Official for Oleander Power Project.

If you have any questions, please call Randy Alexander at (205) 257.3017.

Sincerely,

Circe Starks

Environmental Services Manager

ia flate

cc: w/att:

Caroline Shine, FDEP Central District

Greg Terry, Gulf Power



Identification of Facility

Department of Environmental Protection

Division of Air Resource Management RESPONSIBLE OFFICIAL NOTIFICATION FORM

Note: A responsible official is not necessarily a designated representative under the Acid Rain Program. To become a designated representative, submit a certificate of representation to the U.S. Environmental Protection Agency (EPA) in accordance with 40 CFR Part 72.24.

1.							
	Oleander Power Project, LP						
2.	Site Name: Oleander Power Project	3. County: Brev	ard				
4.	4. Title V Air Operation Permit/Project No. (leave blank for initial Title V applications): 0090180-006-AV						
Notification Type (Check one or more)							
	INITIAL: Notification of responsible officials for an initial Title V application.						
	□ RENEWAL: Notification of responsible officials for a renewal Title V application.						
\square	CHANGE: Notification of change in responsible official(s).						
	Effective date of change in responsible official(s) February 7, 2011						
Primary Responsible Official							
1.							
	Plant Manager						
2.	Responsible Official Mailing Address: P.O. Box 781149, Orlando, FL 32878 Organization/Firm: Oleander Power Project						
	Street Address: 5150 South Alafaya Trail						
		ate: Florida	Zip Code: 32831				
3.	Responsible Official Telephone Numbers:						
	Telephöne: (321) 235-2521	Fax: (321) 235-2595					
4. Responsible Official Qualification (Check one or more of the following options, as applicable):							
 [X] For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. [] For a partnership or sole proprietorship, a general partner or the proprietor, respectively. [] For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official. 							
[] The designated representative at an Acid Rain source.							
J.	5. Responsible Official Statement: I, the undersigned, am a responsible official, as defined in Rule 62-210.200, F.A.C., of the Title V source addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the stutements made in this notification are true, accurate and complete. Further, I certify that I have authority over the decisions of all other responsible officials, if any, for purposes of Title V permitting. Signature Date						

1

DEP Form No. 62-213.900(8)

Effective: 6=02-02

Additional Responsible Official						
1.	Name and Position Title of Responsible Official:					
	James O. King	Operations and Mai	ntenance (C	&M) Manager		
2.	Responsible Official Mailing Address: Organization/Firm: Oleander Power Project					
	Street Address: 555 Town	send Road				
	City: Cocoa	State	e: Florida	Zip Code: 32926		
3.	Responsible Official Telep	hone Numbers:				
	Telephone: (321) 637-6	Fax: (321) 637-6616				
4.	Responsible Official Qualification (Check one or more of the following options, as applicable):					
	[7] For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C.					
	For a partnership or sole proprietorship, a general partner or the proprietor, respectively.					
LJ] For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official.					
[]	The designated representat	ve at an Acid Rain sou	rce.			
Additional Responsible Official 1. Name and Position Title of Responsible Official:						
2.	Responsible Official Maili Organization/Firm:	ng Address:				
	Street Address:					
	City:	State	: :	Zip Code:		
3.	Responsible Official Telep	hone Numbers:				
	Telephone:	Fax:				
4.	Responsible Official Qualification (Check one or more of the following options, as applicable):					
[]	[] For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C.					
[]] For a partnership or sole proprietorship, a general partner or the proprietor, respectively.] For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official.					
[]	The designated representative at an Acid Rain source.					

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