State **FL**

Identify the source by

plant name, State, and

STEP 1

ORIS code. STEP 2 Enter requested information for the designated representative.

Plant Name

E-mail address (if available)

613

Page 1

Certificate of Representation

					_					
For more	information,	see ins	tructions	and	refer	to	40	CFR	72.	.24
	· · · · · · · · · · · · · · · · · · ·	7 N								

Lauderdale

This submission is: 🔲 New 🕍 Revised (revised submissions must be complete; see instructions)

		 •	<u> </u>
Plant Name	l auderdale	_	ORIS Code

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

Nancy Kierspe, Manager Enviro	onmental Services
Address	
P. O. Box 14000 700 Universe Blvd. Juno Beach, Florida 33408-04	20
Phone Number 561-691-2930	Fax Number 561-691-2695
E-mail address (if available) nancy_kiers	pe@fpl.com
Name Adalberto Alfonso, Vice President,	Operations & Technical Services
Phone Number 561-691-2900	Fax Number 561-691-2606

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

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.

adalberto_alfonso@fpl.com

I certify that I have given notice of the agreement, selecting me as the 'designated representative' for the affected source and each affected unit at the source identified in this certificate of representation, 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 of 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.

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.

Plant Name (from Step 1)

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.

Signature (desi	1 Yn K	ursp entative)	e		10 /	1/02
Signature (alter					Date /0//	11/02
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STEP 5
Provide the name of every owner and operator of the source and identify each affected unit (or combustion or process source) they own

and/or operate.

⊕EPA

SEPA

United States
Environmental Protection Agency
Acid Rain Program

OMB No. 2060-0221 Expires_1-31-96.

Certificate of Representation APR 1 7 1996 1991

For	more	inf	orn	nati	on, s	ee :	nstr	uction	s a	nd	refer	to	40	CFR	72.	24	
						7 .			V	_							

This submission is: New X Revised BUREAU OF
This submission includes combustion or process sources under 40 CFR part 74 AR REGULATION

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

STEP 2 Enter requested information for the

designated representative.

STEP 3
Enter requested information for the alternate designated

representative, if applicable.

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 source is located.

Lauderdale Power Plant		FL	613
Plant Name		State	ORIS Code
			,

William Muly Reichel,	Manager,	Operations	1
P. 0. Box 14000 700 Universe Blvd. Juno Beach, FL 33408			
407-691-2870 Phone Number		407 - 691 - 2855 Fax Number	

·		
Antonio Rodriguez, Vice Pres	ident, Operations	
Addreso. Box 14000 700 Universe Blvd. Juno Beach, FL 33408		
407-691-2900 Phone Number	407-691-2606 Fax Number	

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.

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_{ID#} 5G	T1 _{ID#} 5GT	2 _{ID#}	ID#	ID# .	ID#	ID#
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Name	·				Owner	Operator
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EPA Form 7610-1 (rev. 12-94; previous versions obsolete)

STEP 5

Log #

Clerk 1

Data

Clerk 2

Trians.

MOTES:

Date

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.

BEST AVAILABLE COPY

SUN - SENTINEL

PUBLISHED DAILY

FORT LAUDERDALE, BROWARD COUNTY, FLORIDA

BOCA RATON, PALM BEACH COUNTY, FLORIDA

MIAMI, DADE COUNTY, FLORIDA

ATE OF FLORIDA
BUNTY OF BROWARD/PALM BEACH/DADE
BEFORE THE UNDERSIGNED AUTHORITY PERSONALLY APPEARED

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THE CIRCUIT COURT, WAS PUBLISHED IN SAID NEWSPAPER IN E ISSUES OF C , 11/03, 7 X

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FFIANT FURTHER SAYS THAT THE SAID SUN-SENTINEL IS A WSPAPER PUBLISHED IN SAID BROWARD/PALM BEACH/DADE UNTY, FLORIDA, AND THAT THE SAID NEWSPAPER HAS HERETOFORE EN CONTINUOUSLY PUBLISHED IN SAID BROWARD/PALM BEACH/DADE UNTY, FLORIDA, EACH DAY, AND HAS BEEN ENTERED AS SECOND ASS MATTER AT THE POST OFFICE IN FORT LAUDERDALE, IN SAID OWARD COUNTY, FLORIDA, FOR A PERIOD OF ONE YEAR NEXT ECEDING THE FIRST PUBLICATION OF THE ATTACHED COPY OF VERTISEMENT; AND AFFIANT FURTHER SAYS THAT HE/SHE HAS ITHER PAID NOR PROMISED ANY PERSON, FIRM OR CORPORATION IY DISCOUNT, REBATE, COMMISSION OR REFUND FOR THE PURPOSE SECURING THIS ADVERTISEMENT FOR PUBLICATION IN SAID

Kathlien Bost

SIGNATURE OF AFFIANT)

ORN TO AND SUBSCRIBED BEFORE ME IS 09 DAY OF NOVEMBER

D. 1993

IGNATURE OF NOTARY PUBLIC)

BARBARA STRICKLAND
MY COMMISSION # CC 207617 EXPIRES
July 24, 1996
BONDED THRU TROY FAIN INSURANCE, INC.

IAME OF NOTARY TYPED, PRINTED OR STAMPED)

RSONALLY KNOWN OR

CODUCED IDENTIFICATION ...

NOTICE

Notice is hereby given that Florida Power & Light Company has appointed William M. Reichel as the Designated Representative for Lauderdale Power Plant, replacing John M. Lindsay. As the designated representative, William M. Reichel has all the necessary authority to carry out the responsibilities of designated representative on behalf of Florida Power & Light Company, pursuant to the acid rain program of the Clean Air Act Amendments of 1990.

This notice was made in accordance with the Clean Air Act Amendments of 1990, 42 USCA SS 7401 et. seq., and applicable regulations of the United States Environmental Protection Agency.

Agency. November 3,4,5,6,7,8,9

hone Number

SEPACEIVED tificate of Representation

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BUREAU OF. AIR REGULATION

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

Lauderdale Power Plant 613 Plant Name ORIS Code State

STEP 2 Enter requested information for the designated representative.

William Muly Reichel, Manager, Operations Address P. O. Box 14000 700 Universe Blvd Juno Beach, FL 33408 407-691-2870 407-691-2855 Phone Number

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

Antonio Rodriguez, Vice President, Operations Address 700 Universe Blvd. Juno Beach, FL 33408 407-691-2900 407-691-2606

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" alsoapply 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.

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proceeds of transactions involving allowances willibe of distributed in proportion to each holder s legal, equitable; leasefold; or contactual teservation. or entitlement or, if such multiple holders have expressly provided for addifferent allowances by contract; that allowances and the proceeds of transaction will be deemed to be held or distributed in accordance with the contract

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Lauderdale Power Plant

Florida Power & Light Company

Plant Name (from Step 1)

The agreement by which I was selected as the alternate designate dispersion trains in applicable. It is an includes a procedure for the owners and operators of the source and affected this saithe source to authorize the alternate designated representative to act in liquid the designated representative.

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 Ishave, 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 to obtaining the information, I certify that the statements and informationare 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.

William M. Kentl	112/96
Signature (designated representative)	Date,
Signature (alternate designated redresentative)	Date 1/2/96

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.

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Florida Power & Light Company, P. O. Box 14000, Juno Beach, FL 33408-0420 700 Universe Boulevard

RECEIVED

JAN 09 1996

BUREAU OF AIR REGULATION

January 3, 1996

U. S. Environmental Protection Agency Acid Rain Program (6204J) Attention: Designated Representative 401 M Street, SW Washington, D. C. 20460

Dear Sirs:

I am enclosing revised Certification of Representation forms for Florida Power & Light Company's Lauderdale Plant (ORIS Code 613) and Martin Plant (ORIS Code 6043) which were revised due to the addition of Combined Cycle units at Martin Plant (HRSG3A, HRSG3B, HRSG4A & HRSG4B) and the re-powering of Lauderdale Plant to Combined Cycle required us to revise the Boiler ID from PFL 4 & PFL 5 to 4GT1, 4GT2, 5GT1 & 5GT2.

Should you need further information or assistance, please contact me at (407) 691-2870.

Sincerely,

William M. Reichel

Designated Representative

WMR/mjs Attachments

CC: Clair Fancy - FDEP/Tallahassee

Brian Beals - Chief - Source Evaluation Units Region IV

Richard Piper - Environmental Specialist

This submission is: New



Certificate of Representation

X Revised

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

Page 1

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

			613
Plant Name	Lauderdale Power Plant	State FL	ORIS Code

STEP 2
Enter requested information for the designated representative

Name Will	liam Muly Reichel, Mana	ager, Operation	Services	
70	O. Box 14000 O Universe Blvd. no Beach, Florida 3340	8		
Phone Number	or 407-691-2870	Fax Number	407-691-2855	

STÉP 3
Enter requested information for the alternate designated representative (optional)

Name Antonio Rodriguez, Vice Pres	sident. Operations
Address	
P.O. Box 14000 700 Universe Blvd. Juno Beach, Florida 33408	
Phone Number 407-691-2900	Fax Number 407-691-2606

STEP 4
Complete Step 5, read
the certifications and
sign and date

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 unitiat 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 eny 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 ellowances will be deemed to be held or distributed in accordance with the contract.

The agreement by which I was selected as the alternate designated representative 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.

					Certificate - Page				
Lauderdale Power Plant Plant Name (from Step 1)				Page 2 of					
Certification	•								
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 ewere that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment									
Signature (designated representative)					Date Oct. 29, 1993				
Signature (alternate)	whowy				Date Nov. 2, 1993				
		_							
Name Florida Power & Light Company					Operator				
ID# PFL 4 ID# PF	EL 5 ID#	1D#	ID#	ID#	ID#				
ID# ID#	10#	ID#	iD#	ID#	ID#				
Regulatory Authorities									
Name	-			Owner	Operator				
ID# ID#	ID#	ID#	ID#	10#	ID#				
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Regulatory Authorities									
Name				Owner	Operator				
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					Operator				
Name				Owner	Operator				
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EPA Form 7610-1 (11-92)

Regulatory Authorities

STEP 5 Provide the name of

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

owner

REST AVAILABLE COPY

SUN-SENTINEL PUBLISHED DAILY FORT LAUDERDALE, BROWARD COUNTY, FLORIDA BOCA RATON, PALM BEACH COUNTY, FLORIDA / MIAMI, DADE COUNTY, FLORIDA

ATE OF FLORIDA UNTY OF BROWARD/PALM BEACH/DADE EFORE THE UNDERSIGNED AUTHORITY PERSONALLY APPEARED WHO ON OATH SAYS THAT. /SHE IS A DULY AUTHORIZED REPRESENTATIVE OF THE ASSIFIED DEPARTMENT OF THE SUN-SENTINEL, DAILY

WSPAPER PUBLISHED IN BROWARD/PALM BEACH/DADE COUNTY, ORIDA THAT THE ATTACHED COPY OF ADVERTISEMENT, BEING A

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THE MATTER OF

THE CIRCUIT COURT, WAS PUBLISHED IN SAID NEWSPAPER IN **E ISSUES OF** , 11/03, 7 B1780100

FFIANT FURTHER SAYS THAT THE SAID SUN-SENTINEL IS A WSPAPER PUBLISHED IN SAID BROWARD/PALM BEACH/DADE UNITY, FLORIDA, AND THAT THE SAID NEWSPAPER HAS HERETOFORE EN CONTINUOUSLY PUBLISHED IN SAID BROWARD/PALM BEACH/DADE UNTY, FLORIDA, EACH DAY, AND HAS BEEN ENTERED AS SECOND ASS MATTER AT THE POST OFFICE IN FORT LAUDERDALE, IN SAID OWARD COUNTY, FLORIDA, FOR A PERIOD OF ONE YEAR NEXT ECEDING THE FIRST PUBLICATION OF THE ATTACHED COPY OF VERTISEMENT; AND AFFIANT FURTHER SAYS THAT HE/SHE HAS ITHER PAID NOR PROMISED ANY PERSON, FIRM OR CORPORATION Y DISCOUNT, REBATE, COMMISSION OR REFUND FOR THE PURPOSE SECURING THIS ADVERTISEMENT FOR PUBLICATION IN SAID WSPAPER.

SIGNATURE OF AFFIANT)

ORN TO AND SUBSCRIBED BEFORE ME IS 09 DAY OF NOVEMBER

1993

IGNATURE OF NOTARY PUBLIC)

BARBARA STRICKLAND MY COMMISSION # CC 207617 EXPIRES July 24, 1996 BONDED THRU TROY FAIN INSURANCE, INC.

IAME OF NOTARY TYPED, PRINTED OR STAMPED)

RSONALLY KNOWN

ODUCED IDENTIFICATION ...

Notice is hereby given that Florida Power & Light that Florida Power & Light Company has appointed Milliam. M. Reichel as the Designated Representative for Lauderdale Power Plant, replacing John M. Lindsay. As the designated representative, william. M. Reichelhas all the necessary authority to carry out the responsibilities of designated representative on behalf of Florida Power & Light Comford Florida Power & Light Com-

Florida Power & Light Company, pursuant to the acid-rain program of the Clean Air Act Amendments of 1990.

This notice was made in accordance with the Clean Air Act Amendments of 1990, 42:USCA SS 7401 et seq. and applicable regula-tions of the United States Environmental Protection Agency. November 3,4,5,6,7,8,9