

Barbara / File



Jeb Bush
Governor

Department of Environmental Protection

Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, Florida 32399-2400
Certified Mail -- Return Receipt Requested

David B. Struhs
Secretary

August 22, 2000

Mr. Mark Santella
Plant Manager
Wheelabrator South Broward, Inc.
4400 South State Road 7
Fort Lauderdale, FL 33314

Re: DEP File No. 0112119-004-AC, PSD-FL-105C
Modification to Permit No. PSD-FL-105B
Wheelabrator South Broward

Dear Mr. Santella:

We are in receipt of your request for a minor modification to the referenced facility PSD permit for the construction of two minor source wet scrubbers dated July 24, 2000, and received by the Department on July 27, 2000. However, we must deem your application incomplete due to the following reasons:

1. Please submit your application using the proper Department form No. 62-210.900(1). The form is available on the Department's Internet web site: www.dep.state.fl/air.
2. Rule 62-4.050(3), F.A.C. requires that all applications for a Department permit must be certified by a professional engineer registered in the State of Florida. This requirement also applies to responses to Department requests for additional information of an engineering nature. Please ensure that the completed application is so certified.

Please also note that we are advising applicants that Rule 62-4.055(1), F.A.C. requires a response to requests for information within 90 days. When we receive the above mentioned items, we will continue processing your application. If you have questions, please contact Tom Cascio at 850/921-9526.

Sincerely,

Scott M. Sheplak, P.E.
Administrator
Title V Section

cc: Jarrett Mack, Broward County
Isidore Goldman, SE District

"More Protection, Less Process"

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SENDER:

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- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mr. Mark Santella
Wheelabrator South Broward, Inc.
4400 S. State Rd. 7
Fort Lauderdale, FL 33314

4a. Article Number

P 265 657 775

4b. Service Type

- Registered Certified
- Express Mail Insured
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7. Date of Delivery

8/28

5. Received By: (Print Name)

Carlos Duarte

6. Signature: (Addressee or Agent)

X Duarte

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 265 657 775

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Mr. Mark Santella
Wheelabrator South Broward, Inc.
4400 S. State Rd. 7
Fort Lauderdale, FL 33314

PS Form 3800, April 1995

Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
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TOTAL Postage & Fees	\$
Postmark or Date	08-24-00 Sgh