

Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Colleen M. Castille  
Secretary

May 5, 2004

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. John W. Chorlog, P.E.  
Assistant Director Wastewater  
Miami-Dade Water & Sewer Department  
3071 S.W. 38 Avenue  
Miami, Florida 33146

Re: DRAFT Permit No. 0250476-004-AC  
Central District Wastewater Treatment Plant

Dear Mr. Chorlog:

The Department has received your application for an air construction/operation permit for the modification of the existing standby generators and the installation of two additional standby generators for your Central District Wastewater Treatment Plant in Dade County. The application was received on April 6, 2004. We need the additional information listed below in order to continue processing this request.

1. Please provide actual emissions of NO<sub>x</sub> for the last two years for the 4 digester gas-fired cogeneration engines (E.U. Nos. 007,009,010 and 011) as well as 3 standby generator sets (E.U Nos. 013,014 and 015).
2. Table 4-1 on Page 4-2 of the application indicates the hours of operation for the three existing standby generators and the two new standby generators as 52,560. Please indicate how this number was arrived at.
3. The application indicates restricting the fuel usage for the five standby generators to 725,000 gallons per year. Please indicate how the facility will show compliance with fuel usage. Will the facility have a totalizer for fuel usage for all five standby generators? Is it possible to have hours of operation limit as well that conforms to total fuel usage.
4. The application request external radiators for the three existing standby generators. Please indicate if this will reduce NO<sub>x</sub> emissions from the engines. If it does, quantify the decrease in NO<sub>x</sub> emissions.
5. Table 4-2 on Page 4-3 of the application lists NO<sub>x</sub> emission factor as 3.75 lbs/MMBtu. Where was this number derived from?

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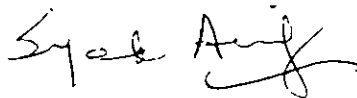
6. Page 10 of the Application Long Form list NOx Annual Cap in TPY as 112 for the five standby generators. Please indicate how this number was arrived at.

The Department will resume processing this application after receipt of the requested information. 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. A new certification statement by the authorized representative or responsible official must accompany any material changes to the application. Rule 62-4.055(1), F.A.C. now requires applicants to respond to requests for information within 90 days.

Please note that in accordance with Rule 62-4.055(1), "The applicant shall have **ninety days** after the Department mails a timely request for additional information to submit that information to the Department..... Failure of an applicant to provide the timely requested information by the applicable date **shall** result in denial of the application."

We will be happy to meet and discuss the details with you and your staff. Mr. Syed Arif, P.E. is responsible for the technical review of the application. He may be contacted at 850/921-9528.

Sincerely,



Syed Arif, P.E.  
Permit Engineer  
Permitting South Section

cc: R. O'Rourke, P.E., MD-WASD  
L. Tallum, DEP-SED  
M. Muthiah, DERM

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: Mr. John W. Chorlog, P.E. Assistant Director Wastewater Miami-Dade Water & Sewer Department 3071 S.W. 38 Avenue Miami, Florida 33146	B. Received by (Printed Name) <i>[Signature]</i> Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No <i>5/7/01</i>
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
7001 0320 0001 3692 6655	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540	

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 Street, Apt. No.,  
 or PO Box No. 3071 S.W. 38 Avenue  
 City, State, ZIP+4  
 Miami, Florida 33146

PS Form 3800, January 2001 See Reverse for Instructions

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Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Colleen M. Castille  
Secretary

May 28, 2004

CERTIFIED MAIL – Return Receipt Requested

Mr. Vicente Castro, Assistant Director  
Miami-Dade County Department of Solid Waste Management  
8675 NW 53<sup>rd</sup> Street, Suite 201  
Miami, FL 33166-4598

Re: Opening for Cause - Applicable Requirements  
Title V Air Operation Permit No. 0250348-004-AV  
Miami-Dade County Resource Recovery Facility

Dear Mr. Castro:

This letter is to advise you that we will be opening for cause the Title V Operation Permit 0250348-004-AC issued on October 12, 2000. The purpose is to make a number of changes based on applicable requirements from underlying state construction permits and federal New Source Performance Standards. These include:

- Correcting the allowable number of hours for which carbon monoxide (CO) excess emissions can be excluded under 40 CFR 60, Subpart Cb. (Reference Specific Conditions B.44 - 45)
- Deleting the control device inlet temperature monitoring requirement no longer applicable pursuant to a previous permit revision. (Reference Specific Condition B.17)
- Incorporating a recent provision in 40 CFR Subpart Cb that addresses allows excess CO emissions when related to loss of boiler water control when determined to be a malfunction.

Since the CO excess emissions provisions of Subpart Cb are applicable requirements, the Department is required to open your Title V Permit for cause and include them in accordance with Rules 62-4.080(1), 62-213.430(4) and 62-213.440(1), F.A.C., and 40 CFR 70.7(f)(1)(iii). Please note that the adjustment to the Subpart Cb CO excess emissions provision does not affect the applicable state excess emission rule that is already in the permit. We expect to prepare and send you a draft revision of the Title V Permit for review and comment within the next month. If there are any questions, please call Teresa Heron at 850-921-9529.

Sincerely,

A. A. Linero, Program Administrator  
South Permitting Section  
Bureau of Air Regulation

AAL/th

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<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Wanda J. Stolley</i></p> <p>C. Date of Delivery <i>6/3/09</i></p>
<p>1. Article Addressed to:</p> <p>Mr. Vicente Castro, Assistant Director Miami-Dade County Department of Solid Waste Management 8675 NW 53rd Street, Suite 201 Miami, Florida 33166-4598</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number -- 7000 1670 0013 3109 8642 (Transfer from service label)</p>	
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540</p>	

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Sent To  
**Mr. Vicente Castro, Assistant Director**  
 Street, Apt. No. or P.O. Box No.  
**8675 NW 53rd Street, Suite 201**  
 City, State, ZIP+4  
**Miami, Florida 33166-4598**

PS Form 3800, May 2000

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