

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.

Identification of	Facility		
Facility Own	er/Company Name: JEA		
2. Site Name: H	Buckman Street Wastewate	er Treatment Plant	3. County: Duval
4. Title V Air C 0310166-011		o. (leave blank for in	itial Title V applications):
Notification Typ	e (Check one or more)		
□INITIAL:	Notification of responsi	ble officials for an in	itial Title V application.
□RENEWAL:	Notification of responsi	ble officials for a ren	ewal Title V application.
CHANGE:			
	Effective date of change	in responsible offici	ial(s) January 1 st , 2013
Primary Respon	sible Official		
1. Name an	d Position Title of Respon	sible Official:	
Brian J. I	Roche, VP/GM Water Was	stewater Systems	
	Official Mailing Address:		
Organization			
	ss: 21 West Church Street		
City: Jacks		State: FL	Zip Code: 32202
3. Responsible (Official Telephone Numbe	ers:	
Telephone:	<u> </u>		
			e following options, as applicable):
principal busin for the corpora the overall ope to a permit und	ess function, or any other per tion, or a duly authorized rep ration of one or more manufa- ler Chapter 62-213, F.A.C.	rson who performs simures entative of such peracturing, production, or	ent of the corporation in charge of a ilar policy or decision-making functions son if the representative is responsible for operating facilities applying for or subject
For a municipal ranking elected	p or sole proprietorship, a ge ity, county, state, federal, or l official. representative at an Acid Ra	other public agency, ei	prietor, respectively. ther a principal executive officer or
J. Ixesponsione	Official Statement:	at boarco.	
I, the undersign addressed in th inquiry, that th have guthprity	Official Statement: ned, am a responsible officia iis notification. I hereby cert e statements made in this not	l, as defined in Rule 62 ify, based on informati ification are true, accu r responsible officials,	-210.200, F.A.C., of the Title V source on and belief formed after reasonable trate and complete. Further, I certify that I if any, for purposes of Title V permitting.

DEP Form No. 62-213.900(8)

Effective: 6-02-02

Additional Responsible Official		
1. Name and Position Title of Respo	nsible Official:	
P G Para, Chief Public Affairs Officer	•	
2. Responsible Official Mailing Add	ress:	
Organization/Firm: JEA		
Street Address: 21 West Church S	Street	
City: Jacksonville State: FL	Zip Code: 3220	02
3. Responsible Official Telephone N	lumbers:	-
Telephone: (904)665-6208	Fax: (904)665-	
		e following options, as applicable):
operating facilities applying for or [] For a partnership or sole proprietor	r any other person who person, or a duly authorized received overall operation of one subject to a permit under riship, a general partner or ederal, or other public age	rforms similar policy or decision- epresentative of such person if the or more manufacturing, production, or Chapter 62-213, F.A.C.
Additional Responsible Official		
Additional Responsible Official 1. Name and Position Title of Responsible Official	nsible Official:	
1. Name and Position Title of Respon		
 Name and Position Title of Response Responsible Official Mailing Addr 		
 Name and Position Title of Response Responsible Official Mailing Addr Organization/Firm: 		
 Name and Position Title of Response Responsible Official Mailing Addr Organization/Firm: Street Address: 	ress:	7in Code
 Name and Position Title of Response Responsible Official Mailing Addr Organization/Firm: Street Address: City: 	ress: State:	Zip Code:
 Name and Position Title of Response Responsible Official Mailing Addrorganization/Firm: Street Address: City: Responsible Official Telephone No. 	ress: State: umbers:	Zip Code:
 Name and Position Title of Response Responsible Official Mailing Addrorganization/Firm: Street Address: City: Responsible Official Telephone Notes that the properties of the properties of	State: umbers: Fax: (
 Name and Position Title of Response Responsible Official Mailing Addrorganization/Firm: Street Address: City: Responsible Official Telephone Note Telephone: () - Responsible Official Qualification 	State: umbers: Fax: ((Check one or more of th) - e following options, as applicable):
Name and Position Title of Responsible Official Mailing Addrorganization/Firm: Street Address:	State: umbers: Fax: (Check one or more of the cretary, treasurer, or vicerany other person who person, or a duly authorized received on, or a duly authorized received on a permit under) - e following options, as applicable): president of the corporation in charge rforms similar policy or decision- epresentative of such person if the or more manufacturing, production, or Chapter 62-213, F.A.C.
2. Responsible Official Mailing Addrorganization/Firm: Street Address: City: 3. Responsible Official Telephone Note Telephone: () - 4. Responsible Official Qualification [] For a corporation, the president, see of a principal business function, or making functions for the corporation representative is responsible for the operating facilities applying for or [] For a partnership or sole proprietor.	State: umbers: Fax: ((Check one or more of the cretary, treasurer, or vice- r any other person who person, or a duly authorized re- e overall operation of one subject to a permit under ship, a general partner or the cress.) - e following options, as applicable): president of the corporation in charge rforms similar policy or decision- epresentative of such person if the or more manufacturing, production, or Chapter 62-213, F.A.C.

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