



Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

May 12, 2004

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Ms. Rebecca M. Peterson
Solutia Inc.
P. O. Box 97
Gonzalez, FL 32560-0097

Re: Adipic Controls Modernization Project/Title V Permit No. 0330040-002-AV

Dear Ms. Peterson:

The Department reviewed your letter dated April 28, 2004 in response to our request for additional information on the Adipic Acid Controls Modernization Project. Based on the information presented in your letter, it appears that there will not be a near term increase in actual emissions resulting from this project.

However, the project has the effect of creating additional steam capacity that might be applied elsewhere to increase production if needed. Though no construction permit will be required presently, please keep in mind that this modification could have consequences over the next five years (contemporaneous emissions) if the additional steam capacity is utilized to increase production in any upstream or downstream part of the facility.

If you have any questions, please call John Reynolds at 850/921-9530.

Sincerely,

A handwritten signature in black ink, appearing to read "James K. Pennington".

James K. Pennington, P.E.
Administrator
North Permitting Section

cc: Sandra Veazy, DEP NWD
Kennard Kosky, P.E.

"More Protection, Less Process"

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U.S. Postal Service
CERTIFIED MAIL RECEIPT
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OFFICIAL USE
 Ms. Rebecca M. Peterson

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Sent To
 Ms. Rebecca M. Peterson

**Street, Apt. No.,
 or PO Box No.** P. O. Box 97

City, State, ZIP+4
 Gonzalez, Florida 32560-0097

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature x <i>Becky Zapp</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Becky Zapp</i> C. Date of Delivery <i>5/24/03</i></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>1. Article Addressed to: Ms. Rebecca M. Peterson Solutia Inc. P. O. Box 97 Gonzalez, Florida 32560-0097</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>2. Article Number (Transfer from service label)</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
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<p>PS Form 3811, August 2001</p>		<p>Domestic Return Receipt 102595-02-M-1540</p>	

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