

Department of Environmental Protection

File Copy

Jeb Bush
Governor

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

David B. Struhs
Secretary

February 18, 2004

CERTIFIED MAIL – Return Receipt Requested

Mr. Alex C. George
V.P. and Responsible Official
Hardee Power Partners (A Subsidiary of Invenergy, LLC)
P.O. Box 111
Tampa, Florida 33601-0111

Re: Title V Air Operation Permit Renewal
DRAFT Permit Project No.: 0490015-005-AV
Hardee Power Station

Dear Mr. George:

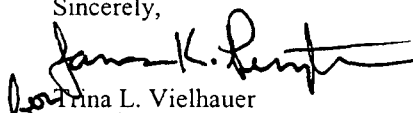
On December 22, 2003, the Department received a request for the renewal of the Title V Air Operation Permit. Based on our review of the proposed project, we have determined that the following additional information is needed in order to continue processing this application package. Please provide all assumptions, calculations, and reference material(s), that are used or reflected in any of your responses to the following issues:

A. Regarding NO_x Emissions From CT-1A, CT-1B & CT-2A (EUs 001, 002 & 003).

1. The CAM plan that was submitted for monitoring the water injection system did not include test data to justify the chosen indicator range. Please provide a table of test data that was used to establish the minimum required water-to-fuel ratios at the various load levels. In the table, provide the following information: Date of test, allowable operating rate, tested operating rate, allowable NO_x emission limit, tested NO_x emission limit, recorded water-to-fuel ratio. Include information for each emissions unit and each available test.
2. Please provide detailed information about the monitoring system (Mark IV system?) that controls, and automatically adjusts, the water injection rate. At what point is it set to make an adjustment? Does it adjust the injection rate when the water-to-fuel ratio drops below the minimum required ratio, or does it have a built in safety factor that requires an adjustment to be made at some point above the minimum required ratio? How often is it calibrated? How accurate is it? Etc.
3. What is the maximum water-to-fuel ratio that can be sustained and still meet the allowable CO limit? While CO is not controlled, and therefore not subject to CAM, it is understood that increasing the water-to-fuel ratio causes an increase in CO emissions. Because of this, the CAM plan should also include a maximum water-to-fuel ratio in addition to a minimum water-to-fuel ratio.
4. Please address the above items and provide a revised CAM plan that reflects any necessary changes. With the response, also include an electronic copy (Word format) of the revised CAM plan.

The Department will resume processing this application after receipt of the requested information. If you have any questions regarding this matter, please call Bruce Mitchell at 850/413-9198 or Jonathan Holtom at 850/921-9531.

Sincerely,


Trina L. Vielhauer
Chief
Bureau of Air Regulation


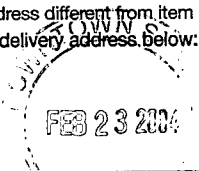
TLV/bm

cc: Gerald Kissel, DEP - SWD
Byron T. Burrows, P.E., TECO

Bruce
Jonathan
Trina's Ready File } 2-18-04

"More Protection, Less Process"

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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. 	A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: Mr. Alex C. George V.P. and Responsible Official Hardee Power Partners (A Subsidiary of Invenergy, LLC) P. O. Box 111 Tampa, Florida 38601-0111	B. Received by (Printed Name) <u>J. C. CHAVEZ</u> C. Date of Delivery
2. Article Number <i>(Transfer from service label)</i>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <div style="text-align: center;">  </div>
	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.
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
	7001 1140 0002 1578 0539

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

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CERTIFIED MAIL RECEIPT
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PS Form 3800, January 2001 See Reverse for Instructions											

7001 1140 0002 1578 0539

DEP ROUTING AND TRANSMITTAL SLIP

TO: (NAME, OFFICE, LOCATION) 3. _____
1. Howard Rhodes 4. _____
2. _____ 5. _____

PLEASE PREPARE REPLY FOR:
 SECRETARY'S SIGNATURE
 DIV/DIST DIR SIGNATURE
 MY SIGNATURE
 YOUR SIGNATURE
 DUE DATE _____

ACTION/DISPOSITION
 DISCUSS WITH ME
 COMMENTS/ADVISE
 REVIEW AND RETURN
 SET UP MEETING
 FOR YOUR INFORMATION
 HANDLE APPROPRIATELY
 INITIAL AND FORWARD
 SHARE WITH STAFF
 FOR YOUR FILES

COMMENTS:

Re: FINAL T-6 V permit

Clair has already reviewed. He asked me to pass on to you for signature.

Thank you.

FROM: Scott Shepleh DATE: 10/6/00 PHONE: _____