



# Department of Environmental Protection

## Division of Air Resource Management RESPONSIBLE OFFICIAL NOTIFICATION FORM

**RECEIVED**  
JUN 05 2015  
DIVISION OF AIR  
RESOURCE MANAGEMENT

**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

1. Facility Owner/Company Name: City of Vero Beach	
2. Site Name: Municipal Power Plant	3. County: Indian River
4. Title V Air Operation Permit/Project No. (leave blank for initial Title V applications): 0610029-009-AV	

### Notification Type (Check one or more)

<input type="checkbox"/> INITIAL:	Notification of responsible officials for an initial Title V application.
<input type="checkbox"/> RENEWAL:	Notification of responsible officials for a renewal Title V application.
<input checked="" type="checkbox"/> CHANGE:	Notification of change in responsible official(s).
	Effective date of change in responsible official(s) <u>6/1/15</u>

### Primary Responsible Official

1. Name and Position Title of Responsible Official: W. Ted Fletcher
2. Responsible Official Mailing Address: Organization/Firm: City of Vero Beach Street Address: P.O.Box 1389 City: Vero Beach State: FL Zip Code: 32961
3. Responsible Official Email/Telephone Numbers: Email Address: tfletcher@covb.org Telephone: (772) 978-5460 Fax: (772) 770-2230
4. Responsible Official Qualification (Check one or more of the following options, as applicable): <input type="checkbox"/> For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. <input type="checkbox"/> For a partnership or sole proprietorship, a general partner or the proprietor, respectively. <input checked="" type="checkbox"/> For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official. <input checked="" type="checkbox"/> The designated representative at an Acid Rain source.

**Additional Responsible Official**

1. Name and Position Title of Responsible Official: Paul Kalv, Manager of Support Services
2. Responsible Official Mailing Address: Organization/Firm: City of Vero Beach Street Address: P. O. Box 1389 City: Vero Beach State: FL Zip Code: 32961
3. Responsible Official Email/Telephone Numbers: Email Address: pkalv@covb.org Telephone: (772) 978-5055 Fax: (772) 978-5090
4. Responsible Official Qualification (Check one or more of the following options, as applicable): <input type="checkbox"/> For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. <input type="checkbox"/> For a partnership or sole proprietorship, a general partner or the proprietor, respectively. <input checked="" type="checkbox"/> For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official. <input checked="" type="checkbox"/> The designated representative at an Acid Rain source.

**Additional Responsible Official**

1. Name and Position Title of Responsible Official:
2. Responsible Official Mailing Address: Organization/Firm: Street Address: City: State: Zip Code:
3. Responsible Official Email/Telephone Numbers: Email Address: Telephone: ( ) - Fax: ( ) -
4. Responsible Official Qualification (Check one or more of the following options, as applicable): <input type="checkbox"/> For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. <input type="checkbox"/> For a partnership or sole proprietorship, a general partner or the proprietor, respectively. <input type="checkbox"/> For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official. <input type="checkbox"/> The designated representative at an Acid Rain source.

Facility Contact - Diane Quimby, Chemistry Lab Coordinator  
(772) 978-5026 dquimby@covb.org

*Called and spoke w/ Diane 6-8-15 and confirmed she is not the RO. WSM*

5. Responsible Official Statement:

*I, the undersigned, am a responsible official, as defined in Rule 62-210.200, F.A.C., of the Title V source addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I certify that I have authority over the decisions of all other responsible officials, if any, for purposes of Title V permitting.*

*Michelle T. Fletch*

*5-29-15*

Signature

Date