

Covanta Projects, Inc.

A Covanta Energy Company 40 Lane Road Fairfield, NJ 07004 Tel 973 882 9000 Fax 973 882 4156

28 February 2003

Mr. Scott M. Sheplak, P.E., Administrator FDEP, Title V Section 2600 Blair Stone Road Tallahassee, FL 32399-2400

SUBJ: Designation of an Additional Responsible Official Covanta Lake, Inc. Facility ID 0690046

Dear Mr. Sheplak:

Enclosed please find DEP Form 62-213.9000(8) designating Gary Main, Facility Manager of the Covanta Lake Resource Recovery Facility as an additional responsible Official.

If additional information is needed, please do not hesitate to contact me at (973) 882-7285.

Sincerely,

Leon Brasowski

V.P., Environmental Permitting

Copy: K. Stepsus, Covanta Projects

G. Main, Covanta Lake
V. Ta, Covanta Lake



#### 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.

100	Identification of Facility					
1.	1. Facility Owner/Company Name: Covanta Lake, Inc.					
	2. Site Name	: Covanta Lake, Inc.	3. County: Lake			
	3. Title V Air Operation Permit/Project No. (leave blank for initial Title V applications): 0690046-001-AV					
Notification Type (Check one or more)						
	INITIAL:	Notification of responsible officials for an initial Title V application.				
	RENEWAL:	Notification of responsible officials for a renewal Title V application.				
■	CHANGE:	Notification of change in responsible official(s).				
		Effective date of change in responsible official(s) March 1-2003				
Primary Responsible Official						
1.			l: Leon Brasowski, VP, Environmental Permitting			
2.	•	Official Mailing Address:				
	Organization/Firm: Covanta Projects, Inc.					
)	Street Address: 40 Lane Road					
	City: Fa	irfield Sta	ate: New Jersey Zip Code: 07004			
3.	3. Responsible Official Telephone Numbers:					
	Telephone: (973) 882 - 7285 Fax: (973) 882 - 4167					
4.						
	principal busine the corporation overall operation permit under Cl For a partnership For a municipal elected official.	ess function, or any other person who, or a duly authorized representative on of one or more manufacturing, propagater 62-213, F.A.C. or sole proprietorship, a general patty, county, state, federal, or other pu	blic agency, either a principal executive officer or ranking			

DEP Form No. 62-213.900(8)

Effective: 6-02-02

# 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 duthority over the decisions of all other responsible officials, if any, for purposes of Title V permitting. Signature Date

DEP Form No. 62-213.900(8) Effective: 6-02-02

Additional Responsible Official					
1. Name and Position Title of Responsible Official: Gary Main, Facility Manager					
2. Responsible Official Mailing Address:					
Organization/Firm: Covanta Lake, Inc					
Street Address: 3830 Rogers Industria	l Park Road				
City: Okahumpka	State: FL	Zip Code: 34762			
3. Responsible Official Telephone Numb	pers:				
Telephone: (352) 365 - 1611		(352) 365 - 6359			
4. Responsible Official Qualification (Check one or more of the following options, as applicable):					
[X] 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.  [ ] For a partnership or sole proprietorship, a general partner or the proprietor, respectively.					
[ ] For a municipality, county, state, feder					
officer or ranking elected official.	, ,				
[ ] The designated representative at an Ac	eid Rain source.				
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Additional Responsible Official					
1. Name and Position Title of Responsib	le Official:				
2. Responsible Official Mailing Address	:				
Organization/Firm:					
Street Address:	_				
City:	State:	Zip Code:			
3. Responsible Official Telephone Numb	bers:				
Telephone: ( ) - Fax: ( ) -					
4. Responsible Official Qualification (Check one or more of the following options, as applicable):					
	heck one or more of	the following options, as applicable):			
[ ] For a corporation, the president, secret	tary, treasurer, or vic	e-president of the corporation in charge			
of a principal business function, or an	tary, treasurer, or vic y other person who p	re-president of the corporation in charge performs similar policy or decision-			
of a principal business function, or an making functions for the corporation,	tary, treasurer, or vic y other person who p or a duly authorized	perpresident of the corporation in charge performs similar policy or decision-representative of such person if the			
of a principal business function, or an making functions for the corporation,	tary, treasurer, or vic y other person who p or a duly authorized verall operation of or	re-president of the corporation in charge performs similar policy or decision- representative of such person if the ne or more manufacturing, production, or			
of a principal business function, or an making functions for the corporation, representative is responsible for the or	tary, treasurer, or vic y other person who p or a duly authorized verall operation of or oject to a permit und	re-president of the corporation in charge performs similar policy or decision-representative of such person if the ne or more manufacturing, production, or er Chapter 62-213, F.A.C.			
of a principal business function, or an making functions for the corporation, representative is responsible for the or operating facilities applying for or sub-	tary, treasurer, or vic y other person who p or a duly authorized verall operation of or oject to a permit under p, a general partner of	pe-president of the corporation in charge performs similar policy or decision-representative of such person if the ne or more manufacturing, production, or er Chapter 62-213, F.A.C. or the proprietor, respectively.			

DEP Form No. 62-213.900(8) Effective: 6-02-02

### ASME INTERNATIONAL

The American Society of Mechanical Engineers

Founded 1880 ————

## CHIEF FACILITY OPERATOR OF A RESOURCE RECOVERY FACILITY

# Gary Main

having demonstrated the required qualification in accordance with the ASME Standard for the Qualification and Certification of Resource Recovery Facility Operators

has been awarded

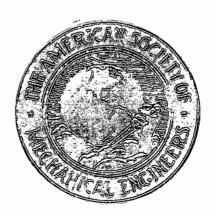
#### **OPERATOR CERTIFICATION**

as of October 1, 1998 effective to the expiration date shown on certificate QRO-OP 390

David A. Wizda

Managing Director,

Conformity Assessment







ASME QRO Operator Certification

Chief Facility Operator Issued to: Gary Main Certified: 10/1/03 Expires: 10/1/08 Cert.#: QRO-OP390

Parid A. Wight Managing Director Conformity Assessment