



Covanta Lee, Inc.
A Covanta Energy Company
10500 Buckingham Road
Fort Myers, FL 33905
Tel 941 337 2200
Fax 941 337 2510

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OCT 15 2002

October 9, 2002

BUREAU OF AIR REGULATION

Mr. Scott Sheplak, P.E.
Title V Program Administrator
Florida Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Subject: Additional Title V Responsible Officials
Title V Operating Permit No. 0710119-001-AV

Dear Mr. Sheplak:

Enclosed, please find completed Form No. 62-213.900(8), entitled "Responsible Official Notification Form". This form designates me as an additional responsible official for the Lee County Resource Recovery Facility.

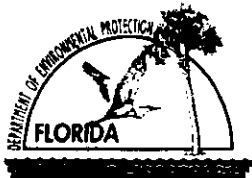
If you have any questions regarding this matter, please do not hesitate to contact me. I can be reached during the day at (239) 337-2200.

Sincerely,

Thomas C. Eriksen
General Manager

cc: Lindsey Sampson, Lee County (w/ enc)
Becky Macionski, Covanta Hillsborough (w/ enc)
File

cc: Ron Blakemore, SD



Department of Environmental Protection

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Division of Air Resource Management

BUREAU OF AIR REGULATION

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

1. Facility Owner/Company Name: Lee County Solid Waste Division	
2. Site Name: Lee County Resource Recovery Facility	3. County: Lee County
4. Title V Air Operation Permit/Project No. (leave blank for initial Title V applications): Permit Number: 0710119-001-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>September 9, 2002</u>

Primary Responsible Official

1. Name and Position Title of Responsible Official Mr. Lindsey J. Sampson, P.E. Deputy Director
2. Responsible Official Mailing Address: Organization/Firm: Lee County Solid Waste Division Street Address: 10500 Buckingham Road, Suite 200 City: Fort Myers State: FL Zip Code: 33905
3. Responsible Official Telephone Numbers: Telephone: (239) 338-3302 Fax: (239) 461-5871
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 type="checkbox"/> The designated representative at an Acid Rain source.

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.

Rickey J. Sampson

Signature

9/26/02

Date

Additional Responsible Official

1. Name and Position Title of Responsible Official: Thomas C. Eriksen, General Manager
2. Responsible Official Mailing Address: Organization/Firm: Covanta Lee, Inc. Street Address: 10500 Buckingham Road, Suite 400 City: Fort Myers State: FL Zip Code: 33905
3. Responsible Official Telephone Numbers: Telephone: (239) 337-2200 Fax: (239) 331-2510
4. Responsible Official Qualification (<i>Check one or more of the following options, as applicable</i>): <input checked="" 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.

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 Telephone Numbers: Telephone: () - Fax: () -
4. Responsible Official Qualification (<i>Check one or more of the following options, as applicable</i>): <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.