

Barbara \ File

Department of

Environmental Protection

Lawton Chiles Governor Virginia B. Wetherell Secretary

NOTICE OF ADMINISTRATIVE PERMIT CORRECTION

In the Matter of an Application for Administrative Permit Correction

Mr. J. M. Parent Plant General Manager Florida Power & Light Company 11770 U.S. Highway One North Palm Beach, FL 33408 FINAL Permit No.: 0810010-001-AV

Manatee Plant

The Department has determined that several minor corrections to information contained in Final Permit Number 0810010-001-AV are required. These corrections are related to typographical errors, minor omissions, or clarification of permit conditions. These corrections are minor in nature and do not alter, modify or revise any permit requirement. This Administrative Permit Correction was processed as project number 0810010-003-AV, pursuant to Rule 62-210.360, F.A.C. The corrections are:

Specific condition A.27 shall read:

A.27. Operating Conditions During Testing - PM and VE. When required, testing for particulate matter and visible emissions shall be conducted while firing No. 6 fuel oil at the maximum allowable rate of 8650 million Btu per hour, except as provided below. Particulate and visible emissions shall be conducted under both sootblowing and non-sootblowing conditions, and shall be conducted while injecting additives consistent with normal operating practices.

Testing may be conducted while firing No. 6 fuel oil at less than 90 percent of the maximum allowable rate; however, subsequent emissions unit operation is limited as described in specific condition A.26 of this permit. [Rules 62-4.070(3) and 62-213.440 F.A.C., AO 41-204804 Specific Condition 5, AO 41-219341 Specific Condition 5]

Specific condition A.35 shall read:

A.35. <u>Fuel Analysis Report</u>. The owner or operator shall, by the fifteenth day following each calendar month, submit to the Department's Southwest District, Air Section, a report of fuel analyses that are representative of each fuel fired in the preceding month. The report shall document the heating value, density or specific gravity, and the percent sulfur content by weight of each fuel fired.

[Rule 62-4.070(3) and 62-213.440, F.A.C., AO 41-204804 Specific Condition 6, AO 41-219341 Specific Condition 6]

The brief description of emissions units in Table 1-1 of Appendix S shall read:

Emissions U	it Brief Description
001	Fossil Fuel Steam Generator, Unit 1
002	Fossil Fuei Steam Generator, Unit 2

The row of Table 2-1 of Appendix S for the pollutant SO₂ shall read:

	Pollutant or	Fuel(s)	Compliance	Testing	Frequency	Minimum	CMS ²	See Permit
-	Parameter		Method	Frequency	Base Date ¹	Compliance		Condition(s)
1						Test Duration		
Ī	SO ₂	Oil	Fuel sampling &	As received				A.9, A.15,
			analysis					A.23 & A.24

This permit correction corrects and is a part of Final Permit Number 0810010-001-AV. This permit correction is issued pursuant to Chapter 403, Florida Statutes.

Any party to this order (permit correction) has the right to seek judicial review of it under section 120.68 of the Florida Statutes, by filing a notice of appeal under rule 9.110 of the Florida Rules of Appellate Procedure with the clerk of the Department of Environmental Protection in the Office of General Counsel, Mail Station 35, 3900 Commonwealth Boulevard, Tallahassee, Florida, 32399-3006, and by

Notice of Administrative Permit Correction Florida Power & Light Company, Manatee Plant Permit Number 0810010-001-AV Page 2 of 2

filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate District Court of Appeal. The notice must be filed within thirty days after this order is filed with the clerk of the Department.

Executed in Tallahassee, Florida.

H. Fancy, P.E., Chief Bureau of Air Regulation

CERTIFICATE OF SERVICE

The undersigned duly designated deputy agency clerk hereby certifies that this NOTICE OF PERMIT CORRECTION was sent by certified mail (*) and copies were mailed by U.S. Mail before the close of business on 0.7 - 16 - 9.8 to the person(s) listed:

Mr. J. M. Parent *

Mr. William M. Reichel, FPL *

Hon. Joe McClash, Manatee County Board of County Commissioners *

Ms. Mary Archer, FPL

Mr. Bill Thomas, DEP SWD

Ms. Carla E. Pierce, USEPA, Region 4 (INTERNET E-mail Memorandum)

Ms. Yolanda Adams, USEPA, Region 4 (INTERNET E-mail Memorandum)

Clerk Stamp

FILING AND ACKNOWLEDGMENT FILED, on this date, pursuant to \$120.32, Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Marks (

<u>~</u>				
side	SENDER:		I also wish to receive the	
S.	Complete items 1 and/or 2 for additional services.		I also wish to receive the	
ð	Complete items 3, and 4a & b.		following services (for an extra	8
ž	 Print your name and address on the reverse of this form so the return this card to you. 	at we can	fee):	. <u>\$</u>
š	Attach this form to the front of the mailpiece, or on the back	:	1. Addressee's Address	ē
9	does not permit.	n space	1. Addressee 5 Address	S
ē	Write "Return Receipt Requested" on the mailpiece below the art	icle number.	0	Ħ
ŧ	The Return Receipt will show to whom the article was delivered a			<u>.</u>
Ĕ	delivered.		Consult postmaster for fee.	eceipt
ŏ	3. Article Addressed to:	4a. Art	icle Number	Œ
completed		7 2	92 940 907	Ε
<u> </u>	Mr. J. M. Parent	2 3	12 770 101	. 3
물	Mr. J. M. Parent	4b. Ser	vice Type	æ
5	Mr. William M. Reichel	Regi	stered Insured	-
_	The state of the s	Certi	ified COD	g
SS	P.O. Box 14000			usin
Ш	Juno Beach, FL 33408-0420	∐ Expr	ess Mail Return Receipt for	3
ADDRESS	`.	7 0-4-	MCH ? Merchandise	· 6
		7. Date	of Delivery	_
⋖				ಠ
Z	5. Signature (Addressee)	8 . Add	ressee's Address (Only if requested	· >
띡	5. Signature (Addiesage)		fee is paid)	` ` `
F			N 25 V	na L
끴	6. Signature (Agent)	100 mm	ASI	F.
-			18 42 min 18	
3	ևությունների և հայաստանում և հայաստանո	السالليلة	hullmullid 🧭	
~	PS Form 3811 , December 1991	3-402 D(OMESTIC RETURN RECEIPT	• .

Z 392 940 907



Receipt for Certified Mail

No Insurance Coverage Provided Do not use for International Mail (See Reverse)

Mr. J. M. Parent Mr. William M. Reichel Florida Power & Light Company P.O. Box 14000 Juno Beach, FL 33408-0420

Certified Fee	
Special Delivery Fee	<u>i</u>
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	,\$
Postmark or Date	
100 11 -	90
108-11	18,

		_		¢	PS F	onn -
Sent 07-16-98	TOTAI, Postage & , ees	Return Receipt Showing to Whom, Date, and Addressee's Address	Return Receipt Showing to Whom & Date Delivered	Restricted Delivery Fee	Special Delivery Fee	Certified Fee
Sol	4s					

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, and Addressee's Address

S

Postmark or Date TOTAL Postage & Fees

Sent 07-

Restricted Delivery Fee Special Delivery Fee > Certified Mail
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse) Receipt for

Dhb

七口占

Dhb 2bE

205

Mr. William M. Reichel Florida Power & Light Company 11770 U.S. Highway One North Palm Beach, FL 33408

Mr. J. M. Parent LANTED STATES
POSTAL SERVICE

Receipt for Certified Mail

No Insurance Coverage Provided Do not use for International Mail (See Reverse)

Plant General Manager Florida Power & Light Company 11770 U.S. Highway One North Palm Beach, FL 33408

PS Form

Certified Fee

TO TO THE TOTAL TO

completed on the reverse side?	■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we card to you. ■ Attach this form to the front of the mailpiece, or on the back if spapermit. ■ Write "Return Receipt Requested" on the mailpiece below the article The Return Receipt will show to whom the article was delivered a delivered.	ce does not de number.	I also wish to rec following service: extra fee): 1. Addresse 2. Restricte Consult postmas	s (for an ee's Address d Delivery
your RETURN ADDRESS completed of	3. Article Addressed to: Mr. William M. Reichel Florida Power & Light Company 11770 U.S. Highway One North Palm Beach, FL 33408	4b. Service Registere	7 940 4 Type ed Mail ceipt for Merchandise	Certified Insured
Is your RETUR	 5. Received By: (Print Name) 6. Signature: (Addressee or Agent) X PS Form 3811, December 1994 	8. Addressed and fee is	e's Address <i>(Only i</i> paid) Domestic Retu	

Thank you for using Return Receipt Service.

,	PS Form 3811 , December 1994		Domestic Return Receipt
			···
on the reverse side?	SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we card to you. Attach this form to the front of the mailpiece, or on the back if spacepermit. Write 'Return Receipt Requested' on the mailpiece below the article The Return Receipt will show to whom the article was delivered and delivered.	e does not e number. d the date	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.
ADDRESS completed	3. Article Addressed to: Mr. J. M. Parent Plant General Manager Florida Power & Light Company 11770 U.S. Highway One North Palm Beach, FL 33408	4b. Service Registere Express	Type ed ☐ Certified ☐ Insured ☐ Cop ☐ COD
your RETURN	Received By: (Print Name) Signature: (Addressee or Agent) X	8. Addresse and fee is	e's Address (Only if requested paid)
. <u>0</u>	PS Form 3811 , December 1994		Domestic Return Receipt

BEST AVAILABLE COPY

	ENDER: Complete items 1 and/or 2 for additional services.		I also wish to re		
	Complete items 3, 4a, and 4b. The properties on the reverse of this form so that we card to you.	e can return this	following servic extra fee):	•	
• /	Attach this form to the front of the mailpiece, or on the back if spa permit.		1. Addressee's Address		
1 1	Mrite <i>'Return Receipt Requested"</i> on the mailpiece below the arti fine Return Receipt wii ^y ,show to whom the article was delivered a felivered.		 Restricted Delivery Consult postmaster for fee. 		
3.	Article Addressed to:	4a. Article N	umber	Ster for fee.	
_		Z 39.	, , , , ,	904	
	Honorable Joe McClash Manatee County Board of	4b. Service ☐	•	X Certified	
	County Commissioners Post Office Box 1000	☐ Express		☐ Insured	
	Bradenton, FL 34206		ceipt for Merchandis	se 🗆 COD	
`		7. Date of D	elivery SERI	•	
	*red By: (Print Name)	8. Addressed and fee is	e's Address (Ohi) paid) (U	see's Address ted Delivery aster for fee. 904 Certified Insured se COD	
	Y-ossee of Agent)		1998	1. is	
	794		Domestic Be	turn Receipt	
	27 ·				
	.•				
	Z 3	92 940	904		
		ied Mail			
		ance Coveraguse for Interna			

Honorable Joe McClash Manatee County Board of County Commissioners Post Office Box 1000 Bradenton, FL 34206

Ę	Certified Fee	
TO FOR	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to Whom & Date Delivered	
Ì	Return Receipt Showing to Whom, Date, and Addressee's Address	4
أ	TOTAL Pestage & Fees	\$
	iRostmadissirDate Sent 07-16-3	98
	SOL	

Date:

7/23/98 12:48:55 PM

From:

Mary Fillingim TAL

Subject: To:

Administrative Posting Correction #0810010

See Below

There has been an Administrative Correction to the above-referenced permit. It has now been posted on Florida's website.

0810010001AV MANATEE PLANT

Administrative Correction to Final Permit

If you have any questions, please feel free to contact me.

Thanks, Mary

To: adams yolanda To: pierce carla

To: Barbara Boutwell TAL
To: Scott Sheplak TAL
To: Terry Knowles TAL
To: danois gracy

To: Elizabeth Walker TAL CC: Joseph Kahn TAL