



Certificate of Representation

Page 1

For more information, see instructions and refer to 40 CFR 72.24

This submission is: ☐ New ☒ Revised (revised submissions must be complete; see instructions)

This submission includes combustion or process sources under 40 CFR part 74 ☐

STEP 1

Identify the source by plant name, State, and ORIS code.

Plant Name	Manatee	State	FL	ORIS Code	6042
0810010					

STEP 2

Enter requested information for the designated representative.

Name		Nancy Kierspe, Manager Environmental Services	
Address			
P. O. Box 14000 700 Universe Blvd. Juno Beach, Florida 33408-0420			
Phone Number	561-691-2930	Fax Number	561-691-2695
E-mail address (if available)		nancy_kierspe@fpl.com	

12-29-03
✓ Done.
Bm

STEP 3

Enter requested information for the alternate designated representative, if applicable.

Name		Adalberto Alfonso, Vice President, Operations & Technical Services	
Phone Number	561-691-2900	Fax Number	561-691-2606
E-mail address (if available)		adalberto_alfonso@fpl.com	

12-29-03
✓ Done.
Bm

STEP 4

Complete Step 5, read the certifications, and sign and date. For a designated representative of a combustion or process source under 40 CFR part 74, the references in the certifications to "affected unit" or "affected units" also apply to the combustion or process source under 40 CFR part 74 and the references to "affected source" also apply to the source at which the combustion or process source is located.

I certify that I was selected as the designated representative or alternate designated representative, as applicable, by an agreement binding on the owners and operators of the affected source and each affected unit at the source.

I certify that I have given notice of the agreement, selecting me as the 'designated representative' for the affected source and each affected unit at the source identified in this certificate of representation, in a newspaper of general circulation in the area where the source is located or in a State publication designed to give general public notice.

I certify that I have all necessary authority to carry out my duties and responsibilities under the Acid Rain Program on behalf of the owners and operators of the affected source and of each affected unit at the source and that each such owner and operator shall be fully bound by my actions, inactions, or submissions.

I certify that I shall abide by any fiduciary responsibilities imposed by the agreement by which I was selected as designated representative or alternate designated representative, as applicable.

I certify that the owners and operators of the affected source and of each affected unit at the source shall be bound by any order issued to me by the Administrator, the permitting authority, or a court regarding the source or unit.

Where there are multiple holders of a legal or equitable title to, or a leasehold interest in, an affected unit, or where a utility or industrial customer purchases power from an affected unit under life-of-the-unit, firm power contractual arrangements, I certify that:

I have given a written notice of my selection as the designated representative or alternate designated representative, as applicable, and of the agreement by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and

Allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement or, if such multiple holders have expressly provided for a different distribution of allowances by contract, that allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in accordance with the contract.

The agreement by which I was selected as the alternate designated representative, if applicable, includes a procedure for the owners and operators of the source and affected units at the source to authorize the alternate designated representative to act in lieu of the designated representative.

I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

<i>nm Kierspel</i> Signature (designated representative)	10/7/02 Date
<i>Adalberto Celfer</i> Signature (alternate designated representative)	10/11/02 Date

STEP 5
Provide the name of every owner and operator of the source and identify each affected unit (or combustion or process source) they own and/or operate.

Name Florida Power & Light Company					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID# <i>PMT 1</i>	ID# <i>PMT 2</i>	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#

Name					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#

Name					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#

Name					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#



Certificate of Representation

Page 1

For more information, see instructions and refer to 40 CFR 72.24

This submission is: ☐ New ☒ Revised

This submission includes combustion or process sources under 40 CFR part 74 ☐

STEP 1
Identify the source by plant name, State, and ORIS code from NADB

Plant Name Manatee	State FL	06042 ORIS Code
--------------------	----------	--------------------

STEP 2
Enter requested information for the designated representative.

Name David William Knutson, Power Generation General Manager - Environmental Compliance	
Address P. O. Box 14000 700 Universe Blvd. Juno Beach, Florida 33408-0420	
Phone Number (561) 691-2438	Fax Number (561) 691-2388

STEP 3
Enter requested information for the alternate designated representative, if applicable.

Name Adalberto Alfonso, Vice President - Operations	
Address P. O. Box 14000 700 Universe Blvd. Juno Beach, Florida 33408-0420	
Phone Number (561) 691-2900	Fax Number (561) 691-2606

STEP 4
Complete Step 5, read the certifications, and sign and date. For a designated representative of a combustion or process source under 40 CFR part 74, the references in the certifications to "affected unit" or "affected units" also apply to the combustion or process source under 40 CFR part 74 and the references to "affected source" also apply to the source at which the combustion or process source is located.

I certify that I was selected as the designated representative or alternate designated representative, as applicable, by an agreement binding on the owners and operators of the affected source and each affected unit at the source.

I certify that I have given notice of the agreement, selecting me as the designated representative or alternate designated representative, as applicable, for the affected source and each affected unit at the source identified in this certificate of representation, daily for a period of one week in a newspaper of general circulation in the area where the source is located or in a State publication designed to give general public notice.

I certify that I have all necessary authority to carry out my duties and responsibilities under the Acid Rain Program on behalf of the owners and operators of the affected source and of each affected unit at the source and that each such owner and operator shall be fully bound by my actions, inactions, or submissions.

I certify that I shall abide by any fiduciary responsibilities imposed by the agreement by which I was selected as designated representative or alternate designated representative, as applicable.

I certify that the owners and operators of the affected source and of each affected unit at the source shall be bound by any order issued to me by the Administrator, the permitting authority, or a court regarding the source or unit.

Where there are multiple holders of a legal or equitable title to, or a leasehold interest in, an affected unit, or where a utility or industrial customer purchases power from an affected unit under life-of-the unit, firm power contractual arrangements, I certify that:

I have given a written notice of my selection as the designated representative or alternate designated representative, as applicable, and of the agreement by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and

Allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement or, if such multiple holders have expressly provided for a different distribution of allowances by contract, that allowances and the proceeds of transactions involving allowance will be deemed to be held or distributed in accordance with the contract.

Plant Name (from Step 1) Manatee

Certificate - Page 2
Page 2 of 2

The agreement by which I was selected as the alternate designated representative, if applicable, includes a procedure for the owners and operators of the source and affected units at the source to authorize the alternate designated representative to act in lieu of the designated representative.

I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statement and information or omitting required statements and information, including the possibility of fine or imprisonment.

Signature (designated representative)	Date 8-28-02
Signature (alternate designated representative)	Date

STEP 5
Provide the name of every owner and operator of the source and each affected unit (or combustion or process source) at the source. Identify the units they own and/or operate by boiler ID# from DADB if applicable. For owners only, identify each state or local utility regulatory authority with ratemaking jurisdiction over each owner, if applicable.

Name Florida Power & Light Company			<input type="checkbox"/> Owner <input type="checkbox"/> Operator	
ID# PMT1	ID# PMT2	ID# MTCT3A	ID# MTCT3B	ID# MTCT3C
ID# MTCT3D	ID#	ID#	ID#	ID#
Regulatory Authorities				

Name			<input type="checkbox"/> Owner <input type="checkbox"/> Operator	
ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#
Regulatory Authorities				

Name			<input type="checkbox"/> Owner <input type="checkbox"/> Operator	
ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#
Regulatory Authorities				

Name			<input type="checkbox"/> Owner <input type="checkbox"/> Operator	
ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#



Certificate of Representation

Page 1

For more information, see instructions and refer to 40 CFR 72.24

This submission is: ☐ New ☒ Revised

STEP 1

Identify the source by
plant name, State, and
ORIS code from NADB

Plant Name	Manatee Power Plant	State	FL	ORIS Code	6042
------------	---------------------	-------	----	-----------	------

STEP 2

Enter requested
information for the
designated
representative

Name		William Muly Reichel, Manager, Operation Services	
Address		P.O. Box 14000 700 Universe Blvd. Juno Beach, Florida 33408	
Phone Number	407-691-2870	Fax Number	407-691-2855

STEP 3

Enter requested
information for the
alternate designated
representative
(optional)

Name		Antonio Rodriguez, Vice President, Operations	
Address		P.O. Box 14000 700 Universe Blvd. Juno Beach, Florida 33408	
Phone Number	407-691-2900	Fax Number	407-691-2606

STEP 4

Complete Step 5, read
the certifications and
sign and date

I certify that I was selected as the designated representative or alternate designated representative, as applicable, by an agreement binding on the owners and operators of the affected source and each affected unit at the source.

I certify that I have given notice of the agreement, selecting me as the designated representative or alternate designated representative, as applicable for the affected source and each affected unit at the source identified in this certificate of representation, daily for a period of one week in a newspaper of general circulation in the area where the source is located or in a State publication designed to give general public notice.

I certify that I have all necessary authority to carry out my duties and responsibilities under the Acid Rain Program on behalf of the owners and operators of the affected source and of each affected unit at the source and that each such owner and operator shall be fully bound by my actions, inactions, or submissions.

I certify that I shall abide by any fiduciary responsibilities imposed by the agreement by which I was selected as designated representative or alternate designated representative, as applicable.

I certify that the owners and operators of the affected source and of each affected unit at the source shall be bound by any order issued to me by the Administrator, the permitting authority, or a court regarding the source or unit.

NA Where there are multiple holders of a legal or equitable title to, or a leasehold interest in, an affected unit, or where a utility or industrial customer purchases power from an affected unit under life-of-the-unit, firm power contractual arrangements, I certify that:

NA I have given a written notice of my selection as the designated representative or alternate designated representative, as applicable, and of the agreement by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and

NA Allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement or, if such multiple holders have expressly provided for a different distribution of allowances by contract, that allowances and the proceeds of transactions involving allowances will be deemed to be held or distributed in accordance with the contract.

NA The agreement by which I was selected as the alternate designated representative includes a procedure for the owners and operators of the source and affected units at the source to authorize the alternate designated representative to act in lieu of the designated representative.

Manatee Power Plant
Plant Name (from Step 1)

Certificate - Page 2

Page 2 of 2

Certification

I am authorized to make this submission on behalf of the owners and operators of the affected source or affected units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

Signature (designated representative) <i>William M. R. R. R.</i>	Date Oct. 29, 1993
Signature (alternate) <i>[Signature]</i>	Date Nov. 2, 1993

STEP 5

Provide the name of every owner and operator of the source and each affected unit at the source. Identify the units they own and/or operate by boiler ID# from NADB. For owners only, identify each state or local utility regulatory authority with jurisdiction over each owner

Name Florida Power & Light Company						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID# PMT 1	ID# PMT 2	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities							

Name						<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#	ID#
Regulatory Authorities							

ST. PETERSBURG TIMES

STATE OF FLORIDA } S.S.
COUNTY OF PINELLAS }

Published Daily
St. Petersburg, Pinellas County, Florida

Before the undersigned authority personally appeared S. Zazycki
who on oath says that he is Legal Clerk
of the St. Petersburg Times
a daily newspaper published at St. Petersburg, in Pinellas County, Florida: that
the attached copy of advertisement, being a Legal Notice
in the matter RE: Notice

_____ in the _____ Court
was published in said newspaper in the issues of November 6, 1993
through November 12, 1993

Affiant further says the said St. Petersburg Times
is a newspaper published at St. Petersburg, in said Pinellas County, Florida, and
that the said newspaper has heretofore been continuously published in said
Pinellas County, Florida, each day and has been entered as second class mail
matter at the post office in St. Petersburg, in said Pinellas County, Florida, for a
period of one year next preceding the first publication of the attached copy of
advertisement, and affiant further says that he has neither paid nor promised
any person, firm, or corporation any discount, rebate, commission or refund for
the purpose of securing this advertisement for publication in the said
newspaper.

Sworn to and subscribed before
me this 15th day of
Nov. 19 A.D. 1993

Patricia B. Hansen
Notary Public

PERSONALLY KNOWN ✓ OR
PRODUCED IDENTIFICATION _____
TYPE OF IDENTIFICATION PRODUCED _____

(SEAL)

PATRICIA B. HANSEN
Notary Public, State of Florida
My Comm. Exp. Feb. 1, 1995 - NO. CC076579

NOTICE

Notice is hereby given that Florida Power & Light Company has appointed William M. Reichel as the Designated Representative for Manatee Power Plant, replacing John M. Lindsay. As the Designated Representative, William M. Reichel has all the necessary authority to carry out the responsibilities of Designated Representative on behalf of Florida Power & Light Company, pursuant to the acid rain program of the Clean Air Act Amendments of 1990. This notice was made in accordance with the Clean Air Act Amendments of 1990, 42 USC 7401 et seq., and applicable regulations of the United States Environmental Protection Agency. (933060262) 11/6-11/12/93

CL 402-W