



Competitive
Power Ventures, Inc.

May 1, 2001

Florida Department of Environmental Protection
Division of Air Resource Management
2600 Blair Stone Road MS 5500
Tallahassee, Florida 32399-2400

To Whom It May Concern:

Re: CPV Gulfcoast - Certificate of Representation

Enclosed please find the Certificate of Representation for the CPV Gulfcoast Power Generation Project to be constructed in Manatee County, Florida.

If you have any questions regarding this Certificate of Representation, please do not hesitate to contact me.

Sincerely,

Sean Finnerty
Director, Project Development

SF/bld

Enclosure(s)

RECEIVED

MAY 02 2001

BUREAU OF AIR REGULATION



Certificate of Representation

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

This submission is: New Revised (revised submissions must be completed in full; see instructions)

This submission includes combustion or process sources under 40 CFR part 72.2

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BUREAU OF AIR REGULATION

STEP 1

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

Plant Name	CPV Gulfcoast, Ltd.	State	FL	ORIS Code	NA
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STEP 2

Enter requested information for the designated representative.

Name		Sean J. Finnerty	
Address			
CPV Gulfcoast, Ltd. c/o Competative Power Ventures, Inc. 35 Braintree Hill Road, Suite 107 Braintree, MA 02184			
Phone Number	(781) 848-0253	Fax Number	(781) 848-5804
E-mail address (if available) sfinnerty@cpowerventures.com			

STEP 3

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

Name	
Phone Number	
E-mail address (if available)	

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:

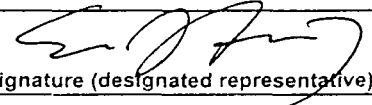
I have given a written notice of my selection as the designated representative or alternate designated representative, as applicable, and of the agreement by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and

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.

Plant Name (from Step 1) CPV Gulfcoast, Ltd.

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.

	Date 5/1/01
Signature (designated representative)	Date
Signature (alternate designated representative)	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 CPV Gulfcoast, Ltd.					<input checked="" type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# CT01	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#
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Name					<input type="checkbox"/> Owner	<input type="checkbox"/> Operator
ID#	ID#	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#	ID#