



**KOOGLER & ASSOCIATES**  
**ENVIRONMENTAL SERVICES**

4014 NW THIRTEENTH STREET  
GAINESVILLE, FLORIDA 32609  
352/377-5822 ▪ FAX/377-7158

KA 118-00-03

December 14, 2001

Mr. Joseph Kahn, P.E.  
Florida Department of  
Environmental Protection  
Twin Towers Office Building  
2600 Blair Stone Rd  
Tallahassee, FL 32399-2400

Subject: Permit Revision  
Louis Dreyfus Citrus, Inc.  
Permit No. 0950053-005-AC

**RECEIVED**  
DEC 17 2001  
Bureau of Air Monitoring  
& Mobile Sources

Dear Mr. Kahn:

This is a follow up to your correspondence dated April 20, 2001 revising the hourly VOC emission limits for the above referenced facility. It has come to our attention that the material processing rate cap of 50,000 tons per year of bone dry peel, requested by Louis Dreyfus and implemented by FDEP, needs to be incorporated into the remaining permit emission limitations (see attached table). Accordingly, this permit amendment request is to properly update the above referenced construction permit.

Enclosed are four copies of the permit application form (facility portion) with signatures of the Responsible Official (RO) and the Professional Engineer (PE) of record.

If you have any questions, please do not hesitate to call Pradeep Raval or me.

Very truly yours,

KOOGLER & ASSOCIATES

John B. Kogler, Ph.D., P.E.

JBK:par  
Encl.

c: R. Tomlin, LDC  
P. Ballentine, LDC  
A. Zahm, FDEP Orlando

**FROM:**

Louis Dreyfus Citrus, Inc. Current Emission Limitations				
East/West Cooler(s)	Operation Limit tons/yr bone dry peel	Emission Limit, Combined TPY	Emission Limit, Each Unit lb/hr	Estimated Factor lb/ton bone dry peel
PM	71659	2.7	1	0.075
VOC	71659	35	13.4	0.977
No. 6 & No.7 Dryer (s)	Operation Limit tons/yr bone dry peel	Emission Limit, Combined TPY	Emission Limit, Each Unit lb/hr	Estimated Factor lb/ton bone dry peel
PM	71659	35.7	13.7	0.996
PM10	71659	21.5	8.2	0.6
CO	71659	355	136.2	9.91
VOC (1)	<b>50000</b>	<b>455</b>	<b>250</b>	<b>18.2</b>
NOX	71659	33.7	12.9	0.94
SO2	275,600 gals/yr	33.9	147.6	Based on Oil Fired

NOTE: (1) Revised by FDEP in 2001

**TO:**

Louis Dreyfus Citrus, Inc. Revised Emission Limitations				
East/West Cooler(s)	Operation Limit tons/yr bone dry peel	Emission Limit, Combined TPY	Emission Limit, Each Unit lb/hr	Estimated Factor lb/ton bone dry peel
PM (1)	50000	2.7	1.5	0.11
VOC (2)	50000	35	19.2	1.4
No. 6 & No.7 Dryer (s)	Operation Limit tons/yr bone dry peel	Emission Limit, Combined TPY	Emission Limit, Each Unit lb/hr	Estimated Factor lb/ton bone dry peel
PM (3)	50000	35.7	19.6	1.4
PM10 (4)	50000	21.5	11.8	0.9
CO (5)	50000	355	195	14.2
VOC	50000	455	250	18.2
NOX (6)	50000	33.7	18.5	1.3
SO2	275,600 gals/yr	33.9	147.6	Based on Oil Fired

NOTE: Request revision for (1) to (6) with no change in annual emissions.

Sample calculation: VOC, lb/hr = 455 tpy x 2000 lbs/ton x yr/50000 tbdp x 13.737 tph = 250 lb/hr  
VOC, lb/tbdp = 250 lb/hr / 13.737 tph bdp = 18.2 lb/tbdp



# Department of Environmental Protection

## Division of Air Resources Management

### APPLICATION FOR AIR PERMIT - TITLE V SOURCE

See Instructions for Form No. 62-210.900(1)

#### I. APPLICATION INFORMATION

##### Identification of Facility

1. Facility Owner/Company Name: <b>Louis Dreyfus Citrus, Inc.</b>	
2. Site Name: <b>Louis Dreyfus Citrus</b>	
3. Facility Identification Number: <b>0950053</b> <span style="float: right;">[ ] Unknown</span>	
4. Facility Location: Street Address or Other Locator: <b>355 Ninth Street</b> City: <b>Winter Garden</b> County: <b>Orange</b> Zip Code: <b>32787</b>	
5. Relocatable Facility? [ ] Yes [X] No	6. Existing Permitted Facility? [X] Yes [ ] No

##### Application Contact

1. Name and Title of Application Contact: <b>Pradeep Raval, Engineer</b>	
2. Application Contact Mailing Address: Organization/Firm: <b>Koogler &amp; Associates</b> Street Address: <b>4014 NW 13<sup>th</sup> Street</b> City: <b>Gainesville</b> State: <b>FL</b> Zip Code: <b>32609</b>	
3. Application Contact Telephone Numbers: Telephone: <b>(352 ) 377-5822</b> Fax: <b>(352 ) 377-7158</b>	

##### Application Processing Information (DEP Use)

1. Date of Receipt of Application:	<i>12/17/01</i>
2. Permit Number:	<i>0950053-008-AC</i>
3. PSD Number (if applicable):	
4. Siting Number (if applicable):	

**Purpose of Application**

**Air Operation Permit Application**

This Application for Air Permit is submitted to obtain: (Check one)

- Initial Title V air operation permit for an existing facility which is classified as a Title V source.
- Initial Title V air operation permit for a facility which, upon start up of one or more newly constructed or modified emissions units addressed in this application, would become classified as a Title V source.

Current construction permit number: \_\_\_\_\_

- Title V air operation permit revision to address one or more newly constructed or modified emissions units addressed in this application.

Current construction permit number: \_\_\_\_\_

Operation permit number to be revised: \_\_\_\_\_

- Title V air operation permit revision or administrative correction to address one or more proposed new or modified emissions units and to be processed concurrently with the air construction permit application. (Also check Air Construction Permit Application below.)

Operation permit number to be revised/corrected: \_\_\_\_\_

- Title V air operation permit revision for reasons other than construction or modification of an emissions unit. Give reason for the revision; e.g., to comply with a new applicable requirement or to request approval of an "Early Reductions" proposal.

Operation permit number to be revised: \_\_\_\_\_

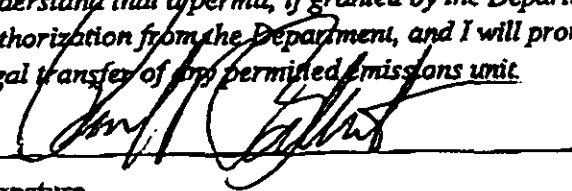
Reason for revision: \_\_\_\_\_

**Air Construction Permit Application**

This Application for Air Permit is submitted to obtain: (Check one)

- Air construction permit to construct or modify one or more emissions units.
- Air construction permit to make federally enforceable an assumed restriction on the potential emissions of one or more existing, permitted emissions units.
- Air construction permit for one or more existing, but unpermitted, emissions units.

**Owner/Authorized Representative or Responsible Official**

1. Name and Title of Owner/Authorized Representative or Responsible Official: <b>Paul Ballentine, Plant Manager</b>
2. Owner/Authorized Representative or Responsible Official Mailing Address: Organization/Firm: <b>Louis Dreyfus Citrus, Inc.</b> Street Address: <b>P.O. Box 770399</b> City: <b>Winter Garden</b> State: <b>FL</b> Zip Code: <b>34777-0399</b>
3. Owner/Authorized Representative or Responsible Official Telephone Numbers: Telephone: <b>(407) 656-1000</b> Fax: <b>(407) 656-1229</b>
4. Owner/Authorized Representative or Responsible Official Statement:  <i>I, the undersigned, am the owner or authorized representative*(check here [ ], if so) or the responsible official (check here [ X ], if so) of the Title V source addressed in this application, whichever is applicable. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this application are true, accurate and complete and that, to the best of my knowledge, any estimates of emissions reported in this application are based upon reasonable techniques for calculating emissions. The air pollutant emissions units and air pollution control equipment described in this application will be operated and maintained so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof. I understand that a permit, if granted by the Department, cannot be transferred without authorization from the Department, and I will promptly notify the Department upon sale or legal transfer of my permitted emissions unit.</i>   _____ Signature  12/14/01 _____ Date

\* Attach letter of authorization if not currently on file.

**Professional Engineer Certification**

1. Professional Engineer Name: <b>John B. Koogler, Ph.D., P.E.</b> Registration Number: <b>12925</b>
2. Professional Engineer Mailing Address: Organization/Firm: <b>Koogler &amp; Associates</b> Street Address: <b>4014 NW 13th Street</b> City: <b>Gainesville</b> State: <b>FL</b> Zip Code: <b>32609</b>
3. Professional Engineer Telephone Numbers: Telephone: <b>(352) 377 - 5822</b> Fax: <b>(352) 377 - 7158</b>

4. Professional Engineer Statement:

*I, the undersigned, hereby certify, except as particularly noted herein\*, that:*

*(1) To the best of my knowledge, there is reasonable assurance that the air pollutant emissions unit(s) and the air pollution control equipment described in this Application for Air Permit, when properly operated and maintained, will comply with all applicable standards for control of air pollutant emissions found in the Florida Statutes and rules of the Department of Environmental Protection; and*

*(2) To the best of my knowledge, any emission estimates reported or relied on in this application are true, accurate, and complete and are either based upon reasonable techniques available for calculating emissions or, for emission estimates of hazardous air pollutants not regulated for an emissions unit addressed in this application, based solely upon the materials, information and calculations submitted with this application.*

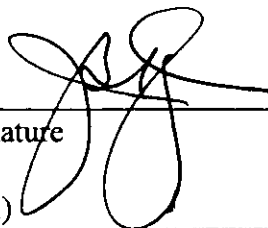
*If the purpose of this application is to obtain a Title V source air operation permit (check here [ ], if so), I further certify that each emissions unit described in this Application for Air Permit, when properly operated and maintained, will comply with the applicable requirements identified in this application to which the unit is subject, except those emissions units for which a compliance schedule is submitted with this application.*

*If the purpose of this application is to obtain an air construction permit for one or more proposed new or modified emissions units (check here [ X ], if so), I further certify that the engineering features of each such emissions unit described in this application have been designed or examined by me or individuals under my direct supervision and found to be in conformity with sound engineering principles applicable to the control of emissions of the air pollutants characterized in this application.*

*If the purpose of this application is to obtain an initial air operation permit or operation permit revision for one or more newly constructed or modified emissions units (check here [ ], if so), I further certify that, with the exception of any changes detailed as part of this application, each such emissions unit has been constructed or modified in substantial accordance with the information given in the corresponding application for air construction permit and with all provisions contained in such permit.*

Signature

(seal)



Date

12/14/01

\* Attach any exception to certification statement.



**Construction/Modification Information**

1. Description of Proposed Project or Alterations:

**Amend permit to reconcile dryer VOC emissions and peel processing rate.**

2. Projected or Actual Date of Commencement of Construction: NA

3. Projected Date of Completion of Construction: NA

**Application Comment**

**The information is submitted in the format discussed with FDEP.**



## II. FACILITY INFORMATION

### A. GENERAL FACILITY INFORMATION

#### Facility Location and Type

1. Facility UTM Coordinates: Zone: <b>17</b> East (km): <b>443.80</b> North (km): <b>3159.50</b>			
2. Facility Latitude/Longitude: Latitude (DD/MM/SS): <b>28/33/49</b> Longitude (DD/MM/SS): <b>81/34/27</b>			
3. Governmental Facility Code: <b>0</b>	4. Facility Status Code: <b>A</b>	5. Facility Major Group SIC Code: <b>20</b>	6. Facility SIC(s): <b>2037</b>
7. Facility Comment (limit to 500 characters):  <b>Citrus processing plant.</b>			

#### Facility Contact

1. Name and Title of Facility Contact: <b>Paul Ballentine, Plant Manager</b>			
2. Facility Contact Mailing Address: Organization/Firm: <b>Louis Dreyfus Citrus, Inc.</b> Street Address: <b>P.O. Box 770399</b> City: <b>Winter Garden</b> State: <b>FL</b> Zip Code: <b>34777-0399</b>			
3. Facility Contact Telephone Numbers: Telephone: <b>( 407 ) 656 - 1000</b> Fax: <b>( 407 ) 656 - 1229</b>			

**Facility Regulatory Classifications**

Check all that apply:

1. <input type="checkbox"/> Small Business Stationary Source?	<input type="checkbox"/> Unknown
2. <input checked="" type="checkbox"/> Major Source of Pollutants Other than Hazardous Air Pollutants (HAPs)?	
3. <input type="checkbox"/> Synthetic Minor Source of Pollutants Other than HAPs?	
4. <input type="checkbox"/> Major Source of Hazardous Air Pollutants (HAPs)?	
5. <input type="checkbox"/> Synthetic Minor Source of HAPs?	
6. <input type="checkbox"/> One or More Emissions Units Subject to NSPS?	
7. <input type="checkbox"/> One or More Emission Units Subject to NESHAP?	
8. <input type="checkbox"/> Title V Source by EPA Designation?	
9. Facility Regulatory Classifications Comment (limit to 200 characters):	

**List of Applicable Regulations**

<b>FDEP CORE LIST</b>	
<b>FS 120, 403</b>	
<b>FAC 62-4, 204, 210, 213, 214, 252, 256, 257, 281, 296, 297.</b>	
<b>40 CFR 52, 55, 60, 63, 82.</b>	



### C. FACILITY SUPPLEMENTAL INFORMATION

#### Supplemental Requirements

1. Area Map Showing Facility Location: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested
2. Facility Plot Plan: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested
3. Process Flow Diagram(s): <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested
4. Precautions to Prevent Emissions of Unconfined Particulate Matter: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested
5. Fugitive Emissions Identification: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Waiver Requested
6. Supplemental Information for Construction Permit Application: <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
7. Supplemental Requirements Comment: <b>Information has been previously submitted to DEP.</b>

**Additional Supplemental Requirements for Title V Air Operation Permit Applications**

8. List of Proposed Insignificant Activities: <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
9. List of Equipment/Activities Regulated under Title VI: <input type="checkbox"/> Attached, Document ID: _____ <input type="checkbox"/> Equipment/Activities On site but Not Required to be Individually Listed <input checked="" type="checkbox"/> Not Applicable
10. Alternative Methods of Operation: <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
11. Alternative Modes of Operation (Emissions Trading): <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
12. Identification of Additional Applicable Requirements: <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
13. Risk Management Plan Verification: <input type="checkbox"/> Plan previously submitted to Chemical Emergency Preparedness and Prevention Office (CEPPO). Verification of submittal attached (Document ID: _____) or previously submitted to DEP (Date and DEP Office: _____) <input type="checkbox"/> Plan to be submitted to CEPPO (Date required: _____) <input checked="" type="checkbox"/> Not Applicable
14. Compliance Report and Plan: <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable
15. Compliance Certification (Hard-copy Required): <input type="checkbox"/> Attached, Document ID: _____ <input checked="" type="checkbox"/> Not Applicable