



CITY OF LAKE WORTH

1900 2ND AVENUE NORTH
LAKE WORTH, FLORIDA 33461
www.lakeworth.org

UTILITIES
DEPARTMENT

(561) 586-1666
FAX (561) 586-1702

October 23, 2006

RECEIVED

OCT 26 2006

Mr. Scott Sheplak, P.E.
Florida Department of Environmental Protection
Twin Towers Office Bldg. Mail Station 5500 BUREAU OF AIR REGULATION
2600 Blair Stone Road
Tallahassee, FL 32399-2400

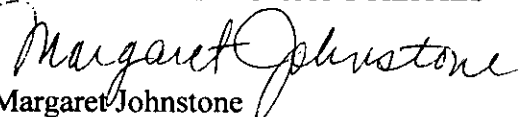
Subject: Title V Responsible Official/ Designated Representative
City of Lake Worth Utilities, Tom G. Smith Power Plant
Facility #0990045

Dear Mr. Sheplak:

Please be advised that the City Commission has authorized Mr. Paul C. Boyer, Jr., City Manager to be the Responsible Official and Authorized Representative for our Title V Permit and the Designated Representative (DR) under the Acid Rain Program and Mr. David Mulvay, Power Plant Manager as the Alternate Designated Representative (ADR). The notification for the (DR/ADR) was published for public comment on October 20, 2006. An updated DEP Responsible Official form and a copy of the EPA Certificate of Representation form reflecting this change are attached. The updated Certificate of Representation form was submitted to EPA as well.

If you have any questions, please contact me at 561-533-7384 or email mjohnstone@lakeworth.org

Sincerely,
CITY OF LAKE WORTH UTILITIES


Margaret Johnstone
Environmental Compliance Officer

- cc: Mr. Ajaya Satyal, Environmental Manager Palm Beach County Health Dept.
- Mr. Laxmana Tallum, DEP SE District
- Mr. Paul C. Boyer, Jr., City Manager
- Dave Mulvay, Power Plant Manager
- Mike Ridge, Environmental/Performance Specialist



Department of Environmental Protection

Division of Air Resource Management

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.

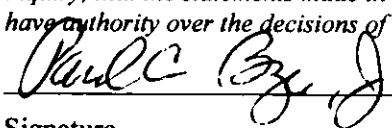
Identification of Facility

1. Facility Owner/Company Name: City of Lake Worth	
2. Site Name: Tom G. Smith Power Plant and Lake Worth Water Treatment Plant	3. County: Palm Beach
4. Title V Air Operation Permit/Project No. (leave blank for initial Title V applications): 0990045-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>October 17, 2006</u>

Primary Responsible Official

1. Name and Position Title of Responsible Official: Mr. Paul C. Boyer, Jr., City Manager
2. Responsible Official Mailing Address: Organization/Firm: Lake Worth Utilities Street Address: 1900 2 nd Avenue North City: Lake Worth State: FL Zip Code: 33461
3. Responsible Official Telephone Numbers: Telephone: (561) 586 - 1666 Fax: (561) 586 - 1702
4. Responsible Official Qualification (Check one or more of the following options, as applicable): [] 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. [] For a partnership or sole proprietorship, a general partner or the proprietor, respectively. [X] For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official. [X] The designated representative at an Acid Rain source.
5. Responsible Official Statement: <i>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.</i>  Signature <u>10/23/06</u> Date



Certificate of Representation

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

This submission is: • New • Revised (submission must be complete; see instructions)

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

Plant Name	Tom G. Smith Power Plant	State	FL	ORIS Code	0673
------------	--------------------------	-------	----	-----------	------

STEP 2
Enter requested information for the designated representative.

Name		Paul C. Boyer, Jr.	
Address			
Lake Worth Utilities 1900 2nd Avenue North Lake Worth, FL 33461			
Phone Number		561-586-1665	
Fax Number		561-586-1702	
E-mail address (if available)			
pboyer@lakeworth.org			

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

Name		David Mulvay	
Address			
Lake Worth utilities 1900 2nd Avenue North Lake Worth, FL 33461			
Phone Number		561-533-7379	
Fax Number		561-533-7387	
E-mail address (if available)			
dmulvay@lakeworth.org			

STEP 4: Complete Steps 5 and 6, read the certifications, 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 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 representations, actions, inactions, or submissions.

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, except that, 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.

Plant Name (from Step 1) Tom G. Smith Power Plant

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>Paul C. Byrd</i> Signature (designated representative)	10/23/06 Date
<i>David J. M... ..</i> Signature (alternate designated representative)	10/23/06 Date

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

Name City of Lake Worth					<input checked="" type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# S-3	ID# S-4	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#

STEP 6
For any new affected units listed at STEP 5 that have not commenced commercial operation, enter the projected date on which the unit is expected to commence commercial operation.

ID#	Projected Commence Commercial Operation Date:
ID#	Projected Commence Commercial Operation Date:
ID#	Projected Commence Commercial Operation Date:
ID#	Projected Commence Commercial Operation Date: