

Memorandum

Florida Department of
Environmental Protection

TO: Howard L. Rhodes
FROM: Clair Fancy *CAF*
DATE: August 30, 1993
SUBJ: Approval of an Amendment to Construction Permit
AC 64-191015 (PSD-FL-167)
Florida Power Corporation: DeBary Facility
Volusia County

Attached for your approval and signature is an amendment to construction permits prepared by the Bureau of Air Regulation for the above referenced company. The purpose of the amendment is to reflect the proper emission limitations and rates for PM/PM₁₀ and sulfuric acid mist in Table 1 and the BACT (i.e., correction factor: 20°F to 59°F). The changes are consistent with the application package associated with the Construction Permit; and, the permittee has demonstrated compliance with the permitted conditions, including the proposed changes. The facility is located in Volusia County, which is an attainment area for all pollutants.

I recommend your approval and signature.

HLR/BM/rbm



Florida Department of Environmental Protection

Lawton Chiles
Governor

Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Virginia B. Wetherell
Secretary

August 30, 1993

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Mr. Kent D. Hedrick, P.E.
Supervisor, Air Programs
Florida Power Corporation
Post Office Box 14042
St. Petersburg, Florida 33733

Dear Mr. Hedrick:

Re: Amendment to Construction Permit: AC 64-191015 (PSD-FL-167)
Florida Power Corporation: DeBary Facility
Volusia County

Based on a review of the application package for an Operation Permit received by the Central District, the Department has determined that a Construction Permit amendment is necessary to reflect the proper emission limitations and rates for PM/PM₁₀ and sulfuric acid mist in Table 1 and the BACT (i.e., correction factor: 20°F to 59°F). The changes are consistent with the application package associated with the Construction Permit. Therefore, the following changes will be made:

A. AC 64-191015: Specific Condition No. 1

FROM:

TABLE 1
ALLOWABLE EMISSION LIMITS
Simple Cycle Combustion Turbine

Pollutant	Standard Oil Firing	Each Unit lb/hr(a)	Total 6 Units T/yr	Basis
PM/PM ₁₀	0.025 lb/MMBtu	15	153 (b)	BACT
Sulfuric Acid Mist	No. 2 fuel oil with 0.3% avg. and 0.5% max. sulfur	76	773 (b)	BACT

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TO:

TABLE 1
 ALLOWABLE EMISSION LIMITS
 Simple Cycle Combustion Turbine

Pollutant	Standard Oil Firing	Each Unit lb/hr(a)	Total 6 Units T/yr	Basis
PM/PM ₁₀	0.015 lb/MMBtu	15	153(b)	BACT
Sulfuric Acid Mist	No. 2 fuel oil with 0.3% avg. and 0.5% max. sulfur	69	703(b)	BACT

B. AC 64-191015: BACT Determination by DER

FROM:

Pollutant	Emission Limit	Method of Control
H ₂ SO ₄	76 lbs/hr/unit	Avg. 0.30% and max. 0.5% sulfur content, by weight, No. 2 fuel oil

TO:

Pollutant	Emission Limit	Method of Control
H ₂ SO ₄	69 lbs/hr/unit	Avg. 0.30% and max. 0.5% sulfur content, by weight, No. 2 fuel oil

A person whose substantial interests are affected by the Department's proposed permitting decision may petition for an administrative proceeding (hearing) in accordance with Section 120.57, Florida Statutes (F.S.). The petition must contain the information set forth below and must be filed (received) in the Office of General Counsel of the Department at 2600 Blair Stone Road, Tallahassee, Florida 32399-2400. Petitions filed by the permittee of this amendment and the parties listed below must be filed within 14 days of receipt of this amendment. Petitions

Mr. Kent D. Hedrick, P.E.

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filed by other persons must be filed within 14 days of this amendment issuance or within 14 days of receipt of this amendment, whichever first occurs. Petitioner shall mail a copy of the petition to the permittee at the address indicated above at the time of filing. Failure to file a petition within this time period shall constitute a waiver of any right such person may have to request an administrative determination (hearing) under Section 120.57, F.S.

The Petition shall contain the following information:

(a) The name, address, and telephone number of each petitioner, the permittee's name and address, the Department Permit Amendment File Number(s) and the county in which the project is located;

(b) A statement of how and when each petitioner received notice of the Department's action or proposed action;

(c) A statement of how each petitioner's substantial interests are affected by the Department's action or proposed action;

(d) A statement of the material facts disputed by Petitioner, if any;

(e) A statement of facts which petitioner contends warrant reversal or modification of the Department's action or proposed action;

(f) A statement of which rules or statutes petitioner contends require reversal or modification of the Department's action or proposed action; and,

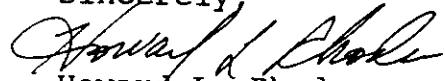
(g) A statement of the relief sought by petitioner, stating precisely the action petitioner wants the Department to take with respect to the Department's action or proposed action.

If a petition is filed, the administrative hearing process is designed to formulate agency action. Accordingly, the Department's final action may be different from the position taken by it in this amendment. Persons whose substantial interests will be affected by any decision of the Department with regard to the amendment have the right to petition to become a party to the proceeding. The petition must conform to the requirements specified above and be filed (received) within 14 days of the amendment issuance in the Office in General Counsel at the above address of the Department. Failure to petition within the allowed time frame constitutes a waiver of any right such person has to request a hearing under Section 120.57, F.S., and to participate as a party to this proceeding. Any subsequent intervention will only be at the approval of the presiding officer upon motion filed pursuant to Rule 28-5.207, F.A.C.

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This letter amendment must be attached to the construction permit, No. AC 64-191015 (PSD-FL-167), and shall become a part of the permit.

Sincerely,



Howard L. Rhodes
Director
Division of Air Resources
Management

HLR/RBM/rbm

cc: C. Collins, CD
J. Harper, EPA
J. Bunyak, NPS



Florida Department of Environmental Protection

Lawton Chiles
Governor

Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Virginia B. Wetherell
Secretary

FAX TRANSMITTAL SHEET

TO: KENT Hedrick

DATE: 8/30/93 PHONE: (813) 480-6535

TOTAL NUMBER OF PAGES, INCLUDING COVER PAGE: 5

FROM: Charles Logan

DIVISION OF AIR RESOURCES MANAGEMENT

COMMENTS: let me know if you can't read this Fax. I have sent a copy to CFD office of DEP. If we can assist you on this call

PHONE: (904) 488-1344

FAX NUMBER: 904/922-6979

If there are any problems with this fax transmittal, please call the above phone number.

P 230 524 387

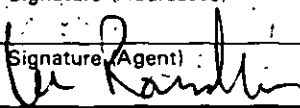


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Sent to Mr. Kent D. Hedrick, P.E.	
Street and No P. O. Box 14042	
P. O., State and ZIP Code St. Petersburg, FL 33733	
Postage	\$
Certified Fee	
Special Delivery Fee	
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Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date Mailed: 8/31/93 Permit No: AC 64-191015 PSD-FL-167	

PS Form 3800, June 1991

Is your RETURN ADDRESS completed on the reverse side?	SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered.	I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
	3. Article Addressed to: Mr. Kent D. Hedrick, P.E. Florida Power Corporation Post Office Box 14042 St. Petersburg, Florida 33733	4a. Article Number P 230 524 387
	5. Signature (Addressee) 	4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	6. Signature (Agent)	7. Date of Delivery SEP 2 - 1993
		8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.