APPLICATION INFORMATION

Professional Engineer Certification

1.	Professional Engineer Name: N. Bert Gianazza
	Registration Number: 38640
2.	Professional Engineer Mailing Address
	Organization/Firm: JEA (Tower-8)
	Street Address: 21 West Church Street
	City: Jacksonville State: FL Zip Code: 32202
3.	Professional Engineer Telephone Numbers
	Telephone: (904) 665-6247 ext. Fax: (904) 665-7376
4.	Professional Engineer Email Address: giannb@jea.com
5.	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.
	(3) If the purpose of this application is to obtain a Title V air operation permit (check here \square , 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 plan and schedule is submitted with this application.
	(4) If the purpose of this application is to obtain an air construction permit (check here x , if so) or concurrently process and obtain an air construction permit and a Title Y air operation permit revision or renewal 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.
	(5) If the purpose of this application is to obtain an initial air operation permit or operation permit revision or renewal 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.
	(seal)
	(SCAL)

* Attach any exception to certification statement.

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APPLICATION INFORMATION

Owner/Authorized Representative Statement

Complete if applying for an air construction permit or an initial FESOP.

1. Owner/Authorized Representative Name:

1.	Mr. James M. Chansler, P.E., D.P.A., Chief Operating Officer
2.	Owner/Authorized Representative Mailing Address Organization/Firm: JEA
	Street Address: 21 West Church Street
	City: Jacksonville State: FL Zip Code: 32202
3.	Owner/Authorized Representative Telephone Numbers
	Telephone: (904) 665-4433 ext. Fax: (904) 665-7990
4.	Owner/Authorized Representative Email Address:
5.	Owner/Authorized Representative Statement:
	I, the undersigned, am the owner or authorized representative of the corporation, partnership, or other legal entity submitting this air permit application. To the best of my knowledge, the statements made in this application are true, accurate and complete, and any estimates of emissions reported in this application are based upon reasonable techniques for calculating emissions. I understand that a permit, if granted by the department, cannot be transferred without authorization from the department.
	Signature Date

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