

Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

November 30, 2004

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. Tom Edwards, Superintendent
Environmental Affairs
CF Industries, Inc.
Post Office Drawer L
Plant City, Florida 33564-9007

Re: Amendment of PSD-FL-339
DEP File No.: PSD-FL-339A
Plant City Phosphate Complex

Dear Mr. Edwards:

The Department reviewed your letter dated November 23, 2004 requesting permission to replace the existing Monsanto Model ES-210 mist eliminators elements in the Interpass Tower of the "D" sulfuric acid plant with Monsanto PSF-22120 elements. It is our understanding that this change will result in a reduction in the plant pressure drop of 1.8 inches of water, 0.8% of the total pressure drop. The new elements are expected to perform at least as well as the existing elements and will help in achieving the maximum permitted operating rate of 2,750 TPD of sulfuric acid for the "D" plant.

Because no emission increases are expected, the Department concurs with your decision and does not require any permit modifications. In fact, the new elements could decrease the sulfuric acid mist emission for the plant.

Sincerely,

James K. Pennington, P.E.
Administrator
North Permitting Section

JKP/sa

cc: Jerry Kissel, DEP-SWD
Alice Harmon, HCEPC
David Buff, Golder Associates, Inc.

"More Protection, Less Process"

Printed on recycled paper.

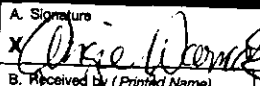
7000 2870 0000 7027 9690

Mr. Tom Edwards, Superintendent

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To
Mr. Tom Edwards, Superintendent
Street, Apt. No., or PO Box No.
Post Office Drawer L
City, State, ZIP+4
Plant City, Florida 33654-9007

PS Form 3800, May 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Nancy Womack</p> <p>C. Date of Delivery 12/3/06</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to: Mr. Tom Edwards, Superintendent Environmental Affairs CF Industries, Inc. Post Office Drawer L Plant City, Florida 33654-9007</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label) 7000 2870 0000 7027 9690</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-44-1540