

Southern Company Services, Inc.
One Energy Place
Pensacola, Florida 32520

850.444.6111



Certified Mail

July 24, 2008

Mr. Jonathan Holtom, P.E.
Department of Environmental Protection
Division of Air Resources Management
2600 Blair Stone Road
Mail Station #5505
Tallahassee, Florida 32399-2400

Dear Mr. Holtom:

RE: DESIGNATED REPRESENTATIVE CHANGE

Stanton A Combined Cycle (ORIS Code: 55286) #0950137-006-AV

Attached, please find a copy of the EPA Certificate of Representation Report for Southern Power – Florida LLC’s Stanton A Combined Cycle Units (ORIS Code: 55821). Chris M. Hobson replaces W. Paul Bowers as the Designated Representative (DR) and Robert A. Schaffeld remains as an Alternative Designated Representative (ADR) for this facility. The original Certificates of Representation requesting the DR change was accepted by EPA on July 11, 2008. As you may recall, the Stanton A Combined Cycle Units are permitted under the Curtis H. Stanton Energy Center Title V Permit.

If you have any questions or need further information regarding the change in DR for affected units located at the Stanton A Combined Cycle, please call me at (850) 444.6527.

Sincerely,

A handwritten signature in black ink that reads "Dwain Waters, Q.E.P." The signature is written in a cursive style.

G. Dwain Waters, Q.E.P.
Special Projects and Environmental Assets Coordinator

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Mr. Jonathan Holtom, P.E.

July 24, 2008

cc: Greg N. Terry, Gulf Power Company
Kevin White, Gulf Power Company
Circe Starks, Southern Power Company
Joseph Miller, Southern Power Company
Denise Stalls, Orlando Utility Commission
David Baez, Orlando Utility Commission
Judy Ambrosi, Kissimmee Utility Authority
Susan Schumann, Florida Municipal Power Agency
Garry Kuberski, FDEP- Central District

Certificate of Representation Report

06/11/2008

Facility Information

Facility ID (ORISPL): 55821

Facility Name: Stanton A

State: FL

Tribal Land:

County: Orange

EPA AIRS ID:

Latitude: 28.4881

Longitude: 81.1675

Facility Detail (Mini Detail)

Representative Information

Name: Chris M Hobson

Company: Southern Company Generation

Title: Senior Vice President

Address: AL 35203-2206

Phone: (205) 257-2812

Fax: (205) 257-7398

Alternate:

Email: cmhobson-DR@southernco.com

Name: Robert A Schaffeld

Company: Southern Power Company

Title: Director

Address: AL 35203-2206

Phone: (205) 257-6311

Fax:

Alternate:

Email: raschaff@southernco.com

People Detail Layout (Multiple)

Current Representatives

Program	Primary Representative, Effective Date	Alternate, Effective Date	Primary Representative, End Date	Alternate, End Date
ARP	Chris M Hobson, 06/11/2008	Robert A Schaffeld, 08/30/2007	W Paul Bowers, 06/11/2008	
CAIRNOX	Chris M Hobson, 06/11/2008	Robert A Schaffeld, 08/30/2007	W Paul Bowers, 06/11/2008	
CAIROS	Chris M Hobson, 06/11/2008	Robert A Schaffeld, 08/30/2007	W Paul Bowers, 06/11/2008	
CAIRSO2	Chris M Hobson, 06/11/2008	Robert A Schaffeld, 08/30/2007	W Paul Bowers, 06/11/2008	

Basic Table Layout

Units

							Commence	Commence	Comm.	Commence	Unit

Unit ID	Program	Unit Classification	Operating Status	Unit Type	Source Category	NAICS Code	Operation Date	Operation Date Code	Commercial Operation Date	Commercial Operation Date Code	Monitoring Certification Begin Date
25	ARP	Phase 2	Operating	CC	Electric Utility		07/23/2003	A	07/23/2003	A	07/23/2003
25	CAIRNOX	Affected	Operating	CC	Electric Utility		07/23/2003	A	07/23/2003	A	01/01/2008
25	CAIROS	Affected	Operating	CC	Electric Utility		07/23/2003	A	07/23/2003	A	05/01/2008
25	CAIRSO2	Affected	Operating	CC	Electric Utility		07/23/2003	A	07/23/2003	A	01/01/2009
26	ARP	Phase 2	Operating	CC	Electric Utility		08/20/2003	A	08/20/2003	A	08/20/2003
26	CAIRNOX	Affected	Operating	CC	Electric Utility		08/20/2003	A	08/20/2003	A	01/01/2008
26	CAIROS	Affected	Operating	CC	Electric Utility		08/20/2003	A	08/20/2003	A	05/01/2008
26	CAIRSO2	Affected	Operating	CC	Electric Utility		08/20/2003	A	08/20/2003	A	01/01/2009

Basic Table Layout

Generator Information

Generator ID	Unit ID	ARP Nameplate Capacity	CAIR/CAMR Nameplate Capacity	Effective Date
EU 025	25	224.0	224.0	06/29/2007
EU 026	26	224.0	224.0	06/29/2007

Basic Table Layout

Current Owners and Operators

Unit ID	Owner/Operator Company Name	Type	Effective Date	End Date
25	Florida Municipal Power Agency	Owner	03/07/2003	
25	Kissimmee Utility Authority	Owner	03/07/2003	
25	Orlando Utilities Commission	Owner	03/07/2003	
25	Southern Electric Company	Owner/Operator	03/07/2003	
26	Florida Municipal Power Agency	Owner	03/07/2003	
26	Kissimmee Utility Authority	Owner	03/07/2003	
26	Orlando Utilities Commission	Owner	03/07/2003	
26	Southern Electric Company	Owner/Operator	03/07/2003	

Basic Table Layout

GULF POWER COMPANY
One Energy Place
Pensacola, FL 32520-0328

Fax Phone: 850.444.6217 -
Environmental Affairs

RECEIVED

APR 24 2002

BUREAU OF AIR REGULATION

Fax

To:	Tom Cascio 7DEP- Tallahassee	From:	Dwain Waters Gulf Power Co. / Environmental Affairs
Fax:	850.922.6579	Pages:	6
Phone:	850.521.9526	Date:	04/24/02
Re:			

Urgent For Your Review Comment by _____

Please Reply Please Recycle

● **Comments:**

Please find a copy of the Standin A DR
certification and a revised copy of the
Acid Rain Part II application with Unit 26
commence operation date as 4/01/03.

Southern Company Services, Inc.
Post Office Box 2641
Birmingham, Alabama 35291-8195
Tel 205.257.1000



April 15, 2002

Ms. Pamela Jones
U.S. Environmental Protection Agency
Clean Air Markets Division (6204N)
633 3rd St., NW
Washington, DC 20001
Tel: (202) 564-9150

RE: Acid Rain Program
Designated Representative Certificate of Representation

Dear Ms. Jones:

Please find enclosed a Certificate of Representation for Southern Company Stanton A located at the Orlando Utilities Commission in Orlando, Florida. Mr. W. Paul Bowers will serve as the Designated Representative and Mr. James O. Vick will be the Alternate Designated Representative.

One certificate with original signatures and three photocopies have been enclosed, as required. Copies of this submittal will be provided to Region 4 and to the State of Florida Department of Environmental Protection.

Should you have any questions regarding this submittal, please contact Mr. Ken Boyd at (205) 257-7476.

Sincerely,

A handwritten signature in cursive script that reads "Danny Harin".

Mr. Danny Harin
Manager, Environmental Compliance Strategies & Permitting

Enclosure

cc: Mr. Doug Neeley, U.S. EPA Region 4
Mr. G. Dwain Waters, Gulf Power Company

United States
Environmental Protection Agency
Acid Rain Program

OMB No. 2060-0258



Certificate of Representation

Page 1

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

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

This submission includes combustion or process sources under 40 CFR part 74

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

Plant Name	Stanton A	FL State	55821 ORIS Code
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STEP 2
Enter requested information for the designated representative.

Name		W. Paul Bowers	
Address			
Southern Company Generation and Energy Marketing			
600 North 18th. Street - 15th Floor			
Birmingham, Alabama 35203			
Phone Number	205.257.5355	Fax Number	205.257.0526
E-mail address (if available)			
wpowers@southernco.com			

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

Name		James O. Vick	
Phone Number	850.444.6311	Fax Number	850.444.6217
E-mail address (if available)			
jovick@southernco.com			

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.

STEP 4

Complete Step 5, read the certifications, and sign and date. For a designated representative of a combustion or process source under 40 CFR part 74, the references in the certifications to "affected unit" or "affected units" also apply to the combustion or process source under 40 CFR part 74 and the references to "affected source" also apply to the source at which the combustion or process source is located.

I certify that I have given notice of the agreement, selecting me as the 'designated representative' for the affected source and each affected unit at the source identified in this certificate of representation, in a newspaper of general circulation in the area where the source is located or in a State publication designed to give general public notice.

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 actions, inactions, or submissions.

I certify that I shall abide by any fiduciary responsibilities imposed by the agreement by which I was selected as designated representative or alternate designated representative, as applicable.

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 or, 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.


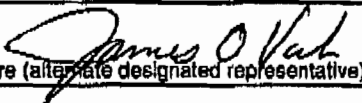
The agreement by which I was selected as the alternate designated representative, if applicable, includes a procedure for the owners and operators of the source and affected units at the source to authorize the alternate designated representative to act in lieu of the designated representative.

Plant Name (from Step 1) Stanton A

Certificate - Page 2

Page **1** of **1**

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.

 Signature (designated representative)	10 Apr 02 Date
 Signature (alternate designated representative)	4/9/02 Date

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

Southern Company - Florida, LLC					<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Operator		
Name							
25 ID#	26 ID#	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	

Orlando Utilities Commission					<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator		
Name							
25 ID#	26 ID#	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	

Kissimmee Utility Authority					<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator		
Name							
25 ID#	26 ID#	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	

Florida Municipal Power Authority					<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator		
Name							
25 ID#	26 ID#	ID#	ID#	ID#	ID#	ID#	
ID#	ID#	ID#	ID#	ID#	ID#	ID#	

Phase II Acid Rain Part Application

For more information, see instructions and refer to 40 CFR 72.30 and 72.31 and Chapter 62-214, F.A.C.

This submission is: New Revised

STEP 1

Identify the source by plant name, State, and ORIS code from NADB

Plant Name	Stanton A	State	FL	ORIS Code	55821
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STEP 2 Enter the unit ID# for each affected unit and indicate whether a unit is being repowered and the repowering plan being renewed by entering "yes" or "no" at column c. For new units, enter the requested information in columns d and e.

a Unit ID#	Compliance Plan		d New Units Commence Operation Date	e New Units Monitor Certification Deadline
	b Unit will hold allowances in accordance with 40 CFR 72.9(c)(1)	c Repowering Plan		
25	Yes	No	4/01/2003	7/01/2003
26	Yes	No	4/01/2003 ^(S)	7/01/2003
	Yes		4/24/02	
	Yes			
	Yes			
	Yes			
	Yes			
	Yes			
	Yes			
	Yes			
	Yes			
	Yes			

STEP 3

Check the box if the response in column c of Step 2 is "Yes" for any unit

For each unit that is being repowered, the Repowering Extension Plan form is included.