Date: 5/21/98 2:13:12 PM
From: Mary Fillingim TAL
Subject: New Posting #0550003

To: See Below

There is a new posting on Florida's website.

0550003001AV FPC-AVON PARK PLANT

Final

If you have any questions, please feel free to contact me. Thanks, Mary

To: adams yolanda To: pierce carla

To: Barbara Boutwell TAL
To: Scott Sheplak TAL
To: Terry Knowles TAL

To: danois gracy

To: Elizabeth Walker TAL CC: Bruce Mitchell TAL



December 20, 1995

RECEIVED

UEC 22 1995

BUREAU OF
AIR REGULATION

Mr. John C. Brown (MS 5505)
Department of Environmental Protection
Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Dear Mr. Brown:

Re: Phase II Acid Rain Permit Applications

I have enclosed the original and three copies of completed Phase II acid rain permit application forms for Florida Power Corporation's affected units. In addition, a copy of the Certificate of Representation for each affected facility is included. Please note that a Retired Unit Exemption is being requested for Avon Park Unit 2 (ORIS Code 624). This unit was permanently retired on January 1, 1995.

FPC will ensure that it will hold sufficient allowances to account for the sulfur dioxide emissions from its affected units beginning in the year 2000. Please contact Mr. Mike Kennedy at (813) 866-4344 or me at (813) 866-4387 if you have any questions.

Sincerely,

W. Jeffrey Pardue, C.E.P., Director

Designated Representative

cc: J. R. Stitt, FPC

Alternate Designated Representative

Summary checklist for Title IV, Phase II permit applications

Facility Name FURIAL POWER CORPORATION	
Plant Name: Avon PARK CLANT	receipt date 12/2/95
ORIS Code: <u>6</u> <u>2</u> <u>4</u> AIRS ID No.: <u>0</u> <u>5</u> <u>5</u>	OOOS (not required)
a. July 1, 1995 version of application form(s) used? b. Four (4) copies of application form(s) submitted? c. Certificate of Representation form on file? c. Application form(s) signed by Designated Representative (DR) or alternate DR? c. Original signature of DR or alternate DR on one of 4 forms? f. Modifications made to wording on form(s)?	Y* / N Y* / N Y* / N X* / N
Reviewer's initials IMC date 12 29 95	
Note(s): $[*]$ = mandatory.	
Comment(s): RETIREN UNITEXEMPTION	EILEW.
· · · · · · · · · · · · · · · · · · ·	

tiveheck_doc 12/19/95 version

Retired Unit Exemption

For more information, see instructions and refer to 40 CFR 72.8 This submission is: 🔀 New Revised Identify the unit that is or will be ORIS Code Plant Name Avon Park Plant 624 Boiler ID# 2 name, State, and ORIS Code and This petition is being submitted on or before the deadline for submitting an Acid Rain part application Check one box to indicate the deadline for this application. The unit has a Phase II Acid Rain part. This petition is being submitted on or before the deadline for reapplying for the Acid Rain part. Read the certification and enter the actual I certify that this unit is or will be permanently retired on the date specified or expected date of in this petition and will not emit any sulfur dioxide or nitrogen oxides after 01/01/95 retirement of the unit. such date. The date for the permanent retirement of this unit is or will be: mm/dd/yy A description of any actions that have been or will be taken and that provide the basis for the Indicate that the certification in Step 3. required information Special Provisions Read the special provisions and the (1) A unit exempted under 40 CFR 72.8 and Rule 62-214.340(2), F.A.C., shall not emit any sulfur dioxide certifications, and and nitrogen oxides starting on the date it is exempted. (2) The owners and operators of a unit exempted under 40 CFR 72.8 and Rule 62-214.340(2), F.A.C., shall comply with monitoring requirements in accordance with part 75 and will be allocated allowances in accordance with 40 CFR part 73. (3) A unit exempted under 40 CFR 72.8 shall not resume operation unless the designated representative of the source that includes the unit submits an Acid Rain part application for the unit not less than 24 months prior to the later of January 1, 2000, or the date the unit is to resume operation. On the earlier of the date the written exemption expires or the date an Acid Rain part application is submitted or is required to be submitted under this paragraph (3), the unit shall no longer be exempted and shall be subject to all requirements of 40 CFR part 72: Certification I am authorized to make this submission on behalf of the owners and operators of the Acid Rain source or Acid Rain 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. Name W. Jeffrey Pardue, C.E.P., Director, Environmental Services Dept.

DEP Form No. 62-210.900(1)(a)3. - Form Effective: 7-1-95

STEP 1

STEP 2

STEP 3

STEP 4

STEP 5

is attached.

sign and date.

retired by plant

boiler ID# from NADB.

Avon Park Unit 2 (ORIS Code 624)

Retired Unit Exemption Description

Avon Park Unit 2 was placed into long-term reserve shutdown in July 1984, as shown in the attached letter from Florida Power Corporation (FPC) to the Florida Department of Environmental Protection (DEP). As of January 1, 1995, the unit was permanently retired from service. Avon Park Unit 2 is scheduled to be dismantled in 1996; therefore, no further operation of the unit is possible.

Florida Power

July 31, 1984

BECEIVED

JUN 1 2 1997

D. E. R. SO. FLA. DISTRICT

Mr. Philip R. Edwards
District Manager
Department of Environmental Regulation
2269 Bay Street
Fort Myers, FL 33901

Subject: Avon Park Unit #2 (AD28-56388)

Avon Park Peaker #1 (A028-47765) Avon Park Peaker #2 (A028-47770)

Dear Mr. Edwards:

Please be advised that the subject units have been placed in long term standby and are not scheduled to operate in the foreseeable future. When these units are placed back into operation, your office will be notified and the units tested within 30 days of startup.

Should you have any questions, please advise.

J/ A. Hancock

Vice President, Fossil Operations

Hancock (MO2)C3-1

This submission is: New



Certificate of Representation

X Revised

Page 1

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STEP 1 Identify the source by plant name, State, and ORIS code from NADB	Plant Name A	ron Park	Sta	FL	624 ORIS Code
		\$ ·			

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

STEP 2 Enter requested information for the designated representative

Name	W. Jeffrey Pardue	•	
Address	Florida Power Corporation 3201 - 34th Street South St. Petersburg, FL 33711	MAC H2G	
Phone Num	ber (813) 866-4387	Fax Number	(813) 866-4926

STEP 3
Enter requested
Information for the
alternate designated
representative
(optional)

Name	
Address	
	<u> </u>
Phone Number	Fax Number

STEP 4
Complete Step 5, read
the certifications and
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 given notice of the agreement, selecting me as the designated representative or alternative designated representative, as applicable for the affected source and each affected unit at the source identified in this certificate of representation, daily for a period of one week 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 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, of where a utility or industrial customer purchases power from an affected unit under life-of-the-unit, firm power from a firm of the life-of-the-unit under li

I have given a written notice of my selection as the designated representative or elternate designated representative, as applicable, and of the agreemon by which I was selected to each owner and operator of the affected source and of each affected unit at the source; and

Allowences and the proceeds of transactions involving allowences will be cremed 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 allowences contract, that allowences and the proceeds of transactions involving allowences will be deemed to be he or distributed in accordance with the contract.

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

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						Certificate - Page
Plant Nami	s (from Step 1)	Avon	Park		,*	Page Tof
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			414)			
Signature (designated repre	esentative)	Wander	·	Date	11/8/94
Signature ((siternate)				C:ate	
				• .		- : .
Name	Flori	da Power	Corporati	ion	X Owner	Operato:
10# 2	ID#	ID#	10#	ID#	101	10.5
10#	ID#	10#	10#	ID#	10#	10 #
Regulator	y Authorities	Florida	Public Se	rvice <u>Comm</u>	ission	. Cperator
Name		· · · · · · · · · · · · · · · · · · ·		i		
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Regulator	y Authorities			And		
Name					Owner	Operator
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Name					Owner	Coerator
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Regulatory Authorities

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EPA Form 7610 1 (11 92)

STEP 5
Provide the name of every owner and operator of the source and each affected unit at the source. Identify the units they own and/or operate by boiler ID# from NADB. For owners only, Identify each state or local utility regulatory authority with jurisdiction over each owner

owner