



Florida Municipal Power Agency

May 13, 2009

U.S. Environmental Protection Agency
Clean Air Markets Division (6204J)
Attention: Designated Representative
1310 L Street, Northwest
Washington, DC 20005

Re: Cane Island Power Park
ORIS Code 7238

Florida Municipal Power Agency would like to submit the enclosed Certificate of Representation signifying a new Alternate Designated Representative for Cane Island Power Park.

Due to the joint ownership of the facility shared by Florida Municipal Power Agency (FMPPA) and Kissimmee Utility Authority (KUA), Tom Reedy will replace Jay Butters as the Alternate Designated Representative to share the responsibility with KUA accordingly. Jay Butters and I will still both be agents for the facility. Please modify your records accordingly.

Please contact me at 321-239-1004 if you have any questions or require additional information.

Sincerely,

Amy Deese
Environmental Compliance Specialist

Enclosures

cc: Jonathan Holtom, FDEP Tallahassee
Caroline Shine, FDEP Central District
Larry Mattern, Kissimmee Utility Authority
Jay Butters, Kissimmee Utility Authority
Tom Reedy, FPMA
Jerusha Gibson, FMPPA

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BUREAU OF AIR REGULATION

Amy Deese
Environmental Specialist



Certificate of Representation

For more information, see instructions and 40 CFR 72.24; 40 CFR 96.113, 96.213, or 96.313, or a comparable state regulation under the Clean Air Interstate Rule (CAIR) NO_x Annual, SO₂, and NO_x Ozone Season Trading Programs or 40 CFR 97.113, 97.213, or 97.313.

FACILITY (SOURCE) INFORMATION

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

STEP 1
Provide information for the facility (source).

Facility (Source) Name Cane Island Power Park	State FL	Plant Code 7238
County Name Osceola		
Latitude 28.2764	Longitude 81.5330	

STEP 2
Enter requested information for the designated representative.

Name Larry Mattern	Title Vice President of Power Supply
Company Name Kissimmee Utility Authority	
Address 1701 West Carroll Street, Kissimmee, FL 34741	
Phone Number 407-933-7777	Fax Number 407-846-6485
E-mail address lmattern@kua.com	

STEP 3
Enter requested information for the alternate designated representative.

Name Thomas E. Reedy	Title Assistant General Manager, Power Resources
Company Name Florida Municipal Power Agency	
Address 8553 Commodity Circle, Orlando, FL 32819-9002	
Phone Number (407) 355-7767	Fax Number (407) 355-5794
E-mail address tom.reedy@fmpa.com	

Facility (Source) Name (from Step 1) **Cane Island Power Park**

UNIT INFORMATION

STEP 4: Complete one page for each unit located at the facility identified in STEP 1 (i.e., for each boiler, simple cycle combustion turbine, or combined cycle combustion turbine) Do not list duct burners. Indicate each program to which the unit is subject, and enter all other unit-specific information, including the name of each owner and operator of the unit and the generator ID number and nameplate capacity of each generator served by the unit. If the unit is subject to a program, then the facility (source) is also subject. (For units subject to the NO_x Budget Trading Program, a separate "Account Certificate of Representation" form must be submitted to meet requirements under that program.)

Applicable Program(s): Acid Rain CAIR NO_x Annual CAIR SO₂ CAIR NO_x Ozone Season

Unit ID#	Unit Type	Source Category	Generator ID Number	Acid Rain Nameplate Capacity (MWe)	CAIR Nameplate Capacity (MWe)
			(Maximum 8 characters)		
**1	CT	Electric Utility	**1	50	50
		NAICS Code 221112			
Date unit began (or will begin) serving any generator producing electricity for sale (including test generation) (mm/dd/yyyy): 03/24/1995			Check One: Actual <input checked="" type="checkbox"/> Projected <input type="checkbox"/>		
Company Name: Florida Municipal Power Agency			<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name: Kissimmee Utility Authority			<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		

Facility (Source) Name (from Step 1) **Cane Island Power Park**

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Applicable Program(s): Acid Rain CAIR NO_x Annual CAIR SO₂ CAIR NO_x Ozone Season

Unit ID#	Unit Type	Source Category	Generator ID Number (Maximum 8 characters)	Acid Rain Nameplate Capacity (MWe)	CAIR Nameplate Capacity (MWe)
			2	128	128
2	CC	Electric Utility			
		NAICS Code 221112			
Date unit began (or will begin) serving any generator producing electricity for sale (including test generation) (mm/dd/yyyy): 07/01/1995			Check One: Actual <input checked="" type="checkbox"/> Projected <input type="checkbox"/>		
Company Name: Florida Municipal Power Agency			<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name: Kissimmee Utility Authority			<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		

Facility (Source) Name (from Step 1) **Cane Island Power Park**

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Applicable Program(s): Acid Rain CAIR NO_x Annual CAIR SO₂ CAIR NO_x Ozone Season

Unit ID#	Unit Type	Source Category	Generator ID Number (Maximum 8 characters)	Acid Rain Nameplate Capacity (MWe)	CAIR Nameplate Capacity (MWe)
3	CC	Electric Utility	3	252	252
		NAICS Code 221112			
Date unit began (or will begin) serving any generator producing electricity for sale (including test generation) (mm/dd/yyyy): 01/26/2001			Check One: Actual <input checked="" type="checkbox"/> Projected <input type="checkbox"/>		
Company Name: Florida Municipal Power Agency			<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name: Kissimmee Utility Authority			<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		
Company Name:			<input type="checkbox"/> Owner <input type="checkbox"/> Operator		

Facility (Source) Name (from Step 1) **Cane Island Power Park**

UNIT INFORMATION

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Applicable Program(s): Acid Rain CAIR NO_x Annual CAIR SO₂ CAIR NO_x Ozone Season

Unit ID#	Unit Type	Source Category	NAICS Code	Generator ID Number (Maximum 8 characters)	Acid Rain Nameplate Capacity (MWe)	CAIR Nameplate Capacity (MWe)
				4	300	300
4	CC	Electric Utility	221112			
Date unit began (or will begin) serving any generator producing electricity for sale (including test generation) (mm/dd/yyyy): 06/2011				Check One: Actual Projected <input checked="" type="checkbox"/>		
Company Name: Florida Municipal Power Agency				<input checked="" type="checkbox"/> Owner ~ Operator		
Company Name: Kissimmee Utility Authority				~ Owner <input checked="" type="checkbox"/> Operator		
Company Name:				~ Owner ~ Operator		
Company Name:				~ Owner ~ Operator		
Company Name:				~ Owner ~ Operator		

Facility (Source) Name (from Step 1) Cane Island Power Park
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STEP 5: Read the appropriate certification statements, sign, and date.

Acid Rain Program

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.e., the source and each unit subject to the Acid Rain Program, as indicated in "Applicable Program(s)" in Step 4).

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 each affected unit at the source and that each such owner and operator shall be fully bound by my representations, actions, inactions, or submissions.

I certify that the owners and operators of the affected source and 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 a life-of-the-unit, firm power contractual arrangement, 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 each affected unit at the source; and

Allowances, and 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, except that, if such multiple holders have expressly provided for a different distribution of allowances, allowances and proceeds of transactions involving allowances will be deemed to be held or distributed in accordance with the contract.

Clean Air Interstate Rule (CAIR) NO_x Annual Trading Program

I certify that I was selected as the CAIR designated representative or alternate CAIR designated representative (as applicable), by an agreement binding on the owners and operators of the CAIR NO_x source and each CAIR NO_x unit at the source (i.e., the source and each unit subject to the CAIR NO_x Annual Trading Program, as indicated in "Applicable Program(s)" in Step 4).

I certify that I have all necessary authority to carry out my duties and responsibilities under the CAIR NO_x Annual Trading Program on behalf of the owners and operators of the CAIR NO_x source and each CAIR NO_x unit at the source and that each such owner and operator shall be fully bound by my representations, actions, inactions, or submissions.

I certify that the owners and operators of the CAIR NO_x source and each CAIR NO_x 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, a CAIR NO_x unit, or where a utility or industrial customer purchases power from a CAIR NO_x unit under a life-of-the-unit, firm power contractual arrangement, I certify that:

I have given a written notice of my selection as the CAIR designated representative or alternate CAIR designated representative (as applicable) and of the agreement by which I was selected to each owner and operator of the CAIR NO_x source and each CAIR NO_x unit at the source; and

CAIR NO_x allowances and proceeds of transactions involving CAIR NO_x allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement, except that, if such multiple holders have expressly provided for a different distribution of CAIR NO_x allowances by contract, CAIR NO_x allowances and proceeds of transactions involving CAIR NO_x allowances will be deemed to be held or distributed in accordance with the contract.

Facility (Source) Name (from Step 1) **Cane Island Power Park**

Clean Air Interstate Rule (CAIR) SO₂ Trading Program

I certify that I was selected as the CAIR designated representative or alternate CAIR designated representative (as applicable), by an agreement binding on the owners and operators of the CAIR SO₂ source and each CAIR SO₂ unit at the source (i.e., the source and each unit subject to the SO₂ Trading Program, as indicated in "Applicable Program(s)" in Step 4).

I certify that I have all necessary authority to carry out my duties and responsibilities under the CAIR SO₂ Trading Program, on behalf of the owners and operators of the CAIR SO₂ source and each CAIR SO₂ unit at the source and that each such owner and operator shall be fully bound by my representations, actions, inactions, or submissions.

I certify that the owners and operators of the CAIR SO₂ source and each CAIR SO₂ 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, a CAIR SO₂ unit, or where a utility or industrial customer purchases power from a CAIR SO₂ unit under a life-of-the-unit, firm power contractual arrangement, I certify that:

I have given a written notice of my selection as the CAIR designated representative or alternate CAIR designated representative (as applicable) and of the agreement by which I was selected to each owner and operator of the CAIR SO₂ source and each CAIR SO₂ unit at the source; and

CAIR SO₂ allowances and proceeds of transactions involving CAIR SO₂ allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement, except that, if such multiple holders have expressly provided for a different distribution of CAIR SO₂ allowances by contract, CAIR SO₂ allowances and proceeds of transactions involving CAIR SO₂ allowances will be deemed to be held or distributed in accordance with the contract.

Clean Air Interstate Rule (CAIR) NO_x Ozone Season Trading Program

I certify that I was selected as the CAIR designated representative or alternate CAIR designated representative (as applicable), by an agreement binding on the owners and operators of the CAIR NO_x Ozone Season source and each CAIR NO_x Ozone Season unit at the source (i.e., the source and each unit subject to the CAIR NO_x Ozone Season Trading Program, as indicated in "Applicable Program(s)" in Step 4).

I certify that I have all necessary authority to carry out my duties and responsibilities under the CAIR NO_x Ozone Season Trading Program on behalf of the owners and operators of the CAIR NO_x Ozone Season source and each CAIR NO_x Ozone Season unit at the source and that each such owner and operator shall be fully bound by my representations, actions, inactions, or submissions.

I certify that the owners and operators of the CAIR NO_x Ozone Season source and each CAIR NO_x Ozone Season unit 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, a CAIR NO_x Ozone Season unit, or where a utility or industrial customer purchases power from a CAIR NO_x Ozone Season unit under a life-of-the-unit, firm power contractual arrangement, I certify that:

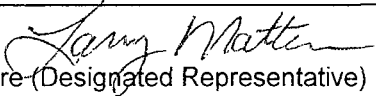

I have given a written notice of my selection as the CAIR designated representative or alternate CAIR designated representative (as applicable) and of the agreement by which I was selected to each owner and operator of the CAIR NO_x Ozone Season source and each CAIR NO_x Ozone Season unit; and

CAIR NO_x Ozone Season allowances and proceeds of transactions involving CAIR NO_x Ozone Season allowances will be deemed to be held or distributed in proportion to each holder's legal, equitable, leasehold, or contractual reservation or entitlement, except that, if such multiple holders have expressly provided for a different distribution of CAIR NO_x Ozone Season allowances by contract, CAIR NO_x Ozone Season allowances and proceeds of transactions involving CAIR NO_x Ozone Season allowances will be deemed to be held or distributed in accordance with the contract.

Facility (Source) Name (from Step 1) Cane Island Power Park
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General

I am authorized to make this submission on behalf of the owners and operators of the source or 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)	Date May 12, 2009
 Signature (Alternate Designated Representative)	Date May 12, 2009