

P.E. Certification Statement

Permittee:
St. Vincent's Medical Center

Permit No.: 0310068-007-AV
Facility ID No.: 0310068

Project type: Title V Operation Permit Renewal

I HEREBY CERTIFY that the engineering features described in the above referenced application and subject to the proposed permit conditions provide reasonable assurance of compliance with applicable provisions of Chapter 403, Florida Statutes, and Florida Administrative Code Chapters 62-4 and 62-204 through 62-297. However, I have not evaluated and I do not certify aspects of the proposal outside of my area of expertise (including but not limited to the toxicological, electrical, mechanical, structural, hydrological, and geological features).

Richard L. Robinson, P.E.
Registration Number: 0046688

Date

Permitting Authority:
Environmental Resource Management Department
Environmental Quality Division
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