Jeb Bush
Governor

M. Rony François, M.D., M.S.P.H., Ph.D.
Secretary

CERTIFIED MAIL
October 10, 2006

NOTICE OF CHANGE OF THE TITLE V AIR OPERATION PERMIT'S EXPIRATION DATE

In the Matter of a Request for a
Change in the Permit's Expiration Date:

Mr. Edward H. Seiler
Medical Center Director
Department of Veterans Affairs
7305 North Military Trail
West Palm Beach, FL 33410

File No.: 0990304-001-AV
Palm Beach County
Veterans Affairs Medical Center

This is a notification that the Palm Beach County Health Department (Health Department) has changed the expiration date of the above referenced Title V Air Operation Permit to September 15, 2006. This change in the expiration date is based on the general permit notification received August 15, 2006. The changed expiration date is the same date as the effective date of the general permit no. 0990304-002-AG. A site visit conducted by the Health Department's inspector on August 02, 2006 verified that the emission units that triggered the Title V applicability were shutdown, and hence the facility no longer requires a Title V Air Operation Permit. **Also, there is a requirement that the Responsible Official submit a Statement of Compliance within 60-days of permanent shutdown at Rule 62-213.440(3)(a)2.b., F.A.C., which, in this case, is being clocked from September 15, 2006.**

This change in the expiration date will take effect fourteen (14) days from the clerking date unless a timely petition for an administrative hearing is filed pursuant to Sections 120.569 and 120.57, Florida Statutes (F.S.). The procedures for petitioning for a hearing are set forth below.

A person whose substantial interests are affected by the proposed agency action may petition for an administrative proceeding (hearing) under Sections 120.569 and 120.57, F.S. The petition must contain the information set forth below and must be filed (received) in the Palm Beach County Health Department Legal Office, located at 826 Evernia Street in West Palm Beach, Florida, 33401 (Telephone: (561) 355-3007, Fax (561) 804-9405). Petitions filed by the owner or operator or any of the parties listed below must be filed within fourteen (14) days of receipt of this notice of intent. Petitions filed by any persons other than those entitled to written notice under Section 120.60(3), F.S., must be filed within fourteen (14) days of receipt of this notice. Under Section 120.60(3), F.S., however, any person who asked the Health Department for notice of agency action may file a petition within fourteen (14) days of receipt of that notice. A petitioner shall mail a copy of the petition to the applicant at the address indicated above at the time of filing. The failure of any person to file a petition within the appropriate time period shall constitute a waiver of that person's right to request an administrative determination (hearing) under Sections 120.569 and 120.57, F.S., or to intervene in this proceeding and participate as a party to it. Any subsequent intervention will be only at the approval of the presiding officer upon the filing of a motion in compliance with Rule 28-106.205, F.A.C.

A petition that disputes the material facts on which the Health Department's action is based must contain the following information: (a) The name and address of each agency affected and each agency's file or identification number, if known; (b) The name, address, and telephone number of the petitioner, the name, address, and telephone number of the petitioner's representative, if any, which shall be the address for service purposes during the course of the proceeding; and an explanation of how the petitioner's substantial interests will be affected by the agency determination; (c) A statement of how and when petitioner received notice of the agency action or proposed action; (d) A statement of all disputed issues of material fact. If there are none, the petition must so indicate; (e) A concise statement of the ultimate facts alleged, including the specific facts the petitioner contends warrant reversal or modification of the agency's proposed action; (f) A statement of the specific rules or statutes the petitioner contends require reversal or modification of the agency's proposed action; and (g) A statement of the relief sought by the petitioner, stating precisely the action petitioner wishes the agency to take with respect to the agency's proposed action.

A petition that does not dispute the material facts upon which the Health Department's action is based shall state that no such facts are in dispute and otherwise shall contain the same information as set forth above, as required by Rule 28-106.301, F.A.C.

Because the administrative hearing process is designed to formulate final agency action, the filing of a petition means that the Health Department's final action may be different from the position taken by it in this notice. Persons whose substantial interests will be affected by any such final decision of the Health Department on the request for conditional exemption have the right to petition to become a party to the proceeding, in accordance with the requirements set forth above.

Mediation is not available in this proceeding.

NOTICE OF APPEAL RIGHTS

Any party to this order (permit) has the right to seek judicial review of the permit (letter) pursuant to Section 120.68, F.S., by the filing of a Notice of Appeal pursuant to Rule 9.110, Florida Rules of Appellate Procedure, with the Clerk of the Health Department in the Legal Office; and, by filing a copy of the Notice of Appeal accompanied by the applicable filing fees with the appropriate District Court of Appeal. The Notice of Appeal must be filed within 30 (thirty) days from the date this Notice is filed with the Clerk of the Health Department.

Executed in West Palm Beach, Florida.

James E. Stormer, Q.E.P., Environmental Administrator
Air Pollution Control Section
Environmental Health and Engineering

CERTIFICATE OF SERVICE

The undersigned duly designated deputy agency clerk hereby certifies that this NOTICE OF CHANGE OF THE TITLE V AIR OPERATION PERMIT'S EXPIRATION DATE was sent by electronic mail (*) and copies were sent by electronically (Received Receipt requested) before the close of business on _____ to the person(s) listed or as otherwise noted:

Wallace Thompson, VA Medical Center	**Email**	**Wallace.thompson@med.va.gov**
Scott Sheplak, BAR, Title V Coordinator	Email	scott.sheplak@dep.state.fl.us
Darrel Graziani, P.E., SED, DEP	Email	Darrel.Graziani@dep.state.fl.us
Barbara Friday, BAR	Email	Barbara.friday@dep.state.fl.us

(for posting with Region 4 , U.S. EPA)

Clerk Stamp

FILING AND ACKNOWLEDGMENT FILED, on this date, pursuant to §120.52(7), Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

_____ _____
(Clerk) (Date)