RECEIVED

MAY 18 2007

BUREAU OF AIR REGULATION



4400 South State Road 7 Ft. Lauderdale, FL 33314 (954) 581-6606 (954) 581-6705 Fax

May 08, 2007

Certified Mail 70062150000562728337

Al Linero
Program Administrator
South Permitting Section
FDEP
Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Re: Wheelabrator South Broward

Title V – Change in Responsible Official Title V Permit #: 0112119-009-AV

Dear Mr. Linero:

Please find attached a Responsible Official Notification Form [DEP Form No. 62-213.900(8)] designating a change in the Responsible Official for the Wheelabrator South Broward Waste-to-Energy Facility (Title V Permit #: 0112119-009-AV).

Jairaj Gosine remains as the Primary Responsible Official as defined in Rule 62-210, FAC, of the Title V source addressed in this submittal for Wheelabrator South Broward. Mr.Ganeesh Siewrattan is now designated as an Additional Responsible Official.

If you have any questions or if further information is required, please contact me or Neil R. Swanson, our Environmental Health and Safety Manager at 914-581-6606

Sincerely.

Jairaj Gosine Plant Manager

cc: USEPA, Region 4 Air, Pesticides & Toxics Management Division, Air & EPCRA Enforcement Branch, Air Enforcement Section (with) Certified Mail

70062150000562728344

Daniella Banu (with)

Darrel Graziani (with)

Neil Swanson (with)
Chris Carey (with)
Tim Porter (with)
Theodore Pytlar (with)
Sandy Gutner (with)
Matt Killeen (without)
File: 3.7.3 (with)
5.1.3.2 (without)

JG/jlb070508



Department of Environmental Protection

Division of Air Resource Management

RESPONSIBLE OFFICIAL NOTIFICATION FORM

Note: A responsible official is not necessarily a designated representative under the Acid Rain Program. To become a designated representative, submit a certificate of representation to the U.S. Environmental Protection Agency (EPA) in accordance with 40 CFR Part 72.24.

Ide	entification of Facility					
1.						
2.	Site Name: Wheelabrator South Broward, Inc. 3. County: Broward					
4.	4. Title V Air Operation Permit/Project No. (leave blank for initial Title V applications): 0122119-009-AV					
No	Notification Type (Check one or more)					
	INITIAL: Notification of responsible officials for an initial Title V application.					
	RENEWAL: Notification of responsible officials for a renewal Title V application.					
хх	X CHANGE: Notification of change in responsible official(s).					
	Effective date of change in responsible official(s) 05/08/2007					
Primary Responsible Official						
1.	Name and Position Title of Responsible Official: Jairaj Gosine, Plant Manager					
2.	. Responsible Official Mailing Address: Organization/Firm: Wheelabrator South Broward, Inc.					
	Street Address: 4400 South State Road # 7					
	City: Ft. Lauderdale State: FL Zip Code: 33314					
3.	Responsible Official Telephone Numbers:					
	Telephone: (954) 581-6606 Fax: (954) 581-6705					
	4. Responsible Official Qualification (Check one or more of the following options, as applicable):					
 XX For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. [] For a partnership or sole proprietorship, a general partner or the proprietor, respectively. [] For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official. [] The designated representative at an Acid Rain source. 						
[]	overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. For a partnership or sole proprietorship, a general partner or the proprietor, respectively. For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official.					
[]	overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. For a partnership or sole proprietorship, a general partner or the proprietor, respectively. For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official.					

DEP Form No. 62-213.900(8)

Effective: 6-02-02

Additional Responsible Official						
1.	Name and Position Title of Responsible Official: Ganeesh Siewrattan, Operations Manager					
		•		•		
2.	Responsible Official Mailing Address:					
	Organization/Firm: Wheelabrator South Broward, Inc.					
	Street Address: 4400 South State Road #7					
	City:	Ft. Lauderdale	State: FL	Zip Code: 33314		
3.	Responsible Official Telephone Numbers:					
		4) 581-6606 Fax: (954) 581-6705				
4.						
 XX For a corporation, the president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit under Chapter 62-213, F.A.C. [] For a partnership or sole proprietorship, a general partner or the proprietor, respectively. [] For a municipality, county, state, federal, or other public agency, either a principal executive officer or ranking elected official. [] The designated representative at an Acid Rain source. 						
Additional Responsible Official 1. Name and Position Title of Responsible Official:						
	•					
2.	Responsible Official Organization/Firm					
	Street Address	:				
•	City	<i>'</i> :	State:	Zip Code:		
3.	Responsible Officia	al Telephone Numbers:	· · · · · · · · · · · · · · · · · · ·			
	Telephone: () -	Fax: () -		
4.						
**	Responsible Officia	al Qualification (Check		llowing options, as applicable):		

2

DEP Form No. 62-213.900(8)

Effective: 6-02-02