

## Department of Environmental Protection

HANDANAM SERVETT

ELOS & L YAM

## Division of Air Resource Management

## RESPONSIBLE OFFICIAL NOTIFICATION FORM IN A STATE OF THE CONTRACT OF THE CONTR

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.

Identification of	Facility	,		REC		
1 Facility Owner/Company Name: Integrated Waste Management Systems						
2 Cita Nama I	WAS C		η	MAY		
2. Site Name: <i>I</i>	WMS Suwannee	3. County: S	suwannee	DIVISIO		
4. Title V	Air Operation Permit/Project N	lo. (leave blank for i	initial Title V application	RESOURCE		
Notification Typ	e (Check one or more)					
■INITIAL:	■INITIAL: Notification of responsible officials for an initial Title V application.					
□RENEWAL:	RENEWAL: Notification of responsible officials for a renewal Title V application.					
□CHANGE:	CHANGE: Notification of change in responsible official(s).					
l	Effective date of change in	responsible official(	(s)			
Primary Respon	sible Official					
Name and Position Title of Responsible Official:						
Major Gene	eral (Retired) Marvin Jay B	Barry - President				
2. Responsible	Official Mailing Address: /Firm: Integrated Waste Man					
Street Addres	ss: 932 Lark Street					
City: <i>Lel</i>	ighton	State: PA	Zip Code: 18235	-8903		
3. Responsible	Official Telephone Numbers:					
Telephone:	(610) - 3.77-6989	Fax: (61)	0) 377-1339			
4. Responsible	Official Qualification (Check of	one or more of the fo	ollowing options, as app	plicable):		
principal busin for the corpora the overall ope to a permit unc [ ] For a partnershi [ ] For a municipal ranking elected	on, the president, secretary, treasuress function, or any other personation, or a duly authorized representation of one or more manufactured rehapter 62-213, F.A.C. ip or sole proprietorship, a generality, county, state, federal, or other official.	n who performs similar entative of such persor iring, production, or op al partner or the propri er public agency, eithe	r policy or decision-making if the representative is representative is representative is representing facilities applying lietor, respectively.	ng functions esponsible for g for or subject		
	Official Statement:					
I, the undersig addressed in th inquiry, that th have authority	ned, am a responsible official, as his notification. I hereby certify, he statements made in this notifications of all other re	based on information ation are true, accurat esponsible officials, if a	and belief formed after red te and complete. Further, any, for purposes of Title I	easonable I certify that I		
Signature /	/	D	ate			

DEP Form No. 62-213.900(3)

Effective: August 1, 2011

Additional Responsible Official								
Name and Position Title of Responsible Official:								
2.								
	Organization/Firm:							
	Street Address:	<b>Q</b>	T' 0 1					
<u> </u>	City:	State:	Zip Code:					
3.								
<u> </u>	Telephone: ( ) - Fax: ( ) - Responsible Official Qualification (Check one or more of the following options, as applicable):							
4.								
LJ	[ ] 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							
١,,	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							
ן ני	or ranking elected official.							
[]	The designated representative a	t an Acid Rain source.						
Additional Responsible Official  1. Name and Position Title of Responsible Official:								
' '	Name and Position Title of Res	sponsible Official.						
2.	Responsible Official Mailing A	vqquess.						
	Organization/Firm:	idai 033.						
	Street Address:							
:	City:	State:	Zip Code:					
3.	Responsible Official Telephone	e Numbers:						
	Telephone: ( ) - Fax: ( ) -							
4.	4. Responsible Official Qualification (Check one or more of the following options, as applicable):							
[ ] 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							
<u>,</u>	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							
ן ז	or ranking elected official.  [ ] The designated representative at an Acid Rain source.							
LJ	1 1 designates representative at an riota ram source.							