DOCKET
01-AFC-17C
DATE MAY 0 4 2007
RECD. MAY 1 0 2007

GE ENERGY

John Gates
Commercial Manager

Inland Empire Energy Center, LLC
26226 Antelope Road
Romoland, CA 92585
USA

T-951-928-6905
John.gates@ge.com

May 4, 2007

Ref. No. GE/IEEC-0044

Mr. John Yee
Supervisor
South Coast AQMD
21865 E. Copley Drive
Diamond Bar, CA 91765-4182

RE: RECLAIM/Title V Facility Permit for the Inland Empire Energy Center (Facility ID 129816)

Dear Mr. Yee:

On behalf of Inland Empire Energy Center LLC, we are pleased to submit the enclosed District applicatian forms requesting an administrative revision to the RECLAIM/Title V permit for the Inland Empire Energy Center (IEEC). We are requesting that the make and model number of the auxiliory boiler (Device D3) be changed from a Nebraska Model NS-F-76 to a Rentech Model 2005-84. At the time of the original permit application filing, Nebrasko was the likely boiler manufacturer. As port of the engineering and pracurement process Rentech was ultimately selected to provide a functionally equivolent boiler. The moke/model number and the heat input rating of the auxiliary boiler burner remain unchanged. There is also no chonge to the selective catalytic reduction (SCR) system or the auxiliary boiler stack height listed in the permit. Because there is no change to the burner/SCR system, the emission levels/rates for the boiler remain unchanged from those previously analyzed by the District. Since there is no emissions change associated with this request, the request does not trigger Best Available Control Technology (BACT), emission offset, and/or ambient air quality modeling requirements in Regulations XIII or XX. Finally, since the requested change impacts only the boiler description and does not impact existing permit conditions, the request qualifies as an administrative permit change.

Enclosed is a check in the amount of $1,045.61 payable to the District to cover the filing fee for the requested administrative change to the permit (per Rule 301.l.6), including the 50% additional fee for an expedited review by the District.

If you have any questions or need further information, please don't hesitate to contact me at 951-928-6905.

Sincerely,

John Gates

GE ENERGY

Commercial Manager

Enc: (7)

CC: Connie Bruins, CEC
CEC Dockets Office, Docket #01-AFC-17C ✓
Craig Matis, GE
John Gates, GE
Ken Kohl, GE
Borry Bedaw, GE
Jennifer Gavaldon, Calpine

SIERRA RESEARCH 916-444-6666 1801 J ...

INVOICE NO.	REFERENCE	AMOUNT	DISC...	
0020070411		1045.61	0.00	1045.61

DATE
05/08/07

CHECK NUMBER
00019650

CHECK AMOUNT
$ 1045.61

SIERRA RESEARCH
916-444-6666
1801 J STREET
SACRAMENTO, CA 95814

UNION BANK OF CALIFORNIA
Sacramento, CA 95814
11-49/1210

019650

CHECK NO.
00019650

** ONE THOUSAND FORTY FIVE DOLLARS AND 61 CENTS **

DATE
05/08/07

AMOUNT
****1,045.61

PAY TO THE ORDER OF
South Coast AQMD
P.O. Box 4932
Diamond Bar CA 91765-0932

AUTHORIZED SIGNATURE

Security Features Included Details on Back.

⑈019650⑈ ⑆121000497⑆ 21 911290⑈

South Coast Air Quality Management District

Form 400-A
Application For Permit To Construct and Permit To Operate

Mail Application To:
P.O. Box 4944
Diamond Bar, CA 91765

Tel: (909) 396-3385
www.aqmd.gov

Section A: Operator Information

1. Business Name of Operator To Appear On The Permit: Inland Empire Energy Center, LLC

2. Valid AQMD Facility ID (Available on Permit or Invoice issued by AQMD): 129816

3. Owner's Business Name (only if different from Business Name of Operator): N/A

Section B: Equipment Location

4. Equipment Location Address:
For equipment operated at various locations in AQMD's jurisdiction, provide address of initial site

26226 Antelope Road
Street Address

Romoland — CA, — 92585
City — State — Zip Code

County: ○ Los Angeles ○ Orange ○ San Bernardino ◉ Riverside

Contact Name: John Gates

Contact Title: H Systems Asset Managemen Phone: (951) 928-6905

Fax: (866) 210-6953 E-Mail: John.Gates@ge.com

Section C: Permit Mailing Address

5. Permit and Correspondence Information:
☐ Check here if same as equipment location address

PO Box 1240, 26226 Antelope Road
Street Address

Romoland — CA — 92585
City — State — Zip Code

Contact Name: John Gates

Contact Title: H Systems Asset Managemen Phone: (951) 928-6905

Fax: (866) 210-6953 E-Mail: John.Gates@ge.com

Section D: Application Type

The facility is in ○ RECLAIM ○ Title V ◉ RECLAIM & Title V Program (please check if applicable)

6. Reason for Submitting Application (Select only ONE):

- ○ New Construction (Permit to Construct)
- ○ Equipment Operating Without A Permit or Expired Permit*
- ◉ Administrative Change
- ○ Equipment On-Site But Not Constructed or Operational
- ○ Title V Application (Initial, Revisions, etc.)
- ○ Compliance Plan
- ○ Facility Permit Amendment
- ○ Registration/Certification
- ○ Streamlined Standard Permit
- ○ Permitted Equipment Altered/ Modified Without Permit Approval*
- ○ Proposed Alteration/Modification to Permitted Equipment
- ○ Change of Condition For Permit To Operate
- ○ Change of Condition For Permit To Construct
- ○ Change of Location—Moving to New Site

Existing Or Previous Permit/Application Number:
(If you checked any of the items in this column, you MUST provide a existing Permit/ Application Number)

* A Higher Permit Processing Fee applies to those items with an asterisk (Rule 301 (c) (1) (D)

7. Estimated Start Date of Operation/Construction (MM/DD/YYYY):

8. Description of Equipment:
Administrative change to auxiliary boiler description.

9. Is this equipment portable AND will it be operated at different locations within AQMD's jurisdiction? ◉ No ○ Yes

10. For Identical equipment, how many additional applications are being submitted with this application? (Form 400-A required for each)

11. Are you a Small Business as per AQMD's Rule 102 definition? (10 employees or less and total gross receipts are $500,000 or less, or a not-for-profit training center?) ◉ No ○ Yes

12. Has a Notice of Violation (NOV) or a Notice To Comply (NC) been issued for this equipment?
◉ No ○ Yes If yes, provide NOV/NC #:

Section E: Facility Business Information

13. What type of business is being conducted at this equipment location? Power Plant

14. What is your businesses primary NAICS Code (North American Industrial Classification System)? 4911

15. Are there other facilities in the SCAQMD jurisdiction operated by the same operator? ◉ No ○ Yes

16. Are there any schools (K-12) within a 1000-ft. radius of the equipment physical location? ◉ No ○ Yes

Section F: Authorization/Signature

I hereby certify that all information contained herein and information submitted with this application is true and correct.

17. Signature of Responsible Official: John Gates

18. Title: H Systems Asset Mang.

19. Print Name: John Gates

20. Date: 4th May 07

Check List
- ☒ Form(s) signed and dated by authorized official
- ☐ Supplemental Equipment Form (400-E-XX or 400-E-GEN)
- ☒ CEQA Form (400-CEQA) attached
- ☒ Payment for permit processing fee attached

Your application will be rejected if any of the above items are missing.

AQMD USE ONLY	APPLICATION/TRACKING #	TYPE B C D	EQUIPMENT CATEGORY CODE:	FEE SCHEDULE: $	VALIDATION
ENG. A R DATE	ENG. A R DATE	CLASS I III IV	ASSIGNMENT Unit Engineer	CHECK/MONEY ORDER #	AMOUNT $ / Tracking #

© South Coast Air Quality Management District, Form 400-A (2004.05)

South Coast Air Quality Management District

Form 400-A

Application For Permit To Construct and Permit To Operate

Mail Application To:
P.O. Box 4944
Diamond Bar, CA 91765

Tel: (909) 396-3385
www.aqmd.gov

Section A: Operator Information

1. Business Name of Operator To Appear On The Permit: Inland Empire Energy Center, LLC

2. Valid AQMD Facility ID (Available on Permit or Invoice issued by AQMD): 129816

3. Owner's Business Name (only if different from Business Name of Operator): N/A

Section B: Equipment Location

4. Equipment Location Address:
For equipment operated at various locations in AQMD's jurisdiction, provide address of initial site

26226 Antelope Road
Street Address

Romoland, CA, 92585
City State Zip Code

County: ○ Los Angeles ○ Orange ○ San Bernardino ◉ Riverside

Contact Name: John Gates

Contact Title: H Systems Asset Management Phone: (951) 928-6905

Fax: (866) 210-6953 E-Mail: John.Gates@ge.com

Section C: Permit Mailing Address

5. Permit and Correspondence Information:
☐ Check here if same as equipment location address

PO Box 1240, 26226 Antelope Road
Street Address

Romoland, CA, 92585
City State Zip Code

Contact Name: John Gates

Contact Title: H Systems Asset Management Phone: (951) 928-6905

Fax: (866) 210-6953 E-Mail: John.Gates@ge.com

Section D: Application Type

The facility is in ○ RECLAIM ○ Title V ◉ RECLAIM & Title V Program (please check if applicable)

6. Reason for Submitting Application (Select only ONE):

- ○ New Construction (Permit to Construct)
- ○ Equipment Operating Without A Permit or Expired Permit*
- ◉ Administrative Change
- ○ Equipment On-Site But Not Constructed or Operational
- ○ Title V Application (Initial, Revisions, etc.)
- ○ Compliance Plan
- ○ Facility Permit Amendment
- ○ Registration/Certification
- ○ Streamlined Standard Permit
- ○ Permitted Equipment Altered/ Modified Without Permit Approval*
- ○ Proposed Alteration/Modification to Permitted Equipment
- ○ Change of Condition For Permit To Operate
- ○ Change of Condition For Permit To Construct
- ○ Change of Location—Moving to New Site

Existing Or Previous Permit/Application Number:
(If you checked any of the items in this column, you MUST provide a existing Permit/ Application Number)

* A Higher Permit Processing Fee applies to those items with an asterisk (Rule 301 (c) (1) (D)

7. Estimated Start Date of Operation/Construction (MM/DD/YYYY):

8. Description of Equipment:
Administrative change to Title V permit.

9. Is this equipment portable AND will it be operated at different locations within AQMD's jurisdiction? ◉ No ○ Yes

10. For Identical equipment, how many additional applications are being submitted with this application? (Form 400-A required for each)

11. Are you a Small Business as per AQMD's Rule 102 definition?
(10 employees or less and total gross receipts are $500,000 or less, or a not-for-profit training center?) ◉ No ○ Yes

12. Has a Notice of Violation (NOV) or a Notice To Comply (NC) been issued for this equipment?
◉ No ○ Yes If yes, provide NOV/NC #:

Section E: Facility Business Information

13. What type of business is being conducted at this equipment location? Power Plant

14. What is your businesses primary NAICS Code (North American Industrial Classification System)? 4911

15. Are there other facilities in the SCAQMD jurisdiction operated by the same operator? ◉ No ○ Yes

16. Are there any schools (K-12) within a 1000-ft. radius of the equipment physical location? ◉ No ○ Yes

Section F: Authorization/Signature

I hereby certify that all information contained herein and information submitted with this application is true and correct.

17. Signature of Responsible Official: John Gates

18. Title: H Systems Asset Mang.

19. Print Name: John Gates

20. Date: 4th May 07

Check List
- ☒ Form(s) signed and dated by authorized official
- ☐ Supplemental Equipment Form (400-E-XX or 400-E-GEN)
- ☒ CEQA Form (400-CEQA) attached
- ☒ Payment for permit processing fee attached

Your application will be rejected if any of the above items are missing.

AQMD USE ONLY	APPLICATION/TRACKING #	TYPE B C D	EQUIPMENT CATEGORY CODE:	FEE SCHEDULE: $	VALIDATION
ENG. A R DATE	ENG. A R DATE	CLASS I III IV	ASSIGNMENT Unit Engineer	CHECK/MONEY ORDER #	AMOUNT $ / Tracking #

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South Coast Air Quality Management District

Form 400–CEQA

California Environmental Quality Act (CEQA) Applicability

Mail Application To:
P.O. Box 4944
Diamond Bar, CA 91765

Tel: (909) 396-3385

www.aqmd.gov

The SCAQMD is required by state law, the California Environmental Quality Act (CEQA), to review discretionary permit project applications for potential air quality and other environmental impacts. This form is a screening tool to assist the SCAQMD in clarifying whether or not the project[1] has the potential to generate significant adverse environmental impacts that might require preparation of a CEQA document [CEQA Guidelines §15060(a)].[2] Refer to the attached instructions for guidance in completing this form.[3] For each Form 400-A application, also complete and submit one Form 400-CEQA. If submitting multiple Form 400-A applications for the same project at the same time, only one 400-CEQA form is necessary for the entire project. If you need assistance completing this form, contact Lori Inga at (909) 396-3109.

FACILITY INFORMATION

Business Name of Operator to Appear on the Permit:	Facility ID (6-Digit):
Inland Empire Energy Center, LLC	129816

Project Description:

Power Plant - administrative change to auxiliary boiler description in SCAQMD facility/Title V permit.

REVIEW FOR EXEMPTION FROM FURTHER CEQA ACTION

Check "Yes" or "No" as applicable

	Yes	No	Is this application for:
A.	○	○	**A CEQA and/or NEPA document previously or currently prepared that specifically evaluates this project?** If yes, a permit cannot be issued until a Final CEQA document and Notice of Determination is submitted.
B.	○	○	**A request for a change of permittee only (without equipment modifications)?**
C.	○	○	**Equipment certification or equipment registration** (qualifies for Rule 222)**?**
D.	○	○	**A functionally identical permit unit replacement with no increase in rating or emissions?**
E.	○	○	**A change of daily VOC permit limit to a monthly VOC permit limit?**
F.	○	○	**Equipment damaged as a result of a disaster during state of emergency?**
G.	○	○	**A Title V** (i.e., Regulation XXX) **permit renewal (without equipment modifications)?**
H.	◉	○	**A Title V administrative permit revision?**
I.	○	○	**The conversion of an existing permit into an initial Title V permit?**

If **"Yes"** is checked for any question above, your application does not require additional evaluation for CEQA applicability. Skip to page 2, "SIGNATURES" and sign and date this form.

REVIEW OF IMPACTS WHICH MAY TRIGGER CEQA

Complete Sections I-VI by checking "Yes" or "No" as applicable. To avoid delays in processing your application(s), explain all "Yes" responses on a separate sheet and attach it to this form.

	Yes	No	Section I – General
1.	○	○	**Has this project generated any known public controversy regarding potential adverse impacts that may be generated by the project?** Controversy may be construed as concerns raised by local groups at public meetings; adverse media attention such as negative articles in newspapers or other periodical publications, local news programs, environmental justice issues, etc.
2.	○	○	**Is this project part of a larger project?**
			Section II – Air Quality
3.	○	○	**Will there be any demolition, excavating, and/or grading construction activities that encompass an area exceeding 20,000 square feet?**
4.	○	○	**Does this project include the open outdoor storage of dry bulk solid materials that could generate dust?** If Yes, include a plot plan with the application package.

[1] A "project" means the whole of an action which has a potential for resulting in physical change to the environment, including construction activities, clearing or grading of land, improvements to existing structures, and activities or equipment involving the issuance of a permit. For example, a project might include installation of a new, or modification of an existing internal combustion engine, dry-cleaning facility, boiler, gas turbine, spray coating booth, solvent cleaning tank, etc.

[2] To download the CEQA guidelines, visit http://ceres.ca.gov/env_law/state.html.

[3] To download this form and the instructions, visit http://www.aqmd.gov/ceqa or http://www.aqmd.gov/permit

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	Yes	No	
5.	○	○	**Would this project result in noticeable off-site odors from activities that may not be subject to SCAQMD permit requirements?** For example, compost materials or other types of greenwaste (i.e., lawn clippings, tree trimmings, etc.) have the potential to generate odor complaints subject to Rule 402 – Nuisance.
6.	○	○	**Does this project cause an increase of emissions from marine vessels, trains and/or airplanes?**
7.	○	○	**Will the proposed project increase the QUANTITY of hazardous materials stored aboveground onsite or transported by mobile vehicle to or from the site by greater than or equal to the amounts associated with each compound on the attached Table 1?**[4]
			Section III – Water Resources
8.	○	○	**Will the project increase demand for water at the facility by more than 5,000,000 gallons per day?** The following examples identify some, but not all, types of projects that may result in a "yes" answer to this question: 1) projects that generate steam; 2) projects that use water as part of the air pollution control equipment; 3) projects that require water as part of the production process; 4) projects that require new or expansion of existing sewage treatment facilities; 5) projects where water demand exceeds the capacity of the local water purveyor to supply sufficient water for the project; and 6) projects that require new or expansion of existing water supply facilities.
9.	○	○	**Will the project require construction of new water conveyance infrastructure?** Examples of such projects are when water demands exceed the capacity of the local water purveyor to supply sufficient water for the project, or require new or modified sewage treatment facilities such that the project requires new water lines, sewage lines, sewage hook-ups, etc.
			Section IV – Transportation/Circulation
10.			**Will the project result in** (Check all that apply):
	○	○	**a. the need for more than 350 new employees?**
	○	○	**b. an increase in heavy-duty transport truck traffic to and/or from the facility by more than 350 truck round-trips per day?**
	○	○	**c. increase customer traffic by more than 700 visits per day?**
			Section V – Noise
11.	○	○	**Will the project include equipment that will generate noise GREATER THAN 90 decibels (dB) at the property line?**
			Section VI – Public Services
12.			**Will the project create a permanent need for new or additional public services in any of the following areas** (Check all that apply):
	○	○	**a. Solid waste disposal?** Check "No" if the projected potential amount of wastes generated by the project is less than five tons per day.
	○	○	**b. Hazardous waste disposal?** Check "No" if the projected potential amount of hazardous wastes generated by the project is less than 42 cubic yards per day (or equivalent in pounds).

REMINDER: For each "Yes" checked in the sections above, attach all pertinent information including but not limited to estimated quantities, volumes, weights, etc.

SIGNATURES

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THIS FORM IS A SCREENING TOOL AND THAT THE SCAQMD RESERVES THE RIGHT TO CONSIDER OTHER PERTINENT INFORMATION IN DETERMINING CEQA APPLICABILITY.

SIGNATURE OF RESPONSIBLE OFFICIAL OF FIRM:	TITLE OF RESPONSIBLE OFFICIAL OF FIRM: H Systems Asset Management and Comm	
TYPE OR PRINT NAME OF RESPONSIBLE OFFICIAL OF FIRM: John Gates	RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER: (951) 9286-905	DATE Signed: 5 May 07
SIGNATURE OF PREPARER, IF PREPARED BY PERSON OTHER THAN RESPONSIBLE OFFICIAL OF FIRM:	TITLE OF PREPARER: Senior Engineer	
TYPE OR PRINT NAME OF PREPARER: Tom Andrews	PREPARER'S TELEPHONE NUMBER: (916) 4446-666	DATE Signed: 5/7/07

THIS CONCLUDES FORM 400-CEQA. INCLUDE THIS FORM AND THE ATTACHMENTS WITH FORM 400-A.

[4] Table 1 – Regulated Substances List and Threshold Quantities for Accidental Release Prevention can be found in the Instructions for Form 400-CEQA.

South Coast Air Quality Management District
P. O. Box 4944 Diamond Bar, CA 91765
(909) 396-2000

EXPRESS PERMIT PROCESSING REQUEST FORM
FORM 400 - XPP

Form 400-A, Form 400-CEQA and one or more 400-E-xx form(s) must accompany all submittals.

Print Form

Section I - Facility/Application Information

1. Business Name: Inland Empire Energy Center, LLC Facility ID: 129,816
2. The requested application is for a(n): Date of Occurrence: Apr 23, 2007
   a. ☐ New Construction b. ☐ Change of Location
   c. ☐ Modification of Equipment/Process d. ☐ Existing Equipment with Expired Permit
   e. ☐ Existing Equipment Operating without a Permit; Initial Operation Date:
   f. ☒ Change of Condition(s); specify the change of condition(s) requested:
   g. ☐ Change of Operator; List previous name of operator and Facility ID #:
3. I hereby request Express Permit Processing for this application.
4. I understand that this request will incur additional fees.
5. This request is not cancelable once engineering review has been initiated.
6. Express Permit Processing neither guarantees action by any specific date nor does I guarantee permit approval.

Section II - Equipment Information

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.

SIGNATURE OF RESPONSIBLE OFFICIAL OF FIRM:	TITLE OF RESPONSIBLE OFFICIAL OF FIRM:	
	H Systems Asset Management and Commercial	
TYPE OR PRINT NAME OF RESPONSIBLE OFFICIAL OF FIRM:	RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER	DATE SIGNED:
John Gates	(951) 928-6905	4th May 07

I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND INFORMATION SUBMITTED WITH THIS APPLICATION IS TRUE AND CORRECT.

SIGNATURE OF PREPARER:	TITLE OF PREPARER:	
	Engineer	
TYPE OR PRINT NAME OF PREPARER:	PREPARER'S TELEPHONE NUMBER	DATE SIGNED:
Tom Andrews	916-444-6666	5/2/07

AQMD USE ONLY	APPLICATION/TRACKING #	PROJECT #	TYPE B C D	EQUIPMENT CATEGORY CODE: /	FEE SCHEDULE: $	VALIDATION
ENG. A R DATE	ENG. A R DATE	CLASS I III IV	ASSIGNMENT UNIT ENGINEER	ENF. SECT.	CHECK/MONEY ORDER #	AMOUNT $

South Coast Air Quality Management District

Form 500–A2
TITLE V Application Certification

Mail Application To:
P.O. Box 4944
Diamond Bar, CA 91765
Tel: (909) 396-3385
www.aqmd.gov

Section I - Facility Information

1. **Permit to be issued to (Business name of operator to appear on permit):** Inland Empire Energy Center, LLC
2. **Valid AQMD Facility ID (Available on Permit or Invoice Issued by AQMD):** 129816
3. **This Certification is submitted with a (Check one):**
   - a. ○ Title V Application (Initial, Revision or Renewal)
   - b. ◉ Supplement/Correction to a Title V Application
   - c. ○ MACT Part 2
4. **Is Form 500-C2 included with this Certification?** ○ Yes ◉ No

Section II - Responsible Official Certification Statement

I certify under penalty of law that I am the responsible official for this facility as defined in AQMD Regulation XXX and that based on information and belief formed after reasonable inquiry, the statements and information in this document and in all attached application forms and other materials are true, accurate, and complete.

Read each statement carefully and check each that applies – ***You must check 3a or 3b.***

1. For Initial, Permit Renewal, and Administrative Application Certifications:

a. ○ The facility, including equipment that are exempt from written permit per Rule 219, is currently operating and will continue to operate in compliance with all applicable requirement(s) identified in Section II and Section III of Form 500-C1,

i. ○ except for those requirements that do not specifically pertain to such devices or equipment and that have been identified as "Remove" on Section III of Form 500-C1.

ii. ○ except for those devices or equipment that have been identified on the completed and attached Form 500-C2 that will not be operating in compliance with the specified applicable requirement(s).

b. ◉ The facility, including equipment that are exempt from written permit per Rule 219, will meet in a timely manner, all applicable requirements with future effective dates.

2. For Permit Revision Application Certifications:

a. ○ The equipment or devices to which this permit revision applies, will in a timely manner comply with all applicable requirements identified in Section II and Section III of Form 500-C1.

3. For MACT Hammer Certifications:

a. ○ The facility is subject to Section 112(j) of the Clean Air Act (Subpart B of 40 CFR part 63), also known as the MACT "hammer." The following information is submitted with a Title V application to comply with the Part 1 requirements of Section 112(j). (If Part 2 has not been submitted, you must submit 500-MACT Part 2 with this form.)

b. ○ The facility is not subject to Section 112(j) of the Clean Air Act (Subpart B of 40 CFR part 63).

Signature of Responsible Official	4th May 07 Date
John Gates Type or Print Name of Responsible Official	(951) 928-6905 Phone
H Systems Asset Management and Commerical Manager Title of Responsible Official	(866) 210-6953 Fax

Address of Responsible Official	City	State	Zip Code
26226 Antelope Road	Romoland	CA	92585

Acid Rain Facilities Only: Turn page over & complete Section III

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Acid Rain facilities must certify their compliance status of the devices subject to applicable requirements under Title IV by an individual who meets the definition of Designated (or Alternate) Representative in 40 CFR Part 72.

Section III - Designated Representative Certification Statement			
1. *For Acid Rain Facilities Only*: I am authorized to make this submission on behalf of the owners and operators of the affected source or affected 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.			
		4th May 07	
Signature of Designated Representative or Alternate		Date	
John Gates		(951) 928-6905	
Type or Print Name of Designated Representative or Alternate		Phone	
H Systems Asset Management and Commerical Manager		(866) 210-6953	
Title of Designated Representative or Alternate		Fax	
PO Box 1240, 26226 Antelope Road	Romoland	CA	92585
Address of Designated Representative or Alternate	City	State	Zip Code