



**FLORIDA DEPARTMENT OF
ENVIRONMENTAL PROTECTION**

BOB MARTINEZ CENTER
2600 BLAIRSTONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

RICK SCOTT
GOVERNOR

HERSCHEL T. VINYARD JR.
SECRETARY

October 4, 2013

Leonard Fagan
Gainesville Renewable Energy Center, LLC
11201 NW 13th St
Gainesville, FL 32653

RE: **Facility ID: FLR05H580**
Gainesville Renewable Energy Center
County: Alachua

Dear Permittee:

The Florida Department of Environmental Protection has received and processed your *Notice of Intent to Use Multi-Sector Generic Permit for Stormwater Discharge Associated with Industrial Activity* (NOI) and the accompanying processing fee. This letter acknowledges that:

- your NOI is complete;
- your processing fee is paid-in-full; and
- you are covered under the *Multi-Sector Generic Permit for Stormwater Discharge Associated with Industrial Activity* (MSGP).

Your facility identification number is **FLR05H580**. Please include this number on all future correspondence regarding this permit.

This letter is **not** your permit; however, it does serve as **verification of permit coverage**. A copy the sector-specific permit language is available online at www.dep.state.fl.us/water/stormwater/npdes/industrial5.htm or by contacting the NPDES Stormwater Notices Center. Your facility falls under **Sector O** of the MSGP.

Your coverage under the MSGP became effective **10/3/2013** and will expire **10/2/2018**. To terminate your coverage prior to this expiration date, you must file a *National*

www.dep.state.fl.us

Pollutant Discharge Elimination System (NPDES) Stormwater Notice of Termination, DEP Form 62-621.300(6). To renew your coverage beyond the expiration date, you must submit a new NOI and processing fee to the Department no later than two days before your coverage expires.

Until your permit coverage is terminated, modified, or revoked, you are authorized to discharge stormwater from your facility to surface waters in accordance with the terms and conditions of the MSGP. Key conditions of the MSGP are:

- implementing your stormwater pollution prevention plan (SWPPP);
- retaining the records required by the permit (including your SWPPP) at your facility; and
- conducting your required monitoring.

Required Monitoring:

Analytical Monitoring

Analytical samples of your stormwater discharge(s) must be collected and analyzed at least once each calendar quarter after a qualifying rain event during the periods of January through March, April through June, July through September, and October through December during years two and four of your permit cycle for the parameters specified in your Sector(s).

Analytical monitoring must be conducted in accordance with the following schedule:

- Year two monitoring period begins January 1, 2014 and ends December 31, 2014
- Year four monitoring period begins January 1, 2016 and ends December 31, 2016

The samples must be analyzed by a laboratory that has been certified by the Department of Health Environmental Laboratory Certification Program (DOH ELCP). At the end of the monitoring year, you must average your quarterly Discharge Monitoring Report (DMR) results and record the quarterly average on an annual DMR form. If there is no stormwater discharged from your facility after a qualifying rain event during a calendar quarter, you must still complete and sign a DMR form for that quarter indicating "No Discharge" by checking the box at the top of the form.

Compliance Monitoring

Your facility may also be subject to numerical effluent limitations and **annual compliance monitoring** requirements. Please review your permit closely to determine

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if the activities conducted at your facility require compliance monitoring/reporting. If applicable, a compliance monitoring DMR must be completed and submitted for monitoring results obtained in each calendar year required by your MSGP permit.

DMR Forms

Quarterly, Annual and Compliance Monitoring DMR forms are attached to this acknowledgement letter. These forms are also available online at: www.dep.state.fl.us/water/stormwater/npdes/industrial6.htm. You must complete the applicable forms and send them to the following address by March 31st of the year following your monitoring period or year. For example, analytical monitoring results for 2013 would be due no later than March 31, 2014.

NPDES Stormwater MSGP DMR, MS #2511
Florida Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

If you have any questions concerning this acknowledgment letter, please contact the NPDES Stormwater Notices Center at (866) 336-6312.

Sincerely,



Cierra Robinson
Data Entry Operator
NPDES Stormwater Program



NOTICE OF INTENT TO USE MULTI-SECTOR GENERIC PERMIT FOR STORMWATER DISCHARGE ASSOCIATED WITH INDUSTRIAL ACTIVITY (RULE 62-621.300(5), F.A.C.)

This form is to be completed and submitted to the Department before use of the Multi-Sector Generic Permit for Stormwater Discharge Associated with Industrial Activity (MSGP) provided in subsection 62-621.300(5), F.A.C. The type of facility or activity that qualifies for use of this generic permit, the conditions of the permit and additional requirements to request coverage are specified in paragraph 62-621.300(5)(a), F.A.C. Note that additional requirements for requesting coverage include submittal of the applicable generic permit fee pursuant to Rule 62-4.050, F.A.C. Familiarize yourself with the generic permit and the attached instructions before completing this form. **Please print or type information in the appropriate areas below.**

I. IDENTIFICATION NUMBER: Facility ID _____

II. APPLICANT INFORMATION:

A. Operator Name: Gainesville Renewable Energy Center, LLC		B. Operator Status: P	
C. Address: 11201 NW 13 th Street			
D. City: Gainesville		E. State: FL	F. Zip Code: 32653
G. Responsible Authority: Leonard J. Fagan			
H. Responsible Authority's Phone No.: 774-644-2240			
I. Responsible Authority's Fax No.: 386-462-1565			
J. Responsible Authority's E-mail Address: lenfagan@amrenewables.com			

III. FACILITY LOCATION INFORMATION:

A. Facility Name: Gainesville Renewable Energy Center			
B. Street Address: 11201 NW 13 th Street			
C. City: Gainesville		D. State: FL	E. Zip Code: 32653
F. County: Alachua	G. Latitude: 29° 46' 5"	Longitude: 82° 23' 52"	
H. Is the facility located on Indian Country Lands? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		I. Water Management District: Suwannee	
J. Facility Contact: Russell Abel, Plant Manager		K. Phone No.: 386-315-8014	
L. Fax No.: 386-462-1565		M. E-mail Address: Russell.abel@grecbiomass.com	

RECEIVED

SEP 30 2013

IV. FACILITY ACTIVITY INFORMATION:

A. SIC or Designated Activity Code(s)	Primary: SE	Secondary:	
B. Monitoring code (1, 2, 3, or 4): 2	C. Will construction be conducted for stormwater controls? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
D. Other Existing Permits	ERP No.:	Wastewater Permit No.:	Other (specify): Siting Case # 09-55

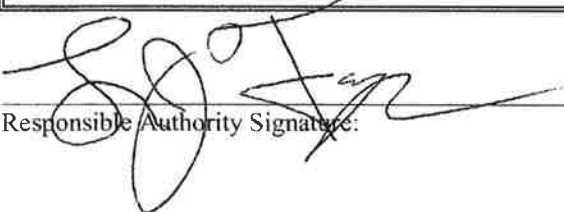
V. DISCHARGE INFORMATION

A. MS4 Operator Name: N/A							
B. Discharge Location(s)							
Outfall No.	Latitude			Longitude			Receiving Water Name
	Deg.	Min.	Sec.	Deg.	Min.	Sec.	
001	29	46	12	82	24	00	Turkey Creek
002	29	45	57	82	24	08	Turkey Creek

VI. CERTIFICATION¹:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Responsible Authority Name and Official Title (Type or Print): Leonard J. Fagan, Vice President, Engineering
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Responsible Authority Signature: 

Date Signed: 9/26/2013

¹ Signatory requirements are contained in Rule 62-620.305, F.A.C.

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SEP 30 2013
FL Department of
Environmental Protection
NPDES Stormwater Notices Center

FLR05H580

Gainesville Renewable Energy Center, LLC

20 Park Plaza, Suite 320
Boston, MA 02116

BANK OF AMERICA, NA
05-013/110

1315

9/26/2013

PAY TO THE ORDER OF Florida Dept of Environmental Protection

\$ **500.00

Five Hundred and 00/100***** DOLLARS

Florida Dept of Environmental Protection
3900 Commonwealth Boulevard M.S. 49
Tallahassee, FL 32399

Checks Exceeding \$5,000 Require Two Signatures

[Signature]
Authorized Signature

MEMO

generic permit and the attached instructions before completing and return to the appropriate areas below.

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L. Fax No.: 386-462-1565		M. E-mail Address: Russell.abel@grecbiomass.com	

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SEP 30 2013

MSGP NOI Checklist

Facility ID FLR05H 580 Issue Date 10/1/13

Date Received 9/30/13

SIC Code: Primary 4911 Sector SE^(C) O Letter AM

Secondary _____ Sector _____ Letter _____

Check Copied

Check Entered in CRA

Check # 1315 / _____

CRA Payment # 1246325 / _____ Refund \$ _____

Missing Fee _____

Date/Initial _____

RAI _____

Processing Completed (Date/Initial): 10/2/13 (CL)

Comments: _____

**NPDES Stormwater Notices Center
Industrial Permit Completeness Review**

For use with MSGP and NEX permit types

Facility ID: FLR0517580

Date of Initial Review: 10/4/13

Is the NOI accurate and complete? N (circle one)

If no, has all missing/incorrect information been identified on the RAI? Y N N/A (circle one)

Is the SIC code identified on the NOI regulated? N (circle one)

Have all SIC codes identified on the NOI been entered into FIESTA? N (circle one)

Is the "Prim" box checked next to the primary SIC code? N (circle one)

Do all codes have the "Pub" box checked? N (circle one)

Have all data fields in FIESTA been completed? N (circle one)

Are the permit issue/expiration dates correct in FIESTA and on the letter? N (circle one)

The following section applies to MSGP permit types only.

Does the code(s) on the NOI correspond to the Sector(s) identified in the acknowledgement letter? N (circle one)

If more than one regulated SIC code is identified, are all Sectors listed on the acknowledgement letter? Y N N/A (circle one)

Does this SIC code(s) require analytical or compliance monitoring? N (circle one)

If yes to the above, does the letter include the DMR Instructions as well as the correct annual, quarterly and compliance monitoring (if applicable) DMRs? N N/A (circle one)

If monitoring is required, have Years 2 and 4 been correctly identified? N N/A (circle one)

Reviewed by: CR Review date: 10/4/13

