| STANDAL MOTECTION |  |
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| San Harry         |  |
| 🕈 FLORIDA 🔟       |  |
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PERCHLOROETHYLENE DRY CLEANERS



## **COMPLIANCE INSPECTION CHECKLIST**

| INSPECTION TYPE: ANNUAL (INS1, INS2)<br>RE-INSPECTION (FUI)                                                                                                                                               | COMPLAINT/DISCOVERY (CI)  ARMS COMPLAINT NO:                                                                                                                                                              |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|
| AIRS ID#: 1170069 DATE: <u>04/03/07</u>                                                                                                                                                                   | ARRIVE: <u>11:14am</u> DEPART: <u>11:35am</u>                                                                                                                                                             |  |  |  |  |  |  |
| FACILITY NAME: CASSELTON CLEANERS                                                                                                                                                                         |                                                                                                                                                                                                           |  |  |  |  |  |  |
| FACILITY LOCATION: 2054 Semoran Blvd #13                                                                                                                                                                  | 2                                                                                                                                                                                                         |  |  |  |  |  |  |
| WINTER PARK 32792                                                                                                                                                                                         | 2                                                                                                                                                                                                         |  |  |  |  |  |  |
| <b>RESPONSIBLE OFFICIAL:</b> ANIL RATHOD                                                                                                                                                                  | <b>PHONE:</b> (407)678-9356                                                                                                                                                                               |  |  |  |  |  |  |
| CONTACT NAME:                                                                                                                                                                                             | PHONE:                                                                                                                                                                                                    |  |  |  |  |  |  |
| <b>REMITTANCE YEAR: 2006</b> ENTITL                                                                                                                                                                       | EMENT PERIOD: 7/27/2006 / 7/27/2011<br>(effective date) (end date)                                                                                                                                        |  |  |  |  |  |  |
| IN COMPLIANCE IMINOR Non-COMP                                                                                                                                                                             | PLIANCE SIGNIFICANT Non-COMPLIANCE                                                                                                                                                                        |  |  |  |  |  |  |
| PART II:       FACILITY       CLASSIFICATION       - Rule 62-2         (check I only one box in A)                                                                                                        | 13.300 FAC                                                                                                                                                                                                |  |  |  |  |  |  |
| A. 1. Existing small area source<br>dry-to-dry only, x < 140 gal/yr<br>transfer only, x < 200 gal/yr<br>both types, x < 140 gal/yr<br>(constructed before 12/9/91)                                        | 2. <u>New small area source</u><br>dry-to-dry only, $x < 140$ gal/yr<br>transfer only, $x < 200$ gal/yr<br>both types, $x < 140$ gal/yr<br>(constructed on or after 12/9/91)                              |  |  |  |  |  |  |
| 3. Existing large area source<br>dry-to-dry only, $140 \le x \le 2,100$ gal/yr<br>transfer only, $200 \le x \le 1,800$ gal/yr<br>both types, $140 \le x \le 1,800$ gal/yr<br>(constructed before 12/9/91) | 4. New large area source<br>dry-to-dry only, $140 \le x \le 2,100$ gal/yr<br>transfer only, $200 \le x \le 1,800$ gal/yr<br>both types, $140 \le x \le 1,800$ gal/yr<br>(constructed on or after 12/9/91) |  |  |  |  |  |  |
| 5. Ineligible for General Permit drop store/out of business/petroleum facility exceeds above limits                                                                                                       |                                                                                                                                                                                                           |  |  |  |  |  |  |
| B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 110 gallons.                                                                 |                                                                                                                                                                                                           |  |  |  |  |  |  |

| PART III: <u>GENERAL</u> <u>CONTROL</u> <u>REQUIREMENTS</u> – Rule 62-213.300 FAC                                                | (check $\blacksquare$ only one box |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--|--|--|
| Does the responsible official of the dry cleaning facility:                                                                      | for each question)                 |  |  |  |
| 1. Store perc, and wastes containing perc, in tightly sealed & impervious containers?                                            | ⊠Yes □No □N/A                      |  |  |  |
| 2. Examine the containers for leakage?                                                                                           | Yes No N/A                         |  |  |  |
| 3. Close and secure machine doors except during loading/unloading?                                                               | 🛛 Yes 🗌 No                         |  |  |  |
| 4. Drain cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?                     | □Yes □ No □ N/A                    |  |  |  |
| 5. Maintain solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? | □Yes □ No □ N/A                    |  |  |  |

| PART IV:         PROCESS         VENT         CONTROLS         – Rule 62-213.300 FAC           (Refer to Part II-A.14. Classification: page 1 of 4, this form) |                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|
|                                                                                                                                                                | 1. If the facility classification is a Existing small area source, no controls are required. Proceed to Part V.                                                                                                                                                                               |  |  |  |  |  |  |
|                                                                                                                                                                | 2. If the facility classification is a <u>New small area source</u> , the machine should be equipped with a refrigerated condenser. Complete section A. below.                                                                                                                                |  |  |  |  |  |  |
|                                                                                                                                                                | 3. If the facility classification is a <b>Existing large area source</b> , the machine should be equipped with either a refrigerated condenser or a carbon adsorber. <b>Complete both sections A and B below.</b> <i>Carbon adsorber must have been installed prior to September 22, 1993</i> |  |  |  |  |  |  |
|                                                                                                                                                                | 4. If the facility classification is a <u>New large area source</u> , the machine should be equipped with a refrigerated condenser. Complete both sections A and B below.                                                                                                                     |  |  |  |  |  |  |
| А.                                                                                                                                                             | Has the responsible official of all existing large area & new sources: (check only one box for each question)                                                                                                                                                                                 |  |  |  |  |  |  |
| 1.                                                                                                                                                             | Equipped all machines with the appropriate vent controls? XYes No                                                                                                                                                                                                                             |  |  |  |  |  |  |
| 2.                                                                                                                                                             | Equipped dry-to-dry machines with a closed-loop vapor venting system? XYes No                                                                                                                                                                                                                 |  |  |  |  |  |  |
| 3.                                                                                                                                                             | Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?                                                                                                                                                                       |  |  |  |  |  |  |
| 4.                                                                                                                                                             | Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?                                                                                                                                                                             |  |  |  |  |  |  |
| 5.                                                                                                                                                             | Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? XYes No N/A                                                                                                                                                                    |  |  |  |  |  |  |
| 6.                                                                                                                                                             | Conducted all temperature monitoring after an appropriate cool-down period and after verifying that the coolant had been completely charged? XYes No                                                                                                                                          |  |  |  |  |  |  |

| PART IV: PROCESS VENT CONTROLS - Rule 62-213.300 FAC (continued)                                     |                                                                                                                                                                                                                                                                                                    |                                             |                         |       |  |  |
|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-------------------------|-------|--|--|
| B.                                                                                                   | Does the responsible official of an existing large or new large area source also:                                                                                                                                                                                                                  | (check ☑ o<br>each                          | only one t<br>question) |       |  |  |
| 1.                                                                                                   | Measure and record the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?                                                                                                                                             | Yes                                         | □No                     |       |  |  |
| 2.                                                                                                   | Measure and record the washer exhaust temperature at the condenser inlet and outlet weekly?                                                                                                                                                                                                        | 🗌 Yes                                       | 🗌 No                    | □N/A  |  |  |
|                                                                                                      | a) Is the temperature differential equal to, or greater than 20° F?                                                                                                                                                                                                                                | Yes                                         | 🗌 No                    | □ N/A |  |  |
| 3.                                                                                                   | Measure and record the perc concentration in the exhaust stream weekly<br>at the end of the final drying cycle while the machine is venting to the<br>adsorber, if machines are equipped exclusively with a carbon adsorber?                                                                       | □Yes                                        | 🗌 No                    | □ N/A |  |  |
|                                                                                                      | a) Is the perc concentration equal to, or less than 100 ppm?                                                                                                                                                                                                                                       | Yes                                         | 🗌 No                    | □ N/A |  |  |
| 4.                                                                                                   | Assure that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? | - Tyes                                      | 🗌 No                    | □ N/A |  |  |
| 5.                                                                                                   | Equip transfer machines (dryers, reclaimers, and washers) with individual condenser coils?                                                                                                                                                                                                         | Yes                                         | 🗌 No                    | □ N/A |  |  |
| 6.                                                                                                   | Route airflow to the carbon adsorber (if used) at all times?                                                                                                                                                                                                                                       | Yes                                         | 🗌 No                    | N/A   |  |  |
|                                                                                                      |                                                                                                                                                                                                                                                                                                    |                                             |                         |       |  |  |
| P/                                                                                                   | ART V: <u>RECORDKEEPING REQUIREMENTS</u> – Rule 62-213.300(3) FAC                                                                                                                                                                                                                                  |                                             |                         |       |  |  |
| PART V: <u>RECORDREEPING REQUIREMENTS</u> – Rule 62-213.300(3) FAC<br>Does the responsible official: |                                                                                                                                                                                                                                                                                                    | (check ☑ only one box for<br>each question) |                         |       |  |  |
| 1.                                                                                                   | Maintain receipts for perc purchased?                                                                                                                                                                                                                                                              | - Xes                                       | 🗌 No                    |       |  |  |
| 2.                                                                                                   | Maintain rolling monthly total of yearly perc consumption?                                                                                                                                                                                                                                         | Yes                                         | 🗌 No                    |       |  |  |
| 3.                                                                                                   | Maintain leak detection inspection and repair reports for the following:                                                                                                                                                                                                                           |                                             |                         |       |  |  |
|                                                                                                      | a) documentation of leaks repaired w/in 24 hrs? or;                                                                                                                                                                                                                                                | - Yes                                       | 🗌 No                    | X/A   |  |  |
|                                                                                                      | b) documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?                                                                                                                                                                         | Yes                                         | 🗌 No                    | 🖂 N/A |  |  |

4. Maintain calibration data? (for applicable direct reading instruments) ------

5. Maintain exhaust duct monitoring data on perc concentrations? -----

6. Maintain a startup/shutdown/malfunction plan? ------

7. Maintain deviation reports? -----

8. Maintain a compliance plan, if applicable? -----

a) Problem corrected? ------

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak

(check ☑ only one box for each question)

 $\Box$  Yes  $\Box$  No  $\boxtimes$  N/A

 $\Box$  Yes  $\Box$  No  $\boxtimes$  N/A

Yes No

| detection and repair inspection?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Xes No                                                                     |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--|--|--|--|
| 2. Does the facility maintain a leak log?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Xes No                                                                     |  |  |  |  |
| <ul> <li>3. Does the responsible official check the following areas for leaks?</li> <li>a) Hose connections, fittings, couplings, and valves</li> <li>b) Door gaskets and seating</li> <li>c) Filter gaskets and seating</li> <li>d) Pumps</li> <li>e) Solvent tanks and containers</li> <li>f) Water separators</li> <li>Yes No N/A</li> </ul> | ills XYes No N/A<br>haust dampers XYes No N/A<br>verter valves XYes No N/A |  |  |  |  |
| 4. Which method(s) of detection (is/are) used by the responsible official?                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                            |  |  |  |  |
| a) Visual examination (condensed solvent on exterior surfaces)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                            |  |  |  |  |
| Ferman Fletcher                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 04/03/2007                                                                 |  |  |  |  |
| Inspector's Name (Please Print)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Date of Inspection                                                         |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 04/02/2008                                                                 |  |  |  |  |
| Inspector's Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Approximate Date of Next Inspection                                        |  |  |  |  |

**COMMENTS:**