

PERCHLOROETHYLENE DRY CLEANERS



COMPLIANCE INSPECTION CHECKLIST

INSPECTION TYPE: ANNUAL (INS1, INS2)	COMPLAINT/DISCOVERY (CI)
RE-INSPECTION (FUI)	ARMS COMPLAINT NO:
AIRS ID#: 0990570 DATE: <u>10/14/2009</u>	ARRIVE: <u>1:15 PM</u> DEPART: <u>1:40 PM</u>
FACILITY NAME: M&D CLEANERS	
FACILITY LOCATION: 15200 JOG RD	
DELRAY BEACH 33	3446
OWNER/AUTHORIZED REPRESENTATIVE: IGG	OR KLEYMAN PHONE: (561)499-4484
CONTACT NAME: Same	PHONE: Same
ENTITLEMENT PERIOD: / (effective date) (end date)	
(Controlled to the control of the co	
PART I: <u>INSPECTION</u> <u>COMPLIANCE</u> <u>STATUS</u> (c	check 🗹 only one box)
☐ IN COMPLIANCE ☐ MINOR Non-COM	MPLIANCE SIGNIFICANT Non-COMPLIANCE
PART II: FACILITY CLASSIFICATION - Rule 62-2 (check ☑ only one box in A)	213.300 FAC
A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)
3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$)	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)
5. Ineligible for General Permit drop store/out of business/petroleum facility exceeds above limits	

PA	RT III: GENERAL CONTROL REQUIREMENTS – Rule 62-213.300 FAC	(check ☑ 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			
	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 requi	ired. 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 Existing large area source , the machine should be equipped with either a refrigerated condenser or a carbon adsorber. Complete both sections A and B below. Carbon adsorber must have been installed prior to September 22, 1993				
	4. If the facility classification is a <u>New large area source</u> , the machine should be excondenser. Complete both sections A and B below.	quipped with a refrigerated			
A.	Has the responsible official of all <u>existing large</u> <u>area & new sources</u> :	(check ☑ only one box for each question)			
1.	Equipped all machines with the appropriate vent controls?	Yes No			
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	- ⊠Yes □No □N/A			
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	- ⊠Yes □No □N/A			
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	- ⊠Yes □No			
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	- ⊠Yes □No □N/A			
6.	Conducted all temperature monitoring after an appropriate cool-down period and after verifying that the coolant had been completely charged?	⊠Yes □No			

B. Does the responsible official of an existing large or new large area source also:	(check ☑ only one box for each question)	
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	
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 at the end of the final drying cycle while the machine is venting to the 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?	- □Yes □ 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	
or read units was the care on adsorber (in about at an inner.	_	
PART V: RECORDKEEPING REQUIREMENTS – Rule 62-213.300(3) FAC		
	(check ☑ only one box for each question)	
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PART VI: <u>LEAK DETECTION AND REPAIRS</u> – Rule 62-213.300 FAC

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

(check **☑** only one box for each question)

detection and repair inspection?			
2. Does the facility maintain a leak log?	X Yes No		
d) Pumps $\overline{\boxtimes}$ Yes $\overline{\square}$ No $\overline{\square}$ N/A j) Diver			
4. Which method(s) of detection (is/are) used by the responsible official a) Visual examination (condensed solvent on exterior surfaces) b) Physical detection (airflow felt through gaskets) c) Odor (noticeable perc odor) d) Use of direct-reading instrumentation (FID/PID/calorimetric tubes e) Halogen leak detector			
**If using direct-reading instrumentation, is the equipment:			
Jeffrey Dizek	10/14/2009		
Inspector's Name (Please Print)	Date of Inspection		
	10/2010		
Inspector's Signature	Approximate Date of Next Inspection		
COMMENTS:			