



# PERCHLOROETHYLENE DRY CLEANERS



## COMPLIANCE INSPECTION CHECKLIST

**INSPECTION TYPE:** ANNUAL (INS1, INS2) ☒ COMPLAINT/DISCOVERY (CI) ☐  
RE-INSPECTION (FUI) ☐ ARMS COMPLAINT NO: ☐

<b>AIRS ID#:</b> 103 0495	<b>Date: October 20, 2010</b> <b>Time In: 1:45PM</b> <b>Time Out: 2:15PM</b>		
<b>Facility Name:</b> <b>Facility Location:</b>	U-Wash		
	20 West Morgan Street Tarpon Springs, FL, 34689		
<b>Responsible Official:</b>	Georgina Ellerbee	<b>Phone No:</b>	727-934-5978
<b>Emis. Unit Description:</b>	Existing, Small Perchloroethylene Dry Cleaner: One Dry-to-dry machine (1984).		
<b>Permit Number:</b>	1030495-002-AG	<b>Exp. Date:</b>	6/17/2012
<b>Facility Contact:</b>	Georgina Ellerbee	<b>Phone:</b>	727-934-5978
<b>Compliance Status:</b>	<input checked="" type="checkbox"/> IN <input type="checkbox"/> MNC <input type="checkbox"/> SNC		

### PART I: NOTIFICATION (Check appropriate box)

- |  |                                     |
|--|-------------------------------------|
| 1. <b>Existing</b> facility notified DARM by 9/1/96            | <input checked="" type="checkbox"/> |
| 2. <b>New</b> facility notified DARM 30 days prior to startup  | <input type="checkbox"/>            |
| 3. Facility <b>failed to notify</b> DARM to use general permit | <input type="checkbox"/>            |

### PART II: CLASSIFICATION

**Facility indicated on notification form that it is:**

☐ No Notification Form    ☐ Drop-Off Store    ☐ Out of business    ☐ Petroleum Solvent Only

**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**)

☒

3. Existing large area source

Dry-to-dry only,  $140 > x < 2,100$  gal/yr

Transfer only,  $200 > x < 1,800$  gal/yr

Both types,  $140 > x < 1,800$  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**)

☐

4. New large area source

Dry-to-dry only,  $140 > x < 2,100$  gal/yr

Transfer only,  $200 > x < 1,800$  gal/yr

Both types,  $140 > x < 1,800$  gal/yr

(Constructed on or **after 12/9/91**)

☐

**This is a correct facility classification**    ☒ Y    ☐ N    ☐ Can not determine

**If no, please check the appropriate classification:**

☒ Facility qualified for a general permit as number 1 above.

☐ Facility exceeds above limits and is not eligible for a general permit

**B. Highest 12-month consecutive total of perchloroethylene purchased in the preceding 12-month period:** 20 Gallons. Month with highest use was January 2010 . Did facility exceed limits ☐ Y ☒ N

### PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility: (Check appropriate boxes)

- |   |                                       |                            |  |
|---|---------------------------------------|----------------------------|--|
| 1. Storing perchloroethylene in tightly sealed and impervious containers?   | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> NA            |
| 2. Examining the containers for leakage?  | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> NA            |
| 3. Closing and securing machine doors except during loading/unloading?  | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N |  |
| 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?                     | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> NA            |
| 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? | <input type="checkbox"/> Y            | <input type="checkbox"/> N | <input checked="" type="checkbox"/> NA |

### PART IV: PROCESS VENT CONTROLS

#### In Part II-A:

If classification (1) has been checked, no controls are required. **Proceed to Part V.**

If classification (2) has been checked, the machine should be equipped with a refrigerated condenser (complete A below)

If classification (3) has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). A Carbon adsorber must have been installed prior to September 22, 1993.

If classification (4) has been checked, machine should be equipped with a refrigerated condenser (complete A and B below.)

#### A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)

- |  |                            |                            |  |
|--|----------------------------|----------------------------|--|
| 1. Equipped all machines with the appropriate vent controls?   | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> NA |
| 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?   | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> NA |
| 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?                 | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> NA |
| 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?                       | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> NA |
| 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?                          | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> NA |
| 6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged? | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> NA |

#### B. Has the responsible official of an existing large or new large area source also:

- |   |                            |                                       |                             |
|---|----------------------------|---------------------------------------|-----------------------------|
| 1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?  | <input type="checkbox"/> Y | <input checked="" type="checkbox"/> N |                             |
| 2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?   | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input type="checkbox"/> NA |
| Is the temperature differential equal to or greater than 10° F?   | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input type="checkbox"/> NA |
| 3. Measured and recorded the solvent concentration weekly at the end of the final drying cycle while the machine is venting through a carbon adsorber, if machines are equipped with a carbon adsorber? | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input type="checkbox"/> NA |
| Is the peak solvent concentration or less than 100 ppm?   | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input type="checkbox"/> NA |

4. Assured 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?

☐Y ☐N ☐NA

5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?

☐Y ☐N ☐NA

6. Routed airflow to the carbon adsorber (if used) at all times?

☐Y ☐N ☐NA

## PART V: RECORDKEEPING REQUIREMENTS

### Has the responsible official:

(Check appropriate boxes)

1. Maintained receipts for perc purchased?

☒Y ☐N

2. Maintained rolling monthly averages of perc consumption?

☒Y ☐N

3. Maintained leak detection inspection and repair reports for the following:

a. Documentation of leaks repaired w/in 24 hrs? or;

☐Y ☐N ☒NA

b. Documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?

☐Y ☐N ☒NA

4. Maintained calibration data? (*direct reading instruments only*)

☐Y ☐N ☒NA

5. Maintained exhaust duct monitoring data on perc concentrations?

☐Y ☐N ☒NA

6. Maintained startup/shutdown/malfunction plan?

☒Y ☐N

7. Maintained deviation reports?

☐Y ☐N ☒NA

Problem corrected?

☐Y ☐N ☒NA

8. Maintained compliance plan, if applicable?

☐Y ☐N ☒NA

## PART VI: LEAK DETECTION AND REPAIRS

<b>1.</b>	<b>Does the responsible official conduct weekly leak detection and repair inspection?</b>	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
<b>2.</b>	<b>Which method of detection does the responsible official use?</b>	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
	Visual examination (condensed solvent of exterior surfaces)	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
	Physical detection (airflow felt through gaskets)	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
	Odor (noticeable perc odor)	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
	<b>If using direct-reading instrumentation, is the equipment:</b>	<input type="checkbox"/> Y	<input type="checkbox"/> N
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm	<input type="checkbox"/> Y	<input type="checkbox"/> N
	b. Calibrated against a standard gas prior to and after each use (PID/FID only).	<input type="checkbox"/> Y	<input type="checkbox"/> N
	c. Inspected for leaks and obvious signs of wear on a weekly basis?	<input type="checkbox"/> Y	<input type="checkbox"/> N
	d. Kept in a clean and secure area when not in use.	<input type="checkbox"/> Y	<input type="checkbox"/> N
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?	<input type="checkbox"/> Y	<input type="checkbox"/> N
<b>3.</b>	<b>Has the facility maintained a leak log?</b>	<input type="checkbox"/> Y	<input type="checkbox"/> N
<b>4.</b>	<b>The following area should be checked for leaks by the operator:</b>	<input type="checkbox"/> Y	<input type="checkbox"/> N
	Hose connections, fitting couplings, and valves	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
	Door gaskets and seating	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Filter gaskets and seating	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Pumps	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Solvent tanks and containers	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Water separators	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Muck cookers	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
	Stills	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Exhaust dampers	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Diverter valves	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
	Cartridge Filter housing	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Shea Jackson	
Inspector's Name (Please Print)	Date of Inspection
	Within one year of this inspection
Inspector's Signature	Date of Next Inspection

## System Inspection and Leak Detection

Are the following dry cleaning system components inspected weekly for perceptible leaks (sight, smell or touch) while the system is in operation (§63.322(k))? (Inspection with a halogenated hydrocarbon detector or PCE gas analyzer also fulfills the requirement for inspection of perceptible leaks.) ☒Y ☐N ☐NA

Are the following dry cleaning system components inspected monthly for vapor leaks using a halogenated hydrocarbon detector or PCE gas analyzer while the system is in operation? (Any inspection conducted according to this paragraph shall satisfy the requirements to conduct an inspection for perceptible leaks under §63.322(k) or (l). ☒Y ☐N ☐NA

- (1) Hose and pipe connections, fittings, couplings, and valves;
- (2) Door gaskets and seatings;
- (3) Filter gaskets and seatings;
- (4) Pumps;
- (5) Solvent tanks and containers;
- (6) Water separators;
- (7) Muck cookers;
- (8) Stills;
- (9) Exhaust dampers;
- (10) Diverter valves; and
- (11) All Filter housings

Is the halogenated hydrocarbon detector or PCE gas analyzer operated according to the manufacturer's instructions? ☒Y ☐N ☐NA

Is the vapor leak inspection conducted by placing the probe inlet at the surface of each component interface where leakage could occur and moving it slowly along the interface periphery? ☒Y ☐N ☐NA

Is the PCE gas analyzer a flame ionization detector, photo ionization detector, or infrared analyzer capable of detecting vapor concentrations of PCE of 25 parts per million by volume? ☐Y ☐N ☒NA

Is the halogenated hydrocarbon detector capable of detecting vapor concentrations of PCE of 25 parts per million by volume and indicating a concentration of 25 parts per million by volume or greater by emitting an audible or visual signal that varies as the concentration changes? ☒Y ☐N ☐NA

## ADDITIONAL SITE INFORMATION

<b>Facility Name:</b>	U-Wash
<b>ARMS #:</b>	103 0495

### Inspection Comments:

- *I met with, the responsible official Georgina Ellerbee for inspection of the facility.*
- *I observed the calendar records for the perchloroethylene totals and bi weekly leak detection observations. She is recording on notebook paper the perchloroethylene totals for each month to maintain her records.*
- *The last Perc purchase she made was 19.3 gallons March 2009. She stated she had not operated the dryer in several months due to the expense of perc and customers not requesting dry cleaning because of the expense. She stated that the work had been very slow.*
- *The highest 12 month total was 20 gallons for January 2010. Mrs. Ellerbee does not record the temperatures because it is not required for the existing small facility. The previous years purchase of perc zeroed out her running Perc total to this date.*
- *I observed the Union Spa machine, was not in operation had completed cycle. The dryer equipment, hazardous waste containers and Galaxy mister evaporator were maintained and closed. The perchloroethylene hazardous waste containers were located in secondary containment.*
- *There were no perchloroethylene odors detected during the inspection of the facility.*
- *The facility uses an Eco Sensor Halogen Detector for its Halogen Detecto..*
- *The facility appears to be in compliance at this time*
- *I gave her the P2 booklet, and pamphlet along with the inspection summary.*

## ADDITIONAL SITE INFORMATION

<b>Facility Name:</b>	U-Wash
<b>ARMS #:</b>	103 0495

<b>Machine #1:</b>																			
Manufacturer	Union Spa	Capacity	lbs																
Model#	Homemade model	Serial#	Mfg yr																
Model#		Serial#	Mfg yr																
<b>Machine #2:</b>																			
Manufacturer		Capacity	lbs																
Model#		Serial#	Mfg yr																
<p><b>Notification (unpermitted sources only):</b></p> <p>1. Was the facility assisted in filling out the notification by the inspector? <span style="float: right;"><input type="checkbox"/>Y    <input checked="" type="checkbox"/>N</span></p> <p>2. Did the facility insist on filling out its own notification, and will send it to FDEP? <span style="float: right;"><input type="checkbox"/>Y    <input checked="" type="checkbox"/>N</span></p> <p><b>Record keeping :</b></p> <p>1. Does facility have statement/specs as to the design accuracy of the temperature sensor? <span style="float: right;"><input checked="" type="checkbox"/>Y    <input type="checkbox"/>N</span>          (Temperature of 45<sup>0</sup>F w/accuracy +/- 2<sup>0</sup>F, or 7.2EC w/accuracy of +/- 1.1<sup>0</sup>C)</p> <p><b>Hazardous Waste:</b></p> <p>1. Is all perc. contaminated wastewater either treated or disposed of properly? <span style="float: right;"><input checked="" type="checkbox"/>Y    <input type="checkbox"/>N</span></p> <p>2. If wastewater is evaporated, is it an approved system, and using carbon filtration? <span style="float: right;"><input checked="" type="checkbox"/>Y    <input type="checkbox"/>N</span></p> <p>3. Does the facility have secondary containment for the dry-dry machine? <span style="float: right;"><input checked="" type="checkbox"/>Y    <input type="checkbox"/>N</span></p> <p>4. Does the facility have secondary containment for any perc. waste containers? <span style="float: right;"><input checked="" type="checkbox"/>Y    <input type="checkbox"/>N</span></p> <p><b>Boiler:</b></p> <table style="width: 100%;"> <tr> <td style="width: 20%;">Manufacturer</td> <td style="width: 30%;">Sussman</td> <td style="width: 20%;">Hp</td> <td style="width: 30%;">24KW</td> </tr> <tr> <td>Model #</td> <td>Serial #</td> <td>Mfg yr</td> <td>1984</td> </tr> <tr> <td>Manufacturer</td> <td></td> <td>Hp</td> <td></td> </tr> <tr> <td>Model #</td> <td>Serial #</td> <td>Mfg yr</td> <td></td> </tr> </table> <p>Fuel Type:    Natural gas?    <input type="checkbox"/>                      Propane?    <input type="checkbox"/>                      Fuel oil?    <input type="checkbox"/></p> <p><b>Comments:</b>    Electric this unit is exempt</p>				Manufacturer	Sussman	Hp	24KW	Model #	Serial #	Mfg yr	1984	Manufacturer		Hp		Model #	Serial #	Mfg yr	
Manufacturer	Sussman	Hp	24KW																
Model #	Serial #	Mfg yr	1984																
Manufacturer		Hp																	
Model #	Serial #	Mfg yr																	

# U-Wash

20 West Morgan Street, Tarpon Springs



**Project Id:** 75685      **Permit No:** 1030495-002-AG      **Arms Number:** 0495

**Inspector:** Shea Jackson      **Inspection Date / Time:** 10/20/2010

**Source (EU):** Existing, Small Perchloroethylene Dry Cleaner: One Dry-to-dry machine (1984).

**Description:** [This is the front of the dry to dry. It is not in operation at this time. ]



# U-Wash

20 West Morgan Street, Tarpon Springs



**Project Id:** 75685      **Permit No:** 1030495-002-AG      **Arms Number:** 0495

**Inspector:** Shea Jackson      **Inspection Date :** 10/20/2010

**Source (EU):** Existing, Small Perchloroethylene Dry Cleaner: One Dry-to-dry machine (1984).

**Description:** [The rear of the machine. The dry to dry was not in operation.]

# U-Wash

20 West Morgan Street, Tarpon Springs



**Project Id:** 75685

**Permit No:** 1030495-002-AG

**Arms Number:** 0495

**Inspector:** Shea Jackson

**Inspection Date :** 10/20/2010

**Source (EU):** Existing, Small Perchloroethylene Dry Cleaner: One Dry-to-dry machine (1984).

**Description:** [The evaporator was closed and resting in secondary containment]