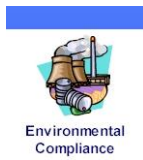




PERCHLOROETHYLENE DRY CLEANERS



COMPLIANCE INSPECTION CHECKLIST

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

AIRS ID#: 103 0495	Date: 10/24/13	Time In: 3:00PM	Time Out: 3:30 PM
Facility Name:	U-Wash		
Facility Location:	20 West Morgan Street		
	Tarpon Springs, FL, 34689		
Responsible Official:	Georgina Ellerbee	Phone No:	727-934-5978
e-mail:			
Emis. Unit Description:	Existing, Small Perchloroethylene Dry Cleaner: One Dry-to-dry machine (Union Spa - 1984).		
Permit Number:	1030495-003-AG	Exp. Date:	4/22/2017
Facility Contact:	Georgina Ellerbee	Renewal Date:	3/23/2012
e-mail:	No Computer no email address	Phone:	727-934-5978
Compliance Status:	<input checked="" type="checkbox"/> IN <input type="checkbox"/> MNC <input type="checkbox"/> SNC		

PART I: NOTIFICATION (Check appropriate box)

1. Existing facility notified DARM by 9/1/96
2. New facility notified DARM 30 days prior to startup
3. Facility failed to notify DARM to use general permit

PART II: CLASSIFICATION

Facility indicated on notification form that it is:
 No Notification Form Drop-Off Store Out of business Petroleum Solvent Only

- A.**
- | | |
|---|---|
| <u>1. Existing small area source</u>
Dry-to-dry only, x <140 gal/yr
Transfer only, x <200 gal/yr <input checked="" type="checkbox"/>
Both types, x <140 gal/yr
(Constructed before 12/9/91) | <u>2. New small area source</u>
Dry-to-dry only, x <140 gal/yr
Transfer only, x <200 gal/yr <input type="checkbox"/>
Both types, x <140 gal/yr
(Constructed on or after 12/9/91) |
| <u>3. Existing large area source</u>
Dry-to-dry only, 140> x <2,100 gal/yr
Transfer only, 200> x <1,800 gal/yr <input type="checkbox"/>
Both types, 140> x <1,800 gal/yr
(Constructed before 12/9/91) | <u>4. New large area source</u>
Dry-to-dry only, 140> x <2,100 gal/yr
Transfer only, 200> x <1,800 gal/yr <input type="checkbox"/>
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 ___ 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: 19 Gallons. Month with highest use was 19. 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 <input checked="" type="checkbox"/> NA |
| 2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?
Is the temperature differential equal to or greater than 10°F? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 3. Measured and recorded the perc concentration weekly at the end of the final drying cycle while the machine is venting to the atmosphere. If machines are equipped with a carbon adsorber?
Is the perc concentration or less than 10 ppm? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 4. Assured that the sampling position on adsorber exhaust for measuring perc. concentrations is at least 10 duct diameters downstream of any bend, contraction, or expansion; is at least 10 diameters upstream from any bend contraction, or expansion; and downstream from the condenser inlet? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 6. Routed airflow to the carbon adsorber (if used) at all times? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:

(Check appropriate boxes)

- | | |
|--|--|
| 1. Maintained receipts for perc purchased? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |
| 2. Maintained rolling monthly averages of perc consumption? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |
| 3. Maintained leak detection inspection and repair reports for the following:
a. Documentation of leaks repaired w/in 24 hrs? or;
b. Documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 4. Maintained calibration data? (<i>direct reading instruments only</i>) | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 5. Maintained exhaust duct monitoring data on perc concentrations? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 6. Maintained startup/shutdown/malfunction plan? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |
| 7. Maintained deviation reports?
Problem corrected? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA
<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |
| 8. Maintained compliance plan, if applicable? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA |

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct weekly leak detection and repair inspection?	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
2. Which method of detection does the responsible official use?	<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 type="checkbox"/> Y	<input type="checkbox"/> N
If using direct-reading instrumentation, is the equipment:	<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
3. Has the facility maintained a leak log?	<input type="checkbox"/> Y	<input type="checkbox"/> N
4. The following area should be checked for leaks by the operator:	<input type="checkbox"/> Y	<input type="checkbox"/> N
Hose connections, fitting couplings, and valves	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Door gaskets and seating	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Filter gaskets and seating	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Pumps	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Solvent tanks and containers	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Water separators	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Muck cookers	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Stills	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Exhaust dampers	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N
Diverter valves	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Cartridge Filter housing	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N

Shea Jackson	October 24, 2013
Inspector's Name (Please Print)	Date of Inspection
	Within one year of this inspection
Inspector's Signature	Date of Next Inspection
	2014

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

Facility Name:	U-Wash
ARMS #:	103 0495

Inspection Comments:

- *I met with, the responsible official Georgina Ellerbee for inspection of the facility. She stated at this time she is operating the store as a wash and press shop, has not been using the dry cleaning machine for this month.*
- *I observed the calendar records for the perchloroethylene totals and bi weekly leak detection observations for 2012 - 2013. She records on notebook paper the perchloroethylene totals for each month to maintain her records. She does not have computer access, does not get a record calendar and does not have an email address.*
- *The last purchase of Perc was 9/4/12, for 19 gallons. The 12 month consecutive total after subtraction of last year's purchase was 19 gallons. She has not purchased any Perc for 2013, and stated she is waiting to have the dry cleaning machine repaired. She stated it may be operational again in November. (see photo) When operational she stated the dry to dry machine is used about one cycle a week. She said customers are not requesting dry cleaning. She mainly does soap wash and press.*
- *The highest 12 month total was 38 gallons for October 2012. The hazardous waste disposal was 6/14/13 for 4 drums -5 filters.*
- *Ms. Ellerbee is not required to record the temperatures for this machine is classified as an existing small facility.*
- *I observed the Union Spa machine, it was not in operation. The dryer equipment, hazardous waste containers and Galaxy mister evaporator are maintained with closed lid and located to the rear of the dry to dry machine.*
- *The perchloroethylene hazardous waste containers were located in secondary containment.*
- *There were no perchloroethylene odors detected during the observation of the dry to dry machine.*
- *Ms Ellerbee has a Eco Sensor Halogen Detector, which she plugs in and monitors when operating the Dry to Dry machine .*
- *I gave Ms. Ellerbee the inspection summary .*
- *The facility appears to be in compliance at this time.*

ADDITIONAL SITE INFORMATION

Facility Name:	U-Wash
ARMS #:	103 0495

Machine #1:			
Manufacturer	Union Spa	Capacity	lbs
Model#	Homemade model	Serial#	None
		Mfg yr	1984

Machine #2:			
Manufacturer		Capacity	lbs
Model#	none	Serial#	
		Mfg yr	

Notification (unpermitted sources only):

- 1. Was the facility assisted in filling out the notification by the inspector? Y N
- 2. Did the facility insist on filling out its own notification, and will send it to FDEP? Y N

Record keeping :

- 1. Does facility have statement/specs as to the design accuracy of the temperature sensor? Y N
(Temperature of 45⁰F w/accuracy +/- 2⁰F, or 7.2EC w/accuracy of +/- 1.1⁰C)

Hazardous Waste:

- 1. Is all perc. contaminated wastewater either treated or disposed of properly? Y N
- 2. If wastewater is evaporated, is it an approved system, and using carbon filtration? Y N
- 3. Does the facility have secondary containment for the dry-dry machine? Y N
- 4. Does the facility have secondary containment for any perc. waste containers? Y N

Boiler:

Manufacturer	Fulton	Hp	5
Model #		Serial #	
		Mfg yr	2010

Fuel Type: Natural gas? Propane? Fuel oil?

Comments: Electric hot water heater this unit is exempt

U-Wash

20 West Morgan Street, Tarpon Springs



Project Id: 88184 **Permit No:** 1030495-003-AG **Arms Number:** 0495

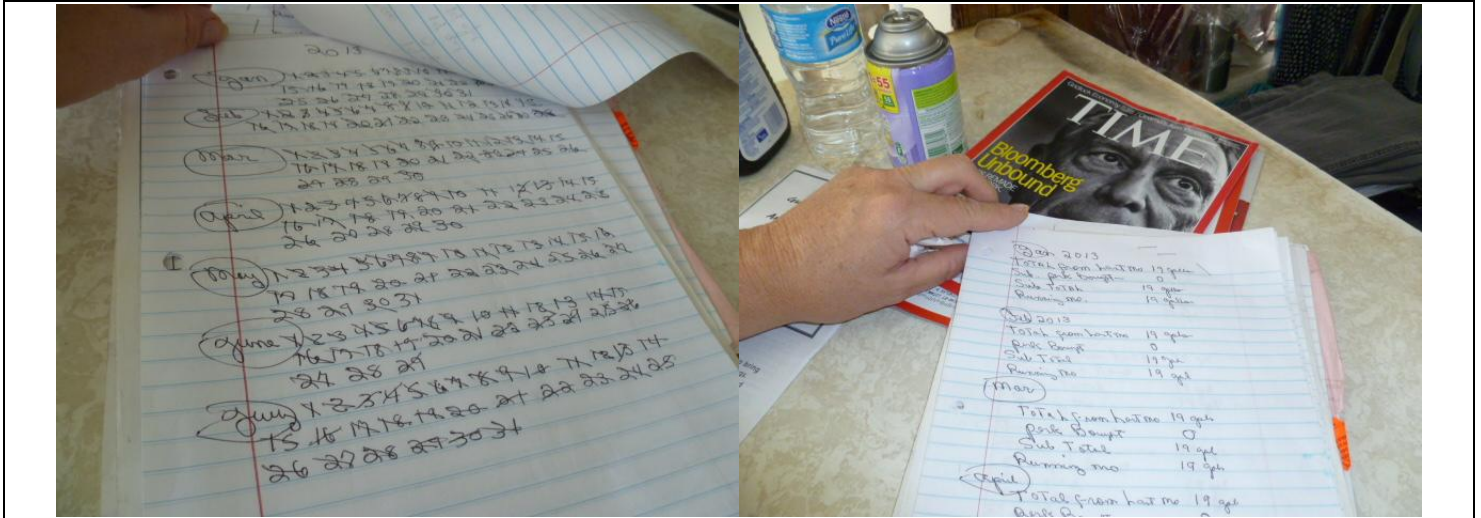
Inspector: Shea Jackson **Inspection Date / Time:** 10/24/2013 / _____

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

Description: [The respondent and the dry to dry machine. Dry to Dry is not operational at this time]

U-Wash

20 West Morgan Street, Tarpon Springs



Project Id: 88184 **Permit No:** 1030495-003-AG **Arms Number:** 0495
Inspector: Shea Jackson **Inspection Date / Time:** 10/24/2013 / _____
Source (EU): Existing, Small Perchloroethylene Dry Cleaner: One Dry-to-dry machine (Union Spa - 1984).
Description: [Facility contact R.O. maintains her inspection check list and Perc totals in notebook]