



PERCHLOROETHYLENE DRY CLEANERS



Environmental
Compliance

COMPLIANCE INSPECTION CHECKLIST

ARMS UPDATED

INSPECTION TYPE: ANNUAL (INS1, INS2)

COMPLAINT/DISCOVERY (CI)

RE-INSPECTION (FUI)

ARMS COMPLAINT NO:

11/1/07

AIRS ID#: 0830147 DATE: 10312007

ARRIVE: 9:00

DEPART: 9:20

FACILITY NAME: QUAIL MEADOWS CLEANERS

FACILITY LOCATION: 4937 N US Hwy 27
4937 N US Brighton
OCALA 34482

*Went to verify that this facility
is in active, it is now a liquor
store. Found another*

RESPONSIBLE OFFICIAL: PAUL BURTZLAFF

PHONE: (440)892-9493 *Closed Dry*

CONTACT NAME:

PHONE: *Cleaners @*

REMITTANCE YEAR: 2003

ENTITLEMENT PERIOD: 2/7/2003
(effective date)

2/7/2008
(end date)

PART I: INSPECTION COMPLIANCE STATUS (check only one box)

IN COMPLIANCE

MINOR Non-COMPLIANCE

SIGNIFICANT Non-COMPLIANCE

PART II: FACILITY CLASSIFICATION - Rule 62-213.300 FAC

(check only one box in A)

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, $140 \leq x \leq 2,100$ gal/yr
transfer only, $200 \leq x \leq 1,800$ gal/yr
both types, $140 \leq x \leq 1,800$ gal/yr
(constructed before 12/9/91)

4. New large area source

dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr
transfer only, $200 \leq x \leq 1,800$ gal/yr
both types, $140 \leq x \leq 1,800$ gal/yr
(constructed on or after 12/9/91)

5. Ineligible for General Permit

drop store/out of business/petroleum
facility exceeds above limits

*4407 N. US Hwy 27.
this facility had
signs saying Dry
cleaning on windows
and on store BLDG.
DID NOT see equipment removed in
from facility.
could not find
facility in ARMS
But wanted to document!*

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was _____ gallons.

detection and repair inspection? ----- Yes No

2. Does the facility maintain a leak log? ----- Yes No

3. Does the responsible official check the following areas for leaks?

a) Hose connections, fittings, couplings, and valves -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	g) Muck cookers -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b) Door gaskets and seating -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	h) Stills -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
c) Filter gaskets and seating-----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	i) Exhaust dampers -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
d) Pumps -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	j) Diverter valves -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
e) Solvent tanks and containers--	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	k) Cartridge filter housings	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
f) Water separators -----	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

4. Which method(s) of detection (is/are) used by the responsible official?

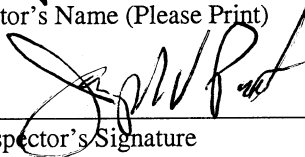
a) Visual examination (condensed solvent on exterior surfaces) -----	a) <input type="checkbox"/>
b) Physical detection (airflow felt through gaskets) -----	b) <input type="checkbox"/>
c) Odor (noticeable perc odor) -----	c) <input type="checkbox"/>
d) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) -----	d) <input type="checkbox"/> **(see below)
e) Halogen leak detector -----	e) <input type="checkbox"/>

****If using direct-reading instrumentation, is the equipment:** ----- ** N/A

1) Capable of detecting perc vapor concentrations in a range of 0-500 ppm? -----	1) <input type="checkbox"/> Yes <input type="checkbox"/> No
2) Calibrated against a standard gas prior to and after each use (PID/FID only)? -----	2) <input type="checkbox"/> Yes <input type="checkbox"/> No
3) Inspected for leaks and obvious signs of wear on a weekly basis? -----	3) <input type="checkbox"/> Yes <input type="checkbox"/> No
4) Kept in a clean and secure area when not in use? -----	4) <input type="checkbox"/> Yes <input type="checkbox"/> No
5) Verified for accuracy by use of duplicate samples (calorimetric only)? -----	5) <input type="checkbox"/> Yes <input type="checkbox"/> No

Joseph V. Paneth

Inspector's Name (Please Print)



Inspector's Signature

10/31/07

Date of Inspection

Approximate Date of Next Inspection

COMMENTS: