



Florida Department of Environmental Protection

Northwest District Branch Office
3900 Commonwealth Boulevard, MS 55
Tallahassee, Florida 32399-3000

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Mimi A. Drew
Secretary

December 15, 2010

Bob Gardner
Carver Cleaners
1215 North Monroe Street
Tallahassee, Florida 32303-6148

Dear Mr. Gardner:

A Department representative inspected your facility to determine compliance with the Air Quality Operating Permit. The program identification number for this facility is **0730107**. The permit **expires on July 2, 2011**. This letter applies only to activities covered by the Air Resource Management Program.

The Tallahassee Branch Office reported a status of In Compliance for your facility. However the following issue may **require your immediate attention**:

As of May 2009, the facility Responsible Official has changed. Please note that if the facility has to perform any "**Administrative Corrections**" as required by DEP Form 62-213.900(2), Part I, Section (3), and Chapter 62-213.300 F.A.C., the facility should submit those corrections to the Department.

Source:

62-213.300 F.A.C. Title V Air General Permits.

(2) General Procedures.

(c) Administrative Corrections. Within 30 days of any changes requiring corrections to information contained in the notification form, the responsible official shall notify the Department in writing. Such changes shall include:

1. Any change in name of the responsible official or facility address or phone number

Also, your permit **will expire in July 2011**. Please be aware that you will need to renew your permit prior to the next permitted period.

In order to complete the yearly inspection process, the enclosed "Annual Compliance Certification Form" should be submitted. Please fill out your relevant sections of the form, including the Annual Reporting Period. The last recorded end date on your previously

Bob Gardner
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submitted form appears to be *July 2, 2009*. Please check your compliance status box, sign and date the bottom of the form, and return or mail the form back to this office. You may keep the yellow copy for your records.

The assistance you provided is appreciated. The inspection checklist is enclosed. If you have questions, your contact is Tracy White at (850) 245-2984 or tracy.a.white@dep.state.fl.us.

Sincerely,

A handwritten signature in cursive script that reads "Marlane Castellanos".

Marlane Castellanos
Branch Manager

MC/tw



PERCHLOROETHYLENE DRY CLEANERS



COMPLIANCE INSPECTION CHECKLIST

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

AIRS ID#: 0730107 **DATE:** 12/02/2010 **ARRIVE:** _____ **DEPART:** _____
FACILITY NAME: CARVER CLEANERS
FACILITY LOCATION: 1215 North Monroe St
 TALLAHASSEE 32303-6148
OWNER/AUTHORIZED REPRESENTATIVE: KOLA ALABI **PHONE:** (850)224-5002
Email: _____ **Mobile:** _____
CONTACT NAME: _____ **PHONE:** _____
Email: _____ **Mobile:** _____
ENTITLEMENT PERIOD: 7/2/2006 / 7/2/2011
 (effective date) (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)

- | | |
|---|---|
| <p>A. 1. Existing small area source <input type="checkbox"/>
 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)</p> <p>3. Existing large area source <input type="checkbox"/>
 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)</p> <p>5. Ineligible for General Permit <input type="checkbox"/>
 d rop store/out of business/petroleum /
 facility exceeds above limits</p> | <p>2. New small area source <input type="checkbox"/>
 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)</p> <p>4. New large area source <input checked="" type="checkbox"/>
 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)</p> |
|---|---|

B. The sum of the volume of all perchloroethylene (perc) purchases made in each of the previous 12 months by this dry cleaning facility was 540.00 gallons.

PART III: GENERAL CONTROL REQUIREMENTS – Rule 62-213.300 FAC

(check only one box for each question)

1. Is all perc, and wastes containing perc, in tightly sealed & impervious containers? ----- Yes No N/A
2. Are all perc. containers leak free? ----- Yes No N/A
3. Are all machine doors kept closed and secured except during loading/unloading? ----- Yes No
4. Are cartridge filters drained in their housing or in sealed containers for at least 24 hours prior to disposal? ----- Yes No N/A
5. Has each dry cleaning system installed after December 21, 2005 at an area source, routed the air-PCE gas-vapor stream contained within each dry cleaning machine through a refrigerated condenser and passed the air-PCE gas-vapor stream from inside the dry cleaning machine drum through a non-vented carbon adsorber or equivalent control device immediately before the door of the dry cleaning machine is opened? The carbon adsorber must be desorbed in accordance with manufacturer's instructions. ----- Yes No N/A
6. Is solvent-to-carbon ratios and steam pressure for carbon adsorber beds maintain 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.1.-4. Classification: page 1 of 4, this form)

1. If the facility classification is an existing small area source, no controls are required. **Proceed to Part V.**
2. If the facility classification is a new small area source, the machine should be equipped with a refrigerated condenser. **Complete section A. below.**
3. If the facility classification is an 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 new large area source, the machine should be equipped with a refrigerated condenser. **Complete both sections A and B below.**

A. 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? ----- 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 N/A
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

PART IV: PROCESS VENT CONTROLS – Rule 62-213.300 FAC (continued)

B. For all existing large or new large area sources:

1. Is the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines measured and recorded on a weekly basis? ----- Yes No
2. Is the washer exhaust temperature at the condenser inlet and outlet measured and recorded weekly? ----- Yes No N/A
 - a) Is the temperature differential equal to, or greater than 20° F? ----- Yes No N/A
3. Is the perc concentration in the exhaust stream inlet and outlet measured 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. Is the sampling port on the carbon adsorber exhaust for measuring perc concentrations 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. Are transfer machines equipped (dryers, reclaimers, and washers) with individual condenser coils? ----- Yes No N/A
6. Is airflow routed to the carbon adsorber (if used) at all times? ----- Yes No N/A

PART V: RECORDKEEPING REQUIREMENTS – Rule 62-213.300(3) FAC

(check only one box for each question)

1. Are receipts maintained for all perc purchased? ----- Yes No
2. Are rolling monthly totals of yearly perc consumption maintained? ----- Yes No
3. Are leak detection inspection and repair reports maintained for the following:
 - a) Of any leaks repaired w/in 24 hrs? or; ----- Yes No N/A
 - b) Of any 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. Is calibration data maintained for applicable direct reading instruments? ----- Yes No N/A
5. Is exhaust duct monitoring data on perc concentrations maintained? ----- Yes No N/A
6. Is a startup/shutdown/malfunction plan maintained for each machine? ----- Yes No
7. Are deviation reports maintained? ----- Yes No N/A
 - a) Problem corrected? ----- Yes No N/A
8. Is a compliance plan maintained, if applicable? ----- Yes No N/A

PART VI: LEAK DETECTION AND REPAIRS – Rule 62-213.300 FAC

(check only one box for each question)

1. What type of leak detection equipment is used to detect leaks?
 Halogenated hydrocarbon detector PCE gas analyzer None used
2. Is the halogenated hydrocarbon detector or PCE gas analyzer operated according to the manufacturer's instructions (*manual was available and RO could demonstrate procedure*) ? ----- Yes No
3. For major sources is the halogenated hydrocarbon detector or PCE gas analyzer operated according to EPA Method 21 ?- ----- Yes No N/A
4. 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? ----- Yes No
5. 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 (*based on documented specifications*) ? ----- Yes No N/A
6. Is the halogenated hydrocarbon detector capable of detecting vapor concentrations of PCE of 25 parts per million by volume (*based on documented specifications*) 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? ----- Yes No N/A
7. 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)

a) Hose connections, fittings, couplings, and valves ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A b) Door gaskets and seating ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A c) Filter gaskets and seating ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A d) Pumps ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A e) Solvent tanks and containers -- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A f) Water separators ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	g) Muck cookers ----- <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A h) Stills ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A i) Exhaust dampers ----- <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A j) Diverter valves ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A k) Cartridge filter housings <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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8. 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)*)

a) Hose connections, fittings, couplings, and valves ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A b) Door gaskets and seating ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A c) Filter gaskets and seating ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A d) Pumps ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A e) Solvent tanks and containers -- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A f) Water separators ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	g) Muck cookers ----- <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A h) Stills ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A i) Exhaust dampers ----- <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A j) Diverter valves ----- <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A k) Cartridge filter housings <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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PART VI: LEAK DETECTION AND REPAIRS – Rule 62-213.300 FAC (continued)

9. What evidence suggests that leak checks are performed as required?

Leak log documentation RO Assurances On-site observation other

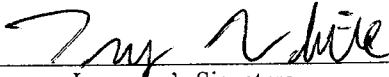
Explain other :

Tracy White

12/02/2010

Inspector's Name (Please Print)

Date of Inspection



Inspector's Signature

Approximate Date of Next Inspection

COMMENTS: I met with Bob Gardner. I requested the records. Records were available and maintained. The machine was in operation, but was in the wash cycle. No leaks or strong odors were noted. A wastewater disposal machine was present. A leak detector device was available for inspection.

I asked Mr. Gardner about the "change in Responsible Official (RO)" issue as noted in the last inspection report. Department computer records indicate that Kola Alabi is currently listed as the RO. Mr. Alabi is no longer with the facility.

Mr. Gardner is the current RO and indicated that he attempted to resolve the issue and "tried to do it." He explained that he had contacted the permitting department to get the name changed.

Recommendations:

Please contact one of the following in order to update the RO:

Marnie Brynes
[Marnie.Brynes@dep.state.fl.us]
(850) 921-8978

Dickson Dibble [Dickson.Dibble@dep.state.fl.us]
(850) 921-9586

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: _____	DATE: _____
FACILITY LOCATION: _____	

Annual Reporting Period: _____ 20 ____ TO _____ 20 ____

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____

Action(s) taken to achieve compliance: _____

Method used to demonstrate compliance: _____

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____

Action(s) taken to achieve compliance: _____

Method used to demonstrate compliance: _____

As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: _____
Name (Please Print) Signature Date

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

URGENT!

IMPORTANT

NOTIFICATION OF EXPIRING AIR GENERAL PERMIT REGISTRATION

If you wish to continue your Air General Permit (AGP) entitlement to operate, please submit a new, completed registration form to the following address:

**Air General Permit Program
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400**

I am a new OWNER or AUTHORIZED REPRESENTATIVE for this facility.

My business has moved to a new location.

Note: If you have checked any of the above boxes, please include this form with your new AGP registration form.



SURRENDERING YOUR AIR GENERAL PERMIT REGISTRATION

By checking this box, I wish to surrender my AGP entitlement to operate and I am notifying the Department of the pending action by signing and dating this form below and returning it to the mail address above.

My ARMS ID number is: _____ - _____ - AG _____
(9999999-999-AG) (PRINT YOUR NAME HERE)

Date: _____ / _____ / _____
(mm/dd/yyyy) (SIGN YOUR NAME HERE)