

## FDEP Multimedia Program - DRY CLEANERS SECTOR Inspection Checklist (Part II)

Facility Name :	Hedez Cleaners
Facility Address :	3063 Michigan avenue Kissimmee 34744
Date/Time :	02/24/2011/ 11.30 AM
Persons present :	Pedro Garcia (Manager) Sangeeta Sharma ( FDEP)
Responsible Official :	Esperanza Mendez
Phone/Email :	(407)-201-7904

### Hazardous Waste Requirements

{ indicates potential SNCs }

Inspection Question	Rule Reference	Answer
<b>General Records:</b>		
• Type of facility? (CESQG, SQG, LQG*)		<input checked="" type="checkbox"/> CESQG <input type="checkbox"/> SQG
• Generator ID #:		FLCESQG
<b>Preparedness &amp; Prevention</b>		
Employee notification system?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 265.32(a)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Device to summon emergency response agencies?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 265.32(b)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Portable fire extinguishers and spill control equipment?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 265.32(c)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Adequate fire suppression equipment?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 265.32(d)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Program to test emergency equipment?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 265.33]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Minimized possibility of spills and releases	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 265.31]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Contingency Planning:</b>		
Designated emergency coordinator?	SQG [40 CFR 262.34(d)(4)(i)] LQG [40 CFR 265.55]	R/O
• Posted names and telephone numbers of emergency coordinators, locations of fire alarms and extinguishers, fire department telephone numbers, and evacuation routes?	SQG [40 CFR 262.34(d)(4)(ii)] LQG [40 CFR 265.52]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Storage of hazardous waste:</b>		
• The facility must not be storing quantities of waste in excess of the quantity storage limits. To determine whether the facility is in compliance calculate the total weight of all perc waste in the storage area as follows:	Maximum quantity limits are:  CESQG = 2,200 lbs SQG = 13,200 lbs	
• For 15-gal containers: # of containers1 x 120 lbs/container = lbs stored		120 lbs
• For 30-gal containers: # of containers0 x 240 lbs/container = lbs stored		0
Are containers marked with an accumulation start date?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 262.34(a)(2)]	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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Is the facility in compliance with quantity and time limits for HW storage?		
➡ SQG: is waste kept onsite ≤ 180 days?	SQG [40 CFR 262.34(d)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
➡ LQG*: is waste kept onsite ≤ 90 days?	LQG [40 CFR 262.34(a)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
• Is there satellite accumulation?	SQG [40 CFR 262.34(c)] LQG [40 CFR 262.34(c)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
• If applicable, are satellite areas at/near the point of generation?	SQG [40 CFR 262.34(c)] LQG [40 CFR 262.34(c)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
➡ Are containers labeled with the words "Hazardous Waste"?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 262.34(a)(3)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
➡ Are containers in good condition and kept closed?	SQG [40 CFR 262.34(d)(2),(4)] LQG [40 CFR 262.34(a)(1)(i)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Are containers compatible with contents?	SQG [40 CFR 262.34(d)(2)] LQG [40 CFR 262.34(a)(1)(i)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Adequate aisle space and clearly marked exits?	SQG [40 CFR 262.34(d)(4)] LQG [40 CFR 265.35]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Are weekly inspections conducted and documented? [62-730.160(6) F.A.C.]	SQG [40 CFR 262.34(d)(2)] LQG [40 CFR 265.174]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Are hazardous waste containers stored on a crack-free surface that will contain leaks or spills?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Is there adequate secondary containment?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Is entrance by unauthorized people restricted?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Does the storage area have appropriate signage?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Record keeping</b>		
• Are manifests properly completed?	SQG [40 CFR 262 subpart B] LQG [40 CFR 262 subpart B]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
➡ Are the originals present?	SQG [40 CFR 262 subpart B] LQG [40 CFR 262 subpart B]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Exception reports?	SQG [40 CFR 268.44] LQG [40 CFR 268.42]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
➡ LDR completed?	SQG [40 CFR 268.7] LQG [40 CFR 268.7]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
➡ Are logs, shipping records, manifests kept at the facility for at least three years?	<b>CESQG</b> [62-730.030(4) F.A.C.] SQG [40 CFR 262.44] LQG [40 CFR 262.40]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
➡ Does the facility ensure waste disposal to a permitted facility?	<b>CESQG</b> [40 CFR 261.5(g)(3)] SQG [40 CFR 262.12(c)] LQG [40 CFR 262.12(c)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Employee Training</b>		
➡ Are employees trained in HW management?	SQG [40 CFR 262.34(d)(5)(iii)] LQG [40 CFR 265.16(a)&(b)]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the facility in the dry cleaner solvent clean-up program? If so, what is the Facility ID #?		
Are dikes or other containment structures installed around each machine or item of equipment in which dry cleaning solvents are used and around any area in which solvents or waste-containing solvents are stored?	376.303, F.S. 376.3078(9)(a), F.S.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Were all spills of more than 1 quart of dry cleaning solvent outside of a containment structure, on or after July 1, 1995, reported by the owner or operator to the state through the State Warning Point?	403.161(1)(d), F.S.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If a spill occurred, did the owner or operator immediately upon the discovery of such a spill, initiate and complete actions to abate the source of the spill?	403.161(11)(d), F.S.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A

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**AST/UST Questions:**

Inspection Question	Answer
Does the facility store petroleum products in a UST or AST?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A

**Separator Water Treatment System Questions:**

Inspection Question	Answer
Is a separator water treatment system employed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is the treatment system directly plumbed to the dry cleaning unit? If so, is it within secondary containment?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the system include a filter to reduce the concentrations of chlorinated solvent(s) in the wastewater prior to evaporation or discharge?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are records available to demonstrate that the filters have been changed in accordance with the manufacturer's recommendations?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are wastewaters that contain soaps, detergents, chlorine, rust, etc. excluded from the treatments system in order to ensure that the filter is effective to treat the chlorinated solvents?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

**Industrial Wastewater Standards**

Inspection Question:	Rule Reference	Answer
Does the facility discharge separator water, mop water from cleaning the work area, and vacuum return water to a sewer, tank, evaporator system provided with a filter to reduce chlorinated solvent concentrations, or container, and never to septic?	62.660 F.A.C.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are solvent-based pre-spotters excluded from use on garments that are being laundered in a system that discharges to septic?	62.600 F.A.C.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the vacuum vent upward so that condensed solvent-containing water is returned to the vacuum tank rather than discharged onto ground?	403.087 F.S.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the boiler configured so that no contact water (separator water or vacuum return water) is introduced and can be discharged to the ground during the boiler bleed-off?	403.087 F.S.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the facility discharges to surface waters, is it in compliance with NPDES?	62.620 F.A.C.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If the facility discharges to the ground, is it in compliance with a state permit?	62.620 F.A.C.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
If the facility discharges to sewer, is it in compliance with local sewer permit?	62.625 F.A.C.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Is the facility on sewer other than POTW?	64 E-G	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A

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**Dry Cleaning Equipment**

Type	Manufacturer	Serial Number	Capacity	Age

**Other**

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