



HALOGENATED SOLVENT DEGREASERS



COMPLIANCE INSPECTION CHECKLIST

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

AIRS ID#: 0112728 **DATE:** 10/18/2012 **ARRIVE:** 1200 **DEPART:** 1400

FACILITY NAME: HALL ENGINE COMPANY

FACILITY LOCATION: 258 SW 32ND CT
 FT LAUDERDALE 33315-3325

OWNER/AUTHORIZED REPRESENTATIVE: ROBERT SCOTT **PHONE:** (954)767-9000
Email: **Mobile:**

CONTACT NAME: ROBERT SCOTT **PHONE:** (954)767-9000
Email: **Mobile:**

ENTITLEMENT PERIOD: 4/28/2011 / 4/28/2016
 (effective date) (end date)

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

IN COMPLIANCE MINOR Non-COMPLIANCE SIGNIFICANT Non-COMPLIANCE

PART II: NOTIFICATION – Rule 62-210.300 FAC
 (check appropriate box(es))

1. Halogenated solvent used at facility:	2. Indication on notification form that facility has the following machine type(s).
perchloroethylene ----- <input type="checkbox"/>	Batch Vapor, $x \leq 1.21 \text{ m}^2$ ----- <input checked="" type="checkbox"/>
methylene chloride ----- <input checked="" type="checkbox"/>	Batch Vapor, $x > 1.21 \text{ m}^2$ ----- <input type="checkbox"/>
trichloroethylene ----- <input type="checkbox"/>	New In-line ----- <input type="checkbox"/>
1,1,1-trichloroethane ----- <input type="checkbox"/>	Existing In-line ----- <input type="checkbox"/>
carbon tetrachloride ----- <input type="checkbox"/>	Batch Cold ----- <input checked="" type="checkbox"/>
chloroform ----- <input type="checkbox"/>	

PART III: CLASSIFICATION – Rule 62-213.300 FAC
 Indicate the machine type(s) observed at the facility:

Batch Vapor, $x \leq 1.21 \text{ m}^2$ -- <input checked="" type="checkbox"/>	New In-line ----- <input type="checkbox"/>	Batch Cold (immersion)----- <input type="checkbox"/>
Batch Vapor, $x > 1.21 \text{ m}^2$ -- <input type="checkbox"/>	Existing In-line -- <input type="checkbox"/>	Batch Cold (remote reservoir)-- <input type="checkbox"/>

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

A. Batch Vapor and In-Line Machines

1. Does the facility maintain an idling and downtime mode cover that is readily opened and closed, that completely covers, has no cracks, holes, or defects; OR maintain a room designed with reduced draft according to Part II, Section (5)(c)6.b of the permit notification? ----- Yes No
2. Does the facility maintain a freeboard ratio of 0.75 or greater? ----- Yes No
3. Does the facility utilize a parts basket or parts whose size is less than 50% of the solvent-air interface area; OR introduce parts or parts basket at 0.9 m/min (3 ft/min) or less? ----- Yes No
4. Does the facility conduct all spraying operations within the vapor zone or an area not directly exposed to ambient air? ----- Yes No
5. Does the facility install and maintain an automated parts handling system capable of moving the parts/parts basket at 3.4 m/min. (11 ft/min) or less? ----- Yes No
6. Does the facility install and maintain a carbon adsorber on all machines using a lip exhaust? The exhaust concentration should not exceed 100 ppm halogenated solvent, the carbon adsorber should not be by-passed, the lip exhaust shall be located above the closed machine cover. ---- Yes No N/A
7. Does the facility have each machine equipped with:
 - a. a device to shut off sump heat if the solvent level drops to the heater coils? ----- Yes No
 - b. a device to shut off sump heat if the vapor level rises above the height of the vapor condenser? ----- Yes N
 - c. a primary condenser? ----- Yse N
8. Does the facility store all waste solvent, still bottoms, and sump bottoms in closed containers? ----- Yes No

B. Batch Cold Cleaning Machines

1. Does the facility collect and store all waste solvent in closed containers? ----- Yes No
2. Does the facility use a flexible hose or flushing device only within the freeboard area? ----- Yes No
3. Does the facility drain cleaned parts for 15 seconds or longer or until dripping ceases, whichever is longer? ----- Yes No
4. Does the facility maintain the solvent level inside the machine at or below the fill line? ----- Yes No
5. Does the facility immediately clean up spills during solvent transfer? Store wipe rags in a covered container? ----- Yes No
6. Does the facility operate the agitator to produce a rolling motion? (*applicable only when air or pump agitated solvent bath used*). ----- Yes No N/A
7. Does the facility ensure that the machine is not exposed to drafts greater than 40 m/min (132 ft/min) when the cover is open? ----- Yes No
8. Does the facility ensure that sponges, fabrics, wood and paper products are not placed in the machine? ----- Yes No

Remote Reservoir Type Only

9. Does the facility employ a tightly fitting cover over the solvent sump? The cover must be closed at all times except during parts cleaning. ----- Yes No N/A

Immersion Type Only

10. Does the facility employ a tightly fitting cover and a water layer with a thickness of at least 2.5 cm (1 in.); OR employ a tightly fitting cover and maintain a freeboard ratio of 0.75? Tightly fitting cover must be closed at all times except during parts entry and removal. ----- Yes No N/A

PART V: PROCESS VENT CONTROLS – Rule 62-213.300 FAC (not applicable to batch cold cleaning machines)

Facility chose to meet requirements using:

- control device combination / work practice standards -----
- alternative solvent emission limit (proceed to Part VI) -----
- idling emission limit / work practice standards (proceed to Part VI) -----

A. Batch Vapor Machines, $x \leq 1.21 \text{ m}^2$

(Select control combination)

DEVICE IN USE

- | | | | |
|--------------------------------|---|--|--|
| 1. <input type="checkbox"/> g | working mode cover -- <input type="checkbox"/> | 1.0 freeboard ratio - <input type="checkbox"/> | superheated vapor ----- <input type="checkbox"/> |
| 2. <input type="checkbox"/> g | reduced room draft --- <input type="checkbox"/> | 1.0 freeboard ratio - <input type="checkbox"/> | superheated vapor ----- <input type="checkbox"/> |
| 3. <input type="checkbox"/> g | reduced room draft --- <input type="checkbox"/> | 1.0 freeboard ratio - <input type="checkbox"/> | dwel ----- <input type="checkbox"/> |
| 4. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | superheated vapor -- <input type="checkbox"/> | |
| 5. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | working mode cover <input type="checkbox"/> | |
| 6. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | reduced room draft <input type="checkbox"/> | |
| 7. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | 1.0 freeboard ratio - <input type="checkbox"/> | |
| 8. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | dwel ----- <input type="checkbox"/> | |
| 9. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | carbon adsorber ---- <input type="checkbox"/> | |
| 10. <input type="checkbox"/> g | carbon adsorber ----- <input type="checkbox"/> | 1.0 freeboard ratio - <input type="checkbox"/> | superheated vapor ----- <input type="checkbox"/> |

B. Batch Vapor Machines, $x > 1.21 \text{ m}^2$

(Select control combination)

DEVICE IN USE

- | | | | |
|-------------------------------|---|---|--|
| 1. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | superheated vapor -- <input type="checkbox"/> | 1.0 freeboard ratio ----- <input type="checkbox"/> |
| 2. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | superheated vapor -- <input type="checkbox"/> | working mode cover --- <input type="checkbox"/> |
| 3. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | superheated vapor -- <input type="checkbox"/> | reduced room draft ----- <input type="checkbox"/> |
| 4. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | superheated vapor -- <input type="checkbox"/> | carbon adsorber ----- <input type="checkbox"/> |
| 5. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | reduced room draft - <input type="checkbox"/> | dwel ----- <input type="checkbox"/> |
| 6. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | reduced room draft - <input type="checkbox"/> | 1.0 freeboard ratio ----- <input type="checkbox"/> |
| 7. <input type="checkbox"/> g | 1.0 freeboard ratio <input type="checkbox"/> | reduced room draft - <input type="checkbox"/> | superheated vapor ----- <input type="checkbox"/> |

C. Existing In-Line Machines

(Select control combination)

DEVICE IN USE

- | | | |
|-------------------------------|---|--|
| 1. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | 1.0 freeboard ratio - <input type="checkbox"/> |
| 2. <input type="checkbox"/> g | superheated vapor ---- <input type="checkbox"/> | 1.0 freeboard ratio - <input type="checkbox"/> |
| 3. <input type="checkbox"/> g | freeboard refrig. device <input type="checkbox"/> | dwel ----- <input type="checkbox"/> |
| 4. <input type="checkbox"/> g | carbon adsorber ----- <input type="checkbox"/> | dwel ----- <input type="checkbox"/> |

D. New In-Line Machines

(Select control combination)

DEVICE IN USE

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | freeboard refrig. device <input type="checkbox"/> | superheated vapor - <input type="checkbox"/> |
| <input type="checkbox"/> | freeboard refrig. device <input type="checkbox"/> | carbon adsorber ---- <input type="checkbox"/> |
| <input type="checkbox"/> | superheated vapor ----- <input type="checkbox"/> | carbon adsorber ---- <input type="checkbox"/> |

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

Has the responsible official maintained the following:

- | | | |
|--|---|--|
| 1. Owner’s manuals, design specifications, and other instructional materials for cleaning machine and control equipment? ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Date of installation for cleaning machine and all control devices? If the exact date is unknown, they must have a letter stating installation occurred before or after 11/29/93. ---- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Halogenated solvent content for each solvent used? (<i>exempt if <5% by weight</i>) ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Estimates of annual solvent consumption for each machine? ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Dates of solvent additions and amounts added to each machine? (<i>applicable only to those using an alternative emission limit</i>) ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 6. Idling emissions limit tests, including values obtained during the initial performance test? (<i>applicable only to those using an idling emissions limit</i>) ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 7. All control device and parameter monitoring? (<i>applicable only to batch vapor and in-line machines</i>) ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 8. Information on remedial actions in the event of exceedances or other repairs and subsequent monitoring of affected parameters? ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 9. Monthly emissions calculations (<i>applicable only to those using an alternative or idling emission limit</i>) ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 10. 3-month rolling average emissions calculations? (<i>applicable only to those using an alternative emission limit</i>) ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 11. Cleaning capacity calculations? (<i>applicable only to those using an alternative emission limit without a solvent-air interface</i>) ----- | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |

C.Pitters

10/18/2012

Inspector’s Name (Please Print)

Date of Inspection

10/18/2013

Inspector’s Signature

Approximate Date of Next Inspection

COMMENTS: