AIRS ID#: OHJ200

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

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FACILITY NAME: Handcraft Custom D			
FACILITY LOCATION: 2720 Q. Commerce	a bord.		
Fort Louder chale I	Ĺ		
Annual Reporting Period:		June	2020
Based on each term or condition of the Title V general air permit, m	y facility has remained in	n compliance with DE	P Rule
62-213.300, Florida Administrative Code (F.A.C.), during the period	d covered by this stateme	ent. YES	□NO
If NO, complete the following:			
#1. Term or condition of the general permit that has not been in con	ntinuous compliance duri	ng the reporting period	l 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 con	tinuous compliance duri	ng 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 amin this notification are true, accurate and complete. Further, my and purchase receipts, does not exceed 2,100 gallons per year for dry-to combination facilities.  RESPONSIBLE OFFICIAL:  Name (Please Print)	nual consumption of period dry facilities or 1,900 ga	hloroethylene solvent,	based upon

<sup>\*</sup>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.