



# Department of Environmental Protection

0112209

Lawton Chiles  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Virginia B. Wetherell  
Secretary

August 28, 1996

Mr. Frank Iacobucci  
Vice President  
Eagle Cleaners  
10231 Pines Boulevard  
Pembroke Pines, Florida 33026

Dear Mr. Iacobucci:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 13, 1996.


Please note that in November of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and subject to the requirements of the Title V general permit.

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number please notify the Department at the following address:

Title V General Permits Office  
Bureau of Air Monitoring and Mobile Sources MS 5510  
Department of Environmental Protection  
2600 Blair Stone Road  
Tallahassee, Fl 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the District or local air program compliance inspector in your area.

Sincerely,

  
Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/DD

cc: Mr. Robert Wong, Broward County

*"Protect, Conserve and Manage Florida's Environment and Natural Resources"*

0112209

p. 14

1(a) fill in date control device installed

1(c) do not mark

3. New large area source should be marked

p. 15

~~A~~

4. new large area r.c. should be marked

(f) should be marked

# Perchloroethylene Dry Cleaning Facility Notification

## Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): <b>C + I SOUTHEAST INC</b>
2. Site Name (For example, plant name or number): <b>EAGLE CLEANERS</b>
3. Hazardous Waste Generator Identification Number: <b>FL0 000361261</b>
4. Facility Location: Street Address: <b>10231 PINES BLVD.</b> City: <b>PEMBROKE PINES, FLA.</b> County: <b>BROWARD</b> Zip Code: <b>33024</b>
5. Facility Identification Number (DEP Use): <b>0112209</b>

## Responsible Official

6. Name and Title of Responsible Official: <b>FRANK IACOBELLI VP</b>
7. Responsible Official Mailing Address: Organization/Firm: <b>EAGLE CLEANERS</b> Street Address: <b>10231 PINES BLVD</b> City: <b>PEMBROKE PINES, FLA</b> County: <b>BROWARD</b> Zip Code: <b>33024</b>
8. Responsible Official Telephone Number: Telephone: <b>(954) 432-6772</b> Fax: ( ) -

## Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):
10. Facility Contact Address: Street Address: City: County: Zip Code:
11. Facility Contact Telephone Number: Telephone: ( ) - Fax: ( ) -

# RECEIVED

AUG 13 1996

**Facility Information**

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Example</i>									
	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
<b>Dry-to-Dry Unit</b>									
(1) w/ ref. condenser	1	28-JUNE-94							
(2) w/ carbon adsorber									
(3) w/ no controls									
<b>Washer Unit</b>									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
<b>Dryer Unit</b>									
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
<b>Reclaimer Unit</b>									
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									

(b) Control devices are required, but not yet installed

(c) No control devices are required to be installed

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  
 gallons

(b) If less than 12 months, how many?  months

Check why it is less than 12 months: New owner:  New store:  Did not keep records:

3. What is the facility's source classification based on the definitions found in section (3) of Part II?  
 (Indicate with an "X". Select one classification only.)

Existing small area source

New small area source

Existing large area source

New large area source

4: What control technology is required on machines pursuant to section (5) of Part II of this notification form?  
(Indicate with an "X".)

Existing large area source

Carbon adsorber

Refrigerated condenser

New small area source

Refrigerated condenser

New large area source

Refrigerated condenser

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site:

*All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.*

All steam and hot water generating units exempt

No such units on-site

### Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Instrument calibration
- (f) Start-up, shutdown, malfunction plan

**Surrender of Existing Air Permit(s)**

Please indicate with an "X" the appropriate selection:

I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s) \_\_\_\_\_

No air permits currently exist for the operation of the facility indicated in this notification form.

**Responsible Official Certification**

*I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. 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, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.*

*I will promptly notify the Department of any changes to the information contained in this notification.*

Frank J. [Signature]  
Signature

8-9-96  
Date

3755  
2273 0329607



# Department of Environmental Protection

Lawton Chiles  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Virginia B. Wetherell  
Secretary

**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

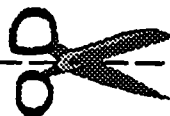
**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**RECEIVED**  
JUL 13 1998  
Bureau of Air Monitoring  
& Mobile Sources

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32399-2400**

**RECEIVED  
MAIL ROOM  
JUL - 8 98**



(cut here)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.**

**TOTAL AMOUNT DUE: \$50.00**

**Do NOT Remove Label**

C&I SOUTHEAST INC  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

AIRS ID#0112209

**FOR GOVERNMENT USE ONLY**  
Org: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj: 002273

# INTEROFFICE MEMORANDUM

**Date:** 23-Oct-2000 09:53am  
**From:** PAUL SHELTON  
PSHELTON@broward.org  
**Dept:**  
**Tel No:**

**To:** Sandy.Bowman ( Sandy.Bowman@dep.state.fl.us )  
**CC:** JARRETT MACK ( JMACK@broward.org )

**Subject:** Re: AIRS ID #0112209

Good Morning Sandy, today we found the notification form. I will send the form to the facility (0112209) certified mail. Paul



# INTEROFFICE MEMORANDUM

**Date:** 20-Oct-2000 11:04am  
**From:** PAUL SHELTON  
PSHELTON@broward.org  
**Dept:**  
**Tel No:**

**To:** Sandy.Bowman ( Sandy.Bowman@dep.state.fl.us )  
**CC:** JARRETT MACK ( JMACK@broward.org )

**Subject:** Re: AIRS ID #0112209

Good Morning Sandy, today I called the facility (0112209) to confirmed the information given to me during the compliance inspection. This is a new facility name and ownership change. Paul

>>> Sandy Bowman TAL 850/921-9583 <Sandy.Bowman@dep.state.fl.us> 10/20/00 07:33AM >>>  
Paul,

The Compliance Inspection Checklist for AIRS ID #0112209 (received 10/10/00) indicates that the name and RO of the facility has changed. Before making changes in the ARMS database, I would like to verify the ownership of the facility. Is the new-facility name and new RO a result of a change in ownership? The last information we received (1996) identifies Frank Iacobucci as the RO.

I will not make any corrections to the ARMS database until I hear from you. I appreciate your assistance with this.

Sandy

*Pat I have  
asked to  
Paul to  
send a form  
for the owner.*

# INTEROFFICE MEMORANDUM

**Sensitivity:** COMPANY CONFIDENTIAL

**Date:** 20-Oct-2000 07:33am  
**From:** Sandy Bowman TAL  
BOWMAN\_S  
**Dept:** Air Resources Management  
**Tel No:** 850/921-9583

**To:** pshelton@broward.org  
**CC:** jmack@broward.org  
**CC:** William Davis TAL ( DAVIS\_W )  
**CC:** Patricia Grant TAL ( GRANT\_P )

**Subject:** RE: AIRS ID #0112209

Paul,

The Compliance Inspection Checklist for AIRS ID #0112209 (received 10/10/00) indicates that the name and RO of the facility has changed. Before making changes in the ARMS database, I would like to verify the ownership of the facility. Is the new facility name and new RO a result of a change in ownership? The last information we received (1996) identifies Frank Iacobucci as the RO.

I will not make any corrections to the ARMS database until I hear from you. I appreciate your assistance with this.

Sandy

**TITLE V GENERAL PERMIT  
COMPLIANCE INSPECTION CHECKLIST**

**TYPE OF INSPECTION:** ANNUAL  COMPLAINT/DISCOVERY   
RE-INSPECTION

*Name change from Eagles Cleaners*

AIRS ID#:	<u>0112209</u>	DATE:	<u>9/21/00</u>	TIME IN:	<u>1545</u>	TIME OUT:	<u>1630</u>
FACILITY NAME:	<u>Prestige Cleaners of the Pines</u>						
FACILITY LOCATION:	<u>10231 Pines Blvd.</u>						
	<u>Pembroke Pines, FL 33026</u>						
RESPONSIBLE OFFICIAL:	<u><del>Bob Leo Parrness</del></u>		PHONE:	<u>(954) 332-3000</u>			
	<u>Leo Parrness</u>						
CONTACT NAME:	<u>same</u>		PHONE:				

RECEIVED  
 OCT 10 2000  
 Bureau of Air, Water & Noise Sources

**PART I: NOTIFICATION**

(check appropriate box)

1. New facility notified DARM 30 days prior to startup	<input type="checkbox"/>
2. Facility failed to notify DARM to use general permit	<input type="checkbox"/>

**PART II: CLASSIFICATION**

Facility indicated on notification form that it is:  
(check appropriate box)

<input type="checkbox"/>	No notification form
<input type="checkbox"/>	Drop store/out of business/petroleum

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)	<input type="checkbox"/>	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)	<input type="checkbox"/>
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)	<input checked="" type="checkbox"/>	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)	<input type="checkbox"/>

5. This is a correct facility classification  Y  N  Can not determine

If no, please check the appropriate classification:

<input type="checkbox"/>	facility qualified for a general permit as number _____ above
<input type="checkbox"/>	facility exceeds above limits and is not eligible for a general permit

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 240 gallons.

**PART III: GENERAL CONTROL REQUIREMENTS**

Is the responsible official of the dry cleaning facility:  
(check appropriate boxes)

- |   |   |
|---|---|
| 1. Storing perchloroethylene in tightly sealed and impervious containers?   | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A |
| 2. Examining the containers for leakage?  | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A |
| 3. Closing and securing machine doors except during loading/unloading?  | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N                              |
| 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?                     | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A |

**PART IV: PROCESS VENT CONTROLS**

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). *Carbon adsorber must have been installed prior to September 22, 1993*

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:  
(check appropriate boxes)

- |  |   |
|--|---|
| 1. Equipped all machines with the appropriate vent controls?   | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N                              |
| 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?   | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A            |
| 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?                     | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?                 | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N                              |
| 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?                               | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N                              |

**B. Has the responsible official of an existing large or new large area source also:**

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?  Y  N  NA
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Y  N  NA  
Is the temperature differential equal to or greater than 20° F?  Y  N  NA
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?  Y  N  NA  
Is the perc concentration equal to or less than 100 ppm?  Y  N  NA
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is 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?  Y  N  NA
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?  Y  N  NA
6. Routed airflow to the carbon adsorber (if used) at all times?  Y  N  NA

**PART V: RECORDKEEPING REQUIREMENTS**

**Has the responsible official:**  
(check appropriate boxes)

1. Maintained receipts for perc purchased?  Y  N
2. Maintained rolling monthly total of perc consumption?  Y  N
3. Maintained leak detection inspection and repair reports for the following:
  - a. documentation of leaks repaired w/in 24 hrs? or;  Y  N  NA
  - b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  Y  N  NA
4. Maintained calibration data? (for applicable direct reading instruments)  Y  N  NA
5. Maintained exhaust duct monitoring data on perc concentrations?  Y  N  NA
6. Maintained startup/shutdown/malfunction plan?  Y  N
7. Maintained deviation reports?  Y  N  NA  
Problem corrected?  Y  N  NA
8. Maintained compliance plan, if applicable?  Y  N  NA

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?  Y  N  N/A

2. Has the facility maintained a leak log?  Y  N  N/A

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

Hose connections, fittings, couplings, and valves  Y  N  N/A

Muck cookers  Y  N  N/A

Door gaskets and seating  Y  N  N/A

Stills  Y  N  N/A

Filter gaskets and seating  Y  N  N/A

Exhaust dampers  Y  N  N/A

Pumps  Y  N  N/A

Diverter valves  Y  N  N/A

Solvent tanks and containers  Y  N  N/A

Cartridge filter housings  Y  N  N/A

Water separators  Y  N  N/A

4. Which method of detection is used by the responsible official?

Visual examination (condensed solvent on exterior surfaces)

Physical detection (airflow felt through gaskets)

Odor (noticeable perc odor)

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  N/A

Halogen leak detector  N/A

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

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  Y  N

b. Calibrated against a standard gas prior to and after each use (PID/FID only)?  Y  N

c. Inspected for leaks and obvious signs of wear on a weekly basis?  Y  N

d. Kept in a clean and secure area when not in use?  Y  N

e. Verified for accuracy by use of duplicate samples (calorimetric only)?  Y  N

*Paul R. Shelton*

Inspector's Name (Please Print)

*Paul R. Shelton*

Inspector's Signature

*9/21/00*

Date of Inspection

*9/21/01*

Approximate Date of Next Inspection

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

**FACILITY NAME:** Prestige Cleaners of the Pines **DATE:** 9/21/00

**FACILITY LOCATION:** 10231 Pines Blvd.  
Pembroke Pines, FL - 33026

Annual Reporting Period: Sept. 21 2000 TO Sept. 21 2001

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:** Leo Parness [Signature] 9-21-2000

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.

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_ AIRS ID#: 0112209/9112225

TYPE OF FACILITY: Dry Cleaning - Perc

FACILITY NAME: Eagle Cleaners DATE: 04/21/97

FACILITY LOCATION: 10231 Pines Boulevard, Pembroke Pines, Florida 33026

RESPONSIBLE OFFICIAL: FRANK IACOBUCCI PHONE NUMBER: (954) 432-6772

- Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).
- Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
<u>Facility is in compliance</u>	
	<b>RECEIVED</b>
	MAY 2 1997
	Bureau of Air Monitoring & Mobile Sources

COMMENTS:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES  NO

DATE OF NEXT INSPECTION: April 1998  
(Approximate)

INSPECTION CONDUCTED BY: OCTAVIAN OPRIS  
(Please Print)

INSPECTOR'S SIGNATURE: [Signature] PHONE NUMBER: (954) 519-1420



DRY CLEANER AIR QUALITY GENERAL PERMIT  
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Eagle Cleaners DATE: 04/21/97  
FACILITY LOCATION: 10231 Pines Boulevard, Pembroke Pines,  
Florida 33026

Annual Reporting Period: April 1997 TO April 1998

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:

RECEIVED

Exact period of non-compliance: from \_\_\_\_\_ to \_\_\_\_\_

Action(s) taken to achieve compliance: \_\_\_\_\_

Method used to demonstrate compliance: \_\_\_\_\_

MAY 8 1997

Bureau of Air Monitoring  
& Mobile Sources

#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 rolling averages of 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: FRANK IACOBUCCI [Signature] 4/21/97  
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.

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Eagle Cleaners DATE: 10-22-96  
 FACILITY LOCATION: 10231 Pines Blvd  
Pembroke Pines, FL 33026

Annual Reporting Period: 10-22-96 19\_\_ TO 10-22 1997

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:

None

Exact period of non-compliance: from N.A. to \_\_\_\_\_  
 Action(s) taken to achieve compliance: N.A.  
 Method used to demonstrate compliance: N.A.

RECEIVED

MAY 3 1997

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

None

Exact period of non-compliance: from N.A. to \_\_\_\_\_  
 Action(s) taken to achieve compliance: N.A.  
 Method used to demonstrate compliance: N.A.

Bureau of Air Monitoring  
& Reporting Services

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 rolling averages of 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: Frank Jacobucci \_\_\_\_\_ 10/22/96  
 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.

TIME IN: 10:30 TIME OUT: 11:30 AIRS ID#: 0112209  
 TYPE OF FACILITY: Dry Cleaning - Perc  
 FACILITY NAME: Carl Southeast Inc (Eagle Cleaners) DATE: 05/26/98  
 FACILITY LOCATION: 0112209 Pines Blvd, Pembroke Pines  
 RESPONSIBLE OFFICIAL: FRANK IACOBUCCI PHONE NUMBER: \_\_\_\_\_

- Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).
- Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
<i>Facility is in compliance</i>	

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 JUN 19 1998  
 Bureau of Air Monitoring  
 & Mobile Sources

COMMENTS: \_\_\_\_\_

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES  NO

DATE OF NEXT INSPECTION: May 1999  
 (Approximate)

INSPECTION CONDUCTED BY: OCTAVIAN OPRIS  
 (Please Print)

INSPECTOR'S SIGNATURE: [Signature] PHONE NUMBER: (954) 519-1420

✓  
APC

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Cal Southeast Inc. DATE: 05/26/98  
 FACILITY LOCATION: 10231 Pines Blvd., Pembroke Pines

Annual Reporting Period: May 1997 TO May 1998

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: \_\_\_\_\_

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& Mobile Sources

#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: FRANK JACOBucci Frank Jacobucci 5-26-98  
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.

Z 333 613 737

US Postal Service

# Receipt for Certified Mail

No Insurance Coverage Provided.

AIRS ID#0112209

EAGLE CLEANER

FRANK IACOBUCCI

10231 PINES BLVD

PEMBROKE PINES FL 33026

Postage	Ⓟ
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>

Postmark or Date

PS Form 3800, April 1995

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

**3. Article Addressed to:**

AIRS ID#0112209

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

**4a. Article Number**

2 333 613 434

**4b. Service Type**

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

**7. Date of Delivery**

6-25

**5. Received By: (Print Name)****8. Addressee's Address (Only if requested and fee is paid)****6. Signature: (Addressee or Agent)**



United States Postal Service



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring  
& Mobile Sources

JUN 29 1998

RECEIVED





# Department of Environmental Protection

Lawton Chiles  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Virginia B. Wetherell  
Secretary

## LETTER OF NONCOMPLIANCE

TO:

Our records indicate that you have previously claimed entitlement to use a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.), as the owner or operator of an eligible facility. However, if one or more of the following events has occurred, you are no longer eligible to operate under the Title V Air General Permit. Department records currently indicate that your facility is not in compliance with the item(s) checked below:

- 1) The facility has a new owner or operator (Rule 62-213.300(3)(a), F.A.C.).
- 2) The annual emissions fee for your facility has not been received by the Department (Rule 62-213.300(3)(b), F.A.C.).
- 3) The annual Compliance Certification for your facility has not been filed with the Department (Rule 62-213.300(3)(n), F.A.C.).

If your facility is to continue to operate under the Title V Air General Permit, the condition(s) referenced above must be corrected. Please call our Division for assistance--either Sandra Bowman at 850/921-9583 or Rick Butler at 850/921-9586.

The terms and conditions stated in the Title V Air General Permit continue to apply whether or not the facility is still operating. The Responsible Official (RO) is considered to be responsible for the permitted facility until the permit is surrendered, including any violations or payment of fees. If you wish to give up your eligibility to use the Title V Air General Permit, please sign and return this form in the enclosed self-addressed envelope. This will remove your name from our annual billing list used to notify when Title V permit fees are due.

*I am the Responsible Official for the facility identified above and hereby notify the Department that I surrender the Title V Air General Permit for that facility.*

\_\_\_\_\_  
*Name (please print)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

*"Protect, Conserve and Manage Florida's Environment and Natural Resources"*



Facility Owner or Operator  
Page Two

Your prompt response to correct or clarify this situation will be greatly appreciated. If you have any questions, please call the Division staff listed above or the Small Business Assistance Program hotline at 800/722-7457.

Sincerely,



Sandra Bowman  
Title V Air General Permit Program

/SB

cc: District/Local program

**C & I Southeast D/B/A  
Eagle Cleaners**  
4960 S.W. 72nd. Ave. Suite 401  
Miami, FL 33155  
PH. 305-665-5020

**NationsBank**  
Miami, Florida  
63-243/670

**62653**

**PAY \*\*\*\* FIFTY & 0/100 DOLLARS**

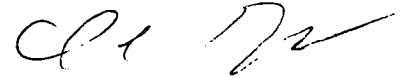
TO THE  
ORDER OF

**DATE**  
7/1/98

**AMOUNT**  
\$\*\*\*\*\*50.00

**DEPARTMENT OF ENVIRONMENTAL PROTECTION**

**AUTHORIZED SIGNATURE**



**C & I Southeast D/B/A Eagle Cleaners**  
4960 S.W. 72nd. Ave. Suite 401, Miami, FL 33155

**62653**

Vendor ID :

Name : DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Check Date : 7/1/98  
Check Amount : 50.00

MEMO:

TITLE V AIR GENERAL PERMIT  
AIRS ID# 0112209 FOR: C&I SOUTHEAST,  
INC. @ 10231 PINES BLVD., PEMBROKE PINES  
FL 33026

**RECEIVED**  
JUL - 7 1998  
Bureau of Air Monitoring  
& Mobile Sources

**C & I Southeast D/B/A Eagle Cleaners**  
4960 S.W. 72nd. Ave. Suite 401, Miami, FL 33155

**62653**

Vendor ID :

Name : DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Check Date : 7/1/98  
Check Amount : 50.00

MEMO:

TITLE V AIR GENERAL PERMIT  
AIRS ID# 0112209 FOR: C&I SOUTHEAST,  
INC. @ 10231 PINES BLVD., PEMBROKE PINES  
FL 33026



# Department of Environmental Protection

**RECEIVED**  
JUL - 7 1990  
Bureau of Air Monitoring  
& Mobile Sources  
Virginia B. Wetherell  
Secretary

Lawton Chiles  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

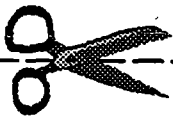
**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32399-2400**



(cut here)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.**

**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

C&I SOUTHEAST INC  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

AIRS ID#0112209

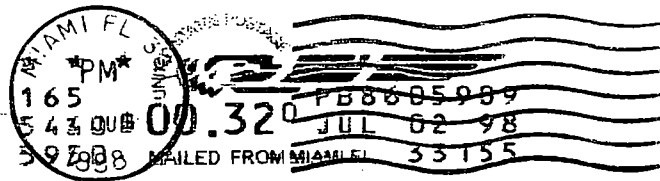
**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj.: 002273

*Donald T. Cohen C.P.A., P.A.*

CERTIFIED PUBLIC ACCOUNTANT

4960 S.W. 72nd AVE., SUITE 401

MIAMI, FL 33155



DEPT. OF ENVIRONMENTAL PROTECTION  
TWIN TOWERS OFFICE BLDG.  
2600 BLAIR STONE ROAD  
MS5510  
TALLAHASSEE, FL 32399-2400

*Air*

ATTN: SANDRA BOWMAN  
TITLE V GENERAL PERMIT PROGRAM

32399-2400



PERCHLOROETHYLENE DRY CLEANERS  
TITLE V GENERAL PERMIT  
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY   
RE-INSPECTION

**RECEIVED**  
JUN 19 1998  
Bureau of Air Monitoring  
& Mobile Sources

AIRS ID#: 0112209 DATE: 05/26/98 TIME IN: 10:30 TIME OUT: 11  
 FACILITY NAME: C-1 Southeast Inc. (Eagles Cleaners)  
 FACILITY LOCATION: 10231 Pines Blvd.  
Seabrook Pines  
 RESPONSIBLE OFFICIAL: Frank Iacobucci PHONE: \_\_\_\_\_  
 CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

**PART I: NOTIFICATION**

(check appropriate box)

1. New facility notified DARM 30 days prior to startup   
 2. Facility failed to notify DARM to use general permit

**PART II: CLASSIFICATION**

Facility indicated on notification form that it is:  No notification form  
 (check appropriate box)  Drop store/out of business/petroleum

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)	2. New small area source <input checked="" 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)
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)	4. New 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 on or after 12/9/91)

5. This is a correct facility classification  Y  N  Can not determine

If no, please check the appropriate classification:  
 facility qualified for a general permit as number \_\_\_\_\_ above  
 facility exceeds above limits and is not eligible for a general permit

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 80 gallons.

**PART III: GENERAL CONTROL REQUIREMENTS**

Is the responsible official of the dry cleaning facility:  
(check appropriate boxes)

- 1. Storing perchloroethylene in tightly sealed and impervious containers?  Y  N  N/A
- 2. Examining the containers for leakage?  Y  N  N/A
- 3. Closing and securing machine doors except during loading/unloading?  Y  N
- 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?  Y  N  N/A
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?  Y  N  N/A

**PART IV: PROCESS VENT CONTROLS**

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). *Carbon adsorber must have been installed prior to September 22, 1993*

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:  
(check appropriate boxes)

- 1. Equipped all machines with the appropriate vent controls?  Y  N
- 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?  Y  N  N/A
- 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?  Y  N  N/A
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?  Y  N
- 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?  Y  N  N/A
- 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?  Y  N

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?  Y  N
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Y  N  N/A  
Is the temperature differential equal to or greater than 20° F?  Y  N  N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?  Y  N  N/A  
Is the perc concentration equal to or less than 100 ppm?  Y  N  N/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is 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?  Y  N  N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?  Y  N  N/A
6. Routed airflow to the carbon adsorber (if used) at all times?  Y  N  N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:  
(check appropriate boxes)

1. Maintained receipts for perc purchased?  Y  N
2. Maintained rolling monthly total of perc consumption?  Y  N
3. Maintained leak detection inspection and repair reports for the following:
  - a. documentation of leaks repaired w/in 24 hrs? or:  Y  N  N/A
  - b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  Y  N  N/A
4. Maintained calibration data? (for applicable direct reading instruments)  Y  N  N/A
5. Maintained exhaust duct monitoring data on perc concentrations?  Y  N  N/A
6. Maintained startup/shutdown/malfunction plan?  Y  N
7. Maintained deviation reports?  Y  N  N/A  
Problem corrected?  Y  N  N/A
8. Maintained compliance plan, if applicable?  Y  N  N/A

**PART VI: LEAK DETECTION AND REPAIRS**

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?  Y  N
2. Has the facility maintained a leak log?  Y  N
3. Does the responsible official check the following areas for leaks?
 

Hose connections, fittings, couplings, and valves	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A	Muck cookers	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A
Door gaskets and seating	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A	Stills	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A
Filter gaskets and seating	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A	Exhaust dampers	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A
Pumps	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A	Diverter valves	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A
Solvent tanks and containers	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A	Cartridge filter housings	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A
Water separators	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> N/A				
4. Which method of detection is used by the responsible official?
 

Visual examination (condensed solvent on exterior surfaces)	<input checked="" type="checkbox"/>
Physical detection (airflow felt through gaskets)	<input checked="" type="checkbox"/>
Odor (noticeable perc odor)	<input checked="" type="checkbox"/>
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)	<input type="checkbox"/> N/A
Halogen leak detector	<input type="checkbox"/> N/A

If using direct-reading instrumentation, is the equipment:

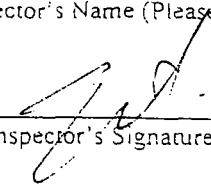
  - a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  Y  N
  - b. Calibrated against a standard gas prior to and after each use (PID/FID only)?  Y  N
  - c. Inspected for leaks and obvious signs of wear on a weekly basis?  Y  N
  - d. Kept in a clean and secure area when not in use?  Y  N
  - e. Verified for accuracy by use of duplicate samples (calorimetric only)?  Y  N

OCTAVIAN OPRIS

Inspector's Name (Please Print)

05/26/98

Date of Inspection

  
Inspector's Signature

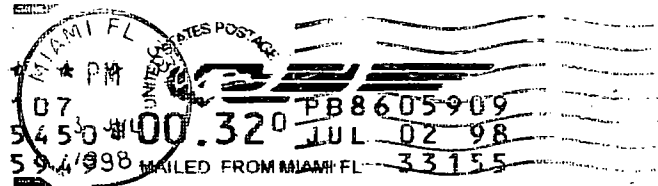
May 1999  
Approximate Date of Next Inspection



*Donald T. Cohen C.P.A., P.A.*

CERTIFIED PUBLIC ACCOUNTANT

4960 S.W. 72nd AVE., SUITE 401  
MIAMI, FL 33155



\$

TITLE V AIR GENERAL PERMITS  
RECEIPTS

P. O. BOX 3070  
TALLAHASSEE, FL 32399-2400

32399-2400



Vendor ID :

Name : DEPARTMENT OF ENVIRONMENTAL PROTECTION

Check Date : 7/1/98

Check Amount : 50.00

MEMO:

TITLE V AIR GENERAL PERMIT

AIRS ID# 0112209 FOR: C&I SOUTHEAST,  
INC. @ 10231 PINES BLVD., PEMBROKE PINES  
FL 33026

Bureau of Air Monitoring  
& Mobile Sources

JUL 13 1998

RECEIVED

(CUT HERE)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

449386 MAR 21 2005

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

AIRS ID#0112209.....2<sup>nd</sup> Cert 05  
EAGLE CLEANER  
10231 Pines Blvd  
PEMBROKE PINES, FL 33026

Bureau of Air Monitoring  
& Mobile Sources

MAR 23 2005

RECEIVED

**FOR GOVERNMENT USE ONLY**  
**ORG.: 37550101000 EO: A1**  
**FUND: 20-2-035001**  
**OBJECT: 002273**

*Printed on recycled paper.*

U.S. Postal Service

# CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

## OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$</b>

*[Handwritten signature]*  
 Postmark Here  
*[Handwritten signature]*

AIRS ID#0112209

Ser  
 EAGLE CLEANER  
 Street  
 FRANK IACOBUCCI  
 or P.O. Box  
 10231 PINES BLVD  
 City  
 PEMBROKE PINES FL  
 33026

PS

for Instructions

7001 0320 0001 7976 4016

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID#0112209

EAGLE CLEANER  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL  
 33026

2. Article Number

(Transfer from service label)

7001 0320 0001 7976 4016

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf YES, enter delivery address below:  No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

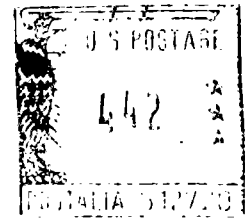
**CERTIFIED MAIL**

MS# 5510 MC Acct # 5521

Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400



7001 0320 0001 7976 4016



*Handwritten mark*



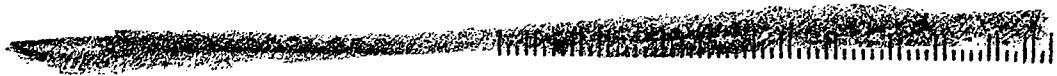
ATTEMPTED-NOT KNOWN

NO SUCH NUMBER

**RECEIVED**

**MAR 19 2003**

Bureau of Air Monitoring  
& Mobile Sources





Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

March 1, 2003

## FINAL NOTICE OF ANNUAL OPERATION FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: User of Title V Air General Permit

Records in the Division of Air Resource Management indicate that during calendar year **2002** you owned or operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee, as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change in facility status.

The annual operation fee for your facility is **\$50** for calendar year **2002**. A notice of your obligation to pay the annual operation fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual operation fee in response to that request, please disregard this letter.

If you have **not** yet submitted the annual operation fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual operation fee not postmarked by **March 1, 2003** may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, under Rule 62-213.205(1)(g), F.A.C., failure to timely pay any required annual operation fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/JK

Enclosure: Invoice Form

*"More Protection, Less Process"*





Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

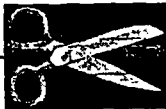
**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



(cut here)

-----  
**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL  
33026

AIRS ID#0112209

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



POSTAGE  
REQUIRED

TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ID# 112209  
 FRANK IACOBUCCI  
 EAGLE CLEANER  
 10231 PINES BLVD  
 PEMBROKE PINES, FL 33026

2. Article Number  
 (Transfer from service label)

7003 2260 0003 5743 9942

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

U.S. Postal Service™

**CERTIFIED MAIL™ RECEIPT**

*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark  
Here

Total P

ID# 112209

Sent To

FRANK IACOBUCCI

Street,  
or PO Box

EAGLE CLEANER  
10231 PINES BLVD

City, State, ZIP+4

PEMBROKE PINES, FL 33026

PS Form 3849, July 2002

Instructions

7003 2260 0003 5743 9942

MS# 5510 MC Acct # 5521

Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee, FL 32309-2400



TALLAHASSEE  
R-404  
FL

U.S. POSTAGE  
442  
★  
★  
★  
POSTALIA 512720

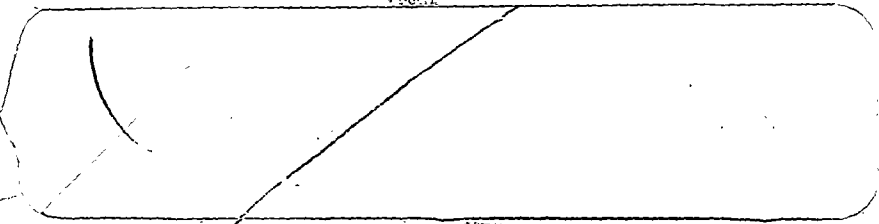
103 5743 9942

REFUSED TO UNCLAIMED  
 NO SUCH NUMBER  
 NO MAIL RECEPTACLE  
 ATTENDED NOT PRESENT  
 MOVED LEFT NO FORWARD FOR FORWARDING ORDER EXP.   
 ADDRESS DATE

Bureau of Air Mail  
& Mobile Service

FEB 17 2004

RECEIVED





# Department of Environmental Protection

Jeb Bush  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

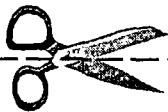
**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



(cut here)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.**

**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

ID# 112209  
FRANK IACOBUCCI  
EAGLE CLEANER  
10231 PINES BLVD  
PEMBROKE PINES, FL 33026

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

February 4, 2004

## NOTICE OF ANNUAL OPERATION FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that you operate a source of air pollution and that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee as established by the Department in Rule 62-213.205, F.A.C.

Your annual operation fee is \$50 for calendar year **2003**. A notice of your obligation to pay the annual operation fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual operation fee in response to that request, please disregard this letter.

If you have not yet submitted the annual operation fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual operation fee not postmarked by **March 1, 2004**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, please be aware that under Rule 62-213.205(1)(g), F.A.C., failure to timely pay any required annual operation fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/JK

Enclosure: Invoice Form

"More Protection, Less Process"

Printed on recycled paper.





POSTAGE  
REQUIRED

**TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

**OFFICIAL USE**

Postage \$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage

Postmark  
Here

**Sent To**

AIRS ID # 112209  
EAGLE CLEANER  
FRANK IACOBUCCI

Street, A  
or PO Box

10231 PINES BLVD

City, State

PEMBROKE PINES, FL 33026

7001 1140 0001 7556 4574

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID # 112209  
 EAGLE CLEANER  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES, FL 33026

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

7001 1140 0001 7556 4514



UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

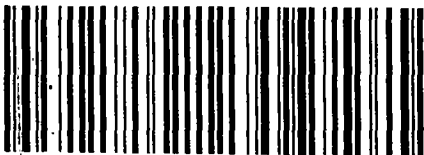
- Sender: Please print your name, address, and ZIP+4 in this box •

~~DARWIN~~ MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

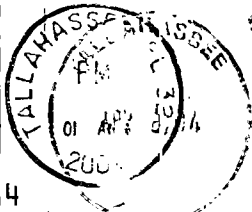
CERTIFIED MAIL

MS# 5510 MC Acct # 5521

Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400



7001 1140 0001 7556 4514



Bureau of Air Monitoring  
& Wildlife Services

APR 12 2004

RECEIVED

JR

*[Handwritten signature]*

REFUSED  UNCLAIMED

NO SUCH NUMBER

ATTEMPTED NOT KNOWN

MAIL RECEIPTABLE

FORWARDING ORDER EXP.





Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Colleen M. Castille  
Secretary

**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213,300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**

(CUT HERE)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number is located on the mailing label.**

**TOTAL AMOUNT DUE: \$75.00**

Do NOT Remove Label

AIRS ID # 112209  
EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES, FL 33026

**FOR GOVERNMENT USE ONLY  
ORG.: 37550101000 EO: B1  
FUND: 20-2-035001  
OBJECT: 002273**



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Colleen M. Castille  
Secretary

April 1, 2004

## NOTICE OF LATE PAYMENT OF ANNUAL OPERATION FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: User of Title V Air General Permit

Department records indicate that during calendar year **2003** you operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee, as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change in facility status.

The annual operation fee is \$50 for calendar year **2003**. A notice of your obligation to pay the annual operation fee was sent to you by certified mail, along with an invoice form and instructions. This notice (with the enclosed replacement invoice) is being sent as a reminder.

The Department has not received your annual operation fee. Accordingly, in accordance with Rule 62-213.205(1)(g), F.A.C., the Department is assessing a 50% penalty against your facility, for a total fee of **\$75.00** for calendar year **2003**.

Under Rule 62-213.205(1)(g), F.A.C., failure to timely pay the required annual operation fee, penalty, or interest constitutes grounds for revocation of your Title V Air General Permit. If the fee and penalty are not promptly paid, the Department will proceed to revoke your facility's Title V Air General Permit and will also seek interest in accordance with Section 220.807, F.S.

To submit your \$75.00 payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Bruce Thomas at 850/921-7744 or Rick Butler at 850/921-9586. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/JK

Enclosure: Invoice Form

*"More Protection. Less Process"*



POSTAGE  
REQUIRED

**TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID # 0112209

EAGLE CLEANER  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL  
 33026

**COMPLETE THIS SECTION ON DELIVERY**A. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature

**X**
 Agent  
 Addressee

 D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

 Certified Mail     Express Mail  
 Registered     Return Receipt for Merchandise  
 Insured Mail     C.O.D.
4. Restricted Delivery? *(Extra Fee)*  Yes

7001 0320 0001 7976 0803

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

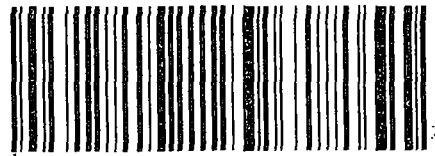
- Sender: Please print your name, address, and ZIP+4 in this box •

DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

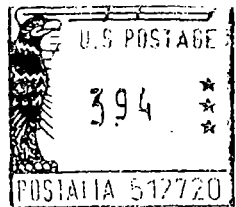
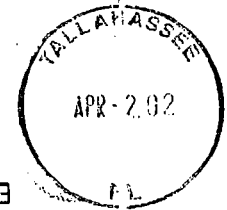
**CERTIFIED MAIL**

MS# 5510 MC Acct # 5521

Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400



7001 0320 0001 7976 0803

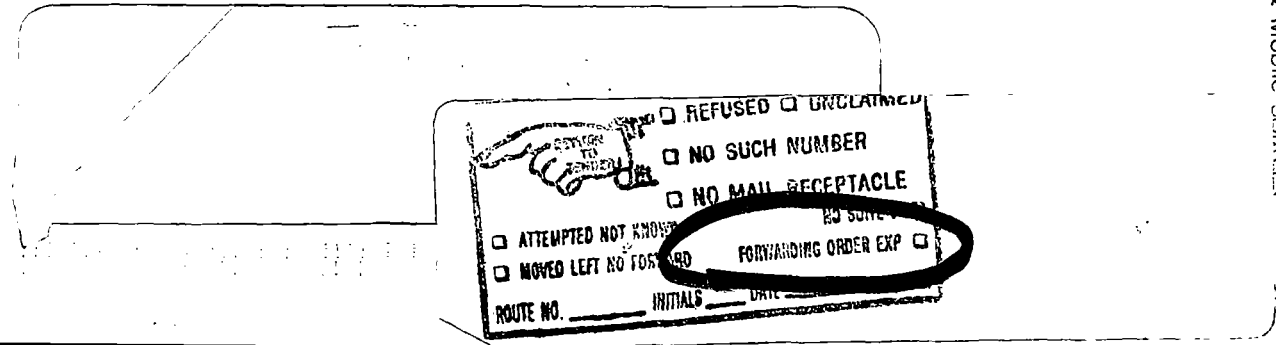


*BOE*

*Not D.O.E.*

RECEIVED  
APR 12 2002

Bureau of Air Monitoring  
& Mobile Sources



REFUSED  UNCLAIMED  
 NO SUCH NUMBER  
 NO MAIL RECEPTACLE  
 ATTEMPTED NOT KNOWN  
 MOVED LEFT NO FORWARDING ORDER EXP

ROUTE NO. \_\_\_\_\_ INITIALS \_\_\_\_\_ DATE \_\_\_\_\_

U.S. Postal Service

# CERTIFIED MAIL RECEIPT

*(Domestic Mail Only; No Insurance Coverage Provided)*

## OFFICIAL USE

Postage

\$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Postmark  
Here

**Total Po**

**AIRS ID # 0112209**

Sent To

EAGLE CLEANER

Street, Apt  
or PO Box

FRANK IACOBUCCI

10231 PINES BLVD

City, State,

PEMBROKE PINES FL 33026

7001 0320 0001 7976 Q803



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

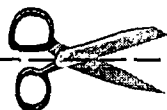
**TO: Holder of Title V Air General Permit**

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070



(cut here)

-----  
THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

**TOTAL AMOUNT DUE: \$75.00**

Do **NOT** Remove Label

AIRS ID # 0112209  
EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

FOR GOVERNMENT USE ONLY  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

April 1, 2002

David B. Struhs  
Secretary

## NOTICE OF LATE PAYMENT OF ANNUAL EMISSIONS FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: User of Title V Air General Permit

Department records indicate that during calendar year **2001** you operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual emissions fee, as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change in facility status.

The annual emissions fee is \$50 for calendar year **2001**. A notice of your obligation to pay the annual emissions fee was sent to you by certified mail, along with an invoice form and instructions. This notice (with the enclosed replacement invoice) is being sent as a reminder.

The Department has not received your annual emissions fee. Accordingly, in accordance with Rule 62-213.205(1)(g), F.A.C., the Department is assessing a 50% penalty against your facility, for a total fee of **\$75.00** for calendar year **2001**.

Under Rule 62-213(1)(g), F.A.C., failure to timely pay the required annual emissions fee, penalty, or interest constitutes grounds for revocation of your Title V Air General Permit. If the fee and penalty are not promptly paid, the Department will proceed to revoke your facility's Title V Air General Permit and will also seek interest in accordance with Section 220.807, F.S.

To submit your \$75.00 payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joe Kahn, Acting Chief  
Bureau of Air Monitoring  
and Mobile Sources

/JK

Enclosure: Invoice Form

*"Protect, Conserve and Manage Florida's Environment and Natural Resources"*



POSTAGE  
REQUIRED

**TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**

U.S. Postal Service

# CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

7000 0600 0026 4125 9390



Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total

AIRS ID # 0112209

Recipie

EAGLE CLEANER  
FRANK IACOBUCCI

Street,

10231 PINES BLVD  
PEMBROKE PINES FL 33026

City, St:



PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.

SENDER: CO

ON ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you!
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EAGLE CLEANER  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL 33026

AIRS ID # 0112209

00060000264259390

2. Article Number (Copy from service label)

A. Received by (Please Print Clearly)      B. Date of Delivery

C. Signature

X

Agent

Addressee

D. Is delivery address different from item 1?     Yes

If YES, enter delivery address below:     No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
TWIN TOWERS OFFICE BUILDING  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

**CERTIFIED MAIL**



U.S. POSTAGE  
374 ★  
★  
★  
POSTALIA 510414

7000 0600 0026 4125 9390

550304  
MS5510

X MLNK

RETURN TO SENDER

REFUSED  UNCLAIMED

NO SUCH NUMBER

NO MAIL RECEIVED

ATTEMPTED NOT KNOWN

MOVED LEFT NO FORWARDING

ROUTE NO. \_\_\_\_\_ INITIALS \_\_\_\_\_ DATE \_\_\_\_\_

Bureau of Air Mail Monitoring  
& Mobile Sources

MAR 14 2001

RECEIVED

32399-2400 0026+600





Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

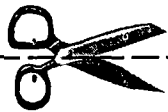
**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



(cut here)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.**

**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

AIRS ID # 0112209

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

March 1, 2001

## FINAL NOTICE OF ANNUAL EMISSIONS FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: User of Title V Air General Permit

Records in the Division of Air Resource Management indicate that during calendar year **2000** you owned or operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual emissions fee, as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change in facility status.

The annual emissions fee for your facility is **\$50** for calendar year **2000**. A notice of your obligation to pay the annual emissions fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual emissions fee in response to that request, please disregard this letter.

If you have **not** yet submitted the annual emissions fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual emissions fee not postmarked by **March 1, 2001**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, under Rule 62-213(1)(g), F.A.C., failure to timely pay any required annual emissions fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/DD

Enclosure: Invoice Form

"More Protection, Less Process"



POSTAGE  
REQUIRED

TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070

SENDER: COMPLETE THIS SECTION

ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID # 0112209

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

Z 210 661 186

2. Article Number (Copy from service label)

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

Agent

Addressee

D. Is delivery address different from item 1?

Yes

If YES, enter delivery address below:

No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

**DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400**



Z 333 618 178

US Postal Service

# Receipt for Certified Mail

No Insurance Coverage Provided

AIRS ID 0112309

GLORIA VALENCIA  
GLORIA VALENCIA  
9769 W SAMPLE  
CORAL SPRINGS FL 33065

PS Form 3800, April 1995

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>

Postmark or Date

Z 210 661 186

US Postal Service

# Receipt for Certified Mail

No Insurance Coverage Provided.

AIRS ID # 0112209

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995

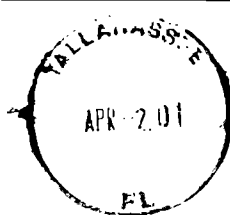
envelope to

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
TWIN TOWERS OFFICE BUILDING  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

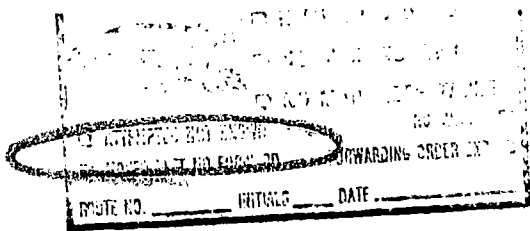
CERTIFIED

Z 210 661 186

MAIL

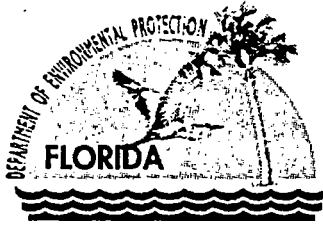


550304  
MS5510



RECEIVED  
1 APR 13 2001  
Bureau of Air Monitoring  
& Mobile Sources

33625 6603 22



# Department of Environmental Protection

Jeb Bush  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

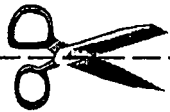
**TO: Holder of Title V Air General Permit**

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070



(cut here)

-----  
**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

**TOTAL AMOUNT DUE: \$75.00**

Do **NOT** Remove Label

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

AIRS ID # 0112209

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj.: 002273



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

April 2, 2001

## THIRD NOTICE OF ANNUAL EMISSIONS FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that during calendar year 2000 you operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual emissions fee, as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change in facility status.

Your annual emissions fee is \$50 for calendar year 2000. A notice of your obligation to pay the annual emissions fee was sent to you by certified first class U.S. mail, along with an invoice form and instructions.

This notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual emissions fee not paid may be subject to a 50 percent penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, under Rule 62-213(1)(g), F.A.C., failure to timely pay any required annual emissions fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit. We have not received your air emissions fee payment. Therefore, you are being assessed a 50 percent penalty plus the invoice amount.

To submit your **\$75.00** fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/DD

Enclosure: Invoice Form

"More Protection, Less Process"



POSTAGE  
REQUIRED

TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID # 0112209

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

2. Article Number (Copy from service label)

000 0600 0026 4127 4546

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

**X** Agent Addressee

D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

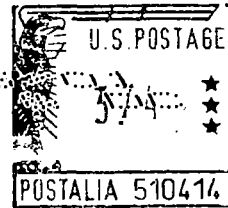
- Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 6610  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400



**CERTIFIED MAIL**

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
TWIN TOWERS OFFICE BUILDING  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400



MS0310

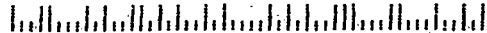
0026 4127 4546

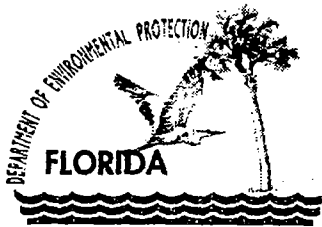
*Unknown*

REFUSED  UNCLAIMED  
 NO SUCH NUMBER  
 NO MAIL RECEPTACLE  
 NO SITE #   
 ATTEMPTED NOT KNOWN  
 MOVED LEFT NO FORWARDING ORDER EXP   
 DATE \_\_\_\_\_

**RECEIVED**  
FEB 20 2001  
Bureau of Air Monitoring  
& Mobile Sources

22





Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

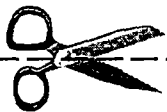
**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



(cut here)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.**

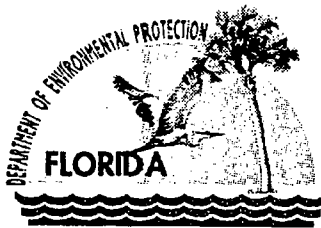
**TOTAL AMOUNT DUE: \$50.00**

**Do NOT Remove Label**

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

AIRS ID # 0112209

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

February 7, 2001

## NOTICE OF ANNUAL EMISSIONS FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that you operate a source of air pollution and that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual emissions fee as established by the Department in Rule 62-213.205, F.A.C.

Your annual emissions fee is \$50 for calendar year **2000**. A notice of your obligation to pay the annual emissions fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual emissions fee in response to that request, please disregard this letter.

If you have not yet submitted the annual emissions fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual emissions fee not received by March 1, 2001, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, under Rule 62-213(1)(g), F.A.C., failure to timely pay any required annual emissions fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads "Dotty Diltz".

Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/DD

Enclosure: Invoice Form

"More Protection, Less Process"

Printed on recycled paper.



POSTAGE  
REQUIRED

TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID#0112209

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL  
33026

2. Article Number

(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**A. Received by (*Please Print Clearly*)

B. Date of Delivery

C. Signature

**X** Agent Addressee

D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

700 02870 000070275067

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

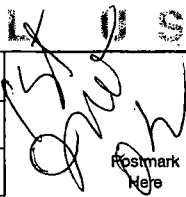
BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**

*(Domestic Mail Only; No Insurance Coverage Provided)*

**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	



Postmark  
Here

AIRS ID#0112209

**Sent To** EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
**Street, Apt. No** PEMBROKE PINES FL  
33026  
**City, State, ZIP**

7000 2870 0000 7027 5067

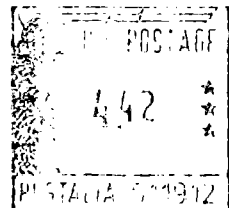
**CERTIFIED MAIL**

MS# 5517 MC Acct # 5927

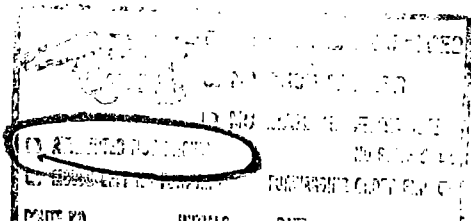
Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400



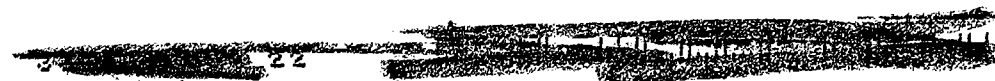
7000 2870 0000 7027 5067



*UK*



**RECEIVED**  
**FEB 18 2003**  
Bureau of Air Monitoring  
& Mobile Sources







Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



(cut here)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.**

**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL  
33026

AIRS ID#0112209

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

February 6, 2003

## NOTICE OF ANNUAL OPERATION FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that you operate a source of air pollution and that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee as established by the Department in Rule 62-213.205, F.A.C.

Your annual operation fee is \$50 for calendar year **2002**. A notice of your obligation to pay the annual operation fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual operation fee in response to that request, please disregard this letter.

If you have not yet submitted the annual operation fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual operation fee not postmarked by **March 1, 2003**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, please be aware that under Rule 62-213.205(1)(g), F.A.C., failure to timely pay any required annual operation fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/JK  
Enclosure: Invoice Form

"More Protection, Less Process"



POSTAGE  
REQUIRED

**TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**

U.S. Postal Service

# CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

7001 0320 0001 7976 2395

## OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark  
Here

**Total Postage**

**AIRS ID # 0112209**

Sent To

EAGLE CLEANER  
FRANK IACOBUCCI

Street, Apt. No.;  
or PO Box No.

10231 PINES BLVD  
PEMBROKE PINES FL

City, State, ZIP+

33026

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID # 0112209

EAGLE CLEANER  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL  
 33026

**COMPLETE THIS SECTION ON DELIVERY**A. Received by *(Please Print Clearly)*

B. Date of Delivery

C. Signature

**X** Agent AddresseeD. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

 No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? *(Extra Fee)* Yes

Article Number (Copy from service label)

7001 0320 0001 7976 2395

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

M  
D  
20

REFUSED  OR CLAIMED

NO SUCH NUMBER

MAIL RECEPTACLE

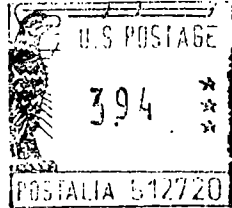
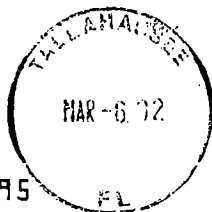
ATTEMPTED NOT KNOWN

NO SUITE #

FORWARDING ORDER EXP

ROUTE NO. \_\_\_\_\_ INITIALS \_\_\_\_\_ DATE \_\_\_\_\_

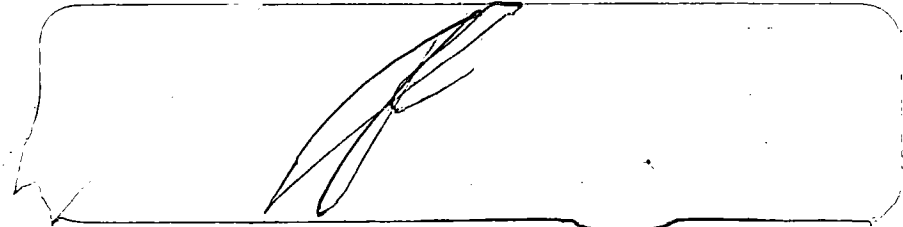
**CERTIFIED MAIL**



Tallahassee FL 32399-2400

9901 0320 0001 7976 2395

*Unknown*



RECEIVED  
MAR 14 2002  
Bureau of Air Monitoring  
& Mobile Sources





Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



(cut here)

**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

**Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.**

**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

AIRS ID # 0112209  
EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL  
33026

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273





Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

March 1, 2002

David B. Struhs  
Secretary

## FINAL NOTICE OF ANNUAL EMISSIONS FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: User of Title V Air General Permit

Records in the Division of Air Resource Management indicate that during calendar year **2001** you owned or operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual emissions fee, as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change in facility status.

The annual emissions fee for your facility is **\$50** for calendar year **2001**. A notice of your obligation to pay the annual emissions fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual emissions fee in response to that request, please disregard this letter.

If you have **not** yet submitted the annual emissions fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual emissions fee not postmarked by **March 1, 2002** may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, under Rule 62-213(1)(g), F.A.C., failure to timely pay any required annual emissions fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Acting Chief  
Bureau of Air Monitoring  
and Mobile Sources

/JK

Enclosure: Invoice Form

"More Protection, Less Process"

Printed on recycled paper.



POSTAGE  
REQUIRED

**TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**

U.S. Postal Service™

**CERTIFIED MAIL™ RECEIPT**

*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

*2nd Cert.*

Postmark  
Here

*2003*

AIRS ID # 112209

Sent to: FRANK IACOBUCCI  
EAGLE CLEANER  
Street or PO: 10231 PINES BLVD  
City, State, ZIP: PEMBROKE PINES, FL 33026

PS Form 3849, April 2002

Instructions

9525 4470 4000 0050 0004 0144 525A

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID # 112209

FRANK IACOBUCCI  
 EAGLE CLEANER  
 10231 PINES BLVD  
 PEMBROKE PINES, FL 33026

2. Article Number

*(Transfer from service label)*

7003 0500 0004 0144 5258

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

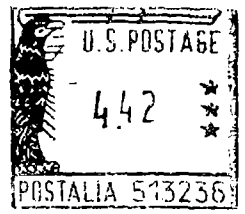
**CERTIFIED MAIL™**

MS# \_\_\_\_\_ 5510 MC Acct # \_\_\_\_\_ 5521

Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400



7003 0500 0004 0144 5258 FL



**RECEIVED**  
MAR 15 2004  
Bureau of Air Monitoring  
& Mobile Sources

*LWK*

<input type="checkbox"/> REFUSED	<input type="checkbox"/> UNCLAIMED
<input type="checkbox"/> NO SUCH NUMBER	
<input type="checkbox"/> NO MAIL RECEIPTABLE	
<input type="checkbox"/> ATTEMPTED NOT DELIVERED	<input type="checkbox"/> NO STATE #
<input type="checkbox"/> NEVER LEFT BY ADDRESSEE	<input type="checkbox"/> FORWARDING ORDER EXP

34



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

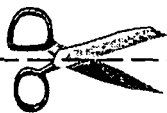
**TO: Holder of Title V Air General Permit**

**Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).**

**For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.**

**Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:**

**Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**



(cut here)

-----  
**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

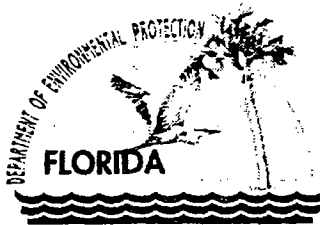
Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

AIRS ID # 112209  
FRANK IACOBUCCI  
EAGLE CLEANER  
10231 PINES BLVD  
PEMBROKE PINES, FL 33026

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



Jeb Bush  
Governor

# Department of Environmental Protection

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

David B. Struhs  
Secretary

March 1, 2004

## NOTICE OF ANNUAL OPERATION FEE VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that you operate a source of air pollution and that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee as established by the Department in Rule 62-213.205, F.A.C.

Your annual operation fee is \$50 for calendar year **2003**. A notice of your obligation to pay the annual operation fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual operation fee in response to that request, please disregard this letter.

If you have not yet submitted the annual operation fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual operation fee not postmarked by **March 1, 2004**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, please be aware that under Rule 62-213.205(1)(g), F.A.C., failure to timely pay any required annual operation fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/JK  
Enclosure: Invoice Form

"More Protection, Less Process"





POSTAGE  
REQUIRED

**TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070**

U.S. Postal Service

# CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

## OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	\$

02  
322  
Postmark  
Here

AIRS ID#0112209

Sent To: EAGLE CLEANER  
Street, or PO: FRANK IACOBUCCI  
10231 PINES BLVD  
City, State: PEMBROKE PINES FL  
33026

PS Form

Instructions

8085 5808  
7001 0320 0001 7976 1000 02E0

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID#0112209

EAGLE CLEANER  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL  
 33026

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

x *Patricia Chulan*  Agent  
 Addressee

B. Received by (Printed Name)

*Patricia Chulan*

C. Date of Delivery

*7/10/03*

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

3. Service Type

- Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

2. Article Number

7001 0320 0001 7976 5808

(Transfer from se.....)

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STOP 15510  
2600 BLAIR WYOME ROAD  
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring  
& Mobile Sources

APR 15 2003

RECEIVED

U.S. Postal Service

# CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

7000 0600 0090 0026 4128 8550



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	\$

Postmark  
Here

AIRS ID # 0112209

Recip **EAGLE CLEANER**  
**FRANK IACOBUCCI**  
Street **10231 PINES BLVD**  
City, St **PEMBROKE PINES FL**  
**33026**

PS Form

Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID # 0112209

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL  
33026

2. Article Number (Copy from service label)

7000 0600 0026 4128 8550

**COMPLETE THIS SECTION ON DELIVERY**

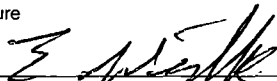
A. Received by (Please Print Clearly)

B. Date of Delivery

2-9-02

C. Signature

X

 Agent Addressee

D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

01



Z 333 667 235

2000

US Postal Service

**Receipt for Certified Mail**

Minimum Guarantee Provided

AIRS ID # 0112209

EAGLE CLEANER  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL 33026

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>

Postmark or Date

PS Form 3800, April 1995



U.S. Postal Service

# CERTIFIED MAIL RECEIPT

*(Domestic Mail Only; No Insurance Coverage Provided)*

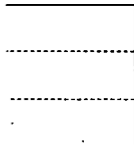
7000 0600 0026 4128 9214 9649



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark  
Here

10                      AIRS ID # 0112209001AG  
FRANK IACOBUCCI  
EAGLE CLEANER  
10231 PINES BLVD  
PEMBROKE PINES FL 33026



See Reverse for Instructions

U.S. Postal Service

# CERTIFIED MAIL RECEIPT

*(Domestic Mail Only; No Insurance Coverage Provided)*

7000 0600 0090 0000 0026 9200 4127 4546



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark  
Here

Total P<sub>c</sub>

AIRS ID # 0112209

<i>Recipient</i>	EAGLE CLEANER
<i>Street, Ap</i>	FRANK IACOBUCCI 10231 PINES BLVD
<i>City, State</i>	PEMBROKE PINES FL 33026

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

**3. Article Addressed to:**

AIRS ID# 0112209

C&I SOUTHEAST INC  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

**4a. Article Number**

2 333613 116

**4b. Service Type**

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

**7. Date of Delivery**

4-8

**5. Received By: (Print Name)****8. Addressee's Address (Only if requested and fee is paid)****6. Signature: (Addressee or Agent)**

X

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring  
& Mobile Sources

APR 10 1998

RECEIVED



Z 333 613 116

US Postal Service

# Receipt for Certified Mail

AIRS ID# 0112209

C&I SOUTHEAST INC  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>

Postmark or Date

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

**3. Article Addressed to:**

AIRS ID 0112209

C&I SOUTHEAST INC  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL 33026

**4a. Article Number**

2333 613 205

**4b. Service Type**

- Registered  Certified
- Express Mail  Insured
- Return Receipt for Merchandise  COD

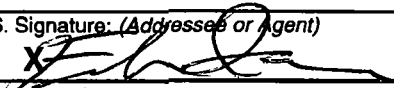
**7. Date of Delivery**

2-14-98

**5. Received By: (Print Name)**

**8. Addressee's Address (Only if requested and fee is paid)**

**6. Signature: (Addressee or Agent)**



Thank you for using Return Receipt Service

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

● Print your name, address, and ZIP Code in this box ●

DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400



Z 333 613 205

US Postal Service

# Receipt for Certified Mail

No Insurance Coverage Provided.

AIRS ID 0112209

C&I SOUTHEAST INC  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995



Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Fold at line over top of envelope to address

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

AIRS ID#: 0112209

C&I SOUTHEAST INC  
 FRANK IACOBUCCI  
 10231 PINES BLVD  
 PEMBROKE PINES FL 33026

4a. Article Number

P 265-302-348

4b. Service Type

- |   |   |
|---|---|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

2-15

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X 

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

81



P 265 302 348

US Postal Service

# Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (*See reverse*)

AIRS ID#: 0112209

C&I SOUTHEAST INC  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>

Postmark or Date

2/13/97

PS Form 3800, April 1995

U.S. Postal Service™

**CERTIFIED MAIL™ RECEIPT**

*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

Postage \$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Postmark  
Here

AIRS ID# 112209 1stC

EAGLE CLEANER

10231 Pines Blvd

PEMBROKE PINES, FL 33026

7003 0500 0004 0144 5913  
ET65 44TD 4000 0050 E002

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

DARMMOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

Mobile Source  
Air Monitor

FEB 10 2005

RECEIVED

01



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if *Restricted Delivery* is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID# 112209 1stC  
 EAGLE CLEANER  
 10231 Pines Blvd  
 PEMBROKE PINES, FL 33026

2. Article Number

*(Transfer from service label)*

7003 0500 0004 0144 5913

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Kurt B.* Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

2/7

D. Is delivery address different from item 1?  YesIf YES, enter delivery address below:  No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

U.S. Postal Service™

**CERTIFIED MAIL™ RECEIPT**

*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

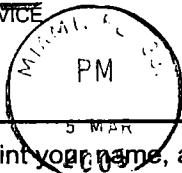
Postage	\$	Postmark Here
- Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total AIRS ID#0112209.....2<sup>nd</sup> Cert 05

Sent to  
EAGLE CLEANER  
10231 Pines Blvd  
PEMBROKE PINES, FL 33026  
Street, or PO  
City, S

7004 2510 0002 3936 7492

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS ~~7125~~ and  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

DARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STOP 03E10  
2600 BLANKENHORN ROAD  
TALLAHASSEE, FLORIDA 32399-2400

U.S. AIR MAIL  
Mobile Source

MAR 7 2005

CEIVE!

32399/2400





**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID#0112209.....2<sup>nd</sup> Cert 05  
 EAGLE CLEANER  
 10231 Pines Blvd  
 PEMBROKE PINES, FL 33026

2. Article Number

7004 2510 0002 3938 7492

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

x *Cheryl King*

- 
- Agent
- 
- 
- Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

 D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

- 
- Certified Mail
- 
- Express Mail
- 
- 
- Registered
- 
- Return Receipt for Merchandise
- 
- 
- Insured Mail
- 
- C.O.D.

4. Restricted Delivery? (*Extra Fee*) Yes

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0355899

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

AIRS ID # 0112209

EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

FOR GOVERNMENT USE ONLY  
Org.: 3755010100 EO: B1  
Fund: 20-2-035001  
Obj.: 002273

RECEIVED  
MAIL ROOM  
DEC 31 98

Vendor ID :

Name : DEPT. OF ENVIRONMENTAL PROTECTION

Check Date : 12/29/98

Check Amount : 50.00

MEMO:

ANNUAL OPERATION FEE AIRS ID#0112209

TITLE V AIR GENERAL PERMIT

EAGLE CLEANERS @ 10231 PINES BLVD.

PEMBROKE PINES, FL 33026

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

262304 ✓

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

RECEIVED  
MAIL ROOM

MAR -3 97

**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

AIRS ID#: 0112209  
C&I SOUTHEAST INC  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj: 002273

C & I Southeast D/B/A Eagle Cleaners  
4960 S.W. 72nd. Ave. Suite 401, Miami, FL 33155

61507

Vendor ID :

Name : DEPARTMENT OF ENVIRONMENTAL PROTECTION

Check Date : 2/26/97

Check Amount : 50.00

MEMO:

AIRS ID# 0112209

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0392326  
✓

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

AIRS ID # 0112209  
EAGLE CLEANER  
FRANK IACOBUCCI  
10231 PINES BLVD  
PEMBROKE PINES FL 33026

FOR GOVERNMENT USE ONLY  
Org.: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj.: 002273

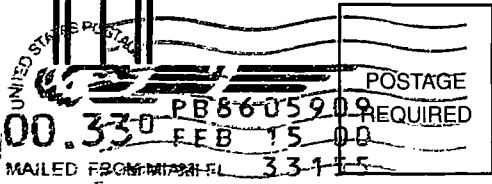
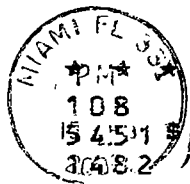
RECEIVED  
MAIL ROOM  
FEB 18 2001

Vendor ID : Name : DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Check Date : 2/14/00  
Check Amount : 50.00

MEMO:

TITLE V AIR GENL PERMIT  
ANNUAL OPERATION FEE FOR 2000  
AIRS ID# 0112209

C&I Southeast, Inc.  
dba Eagle Cleaners  
4960 SW 72 Avenue, #401  
Miami, FL 33155



TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070

32315-3070  
32315-3070

