

### Department of Environmental Protection

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

Virginia B. Wetherell Secretary

September 18, 1996

Mr. Nagui Zarifa Vice President Dry Clean'N Save 2238 University Drive Coral Springs, Florida 33071

Dear Mr. Zarifa:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 16, 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 is 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



### Department of Environmental Protection

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

David B. Struhs Secretary

July 3, 2001

Mr. Nagui R. Zarifa Dry Clean N Save 2238 University Drive Coral Springs, Florida 33071

Dear Mr. Zarifa:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on July 2.

In reviewing your submittal, it was noted that Dry Clean N Save elected to surrender its existing Title V air general permit (AIRS ID 0112215). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 850/921-9583.

Sincerely,

Sandra Bowman

Bureau of Air Monitoring and Mobile Sources

SB/

Enclosure

cc: Mr. Jarrett Mack, Broward County

"More Protection, Less Process"

Printed on recycled paper.

### #0112215

Dry Clean N'Save
-spoke with Nagui Zarifa-8/29/96
p.13 le. need new title - Sec / Tres.
p.14 1.(c) markout "v" and initial
p.14 1.(c) markout "v" and initial p.15 5.(f) required
·

#### Perchloroethylene Dry Cleaning Facility Notification

#### **Facility Name and Location**

	· ·	
1.	Facility Owner/Company Name (Name of corporation, agency, or individ-	ual owner):
	RAFIK ZARIFA INC.	
2.	Site Name (For example, plant name or number):	
	DRY CLEAN N'SAVE	
3.	Hazardous Waste Generator Identification Number:	
	FLD 982 078 883	,
4.	Street Address:	
	City: CORIL S PRINGS County: BROWARD	Zip Code: 33071
5.	Facility Identification Number (DEP Use):	
4.3865	Responsible Official	in the company of policy states and states a
	·	
(6)	Name and Title of Responsible Official:	
	NAGUI ZARIFA (W.P.)	
7.	Responsible Official Mailing Address: Organization/Firm: Dev CLEAN N SAVE	
	Street Address: 2238 UNIVENSITY DANKE	
	City: Count SPRINGS County: Browns	Zip Code: 33071
8.	Responsible Official Telephone Number:	
	Telephone: $(954)753-4653$ Fax: ()	<del>_</del>
	Facility Contact (If different from Responsible O	fficial)
9.	Name and Title of Facility Contact (For example, plant manager):	
10.	Facility Contact Address:	
	Street Address: City: County:	7in Codo:
	City: County:	Zip Code:
11.	Facility Contact Telephone Number:	
	Telephone: ( ) - Fax: ( )	-
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AUG 1 6 1996

DEP Form No. 62-213.900(2) Effective: 6-25-96

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Bureau of Air Monitoring & Mobile Sources

#### **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
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9.
Dry-to-Dry Unit	4	Day 7.	DNY		DM 7	. pry	2 H.C.		
(1) w/ ref. condenser	(1)	1889	1989	(2)	1965	19 69			
(2) w/ carbon adsorber									
(3) w/ no controls						٠			
Washer Unit	: [# §]	4.4.			in examining f	And the second	g Mi	i ni ya bisi	
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit				Marije.			$\omega_{k}$		ÎtriAVÎ.
(7) w/ ref. condenser									
(8) w/ carbon adsorber				,		_			
(9) w/ no controls									_
Reclaimer Unit	÷Ų.	ar in it is	19-12 PAPE	TW			itili sidi. Wilang		
(10) w/ ref. condenser									
(11) w/carbon adsorber									_
(12) w/ no controls		-							
(b) Control devices are  (c) No control devices  2.(a) What was the total of the control of the control devices  (b) If less than 12 montrol of the control	are requanting gallo	equired to be ty of perchlons ow many? [_	installed [_ oroethylene (	(perc)	purchased in				
3. What is the facility's so (Indicate with an "X".	Selec	t one classifi	cation only.)	)		·	3) of	Part II?	
Existing small ar Existing large are			/		nall area sour	<u> </u>	] ]		
, and a second	500		111	141	aa soul		,		

DEP Form No. 62-213.900(2)

<ol> <li>What control technology is required on machines (Indicate with an "X".)</li> </ol>	oursuant to section (5) of P	art II of this notification form?
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 uto Rule 62-213.300, F.A.C. Verify that all steam and exemption criteria or that no such units exist on-site:		
All steam and hot water generating units on-site (1) to boiler HP or less), and (2) are fired exclusively by no during which propane or fuel oil containing no more	atural gas except for period	ls of natural gas curtailment
All steam and hot water generating units exempt No such units on-site		
•		
Equipment Monitoring a	nd Recordkeeping Inform	nation
Check all logs which are required to be kept on-site i	n accordance with the requ	irements of this general permit:
(a) Purchase receipts and solvent purchases		رکت
(b) Leak detection inspection and repair		ك
(c) Refrigerated condenser temperature monitoring		
(d) Carbon adsorber exhaust perc concentration mon	itoring	
(e) Instrument calibration		
(f) Start-up, shutdown, malfunction plan		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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

Please indicate	e 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
this notific statements maintain i	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to this and conditions of this general permit as set forth in Part II of this notification form.
I will proi	nptly notify the Department of any changes to the information contained in this notification.
Signature	8/8/9C
NAC U	Date

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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

258535

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

RECEIVED

MAIL ROOM

JAN 21 97

**TOTAL AMOUNT DUE: \$50.00** 

Do NOT Remove Label

AIRS ID# 0112215

RAFIK ZARIFA INC NAGUI ZARIFA 2238 UNIVERSITY DRIVE **CORAL SPRINGS FL 33071**  FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

	BEST AVAILABLE CUPT
TIME IN: 2:30TIME OUT:	30 (IRS ID#: 01/22_15
TYPE OF FACILITY: Dry cleaners	
FACILITY NAME: Dry Clean 'N Save	DATE: 10-17-97
FACILITY LOCATION: 2238 University D	rive
Coral Springs Flo	
RESPONSIBLE OFFICIAL: Nagui Zarifa	PHONE NUMBER: 753-4653
Based on the results of the compliance requirements e compliance with DEP Rule 62-213.300, Florida Admi	valuated during this inspection, the facility is found to be in inistrative Code (F.A.C.).
Based on the results of the compliance requirements e discrepancies were noted:	valuated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	follow-up action required
· · · · · · · · · · · · · · · · · · ·	
•	
COMMENTS	
COMMENTS:	
* Concrete Dute enclosing on time	met oreas - separate machine & Chamical.
·	
The Annual Compliance Certification form has been properly	
DATE OF NEXT INSPECTION: Octob	(Approximate)
INSPECTION CONDUCTED BY: Bob 7	
The second section of the second seco	(Please Print)
INSPECTOR'S SIGNATURE: Bob Th	9m03 PHONE NUMBER: 519-1459
	# 6
Pa	ge <sup>i</sup> of Revised 10/9

## TITLE V GENERAL PERMITCOMPLIANCE INSPECTION CHE( LIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY

RE-INSPECTIO	
	97 TIME IN: 2:30 TIME OUT: 3:30
FACILITY NAME: Dry Clean 'N	
FACILITY LOCATION: 2238 Unive	rsity Drive
_ Coral Sprin	19s Florida 33071
RESPONSIBLE OFFICIAL: No qui Z	arifa PHONE: 753-4653
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	rtup
2. Facility failed to notify DARM to use general pe	rmit 🗆
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form ☐ 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)	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)
3. Existing large area source dry-to-dry only, $140 \le x \le 2.100$ gal/yr transfer only, $200 \le x \le 1.800$ gal/yr both types, $140 \le x \le 1.800$ gal/yr (constructed before $12/9/91$ )	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,300$ gal/yr both types, $140 \le x \le 1,300$ gal/yr (constructed on or after $12/9/91$ )
5. This is a correct facility classification	□Y □N □Can not determine
☐ facility exceeds above lin	cation:  neral permit as number above  nits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) p	urchased within the preceding 12 months by this dry cleaning

P.	ART III: GENERAL CONTROL RI	IREMENTS	(
	the responsible official of the dry cleani neck appropriate boxes)	ing facility:	
1.	Storing perchloroethylene in tightly seale	ed and impervious containers?	ZY ON ON/A
2.	Examining the containers for leakage?		MY ON ON/A
3.	Closing and securing machine doors exce	ept during loading/unloading?	NO YES
4.	Draining cartridge filters in their housing least 24 hours prior to disposal?	g or in sealed containers for at	ay on on/a
5.	Maintaining solvent-to-carbon ratios and beds according to the manufacturer's spe	steam pressure for carbon adsorber cifications?	םץ מם אם AVA

PART IV:	PROCE	SS VENT	CONTROLS

In Pa	rt 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 eithe condenser or a carbon adsorber (complete A and B below). Carbon adsorber minstalled prior to September 22, 1993	-			
	If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	rigerated condenser			
	A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)				
1. Ec	quipped all machines with the appropriate vent controls?	QY □N			
2. Ec	quipped dry-to-dry machines with a closed-loop vapor venting system?	AY ON ON/A			
	quipped the condenser with a diverter valve so airflow will be directed away from the ndenser upon opening the door?	₫y On On/a			
	easured and recorded the temperature of the outlet exhaust stream of a refrigerated ndenser on a weekly/bi-weekly basis?	שאַ טא			
	epaired or adjusted the equipment within 24 hours if the exhaust temperature of the indenser exceeded 45°F?	ZY ON ON/A			
11	onducted all temperature monitoring after an appropriate cooldown period and after rifying that the coolant had been completely charged?	ZÝ ON			

B.	Has the responsible official of an existing large or new large area source also:				1
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?	ΟY	ΩΝ		
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ПN	□n/a	
	Is the temperature differential equal to or greater than 20° F?	ΩY	ПИ	ON/A	10.1
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?	ΩY	пΩ	□N/A	11.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.
	Is the perc concentration equal to or less than 100 ppm?	$\Box \lambda$	ΠN	□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,				1 1 1 1 1 1 1
	or expansion; and downstream from no other inlet?	ΠY	N	□N/A.	i
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ПN	□N/A	1
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	אם	□N/A	
					7
=	ART V: RECORDKEEPING REQUIREMENTS				
	as the responsible official: heck appropriate boxes)				
ı.	Maintained receipts for perc purchased?	PY	ПΝ		1
2.	Maintained rolling monthly averages of perc consumption?	DY	ΠN		
3.	Maintained leak detection inspection and repair reports for the following:				
	a. documentation of leaks repaired w/in 24 hrs? or;	ØY	ПN	□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?	er	ΠN	□N/A	

AY ON ON/A

AVAD NO YS

AVAD ND YE

MY ON ON/A

AND ND YE

ZY ON

and parts installed w/in 5 days of receipt?

4. Maintained calibration data? (for applicable direct reading instruments)

6. Maintained startup/shutdown/malfunction plan?

8. Maintained compliance plan, if applicable?

7. Maintained deviation reports?

Problem corrected?

5. Maintained exhaust duct monitoring data on perc concentrations?

#### PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official cond. a weekly (for small sources, bi-weekly) leak detection and repair inspection? ÐΥ ПN 2. Has the facility maintained a leak log? PY $\square N$ 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, ZY ON ON/A BY ON ON/A couplings, and valves Muck cookers Door gaskets and seating DY ON ON/A Stills DY ON ON/A DY ON ON/A Filter gaskets and seating DY ON ON/A Exhaust dampers ZY ON ON/A Diverter valves DY ON ON/A Pumps MY ON ON/A Cartridge filter housings AY ON ON/A Solvent tanks and containers ZY ON ON/A Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Ø Physical detection (airflow felt through gaskets) $\mathbf{z}$ Odor (noticeable perc odor) Ø Use of direct-reading instrumentation (FID/PID/calorimetric tubes) a Halogen leak detector DN/A If using direct-reading instrumentation, is the equipment: DY DN a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use DY DN (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? OY ON DY DN e. Verified for accuracy by use of duplicate samples (calorimetric only)? Bob Thomas nspector's Name (Please Print) October 17, 1997 Date of Inspection

Inspector's Name (Please Print)

Detober 17, 1777

Date of Inspection

Detober 1998

Approximate Date of Next Inspection

FACILITY NAME:	y Clean 'N S	a ve	FICAT N	•	: 10-17-97
FACILITY LOCATION:	<b>,</b>				
	Coral Springs	•			
Annual Reporting Period:	October	19 <u>96</u>	то	October	19.97
Based on each term or condition 52-213.300, Florida Administra				<u> </u>	EP Rule
f NO, complete the following:	eneral permit that has not be	en in continuous	compliance du	ring the reporting per	iod stated above:
Exact period of non-compliance	:: from		to		
Action(s) taken to achieve comp	pliance:				
Nethod used to demonstrate con	mpliance:				
#2. Term or condition of the ge	eneral permit that has not be	een in continuous	compliance di	uring the reporting per	iod stated above:
Exact period of non-compliance	e: from		to		
•		,	to		
Exact period of non-compliance Action(s) taken to achieve comp	pliance:		to		

\*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.

RESPONSIBLE OFFICIAL: NAGUI ZARIFA
Name (Please Print)

Page \_\_\_\_ of .

RECEIVED

NOV 1 2 1997

Bureau of Air Monitoring & Mobile Sources

DRY CLEANER AIR QUALITY GENERAL PERMIT

ANNUAL COMPLIANCE CERTIFICATION FORM AIRS ID#0112215 RAFIK ZARIFA INC NAGUI ZARIFA 2238 UNIVERSITY DRIVE CORAL SPRINGS FL 33071 Do NOT Remove Label JANVAN Annual Reporting Period: 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.  $\square$ 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 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 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: NAGUI R. ZAKIFA
Name (Please Print)

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

#### **BEST AVAILABLE COPY**

Hig \*

Revised 09/15/97

### AIRS ID#: 0112215

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

FACILITY NAME: Dry C	lean'N Save	·	DATE: 12/08/98
FACILITY LOCATION: 223	8 University	Drive	
Coro	<i>/</i> ·	Vouida 33	071
Annual Reporting Period:	. 1997 19	TO Dec.	1998 19
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F	•	-	
If NO, complete the following:			
#1. Term or condition of the general permit	t that has not been in continue	ous compliance during th	e reporting period stated above:
Exact period of non-compliance: from		to	75
Action(s) taken to achieve compliance:		<	E VI
Method used to demonstrate compliance:			La L
#2. Term or condition of the general permi	t that has not been in continu	ous compliance during th	e reporting period stated 100 v2:
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, made in this notification are true, accurate upon purchase receipts, does not exceed 2, combination facilities.	and complete. Further, my a 100 gailons per year for dry-	nnual consumption of pe o dry facilities or 1,300 g	rchloroethyiene solvent, tasea
	AQUI ZARJÝ LIME (Please Print)	Sig <del>natur</del>	e 12/00/9

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

			BEST AVAILABLE COPY
TYPE OF INSPECTION: ANNUA	AL X COM?	LAINT/DISCOVERY [	RE-INSPECTION [
N 41	MEOUT: 11:30 a	a. in AIRS ID#: _ C	0112215
FACILITY NAME: Dry Cle	can'N Sar	.J L	DATE: 12/08/98
FACILITY LOCATION: 223	8 Universi	Ty 124 ve	
RESPONSIBLE OFFICIAL: NAQ	41 ZAFIRA	PHOME NUMBER	(954) \$53-4653
Based on the results of the compliance with DEP Rule 62-213  Based on the results of the compliance	3.300, Florida Administrat	ive Code (F.A.C.).	-
discrepancies were noted:			
COMPLIANCE REQUIREME	NT/PROBLEM	FOLLOW-UP ACT	ION REQUIRED
Facility is in	compliance	?	
)			
		-	
	: -		
COMMENTS:			
•			
The Annual Compliance Certification form			0-4 X3237 .nd
DATE OF NEXT INSPECTION:	Dee. 19	999 proximate)	
INSPECTION CONDUCTED BY:	OCTAVIA.	N OPRIS	1
INSPECTOR'S SIGNATURE:	A.t.	PHONE NUMBER	(954) 519-1470
	Page 2	<u>2</u> of <u>2</u> .	Revises 10 PE

#### PERCHLOROETHYLENE DRY CLEANERS

### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	<b>∑</b> co	MPLAINT/DISCOVERY	
	RE-INSPECTION			
AIRS ID#: 01/22/5 D.	ATE: 12/08/9	TIME IN: 5	7:30 9. 44 TIME OUT: _	11:30 cr. w
FACILITY NAME: Du	, Clean 's	1 Save		
FACILITY LOCATION:	2238 W	u versi	, -	71_
	Coul Sp	ing F	Posida	
RESPONSIBLE OFFICIAL : _	Nagui Za	fico PH	ONE: <u>954-753</u>	3-4653
CONTACT NAME:		PH	ONE:	
PART I: NOTIFICATION				
(check appropriate box)				
1. New facility notified DARM 30	0 days prior to startup			۵
2. Facility failed to notify DARM	to use general permit			
f				
PART II: CLASSIFICATION				
Facility indicated on notification (check appropriate box)	n form that it is:		No notification form Drop store/out of business/pe	etroleum
A.			5.0p 3.01.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Ja Ortolani
1. Existing small area source		New small area s		
dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr		to-dry only, $x < 1$	.40 gal/yr	
I transfer only, it is not gar yr	tran	sfer only $x < 200$		
		sfer only, $x < 200$ types, $x < 140$ g	) gal/yr	
both types, x < 140 gal/yr (constructed before 12/9/91)	both	sfer only, $x \le 200$ types, $x \le 140$ g structed on or af	) gaVyr aVyr	
both types, x < 140 gal/yr	both (cor	types, x < 140 g estructed on or af	) gal/yr al/yτ ter l2/9/9l)	
both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 \le x \le 2,10	both (cor	n types, x < 140 g istructed on or af New large area s ito-dry only, 140	) gal/yr al/yr der 12/9/91) ource □ ≤ x ≤ 2,100 gal/yr	
both types, $x < 140$ gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, $140 \le x \le 2,10$ transfer only, $200 \le x \le 1,800$	both (cor 2 4. i 30 gal/yr dry- gal/yr tran	types, x < 140 g structed on or af  New large area s  to-dry only, 140 sfer only, 200 \( \)	) gal/yr al/yr ter 12/9/91) <b>ource</b> ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr	
both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 \le x \le 2,10 transfer only, 200 \le x \le 1,800 both types, 140 \le x \le 1,800 ga	both (cor  2 4. i 00 gal/yr dry- gal/yr tran ll/yr both	types, $x \le 140$ g istructed on or af New large area sto-dry only, 140 sfer only, 200 $\le x$ types, $140 \le x \le 140$	) gal/yr al/yτ ter 12/9/91)  ource  ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yτ 1,800 gal/yτ	
both types, $x < 140$ gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, $140 \le x \le 2,10$ transfer only, $200 \le x \le 1,800$	both (cor  2 4. i 00 gal/yr dry- gal/yr tran ll/yr both	types, x < 140 g structed on or af  New large area s  to-dry only, 140 sfer only, 200 \( \)	) gal/yr al/yτ ter 12/9/91)  ource  ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yτ 1,800 gal/yτ	
both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 \le x \le 2,10 transfer only, 200 \le x \le 1,800 both types, 140 \le x \le 1,800 ga	both (cor 2 4. i 00 gal/yr dry- gal/yr tran ll/yr both (cor	a types, $x < 140$ g istructed on or af New large area sto-dry only, $140$ sfer only, $200 \le x \le 140$ stypes, $140 \le x \le 140$ structed on or af	) gal/yr al/yτ ter 12/9/91)  ource  ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yτ 1,800 gal/yτ	
both types, $x < 140$ gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, $140 \le x \le 2,10$ transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ ga (constructed before $12/9/91$ )	both (cor 2 4. if 00 gal/yr dry- gal/yr tran ll/yr both (cor ssification	A types, $x < 140$ g istructed on or affine large area sto-dry only, 140 sfer only, 200 $\leq$ a types, $140 \leq x \leq$ istructed on or affine large.	) gal/yr al/yr ter 12/9/91)  ource ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr ter 12/9/91)	
both types, $x < 140$ gal/yr (constructed before $12/9/91$ )  3. Existing large area source dry-to-dry only, $140 \le x \le 2,10$ transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ ga (constructed before $12/9/91$ )  5. This is a correct facility class of the please check the approximate the property of the pr	both (cor  2	A types, x < 140 g istructed on or af  New large area s ito-dry only, 140 sfer only, 200 \leq x types, 140 \leq x \leq istructed on or af  \textsquare	0 gal/yr al/yτ ter (2/9/91)  ource ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yτ (1,800 gal/yτ ter (12/9/91)  Can not determine	
both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility class from please check the approximately facility facility	both (cor  2 4. 1 00 gal/yr dry- gal/yr tran to cor ssification  pyy opropriate classification qualified for a general exceeds above limits ar	A types, x < 140 g istructed on or af New large area sto-dry only, 140 sfer only, 200 \leq x \leq types, 140 \leq x \leq tstructed on or af \leq N \leq 0 \leq x \leq tstructed on or af \leq N \leq 0 \leq x \leq tstructed on or af the types, 140 \leq x \leq tstructed on or af the types is not eligible to the types is not eligible to the types is not eligible.	ource  \( \leq \times \frac{2}{3}\)  ource  \( \leq \times \frac{2}{3}\)  \( \leq \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}{3}\)  \( \leq \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}\)  \( \leq \times	
both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility class of the approximate the approximate of the property of the provided that the provided the provided that the	both (cor  2 4. 1 00 gal/yr dry- gal/yr tran to cor ssification  pyy opropriate classification qualified for a general exceeds above limits ar	A types, x < 140 g istructed on or af New large area sto-dry only, 140 sfer only, 200 \leq x \leq types, 140 \leq x \leq tstructed on or af \leq N \leq 0 \leq x \leq tstructed on or af \leq N \leq 0 \leq x \leq tstructed on or af the types, 140 \leq x \leq tstructed on or af the types is not eligible to the types is not eligible to the types is not eligible.	ource  \( \leq \times \frac{2}{3}\)  ource  \( \leq \times \frac{2}{3}\)  \( \leq \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}{3}\)  \( \leq \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}{3}\)  \( \leq \times \frac{2}\)  \( \leq \times	ry cleaning

#### Is the responsible official of the dry cleaning facility: (check appropriate boxes) AVAC NO YKA 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? AMD ND YX MD YK 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at MY ON ONA least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? AND NO YOU 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) MD YOU 1. Equipped all machines with the appropriate vent controls? A'NO NO YOU 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the MY ON ONA condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? $\Delta X \cap \Delta X$ 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? XY ON ONA 6. Conducted all temperature monitoring after an appropriate cooldown period and after MD Y**K** verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

В.	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?	<b>Ø</b> Y	ΩΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	<b>0</b>	ΩΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	<b>P</b> Y	ПИ	□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,			<b></b> .
	if machines are equipped with a carbon adsorber?			XIN/A
	Is the perc concentration equal to or less than 100 ppm?	ПY	ПN	<b>M</b> 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?	<b>⊠</b> Y	ПИ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	QΥ	ΩΝ	<b>⊠</b> N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	βAY	ПΝ	□N/A

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	AN ON			
2. Maintained rolling monthly total of perc consumption?	ØYY □N			
3. Maintained leak detection inspection and repair reports for the following:				
a. documentation of leaks repaired w/in 24 hrs? or;	AND NO YES			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	AND ND YMD			
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON MANA			
5. Maintained exhaust duct monitoring data on perc concentrations?	ANIKA NO YO			
6. Maintained startup/shutdown/malfunction plan?	ØY □N			
7. Maintained deviation reports?	OY ON MANA			
Problem corrected?	OY ON MANA			
8. Maintained compliance plan, if applicable?	OY ON MANA			

P.	PART VI: LEAK DETECTION AND REPAIRS				
1.	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
	inspection?			ÀZY □N	
2.	Has the facility maintained a leak log?			May □N	
3.	Does the responsible official check the	following areas for leaks	5?		
	Hose connections, fittings, couplings, and valves	GAY ON ON/A	Muck cookers	AND ND YA	
	Door gaskets and seating	ØY ON ON/A	Stills	MY ON ONA	
	Filter gaskets and seating	XY ON ONA	Exhaust dampers	MY ON ONA	
	Pumps	DAY ON ONA	Diverter valves	אוא אל אם צם	
	Solvent tanks and containers	ALL ON ONA	Cartridge filter housings	אוחם אם אמ	
	Water separators	DAY ON ON/A			
4.	Which method of detection is used by	the responsible official?		·	
	Visual examination (condensed s	solvent on exterior surfac	es)	k <del>∕</del>	
	Physical detection (airflow felt th	rough gaskets)		8	
	Odor (noticeable perc odor)			<u> </u>	
	Use of direct-reading instrument	ation (FID/PID/calorimet	tric tubes)	U N/A	
	Halogen leak detector			D N/N	
	If using direct-reading inst	rumentation, is the equi	pment:	□N/A	
	a. Capable of detecting	perc vapor concentration	ns in a range of 0-500 ppm?	אם אם	
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	l after each use	מע מע	
	c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	ND YD	
	d. Kept in a clean and s	secure area when not in u	ıse?	אם אם	
	e. Verified for accuracy	by use of duplicate samp	ples (calorimetric only)?	OY ON	

OCTAVIAN OPRIS	12/08/98
Inspector's Name (Please Print)	Date of Inspection
J. A	Dec. 1999
L'inspector's Signature	Approximate Date of Next Inspection

#### PERCHLOROETHYLENE DRY CLEANERS

#### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	<u>a</u>	COMPLAINT/DISC	COVERY Q
AIRS ID#: <u>0112215</u> D FACILITY NAME: DRY	, ,		: <u>//:30</u> tim	Œ OUT: <u>/2:00</u>
FACILITY LOCATION:	•	RSity [	DRIVE PA	33071
RESPONSIBLE OFFICIAL : _	NAGUI ZAR	RIFA		
PART I: NOTIFICATION			72	
(check appropriate box)			Bu 1	
1. New facility notified DARM 3	0 days prior to startup		Bureau Bureau	
2. Facility failed to notify DARM	l to use general permit		IN TO	
			52 5	
PART II: CLASSIFICATION			ur of the control of	
PART II: CLASSIFICATION  Facility indicated on notification (check appropriate box)  A.	n form that it is:		☐ No notification fo☐ Drop store/out of	
Facility indicated on notification (check appropriate box)	e 🗆 2. I dry- tran both	New small are to-dry only, x sfer only, x < 1 types, x < 14 istructed on o	□ No notification fo □ Drop store/out of ea source < 140 gal/yr 200 gal/yr	
Facility indicated on notification (check appropriate box)  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	dry- tran both (con bogal/yr gal/yr tran both tran both	to-dry only, x sfer only, x < 1 types, x < 14 istructed on o  New large are to-dry only, 1 sfer only, 200 i types, 140 <	□ No notification fo □ Drop store/out of ea source < 140 gal/yr 200 gal/yr 10 gal/yr r after 12/9/91)	business/petroleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 gal/yr	dry- tran both (con  2. If dry- tran both (con  3. If dry- tran both (con  4. If 00 gal/yr gal/yr tran both (con	to-dry only, x sfer only, x < 1 types, $x < 14$ istructed on o  New large are to-dry only, 1 sfer only, 200 in types, $140 \le 1$ istructed on o	No notification fo  Drop store/out of  ea source  1 < 140 gal/yr  200 gal/yr  10 gal/yr  r after 12/9/91)  ea source  40 ≤ x ≤ 2,100 gal/yr  x ≤ 1,800 gal/yr  x ≤ 1,800 gal/yr	business/petroleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility class If no, please check the ap facility	dry- tran both (con  2. I  dry- tran both (con  3. I  dry- tran both (con  3. I  Con  4. I  Con  Graphyr gal/yr tran (con  gsification	to-dry only, x sfer only, x < 1 types, x < 14 istructed on o  New large are to-dry only, 1 sfer only, 200 istructed on o  DN  DN  permit as num	No notification fo  □ Drop store/out of  ea source  1 < 140 gal/yr  200 gal/yr  10 gal/yr  r after 12/9/91)  ea source  40 ≤ x ≤ 2,100 gal/yr  x ≤ 1,800 gal/yr  x ≤ 1,800 gal/yr  r after 12/9/91)  □ Can not determine	business/petroleum

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) MY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DAY DIN DIN/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at MY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? 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? MY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the OY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MY ON ON/A condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

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?	<b>⊠</b> Ý	ΩΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ПN	ØN/A
	Is the temperature differential equal to or greater than 20° F?	ПY	ПΝ	□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?	ΟY	□и	ŒŃ/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	□и	⊡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?	ΟY	□и	⊠N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	□и	⊠N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	<b>O</b> Y	□N	ØN/A

P	PART V: RECORDKEEPING REQUIREMENTS				
J	Has the responsible official: (check appropriate boxes)				
1.	Maintained receipts for perc purchased?	DAY DN			
2.	Maintained rolling monthly total of perc consumption?	ØY □N			
3.	Maintained leak detection inspection and repair reports for the following:				
	a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ON/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?	ØY □N □N/A			
4.	Maintained calibration data? (for applicable direct reading instruments)	OY ON WAYA			
5.	Maintained exhaust duct monitoring data on perc concentrations?	OY ON ØN/A			
6.	Maintained startup/shutdown/malfunction plan?	oy on			
7.	Maintained deviation reports?	OY ON BÍN/A			
	Problem corrected?	OY ON ON/A			
8.	Maintained compliance plan, if applicable?	DY DN MIN/A			

17/	PART VI. LEAR DETECTION AND REPAIRS						
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
	inspection?			GY ON			
2.	Has the facility maintained a leak log?			orý on			
3.	Does the responsible official check the	following areas for leaks	<b>?</b> ?				
	Hose connections, fittings, couplings, and valves	ØY ON ON/A	Muck cookers	ery on on/a			
	Door gaskets and seating	DY ON ON/A	Stills	dy on ona			
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	MY ON ON/A			
	Pumps	OY ON ON/A	Diverter valves	MY ON ON/A			
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	DY ON ON/A			
	Water separators	Y ON ON/A					
4.	Which method of detection is used by t	he responsible official?					
	Visual examination (condensed s	olvent on exterior surface	es)	TE .			
	Physical detection (airflow felt th	rough gaskets)		<b>12</b>			
	Odor (noticeable perc odor)			G			
	Use of direct-reading instrumenta	ation (FID/PID/calorimet	ric tubes)				
	Halogen leak detector						
	If using direct-reading instr	umentation, is the equi	pment:	MN/A			
	a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?	□Y □N			
	b. Calibrated against a s (PID/FID only)?	standard gas prior to and	after each use	OY ON			
	c. Inspected for leaks ar	nd obvious signs of wear	on a weekly basis?	OY ON			
	·	ecure area when not in u	-	OY ON			
	e. Verified for accuracy	by use of duplicate samp	eles (calorimetric only)?	OY ON			
			•				
_							
	ART PENNETTA		11/17/99				
	Inspector's Name (Please Prin	11)	Date of Inspect				
	Inspector's Signature		Approximate Date of 1				

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

FACILITY NAME: DRY CLEAN AND SAVE DATE:	11/17/1999
FACILITY LOCATION: 2238 UNIVERSITY DRIVE CORAL SPRINGS	F1. 33071
Annual Reporting Period: DEC 8 1999 TO NOV 17	1999
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	Rule 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	
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	
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 in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, a purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transcombination facilities.	based upon
RESPONSIBLE OFFICIAL:  Name (Please Print)  Name (Please Print)  Name (Please Print)  Name (Please Print)	/4/00

\*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.

#### PERCHLOROETHYLENE DRY CLEANERS

### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	; DY	COMPLAINT/DISC	OVERY	RACK
AIRS ID#: 011 2215 D	ATE: 10 31	OO TIME	in: <u>2:30</u> tim	e our.	3:45
FACILITY NAME:	CLEAN +	SAUE		,	
FACILITY LOCATION: 22	38 UUW	ERSTEY 1	_	<u> </u>	Toring T
RESPONSIBLE OFFICIAL:				•	
PART I: NOTIFICATION					
(check appropriate box)					
1. New facility notified DARM 30	•	•			
2. Facility failed to notify DARM	to use general per	rmit 			
PART II: CLASSIFICATION					
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source		transfer only, x both types, x < (constructed on 4. New large:	, x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)		roleum
dry-to-dry only, $140 \le x \le 2,100$ transfer only, $200 \le x \le 1,800$ g both types, $140 \le x \le 1,800$ gal (constructed before $12/9/91$ )	gal/yr	dry-to-dry only transfer only, 2 both types, 140	$0.040 \le x \le 2,100 \text{ gal/yr}$ $0.040 \le x \le 1,800 \text{ gal/yr}$		
5. This is a correct facility class	ification	OY ON	☐Can not determine		
	qualified for a gen	eral permit as n	umber above gible for a general permi	t	
B. The total quantity of perchloroc facility was O gallons.	thylene (perc) pu	rchased within t	he preceding 12 months	by this dry	cleaning

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?	DY ON ONA		
2. Examining the containers for leakage?	MY ON ON/A		
3. Closing and securing machine doors except during loading/unloading?	DAY CIM		
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ØY ON ON/A		
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON WAN/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) DA UM 1. Equipped all machines with the appropriate vent controls? MY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the OY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

В	. 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?	ØY	□и	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?			ŒŃ/A
	Is the temperature differential equal to or greater than 20° F?	̈́ΩΥ	ПИ	WN/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,			
ı	if machines are equipped with a carbon adsorber?			□XÎ/A
	Is the perc concentration equal to or less than 100 ppm?	QY	ПИ	□⁄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,	011		DAY/A
	or expansion; and downstream from no other inlet?	ЦY	ПИ	LIN/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПΝ	<b>⊡</b> Ń/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	QY	ПИ	ØN/A

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes)			
1. Maintained receipts for perc purchased?	EAT ON		
2. Maintained rolling monthly total of perc consumption?	MY ON		
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	ON ON/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?	MY ON ON/A		
4. Maintained calibration data? for applicable direct reading instruments)	DY DN DAN/A		
5. Maintained exhaust duct monitoring data on perc concentrations?	אואים אם אם		
6. Maintained startup/shutdown/malfunction plan?	CAY ON .		
7. Maintained deviation reports?	DY DN DN/A		
Problem corrected?	DY ON DINA		
8. Maintained compliance plan, if applicable?	מאלם אם צום		

PART VI: LEAK DETECTION AND REPAIRS				
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
inspection?			DAY DN	
2. Has the facility maintained a leak log?			DAY DN	
3. Does the responsible official check the	following areas for leaks	s?		
Hose connections, fittings, couplings, and valves	ØY ON ON/A	Muck cookers	MY ON ON/A	
Door gaskets and seating	DY ON ON/A	Stills	CY ON ON/A	
Filter gaskets and seating	MY ON ON/A	Exhaust dampers	DY ON ON/A	
Pumps	MY ON ON/A	Diverter valves	CY ON ON/A	
Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	MY ON ON/A	
Water separators	MY ON ON/A			
4. Which method of detection is used by t	he responsible official?			
Visual examination (condensed so	olvent on exterior surface	cs)	G	
Physical detection (airflow felt the	rough gaskets)		₫′	
Odor (noticeable perc odor)			<b>⊡</b> ∕	
Use of direct-reading instrumenta	tion (FID/PID/calorimet	ric tubes)		
Halogen leak detector				
If using direct-reading instr	umentation, is the equip	pment:	<b>W</b> N/A	
a. Capable of detecting p	erc vapor concentration	s in a range of 0-500 ppm?	OY ON	
b. Calibrated against a s (PID/FID only)?	tandard gas prior to and	after each use	OY ON	
c. Inspected for leaks an	d obvious signs of wear	on a weekly basis?	OY ON	
d. Kept in a clean and so	cure area when not in us	sc?	OY ON	
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	OY ON	
	·			
1. P		ماردام		
Inspector's Name (Please Prin	1)	10/3/00 Date of Inspec	ction	
De Control of the Con	·/			
Inspector's Signature		Approximate Date of N	Vext Inspection	

AIRS ID#: 0112215



# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: DRY CLEAN N SAVE	DATE: 10/31/00			
FACILITY LOCATION: 2238 UNIVERSITY DRIVE OVERL SPR	WGS FL 33071			
Annual Reporting Period: NOV 17 1999 TO CCT	31 20 <i>00</i>			
Based on each term or condition of the Title V general air permit, my facility has remained in compliance 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.				
If NO, complete the following:				
#1. Term or condition of the general permit that has not been in continuous compliance during the report	ing period stated above:			
Exact period of non-compliance: from				
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 reporti	ng period stated above:			
Exact period of non-compliance: from				
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: NAGVI R ZAPIFA Signature  Name (Please Print)  Signature	Date Date			

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

9625			
0026 4128	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	\$	Postmark Here
ָ בי	10 AIR: NAGUI ZARIFA DRY CLEAN N' SA 2238 UNIVERSITY CORAL SPRINGS I	DRIVE FL 33071	AG  er)  See Reverse for Instructions

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 # 0112215

DRY CLEAN N' SAVE NAGUI ZARIFA 2238 UNIVERSITY DRIVE CORAL SPRINGS FL 33071 FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273

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

RAFIK ZARIFA INC NAGUI ZARIFA 2238 UNIVERSITY DRIVE CORAL SPRINGS FL 33071

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Оы.: 002273

HIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0354611

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 # 0112215

AIRS ID#0112215

DRY CLEAN N' SAVE NAGUI ZARIFA 2238 UNIVERSITY DRIVE CORAL SPRINGS FL 33071

FOR GOVERNMENT Org.: 37550101000 EO: Fund: 20-2-035001

Obj.: 002273

DRY CLEAN N SAUT 2238 UNIVERSITY DR. CORK SPRINGS FL. 3307,





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

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