

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

December 5, 1996

Mr. Mitch Epstein Vice President Mitch's Dry Clean Express & Laundry, Inc. 993 University Drive Coral Springs, Florida 33071

Facility I.D. No. 0112305

Dear Mr. Epstein:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 5, 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/jw

Mr. John Coppola, Broward County

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

3/8/99 Called + # liss been disconnected

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY D
AIRS ID#: 61/2305 DATE: 10/3 9	7 time in: <u>2:10</u> time out: <u>2:35</u>
FACILITY NAME: DRY CLEAN EXPRE	SS
facility location: <u>993 Universit</u>	Y DRIVE COBIL SPRWGS FL, 33071
RESPONSIBLE OFFICIAL: MITCH EPST	FIN PHONE: (954)341-8520
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
New facility notified DARM 30 days prior to sta	ornin M
2. Facility failed to notify DARM to use general pe	•
2. Pacinty failed to floury DARW to use general pe	- International Control of the Contr
PART II: CLASSIFICATION	VIEW INC.
TRAKTIE CLASSIFICATION	
	□ No notification form
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form ☐ Drop store/out of business/petroleum
Facility indicated on notification form that it is:	
Facility indicated on notification form that it is: (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	☐ Drop store/out of business/petroleum 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
Facility indicated on notification form that it is: (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 ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr	Drop store/out of business/petroleum 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
Facility indicated on notification form that it is: (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 \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) 5. This is a correct facility classification If no, please check the appropriate classification qualified for a get	Drop store/out of business/petroleum 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 $12/9/91$) 4. New 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 on or after $12/9/91$)

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?	ØY ON ON/A
2. Examining the containers for leakage?	MY ON ON/A
3. Closing and securing machine doors except during loading/unloading?	ØÝ □n
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	□Y □N Œ¶/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 refri (complete A below).	gerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber must installed prior to September 22, 1993	_
If classification 4 has been checked, the machine should be equipped with a refri (complete A and B below).	gerated condenser
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?	מלי םא
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	ØY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ɗy □n □n/a
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	MY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	ØY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	ØY ON

The TY is also assessment to a 60° state of the state of	
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?	OY ON
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?	A/MO NO YO
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?	אורם אם צם
Is the perc concentration equal to or less than 100 ppm?	DY DN DN/
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?	אומם מם צם
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A
PART V: RECORDKEEPING REQUIREMENTS	
PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes)	
Has the responsible official:	ØÝ ON
Has the responsible official: (check appropriate boxes)	ey on
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?	
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption?	
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:	⊠Ý □N
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days	ØÝ □N ØY □N □N/A
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	OY ON ON/A OY ON ON/A
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for applicable direct reading instruments)	OY ON ON/A OY ON ON/A OY ON ON/A
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON ON/A OY ON ON/A OY ON ON/A OY ON ON/A
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan?	OY ON ON/A

PA	ART VI: LEAK DETECTION AND	REPAIRS		
l.	Does the responsible official conduct a	weekly (for small source	s, bi-weekly) leak detection ar	nd repair
	inspection?			CDY7 DN
2.	. Has the facility maintained a leak log?			ØÝ □N
3.	Does the responsible official check the	following areas for leaks	?	
	Hose connections, fittings, couplings, and valves	ØŶ □N □N/A	Muck cookers	Y ON ON/A
	Door gaskets and seating	ON ON/A	Stills	OY ON ON/A
	Filter gaskets and seating	ɗy □n □n/a	Exhaust dampers	OY ON WAYA
	Pumps	ey on on/a	Diverter valves	CY ON ON/A
	Solvent tanks and containers	GY ON ON/A	Cartridge filter housings	MY ON ON/A
	Water separators	ey on on/a		
4.	Which method of detection is used by	the responsible official?		
	Visual examination (condensed s	solvent on exterior surfac	es)	g
	Physical detection (airflow felt the	rough gaskets)		
	Odor (noticeable perc odor)			T
	Use of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)	
	Halogen leak detector			
	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 (PID/FID only)?	standard gas prior to and	after each use	OY ON
	c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	OY ON
	d. Kept in a clean and	secure area when not in u	se?	OY ON
	e. Verified for accuracy	by use of duplicate samp	oles (calorimetric only)?	OY ON
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	Λ ₀			-
	Inspector's Name (Please Pri	int)	Date of Inspe	ction
	Λ . Λ	,		
	Cothy Conth		CCT 1998	ج
	Inspector's Signature		Approximate Date of	Next Inspection

0112305

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

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FACILITY NAME: DRY CLEAN EXPRESS	DATE: 10/3/97
FACILITY LOCATION: 993 UNIVERSITY DRIVE CORN SPRINGS, FL.	3307/
Annual Reporting Period:1996 TO1996 TO	19 97
Based on each term or condition of the Title V general air permit, my facility has remained in compliant 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 rep	orting 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 rep	porting 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 is made in this notification are true, accurate and complete. Further, my annual consumption of perchloupon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities.	proethylene solvent, based
RESPONSIBLE OFFICIAL: M, tell System Name (Please Print) Signature	

*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.

Page _____ of ____

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Revised 09/15/97

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

ARS ID#: 0112305

<u> </u>	
FACILITY NAME: Dry Clean Express	DATE: 12/10/98
FACILITY LOCATION: 993 Chy versity Drive	<u> </u>
Cowl Spring , F1.33071	
Annual Reporting Period: Del. 1997 TO Dec.	19_ <i>98</i>
Based on each term or condition of the Title V general air permit, my facility has remained in comp 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	reporting period stated above:
Exact period of non-compliance: from	1
Action(s) taken to achieve compliance:	道人
Method used to demonstrate compliance:	2 7 1
#2. Term or condition of the general permit that has not been in continuous compliance during the	reparting period stated above:
Exact period of non-compliance: fromtoto	
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 reasonab made in this notification are true, accurate and complete. Further, my annual consumption of perdupon purchase receipts, does not exceed 3,100 gallons per year for dry-to dry facilities or 1,800 gallons facilities. RESPONSIBLE OFFICIAL: RESPONSIBLE OFFICIAL:	chloroethyiene solvent, based
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		PLAINT/DISCOVERY	EST AVAILABLE COPY RE-INSPECTION
TIME IN: 10:30 TIM	IE OUT://.	AIRS ID#:_	01/2305
TYPE OF FACILITY: Due C	leoners -	Per C.	
FACILITY NAME: Duy Cla	eau Exh	ess	DATE: 12/10/98
FACILITY LOCATION: 993	(Periodoil	to Drie me	7217 7 10
ACIENT EOCATION.	1 (f1.3307	/
RESPONSIBLE OFFICIAL:		PHONE NUMB	
RESPONSIBLE OF ICIAE.		THOME HOME	CK.
Based on the results of the compliant compliance with DEP Rule 62-213.3 Based on the results of the compliant	00, Florida Administrat	ive Code (F.A.C.).	
discrepancies were noted:			
COMPLIANCE REQUIREMEN	T/PROBLEM	FOLLOW-UP AC	CTION REQUIRED
Facility and	of beside	won	
	7		
_			
	Ì	•	
COMMENTS:	· · · · · · · · · · · · · · · · · · ·		
·			
The Annual Compliance Certification form h	as been properly certifi-	ed and submitted to the inspe	ctor. YES NO
DATE OF NEXT INSPECTION:		//	
	(Apr	proximate)	
INSPECTION CONDUCTED BY:	UCTAV	IAN O	PRIS
	/ (Ple	ase Print)	1
INSPECTOR'S SIGNATURE:	7 / -	PHONE NUMB	ER: (954) 5189-146
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STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
MS 5510-37550 304000
2600 BLAIR STONE ROAD
TALLAHASSEE FL 32399-2400



7000 0520 0020 9372 7497





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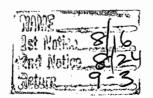
8-17 VNK

SEP -5 2001

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SEP ZON ED SUITES OURCES OFFIRE

AIRS ID # 0112305001AG MITCH EPSTEIN DRY CLEAN EXPRESS 993 UNIVERSITY DR CORAL SPRINGS FL 33071



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Received by (Please Print Clearly) B. Date of Delivery
 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. 	C. Signature X
Article Addressed to:	D. Is delivery address different from item 1?
10 AIRS ID # 0112305001AG MITCH EPSTEIN	
DRY CLEAN EXPRESS 993 UNIVERSITY DR CORAL SPRINGS FL 33071	3. Service Type Z Certified Mail
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Copy from service label) 7000 0520 0020 9372	7497
PS Form 3811, July 1999 Domestic Re	turn Receipt 102595-99-M-1789

	ice IAIL RECEIPT Only; No Insurance	+ Coverage Provided)
2645		4
Postage	\$	5
Certified Fee		Q
Return Receipt Fee (Endorsement Required)		Postmark Here - W
Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)		\mathcal{J}
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Total Bostana & Faase TU TRei MITCH EPST	AIRS ID # 01123050	001AG maller)
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Sir DRY CLEAN 993 UNIVERS City CORAL SPRII		
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BEST AVAILABLE	WE-INSPECTION
TIME IN: 2:10 TIME OUT: 2:3	5AIRS ID#: 0112305
TYPE OF FACILITY: DRY CLEANER	
FACILITY NAME: DRY CLEAN EXPRESS	DATE: 10/3/97
FACILITY LOCATION: 993 UNIVERSITY DR. CO	
RESPONSIBLE OFFICIAL: MITCH EPSTEIN	PHONE NUMBER: (954) 341-8520
Based on the results of the compliance requirements evalue compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evaluation discrepancies were noted:	lated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	-
·	
	
COMMENTS:	
The Annual Compliance Certification form has been properly cert	ified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: OCT (S	202
	pproximate)
\wedge Ω	ETTA
	Please Print)
INSPECTOR'S SIGNATURE: the Portet	PHONE NUMBER: (954) 519-1428
	•
.Page_	of . Revised 10/90



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

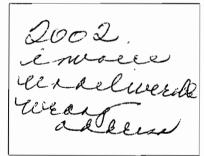
Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

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:

954 344 69 44 CALLE & 1/9/05 NO RESPONSE

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

DRY CLEAN EXPRESS MITCH EPSTEIN 993 UNIVERSITY DR CORAL SPRINGS FL 33071 AIRS ID#0112305

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273



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

112305 MITCH EPSTEIN DRY CLEAN EXPRESS 993 UNIVERSITY DR CORAL SPRINGS FL 33671

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1 Fund: 20-2-035001

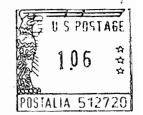
Obj.: 002273



POSTAGE REQUIRED

TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070 STATE OF FLORIDA **DEPARTMENT OF ENVIRONMENTAL PROTECTION** MS 5510-37550 304000 **2600 BLAIR STONE ROAD** TALLAHASSEE FL 32399-2400





ADDRESSEE UNKNOWN POMPANO BCH, EL MIT H EPSTEIN LEAN EXPRESS DRY & VERSITY DR

993 UN

CORAL

PRINGS FL 33071

SEHDER

Sureau or Monitorine

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1 Facility Orange (Common News Olems of company)
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
mitch's Ony Clean Espress & Lambry inc
2. Site Name (For example, plant name or number):
ORY Clean Express
3. Hazardous Waste Generator Identification Number:
FLD982085716
4. Facility Location: Street Address: 993 UNIVERSTY DRIVE
City: CONAL Spry County: Brevnal Zip Code: 3307/
5. Facility Identification Number (DEP Use):
0/1/2305
LA TARREST DE LA TRANSPORTE DE LA TRANSP
Responsible Official
6. Name and Title of Responsible Official:
\sim
7. Responsible Official Mailing Address: Organization/Firm: Miteff's Day clean Express + Lamony Inc. Street Address: 993 University Daive
Street Address: 993 UNIVERSITY Drive
City: Cord Sprys County: Bur Zip Code: 3307/
8. Responsible Official Telephone Number: Telephone: (954) 34/86 PO Fax: () -
Telephone: (454) $34/$ \sim Fax: () -
<u>-</u>
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
10. Facility Contest Address.
10. Facility Contact Address:
Street Address:
City: County: Zip Code:
11. Facility Contact Telephone Number: Telephone: () - Fax: () -
Telephone: () - Fax: () -

RECEIVED

SEP 5 1996

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

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.

		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#]	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit	- 1,		r Ar Carrier	1.14.					
(1) w/ ref. condenser	1	6/87							
(2) w/ carbon adsorber									
(3) w/ no controls								Ì	
Washer Unit	- 1-5						: 13		
(4) w/ ref. condenser									
(5) w/ carbon adsorber						-			
(6) w/ no controls									
Dryer Unit	1 42			at. The	February.		1" 1.		
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit	11-1			-1156					
(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 q (b) If less than 12 montion Check why it is less	are re quant gallo	equired to be ity of perchlons ow many? [_	installed [perc)	purchased in				
3. What is the facility's son (Indicate with an "X". S	Selec	t one classifi	cation only.)		nitions found		3) of I	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machin (Indicate with an "X".)	es pursuant to section (5) of F	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 emission to Rule 62-213.300, F.A.C. Verify that all steam exemption criteria or that no such units exist on-signal contains the contains and the contains and the contains are contained as a contained contains and contains and contains and contains are contained as a contained contai	and hot water generating unit	
All steam and hot water generating units on-site (boiler HP or less), and (2) are fired exclusively by during which propane or fuel oil containing no m	y natural gas except for period	ds of natural gas curtailment
All steam and hot water generating units exempt No such units on-site		
		0
Equipment Monitorin	g and Recordkeeping Infori	mation
Check all logs which are required to be kept on-si	te in accordance with the requ	uirements of this general permit:
(a) Purchase receipts and solvent purchases		
(b) Leak detection inspection and repair		
(c) Refrigerated condenser temperature monitorin	g	
(d) Carbon adsorber exhaust perc concentration m	nonitoring	
(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)
\checkmark	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifi statement maintain	dersigned, 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form.
_ <i>K</i> Z	mptly notify the Department of any changes to the information contained in this notification. 9/3/96
Signature	Date 1

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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

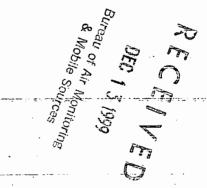
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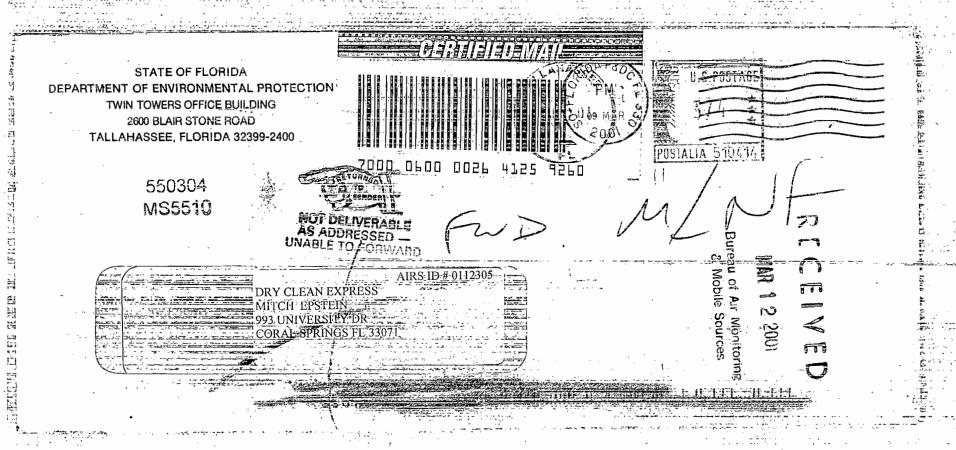


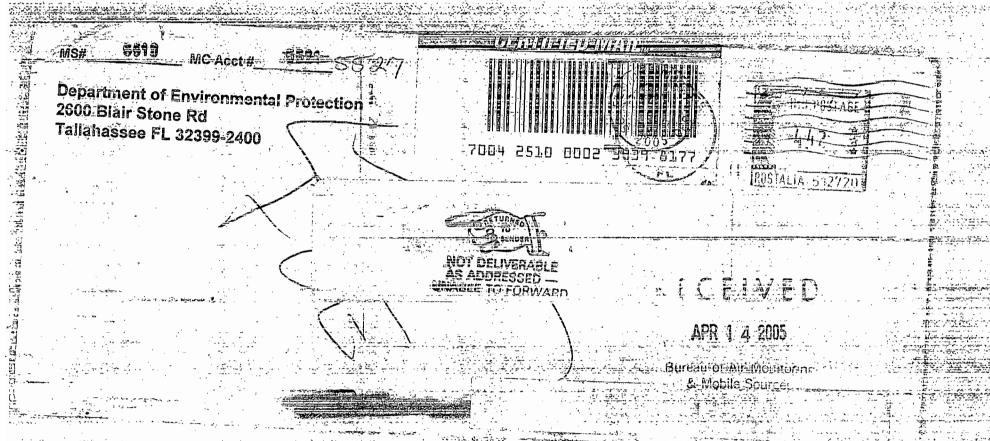






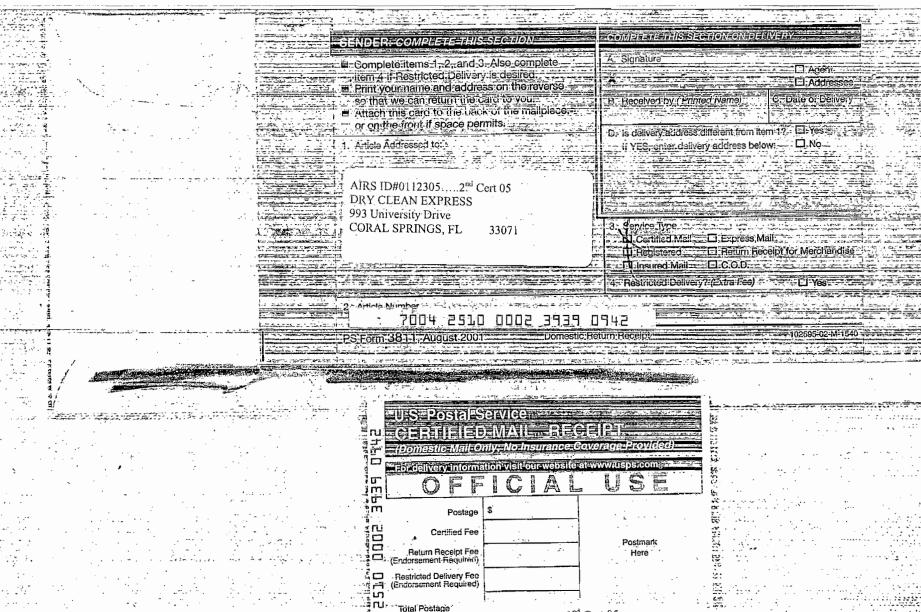
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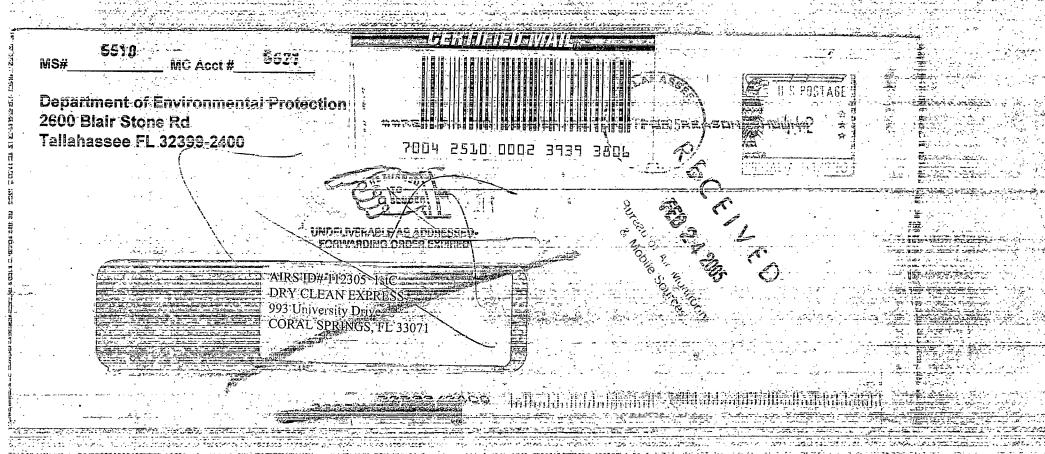
Department of Environmental Protection 2600 Blair Stone Rd Tallahassee FL 32399-2400



or PQ Box No. City, State, ZIP+

AIRS ID#0112305.....2nd Cert 05 DRY CLEAN EXPRESS 993 University Drive CORAL SPRINGS, FL

33071

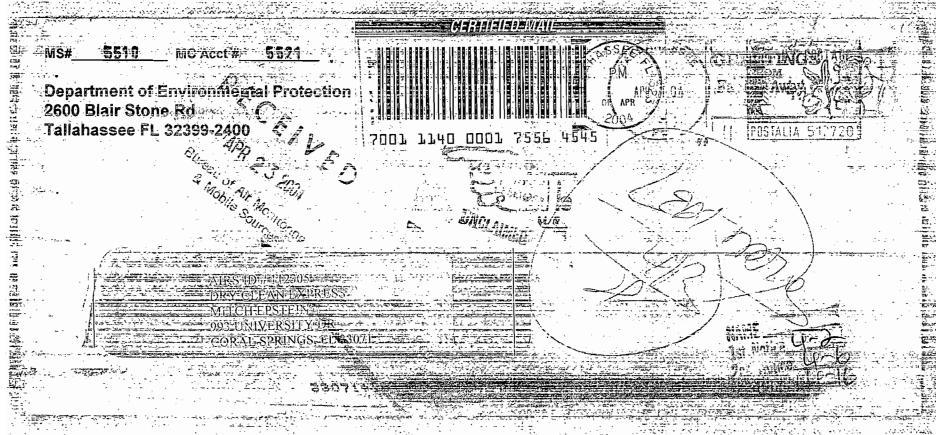


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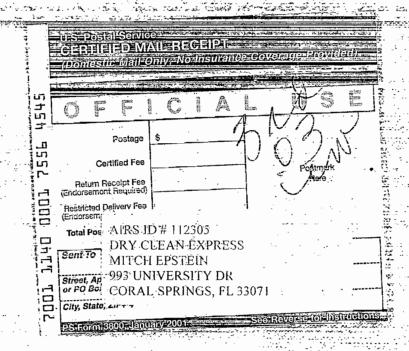
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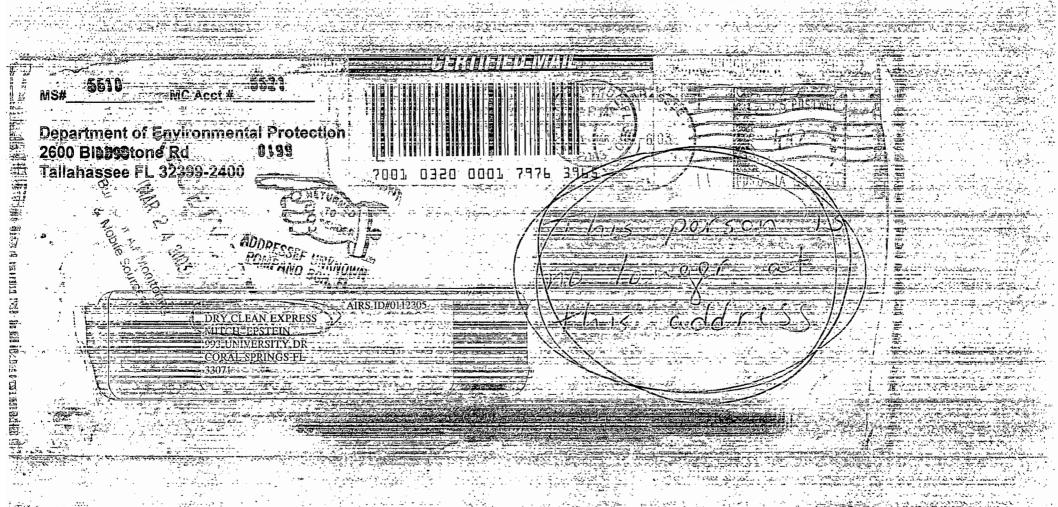
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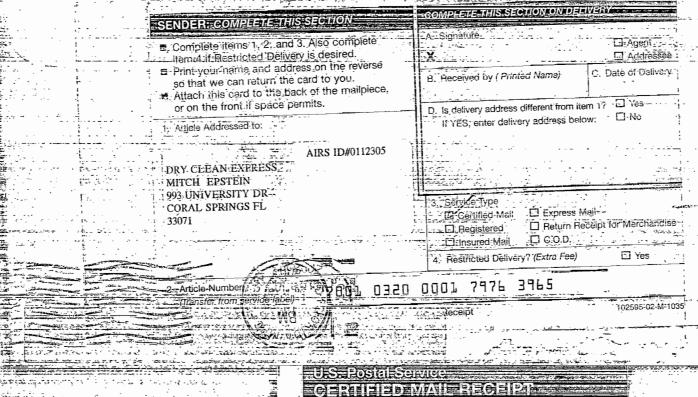
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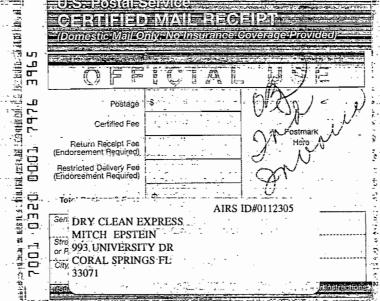


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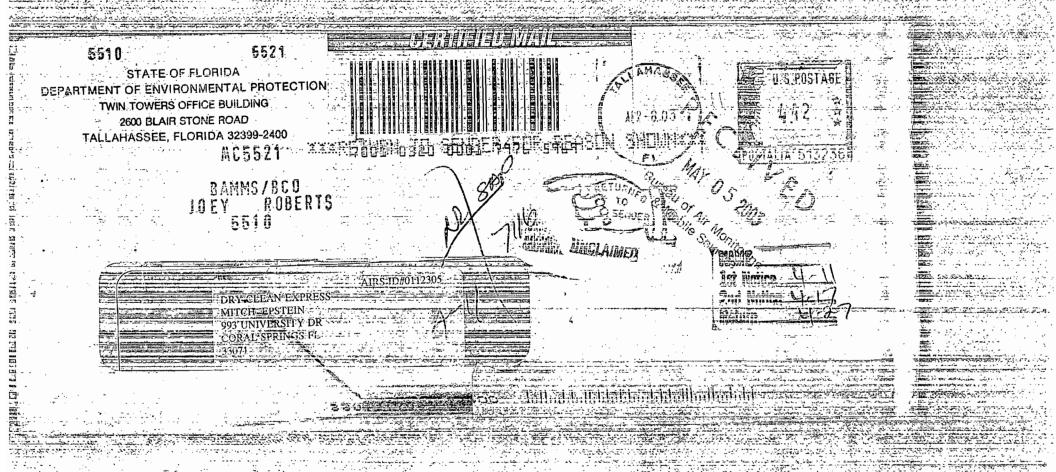
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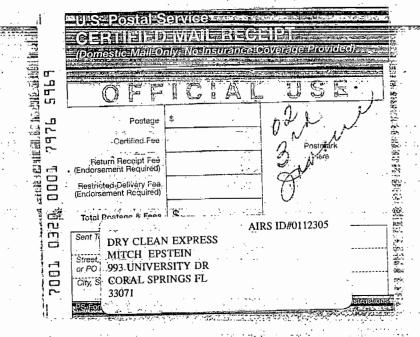
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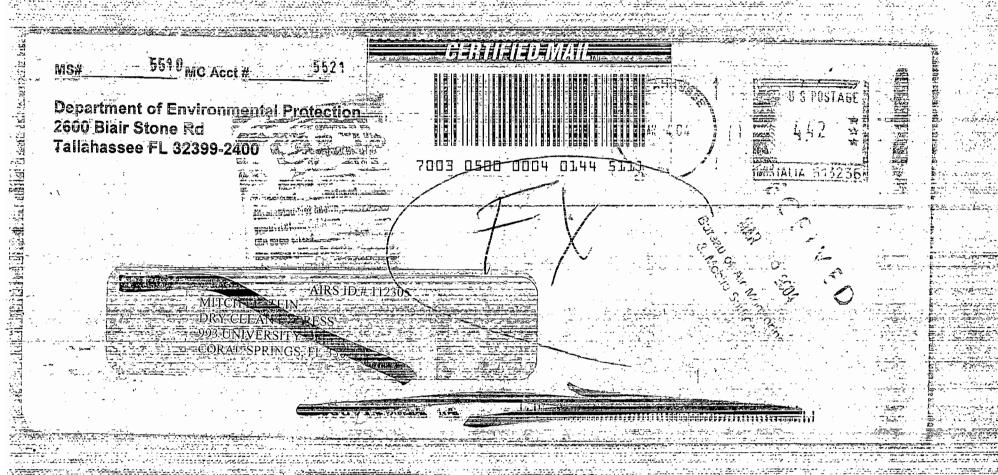
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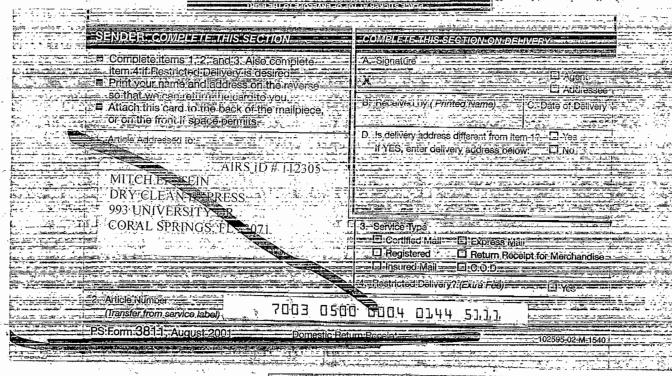
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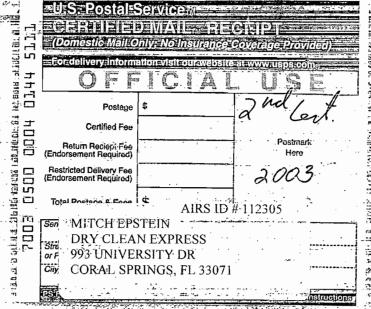


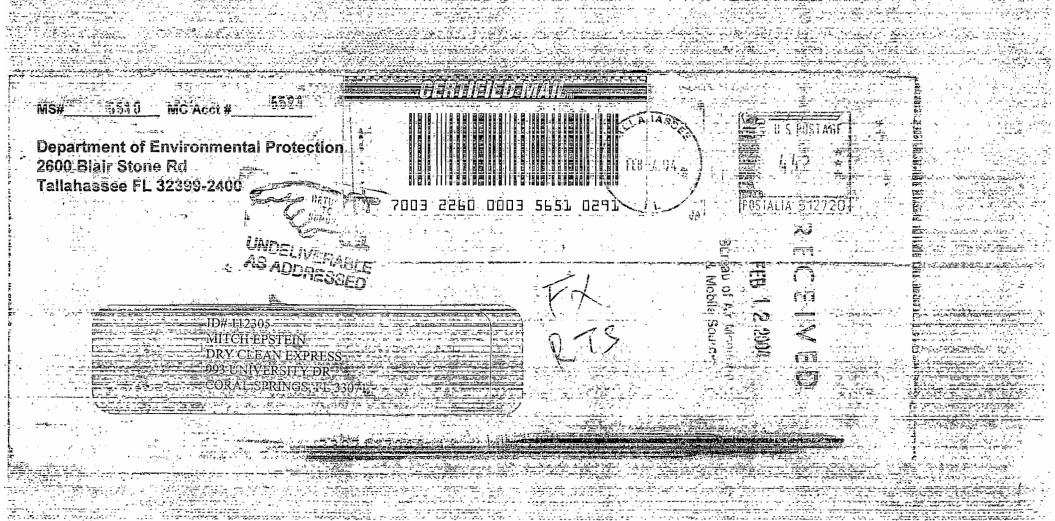
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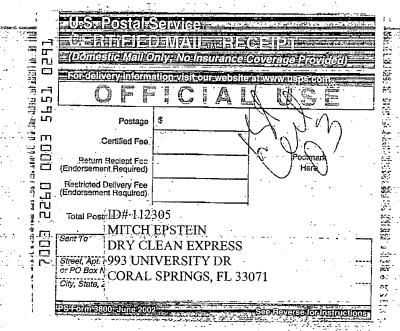


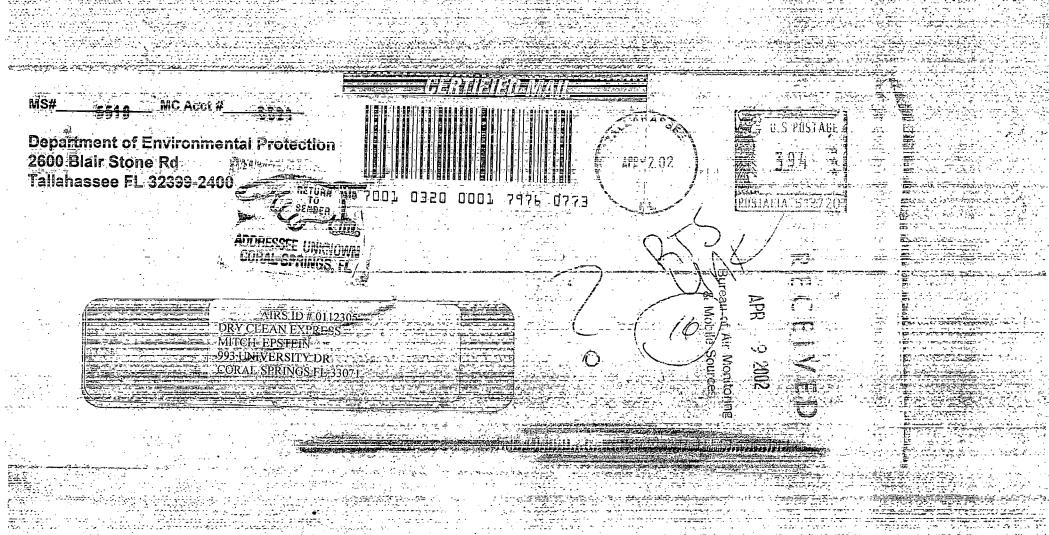


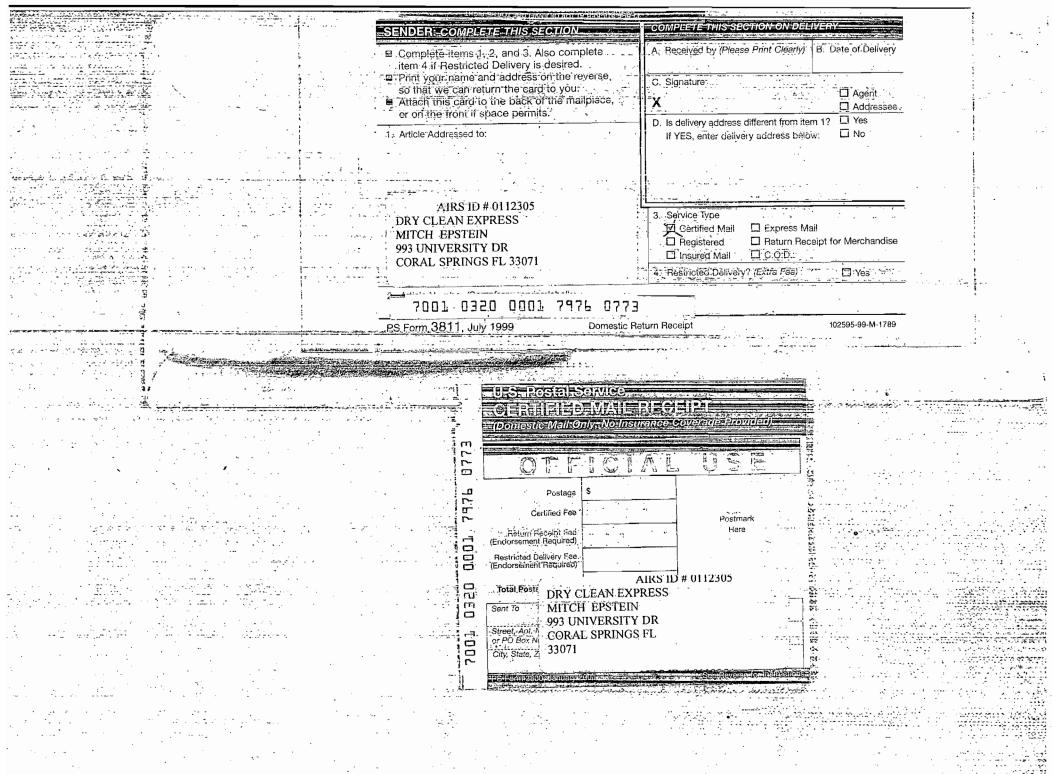


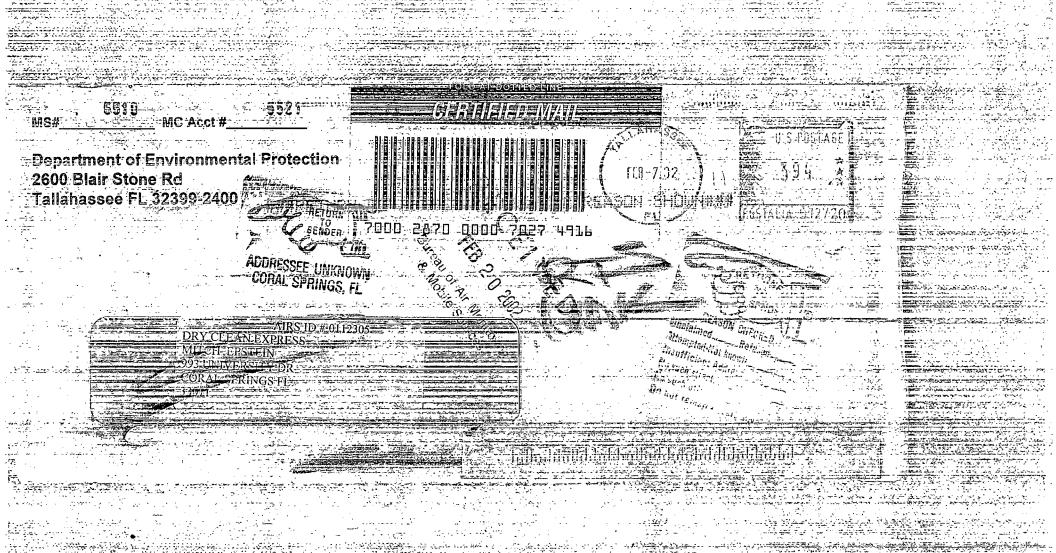


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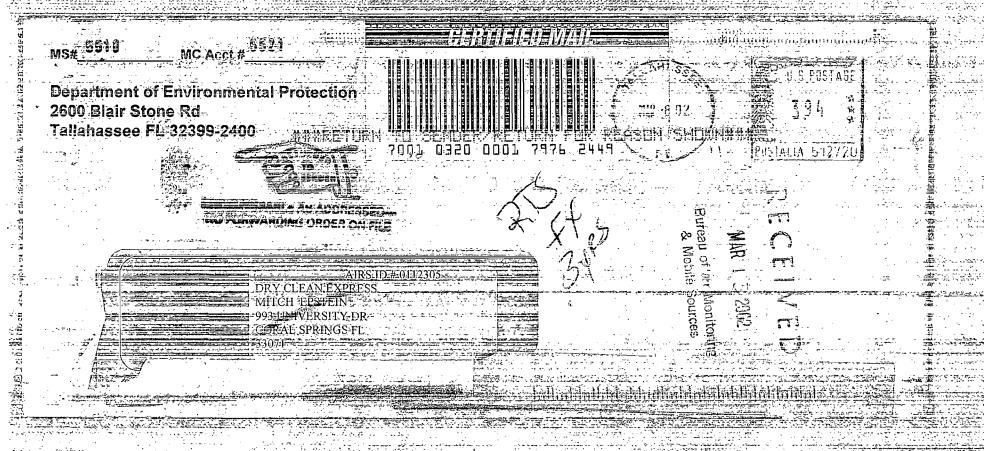


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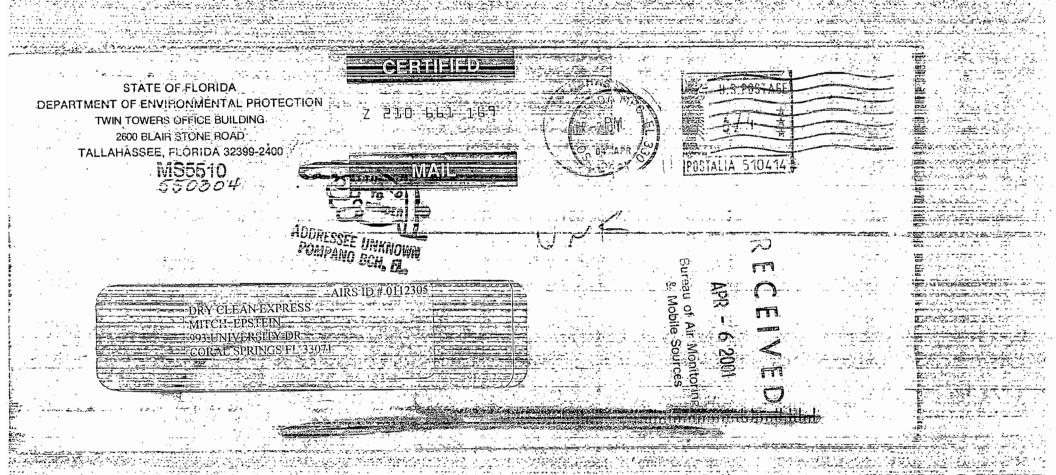
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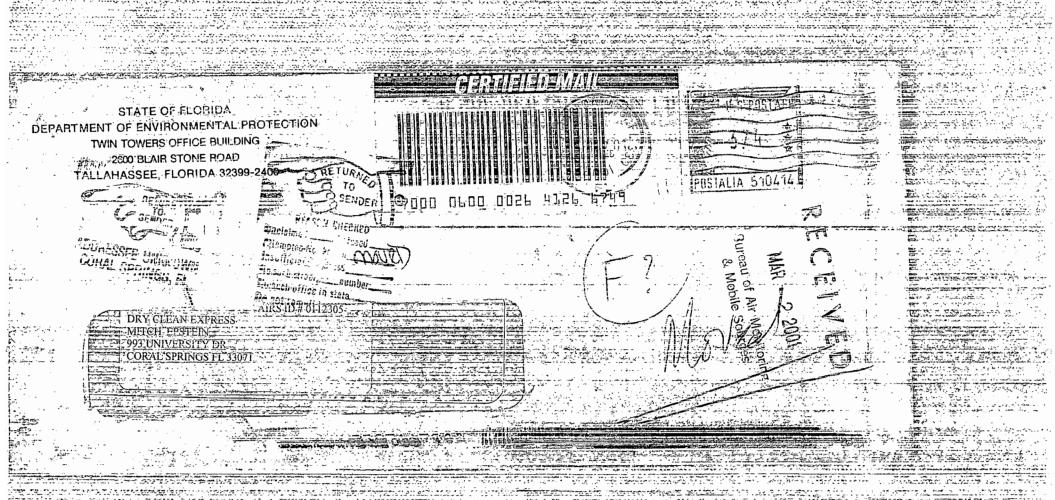
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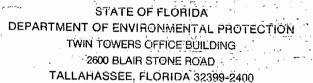
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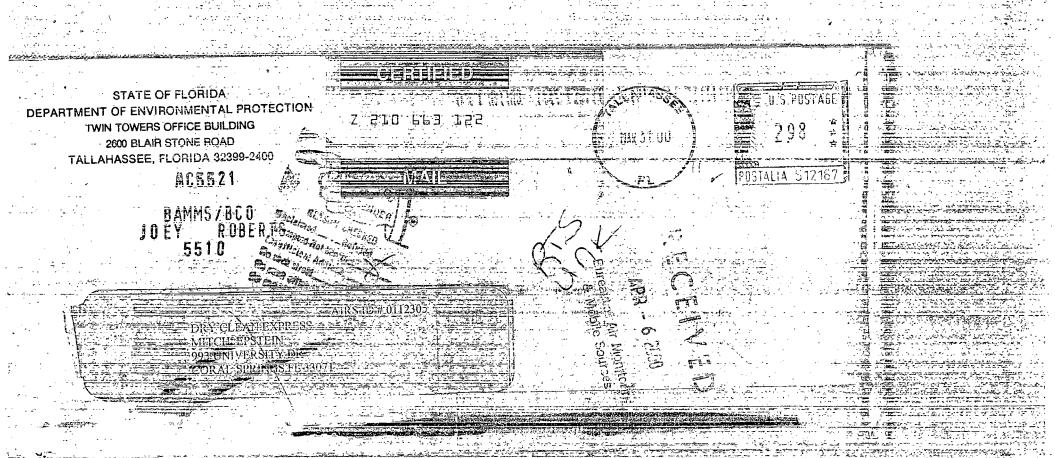
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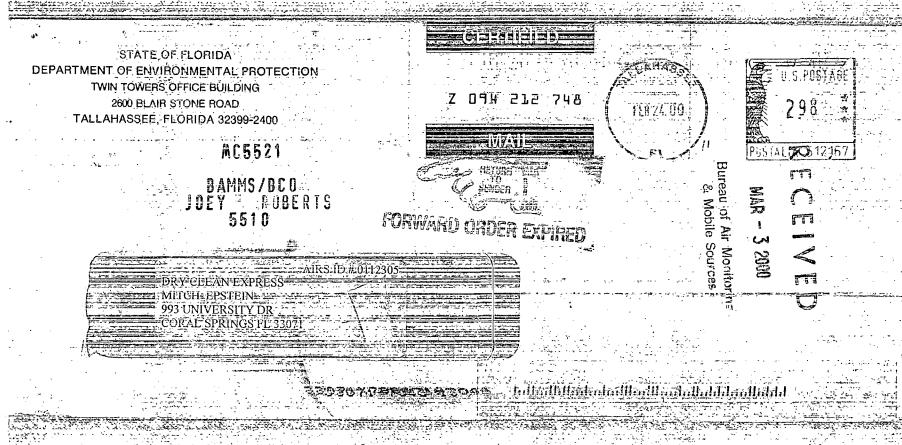
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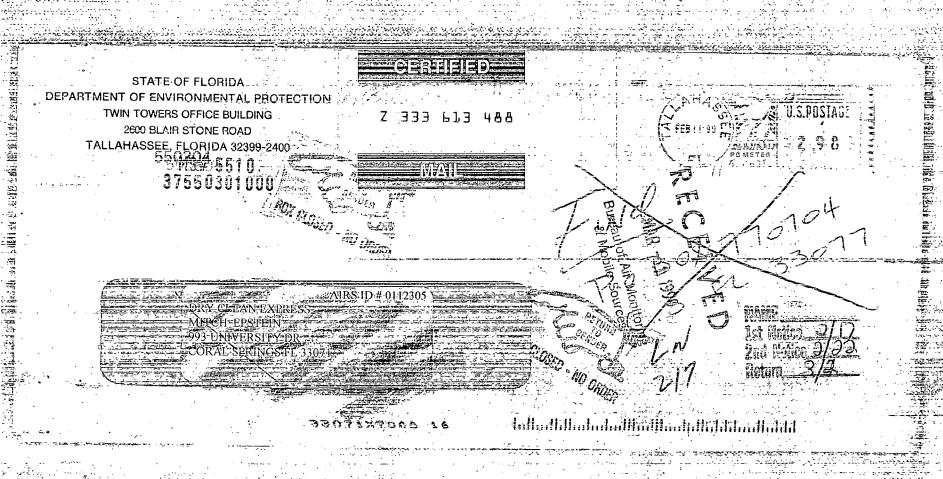
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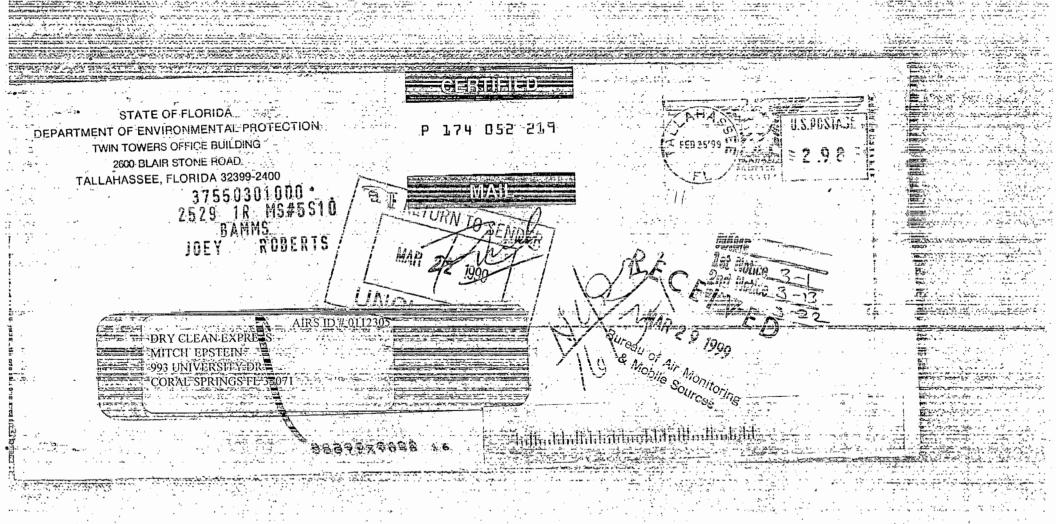


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STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL PROTECTION

TWIN TOWERS OFFICE BUILDING

2600 BLAIR STONE ROAD

TALLAHASSEE, FLORIDA 32399-2400

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Department of Environmental Protection

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

David B. Struh

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 # 0112305 DRY CLEAN EXPRESS MITCH EPSTEIN 993 UNIVERSITY DR CORAL SPRINGS FL 33071

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

X 570 PP7 7P4 **US Postal Service** Receipt for Certified Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse) Sent to Street & Number Post Office, State, & ZIP Code Postage \$ Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered AIRS ID # 0112305 DRY CLEAN EXPRESS MITCH EPSTEIN 993 UNIVERSITY DR CORAL SPRINGS FL 33071

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

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UNDELIVERABLE AS ADDRESSED— NO FORWARDING ORDER ON FILE



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Department of Environmental Protection

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

David B. Struhs Secretary

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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 # 0112305

DRY CLEAN EXPRESS
MITCH EPSTEIN
1993 UNIVERSITY DR
CORAL SPRINGS FL 33071

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

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

RECEIVED MAIL ROOM

TOTAL AMOUNT DUE: \$50.00

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Do NOT Remove Label

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MITCH'S DRY CLEAN EXPRESS & LAUNDRY
INC
MITCH EPSTEIN
993 UNIVERSITY DR
CORAL SPRINGS FL 33071

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

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

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TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

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MITCH EPSTEIN
993 UNIVERSITY DR
CORAL SPRINGS FL 33071

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: Bi

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