



# Department of Environmental Protection

Lawton Chiles  
Governor

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

Virginia B. Wetherell  
Secretary

May 5, 1998

Mr. Jeri Lee Caprio  
Royal French Cleaners  
6949 West Commercial Boulevard  
Tamarac, Florida 33321

Re: Facility No.: 0112411

Dear Mr. Caprio:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on April 17, 1998.

Please note that in January 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

cc: Mr. John Coppola, Broward County

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

0112411

p14 2a) Add # of gallons of perc purchased  
in past 12 months.

3. New small area source should not  
be marked. Mark out and initial.  
Existing small area source should  
be marked.

p15

4. New small area source R.C. should  
not be marked. Mark out and initial.

(F) Required. Should be marked.

(Owners Manual)

p16

Responsible Official sign and date  
for changes made.

# Perchloroethylene Dry Cleaning Facility Notification

## Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	BALATON INC
2. Site Name (For example, plant name or number):	ROYAL FRENCH CLEANERS
3. Hazardous Waste Generator Identification Number:	FLD 984 243 832
4. Facility Location: Street Address: 6949 W. COMMERCIAL BLVD. City: TAMARAC County: BROWARD Zip Code: 33321	
5. Facility Identification Number (DEP Use):	0112411

Bureau of Air Monitoring  
& Mobile Sources  
APR 17 1998

RECEIVED

## Responsible Official

6. Name and Title of Responsible Official:	JERI LEE CAPRIO, PRES
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 6949 W. COMMERCIAL BLVD City: TAMARAC County: BROWARD Zip Code: 33321	
8. Responsible Official Telephone Number: Telephone: (954) 721-9007 Fax: ( ) - SAME	

## Facility Contact (If different from Responsible Official)

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



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

Existing large area source

Carbon adsorber

Refrigerated condenser

New small area source

Refrigerated condenser

New large area source

Refrigerated condenser

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

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

All steam and hot water generating units exempt

No such units on-site

### Equipment Monitoring and Recordkeeping Information

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

(a) Purchase receipts and solvent purchases

(b) Leak detection inspection and repair

(c) Refrigerated condenser temperature monitoring

(d) Carbon adsorber exhaust perc concentration monitoring

(e) Instrument calibration

(f) Start-up, shutdown, malfunction plan



RECEIVED

MAY 11 1999

Bureau of Air Monitoring  
& Mobile Sources

RECEIVED  
MAIL ROOM

MAY 10 99

D/pt  
674  
To  
WATSON FIVE  
ROYAL FRENCH  
COMMERCIAL  
URAC FI  
33317

PLEASE

that

ENIA Inc

B/A Royal

from Cle

~~the~~

is for

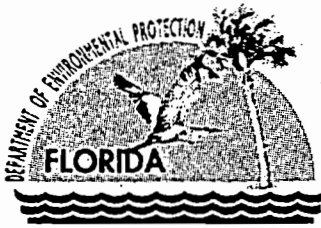
business

has the

address

OK you

WATSON



Jeb Bush  
Governor

# Department of Environmental Protection

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

RECEIVED  
MAY 10 99

David B. Struhs  
Secretary

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

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

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

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

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



(cut here)

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

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

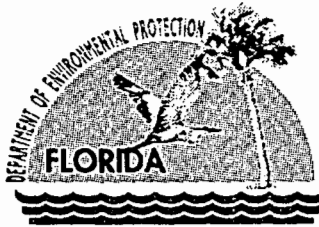
**TOTAL AMOUNT DUE \$75.00**

**Do NOT Remove Label**

AIRS ID # 0112411  
ROYAL FRENCH CLEANERS  
JERI LEE CAPRIO  
6949 W COMMERCIAL BLVD  
TAMARAC FL 33321

RECEIVED  
MAY 11 1999  
Bureau of Air Monitoring & Mobile Sources  
FOR GOVERNMENT USE ONLY  
Org.: 37550701000 EO: B1  
Fund: 20-2-035001  
Obj.: 002273





Jeb Bush  
Governor

# Department of Environmental Protection

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

April 1, 1999

RECEIVED  
MAIL ROOM  
MAY 10 99

David B. Struhs  
Secretary

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

TO: User of Title V Air General Permit

Department records indicate that during calendar year **1998** you operated a facility that is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

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

The annual emissions fee for your facility is **\$50** for calendar year **1998**. A notice of your obligation to pay the annual emissions fee was sent to you last year by certified mail, along with an invoice form and instructions. A final notice was sent last month reminding you of the March 1 deadline for submittal of this fee. Since the Department has not received your annual emissions fee, a 50% penalty is being assessed against your facility, in accordance with Rule 62-213.205(1)(g), F.A.C., for a total fee of **\$75** for calendar year **1998**.

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

To submit your \$75 payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

/DD

Enclosure: Invoice Form

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

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT  
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY   
RE-INSPECTION

AIRS ID#: 0112411 DATE: 8/25/99 TIME IN: 10:30 TIME OUT: 11:00  
FACILITY NAME: Royal French Cleaners  
FACILITY LOCATION: 6949 W. Commercial Blvd.  
TAMARAC, FL  
RESPONSIBLE OFFICIAL: \_\_\_\_\_ PHONE: \_\_\_\_\_  
CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

RECEIVED  
SEP 20 1999  
Bureau of Air Monitoring  
& Mobile Sources

PART I: NOTIFICATION

(check appropriate box)  
1. New facility notified DARM 30 days prior to startup   
2. Facility failed to notify DARM to use general permit   
Facility Closed -  
No Forwarding Info

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 <input type="checkbox"/> dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed before 12/9/91)	2. New small area source <input type="checkbox"/> dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after 12/9/91)
3. Existing large area source <input type="checkbox"/> dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed before 12/9/91)	4. New large area source <input type="checkbox"/> dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed on or after 12/9/91)

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

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

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

John Coppola (954) 519-1235  
1 of 5

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

OFFICIAL USE

002E 4262 1000 02E0 1001

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

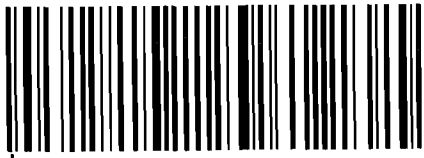
03  
*Receipt*  
 Postmark Here

Total Postage 10 AIRS ID# 0112411001AG  
 Sent To ROYAL FRENCH CLEANERS  
 JERI LEE CAPRIO  
 Street, Apt. No. or PO Box No. 6949 W COMMERCIAL BLVD  
 City, State, ZIP+ TAMARAC FL 33321

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>10 AIRS ID# 0112411001AG          ROYAL FRENCH CLEANERS          JERI LEE CAPRIO          6949 W COMMERCIAL BLVD          TAMARAC FL 33321</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer) 7001 0320 0001 7976 3200</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
MS 5510-37550 304000  
2600 BLAIR STONE ROAD  
TALLAHASSEE FL 32399-2400



9501 0320 0001 7976 3200

RETURNED TO SENDER

REASON CHECKED

Unclaimed  Refused

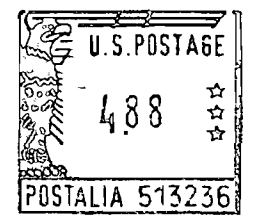
Attempted-Not known

Insufficient Address

No such street number

No such office in state

Do not re-mail in this envelope



wk

10 AIRS ID# 0112411001AG  
ROYAL FRENCH CLEANERS  
JERI LEE CAPRIO  
6949 W COMMERCIAL BLVD  
TAMARAC FL 33321

Fold at line over top of envelope to

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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

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

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

Consult postmaster for fee.

3. Article Addressed to:  
 AIRS ID # 0112411  
 ROYAL FRENCH CLEANERS  
 JERI LEE CAPRIO  
 6949 W COMMERCIAL BLVD  
 TAMARAC FL 33321

4a. Article Number  
 P174052692

4b. Service Type  
 Registered  Certified  
 Express Mail  Insured  
 Return Receipt for Merchandise  COD

7. Date of Delivery  
 2/22/98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 174 052 692

1998

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

AIRS ID # 0112411  
 ROYAL FRENCH CLEANERS  
 JERI LEE CAPRIO  
 6949 W COMMERCIAL BLVD  
 TAMARAC FL 33321

PS Form 3800, April 1995

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

Fold at line over top of envelope

Is your RETURN ADDRESS completed on the reverse side

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

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

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

<p>3. Article Addressed to:</p> <p style="text-align: right;">AIRS ID # 0112411</p> <p>ROYAL FRENCH CLEANERS JERI LEE CAPRIO 6949 W COMMERCIAL BLVD TAMARAC FL 33321</p>	<p>4a. Article Number <b>2333660459</b></p> <p>4b. Service Type</p> <p><input type="checkbox"/> Registered <span style="float: right;"><input checked="" type="checkbox"/> Certified</span></p> <p><input type="checkbox"/> Express Mail <span style="float: right;"><input type="checkbox"/> Insured</span></p> <p><input type="checkbox"/> Return Receipt for Merchandise <span style="float: right;"><input type="checkbox"/> COD</span></p> <p>7. Date of Delivery <b>2/19/99</b></p>
<p>5. Received By: (Print Name)</p>	<p>8. Addressee's Address (Only if requested and fee is paid)</p>
<p>6. Signature: (Addressee or Agent)</p> <p><b>X</b> </p>	

PS Form 3811, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 333 660 459 1999

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

Sent to

AIRS ID # 0112411

ROYAL FRENCH CLEANERS  
JERI LEE CAPRIO  
6949 W COMMERCIAL BLVD  
TAMARAC FL 33321

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

PS Form 3800, April 1995

Fold at line over top of envelope to

**SEND**

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

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

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

Consult postmaster for fee.

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:

AIRS ID # 0112411

ROYAL FRENCH CLEANERS  
JERI LEE CAPRIO  
6949 W COMMERCIAL BLVD  
TAMARAC FL 33321

4a. Article Number

P174052294

4b. Service Type

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

7. Date of Delivery

4/3

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X  SAM CAPRIO

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

102595-97-8-0179

Domestic Return Receipt

P 174 052 294

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Continued

AIRS ID # 0112411

ROYAL FRENCH CLEANERS  
JERI LEE CAPRIO  
6949 W COMMERCIAL BLVD  
TAMARAC FL 33321

PS Form 3800, April 1995

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