

NO ACTIVITY FOR FACILITY
EMISSION FEE DATES
SOC REPORTS
COMP. STATUS - SNC MNC IN

*Insp - INS - Compliance Inspection
went through 2/26/2007 - IN
Insp ~~Brother~~ Co - SEAR - CB*

**Office
DEPOT**

Made In USA





Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

June 25, 2008

Ms. Hilda Ricardo
Cove Spotmaster Cleaners
1480 East Hillsboro Boulevard
Deerfield Beach, Florida 33441

Re: Facility No.: 0112412-003

Dear Ms. Ricardo:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on May 22, 2008.

Pursuant to Florida Statutes section 403.814, the authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

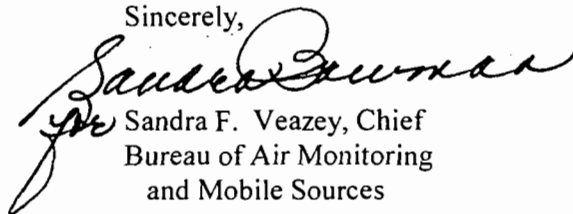
For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

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,



Sandra F. Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SFV/pg

cc: Mr. Clifton Bittle, Broward County

RECEIVED
MAY 22 2008
DEP Mobile Source

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	SPOTMASTEE DRY CLEANERS INC		
2. Site Name (For example, plant name or number):	COVE SPOTMASTEE CLEANERS		
3. Hazardous Waste Generator Identification Number:	RLCE206		
4. Facility Location: Street Address: City:	County: BROWARD	Zip Code: 33440	
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0112412-003		

Responsible Official

6. Name and Title of Responsible Official: Name:	MS HILDA RICARDO	Title: DRES	
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City:	1480 E HILLSBORO BLVD D 51 DEERFIELD BEACH	County: BROWARD	Zip Code: 33441
8. Responsible Official Telephone Number: Telephone:	(561) 3684361	Fax: () -	

Facility Contact (If different from Responsible Official)

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

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
6/01/07	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

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

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

New store: New machine

Unopened store (date of expected opening _____)

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

- Small Area Source
- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (used 140 - 1,800 gallons of perc per year)

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

- | | |
|--|--|
| <u>Existing machines at small area source</u>
(NONE REQUIRED) <input checked="" type="checkbox"/> | <u>New machines at small area source</u>
Refrigerated condenser <input checked="" type="checkbox"/> |
| <u>Existing machines at large area source</u>
Carbon adsorber <input type="checkbox"/>
Refrigerated condenser <input type="checkbox"/> | <u>New machines at large area source</u>
Refrigerated condenser <input type="checkbox"/> |

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 (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating:

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. 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/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

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

Hilda E. Ricardo
Print name of responsible official

Hilda E. Ricardo
Signature

2/14/08
Date

PERCHLOROETHYLENE (Perc) Dry Cleaning Notification to EPA & FLDEP

Each owner or operator of a Perc dry cleaning facility shall submit to the EPA and FLDEP by registered mail on or before July 28, 2008 a notification of compliance status providing the following information and signed by a responsible official who shall certify its accuracy:

FLDEP Facility ID Number: 03974 0112412

The name and address of the owner or operator;

Hilda E. Ricardo

Name of the owner or operator of the dry cleaning facility

1704 SW 6th Ave

Mailing address of the owner or operator of the dry cleaning facility

Mailing address line 2

Boca Raton - Fla 33486

City State Zip Code

The address (that is, physical location) of the dry cleaning facility;

Spot Masters Dry Clean -

Name of the dry cleaning facility

1480 E Hillsboro Blvd.

Address of the dry cleaning facility (physical location)

Pompano Beach - Fla

Address line 2

Pompano Beach Fla 33441

City State Zip Code

Is the Perc dry cleaning machine located in a building with a residence(s), even if the residence is vacant at the time of this notification?

Check one: No Yes

Is the Perc dry cleaning machine located in a building with no other tenants, leased space, or owner occupants?

Check one: No Yes

Is the Perc dry cleaning operation a major or area source?

Major Source: Perc consumption is greater than 2100 gallons/year

Area Source: Perc consumption is 2100 gallons/year or below

The yearly Perc solvent consumption: 415 gallons
(How much Perc did you buy over the last 12 months?)

Is the Perc dry cleaning operation in compliance with each applicable requirement of the Federal Standard of 40 CFR §63.322?

Check one: No Yes

All information contained in this statement is accurate and true.

Signature of the Responsible Official for the dry cleaning facility

By Registered Mail Send to: USEPA Region 4
Air Toxics and Monitoring Branch
61 Forsyth Street SW
Atlanta, Georgia 30303-8960

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

To Whom It May Concern:

Spot Masters has
Name of Facility

just received, on SEPT-09 2008, notice of
the need to file the attached form. Since we were
not aware of the ruling requiring this information
prior to the date above, please accept this
information as our attempt to remain compliant
with Local, State and federal statutes.

[Signature]
Signature

Hilda E. Ricardo
Print

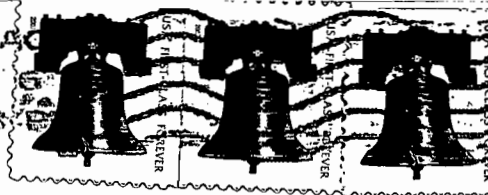
Press
Title

Spot Masters
1480 E Hillsboro Blvd
Deerfield Beach, Fla 33441

WEST PALM BEACH

FL 334

20 MAY 2008



Department of Environmental Protection
2600 Blair Stone Road, MS 5110

Tallahassee, Fla 32399-2400

Attn: Mr. Dickson E Dibble

32399-2400



Spot Masters
1480 E Hillsboro Blvd
Deerfield Beach, Fla 33441

REGISTERED MAIL™



7008 1140 0004 4386 1713

U.S. POSTAGE
DEERFIELD BEACH, FL 33441
SEP 16, 08
AMOUNT
\$5.32



32399

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

3239996542 0001

General Permit Scanning Submission Form

Case File ID : 0112412-003

To be filled in by Customer:

	The following sections are included:	Document Date	Page Count
✓	Acknowledgement Letter	6/25/2008	1
✓	Registration	5/22/2008	4 5
	Fee Acknowledgement		
✓	Correspondence	9/18/2008	23

Customer Verification:

The above checked sections are included in this case file:

Customer Signature: *P. Grant* JAN 30 2009

9

To be filled in by Scan Operator:

✓	The following sections were scanned:
	Acknowledgement Letter
	Registration
	Fee Acknowledgement
	Correspondence(s)

Scan Operator Verification:

The above checked sections were scanned for this case file:

Scan Operator Signature & date: *K. Carr* FEB 03 2009

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

446105 FEB11 2005

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

RECEIVED
FEB 15 2005
Bureau of Air Monitoring
& Mobile Sources

TOTAL AMOUNT DUE: \$50.00

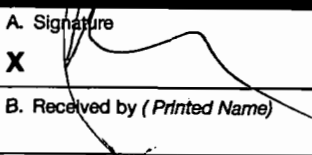
Do NOT Remove Label

AIRS ID# 112412 10
SPOT MASTERS DRY CLEANERS INC
1480 E Hillsboro Blvd
DEERFIELD BEACH, FL 33441

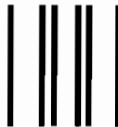
FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

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7658 0144 0000 0050 E002	U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
	For delivery information visit our website at www.usps.com	
	OFFICIAL USE	
	Postage \$ _____ Certified Fee _____ Return Receipt Fee (Endorsement Required) _____ Restricted Delivery Fee (Endorsement Required) _____	Postmark Here
	Tot: AIRS ID# 112412 1stC Sent SPOT MASTERS DRY CLEANERS INC 1480 E Hillsboro Blvd DEERFIELD BEACH, FL 33441 Street or PO _____ City _____	
PS Form 3800, June 2002 See Reverse for Instructions		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse, so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee 
1. Article Addressed to: AIRS ID# 112412 1stC SPOT MASTERS DRY CLEANERS INC 1480 E Hillsboro Blvd DEERFIELD BEACH, FL 33441	B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
2. Article Number (Transfer from service label)	3. Service Type <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.
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7003 0500 0004 0144 7658	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

UNITED STATES POSTAL SERVICE



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

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

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

FEB 21 2005
RECEIVED
U.S. DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
TALLAHASSEE, FLORIDA

