



# Department of Environmental Protection

Lawton Chiles  
Governor

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

Virginia B. Wetherell  
Secretary

December 29, 1998

Mr. Richard Kushner  
One Price Dry Cleaners  
2654 East Oakland Park Boulevard  
Fort Lauderdale, Florida 33306

Re: Facility No.: 0112430

Dear Mr. Kushner:

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

0112430

p14

1(c)

Should not be marked.  
Mark out and initial.

2(a)

If no pens was purchased, add "0"

p16

Responsible official sign and date  
for changes.

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

Bureau of Air Monitoring & Mobile Sources

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1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):  
MELNICH CORP

2. Site Name (For example, plant name or number):  
ONE PRICE DRY CLEANING

3. Hazardous Waste Generator Identification Number:  
APPLIED FOR

4. Facility Location: 124 WEBSTON RD  
Street Address:  
City: SUNRISE County: BROWARD Zip Code: 33326

5. Facility Identification Number (DEP Use):  
0112430

Responsible Official

6. Name and Title of Responsible Official:  
RICHARD KUSHNER PRES.

7. Responsible Official Mailing Address:  
Organization/Firm: MELNICH CORP d/b/a ONE PRICE DRY CLEANING  
Street Address: 2654 E. OAKLAND PK. BLVD  
City: FT. LAUDERDALE County: BROWARD Zip Code: 33306

8. Responsible Official Telephone Number:  
Telephone: (954) 565-3665 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) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Example</i>									
		#1 03-OCT-93	12-NOV-93		#2 08-DEC-91			#3 02-MAR-92	02-MAR-92
Dry-to-Dry Unit		<i>DAY 7. DAY</i>			<i>DAY 7. DAY</i>				
(1) w/ ref. condenser		#1 11 DEC 95	11 DEC 95		#2 11 DEC 95	11 DEC 95			
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit									
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									

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

(c) No control devices are required to be installed

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  
 gallons *NEW INSTALLATION (APPROX 250 GALLONS TO BE PURCHASED)*

(b) If less than 12 months, how many?  months  
 Check why it is less than 12 months: New owner:  New store:  Did not keep records:

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

Existing small area source       New small area source

Existing large area source       New large area source

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

Existing large area source

Carbon adsorber

Refrigerated condenser

New small area source

Refrigerated condenser

New large area source

Refrigerated condenser

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

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

All steam and hot water generating units exempt

No such units on-site

### Equipment Monitoring and Recordkeeping Information

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

(a) Purchase receipts and solvent purchases

(b) Leak detection inspection and repair

(c) Refrigerated condenser temperature monitoring

(d) Carbon adsorber exhaust perc concentration monitoring

(e) Instrument calibration

(f) Start-up, shutdown, malfunction plan

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

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form: specifically, permit number(s) \_\_\_\_\_
  
- No air permits currently exist for the operation of the facility indicated in this notification form.

**Responsible Official Certification**

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

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

Signature

  
RICHARD KUSHNER (PRESIDENT)

Date

12/11/98

FEB 02 1999

Hazardous Waste  
Cleanup Section

INITIAL NOTIFICATION REPORT

1. Print or type the following for each separately located dry cleaning plant (facility). The owner of more than one plant must fill out a separate form for each plant.

Owner/operator MELNICH CORP  
 Company Name ONE PRICE DRY CLEANING - 0112430  
 Mailing Address 124 WESTON ROAD  
 City SUNNISE State FL Zip 33326  
 Plant Address (If Different Than Mailing Address)  
 Street Address SAME  
 City \_\_\_\_\_ State \_\_\_\_\_  
 Phone Number (954) 349 1913

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& Mobile Sources

2. Check the box below if:

- your dry cleaner is a pick-up store.
- your dry cleaning plant has only coin-operated dry cleaning machines that are operated by the customers.

If you checked either box above, you can STOP HERE and return the form to the address given in the accompanying letter.

3. Write in the total volume of perchloroethylene (perc) purchased for ALL of the machines at the dry cleaning plant over the past 12 months:

296 gallons

NOTE: If perchloroethylene purchase records have not been kept at the plant, the volume may be estimated for this initial report.

Method of determining gallons (circle one):

actual estimated

4. Next to each machine type listed below, write the number of machines of that type located at your plant:

Dry-to-Dry       Transfer

5. Provide the following information for EACH MACHINE at your plant. If you have more than 4 machines at your plant, make additional copies of this page.

	Machine 1	Machine 2	Machine 3	Machine 4
Machine Type (Circle One)	Dry-to-Dry or Transfer	Dry-to-Dry or Transfer	Dry-to-Dry or Transfer	Dry-to-Dry or Transfer
Date Machine Was Installed	12/12/98	12/12/98		
Control Device (Use WORKSHEET on Pages 5 & 6 to Determine Required Control)	DRY TO DRY MACHINE WITH REGENERATED CONDENSEN	DRY TO DRY MACHINE WITH REGENERATED CONDENSEN		
Date Control Device was Installed or Is Planned to Be Installed	12/12/98	12/12/98		

6. The following pollution prevention practices must be performed at your plant starting on 12/20/93. These practices are listed on an attached sheet that can be posted next to your machine:

- Conduct a weekly leak detection and repair program to inspect all dry cleaning equipment for leaks that are obvious from sight, smell, or touch. NOTE: This program is required every other week if you wrote NO CONTROL REQUIRED in the shaded box in Question 5.
- Repair leaks within 24 hours after they are found, or order repair parts within 2 working days after detecting a leak that needs repair parts. Install the repair parts by 5 working days after they are received.
- Keep a log of the weekly (or biweekly) results of the leak detection and repair program.
- Follow good housekeeping practices, which include keeping all perc and wastes containing perc in covered containers with no leaks, draining cartridge filters in closed containers, and keeping machine doors shut when clothing is not being transferred.
- Operate and maintain all dry cleaning equipment according to manufacturers' instructions.



WORKSHEET

A. To find out if control is required:

Check all boxes that apply:

- I reported less than 140 gallons in Question 3 (page 1)..
- I reported less than 200 gallons in Question 3 (page 1) AND reported only transfer machines in Question 4 (page 1).

If you checked either box above and all your machines were installed before 12/9/91, you can STOP HERE. Write NO CONTROL REQUIRED in the shaded box on page 2 for each machine at your plant that was installed before 12/9/91. For those machines installed on or after 12/9/91, continue with the rest of the worksheet.

YOU ARE FINISHED WITH THE WORKSHEET. GO TO QUESTION 6 (page 2).

If you did not check a box above, go to Part B below.

B. Control is required. Fill out Part B for EACH MACHINE at your plant.

Check the appropriate box:

- Machine was installed BEFORE 12/9/91.

If you checked this box, your required control is a refrigerated condenser or a carbon adsorber that was installed before 9/22/93. Write REFRIGERATED CONDENSER or CARBON ADSORBER in the shaded box below the machine on page 2.

Control must be installed by 9/22/96.

- Machine was installed ON OR AFTER 9/22/93.

If you checked this box, your required control is a dry-to-dry machine with refrigerated condenser.

Write DRY-TO-DRY MACHINE WITH REFRIGERATED CONDENSER in the shaded box below the machine on page 2. NOTE: NO NEW OR USED TRANSFER MACHINES CAN BE INSTALLED AFTER 9/22/93.

Control must be installed when machine is installed.

- Machine was installed ON OR AFTER 12/9/91 AND BEFORE 9/22/93.

If you checked this box, your required control is a dry-to-dry machine with refrigerated condenser. Write DRY-TO-DRY MACHINE WITH REFRIGERATED CONDENSER in the shaded box below the machine on page 2.

If the machine you have is NOT a dry-to-dry machine with a refrigerated condenser, the machine must use either a refrigerated condenser or carbon adsorber from 9/22/93 until 9/22/96. On or after 9/22/96, any carbon adsorbers on dry-to-dry machines must be replaced with a refrigerated condenser. If the machine is a transfer machine with a carbon adsorber or a refrigerated condenser, you may keep this installation until 9/22/96. If you plan to keep a dry-to-dry machine with a carbon adsorber or a transfer machine with either a refrigerated condenser or carbon adsorber until 9/22/96, also write this information in the shaded box.

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7. The following records must be kept at your plant:

- A log of the results of the leak detection and repair program.
- A log of the amount of perc purchased for the past 12 months, calculated each month.
- The operation and maintenance manuals for all dry cleaning equipment at the plant.

8. If a room enclosure is installed on a transfer machine as stated in Question 4, the following information about the room enclosure must be attached to this report.

- Description of the materials that the room enclosure is constructed of to show that it is impermeable to perchloroethylene, and
- Explanation of how the room enclosure is operated to maintain a negative pressure at all times while the transfer machine is operating.
- Explanation of how the room enclosure exhausts into a carbon adsorber

9. Print or type the name and title of the Responsible Official for the dry cleaning plant:

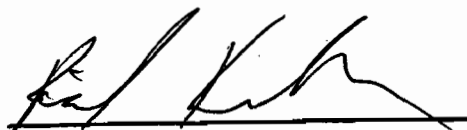
<u>RICHARD KUSHNER</u>	<u>PRESIDENT</u>
Name	Title

A Responsible Official can be:

- The president, vice president, secretary, or treasurer of the company that owns the dry cleaning plant,
- An owner of the dry cleaning plant,
- The manager of the dry cleaning plant, or
- A government official if the dry cleaning plant is owned by the Federal, State, City, or County government.
- A ranking military officer if the dry cleaning plant is located at a military base.

The Responsible Official must certify below that all of the information presented in this initial report is accurate and true.

I CERTIFY THE INFORMATION CONTAINED IN THIS REPORT TO BE ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE.

 (RICHARD KUSHNER PRES)

(Signature of Responsible Official)

C. To find out if additional control is required:

Check all boxes that apply:



I reported 1,800 gallons or less in Question 3 (page 1).



I reported 2,100 gallons or less in Question 3 (page 1) AND I reported only dry-to-dry machines in Question 4 (page 1).

If you checked either box above, you can STOP HERE. No additional controls are required.

YOU ARE FINISHED WITH THE WORKSHEET. RETURN TO QUESTION 5 (page 2) and write in the dates the controls were or will be installed.

If you did not check a box above, go to Part D below.

D. If additional control is required, fill out Part D for EACH machine at your plant:

Check a box below, if it applies:



Machine is a dry-to-dry machine that was installed ON or AFTER 12/9/91.

If you checked this box, you are also required to install a supplemental carbon adsorber.

Write SUPPLEMENTAL CARBON ADSORBER in the shaded box below the machine on page 2.



Machine is a transfer machine.

If you checked this box, you are also required to install a room enclosure. Write ROOM ENCLOSURE in the shaded box below the machine on page 2.

YOU ARE FINISHED WITH THE WORKSHEET. RETURN TO QUESTION 5 and write in the dates all controls were or will be installed (page 2).

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COMPLIANCE REPORT FOR CONTROL REQUIREMENTS

1. Print or type the following for each separately located dry cleaning plant (facility). The owner of more than one plant must fill out a separate form for each plant.

Owner/operator MELNICK GNP  
 Company Name ONE PAUCE DRY CLEANING  
 Mailing Address 124 WESTON ROAD  
 City SUNNISE State FL Zip 33326  
 Plant Address (If Different Than Mailing Address)  
 Street Address SAME  
 City \_\_\_\_\_ State \_\_\_\_\_  
 Phone Number (954) 349-1913

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2. Write in the total volume of perchloroethylene (perc) purchased for the dry cleaning plant over the last 12 months (based on actual purchase receipts):

296 gallons

3. Fill out the table below for each machine at your plant. Use the WORKSHEET on pages 5 and 6 of the INITIAL NOTIFICATION REPORT to determine required controls. A copy of the INITIAL NOTIFICATION REPORT is attached.

Machine Type (Dry-to-Dry or Transfer)	Date Machine Purchased	Required Control	Date Control Installed
1. <u>Dry to Dry</u>	<u>12/12/98</u>	<u>REFRIGERATED CONDENSER</u>	<u>12/12/98</u>
2. <u>Dry to Dry</u>	<u>12/12/98</u>	<u>REFRIGERATED CONDENSER</u>	<u>12/12/98</u>
3.			
4.			
5.			
6.			
7.			

4. If you listed a required control in Question 3 (page 1) for any machine at your plant, you must monitor your control.

To find out what type of monitoring is required,

Check  all boxes that apply:



I use a refrigerated condenser on a dry-to-dry machine to meet the required control.

If you checked this box, you are required to perform a weekly monitoring test to show that the temperature on the outlet side of the refrigerated condenser is less than or equal to 45 degrees Fahrenheit.



I use a refrigerated condenser on a transfer machine to meet the required control.

If you checked this box, you are required to perform a weekly monitoring test to show that the temperature on the outlet side of the refrigerated condenser on the transfer dryer is less than or equal to 45 degrees Fahrenheit AND that the difference between the inlet and the outlet temperature of the refrigerated condenser on the transfer washer is greater than or equal to 20 degrees Fahrenheit.



I use a carbon adsorber on a dry-to-dry or a transfer machine to meet the required control, OR



I use a supplemental carbon adsorber on a dry-to-dry machine and the exhaust passes through the carbon adsorber IMMEDIATELY UPON door opening.

If you checked either of the two boxes above, you are required to perform a weekly monitoring test with a colorimetric detector tube to show that the concentration of perc in the exhaust from the carbon adsorber is not over 100 parts per million.



I use a supplemental carbon adsorber on a dry-to-dry machine and the exhaust passes through the carbon adsorber BEFORE the machine door is opened.

If you checked this box, you are required to perform a weekly monitoring test with a colorimetric detector tube to show that the concentration of perc inside the dry cleaning machine drum at the end of the drying cycle is not over 300 parts per million.



I use a room enclosure on a transfer machine.

If you checked this box, you are required to vent all air from inside the room enclosure through a carbon adsorber. The room enclosure must be constructed of materials impermeable to perc, must be designed and operated to maintain a negative pressure at all times while the transfer machine is operating, and must exhaust to a carbon adsorber.

5. Print or type the name and title of the Responsible Official for the dry cleaning facility:

RICHARD RUSHNER

Name

PRESIDENT

Title

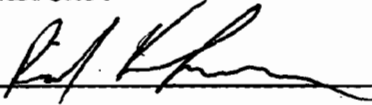
Examples of Responsible Officials:

- The president, vice president, secretary, or treasurer of the company that owns the dry cleaning facility,
- An owner of the dry cleaning facility,
- The manager of the dry cleaning facility, or
- A government official if the dry cleaning facility is owned by the Federal, State, City, or County government,
- A ranking military officer if located at a military base.

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The Responsible Official must certify below that all of the information presented in this initial report is accurate and true.

I CERTIFY THE INFORMATION CONTAINED IN THIS REPORT TO BE ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE AND THAT THIS PLANT IS IN COMPLIANCE WITH ALL APPLICABLE CONTROL DEVICE AND MONITORING REQUIREMENTS LISTED IN THIS REPORT.



RICHARD KUSHNEN (PRES)

(Signature of Responsible Official)

- The operation and maintenance manuals for all dry cleaning equipment at the plant.

5. Print or type the name and title of the Responsible Official for the dry cleaning plant:

RICHARD KUSHNEN                      PRESIDENT  
 Name    Title

A Responsible Official can be:

- The president, vice president, secretary, or treasurer of the company that owns the dry cleaning plant,
- An owner of the dry cleaning plant,
- The manager of the dry cleaning plant, or
- A government official if the dry cleaning plant is owned by the Federal, State, City, or County government, or
- A ranking military officer if the dry cleaning plant is located at a military base.

The Responsible Official must certify the statement below.

I CERTIFY THE INFORMATION CONTAINED IN THIS REPORT TO BE ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE AND THAT THIS PLANT IS IN COMPLIANCE WITH THE POLLUTION PREVENTION PRACTICES LISTED IN THIS REPORT.

*Richard Kushnen*                      (RICHARD KUSHNEN - PRES)  
 (Signature of Responsible Official)

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 FEB 03 1989  
 Bureau of Air Quality  
 & Mobile Sources

COMPLIANCE REPORT FOR POLLUTION PREVENTION

1. Print or type the following for each separately located dry cleaning plant (facility): The owner of more than one plant must fill out a separate form for each plant.

Owner/operator MELNICH Corp  
Company Name ONE PRICE DRY CLEANING  
Mailing Address 124 WESTON ROAD  
City SUNNYSIDE State FL Zip 33326  
Plant Address (If Different Than Mailing Address)  
Street Address SAME  
City \_\_\_\_\_ State \_\_\_\_\_  
Phone Number (954) 349-1913

2. Write in the total volume of perchloroethylene (perc) purchased for ALL of the machines at the dry cleaning plant over the past 12 months (based on actual purchase receipts):

296 gallons

3. The following pollution prevention practices must be performed at your plant starting on 12/20/93.

- Conduct a weekly leak detection and repair program to inspect all dry cleaning equipment for leaks that are obvious from sight, smell, or touch. NOTE: This program is required only every other week (biweekly) if you reported NO CONTROLS REQUIRED in the INITIAL NOTIFICATION REPORT.
- Repair leaks within 24 hours after they are found, or order repair parts within 2 working days after detecting a leak that needs repair parts. Install the repair parts by 5 working days after they are received.
- Keep a log of the weekly (or biweekly) results of the leak detection and repair program.
- Follow good housekeeping practices, which include keeping all perc and wastes containing perc in covered containers with no leaks, draining cartridge filters in closed containers, and keeping machine doors shut when clothing is not being transferred.
- Operate and maintain all dry cleaning equipment according to manufacturers' instructions.

4. The following records must be kept at your plant:

- A log of the results of the leak detection and repair program.
- A log of the amount of perc purchased for the past 12 months, calculated each month.



-----  
**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**

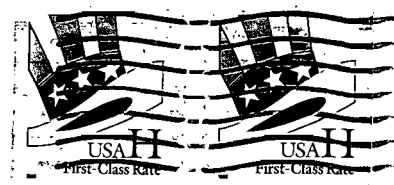
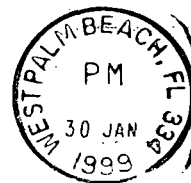
Do **NOT** Remove Label

AIRS ID # 0112430  
ONE PRICE DRY CLEANING  
RICHARD KUSHNER  
2654 E OAKLAND PARK  
FT LAUDERDALE FL 33306

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

ONE PRICE DRY CLEANING  
124 WESTON ROAD  
SUNRISE, FL 33326

4520



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF AIR RESOURCES MANAGEMENT  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FL 32399-2400

32399-6516 01



# PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY   
 RE-INSPECTION

AIRS ID#: 0112430 DATE: 12/22/99 TIME IN: 10:55 Am TIME OUT: 11:15 Am  
 FACILITY NAME: One Price Dry-Cleaners  
 FACILITY LOCATION: 124 Weston Rd.  
Weston FL 33326  
 RESPONSIBLE OFFICIAL: Richard Kushner PHONE: (954) 349-1913  
 CONTACT NAME: Pat Cohen <sup>full-time</sup> ~~2~~ PHONE: \_\_\_\_\_

**PART I: NOTIFICATION**

(check appropriate box)

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

**PART II: CLASSIFICATION**

Facility indicated on notification form that it is:  No notification form  
 (check appropriate box) This facility has two machines.  Drop store/out of business/petroleum

A.

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

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

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

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was \_\_\_\_\_ gallons. 100g each machine

1 of 5 **RECEIVED** Revised 9/15/97  
**DEC 10 2000**  
 Bureau of Air Monitoring  
 & Mobile Sources

**PART III: GENERAL CONTROL REQUIREMENTS**

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

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

**PART IV: PROCESS VENT CONTROLS**

**In Part II-A:**

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

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

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

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

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

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

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

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?  Y  N
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Y  N  N/A  
Is the temperature differential equal to or greater than 20° F?  Y  N  N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?  Y  N  N/A  
Is the perc concentration equal to or less than 100 ppm?  Y  N  N/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?  Y  N  N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?  Y  N  N/A
6. Routed airflow to the carbon adsorber (if used) at all times?  Y  N  N/A

**PART V: RECORDKEEPING REQUIREMENTS**

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

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

**PART VI: LEAK DETECTION AND REPAIRS**

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?  Y  N
2. Has the facility maintained a leak log?  Y  N
3. Does the responsible official check the following areas for leaks?
- |   |   |                           |   |
|---|---|---------------------------|---|
| Hose connections, fittings, couplings, and valves | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers              | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating                          | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills                    | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating                        | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers           | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps   | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves           | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers                      | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators                                  | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |                           |   |
4. Which method of detection is used by the responsible official?
- Visual examination (condensed solvent on exterior surfaces)
- Physical detection (airflow felt through gaskets)
- Odor (noticeable perc odor)
- Use of direct-reading instrumentation (FID/PID/calorimetric 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 standard gas prior to and after each use (PID/FID only)?  Y  N
- c. Inspected for leaks and obvious signs of wear on a weekly basis?  Y  N
- d. Kept in a clean and secure area when not in use?  Y  N
- e. Verified for accuracy by use of duplicate samples (calorimetric only)?  Y  N

Elizabeth F. Susky  
Inspector's Name (Please Print)

12/22/99  
Date of Inspection

Elizabeth F. Susky  
Inspector's Signature

12/22/00  
Approximate Date of Next Inspection

DRY CLEANER AIR QUALITY GENERAL PERMIT  
ANNUAL COMPLIANCE CERTIFICATION FORM

all

FACILITY NAME: One Piece Dry - Cleaners DATE: 12/22  
FACILITY LOCATION: 124 Weston Rd.  
Sunrise, FL 33326

Annual Reporting Period: \_\_\_\_\_ 19\_\_\_\_ TO \_\_\_\_\_ 19\_\_\_\_

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.  YES  NO

If NO, complete the following:

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

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

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

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

*As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to-dry facilities or 1,800 gallons per year for transfer or combination facilities.*

RESPONSIBLE OFFICIAL: MANAGER Pat Cotton [Signature] 12/22/99  
Name (Please Print) Signature Date  
Manager of Store's Signature - Owner Not Available

\*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  COMPLAINT/DISCOVERY   
RE-INSPECTION

FLD000052191

AIRS ID#: <u>0112430</u>	DATE: <u>10/26/00</u>	TIME IN: <u>10:48 AM</u>	TIME OUT: <u>11:15 AM</u>
FACILITY NAME: <u>One Price Dry Cleaners</u>			
FACILITY LOCATION: <u>124 Weston Rd.</u> <u>Weston, FL 33326</u>			
RESPONSIBLE OFFICIAL: <u>Richard Kushner</u>	PHONE: <u>978-329-1713</u>		
CONTACT NAME: _____	PHONE: _____		

RECEIVED  
NOV - 30 2000  
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

### PART II: CLASSIFICATION

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

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

A.

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

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

If no, please check the appropriate classification:

- facility qualified for a general permit as number \_\_\_\_\_ above
- facility exceeds above limits and is not eligible for a general permit

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 100 gallons. each machine



**PART III: GENERAL CONTROL REQUIREMENTS**

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

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

**PART IV: PROCESS VENT CONTROLS**

In Part II-A:

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

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

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

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

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

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

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

- 1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?  Y  N
- 2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Y  N  N/A  
Is the temperature differential equal to or greater than 20° F?  Y  N  N/A
- 3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?  Y  N  N/A  
Is the perc concentration equal to or less than 100 ppm?  Y  N  N/A
- 4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?  Y  N  N/A
- 5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?  Y  N  N/A
- 6. Routed airflow to the carbon adsorber (if used) at all times?  Y  N  N/A

**PART V: RECORDKEEPING REQUIREMENTS**

**Has the responsible official:**

(check appropriate boxes)

- 1. Maintained receipts for perc purchased?  Y  N
- 2. Maintained rolling monthly total of perc consumption?  Y  N
- 3. Maintained leak detection inspection and repair reports for the following:
  - a. documentation of leaks repaired w/in 24 hrs? or;  Y  N  N/A
  - b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  Y  N  N/A  
*No leaks*
- 4. Maintained calibration data? (for applicable direct reading instruments)  Y  N  N/A
- 5. Maintained exhaust duct monitoring data on perc concentrations?  Y  N  N/A
- 6. Maintained startup/shutdown/malfunction plan?  Y  N
- 7. Maintained deviation reports?  
Problem corrected?  Y  N  N/A
- 8. Maintained compliance plan, if applicable?  Y  N  N/A

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

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

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

Hose connections, fittings, couplings, and valves	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	Muck cookers	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Door gaskets and seating	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	Stills	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Filter gaskets and seating	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	Exhaust dampers	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Pumps	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	Diverter valves	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Solvent tanks and containers	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A	Cartridge filter housings	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
Water separators	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A		

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

Visual examination (condensed solvent on exterior surfaces)

Physical detection (airflow felt through gaskets)

Odor (noticeable perc odor)

Use of direct-reading instrumentation (FID/PID/calorimetric 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 standard gas prior to and after each use (PID/FID only)?  Y  N

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

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

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

Elizabeth F. Susky  
Inspector's Name (Please Print)

10/26/00  
Date of Inspection

Elizabeth F. Susky  
Inspector's Signature

10/26/01  
Approximate Date of Next Inspection



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

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

**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

112430 10  
ONE PRICE DRY CLEANING  
124 Weston Road  
SUNRISE, FL 33326

RECEIVED  
5/20/06  
Bureau of Air Monitoring  
& Mobile Sources

AIR ACCT. CODE 372020350013755010000  
BENEFITTING OBJECT CODE 002000  
BENEFITTING CATEGORY 000200

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

Printed on recycled paper.



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

435032 JAN 8 2004

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

112430  
 RICHARD KUSHNER  
 ONE PRICE DRY CLEANING  
 2654 E OAKLAND PARK  
 FT LAUDERDALE FL 33306

RECEIVED  
 JAN 12 2004  
 Bureau of Administration & Management Services

**FOR GOVERNMENT USE ONLY**  
 Org.: 37550101000 EO: AT  
 Fund: 20-2-035001  
 Obj.: 00223

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL™ RECEIPT</b> <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
OFFICIAL USE	
Postage \$ _____ Certified Fee _____ Return Receipt Fee (Endorsement Required) _____ Restricted Delivery Fee (Endorsement Required) _____	<div style="font-size: 2em; font-weight: bold; transform: rotate(-15deg); opacity: 0.5;">         RECEIVED          03/03          MAR 04       </div>
Total Pkgs: 10      0112430001AG	
Sent To: ONE PRICE DRY CLEANING RICHARD KUSHNER 2654 E OAKLAND PARK SUNRISE, FL 33326	
PS Form 3800, June 2002 <span style="float: right;">See Reverse for Instructions</span>	

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

10      0112430001AG  
 ONE PRICE DRY CLEANING  
 RICHARD KUSHNER  
 2654 E OAKLAND PARK  
 SUNRISE, FL 33326

**COMPLETE THIS SECTION ON DELIVERY**

 A. Received by (Please Print Clearly) \_\_\_\_\_ B. Date of Delivery 9-15-03

 C. Signature: *Richard Kushner*
 Agent  
 Addressee

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

3. Service Type

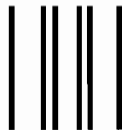
- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Certified Mail | <input type="checkbox"/> Express Mail                   |
| <input type="checkbox"/> Registered                | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Insured Mail              |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

 4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number:

7003 0500 0004 0144 4008

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 •

Bureau of Air, Maritime  
& Mobile Sources

SEP 17 2003

RECEIVED

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







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**

~~420529 DEC 12 2002~~

Bureau of Air Monitoring  
& Mobile Sources

DEC 16 2002

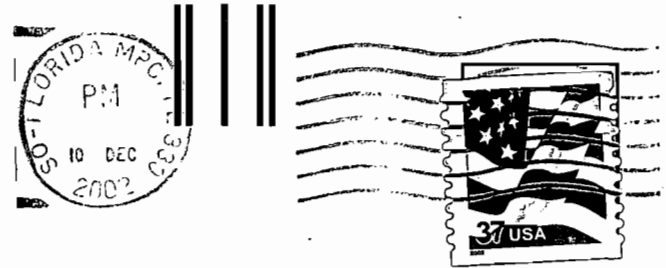
Do **NOT** Remove Label

AIRS ID#0112430

ONE PRICE DRY CLEANING  
RICHARD KUSHNER  
2654 E OAKLAND PARK  
FT LAUDERDALE FL  
33306

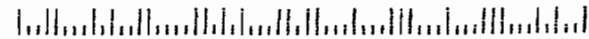
FOR GOVERNMENT USE ONLY  
Org.: 375501000 EO: AI  
Fund: 20-2-035001  
Obj.: 002273

One Price Dry Cleaners  
1575 S. Federal Hwy  
Tallahassee FL 32316

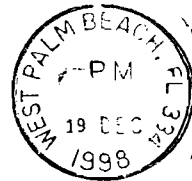


TITLE V - General Permit  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070

32315+3070 99



2654 EAST OAKLAND PARK BLVD.  
FORT LAUDERDALE, FL 33326



TITLE V GENERAL PERMITTING OFFICE  
BUREAU OF AIR MONITORING & MOBILE SOURCES  
MS-5510  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FL 32399-2400

A

32399-6316 01

