

Jeb Bush  
Governor

# Department of Environmental Protection

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

David B. Struhs  
Secretary

March 4, 1999

Mr. Jose R. Velez  
Dryclean USA  
9967 Miramar Parkway  
Miramar, Florida 33025

Re: Facility No.: 0112443

Dear Mr. Velez:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 23, 1999.

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

0112443

p14

1(b)

Should not be marked. Mark out

p15

4. Existing large area source Ref Condenser  
should not be marked. Mark out and  
initial. New small area source  
Ref Condenser should be marked

(F) Required. Should be marked

p16

Add all #'s of permits surrendered.  
If none, mark out "✓" and  
choose "No air permits..."

Responsible Official sign and date  
for changes made.



**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>RENACCI # 130</i> Example #1 03-OCT-93 12-NOV-93 #2 08-DEC-91 #3 02-MAR-92 02-MAR-92									
<b>Dry-to-Dry Unit</b>									
(1) w/ ref. condenser	(1)	05-06-96	05-06-96						
(2) w/ carbon adsorber									
(3) w/ no controls									
<b>Washer Unit</b>									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
<b>Dryer Unit</b>									
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
<b>Reclaimer Unit</b>									
(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?

60 gallons

*NEW OWNER 10/20/99*

(b) If less than 12 months, how many? 3 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

Jose R. Velez, (PRESIDENT)  
JOSE R. VELEZ

Date

1/28/99

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL [checked] COMPLAINT/DISCOVERY [ ] RE-INSPECTION [ ]

AIRES ID#: 0112443 DATE: 12/29/99 TIME IN: 1530 TIME OUT: 1600 FACILITY NAME: Alpha Quality Cleaners d/b/a Dryclean USA FACILITY LOCATION: 9907 Miramar Parkway Miramar, FL 33025 RESPONSIBLE OFFICIAL: Jose Velez PHONE: 435-0353 CONTACT NAME: Same PHONE: Same

Bureau of Air Monitoring & Mobile Sources FEB 17 1998

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) A. 1. Existing small area source... 2. New small area source... 3. Existing large area source... 4. New large area source... 5. This is a correct facility classification [checked] 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 240 gallons.

9967 Miramar Parkway Miramar, FL 33025 Tel: (954) 435-0353

**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  N/A
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  
Is the temperature differential equal to or greater than 20° F?  
 Y  N  N/A  
 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?  
Is the perc concentration equal to or less than 100 ppm?  
 Y  N  N/A  
 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 averages 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?  
Problem corrected?  Y  N  N/A  
 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? *N/A*  Y  N
3. Does the responsible official check the following areas for leaks?
- |   |  |                           |  |
|---|--|---------------------------|--|
| Hose connections, fittings, couplings, and valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers              | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating                          | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills                    | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating                        | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers           | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps   | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves           | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers                      | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators                                  | <input 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

*Paul R. Shelton*

Inspector's Name (Please Print)

*Paul R. Shelton*

Inspector's Signature

*12/28/99*

Date of Inspection

*12/28/2000*

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

12/13

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AUG 27 1997

BROWARD COUNTY D.N.R.P.  
AIR QUALITY DIVISION

BEST AVAILABLE COPY

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

ACC

FACILITY NAME: Alpha Quality Cleaners Alpha Dryclean USA DATE: 12/28/99  
 FACILITY LOCATION: 9467 Mikawan Parkway  
Mikawan, FL-33026

Annual Reporting Period: DEC. 29 1999 TO Dec. 28 2000

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 rolling averages of 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: JOSE A VELEZ Jose A Velez \_\_\_\_\_  
 Name (Please Print) Signature Date  
12-28-99

\*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.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

405933 FEB22 2001

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**TOTAL AMOUNT DUE: \$50.00**

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AIRS ID # 0112443

DRYCLEAN USA - MIRAMAR  
JOSE R VELES  
9967 MIRAMAR PKWY  
MIRAMAR FL 33025

FOR GOVERNMENT USE ONLY  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273

7003 0500 0004 0144 3520

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2004*

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**Sent** DRYCLEAN USA - MIRAMAR  
**Street or PO** JOSE R VELES  
**City:** 9967 MIRAMAR PKWY  
MIRAMAR, FL 33025

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444316 JAN10 2005

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MIRAMAR, FL 33025

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DRYCLEAN USA - MIRAMAR  
9967 MIRAMAR PKWY  
MIRAMAR, FL 33025

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Fund: 20-2-035001

Obj.: 002273

7003 0500 0004 0144 7818

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AIRS ID # 112443

Total Postage

Sent To **JOSE VELES**  
**DRYCLEAN USA - MIRAMAR**  
**9967 MIRAMAR PKWY**  
**MIRAMAR, FL 33025**

Street, Apt. # or PO Box No  
City, State, Z

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

**SENDER: COMPLETE THIS SECTION**

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1. Article Addressed to:

AIRS ID # 112443

**JOSE VELES**  
**DRYCLEAN USA - MIRAMAR**  
**9967 MIRAMAR PKWY**  
**MIRAMAR, FL 33025**

2. Article Number

7003 0500 0004 0144 7818

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*X Jose Vely*  Addressee

B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type

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 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

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DEPT. OF ENVIRONMENTAL PROTECTION  
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2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

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& Mobile Sources

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JOSE VELES

Street, Apt. No.  
 or PO Box No.  
 City, State, ZIP

DRYCLEAN USA - MIRAMAR  
 9967 MIRAMAR PKWY  
 MIRAMAR, FL 33025

PS Form 3800

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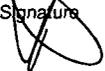
1. Article Addressed to:

ID# 112443  
 JOSE VELES  
 DRYCLEAN USA - MIRAMAR  
 9967 MIRAMAR PKWY  
 MIRAMAR, FL 33025

2. Article Number  
 (Transfer from service label)

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   Addressee

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26-01

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 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

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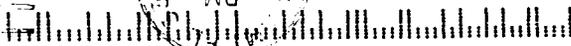
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DAPM/MOBILE SOURCE CONTROL PROGRAM  
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TALLAHASSEE, FLORIDA 32399-2400

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10



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**TOTAL AMOUNT DUE: \$50.00**

424149 FEB28 2003

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AIRS ID#0112443  
DRYCLEAN USA - MIRAMAR  
JOSE R VELES  
9967 MIRAMAR PKWY  
MIRAMAR FL  
33025

Bureau of Air Monitoring  
& Mobile Sources

MAR 05 2003

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Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273

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**Total** AIRS ID # 0112443

<b>Recip.</b>	DRYCLEAN USA - MIRAMAR
	JOSE R VELES
<b>Street</b>	9967 MIRAMAR PKWY
	MIRAMAR FL 33025
<b>City</b>	

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 (Endorsement Required) \_\_\_\_\_  
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 (Endorsement Required) \_\_\_\_\_  
 Total Postage & Fees \$ \_\_\_\_\_

Postmark  
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AIRS ID#0112443

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 Street, or PO: JOSE R VELES  
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 City, S: MIRAMAR FL  
 33025

PS Form

Instructions

7001 0320 0001 7976 7291

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1. Article Addressed to:

AIRS ID#0112443

DRYCLEAN USA - MIRAMAR  
 JOSE R VELES  
 9967 MIRAMAR PKWY  
 MIRAMAR FL  
 33025

2. Article Number

(Transfer from service label)

7001 0320 0001 7976 7291

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

2/8/03

C. Signature

X Martha

Agent  
 Addressee

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

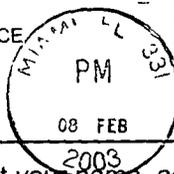
3. Service Type

Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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Bureau of Air Monitoring  
& Mobile Sources

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412786 JAN 9 2002 X

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**

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9967 MIRAMAR PKWY  
MIRAMAR FL  
33025

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

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DRYCLEAN USA  
JOSE R VELES  
9967 MIRAMAR PKWY  
MIRAMAR FL 33025

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