

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-Designee

January 25, 2007

Mr. Martin Konschnik
Flo-Mar Drycleaners
325 South Federal Highway
Dania Beach, Florida 33004

Re: Facility No.: 0112469-002

Dear Mr. Konschnik:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on December 21, 2006.

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, .

Sandra Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SV/pg

cc: Mr. Clifton Bittle-Broward County

NO ACTIVITY FOR FACILITY
MISSION FEE DATES 199-2006
SOC REPORT
COMP. STATUS - SNC MNC (IN)

3/10/2006

INSP-INS2-compliance Inspection walkthrough
INSP Broward Co - CBittler

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
DEC 21 2006
Bureau of Air Monitoring
& Mobile Sources

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): Steve Chelminsky / Laundry King, L.L.C. |
| 2. Site Name (For example, plant name or number): FLO-MAR DRYCLEANERS |
| 3. Hazardous Waste Generator Identification Number: HM-00492-05 |
| 4. Facility Location: Street Address: 325 S. FED. HWY City: DANIA BEACH County: BROWARD Zip Code: 33004 |
| 5. Facility Identification Number (DEP Use ONLY - do not fill in): 0112469-002 |

Responsible Official

| |
|---|
| 6. Name and Title of Responsible Official: Name: MARTIN J. KONSCHNIK Title: PLANT MGR. |
| 7. Responsible Official Mailing Address: Organization/Firm: FLO-MAR DRYCLEANERS Street Address: 325 S. FED. HWY City: DANIA BEACH County: BROWARD Zip Code: 33004 |
| 8. Responsible Official Telephone Number: Telephone: (954) 922-2731 Fax: () - |

Facility Contact (If different from Responsible Official)

| |
|---|
| 9. Name and Title of Facility Contact (For example, plant manager): |
| 10. Facility Contact Address: - SAME AS ABOVE - 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") |
|---|--|--|---|
| 03/82 | <input checked="" type="radio"/> Existing/ <input type="radio"/> New | <input checked="" type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> None required | SAME |
| 05/90 | <input checked="" type="radio"/> Existing/ <input type="radio"/> New | <input checked="" type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> None required | SAME |
| | Existing/ <input type="radio"/> New | RC/ <input type="radio"/> CA/ <input type="radio"/> 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/ <input type="radio"/> New | RC/ <input type="radio"/> CA/ <input type="radio"/> None required | |
| | Existing/ <input type="radio"/> New | RC/ <input type="radio"/> CA/ <input type="radio"/> None required | |
| | Existing/ <input type="radio"/> New | RC/ <input type="radio"/> CA/ <input type="radio"/> 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> | <u>New machines at small area source</u> |
| (NONE REQUIRED) <input checked="" type="checkbox"/> | Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u> | <u>New machines at large area source</u> |
| Carbon adsorber <input type="checkbox"/> | Refrigerated condenser <input type="checkbox"/> |
| 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

*DO NOT
KNOW "exemption"
criteria"
- NO INFO PROVIDED*

How many boilers do you have on-site? 1

For each boiler, indicate its horsepower (HP) rating: 10

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

AIRS ID # 112469

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.

Martin J. Kowalski

Print name of responsible official

[Signature]

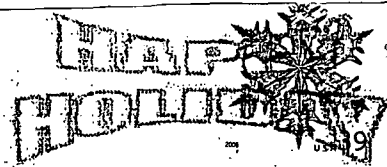
Signature

12-18-06

Date

HO-MAR Cleaners
325 S. Fed. Hwy
Dania Beach, FL 33004

FT LAUDERDALE
FL 333
19 DEC 2006 PM 3 L



General Permits Section
Bureau of Air Monitoring + Mobile Sources, MS5510
Dept. of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

32399+6342



RECEIVED

JAN 11 2007

Bureau of Air Monitoring
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
DEC 21 2006
Bureau of Air Monitoring
& Mobile Sources

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|--|---|------------|-------------------|
| 1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): | Steve Chelminsky / Laundry King, L.L.C. | | |
| 2. Site Name (For example, plant name or number): | FLO-MAR DRYCLEANERS | | |
| 3. Hazardous Waste Generator Identification Number: | HM-00492-05 | | |
| 4. Facility Location: | Street Address: | City: | County: Zip Code: |
| | 325 S. FED. HWY | DANIA BEN, | BROWARD 33004 |
| 5. Facility Identification Number (DEP Use ONLY - do not fill in): | 0112469-002 | | |

Responsible Official

| | | |
|--|---------------------|-------------------|
| 6. Name and Title of Responsible Official: | Name: | Title: |
| | MARTIN J. KORSCHNIK | PLANT MGR. |
| 7. Responsible Official Mailing Address: | Organization/Firm: | Street Address: |
| | FLO-MAR DRYCLEANERS | 325 S. FED. HWY |
| | City: | County: Zip Code: |
| | DANIA BEN. | BROWARD 33004 |
| 8. Responsible Official Telephone Number: | Telephone: | Fax: |
| | (954) 922-2731 | () - |

Facility Contact (If different from Responsible Official)

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

Facility Information

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|--|---|--|---|
| <u>03/82</u> | <input checked="" type="radio"/> Existing / <input type="radio"/> New | <input checked="" type="radio"/> RC / <input type="radio"/> CA / <input type="radio"/> None required | <u>SAME</u> |
| <u>05/90</u> | <input checked="" type="radio"/> Existing / <input type="radio"/> New | <input checked="" type="radio"/> RC / <input type="radio"/> CA / <input type="radio"/> None required | <u>SAME</u> |
| _____ | Existing / <input type="radio"/> New | RC / <input type="radio"/> CA / <input type="radio"/> None required | _____ |

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

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

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|--|--------------------------------------|---|---|
| _____ | Existing / <input type="radio"/> New | RC / <input type="radio"/> CA / <input type="radio"/> None required | _____ |
| _____ | Existing / <input type="radio"/> New | RC / <input type="radio"/> CA / <input type="radio"/> None required | _____ |
| _____ | Existing / <input type="radio"/> New | RC / <input type="radio"/> CA / <input type="radio"/> None required | _____ |

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

20 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 _____)

N/A →
 SAME MANAGER + OPERATOR
 SINCE BEGINNING

RECEIVED

| | |
|-------------|--|
| RECEIVED BY | |
| DATE | |

JAN 11 2007

01-07-07

Bureau of Air Monitoring
& Mobile Sources

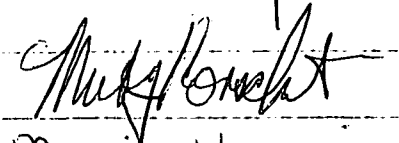
MR. DICKSON DIBBLE,

I AM WRITING THIS LETTER IN REGARDS
TO THE CHANGE OF OWNERSHIP OF THIS BUSINESS.

ON DECEMBER 4, 2004, FLO-MAR CLEANERS
WAS OFFICIALLY PURCHASED (BUILDING, LAND + BUSINESS)
BY LAUNDRY KING, L.L.C. - (PRESIDENT + C.E.O.
MR. STEVE CHELMIANSKY)

IF THERE ARE FURTHER QUESTIONS CONCERNING
THIS SALE (AND/OR CHANGE OF OWNERSHIP) PLEASE FEEL
FREE TO CONTACT ALAN CHELMIANSKY (SON) AT:
(305) 360-0944

THANK-YOU,
Sincerely

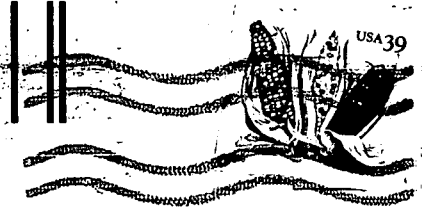

MARTIN KONECHNIK



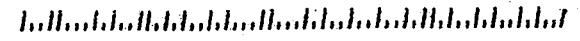
Mr. Martin J. Korschuk
4725 SW 62nd Ave Apt 101
Davie, FL 33314-4461

SOUTH FLORIDA PDC

FL 330 3 T
09 JAN 2007 PM



32399966542 0001



Mail the signed and completed Part III of this form to:

Attn: D. Dibble, General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

SEE QUESTIONS 2a & 2b

RECEIVED
JAN 11 2007
Bureau of Air Monitoring
& Mobile Sources

~~EXPIRED PERMIT~~

ACTIVE
PENDING

12/28/06

2009

WAITING FOR PAGE 14
& PERC USE
LETTER RE: CHANGE
OF OWNERSHIP

AIRS ID #

0112469-002

FORM COPY MAILED

12/22/06 - FOR

COMPLETION & RETURN.

1/11/07 - FORM PAGE 13/14
REC'D & CHANGE OF OWNERSHIP
LETTER, REC'D - OK!

1/5/07

Called Mr. KONSCHNIK to
REMIND HIM. HE REC'D
MY MAIL, BUT HAS NOT COMPLETED
FORM OR LETTER YET. HE INDICATED
THAT HE WILL DO IT AND SEND EXPRESS
MAIL TO GET HERE B-4 THE 21ST OF
JAN.