

NO ACTIVITY FOR FACILITY
EMISSION FEE DATES 98-2006
~~VER-REPORTS~~ 7
COMP: STATUS-SNC MNC (IN)

SOCR

TRPT-SOCR-Statement of Compliance
Report - 9/4/2008-IN

Insp - Clay Co - NED - R Banks

Made in USA

Office
DEPT





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

November 4, 2008

Mr. Monty Lakadawala, Vice President
M M Cleaner
3540 Highway 17 South, Suite 109
Green Cove Springs, Florida 32043

Re: Facility No.: 0190078-003

Dear Mr. Lakadawala:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on October 1, 2008.

Pursuant to Florida Statutes section 403.814, the authority to operate under general permits commences thirty (30) 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.

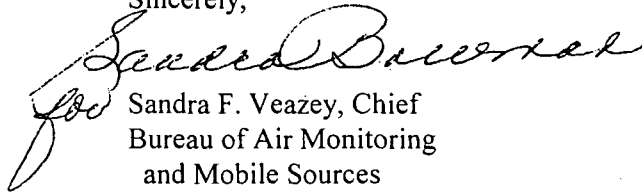
For your information, authority to operate pursuant to Rule 62-210.310 expires after five (5) years. Therefore, a new registration form must be received no later than five (5) years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such 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. Rick Banks, Northeast District

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Bulletin
& Mobile Sources
M. PERMIT

OCT 04 2008

RECEIVED

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):	MARMAN ENTERPRISE YOMM Cleaner.
2. Site Name (For example, plant name or number):	M.M. Cleaner.
3. Hazardous Waste Generator Identification Number:	1210025
4. Facility Location: Street Address:	3540 Hwy 17 South Suite 109
City:	Green Cove Spring
County:	CLAY
Zip Code:	32043
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0190078-003

Responsible Official

6. Name and Title of Responsible Official: Name:	MONTY LAKADAWALA	Title:	V.P.
7. Responsible Official Mailing Address: Organization/Firm:	MARMAN ENTERPRISE	Street Address:	Suite 109
City:	Green Cove Spring	County:	CLAY
Zip Code:	32043		
8. Responsible Official Telephone Number: Telephone:	(904) 284-3600	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:	() -

Master
 Provided Date
 Per telephone
 10/01/08

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")
1981	Existing	RC/CA/None required	same
_____	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> | <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

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) _____

Twenty provided info dead telephone 10/01/08 Seb

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.

Monty Lakadawala
Print name of responsible official

Monty Lakadawala
Signature

9/29/08
Date

Dibble, Dickson

From: Parmer, Cadedra
Sent: Thursday, October 30, 2008 7:06 AM
To: Dibble, Dickson
Cc: Bowman, Sandy; Grant, Patricia; Zhu, Yi
Subject: RE: County change on facility screen, AIRS ID# 1210025, MARMAN ENTERPRISE INC d.b.a. M M CLEANER, 3540 US 17 South Suite 109, GREEN COVE SPRINGS, FL 32043

Dick,
The county has been changed from Suwannee County to Clay County. The new ID is 0190078.

Cadedra

From: Dibble, Dickson
Sent: Tuesday, October 28, 2008 3:27 PM
To: Parmer, Cadedra
Cc: Bowman, Sandy; Grant, Patricia; Zhu, Yi
Subject: County change on facility screen, AIRS ID# 1210025, MARMAN ENTERPRISE INC d.b.a. M M CLEANER, 3540 US 17 South Suite 109, GREEN COVE SPRINGS, FL 32043

Cadedra,

Three permits ago someone entered the subject item facility in ARMS as being located in Suwannee County when in reality it should be in Clay County.

Would you be so kind to make the change to reflect the correct county location and let me know what the new AIRS ID# is for our files?

Thank you,

Dick

Dickson E. Dibble, ES III

FL Dept of Environmental Protection
Div. of Air Resource Management
Bureau of Air Monitoring & Mobile Sources
Air General Permit Program
Tel. (850) 921-9586
FAX (850) 922-6979
ICG-#345

Dickson.Dibble@dep.state.fl.us



Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

10/30/2008

General Permit Scanning Submission Form Case File Completeness Verification

Case File ID Number: 0190078-003 (DC)

To be filled in by Customer:

✓	The following sections are included in this case file:
✓	1. Acknowledgement Letter
	Document Date: <u>11/4/2008</u>
✓	2. General Permit Registration
	Document Date: <u>10/17/2008</u>
✓	3. Correspondence (attachments, envelopes, mailing receipts)
	Document Date: <u>10/30/2008</u>
✓	4. Fee Acknowledgement
	Document Date:

1
4
1
6

Customer Verification:

The above checked sections are included in this case file:

Customer Signature: *PL Grant* NOV 21 2008

To be filled in by Scan Operator:

✓	The following sections were scanned for this case file:
✓	1. Acknowledgement Letter
✓	2. General Permit Registration
✓	3. Correspondence (attachments, envelopes, mailing receipts)
	4. Fee Acknowledgement

Scan Operator Verification:

The above checked sections were scanned for this case file:

Scan Operator Signature: *[Signature]*
Date Scanned: DEC 01 2008

M. McLean
3540 Hwy 17 South
Suite 109
Green Cove Spring
FL 32043

DAYTONA BEACH
FL 321
29 SEP 2008 PM 2 T

LET US DARE TO
THINK, SPEAK AND
John Adams, 1765
powerofthe



10-Title V Air General
Permit Program
Bureau of Air Monitoring and mobile Sources
MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Ft. Lauderdale, FL 33309-2400