

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

February 3, 1997

Mr. Miguel Gonzaler Dryclean USA 8633 Northwest 186 Street Miami, Florida 33015

Re: Facility No. 0250774

Dear Mr. Gonzaler:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 20, 1996.

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. Ewart Anderson, Dade County

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

	BEST	AVAILABLE COP
	Dryclean USA	
1.	Spoke with business-10/18/96 Spoke with Miguel Gonzalez DH 1/0) add to "00"	
3.	Site P.14 1.(a) add day -09" 3. mark out "X" in existing large Area Source & initial P.15 4. mark out "X" in existing large Grea Source & "X" in existing large	
4.	ci initial	,015
6.	N N	<u> </u>
7.	R C S	le: 330iS
8.		
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: () -	

SEP 2 0 1996

Bureau of Air Monitoring & Mobile Sources

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Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	OSHMAR, INC
. 2.	
	DRYCLEAN USA
3.	Hazardous Waste Generator Identification Number:
	FLO CESQG
4.	Facility Location: Street Address: 8633 NW 186 ST City: MIAMI County: DADE Zip Code: 33015
5.	Facility Identification Number (DEP Use):
	0250774
	Responsible Official
6.	Name and Title of Responsible Official:
	MiGuel Gonzaler Manager
7.	Responsible Official Mailing Address: Organization/Firm: Street Address: 8633 NW 186 ST City: MIAMI County: DADE Zip Code: 33015
8.	Responsible Official Telephone Number: Telephone: (305) 829 - 1901 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: () -
	RECEIVED

SEP 20 1996

Bureau of Air Monitoring & Mobile Sources

DEP Form No. 62-213.900(2) Effective: 6-25-96

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.

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit	<u> </u>	09/91	09/91					•	
(1) w/ ref. condenser	#		1 200 91	1					
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit					•				
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit								ing to	
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit	٠.								
(10) w/ ref. condenser									
(11) w/carbon adsorber	-								
(12) w/ no controls			1						
(b) Control devices are (c) No control devices 2.(a) What was the total of [/4 / /] (b) If less than 12 mont Check why it is less	are re quant gallo	equired to be ity of perchlo ons ow many? [_	installed [_ proethylene (perc)] purchased in				[]

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines pursuant to section (5) (Indicate with an "X".)	of Part II of this notification form?
Existing large area source Carbon adsorber Refrigerated condense	r 🔀
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 Rule 62-213.300, F.A.C. Verify that all steam and hot water generating a 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 boiler HP or less), and (2) are fired exclusively by natural gas except for peduring which propane or fuel oil containing no more than one percent sulfu	riods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
	•
Equipment Monitoring and Recordkeeping Inf	ormation
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	(<u>X</u>)
(b) Leak detection inspection and repair	$\lceil \chi \rceil$
(c) Refrigerated condenser temperature monitoring	LX
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	[<u>X</u>]

DEP Form No. 62-213.900(2) Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please indicat	e 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
this notifi statement maintain	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to ith all terms and conditions of this general permit as set forth in Part II of this notification form.
I will prod	mptly notify the Department of any changes to the information contained in this notification.
Signature	$\frac{8/30/96}{\text{Date}}$
X	May Dow x 3/24/97

DEP Form No. 62-213.900(2) Effective: 6-25-96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

,	AN USA		DA	TE: 126/8
FACILITY LOCATION; 8633	3 NW (80	551		
MIA	MI, FL	33015		
Annual Reporting Period:	8/20	_1997 то _	3/26	1997
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F	-		/	h DEP Rule NO
If NO, complete the following:				
#1. Term or condition of the general permi	t that has not been in	continuous compliand	æ during the reporting	period stated above:
Exact period of non-compliance: from		1		· · · · · · · · · · · · · · · · · · ·
Action(s) taken to achieve compliance:	, '			
Method used to demonstrate compliance:	· .			
#2. Term or condition of the general permi	it that has not been in	continuous complian	ce 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, made in this notification are true, accurate upon rolling averages of purchase receipts year for transfer or combination facilities.	and complete. Furth	er, my annual consun	nption of perchloroethy	lene solvent, based
RESPONSIBLE OFFICIAL; MGC	el Gourale ame (Please Print)	z x M	Signature	V 3/26/97

DEPT. OF ENVIRONMENTAL 248955
RESOURCES MANAGEMENT (DERM)
AIR QUALITY MANAGEMENT DIVISION
33 S.W. SECOND AVENUE, SUITE 900
MIAMI, FLORIDA 33130-1540

^{*}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.

TITLE VAIR QUALITY GENERAL PERMIT PECTION SUMMARY REPORT ANNUAL V COMPLAINT/DISCOVERY TYPE OF INSPECTION: AIRS ID#: TIME IN: TYPE OF FACILITY: **FACILITY NAME:** FACILITY LOCATION: PHONE NUMBER: **RESPONSIBLE OFFICIAL:** Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.). Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM FOLLOW-UP ACTION REQUIRED COMMENTS: quipment à pricon DS in Complance. The Annual Compliance Certification form has been properly certified and submitted to the inspector. NO DATE OF NEXT INSPECTION: (Approximate)

INSPECTOR'S SIGNATURE:

INSPECTION CONDUCTED BY:

PHONE NUMBER: 3766922

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSP		RY 🗅
	/24/97	JT: 12:15
FACILITY NAME: DRY (WAR)		
FACILITY LOCATION: / & 33	NW 184 ST	
HIAM	1 33018	
PART I: NOTIFICATION		
(check appropriate box)		
1. Existing facility notified DARM by 9/1/9	6	<u>6</u>
2. New facility notified DARM 30 days price	or to startup	
3. Facility failed to notify DARM to use gen	neral permit	
PART II: CLASSIFICATION		
Facility indicated on notification form that (check appropriate box)	t it is:	
A. 1. Existing small area source 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 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 dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>4. New large area source dry-to-dry only, 140<x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,></td></x<2,>	4. New large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,>	
This is a correct facility classification	ÚY UN	
	ation: eral permit as number above its and is not eligible for a general permit	
-	(perc) purchased within the preceding 12 months by t	this dry cleaning

Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
1. Storing perchloroethylene in tightly sealed and impervious containers?	DY ON WE
2. Examining the containers for leakage?	DY ON NA
3. Closing and securing machine doors except during loading/unloading?	MO AG
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	M ON
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON WINA
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 refrig (complete A below).	gerated condenser
If classification 3 has been checked, the machine should be equipped with either a condenser or a carbon adsorber (complete A and B below). Carbon adsorber mus installed prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refrig (complete A and B below).	gerated condenser
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?	MY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	AND NO. A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Y ON ON/A
Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	MY ON
 Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? 	OY ON NA
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	MY ON

PART III: GENERAL CONTROL REQUIREMENTS

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?	DY ON
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	מס צם אם
Is the temperature differential equal to or greater than 20° F?	OY ON
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?	DY DN DNVA
Is the perc concentration equal to or less than 100 ppm?	OY ON
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?	OY ON NAL
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	A/אלט מם עם
6. Routed airflow to the carbon adsorber (if used) at all times?	DY DN DAN/A
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
	ØY ON
(check appropriate boxes)	OY ON
(check appropriate boxes) 1. Maintained receipts for perc purchased?	OY ON
(check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption?	
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: 	OY ON
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days 	DY ON NA
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 	DY ON NA OY ON NA
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? for direct reading instruments only) 	OY ON NA OY ON OY ON OY ON OY ON
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? 	DY ON NA OY ON DN/A OY ON DN/A
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? 	DY ON OY ON MA
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? 	OY ON NA OY ON NA OY ON EN/A OY ON OY ON OY ON
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected? Maintained compliance plan, if applicable? 	OY ON OY ON NA OY ON ON/A OY ON NA OY ON
 (check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected? 	OY ON OY ON NA OY ON ON/A OY ON NA OY ON

2.	Which method of detection is used by the	he respon	sible officia	1?	. ,	
	Visual examination (condensed so	olvent on	exterior sur	rfaces)	Z Z	
	Physical detection (airflow felt th	rough gas	skets)		Ø,	
	Odor (noticeable perc odor)				প্র	
	Use of direct-reading instrumenta	tion (FII)/PID/calori	metric tubes)		
	If using direct-reading instrume	entation,	is the equi	pment:		
	a. Capable of detecting	perc vapo	or concentra	tions in a range of 0-500 ppm?		IN
	b. Calibrated against a s	tandard g	gas prior to	and after each use		
	(PID/FID only)?			•		JN
	c. Inspected for leaks ar	d obviou	s signs of w	ear on a weekly basis?		IN
	d. Kept in a clean and s	ecure are	a when not	in use?		N
	e. Verified for accuracy	by use of	duplicate s	amples (calorimetric only)?	DĂ C	N
3.	Has the facility maintained a leak log?				r C	ИС
4.	Does the responsible official check the	following	g areas for l	eaks?		
	Hose connections, fittings, couplings, and valves	√ Y	□N	Muck cookers	ΩY	ď _N
	Door gaskets and seating	M Y	□N	Stills	₫Y	ПИ
	Filter gaskets and seating	αX	ΠN	Exhaust dampers	ďΥ	ΠN
	Pumps	₫Y	ΠN	Diverter valves	₽ Y	ΠN
	Solvent tanks and containers	ďγ	ПИ	Cartridge filter housings	GY	□N
	Water separators	Y	ПΝ			
						

3/49 Approximate Date of Next Inspection

BEST AVAILABLE COPY

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL [COMPLAINT/D	ISCOVERY [RE-INSPECTION	
FACILITY NAME:	TIMEOUT: SEC DEG DRY CEPTS 18633	SCO CLEANER IN W 150	AIRS ID#:	0250774 2-4- DATE:	95
RESPONSIBLE OFFICIAL:			PHONE NUMBE		
	the compliance requiremen Rule 62-213.300, Florida A	-	- · · · · · · · · · · · · · · · · · · ·	acility is found to be in	
Based on the results of discrepancies were note COMPLIANCE REQ		•		ollowing compliance	
	;			·	
				<u> </u>	<u></u>
	÷.,			reau of Ai & Mobile	MAR 3
				e Sources	0 1998
				ng	0
,					A.,
COMMENTS:	Ty IS IN	Comp. (111)	ncc-		-
The Annual Compliance Certif	ication form has been prope	erly certified and su	bmitted to the inspec	etor. YES N	——— ○□
DATE OF NEXT INSPECTI	on:	(Ananavidat	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
INSPECTION CONDUCTED	D BY:	(Please Prin	OANCO	3776	 .927
(NSPECTOR'S SIGNATUR)	1	Page of	PHONE NUMB	ER:	vised 10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: DRYCLEMY USB	DATE: 2-4-98
FACILITY NAME: DRYCLEM USB FACILITY LOCATION: 8633 NW 18657	
Annual Reporting Period: 3 - 24 1997 TO 2 - 4	19 <u>98</u>
Based on each term or condition of the Title V general air permit, my facility has remained in complian	ce with DEP Rule
62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	
If NO, complete the following:	
	- 41- who mained at a total above.
#1. Term or condition of the general permit that has not been in continuous compliance during the repo	orting period stated above:
·	Bure
Exact period of non-compliance: from	sau s
Action(s) taken to achieve compliance:	of Ai
	So
Method used to demonstrate compliance:	Monito ources
)8 itorin ces
#2. Term or condition of the general permit that has not been in continuous compliance during the rep)8 itorin ces
)8 litorin ces
)8 litorin ces
#2. Term or condition of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance.)8 litorin ces
#2. Term or condition of the general permit that has not been in continuous compliance during the representation. Exact period of non-compliance: from)8 litorin ces
#2. Term or condition of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance during the representation of the general permit that has not been in continuous compliance.)8 litorin ces
#2. Term or condition of the general permit that has not been in continuous compliance during the rep Exact period of non-compliance: from)8 litorin ces
#2. Term or condition of the general permit that has not been in continuous compliance during the representation of non-compliance: Exact period of non-compliance: from	orting period stated above:

*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.

DEPT. OF ENVIRONMENTAL 248955
RESOURCES MANAGEMENT (DERM)
AIR QUALITY MANAGEMENT DIVISION
33 S.W. SECOND AVENUE, SUITE 900
MIAMI, FLORIDA 33130-1540

3755

301557

	OSHMAR INC MIGUEL GONZA 8633 NW 186TH S MIAMI FL 33015	AIRS ID#		FEB 4 1998 eau of Air Monitoring & Mobile Sources	CEIVED
ad.		KOI Kemove Laber			
Annual Reporting Period:	5A~ 1	19 <u>97</u> TO	<u>Dec</u>	31_	197_
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F	_				
If NO, complete the following:					
#1. Term or condition of the general permit	t that has not been in	continuous compl	iance during the repo	orting period stated	l above:
					<u> </u>
Exact period of non-compliance: from			to	ω. ₋	<u> </u>
Action(s) taken to achieve compliance:				- P	
Method used to demonstrate compliance:			·· · · · · · · · · · · · · · · · · · ·		-
#2. Term or condition of the general permit	t that has not been in	continuous compl	iance during the repo	orting 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, bas notification are true, accurate and complete. I does not exceed 2,100 gallons per year for dry-terms.	Further, my annual cor to dry facilities or 1,80	nsumption of perchi O gallons per year f	loroethylene solvent, b for transfer or combina A	ased upon purchase	
Nai	Grel Gon me (Please Print)		Signature	, , , , , , , , , , , , , , , , , , ,	ite

^{*}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

17

COMPLAINT/DISCOVERY

RE-INSPECTION

l l
98 time in: <u>430</u> time out: <u>5</u> 00
on USA:
33 NW 186 SF
OUNTALEZ PHONE: 829-1901
PHONE:
·
rtup
rmit 🔲
,
☐ No notification form ☐ Drop store/out of business/petroleum
☐ No notification form ☐ Drop store/out of business/petroleum
☐ Drop store/out of business/petroleum 2. New small area source
Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr
Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr
Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr
Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr
Drop store/out of business/petroleum 2. New small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after $12/9/91$) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$) \square
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) DY □N □Can not determine
Drop store/out of business/petroleum 2. New small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after $12/9/91$) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$) Ty \square N \square Can not determine
Drop store/out of business/petroleum 2. New small area source 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) DY □N □Can not determine cation: meral permit as number above

Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON DYNA 1. Storing perchloroethylene in tightly sealed and impervious containers? DY DN DN/A 2. Examining the containers for leakage? MY CIM 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DN DN/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DN/A beds according to the manufacturer's specifications? 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) MY DN 1. Equipped all machines with the appropriate vent controls? DY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY ON ONA condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY ON DONA condenser exceeded 45°F? Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

В.	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?	ſ	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	ПN	∟ .4/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ПN	(.4/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?	ΩY	ПN	.N/A
	Is the perc concentration equal to or less than 100 ppm?	ΟY	Ωи	□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?	ΟY	ПN	N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	□N	ЦηΑ
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	ПN	Ĺ 4/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	מס אָעם
2. Maintained rolling monthly averages of perc consumption?	DY ON
3. Maintained leak detection inspection and repair reports for the following:	,
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON MON/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?	אומם מם צם
4. Maintained calibration data? (for applicable direct reading instruments)	אואש אם צם שטאא
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON DANA
6. Maintained startup/shutdown/malfunction plan?	אם אם
7. Maintained deviation reports?	אואס מם צם
Problem corrected?	DY DN ØN/A
8. Maintained compliance plan, if applicable?	DY ON ON/A

PA	RT VI:	LEAK	DETECTION	ON AND	REPAIRS
1	Does the	recnon	sible official	conduct	a weekly (fo

PA	ART VI: LEAK DETECTION AND	REPAIRS	·		
1.	Does the responsible official conduct a	weekly (for small source	s, bi-weckly) leak detection an	d repair	
	inspection?			Nax 0	ѝ
2.	Has the facility maintained a leak log?			QYY	N
3.	Does the responsible official check the	following areas for leaks	?		
	Hose connections, fittings, couplings, and valves	DY ON ONA	Muck cookers	OY ON (⊋N/A
	Door gaskets and seating	AND NO YE	Stills	DY ON	□N/A
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	ו אם צום	□N/A
	Pumps	DY ON ONA	Diverter valves	MY ON I	□N/A
	Solvent tanks and containers	DY ON ONA	Cartridge filter housings	MA DN	□N/A
	Water separators	DY ON ON/A			
4.	Which method of detection is used by	the responsible official?		,	
Visual examination (condensed solvent on exterior surfaces)				R.	
	Physical detection (airflow felt th	rough gaskets)			
	Odor (noticeable perc odor)			Q	
	Use of direct-reading instrument	ation (FID/PID/calorime	tric tubes)		
	Halogen leak detector				
	If using direct-reading inst	rumentation, is the equi	pment:	□N/A	
	a. Capable of detecting	perc vapor concentration	as in a range of 0-500 ppm?	OY ON	
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use	OY ON	
	c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	OY ON	
	d. Kept in a clean and	secure area when not in t	ise?	OY ON	
	e. Verified for accuracy	by use of duplicate samp	ples (calorimetric only)?	OY ON	
_			· · · · · · · · · · · · · · · · · · ·		-

Inspector's Name (Please Print)

2-4-98
Date of Inspection

2 - 1999 Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
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	i .
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	#0250774
	Dryclean USA
	Spoke with business-10/18/91 Spoke with Miguel Gonzalez
111	
P.14	1.(a) add day -09" 3. mark out "X" in existing lan area source + Unitial
	area source & initial
P.15	4. mark out "X" in existing land area source W/refrig. con. +
	11 Unitral
	5.(f) required

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	OSHMAR, INC
2.	Site Name (For example, plant name or number):
	DRYCLEAN USA
3.	Hazardous Waste Generator Identification Number:
	FLO CESQG
4.	,
	Street Address: 8633 NW 186 ST City: MIAMI County: DADE Zip Code: 33015
5.	Facility Identification Number (DEP Use):
	0250774
	Responsible Official
6.	Name and Title of Responsible Official:
	MiGuel Gonzaler Manager
7.	Responsible Official Mailing Address:
	Street Address: 8633 NW 186 ST
	Organization/Firm: Street Address: 8633 NW 186 57 City: MIAMI County: DADE Zip Code: 33015
8.	
	Telephone: $(305)829 - 1901$ 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: () -
	Telephone: () - Fax: () -
	RECEIVED

ISEP 2 0 1996

Bureau of Air Monitoring & Mobile Sources

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

Facility Information

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
Example	#]	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit					7. 1. T.	ari, in			
(1) w/ ref. condenser	#	Dec-91	Dec-91						
(2) w/ carbon adsorber		•							
(3) w/ no controls									
Washer Unit			jagaja j				p Val	in ing	, Factific
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit				ere ere				riku teff	
(7) w/ ref. condenser									
(8) w/ carbon adsorber					_				
(9) w/ no controls									
Reclaimer Unit				1.45		e e sabilet	111111111111		
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are (c) No control devices 2.(a) What was the total (a) [/40] (b) If less than 12 monto Check why it is less	are requant gallo	equired to be ity of perchlo ons ow many? [_	installed [oroethylene (] months	perc)	purchased in				
What is the facility's so (Indicate with an "X".					nitions found	d in section (3) of	Part II?	
N Existing small as	ea so	ource []	Ne	ew sn	nall area soui	rce []		
M Existing small and Existing large ar	ea so	urce 💢	Ne	w la	rge area sour	ce [X]		

DEP Form No. 62-213.900(2) Effective: 6-25-96

What control technology is required on mac (Indicate with an "X".)	hines pursuant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber []	Refrigerated condenser [X]
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser [X]	
5. A facility which contains non everynt emis	sions units shall not be eligible to use the general permit pursuant
	am and hot water generating units on-site meet the following
	te (1) have a total heat input of 10 million BTU/hr or less (298 y by natural gas except for periods of natural gas curtailment o more than one percent sulfur is fired.
All steam and hot water generating units exem No such units on-site	pt [X]
Equipment Monito	ring and Recordkeeping Information
Check all logs which are required to be kept or	n-site in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	$\square X$
(c) Refrigerated condenser temperature monitor	oring X
(d) Carbon adsorber exhaust perc concentration	n monitoring []
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	
	•

DEP Form No. 62-213.900(2) Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please indicate	e 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
this notific statements maintain t	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the smade in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to the thin the air pollutions of this general permit as set forth in Part II of this notification form.
I will pron	nptly notify the Department of any changes to the information contained in this notification.
<u>M</u> Signature	130/96 Date

DEP Form No. 62-213.900(2)

Effective: 6-25-96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RECEIVED

JUN 2 5 1999

TYPE OF INSPECTION:

ANNUAL

ECKLIST

Bureau of Air Monitoring

COMPLAINT/DISCOVIER Sources

RE-INSPECTION

AIRS ID#: <u>0250774</u> DATE: <u>7e6</u> 2	25 199 TIME IN: 11:00 Am TIME OUT: 1217
FACILITY NAME: Dry C	leane USA
FACILITY LOCATION: 8633	NW 186 5t
RESPONSIBLE OFFICIAL: Miquel CONTACT NAME:	(305) 829-1901 PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	artup 🗆
2. Facility failed to notify DARM to use general pe	
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box)	☐ Drop store/out of business/petroleum
A. 1. Existing small area source 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 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	

If no, please check the appropriate classification:

facility qualified for a general permit as number

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 and gallons.

100

5. This is a correct facility classification

□Can not determine

Revised 9/15/97

Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN DXI/A 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DYNA beds according to the manufacturer's specifications? 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? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

<u></u>				
В	. 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?	ΩY	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	₪א	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ПΝ	□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,			
ľ	if machines are equipped with a carbon adsorber?	ΠY	ΩИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПИ	□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?	ΩY	ПИ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	. □ Y	ΩN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ΠИ	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official:	,
(check appropriate boxes)	
1. Maintained receipts for perc purchased?	DY ØN
2. Maintained rolling monthly total of perc consumption?	DY 2N
3. Maintained leak detection inspection and repair reports for the following:	/
a. documentation of leaks repaired w/in 24 hrs? or;	DY DN DN/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?	חאַ היים אם אים
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN MIN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	A/אים אם עים
6. Maintained startup/shutdown/malfunction plan?	אם צם
7. Maintained deviation reports?	DY DN DN/A
Problem corrected?	DY DN DN/A
8. Maintained compliance plan, if applicable?	אואם אם צם

PA	ART VI: LEAK DETECTION AND	REPAIRS		
Ĩ.	Does the responsible official conduct	a weekly (for small source	ces, bi-weekly) leak detect	ion and repair
	inspection?			DY ON
2.	Has the facility maintained a leak log	?		ey on
3.	Does the responsible official check th	e following areas for leak	rs?	
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	OY ON ØN/A

Door gaskets and seating	DY ON ON/A	Stills	DY ON ON/A
Filter gaskets and seating	מאם אם אם	Exhaust dampers	MY ON ON/A
Pumps	MY ON ON/A	Diverter valves	MY ON ON/A

Solvent tanks and containers	ZY DN DN/A	Cartridge filter housings	MY ON ON/A
Water separators	DY ON ON/A		

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	DXI/A

sing direct-reading instrumentation, is the equipment:	DN/A
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?	OY ON
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?	OY ON
c. Inspected for leaks and obvious signs of wear on a weekly basis?	UY UN
d. Kept in a clean and secure area when not in use?	OY ON

e. Verified for accuracy by use of duplicate samples (calorimetric only)? DY DN

Inspector's Name (Please Print)

inspector's Signature

Water separators

ADDITIONAL SITE INFORMATION:			
			·
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BEST AVAILABLE COPY

TYPE OF INSPECTION:	VHUNT COM	APLAINT/DISCOVERY	RE-INSPECTION
TIME IN: 11:00 4	n TIME OUT: 1217	AIRS ID#:	0250 774
TYPE OF FACILITY:	Dry Geer	(CPerC)	
FACILITY NAME:	Dry Clean	USA.	DATE:
FACILITY LOCATION:	CV 8633 N	Jw 186 5t	
<u></u>		· · · · · · · · · · · · · · · · · · ·	
RESPONSIBLE OFFICIAL:	Miquel Gor	PHONE NUMBE	R: (305)829-1901
	f the compliance requirements evalu Rule 62-213.300, Florida Administ		acility is found to be in
Based on the results of discrepancies were not	f the compliance requirements evaluted:	nated during this inspection, the f	ollowing compliance
	UIREMENTAROBLEM	FOLLOW-UP AC	TION REQUIRED
Does not mai	Crecs.	Weed to he	ses. (5 yrs)
Does not r Log of Perc	maintain edling	need to	priller nishminer companieres
· .			
	. 5		
PONTAGE TO THE PORT OF THE POR		<u> </u>	
COMMENTS:			
	<i>;</i>		. •
he Annual Compliance Certif	fication form has been properly cert	•	tor. YES NOT
ATE OF NEXT INSPECTI		OD () Approximate)	
VSPECTION CONDUCTE	- 1/ 0 -	SMARTT .	-
(SPECTOR'S SIGNATUR	La Ab 9	Please Print) PHONE NUMB	ER: 0305)377-69V
	Page	l of 1.	Revised 10/96

15 DH: 0250774

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MIGUEL GONZAILEZ

N. 305

Revised 10/10/96

7:13PM

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

PACILITY NAME:	DMC	lam C	81		P DATE:	706 25,199
FACILITY LOCATION:	8633	Nw	186th	57	<u></u>	
Annual Reporting Period:	7e6		_19 <u>9</u> ? TO	Dile Cource	Totale 6	19_79
Based on each term or condition						
62-213.300, Florida Administra	tive Code (F.A.C.)), during the pen	iod covered by th	is statement.	YES	KINO
If NO, complete the following:						
#1. Term or condition of the ge	neral permit that	has not been in c	ontinuous compl	iance during the r	reporting perior	stated above:
Exact period of non-compliance	: from	- 7e	6 1997	to	7e6 1	999
Action(s) taken to achieve comp	olianœ:		Kee	record	ls of	erc us
Method used to demonstrate con *Note: Mr. Gonzal	mpliance: Des Coved	DERN the	7 DE records t	P (c hat were r	nissing	at the tir
#2. Term or condition of the go					111,326,63101	M. J.C. VIII
Exact period of non-compliance	e: from			to		
Action(s) taken to achieve comp	plianœ:					
Method used to demonstrate co	mpliance:					
			1. :			
As the responsible official, I he nade in this notification are true of the real for transfer or combination test of the test	ue, accurate and c ase receipts, does n facilities.	complete. Further not exceed 2,10	er, my annual coi	sumplion of perc	hloroethylene s	colvent, based
ESPONSIBLE OFFICIAL:	Name (F	Please Print)	p	Signature	} -	Date

This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the scretion of the responsible official to use this form.

> DEPT. OF ENVIRONMENTAL 248955 1 RESOURCES MANAGEMENT (DERM) AIR QUALITY MANAGEMENT DIVISION 33 S.W. SECOND AVENUE, SEP. 1.

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	COMPLAINT/DISCOVERY		
	RE-INSPECTIO			
. vpc vp		TYPE OF THE TARE O	> 1	
	,	70 TIME IN: 2:45 TIME OUT:	2:12	
FACILITY NAME:	Dry Cla	an USA B		
FACILITY LOCATION:	8633	DE BELLONI CUN		
	<i>N</i>	NW 186 St. FROM FE		
	11 0 0	PHONE: 255) 259-/		
RESPONSIBLE OFFICIAL:	Mignel 6	on taken PHONE: \$355)5: \$24-/	901_	
CONTACT NAME:		PHONE: W OF THE PHONE		
		CT		
PART I: NOTIFICATION				
(check appropriate box)		•		
1. New facility notified DARM 30	days prior to star	tup		
2. Facility failed to notify DARM	o use general per	mit	-	
PART II: CLASSIFICATION				
Facility indicated on notification	form that it is:	☐ No notification form		
(check appropriate box)		☐ Drop store/out of business/petro	leum	
A. 1. Existing small area source	۵	2. New small area source		
dry-to-dry only, $x < 140 \text{ gal/yr}$	J	dry-to-dry only, x < 140 gal/yr		
transfer only, x < 200 gal/yr		transfer only, x < 200 gal/yr		
both types, x < 140 gal/yr		both types, x < 140 gal/yr		
(constructed before 12/9/91)		(constructed on or after 12/9/91)		
3. Existing large area source		4. New large area source		
dry-to-dry only, $140 \le x \le 2,100$) gal/yr	dry-to-dry only, $140 \le x \le 2{,}100 \text{ gal/yr}$		
transfer only, $200 \le x \le 1.800$ g		transfer only, $200 \le x \le 1,800$ gal/yr		
both types, $140 \le x \le 1,800 \text{ gal/}$	yr	both types, $140 \le x \le 1,800 \text{ gal/yr}$		
(constructed before 12/9/91)		(constructed on or after 12/9/91)		
5. This is a correct facility classi	fication	MY □N □Can not determine		
If no please check the app	ropriate classifica	ation:		
If no, please check the appropriate classification: G facility qualified for a general permit as number above				
		its and is not eligible for a general permit		
B. The total quantity of perchloroe	thylene (nerc) nu	rchased within the preceding 12 months by this dry clo	aning	
facility was gallons.	.,	The state of the s	G	

1 of S

127/00 DG

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?	DY DN ON/A			
2. Examining the containers for leakage?	DY DN MN/A			
3. Closing and securing machine doors except during loading/unloading?	ØÝ □N			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ØY ON ON/A			
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ON/A			
PART IV: PROCESS VENT CONTROLS				
In Part II-A:				
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 refrige (complete A and B below).	erated condenser			
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?	QA ON			
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	QÃ ON ON/V			
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	DY ON ON/A			

Revised 9/15/97

DY DN BN/A

DY ON

4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated

5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the

6. Conducted all temperature monitoring after an appropriate cooldown period and after

condenser upon opening the door?

condenser exceeded 45° F?

condenser on a weekly/bi-weekly basis?

verifying that the coolant had been completely charged?

B.	Has the responsible official of an existing large or new large area source also:			
	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?	ΩY	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	\Box Y	\square 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?	ΠY	ПN	□N/A
ľ	Is the perc concentration equal to or less than 100 ppm?	ΠY	\square 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?	ΩY	UN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	ПΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПΝ	□N/A

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official:					
(check appropriate boxes)					
1. Maintained receipts for perc purchased?	DY QN				
2. Maintained rolling monthly total of perc consumption?	DY ON				
3. Maintained leak detection inspection and repair reports for the following:					
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ON/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?	DY DN ONIA				
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON ON/A				
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON ON/A				
6. Maintained startup/shutdown/malfunction plan?	DY DN				
7. Maintained deviation reports?	OY ON ON/A				
Problem corrected?	OY ON ON/A				
8. Maintained compliance plan, if applicable?	OY ON ON/A				

PART VI: LEAK DETECTION A	ND REPAIRS					
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
inspection?		•	$ \underline{\sigma}_{Y} $	ПN		
2. Has the facility maintained a leak	log?		ØY	□и		
3. Does the responsible official check	the following areas for leaks	s?				
Hose connections, fittings, couplings, and valves	AY ON ON/A	Muck cookers		N ØN/A		
Door gaskets and seating	DY ON ON/A	Stills	dy on	N □N/A		
Filter gaskets and seating	DY ON ON/A	Exhaust dampers	dy on	N □N/A		
Pumps	DY ON ON/A	Diverter valves	න් ටා	N □N/A		
Solvent tanks and containers	GY ON DN/A	Cartridge filter housings	ØY ON	N □N/A		
Water separators	DY ON ON/A					
4. Which method of detection is used	by the responsible official?					
Visual examination (condens	ed solvent on exterior surface	es)				
Physical detection (airflow fe	elt through gaskets)		P			
Odor (noticeable perc odor)						
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)						
Halogen leak detector						
If using direct-reading instrumentation, is the equipment:						
a. Capable of detect	ing perc vapor concentrations	s in a range of 0-500 ppm?	מם עם	٧		
· ·	t a standard gas prior to and a	after each use				
(PID/FID only)?				4		
c. Inspected for leak	cs and obvious signs of wear	on a weekly basis?				
·	nd secure area when not in us		OY ON	4		
e. Verified for accur	racy by use of duplicate samp	oles (calorimetric only)?		1		
	•					
T. F.	•	Just	/			
Inspector's Name (Please	Print)	Date of Inspection	<u>, , , , , , , , , , , , , , , , , , , </u>			
\		/				
Draw Jana		1/0	/			
menacion e Manatum			JOYL INCOO			

ADDITIONAL SITE INFORMATION: No perc recepts onthe available No denperatue readings (Machine not operating during importai) 1/21/00 Trecaved forest copies of pure purchases

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL C	OMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 2:45	TIME OUT:	3:15 AIRS ID#: 0250774
TYPE OF FACILITY:	Perc Dry	Cleaner
FACILITY NAME:		
FACILITY LOCATION:	•	W 186 st.
TACIBIT LOCATION		
RESPONSIBLE OFFICIAL:	Miguel Gonzal	e7 PHONE NUMBER: 305 - 819-1961
	the compliance requirements evalue 62-213.300, Florida Admin	aluated during this inspection, the facility is found to be in istrative Code (F.A.C.).
Based on the results of t discrepancies were note		aluated during this inspection, the following compliance
COMPLIANCE REQU	JIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
Not main taining		Maindain recapts onsite for
perc purchase	<u>d</u>	minimum of 5 years.
Not maintaining log on weekly	temperature beans	Record temperature readings or weekly basis after an
0		appropriate coddown poriod.
	•	
\$		
COMMENTS:		<u> </u>
The Annual Compliance Certific	ation form has been properly co	rtified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTIO		1/01
		(Approximate)
INSPECTION CONDUCTED	BY:	Fannin
	\	(Please Print)
INSPECTOR'S SIGNATURE:	- Joan Ja	PHONE NUMBER: 305-372-6725
	Page	eof Revised 10/9

AIRS ID#: 0250774

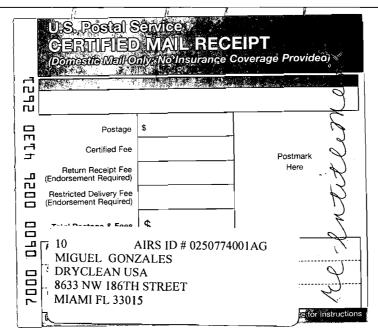
KAC

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Dry Cle	an USA			1/19/00
FACILITY LOCATION:	86-33	NW 186	24. 126	SELAC!	· .
	Miani	PC		AN 2 5 2000	
		•		Air Quality	
Annual Reporting Period:	Jan	19 9 °	B 4	ement Division	792000
Based on each term or condition 62-213.300, Florida Administration		_			P Rule INO
If NO, complete the following:	•	, ·			
#1. Term or condition of the gen	eral permit that has	not been in continuou	s compliance durin	ng the reporting perio	d stated above:
lot plantaing po	ne percha	· receip	<u> </u>		
Exact period of non-compliance:	from	Jan	99to	Jan 20	ల ల
Action(s) taken to achieve compli	iance: Main	tain receip	5 onsite	for minimum	Tyean.
Method used to demonstrate com		•	'		
#2. Term or condition of the gen	eral permit that has	not been in continuou	s compliance durin	ng the reporting perio	d stated above:
let locarling machine	-	A	_		
Exact period of non-compliance:			· · · · · · · · · · · · · · · · · · ·		
Action(s) taken to achieve compl	iance: Recon	d demperature	- Luning co	oddown phase	(245-)
Method used to demonstrate com			, V	-	
\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\				W	
As the responsible official, I here made in this notification are true upon rolling averages of purchas year for transfer or combination	, accurate and comp se receipts, does not	lete. Further, my ann	ual consumption of	of perchloroethylene s	solvent, based
responsible official:# 1 sent by ta	MGJELG Name (Pleas	e Print)	Wigw. Signa	ature -	// 20/00 Date

^{*}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.

TO THE RIGHT OF RETURNADRESS	
PLACE STICKER AT TOP OF ENVELOPE	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee D. Is delivery address different from item ?? Yes
1. Article Addressed to: 10 AIRS ID # 0250774001AG MIGUEL GONZALES DRYCLEAN USA	If YES, enter delivery address below: ☐ No
8633 NW 186TH STREET MIAMI FL 33015	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service Japell) 8262/	The state of the s
PS Form 3811, July 1999 Domestic Ret	eurn Receipt · 102595-99-M-1789



400667

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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AIRS ID # 0250774

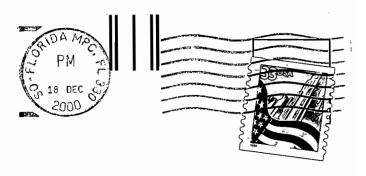
DRYCLEAN USA MIGUEL GONZALES 8633 NW 186TH STREET MIAMI FL 33015 COVERNMENT USE ONLY

FOR GOVERNMENT USE OF Y Org.: 37550101000 E A1 OF TURN Fund: 20-2-035001

Obj.: 002273

Obj.:

8033 NW 195 ST Miami, FL 33018



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



301557

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Org.: 37550101000 EO: B1

on the reverse side?	 Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. White 'Return Receipt Requested' on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date 			ceive the es (for an see's Address ed Delivery ster for fee.	ceipt Service.
RETURN ADDRESS completed	3. Article Addressed to: AIRS ID # 0250774 DRYCLEAN USA MIGUEL GONZALES 8633 NW 186TH STREET MIAMI FL 33015 5. Deceived By: (PrintsName)	4a. Article Number 4b. Service Type Registered Express Mail Return Receipt for Merchandise 7. Date of Delivery 8. Addressee's Address (Only if requested and fee is paid)			Thank you for using Return Rec
Is your B	6. Signature: (Addressee or Agent) X PS Form 3811, December 1994		Domestic Ret	urn Receipt	

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	US Postal Service Receipt for Cer No Insurance Coverage Do not use for Internation	Prov	/ided.	
	Sent to		1000	
M 86	RYCLEAN USA IGUEL GONZALES 333 NW 186TH STREF IAMI FL 33015		AIRS IE	O # 0250774
	Certified Fee	ı	•	
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ıc	Restricted Delivery Fee			
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reverse side	Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write "Return Receipt Requested" on the mailpiece below the article. The Return Receipt will show to whom the article was delivered and delivered.			e does not e number. d the date	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.			
RETURN ADDRESS completed on the	3. Article Addressed to: AIRS ID # 0250774 DRYCLEAN USA MIGUEL GONZALES 8633 NW 186TH STREET MIAMI FL 33015 5. Received By: (Print Name)			774	7. Date of De	Certified Insured Merchandise COD COD COD COD COD COD COD COD	you for us	
Is your RET	6. Signature: (Add X) le PS Eerm 3811, I	rd	la Gardo		and fee is : : :2595-97-B-0179	·	estic Return Receip	_
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