

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

July 22, 1997

Mr. Geoffrey C. Wong President Laundry Associates, Inc. 11444 Southwest 149 Court Miami, Florida 33196

Re: Facility No.: 0250820

Dear Mr. Wong:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on May 27, 1997.

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"

Bowman, Sandy

From: Sent:

Barros, Marcelo (DERM) [BarroM@miamidade.gov] Thursday, June 20, 2002 10:52 AM Bowman, Sandy RE.: Amato One Hour Cleaner Corp.

To:

Subject:

Hi Sandy:

Mr. Ignacio Amato, from Amato One Hour Cleaners, located at 844 Alton Road, Miami Beach, called this office and reported that he submitted a Dry Cleaning Notification Form to

DEP. Unfortunately, that Notification Form was not submitted to DERM.

Since he is concerned about the status of that application, I just need to know if you are in the process of reviewing that Notification Form?. Please confirm.

Thanks

Marcelo.

#0250820

•	· ,
	Dryclean 21SA
D:14	1.(a) add date control device installed 3. Should be new large area 3 ource 4. Should be new large area Source W/refrig. Con.
	installed
	3 should be new large area
	SOUND.
715	it should be new large area
p./s_	201000 00 100 mage of en
	Source Wirefry. Con.
	-
-	
•	

RECEIVED

Perchloroethylene Dry Cleaning Facility Notification

MAY 2 7 1997

Facility Name and Location

Bureau of Air Monitoring & Mobile Sources

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):	
	LAUNDRY ASSOCIATES, INC. Site Name (For example, plant name or number):	
2.	Site Name (For example, plant name or number):	
	DRYCLEAN-USA	
3.	Hazardous Waste Generator Identification Number:	
	139502755	
4.	Facility Location:	
	Street Address: 1515 ACTON ROAD City: Man DE Paul County: DADE Zip Code: 33/39	,
	City: MIAMI BEACH County: DADE Zip Code: 33/39	
5.	Facility Identification Number (DEP Use):	
	0250827	
	Responsible Official	
6.	Name and Title of Responsible Official:	
	GEV-PACY C. WONB, PILESIDEN 1	
7.	Responsible Official Mailing Address: Organization/Firm: LAUNDLY ASSOCIATES, INC. Street Address: 1444 S.W. 149 COURT	
	Street Address: /////// < W. 149 COURT	
	City: MIAMI County: DADE Zip Code: 33,	196
8.		
	Telephone: (308) 538-0722 Fax: () -	
	Facility Contact (If different from Responsible Official)	
9.	Name and Title of Facility Contact (For example, plant manager):	
10	Facility Contact Address:	
10.	. Facility Contact Address:	
	Street Address:	
	City: County: Zip Code:	
11	. Facility Contact Telephone Number:	
11.	Telephone: () - Fax: () -	

DEP Form No. 62-213.900(2)

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Effective: 6-25-96

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.

			Date	Date		Date	Date		Date	Date
		ŀ	Machine	Control	ŀ	Machine	Control		Machine	Contro
			Initially	Device		Initially	Device		Initially	Device
Type of	f Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installe
Exampl	le	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-M
Dry-to-	-Dry Unit									
(1)) w/ ref. condenser	#1	14-00T-93							
(2)) w/ carbon adsorber		1							
(3)	w/ no controls									
Washer	r Unit							-	•	•
(4)) w/ ref. condenser									
(5)	w/ carbon adsorber			_						
(6)) w/ no controls									
Dryer	Unit		1.					•	•	
(7)	w/ ref. condenser									
(8)) w/ carbon adsorber									
(9)) w/ no controls									
Reclain	ner Unit		<u> </u>	•		·				
(10	0) w/ ref. condenser									
(11	1) w/carbon adsorber									
(12	2) w/ no controls	_								
(c) 2.(a) \	Control devices are No control devices What was the total of the control of the control devices	are r quant	equired to be ity of perchlo	installed [_	perc)		n the latest 12	2 moi	nths?	
	If less than 12 mont Check why it is less					_] New store	: [] Did	not k	eep records:	[]
	at is the facility's so licate with an "X".					nitions found	d in section (3) of	Part II?	
}	Existing small ar	rea so	ource []	Ne	ew sn	nall area soui	rce []		
e •			-							

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What control technology is required on machines p (Indicate with an "X".)	ursuant to section (5) of P	art 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 []		
5. A facility which contains non-exempt emissions up to Rule 62-213.300, F.A.C. Verify that all steam and exemption criteria or that no such units exist on-site:		
All steam and hot water generating units on-site (1) h boiler HP or less), and (2) are fired exclusively by na during which propane or fuel oil containing no more	tural gas except for period	ds of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	[X]	
Equipment Monitoring an	nd Recordkeeping Inforn	nation
Check all logs which are required to be kept on-site in	accordance with the requ	irements of this general permit:
(a) Purchase receipts and solvent purchases		(X)
(b) Leak detection inspection and repair		X
(c) Refrigerated condenser temperature monitoring		
(d) Carbon adsorber exhaust perc concentration moni	toring	
(e) Instrument calibration		
(f) Start-up, shutdown, malfunction plan		[X]

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

Surrender of Existing Air Permit(s)

	Surrender of Existing Air Fermines)
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	dersigned, 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 is 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 pro	mptly notify the Department of any changes to the information contained in this notification.
Le	Thur C. Don 5/21/97

Date

PERCHLOROETHYLENE DRY CLEANER BECEIVES

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COMPLIANCE INSPECTION CHECKLIST

OCT 27 b

.1.,	Υ!	PΕ	OE	INSP	ECT	ION:
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ANNUAL.

COMPLAINT/DISCOVERY El Bureau of Air Monitor

RE-INSPECTION

 \Box

& Mobile Sources

AIRS ID#: <u>250820</u> DATE: <u>9-30-</u>	78 TIME IN: 1100 TIME OUT: 1120
FACILITY NAME: JRY CLEAN USA	
FACILITY LOCATION: 1515 ALTON RD.	
MIAMI BEACH,	33/39
RESPONSIBLE OFFICIAL: CHRIS WONG	PHONE: 365-538-0722
CONTACT NAME: NELSON VILLAVERI	PHONE: 4
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to start	tup 🗆
2. Facility failed to notify DARM to use general per	mit \square
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box) A.	☐ Drop store/out of business/petroleum
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, $x < 140 \text{ gal/yr}$ transfer only, $x < 200 \text{ gal/yr}$ both types, $x < 140 \text{ gal/yr}$ (constructed on or after 12/9/91)
3. Existing 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 before $12/9/91$)	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 $12/9/91$)
5. This is a correct facility classification	DY ON Can not determine
1	cation: cneral permit as number above mits and is not eligible for a general permit

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 ON DNA
2. Examining the containers for leakage?	DY ON ON/A
3. Closing and securing machine doors except during loading/unloading?	DY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	Y ON ONA
5. 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:	
If classification I has been checked, no controls are required. Proceed to Part V	<i>'.</i>
If classification 2 has been checked, the machine should be equipped with a refrience (complete A below).	igerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber mu prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refr (complete A and B below).	igerated condenser
A. Has the responsible official of all new sources and existing large area source (check appropriate boxes)	s:
1. Equipped all machines with the appropriate vent controls?	ZY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	ON ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	oy an an/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	DY DN WN/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON

Contract Contract

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?	CIY ON
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON DAYA
	Is the temperature differential equal to or greater than 20° F?	OY ON WN/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?	OY ON ON/A
	Is the perc concentration equal to or less than 100 ppm?	DY DN BNA
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,	OY ON MANA
	or expansion; and downstream from no other inlet?	
5	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	AND ND ANY
6	. Routed airflow to the carbon adsorber (if used) at all times?	DY DN DNA

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

Revised 9/15/97

PART VI: LEAK DETECTION AND R	EPAIRS		
1. Does the responsible official conduct a	weekly (for small sources, l	bi-weekly) leak detection an	d repair
inspection?			DY QN
2. Has the facility maintained a leak log?			DY QN
3. Does the responsible official check the	following areas for leaks?		
Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	DY ON DNA
Door gaskets and seating	DY ON ON/A	Stills	DY ON DN/A
Filter gaskets and seating	DY ON DN/A	Exhaust dampers	DY ON DN/A
Pumps	DY ON ON/A	Diverter valves	DY ON DNA
Solvent tanks and containers	DY ON DNA	Cartridge filter housings	DY ON DNA
Water separators	DY CON DNIA		
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed s	olvent on exterior surfaces)	
Physical detection (airflow felt the	nrough gaskets)		
Odor (noticeable perc odor)			0
Use of direct-reading instrument	c tubes)		
Halogen leak detector			
If using direct-reading inst	rumentation, is the equip	ment:	DNIV
a. Capable of detecting	perc vapor concentrations	in a range of 0-500 ppm?	DY DN
b. Calibrated against a (PID/FID only)?	standard gas prior to and a	fter each use	DY ON
c. Inspected for leaks a	and obvious signs of wear o	on a weekly basis?	מט עם
d. Kept in a clean and	secure area when not in use	e?	אט אם
e. Verified for accurac	y by use of duplicate samp	les (calorimetric only)?	אם צם
-			
M. ENRIQUE FLORES		9-30-98	•
Inspector's Name (Please P	rint)	Date of Inspection	
Manique flory		BCT . 199	9 .
Inspector's Signature	CONTRACTOR OF CHICAGO CASES AND CHICAGO CONTRACTOR OF PROPERTY.	Approximate Date of	THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF TH

ADDITIONAL SITE INFORMATION:

- Q NO RÉCORDS AVMILABLE FOR INSPECTION. AN ATTEMPT TO CONTACT THE SHOP'S RESPONSIBLE OFFICIAL WAS MADE FROM SITE. CONTACT WAS NOT POSSIBLE.
- I A SHOP REPRESENTATIVE MANAGER WAS INSTRUCTED TO HAVE MR WONG BRING ALL RECORDS PERTAINING TO THIS INSPECTION FROM HOME WHERE HE SUPPOSEDLY KEEPS THEM.
- ~ THE PERC MACHINE APPEARED TO BE IN GOOD WORKING, DRDER. NO SPILLS / LEAKS OBSERVED.

rine of inspection:	VHNUVL 🐧	COM	PLAINTIDISCOVERY	RE-INSPECTION	N 🔲
TIME IN: 1100	TIME OUT:	1120	AIRS ID#:	250820	
TYPE OF FACILITY: PER	C DRY CLEANER				
FACILITY NAME: DRY	CLEAN USA		· ·	DATE: 9-30-98	3
FACILITY LOCATION:	515 ALTON RD.				
	MAM! BEACH, 3	3139			
RESPONSIBLE OFFICIAL:	8		РНОПЕ ПИМВ	er: <u>305 · 538 · 072</u>	2
compliance with DE	EP Rule 62-213.300, Florid	da Administra	ited during this inspection, the ative Code (F.A.C.).		
discrepancies were	noted:				
	EQUIREMENTARO			CTION REQUIRED	
NO ROLLING LOG OF PEI TEMP. READINGS LEA BUE FOR INSPECTION	IK INSPECTION RD		WILL KEEP RECORD INSPECTION AT ACL 140URS - ON 51TE		
		ale and the second	i.		
	,	. "			
	••				
<u>:</u>					
	,				
			<u> </u>		
COMMENTS:					
		:			
					,
The Appual Compliance Co	ertification form has been	properly part	ified and submitted to the ins	pector. YES	NOW TO R
				dector. res	
ATE OF NEXT INSPEC	TION:	001.1			m AI
	اسسب	•	pproximate)		
NSPECTION CONDUC	TED BY:		UE FLORES		
NSPECTOR'S SIGNAT	URE: Manigu	Hora)	Please Print) PHONE NUM	1BER: <u>305</u> -372-6	725
	/ .	Page_	of	F	Revised 10/96

DRY CLEANER AIR QUALITY GENERAL PARTIES ANNUAL COMPLIANCE CERTIFICATION FOR

ACILITY NAME: DRYCLEAN USA	0CT 0 6 1998 DATE: 9-30.98
FACILITY LOCATION: 1515 ALTON RD.	Air Quality Management Division
MIAMI BEACH, 33139	- Management Biviolon
Annual Reporting Period: SEPT. 97	TO SEPT. 98 19
Based on each term or condition of the Title V general air permit, my formation of the Title V general air permit, my formation of the V general air permit of the V gener	
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in conti	nuous compliance during the reporting period stated above:
NO PERC. PURCHASE RECEIPTS, CONDENSER TEMP. RE	ADINGS, LEAK INSPECTIONS RETURDS ON SITE.
	1010SEPT. 98
· · · · · · · · · · · · · · · · · · ·	TEMS REPUILY AVAILABLE FOR INSPECTION RING BUSINESS HOURS - ON THE PREMISES - NO nuous compliance during the reporting period-stated above:
Exact period of non-compliance: from	to
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and made in this notification are true, accurate and complete. Further, nupon rolling averages of purchase receipts, does not exceed 2,100 go year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name (Please Print)	y annual consumption of perchloroethylene solvent, based

*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.

SIGN AND MAIL
TO ->

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

160 00 157

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	COMPLIANCE IN	SPECTION C	HECKLIST	Φ	-
TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	, <u> </u>	HECKLIST COMPLAINT/DISC	COVERNO DIE	JUEN 25 10
AIRS 10#: <u>0250820</u>	DATE: 0 6 /03	49 TIME 1	N: 1:40pm.TI	ME OUT:	20pm
FACILITY NAME:	y Clean U	SA	•		NE
FACILITY LOCATION:	1575 Alto	in Rd.)	··-		
	Miami	Beach	PL 3312	39	
RESPONSIBLE OFFICIAL	: Chris Wor	19	PHONE: (3 cs	538-6	0722
l			_PHONE:		
		<u> </u>			
PART I: NOTIFICATION		-	•	:	
(check appropriate box)		-			
1. New facility notified DAR	A 30 days prior to start	ир			
2. Facility failed to notify DA	RM to use general perr	nit			
				·	
PART II: CLASSIFICATIO)N				
Facility indicated on notifica	tion form that it is:		☐ No notification t		
(check appropriate box)			☐ Drop store/out o	f business/petr	oleum
A. 1. Existing small area so	urce 🗆	2. New small	area source		
dry-to-dry only, $x < 140$ ga			x < 140 gal/yr	u	
transfer only, x < 200 gal/y	•	transfer only, >			
both types, x < 140 gal/yr		both types, x <	-		
(constructed before 12/9/9	1)	(constructed or	or af ter 12/9/91)		
3 Fricting large area co	uraa 😿	d Now large	araa courca		
3. Existing large area so dry-to-dry only, 140 ≤ x ≤	2 100 gal/yr	4. New large	y , $140 \le x \le 2,100$ gal	•	
transfer only, $200 \le x \le 1$,			$0.00 \le x \le 1,800 \text{ gal/yr}$		
both types, $140 \le x \le 1,80$) ≤ x ≤ 1,800 gal/ут		
(constructed before 12/9/9			or after 12/9/91)		
5. This is a correct facility	classification	Y X Y □N	□Can not determi	ne	
If no, please check the	ne appropriate classifica	ation:			
II	ility qualified for a gen		number abo	ove	
				emit	
	cility exceeds above lim	its and is not cr	igible for a general pe	inut	

Review + ARMS 4/9/99

Is the responsible official of the dry cleaning facility: (check appropriate boxes)	/
1. Storing perchloroethylene in tightly sealed and impervious containers?	DY DN XVIA
2. Examining the containers for leakage?	DY DN DNA
3. Closing and securing machine doors except during loading/unloading?	Ø Y □N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	Y ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON WAN/A
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part V	
If classification 2 has been checked, the machine should be equipped with a refri (complete A below).	gerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber mu installed prior to September 22, 1993	_
If classification 4 has been checked, the machine should be equipped with a refri (complete A and B below).	igerated 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?	ZYY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	אוחם אם צעד
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ty on on/a
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	Øy on
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	ол ои Айил
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	√ Y □N

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?	√ Y	□и	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	ПΝ	MN/A
	Is the temperature differential equal to or greater than 20° F?	ΩΥ	□и	N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	□ Y	ПN	MN/A MN/A
 11	Is the perc concentration equal to or less than 100 ppm?	ПΥ	ПИ	ØN/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	ПИ	Q VI/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?			□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ΠИ	MN/A

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

P/	PART VI: LEAK DETECTION AND REPAIRS						
Ī.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
	inspection?					ΔÀ	ΠN
2.	Has the facility maintained a leak log?					A	ΩN
3.	Does the responsible official check the f	ollow	ing ar	cas for leaks?			
	Hose connections, fittings, couplings, and valves	\mathbf{A}_{Y}	ПN	□N/A	Muck cookers	∞ √ _Y	ON ON/A
	Door gaskets and scating	\mathbf{A}^{λ}	ΩΝ	□N/A	Stills	∆ Y	□N □N/A
	Filter gaskets and seating	Y	Ωи	□N/A	Exhaust dampers	⊅ Y	□N □N/A
	Pumps	A	Ωи	□N/A	Diverter valves	dy	□N □N/A
	Solvent tanks and containers	A Y	ПΝ	□N/A	Cartridge filter housings	$\not \!\!\!\!\!/_{\rm Y}$	□N □N/A
	Water separators	AN	Πи	□N/A			
4.	Which method of detection is used by the	ie resp	onsit	ole official?		/	
	Visual examination (condensed so	lvent	on ex	terior surfaces)		£ X /	
Physical detection (airflow felt through gaskets)					\mathbf{A}'		
Odor (noticeable perc odor)						l	
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)							
Halogen leak detector					ο,		
	If using direct-reading instru	umen	tation	, is the equipn	nent:	M/N/	'A
	a. Capable of detecting p	oerc v	apor c	concentrations i	n a range of 0-500 ppm?	ΠY	ΩИ
	b. Calibrated against a s (PID/FID only)?	tanda	rd gas	prior to and af	ter each use	ΠY	ΩN
	c. Inspected for leaks an	d obv	ious s	igns of wear on	a weekly basis?	ПΥ	ПΝ
	d. Kept in a clean and so			_	_	ΟY	ПΝ
	e. Verified for accuracy					ΟY	ПN
L							_
	12	,			11 41-0	a	
-	Inspector's Name (Please Prin				Ob OJ 199 Date of Inspe	ection	
	Kristal Gips	n			06/2000		
	Inspector's Signature Approximate Date of Next Inspection				Inspection		

4 of 5

Left the annual compliance certificate with an employee to forward to Mr. Wong to somplete and return to D. E. R. M. office.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL X	COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 1:40 pm TIME OUT: 2:5	20 pm. AIRS ID#: 250820
TYPE OF FACILITY: PERC DRY CLEAN	156
FACILITY NAME: Dry Clean U.S.A.	DATE: 06/6(99
FACILITY LOCATION: 1515 Alten Ro	
Monu Beach	F1_33139.
RESPONSIBLE OFFICIAL: Chus Wong	PHONE NUMBER: (305) 538-6722
Based on the results of the compliance requirements ev compliance with DEP Rule 62-213.300, Florida Admir	valuated during this inspection, the facility is found to be in nistrative Code (F.A.C.).
discrepancies were noted:	valuated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
N/H	N/A.
· · · · · · · · · · · · · · · · · · ·	
- .	
COMMENTS: Shop and pere was	chire in good working
The Annual Compliance Certification form has been properly co	
DATE OF NEXT INSPECTION: 05/200	(Approximate)
INSPECTION CONDUCTED BY: KPIST AL	YIPON
INSPECTOR'S SIGNATURE: Kistal Yppi	PHONE NUMBER: 305) 372 - 6925
Pag	

AIRS ID#: <u>\$50820</u>

DECEIVE Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

Right The College	
FACILITY NAME: Dry Clean USA Management Divition 06/0	1/99
FACILITY LOCATION: 1575 Alton Rd.	
Miani Beach FL 33139	
	,
Annual Reporting Period: $09/30$ 19.98 TO $08/0/$	99.
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated about 1.1.1.4.	ove:
N/A	
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	<u> </u>
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated about	c Q
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the stateme made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, bas upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name (Please Print) Name (Please Print)	red

*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.

Page _____ of ____.

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	126	COMPLAINT	VDISCOVERS 1	CAL
AIRS ID#: <u>のみてのそみの</u> D/				\$ \frac{1}{2}	3/5/0
FACILITY NAME:	ry Clean USI	Α			
FACILITY LOCATION:	1515 ALL	on 12.	٨		
	Mani Be	-cl,	F(
RESPONSIBLE OFFICIAL : _	Ching Won	5	_ PHONE:	05) 538-0	2722
CONTACT NAME:	· · · · · · · · · · · · · · · · · · ·		_ PHONE:		
PART I: NOTIFICATION		•			
(check appropriate box)					
1. New facility notified DARM 30	days prior to startup				
2. Facility failed to notify DARM	to use general permit				
					<u> </u>
PART II: CLASSIFICATION					
Facility indicated on notification	form that it is:		☐ No notificat	ion form	
(check appropriate box)		. •	☐ Drop store/o	out of business/pe	troleum
A. 1. Existing small area source	<u> </u>	vew small	area source		
dry-to-dry only, $x < 140 \text{ gal/yr}$			y, $x < 140$ gal/yr	_	
transfer only, $x < 200 \text{ gal/yr}$		_	: < 200 gal/yr		
both types, x < 140 gal/yr		• •	140 gal/yr		
(constructed before 12/9/91)	(coi	istructea or	or after 12/9/91)	-	
3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ transfer only, $200 \le x \le 1,800$ g both types, $140 \le x \le 1,800$ gala (constructed before $12/9/91$)	O gal/yr dry al/yr tran 'yr botl (coi	to-dry only sfer only, 2 types, 140 astructed or	area source y , $140 \le x \le 2,100$ $100 \le x \le 1,800$ ga $0 \le x \le 1,800$ gal·y or after $12/9/91$)	d/yr rr	
5. This is a correct facility class	ification © Y	ΠИ	Can not dete	rmine	·
	propriate classification qualified for a general exceeds above limits a	permit as n		above I permit	

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning

facility was 165 gallons.

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?	ΩY	ΠN	ØN/A
2. Examining the containers for leakage?	ΩY	ΠN	OXN/A
3. Closing and securing machine doors except during loading/unloading?	ØY	Ωи	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ØY	ΩΝ	□N/A
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	ΟY	ПN	ØN/A
PART IV: PROCESS VENT CONTROLS			
In Part II-A:			
If classification 1 has been checked, no controls are required. Proceed to Part V.			
If classification 2 has been checked, the machine should be equipped with a refrige (complete A below).	erated	cond	enser .
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 must prior to September 22, 1993	-		
If classification 4 has been checked, the machine should be equipped with a refrige (complete A and B below).	rated.	cond	enser
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)			
I. Equipped all machines with the appropriate vent controls?	13 1Y	ПΝ	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	₫XY_	ПΝ	□N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	G Y	ПN	□n/a
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	ΩΥ	()	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	ΩΥ	ПΝ	D W/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	ΟY	12 1	

B.	Has the responsible official of an existing large or new large area source also:			
i.	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?	Q Y	MK)	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	מם	100 N/A
	ls the temperature differential equal to or greater than 20° F?	ΩΥ	Пи	ØN/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	Ωи	DAN/A
	Is the perc concentration equal to or less than 100 ppm?	ПΥ	ΠN	ONN/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?	D Y	ПN	ONN/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
	condenser coils?	ΠY	ПN	A/MEG
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПN	ON/A

PA	ART V: RECORDKEEPING REQUIREMENTS		PART V: RECORDKEEPING REQUIREMENTS				
	as the responsible official:						
(Cr	heck appropriate boxes;						
l.	Maintained receipts for perc purchased?	ΩY (MA				
2.	Maintained rolling monthly total of perc consumption?	□Y (
3.	Maintained leak detection inspection and repair reports for the following:						
	a. documentation of leaks repaired w/in 24 hrs? or;	□Y (ПN	ØN/A			
	b. documentation of parts ordered to repair leak and leak repaired w/in 2 days						
	and parts installed w/in 5 days of receipt?	□Y (ПΝ	ØħN/A			
4.	Maintained calibration data? (for applicable direct reading instruments)	□Y (ПΝ	®N/A			
5.	Maintained exhaust duct monitoring data on perc concentrations?	□Y (ПN	© N/A			
6.	Maintained startup/shutdown/malfunction plan?	ØY (ПП				
7.	Maintained deviation reports?	□Y (ИΓ	DAN/A			
	Problem corrected?	□Y (ИГ	S IN/A			
8.	Maintained compliance plan, if applicable?	□Y (ПΝ	N/M E			

PART VI: LEAK DETECTION AND I	REPAIRS		
1. Does the responsible official conduct a	weekly (for small source	ces, bi-weekly) leak detection a	and repair
inspection?			MD AE
2. Has the facility maintained a leak log?			OY DAN
3. Does the responsible official check the	following areas for leak	cs?	
Hose connections, fittings, couplings, and valves	ØY □N □N/A	Muck cookers	OY ON TINA
Door gaskets and seating	₽Y ON ON/A	Stills	DY ON ON/A
Filter gaskets and seating	STY ON ON/A	Exhaust dampers	Ø-Y □N □N/A
Pumps ·	QHY □N □N/A	Diverter valves	DY ON ON/A
Solvent tanks and containers	BY ON ON/A	Cartridge filter housings	ØY ON ON/A
Water separators	DY ON ON/A		
4. Which method of detection is used by t	he responsible official?		к.
Visual examination (condensed so	olvent on exterior surfac	es)	2
Physical detection (airflow felt the	rough gaskets)		⊠
Odor (noticeable perc odor)			Ø 1
Use of direct-reading instrumenta	О		
Halogen leak detector			
If using direct-reading instru	umentation, is the equi	pment:	ØN/A
a. Capable of detecting p	perc vapor concentration	is in a range of 0-500 ppm?	DY DN
b. Calibrated against a st	tandard gas prior to and	after each use	
(PID/FID only)?	dahuisus sisas se	ana a marakka kaning	
c. Inspected for leaks an		-	OY ON
d. Kept in a clean and se			
e. Verified for accuracy	by use of duplicate sam	ples (calorimetric only)?	OY ON
•			
Ivan Fannin		5/27/00	•
Inspector's Name (Please Prin	t)	Date of Inspection	
Inspector's Signature		Approximate Date of N	Next Inspection

Not naintaining rolling log loak log temp log pere purchase recepts

Jeft peperwork + NOV (recepts) for owner. Will attempt to contact in noving.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY RE-INSPECTION
	1575 AIRS ID#: 02508-2-0
•	0/20/
· · · · · · · · · · · · · · · · · · ·	DATE: 9/2 7/Q.
FACILITY LOCATION: 1515 At tem	·
Mrain Brech	. 1-1
RESPONSIBLE OFFICIAL: (hair ware	PHONE NUMBER: (35 1 538 - 0722
Based on the results of the compliance requirements compliance with DEP Rule 62-213.300, Florida Adm	evaluated during this inspection, the facility is found to be in ninistrative Code (F.A.C.).
discrepancies were noted:	evaluated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	M FOLLOW-UP ACTION REQUIRED
Not maintaining lask, temp. or rolling by of perc purchases	Bogin record keeping
Not nortaning recepts of pere	Mary all jone purchase receipts
•	
· · · · · · · · · · · · · · · · · · ·	
COMMENTS:	
The Annual Compliance Certification form has been properly	certified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	7/01
	(Approximate)
INSPECTION CONDUCTED BY: Ivan	
INSPECTOR'S SIGNATURE:	(Please Print) PHONE NUMBER: 305 · 5 2 J - (-7 2 2
Pa	ageof Revised 10/96

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

BEST AVAILABLE COPY

Revised 10/96

TÝPE OF INSPECTION: ANNUAL	СОМІ	PLAINT/DISCOVERY	RE-INSPECTION
TIME IN: 1 (4145 TIME OUT			
TYPE OF FACILITY:	C. le sono a		·
FACILITY NAME:	05W		DATE:
FACILITY LOCATION:	11. St.	,	
Manni	Proct :1		
RESPONSIBLE OFFICIAL:	300 C	PHONE NUMBER	(3) 5000
Based on the results of the compliance requirements and the compliance with DEP Rule 62-213 300, Floring and the compliance with DEP Rule 62-213 300, Floring and the compliance requirements and the compliance requirements are compliance requirements.		79~	ility is found to be in
Based on the results of the compliance required discrepancies were noted:	irements evaluat	ed during this inspection, the fol	lowing compliance
COMPLIANCE REQUIREMENT/PR	ROBLEM	FOLLOW-UP ACT	ION REQUIRED
that maintaining look, toup	. 0%	Popular wealt	y1
they by of pere for	character		, -
1) A wanting weight of	Cyaria .	The second second	and an every by
			<u> </u>
छ			
: .			
			•
COMMENTS:			
·			**
The Annual Compliance Certification form has been	properly certifie	ed and submitted to the inspector	. YES NO
DATE OF NEXT INSPECTION:	7/1	roximate)	
INSPECTION CONDUCTED BY:	Two to.	ase Print)	
INSPECTOR'S SIGNATURE:		PHONE NUMBER:	<u> </u>

Page

AIRS ID# 0250820

Revised 10/10/96



DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: DATE: 9/27	
FACILITY LOCATION: 1515 Alton 21.	
Menn: Rasch Fl	
	no manage
Annual Reporting Period: Cost. 1999 TO	198
Dodd in sort than it condition of the Title Western of promit, my facility has remained it compliance with DED Pula	****
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES	.^
If NO, complete the following:	Con Marie
#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated a	bove:**
Mt maintaining perc purchase receipts	- 12-42- - 13-44- - 13-44-
Exact period of non-compliance: from Tune '99 to Sand '00	
Action(s) taken to achieve compliance: Keep Il perc purchase receives on site	
Method used to demonstrate compliance:	
실내는 마이번 어린 역사 이름이 생활이 이번 이름에 어린 이름은 살았다. 사람들은	
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated a	pove:
Mot nowthing look reportion tomp , as volling toy.	
Exact period of non-compliance: from Twe 99 to Sant 00	<u>;</u> ;
Action(s) taken to achieve compliance: Recin record Kasping unadiately	
Method used to demonstrate compliance: FEP 2000 Calada	
	•
As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statem made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, be upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons year for transfer or combination facilities. RESPONSIBLE OFFICIAL:	ased
Name (Please Print) 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 discretion of the responsible official to use this form.



TITLE V AIR QUALITY GENERAL PERMIT FIELD NOTICE OF VIOLATION



Miami-Dade County Department of Environmental Resources Management 33 S.W. 2nd Ave. Suite 900 Miami, FL 33130-1540 (305)372-6925 (305)372-6954 fax

FACILITY OWNER/	COMPANY NAME Louding As	sociates Inc.	er de junta est
SITE NAME:	Ding Clean USA	#DI 2RIA	06807
FACILITY LOCATION	` /	Mian, Reach, Fl	· ·
TYPE OF FACILITY			· .
RESPONSIBLE OF	FICIAL: Chris Wong	PHONE NUMBER: 305-538-	. 0332 *
Chapter 403 F.S. ar this Department. In Miami-Dade County	Y NOTIFIED that on	ode of Miami-Dade County, were observed by a representation and an interest of Section 24- page of this NOTICE, CEASE and DESIST from	epresentative of 5 of the Code of
Title V General Permit Condition Reference Pursuant to 62-213.300 F.A.C.	INSPECTOR'S FINDINGS/ COMPLIANCE REQUIREMENTS	CORRECTIVE ACTIONS REQUIRED	CORRECT ON OR BEFORE
But II (6)(c)	Not maintaining leak inspection, terparature log, or volling lug of pere purchases.		10/27/00 (30 Days)
Part II (6)(a)	Det maintaining rééorpts of para purchases foir five year minimum.	Keep recepts for perc purchases onsite. A Sond copies of perc purchase reas since 6/99 to present	10/4/00
ADDITIONAL INF	ORMATION:		
TYPE OF INSPECT	TION: ANNUAL (5)- COMPL	_AINT/DISCOVERY	SPECTION
The Annual Complia	ance Certification form has been properly certified a	and submitted to the inspector. YES □ NO □	
F.A.C., may subject	ith the above or continued operation in violation of 0 you to the enforcement and penalty provisions of 0 you of a Uniform Civil Violation Notice (UCVN).		
For further informati	ion, please contact the Air Facilities Section at (305)372-6925.	
John W. Renfrow, P	P.E.	, 1 , /	11
By (please print):	Ivan Fannin	Received By (please print): Ne(Son) VI	1/AURIZIZE
Section: 1	Facilities Date: 9/27/00	Title: NANACEA Date:	9/27/00
Signature:		Signature Solor ()	La

10074	2368 RREVIOUS SALENO CODE GALLON READING START MINING
7 7 8 BB 0 3 0 2	6 1 6 BB 0 0 5 0 0
GARLAND SUPPLY COMPANY 7800 WEST 25th AVENUE HIALEAH, FL 33016 Phone: (305) 556-5831	GARLAND SUPPLY COMPANY 7800 WEST 25th AVENUE HIALEAH, FL 33016 Phone: (305) 556-5831 SOLD TO: D. C. S. S. S.
This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occured in any amount during the delivery and/or services provided by Garland Supply Co. on this date. Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por Garland Supply co., en el dia de hoy: Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan Garland Supply Co.; tap delivre e tap fe sevis li. Jou dat sa-a.	This acknowledges that no spill, release or discharge of tetrachloroethylen (perc) occured in any amount during the delivery and/or services provide by Garland Supply Co. on this date. Por la presente certifico que no se rego, sallo o escapo ninguna cantidad di tetrachloroetileno (perc), durante la entrega y/o servicios/prestados po Garland Supply co.; en el dia de noy! Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetra chloroethylene (perc), kel ke soi kantite ya pat gaye pandan Garland Suppl Co.; tap delivre e tap fe sevis li. Jou dat sa-a.:
PRODUCT: GALLONS PRICE AMOUNT	PRODUCT GALLONS PRICE AMOUNT
PERC FL Clean-up/Fund	PERC FL Clean-up Fund
Pollution Tax Sales Tax	Pollution Tax Sales Tax
Date: 9/89/00	Date: 6 15 00

RECEIVED
OCT 0 6 2000

Air Quality
Management Division

PREVIOUS SALE NO CODE GALLON READING START MOTORING	CERTIFIED METER DELIVERY OPENING START CODE CODE CODE CONTRADING START
4 2 0 BB 0 0 0 .0 4 2 1 BB 0 0 3 0 .0	7 3 7 GG 0 0 0 0 .0 7 3 8 GG 0 0 4 9 .5
This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date. Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por Garland Supply co., en el día de hoy. Sa a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan Garland Supply Co., tap delivre e tap fe sevis ili. Jou dat sa-a.	This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occured in any amount during the delivery and/or services provided by Garland Supply Co. on this date. Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroethylene (perc) durante la entrega y/o servicios prestados por Garland Supply co., en el dia de hoy. * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kelike soi kantite ya pat gaye pandan Garland Supply Co., tap delivre e tap fe sevis li: Jou dat sa-a.
PRODUCT GALLONS PRICE AMOUNT	PRODUCT GALLONS PRICE AMOUNT
PERC 30	PERC AMOUNT
FL Clean-up Fund	FL Clean-up Fund
Pollution Tax	Pollution Tax
Sales Tax.	Sales Tax
e. 8/\$/2000 NATURE: Alath.	Date: 3/17/09 SIGNATURE: SIGNATURE:

	2332	ERTIFIED METER DELIVERY	2130
429 GG 0 0	0 0 .0 .1 3 0 .1	5 5 7 GG 5 5 8 GG	O O O O O O
ARLAND SUPPLY CO 7800 WEST 25th AVENUE HIALEAH, FL 33016 Phone: (305) 556-5831 LDTO This acknowledges that no spill, release or discharge of to (perc) occured in any amount during the delivery and/or by Garland Supply Co. on this date. Por la presente certifico que no se rego, salio o escapo ni tetrachloroetileno (perc), durante la entrega y/o servic Garland Supply co., en el dia de hoy. Sa-a rekonet ke anyen pat koule pat soti ou dechanje con control co	etrachioroethylene services provided inguna cantidad de ios prestados por ou bien oken tetra-	GARLAND SUPPL 7800 WEST 25th HIALEAH, FL Phone: (305) 5 SOLD TO This acknowledges that no spill, release of (perc) occured in any amount during the by Garland Supply Co. on this date. Por la presente certifico que no se rego, sa tetrachloroetileno (perc), durante la entrigarland Supply co. en el dia de hoy. Sa-a rekonet ke anyen:pat koule pat soti chloroethylene (perc), kel ke soi kantite ya Co., tap delivre e tap fe sevis li. Jou dat	Y COMPANY AVENUE 33016 56-5831 discharge of tetrachloroethylene delivery and/or services provided alic olescapo ninguna cantidad delega y/o servicios prestados por ou dechanje ou bien oken tetrapat gaye pandan Garland Supply
PRODUCT GALLONS PRICE	AMOUNT	PRODUCT: GALLONS	PRICE AMOUNT
PERC SO		PERC	
FL'Clean-up Fund		FL Clean-up Fund	
Pollution Tax		Pollution Tax	
Sales Tax TOTAL		Sales Tax	TOTAL
ite: 1015/99		Date: 12/15/99 SIGNÄTURE: 4	

ERTIFIED METER DELIVERY	1830	CERTIFIED METER DELIVERY	NO COMMISSION CANDIDANIDANI	2286
	GALLON HEADING STAHIN COINS	PART THE VIOUS SALE NOTE: THE CO		DING START de tothe
794 GG	0025.0	3 / 0 Gi	5 U	ניטע נייט
		7 7 1 GI	9 0.	030
YOUR SALEINO!	GALLON READING FINISH (DATE OF THE OWNER O	YOUR SALE NO THE PARTY OF THE P	ARTAGALLON/REAL	DING-FINISH NA AMERICAN
7800 WEST 2 HIALEAH, I Phone: (305 OLD TO: DOY COME This acknowledges that no spill, releating the company of the company amount during by Garland Supply Co. on this date.	FL 33016 5) 556-5831 CL (15 A	HIALEAF	T 25th AVENUE I, FL 33016 O5) 556-583 elease or discharge or ring the delivery and/late e rego, salio o escapo e la entrega y/o serv	f tetrachloroethylen or services provide ninguna cantidad d
'Garland Supply co., en el dia de ho	oy.	Garland Supply co., en el dia d		
Garland Supply co., en el dia de ho Sa-a rekonet ke anven pat koule ga	oy at soti ou dechanje ou bien oken tetra- iteya pat gaye pandan Garland Supply	Garland Supply co., en el dia d Sa-a rekonet ke anyen pat koule chloroethylene (perc), kel ke sol k Co., tap delivre e tap fe sevis II.	pat soti ou dechanje antite ya pat gaye pan	ou bien oken tetre dan Garland Supp
Garland Supply co., en el dia de ho Safa rekonet ke anyen pat koule pa chloroethylene (perc) kel ke soi kanti	oy at soti ou dechanje ou bien oken tetra- iteya pat gaye pandan Garland Supply	t Sa-a∍rekonet ke anyen pat koule chloroethylene (perc), kel ke sol k	pat soti ou dechanje antite ya pat gaye pan	ou bien oken tetra dan Garland Supp
Garland Supply co.; en el dia de ho Sa:a rekonet ke anyen pat koule pa chioroethylene (perc), kel ke soi kanti Co., tap delivre e tap fe sevis li Joi	oy at soti ou dechanje ou bien oken tetra- ite ya pat gaye pandan Garland Supply u dat sa-a.	 Sa-a rekonet ke anyen pat koule chloroethylene (perc), kel ke soi k Co., tap delivre e tap fe sevis II. 	pat soti ou dechanje antite ya pat gaye pan Jou dat sa-a:	dan Garland Supp
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Garland Supply co.; en el dia de ho Sa-a rekonet ke anyen pat koule pa chloroethylene (pero) kel ke soi kant Co.; tap delivre e tap fe sevis li. Joi PRODUCT- GALLONS PERC 2 5 5 FL Clean-up Fund	oy at soti ou dechanje ou bien oken tetra- ite ya pat gaye pandan Garland Supply u dat sa-a.	Sa-a rekonet ke anyen pat koule chloroethylene (perc), kel ke sol k Co., tap delivre e tap fe sevis II. PRODUCT AGALLONS PERC FL Clean-up Fund	pat soti ou dechanje antite ya pat gaye pan Jou dat sa-a:	dan Garland Supp

LAUNDRY ASSOCIATES, INC.

4577

RÉFÉRENCE NO. 4	DESCRIP	TION	INVOICE DATE	INVOICE AMOUNT	DISCOUNT TAKEN	AMOUNT PAID
	Title V permit					50.00
					,	
OUEOU DATE	OUEOK NO		PAYEE		DISCOUNTS TAKEN	CHECK AMOUNT
CHECK DATE	CHECK NO.		PATEE		DISCOUNTS TAKEN	CHECK AMOUNT
1/3/00	4577	Dept. of	Environme	ntal Protect		\$50.00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

/ 0390559

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$55.00 E I V E D

DEC 1 0 2000

Bureau of Air Monitoring & Mobile Sources

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001

Obj.: 002273

Do NOT Remove Label

AIRS ID # 0250820

DRYCLEAN USA GEOFFREY C WONG 11444 SW 149 COURT MIAMI FL 33196

LAUNDRY AS	SSOCIATES, INC.					3276
REFERENCE NO."	DESCRIP	TION	INVOICE D	ATE INVOICE AMOUN	T DISCOUNT TAKEN	AMOUNT PAID
b	Title V per	mit				50.00
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3/3/98	3276	Dept.	of Environm	ental Protect		5 4. 00



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING



Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

304719RECEIVED

Do NOT Remove Label

AIRS ID 0250820

LAUNDRY ASSOCIATES INC GEOFFREY C WONG 11444 SW 149 COURT MIAMI FL 33196

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001

rund: 20-2-0350 Obj.: 002273

5339

LAUNDRY ASSOCIATES, INC.

REFERENCE NO.	DESCRIP	TION	INVOICE DATE	INVOICE AMOUNT	DISCOUNT TAKEN	AMOUNT PAID
9	2001 Title V Ai	r Permit				50.00
CHECK DATE	CHECK NO.		PAYEE		DISCOUNTS TAKEN	CHECK AMOUNT
2/7/01	5339	Dept. of E	nvironmental	Protect		\$50.00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0250820

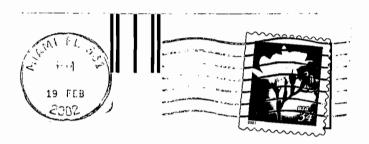
DRYCLEAN USA GEOFFREY C WONG 11444 SW 149 COURT MIAMI FL 33196

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273

Laundry Associates, Inc. 11444 SW 149th Court Miami, FL 33196



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

3231543070 99

REFERENCE NO.	DESCRI	PTION	INVOICE DATE	INVOICE AMOUNT	DISCOUNT TAKEN	6042 AMOUNT PAID
COLUMN TO THE STATE OF THE STAT	Title V permit		TAX OF SAME			50.00
				·		
CHECK DATE	CHECK NO.		PAYEE		DISCOUNTS TAKEN	CHECK AMOUNT
2/18/02	6042	Dept. of	Environmental Pro	otect		\$50,00



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

414340 FEB21,2892

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0250820

DRYCLEAN USA GEOFFREY C WONG 11444 SW 149 COURT MIAMI FL 33196 FOR GOVERNMENT USE ONLY

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

Obj.: 002273

LAUNDRY ASSOCIATES, INC.						3924
EFERENCE NO.	DESCRIP	TION	INVOICE DATE	INVOICE AMOUNT	DISCOUNT TAKEN	AMOUNT PAID
	1999 permit	:				50.00
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					DISCOUNTS TAKEN	CHECK AMOUNT
2/12/99	3924	Dept. of	<u>Environment</u>	tal Protect		50.00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

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Do NOT Remove Label

DRYCLEAN USA GEOFFREY C WONG 11444 SW 149 COURT MIAMI FL 33196

AIRS ID # 0250820

RECEIVED

LEB 16 99

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO; B1

Fund: 20-2-035001 Obj.: 002273

Z 333 615 920

US Postal Service
Receipt for Certified Mail

AIRS ID 0250820
LAUNDRY ASSOCIATES INC
GEOFFREY C WONG
11444 SW 149 COURT
MIAMI EL 23106 MIAMI FL 33196

	Postage	\$
	Certified Fee	
	Special Delivery Fee	
	Restricted Delivery Fee	
1995	Return Receipt Showing to Whorn & Date Delivered	
April	Return Receipt Showing to Whom, Date, & Addressee's Address	
800,	TOTAL Postage & Fees	\$
PS Form 3800 , April 1995	Postmark or Date	

	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)				
366	and the second s				
53	OFFICIAL USE				
25	Postage \$				
797	Certified Fee				
1000	Return Receipt Fee (Endorsement Required)				
00	Restricted Delivery Fee (Endorsement Required)				
50	Total Postage & Fees AIRS ID#0250820				
E 0	Sent To DRYCLEAN USA				
]],	Street, Apt. No.; GEOFFREY C WONG or PO Box No. 11444 SW 149 COURT				
7001	City, State, ZiP+4 MIAMI FL				
	33196 (PS Form 3800-02				

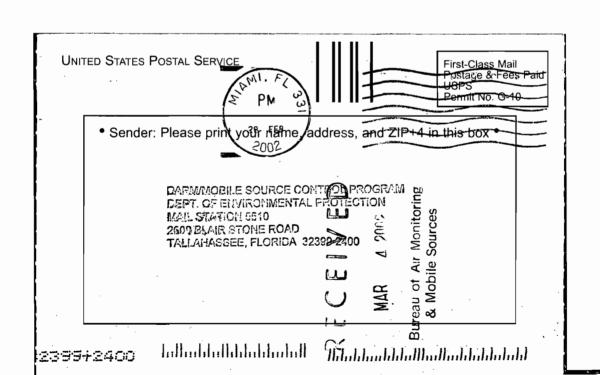
	,
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery 17(9) C. Signature X Agent Addressee D. Is delivery address different from item 12 Yes
1. Article Addressed to: AIRS ID#0250820	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
DRYCLEAN USA GEOFFREY C WONG 1144455W 149 COURT	
MIAMI FL 33196	Service Type □ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
5.5°	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label)	0320 0001 7975 5366
PS Form 3811, July 1999 Domestic Retu	urn Receipt 102595-00-M-0952

United States Postal Service First-Class Mail Postage & Fees Paid USPS Permit No. G-10 • Sender: Please print your name, address, and ZIP+4 in this box • Bureau of Air Mo., & Mobile Source. DARWIMOBILE SOURCE CONTROL PROGRAM DEPT. OF ENVIRONMENTAL PROTECTION MAIL STATION 5510 2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400 Influddiddddddddddddddddddddddddddddddddd 01

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152	Recip DRYCLEAN	N USA	ller)
	GEOFFREY		1992249
00	MIAMI FL	., 20011	
7001	City, 51 33196		
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SENDER: COMPLETE THIS SECTION	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. AIRS ID # 0250820 DRYCLEAN USA GEOFFREY C WONG	C. Signature X D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No September 19			
11444 SW 149 COURT MIAMI FL 33196	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D. 4. Restricted Delivery? (Extra Fee) Yes			
2. Article Number (Copy from service label)				
PS Form 3811, July 1999 Ó Domestic Ret	urn Receipt 102595-99-M-1789			



	Fold at line over the right of the			<u>. </u>
on the reverse sid	Complete items 1 anwor 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.	I also wish to red following service extra fee): 1. Address: 2. Restricte Consult postmas	s (for an ee's Address	
N ADDRESS completed	3. Article Addressed to: AIRS ID # 0250820 DRYCLEAN USA GEOFFREY C WONG 11444 SW 149 COURT MIAMI FL 33196	4a. Article N 2 333 4b. Service 1 Registere Express I Retum Red 7. Date of De	Type Indicate the state of the	Certified A Setura Refura Ref
ls your RETUR	5. Received By: (Print Name) 6. Signature: (Addressee or Agent) X	8. Addressee and fee is		if requested Xuar
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4:	US Postal Service	('	
	Receipt for Cer	tified Mail	
	No Insurance Coverage	Provided.	
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SENDER: COMPLETE THIS SECTION	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 Del C. Signature Agent
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
DRYCLEAN USA GEOFFREY C WONG	
11444 SW 149 COURT MIAMI FL 33196	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee)

CERTIFIED	MAILREC		
Postage Certified Fee Return Receipt Fee (Endorsement Required)	\$	Postmark Here	
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Recipient's Na DRYCI GEOFF Street, Apt. No MIAMI City, State, ZIF	LEAN USA FREY C WONG SW 149 COURT I FL 33196	AIRS ID # 0250820	
	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endo Total Postage Recipient's Na GEOFI Street, Apt. No MIAM City, State, ZIF	Postage \$ Certified Fee (Endorsement Required) Restricted Delivery Fee (Endo Thh Lath 92 Total Postage Recipient's Na GEOFFREY C WONG 11444 SW 149 COURT MIAMI FL 33196 City, State, Zif	Postage \$ Certified Fee Postmark Here Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endo T9hh 22Th 9200 0090 0000 0000 0000 0000 0000 000