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PERCHLOROETHYLENE DRY CLEANERS
AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

DIVISION OF AIR
RESOURCE MANAGEMENT

Facility Identification Number - If known (seven digit number)

— 0250990 0250990-003

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing permitted facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit). If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. (See "Surrender of Existing Air Operation Permit(s)" below.)
- Operates an existing facility not currently permitted or using an air general permit.

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C.
- Any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only, if Applicable

All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

— LUDLAM DRY CLEANING AND LAUNDRY, INC.

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a complete registration must be submitted for each.)

— N/A Ludlam Dry Cleaner

Facility Location (Physical location of the facility, not necessarily the mailing address.)

Street Address: 6786 SW 40TH STREET
City: MIAMI - FL. County: MIAMI - DADE Zip Code: 33155 - 3753

Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for existing facility.)

— N/A

Facility Contact

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: HECTOR A. GONZALEZ (MANAGER)

Facility Contact Telephone Numbers

Telephone: (305) 665-1344

Fax: (305) 559-7544

Cell phone: (786) 317-1233

E-mail: ---

Facility Contact Mailing Address

Organization/Firm: LUDLAM DRY CLEANING & LAUNDRY, INC.

Mailing Address: 6786 SW 40TH STREET

City: MIAMI - FL.

County: DADE COUNTY Zip Code: 33155

3753

M

Other Contact/Representative (to serve as additional Department contact)

Name and Position Title

Print Name and Title: RENE A. GONZALES (CORPORATION PRESIDENT)

Other Contact/Representative Telephone Numbers

Telephone: (305) 665-1344

Fax: (305) 559-7544

Cell phone: (786) 318-9941

E-mail: ---

Other Contact/Representative Mailing Address

Organization/Firm: ---

Mailing Address: ---

City: ---

County: ---

Zip Code: ---

Government Facility Code (check only one)

- Facility not owned or operated by a federal, state, or local government.
- Facility owned or operated by the federal government.
- Facility owned or operated by the state.
- Facility owned or operated by the county.
- Facility owned or operated by the municipality.
- Facility owned or operated by a water management district.

Facility Information

1.(a) **DRY-TO-DRY MACHINES**

How many dry-to-dry machines do you have on-site? [1]

For each dry-to-dry machine on-site, please provide the following information:

"MP"
MP

DATE MACHINE INSTALLED	UNIT CLASS (Check one)	CONTROL DEVICE (see key)	DATE CONTROL DEVICE INSTALLED
1994	<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Existing	RC	1994
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		

Control Device Key: RC = Refrigerated Condenser CA = Carbon Adsorber NR =None Required

1. (b) Is the facility a co-residential Dry Cleaning facility?

Yes No

For each dry-to-dry machine located at a co-residential facility Dry Cleaning facility, please provide the following information:

DATE MACHINE INSTALLED	UNIT CLASS (Check one)	PERC DRY CLEANING MACHINE	CONTROL DEVICE (see key)	VAPOR BARRIER ENCLOSURE
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO

Control Device Key: RC = Refrigerated Condenser CA = Carbon Adsorber NR =None Required

2. **Perchloroethylene Usage**

If this is an **initial registration** for a perchloroethylene dry cleaner, provide an estimate of the facility's expected amount of perchloroethylene to be used over the next 12-month period.

N/A

If this is a **re-registration** for a perchloroethylene dry cleaner, provide the amount of perchloroethylene used in the most recent 12 months.

80 GALLONS

3. Provide information on all steam and hot water generating units (boiler) on-site or that no such units exist on-site.

No steam and hot water generating units (boiler) onsite (MP)

BOILER	HORSEPOWER	FUEL TYPE*
FULTON BOILER WORKS, Inc (YEAR BUILT : 2009)	150	NATURAL GAS

530578 JAN27 2012



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Rick Scott
Governor

Jennifer Carroll
Lt. Governor

Herschel T. Vinyard Jr.
Secretary

November 18, 2011

RECEIVED

JAN 30 2012

DIVISION OF AIR
RESOURCE MANAGEMENT

Mr. Hector A. Gonzalez
Ludlam Dry Cleaners
6786 S.W. 40th St
Miami, FL 33155

Re: Facility No. 0250990

Dear Mr. Hector A. Gonzalez:

Our records indicate your Perchloroethylene Dry Cleaner Air General Permit (AGP) entitlement is set to expire on 3/1/2012.

Pursuant to the Florida Department of Environmental Protection (FDEP) Rule 62-210.310 or 62-213-300, Florida Administrative Code, your facility is entitled to operate under the AGP Program for no more than five (5) years.

To continue your entitlement, the contact representative can submit a new worksheet containing all current information regarding the facility no later than thirty (30) days prior to the expiration of your facility's current AGP entitlement.

You may obtain a copy of the appropriate worksheet from the FDEP Division of Air Resource Management webpage at:

http://www.dep.state.fl.us/air/emission/air_gp.htm

This worksheet is designed to satisfy your registration requirements. Simply click on your industry sector, and then click on the example worksheet and mail to the following address:

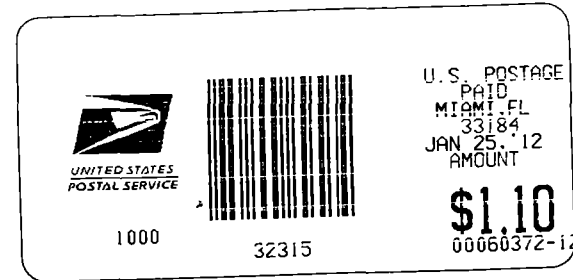
FDEP Receipts
PO Box 3070
Tallahassee, Fl 32315-3070

Please submit the completed worksheet with the processing fee (\$100.00), payable to FDEP.

If you need additional information, please contact Douglas Thornton at (800) 722-7457 or by email at Small.Business@dep.state.fl.us

FDEP

LUDLAM Dry CLEANING & LAUNDRY, INC.
6786 SW 40TH STREET
MIAMI - FL. 33155



FDEP RECEIPTS
PO Box 3070
TALLAHASSEE, FLORIDA 32315-3070

