

Department of **Environmental Protection**

leb Bush Governor

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

David B. Struhs Secretary

February 14, 2001

Mr. Romulo Naranjo Hialeah Plating, Inc. 1640 West 33 Place Hialeah, Florida 33012

Re: Facility No.: 0251091-001

Dear Mr. Casamayer:

The Department has received the Title V General Permit Notification Form for the chromium electroplating and anodizing facility that you submitted on December 12, 2000.

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, of 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/iw

cc: Ms. Mallika Muthiah, Dade County

"More Protection, Less Process"

025/091-00/

1. b. Must use Fume suppressont with wething agent. FS/WA should be marked in Control device Column. Reference: (page 9) Part II (5)(d)

STATE OF FLORIDA \ DEPARTMENT OF ENVIRONMENTAL PROTECTION

DISTRICT ROUTING SLIP

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V		cc τ₀
PENSACOLA	Northwest District	
Panama City	Northwest District Branch Office	
Tallahassee	Northwest District Branch Office	
Sopchoppy	Northwest District Satellite Office	
· TAMPA	SOUTHWEST DISTRICT	
Punta Gorda	Southwest District Branch Office	
Bartow	Southwest District Satellite Office	
ORLANDO	CENTRAL DISTRICT	
Melbourne	Central District Satellite Office	
JACKSONVILLE	NORTHEAST DISTRICT	
Gainesville	Northeast District Branch Office	
FORT MYERS	SOUTH DISTRICT	
Marathon	South District Branch Office	
WEST PALM BEACH	SOUTHEAST DISTRICT	
Port St. Lucie	Southeast District Branch Office	
Reply Optional Date Due	Reply Required Info Or	nly
omments:	**************************************	
SOTH REFIES.		
rom:	Tel:	



CHROMIUM ELECTROPLATING AND ANODIZING AIR GENERAL PERMIT NOTIFICATION FORM

DEC 1 2 2000

Air Quality

Part III. Notification of Intent to Use General permit Division

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

1.40	they Name and Location
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Hialeah Plating Inc.
2.	Site Name (For example, plant name or number):
	same as above~
3.	Hazardous Waste Generator Identification Number:
	FLD-00006353
4.	
••	Street Address:
	City: Hialeah, FL. County: Miami-Dade Zip Code: 33012
50.	Facility/Identification/Number (DEP/Use ONLYs- do not fill in);
	025/09/-00/
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	sponsible Official
6.	Name and Title of Responsible Official:
	Name: Romulo Naranjo Title: President
7.	Responsible Official Mailing Address:
	Organization/Firm:
	Street Address:
	City: County: Zip Code:
8.	Responsible Official Telephone Number:
	Telephone: (305) 557=4814 Fax: (305) 557-2748
L	
Fa	cility 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 Sode: CEIVED
11	Facility Contact Telephone Number:
' '	Talonhana: ()
	DEC 2 6 Zuji)

Bureau of Air Monitoring & Mobile Sources

Facility Information

1.a. Provide the information below for each hard electroplating machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

HARD CHROMIUM PLATING TANKS Not applicable

DATE PURCHASED	UNIT CLASS (circle one)	DATE CHTRL	CONTROLL DEVICE	APPLICABLE STANDARD
		INSTALLED	(see key)	(see key)
	New/Existing	,	HARACAN STREET	
	New/Existing			

Key for Control Device Type	Applicable Standard Key		
PBS = packed-bed scrubber	a = 0.03 mg/dscm		
CMP = composite mesh pad	b = 0.015 mg/dscm		
PBS/CMP = packed-bed scrubber and composite mesh pad	c = alternative standard for multiple tanks		
FS = fume suppressant only	under common control		
FS/WA = fume suppressant with a wetting agent			
FM = fiber-bed mist eliminator			
WA = wetting agent			
Is the facility's cumulative potential rectifier capacity greater	than 60 million ampere-hours per year?		
Yes No			

1.b. Provide the information below for each decorative electroplating or anodizing machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

DECORATIVE AND ANODIZING TANKS

DATE PURCHASED	(circle one)	DATE CNTRL DEVICE INSTALLED	CONTROLS AND DEVICE (see key)	APPLICABLE STANDARD (see key)
5/1985	New/Existing)	5/1985	FS	V
	New/Existing			,
	New/Existing			

DEP Form No. 62-213.900(5)

Effective: 2/24/99

	Key for Control Device Type		Applicable Standard Key	
,	PBS = packed-bed scrubber		x = 0.01 mg/dscm	
	CMP = composite mesh pad		y = 45 dynes/cm	
	PBS/CMP = packed-bed scrubber and composite m	resh pad	z = records of bath components	
	FS = fume suppressant only FS/WA = fume suppressant with a wetting agent		(trivalent Cr tanks only)	la 4l
	FM = fiber-bed mist eliminator		c = alternative standard for multipl under common control	e tanks
	WA = wetting agent		under common control	
	2. Indicate the date by which the facility must mee (Note: if your facility contains both hard and decordate) [] January 25, 1996 []	rative plati		• •
	3. Indicate how the facility will fulfill the complian	nce demoi	nstration:	
	[]. The facility will conduct an initia			
	· · · · · · · · · · · · · · · · · · ·	-	ice emissions and will meet the exist	ting curface tension
	limit in No. 1 above.	ent to reat	ice chiissions and will meet the exist	ing surface tension
	A Equipment Manitoring and Decoultraning Info			
	 Equipment Monitoring and Recordkeeping Info Check all logs which are required to be kept on-site 		dance with the requirements of this g	eneral permit:
	(a) Equipment maintenance	(b) Equ	ipment inspection and repair	[_x_]
	(c) Equipment malfunctions	(d) Op	eration and maintenance checklist	[_x_]
	(e) Instrument calibration [] (used during initial performance test)	(f) Sta	rt-up, shutdown, malfunction plan	[<u>X</u>]
	(g) Performance test results	(h) Eq	uipment monitoring	[_x_]
	(i) Excess emissions	(j) Op	erating periods	[<u>x</u> _]
	(k) Rectifier capacity	(l) Fu	me suppressant records	Lx_
	(m) Purchase records of wetting agent components	s [_	x _]	
	5. Surrender of Existing DEP Air Permit(s)			
	Please indicate with an "X" the appropriate selection	on:		
	I hereby surrender all existing DEP a notification form; the permit number	•	authorizing operation of the facility	indicated in this
	No DEP air permits currently exist for			
	L ' L No DEP air permits currently exist for	ar the onei	ation of the facility indicated in this	notification form

DEP Form No. 62-213.900(5) Effective: 2/24/99

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

ROMULO NARAUJO

Print name of responsible official

Ranulu Mareny E Signature 12/5/00

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DEC 1 2 2000

Air Quality
Management Division

DEP Form No. 62-213.900(5) Effective: 2/24/99



CHROMIUM ELECTROPLATING AND ANODIZING AIR GENERAL PERMIT NOTIFICATION FORM

DEC 1/2/2000

Air Quality

Part III. Notification of Intent to Use General permit Division

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Fac	cility Name and Location
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Hialeah Plating Inc.
2.	Site Name (For example, plant name or number):
	same as above
3.	Hazardous Waste Generator Identification Number:
	FLD-00006353
4.	Facility Location: 1640 West 33 Pl. Street Address:
	City: Hialeah, FL. County: Miami-Dade Zip Code: 33012
57.	Facility/Identification)Number (DEPAUse ONLY; do not fill in)
APPER S	025/09/-00/
L.	sponsible Official
6.	
0.	
	Name: Romulo Naranjo Title: President
7.	Responsible Official Mailing Address: same as above Organization/Firm:
**	Street Address:
	City: County: Zip Code:
8.	Responsible Official Telephone Number:
0.	
<u> </u>	Telephone: (305) 557=4814 Fax: (305) 557-2748
Fa	cility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
	A series of the
10.	Facility Contact Address:
1	Street Address:
	City: County: Zip Sode: CEIVED
11	Facility Contact Telephone Number:
' ' '	Telephone ()
	Telephone: () - DEC 2 6 2000

Bureau of Air Monitoring & Mobile Sources

DEP Form No. 62-213.900(5) Effective: 2/24/99

leu Bush COVERNOR

Ewin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

BEST AVAILABLE COPY

Department of

Environmental Protection

February 14, 2001

David B Strubs Secretary

Madeun, Horida 33012 19. Facility No.: 0231091 001

Mr. Renouse Nationio All Jeah Planing, Inc. 67" Wust 33 Place

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Sincerely,

16 Douty Diltz, Chief

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and Monile Sources.

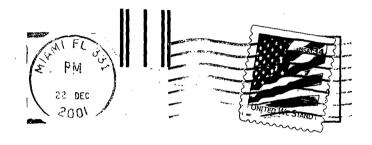
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TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

32315+3070 99



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

412232 DEC26 2021

Do NOT Remove Label

AIRS ID # 0251091

HIALEAH PLATING INC ROMULO NARANJO 1640 WEST 33 PLACE HIALEAH FL 33012

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273



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#0251091

HIALEAH PLATING INC ROMULO NARANJO 1640 WEST 33 PLACE HIALEAH FL 33012

FOR GOVERNMENT (SE ONLY Org.: 37550101000 EO: Ada Fund: 20-2-035001

Obj.: 002273

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Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

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Printed on recycled paper.

FOR GOVERNMENT USE ONLY

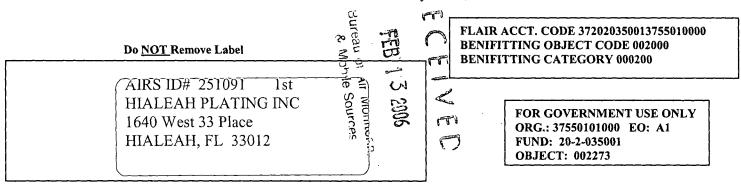
ORG.: 37550101000 EO: A1

FUND: 20-2-035001 **OBJECT: 002273**

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Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00



Printed on recycled paper.

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

251091 ROMULO NARANJO HIALEAH PLATING INC 1640 WEST 33 PLACE HIALEAH FL 33012

FOR GOVERNMENT USE ONLY Org.: 37550101000 FEO: Å1
Fund: 20-2-035001
Obj.: 002273

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METROPOLITAN DADE COUNTY, FLORIDA ENVIRONMENTAL RESOURCES MANAGEMENT AIR QUALITY MANAGEMENT DIVISION 33 SW 2nd AVENUE SUITE 900 MIAMI FLORIDA 33130-1540 161.01-37 9/96



Sandy Bowman MS 5500 2000 Blair Stone Rd. Tallahassee, FL 32399-2400

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