19/18 UNPERMITTED- PENDING

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OCT 1 8 2006

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM



OCT 1 2,2006

Bureau of Air Monitoring Part III. Notification of Intent to Use General Permit

& Mobile Sources

Air Quality

Management 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.

Facility Name and Location				
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):				
VECAP LOUESTMENTS, INC				
2. Site Name (For example, plant name or number):				
VECAP CLEANERS - PLANT				
3. Hazardous Waste Generator Identification Number:				
4. Facility Location: Street Address: 8014 NW 90 STREET				
City: MEDLEY County: MIAMI DADE Zip Code: 33166	}			
Single de la little de la				
CHIPPER DARROCK LANGE - CONCORDERATION CHIPPER AND				
Responsible Official				
6. Name and Title of Responsible Official:				
Name: OLOSEGUA GABE Title: PRESIDENT				
7. Responsible Official Mailing Address:				
Organization/Firm: Street Address: 995 NE 42 PA JERRACE				
City: Home STRAD County: MIAMI BASE Zip Code: 33033				
8. Responsible Official Telephone Number:				
Telephone: (954) 864- 2570 Fax: ()				
Facility Contact (If different from Responsible Official)				
9. Name and Title of Facility Contact (For example, plant manager):				
NA				
. 1710				
10. Facility Contact Address:	ļ			
10. Facility Contact Address:				
10. Facility Contact Address: Street Address:				
10. Facility Contact Address:				
10. Facility Contact Address: Street Address: City: County: Zip Code:				
10. Facility Contact Address: Street Address: City: County: Zip Code:				

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility Information

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1998	Existing/Ne	w RC/CA/None required	
·	Existing/Ne	w RC/CA/None required	·
	Existing/Ne	w RC/CA/None required	·
*CONTROL DEVICE KI	EY: RC = re	efrigerated condenser CA	= carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY	UB	
unit. If the transfer machi 1993, it is a NEW unit (n	as purchased from ne was purchased to units purchased	n the manufacturer prior to or or life to the manufacturer prior to or or or the manufacturer between	n December 9, 1991, it is an EXIST n December 9, 1991 and September Illowed to operate under this genera
Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of
Date Initially Purchased	Status	Control Device Required*	Date Control Device Installed
Date Initially Purchased	Status	Control Device Required*	Date Control Device Installed (if already included at time of
Date Initially Purchased	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of
Date Initially Purchased	Status (circle one) Existing/New	Control Device Required* (circle one) RC/CA/None required	Date Control Device Installed (if already included at time of
Date Initially Purchased	Status (circle one) Existing/New Existing/New Existing/New	Control Device Required* (circle one) RC/CA/None required RC/CA/None required RC/CA/None required	Date Control Device Installed (if already included at time of
CONTROL DEVICE K	Status (circle one) Existing/New Existing/New Existing/New Existing/Rew	Control Device Required (circle one) RC/CA/None required RC/CA/None required RC/CA/None required CA/CA/None required	Date Control Device Installed (if already included at time of purchase, write "SAME")
CONTROL DEVICE K	Status (circle one) Existing/New Existing/New Existing/New Existing/New EY: RC = r proethylene (perc) ons (You must fil	Control Device Required (circle one) RC/CA/None required RC/CA/None required RC/CA/None required efrigerated condenser CA have you used within the last 1	Date Control Device Installed (if already included at time of purchase, write "SAME")
CONTROL DEVICE K 2.(a) How much perchlo [] gallo (b) If less than 12 mo	Status (circle one) Existing/New Existing/New Existing/New Existing/New EY: RC = r proethylene (perc) ons (You must fill onths, how many?	Control Device Required (circle one) RC/CA/None required RC/CA/None required RC/CA/None required efrigerated condenser CA have you used within the last 1	Date Control Device Installed (if already included at time of purchase, write "SAME") A = carbon adsorber 2 months?

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3. What is the facility's source classification based of Indicate with an "X". Select one classification of					
Small Area Source					
Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site	(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)				
Large Area Source					
Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)				
4. What control technology is required on machines (Indicate with an "X".)	pursuant to section (5) of Part II of this notification form?				
Existing machines at small area source (NONE REQUIRED) []	New machines at small area source Refrigerated condenser				
Existing machines at large area source Carbon adsorber [] Refrigerated condenser []	New machines at large area source Refrigerated condenser []				
5. A facility which contains non-exempt emissions Rule 62-213.300, F.A.C. Verify that all steam and exemption criteria or that no such units exist on site	units shall not be eligible to use the general permit pursuant to hot water generating units on-site meet the following e (see attached memo for the criteria).				
All steam and hot water generating units exempt No such units on-site	[] OR				
How many boilers do you have on-site? []					
For each boiler, indicate its horsepower (HP) rating					
What type of fuel do you use? [] No. 2 fue [] No. 6 fue	•				
6. Equipment Monitoring and Recordkeeping Infor	mation				
Check all logs which are required to be kept on-site	in accordance with the requirements of this general permit:				
(a) Purchase receipts and solvent purchases/solvent	addition log				
(b) Leak detection inspection and repair	. []				
(c) Refrigerated condenser temperature monitoring					
(d) Carbon adsorber exhaust perc concentration monitoring []					
(e) Startup, shutdown, malfunction plan					

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OLOSEGUN GADE

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