



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

August 6, 2001

Mr. Jes Patel
Professional Cleaners
6826 Old Kings Road South
Jacksonville, Florida 32217

Re: Facility No.: 0310369-002

Dear Mr. Patel:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 25, 2001.


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,


for Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Wayne Tutt, Duval County

"More Protection, Less Process"

Printed on recycled paper.

Fees Paid
SOC 4
Compliance FM

Some R.O.

0310369-002

P15

Ka) (None Required) should be circled
under Control Device Required.

P17

Responsible official sign and date for
changes made.

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
JUN 25 2001
Bureau of Air Monitoring
& Mobile Sources

Part III. Notification of Intent to Use General Permit

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):	PURVI, INC.
2. Site Name (For example, plant name or number):	PROFESSIONAL CLEANERS (AIRS ID # 0310369)
3. Hazardous Waste Generator Identification Number:	FLCES8G
4. Facility Location: Street Address: City: Jacksonville County: Duval Zip Code: 32217	6826 OLD KINGS ROAD SOUTH
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0310369-002

Responsible Official

6. Name and Title of Responsible Official: Name: JES PATEL Title: MANAGER
7. Responsible Official Mailing Address: Organization/Firm: PROFESSIONAL CLEANERS Street Address: 6826 OLD KINGS ROAD SOUTH City: JACKSONVILLE County: DUVAL Zip Code: 32217
8. Responsible Official Telephone Number: Telephone: (904) 733 2745 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: () -

Facility Information

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

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

For each dry-to-dry machine on-site, please provide the following 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")
08-DEC-91	Existing/New	RC/CA None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following 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")
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

989 gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening _____)

3. What is the facility's source classification based on the definitions found in section (3) of Part II?
Indicate with an "X". Select one classification only.)

Small Area Source

- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
Transfer only on-site (used less than 200 gallons of perc per year)
Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
Transfer only on-site (used 200 - 1,800 gallons of perc per year)
Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?
(Indicate with an "X".)

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 units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating:

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

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

Patel

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

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.

JES PATEL
Print name of responsible official


Signature

6-11-01
Date

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

457480 DEC30 2005

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

310369 10
PROFESSIONAL CLEANERS
6826 Old Kings Road South
JACKSONVILLE, FL 32217

Bureau of Air Monitoring
& Mobile Sources

JAN 3 2006

RECEIVED

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

444426 JAN12 2005

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID# 310369 10
PROFESSIONAL CLEANERS
6826 Old Kings Road South
JACKSONVILLE, FL 32217

RECEIVED
JAN 14 2005
Bureau of Air Monitoring
& Mobile Sources

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FUND: 20-2-035001
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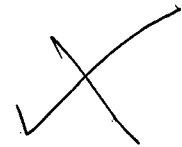
Printed on recycled paper.

THIS PORTION MUST BE ATTACHED TO REMITTANCE CHECK FROM HANDLING

434042 DEC 9 2003

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

310369
JES PATEL
PROFESSIONAL CLEANERS
6826 OLD KINGS ROAD SOUTH
JACKSONVILLE FL 32217

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

420771 DEC17 2002

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

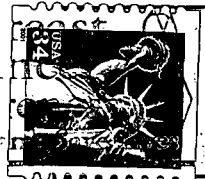
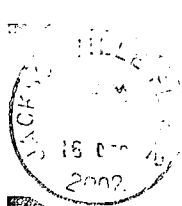
AIRS ID#0310369

PROFESSIONAL CLEANERS
JES PATEL
6826 OLD KINGS ROAD SOUTH
JACKSONVILLE FL
32217

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

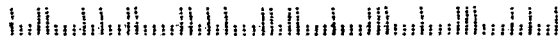
RECEIVED
DEC 20 2002
Bureau of Air Monitoring
& Mobile Sources

PROFESSIONAL CLEANERS
6052 San Jose Blvd.
Jacksonville, FL 32217



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

32315+3070



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

411905 DEC19 2001

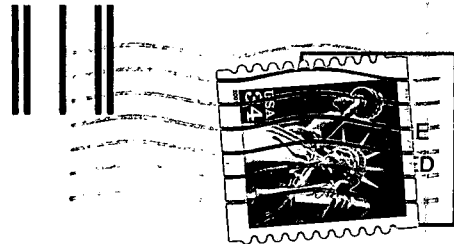
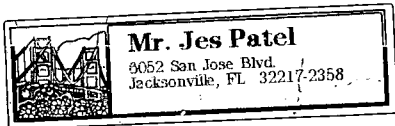
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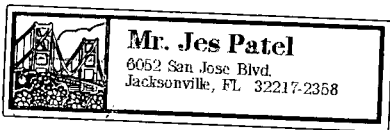
Do **NOT** Remove Label

AIRS ID # 0310369
PROFESSIONAL CLEANERS
JES PATEL
6826 OLD KINGS ROAD SOUTH
JACKSONVILLE FL
32217

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Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273



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



Mr. Jes Patel

8052 San Jose Blvd.
Jacksonville, FL 32217-2368