

Department of Environmental Protection

Jeb Bush
Governor

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

Colleen M. Castille
Secretary

November 29, 2005

Mr. Todd Susser
Country Dry Cleaners
8th Santa Anita Avenue
Orange Park, Florida 32073

Re: Facility No.: 0310455-002

Dear Mr. Susser:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 27, 2005.

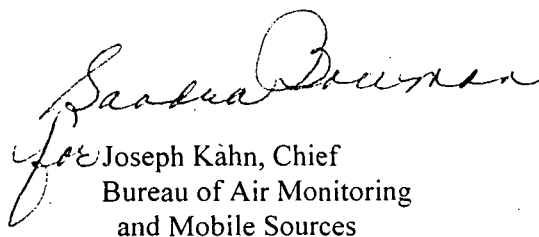
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements 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,


Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Mr. Rick Banks – Northeast District

"More Protection, Less Process"

Printed on recycled paper.

NO ACTIVITY FOR FACILITY
EMISSION FEE DATES 98-2004
SOC REPORTS 3
COMP. STATUS SNC MNC IN
1/9/2004

*Amalco
Insp. WT*

SEPT 27, 2005

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

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):	Todlee Corp.		
2. Site Name (For example, plant name or number):	Country Day Cleaners		
3. Hazardous Waste Generator Identification Number:			
4. Facility Location:			
Street Address:			
City:	7628-1 103 rd St. Jacksonville, FL	County:	Duval
		Zip Code:	32210
Facility Identification Number (Use ONLY for notification)			

Responsible Official

0310455-002

6. Name and Title of Responsible Official:			
Name:	Todd Sussler	Title:	President
7. Responsible Official Mailing Address:			
Organization/Firm:	Todlee Corporation		
Street Address:	8 Santa Anita Avenue		
City:	Orange Park, FL	County:	Clay
		Zip Code:	32073
8. Responsible Official Telephone Number:			
Telephone:	(904) 226-4585	Fax:	(904) 276-9040

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")
1998	Existing/ <u>New</u>	RC/ <u>CA</u> /None required	same.
_____	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?

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".)

- | | |
|-------------------------------------------------|------------------------------------------------------------|
| <u>Existing machines at small area source</u> | <u>New machines at small area source</u> |
| (NONE REQUIRED) <input type="checkbox"/> | Refrigerated condenser <input checked="" type="checkbox"/> |
| <u>Existing machines at large area source</u> | <u>New machines at large area source</u> |
| Carbon adsorber <input type="checkbox"/> | Refrigerated condenser <input type="checkbox"/> |
| Refrigerated condenser <input type="checkbox"/> | |

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: 15

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

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.

Michael Todd Sussler
Print name of responsible official


Signature

9/25/05
Date

REGULATORY & ENVIRONMENTAL SERVICES DEPARTMENT

Air and Water Quality Division



RECEIVED
SEP 27 2005
Bureau of Air Monitoring
& Mobile Sources

Dear Business Owner:

In accordance with the Clean Air Act Amendments of 1990, the Department of Environmental Protection has written rules that affect many small sources of air pollution. As a result of these rules, your business may require a Title V general permit. Enclosed is a Title V General Permit Notification Form that may be used to notify us that you are eligible and plan to use this general permit.

If your business is eligible to use this air general permit, the responsible official of the facility, as defined in Part II of the notification form, is responsible for ensuring that the facility complies with all applicable terms and conditions of the general permit. These notification forms were originally due September 1, 1996. Please complete the form and submit it to the Department of Environmental Protection as soon as possible, but no later than _____.

Please submit the original signed and completed pages of the form to the following address:

Title V General Permitting Office
Bureau of Air Monitoring and Mobile Sources
MS-5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

A copy of the notification form must be kept on-site.

If you need assistance with the notification form or need additional information, you can call the Department of Environmental Protection General Permitting Office at (850) 448-6140, or Bill Coffman, City of Jacksonville at (904) 630-1212 ext. ~~2397~~ **3821**

Very truly yours,

A handwritten signature in cursive script that reads "William Coffman".

Bill Coffman

Bill Coffman
Pollution Control Specialist

BC/vgw

Attachments

Bowman, Sandy

From: Bill Coffman [COFFMAN@coj.net]
Sent: Thursday, September 22, 2005 2:35 PM
To: Bowman, Sandy
Cc: Wayne Tutt
Subject: Re:

Sandy 0310455 is a drop store

0310459 and 0310500 appear to be the same facility I am checking status

0310379 was inspected by another group and I will check with them on status

>>> "Bowman, Sandy" <Sandy.Bowman@dep.state.fl.us> 09/21/05 9:38 AM >>>
Bill,

I was just going through the ARMS database and found the following:

#310379 was last inspected in 2000.
#0310459 was last inspected in 1999.
#0310455 has an unresolved SNC from 2004.

Do you know if these 3 facilities are still active and operating? If they are no longer operating let me or Bruce Thomas know so that we may update ARMS. Thanks so much.

Sandy Bowman
Environmental Administrator
Division of Air Resource Management
850/921-9583 or sandy.bowman@dep.state.fl.us

ib

9/22/2005

Todlee Corp.

4524

Dept. of Enviromental Protection

1/10/2007

Date 1/1/2007
Type Bill
Reference AIRS ID#310455

Original Amt. 50.00

Balance Due 50.00

Discount

Payment

Check Amount

50.00

50.00

COMPASS BANK - O AIRS ID#310455

50.00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

457210 JAN 16 2007

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# 310455
OAK HILL CLEANERS
7628-1 103rd Street
JACKSONVILLE, FLORIDA
32210

TODLEE CORP
COUNTRY DAY CLEANERS
PER
REGISTRATION
FORM
9/22/05
JAN 15 2007

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

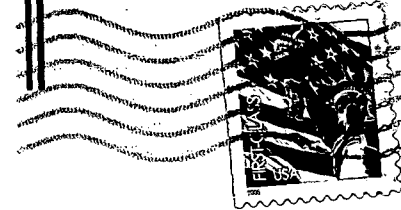
FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.

Todlee Corporation
8 Santa Anita Avenue
Orange Park, FL 32073

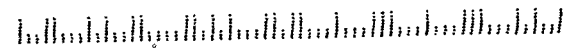
JACKSONVILLE FL 32

11 JAN 2007 PM 6 T



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

323153070 BOSS



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

458325 JAN 23 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

310455 10
OAK HILL CLEANERS
7628-1 103rd Street
JACKSONVILLE, FL 32210

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.

Bureau & Municipalities
RECEIVED
JAN 25 2005