



# Florida Department of Environmental Protection

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

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary-Designee

April 2, 2007

Ms. Anne C. Smith  
Donnick Label Systems, Incorporated  
1450 North Lane Avenue  
Jacksonville, Florida 32254

Dear Ms. Smith:

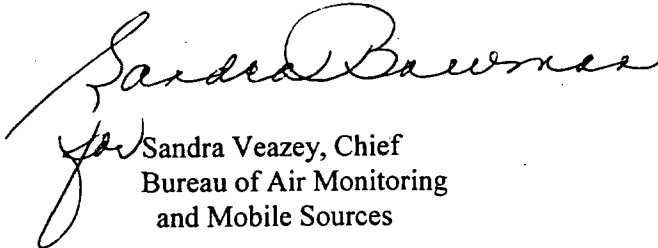
This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on February 9, 2007. We have assigned ARMS # 0310545-001 to this facility.

As you know, pursuant to Florida Statutes section 403.814, authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have any additional questions, please contact Dickson Dibble at 850/921-9586.

Sincerely,



Sandra Veazey, Chief  
Bureau of Air Monitoring  
and Mobile Sources

SV/pg

cc: Mr. Wayne Tutt, Duval County

2/23/07  
CS # 13623  
\$100.00

## PRINTING OPERATIONS AIR GENERAL PERMIT REGISTRATION FORM

### Part II. Notification to Permitting Office

(Detach and submit to appropriate permitting office; keep copy onsite)

**Instructions:** To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050(4)(o), F.A.C. (\$100 as of the effective date of this form)

#### Registration Type

Check one:

**INITIAL REGISTRATION** - Notification of intent to:

- Construct and operate a proposed new facility.  
 Operate an existing 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).

**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., or 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 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. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.

- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):  
 No air operation permits currently exist for this facility.

#### 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.)

*DONNEK LABEL Systems, 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 registration form must be completed for each.)

**Facility Location** (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: *1450 N. LANE AVE.*

City: *JACKSONVILLE*

County: *Duval*

Zip Code: *32254*

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

**Owner/Authorized Representative**

Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: ANNE C. SMITH, SEC/TREAS.

Owner/Authorized Representative Mailing Address

Organization/Firm:

Street Address: 1450 N. LANE AVE.

City: JACKSONVILLE

County: Duval

Zip Code: 32254

Owner/Authorized Representative Telephone Numbers

Telephone: (904) 786-7301

Fax: (904) 693-3663

Cell phone (optional):

**Facility Contact (If different from Owner/Authorized Representative)**

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

Print Name and Title:

Facility Contact Mailing Address

Organization/Firm:

Street Address:

City:

County:

Zip Code:

Facility Contact Telephone Numbers

Telephone:

Fax:

Cell phone (optional):

**Owner/Authorized Representative Statement**

This statement must be signed and dated by the person named above as owner or authorized representative

*I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.*

*I will promptly notify the Department of any changes to the information contained in this registration form.*

*Anne C. Smith*

Signature

*2/23/07*

Date

**Printing Process/InkType(s)**

Check all that apply:

- Heatset Offset Lithographic
- Screen or Letterpress
- Flexographic

- Non-Heatset Offset Lithographic
- Water Based
- Rotogravure

- Digital
- Ultraviolet Cured

**Compliance Assurance - Initial Registration (Not Required for Re-Registration)**

Below, or as an attachment to this form, provide the method (mass balance or material usage rates) expected to be used to demonstrate compliance with Rule 62-210.310(4)(f)2., F.A.C. Provide the estimated amount of materials containing hazardous air pollutants and solvent-containing materials expected to be used over a 12-month period.

*MATERIAL USAGE RATES*

*Estimates Based on Usage for 2006 (1500 # Ink-Water Based)  
1000 # UV Coating*

*VOC - 100*

*HAP - 20*

**Compliance Determination - Re-Registration (Not Required for Initial Registration)**

N/A

Below, or as an attachment to this form, provide the highest 12-month total quantity of materials containing hazardous air pollutants and the highest 12-month total quantity of solvent-containing materials used in the last five years to show compliance with sub-subparagraph 62-210.310(4)(f)2.b., F.A.C. (material usage rates) or provide all calculations to show compliance with sub-subparagraph 62-210.310(4)(f)2.a., F.A.C. (mass balance).

### Description of Facility

Below, or as an attachment to this form, provide a description of the printing operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Information should include a description of the number and types of printing processes, presses and ink systems being used at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

Two Flexographic Presses:

- (1) Roto-Press 7" - 6 Color Stations (Includes 1-UV)
- (2) MARIL ANDY 2200 - 10" - 6 Color (Includes 1-UV)  
↓ RFID Chip Inserter

CK LABEL SYSTEMS

T. DEPT-ENVIRONMENTAL PROTECTION

007    Type    Reference  
      Bill    Printing AG Permit

Original Amt.  
100.00

2/23/2007  
Balance Due    Discount  
100.00  
Check Amount

13623

Payment  
100.00  
100.00

Label Systems

100.00

**DONNICK  
LABEL SYSTEMS**

Box 60998 • Jacksonville, Florida 32236

JACKSONVILLE FL 322

23 FEB 2007 PM 2 L



32215+3070

