12.12.96

# BEST AVAILABLE COPY

# Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

j	Facility Owner/Company Name (Manie of corporation	egara - mindiw	dual owner):	
	Dixie Cleaners Inc			
2.	Site Name (For example, plant name or number):	manus of the second	and the second s	
3.	Hazardous Waste Generator Identification Number:		,	
	4200374	nangan kan aya ajiyaya di sesensa asayan seyagan d		
4.	Street Address: 2301 n. Palatox	cambia	Zip Code:	33201
5.	Facility Identification Number (DEP Use):	D	33 <i>0</i> 23	
	Responsable C	Official		
6.	Name and Title of Responsible Carcial.		٥.,	
	Joe Greenblatt	Presid	le fre	1,3/15/dP
7.	Responsible Official Milling Address: Organization/Firm: DIXIC Cleaners Street Address: 2301 n. Ralafov City: Pensacola County E	~		Code: 32501
8.	Responsible Official Telephone Number.	errom a productive and a productive and a second contractive and a seco		
	Telephone: (904) 432 - 4423	Fax ( )	-	
***********	Facility Coutact (1) different fr	om Responsible (	Official)	
9.	Name and Title of Facility Contact (For example, plant	(manager):		
	Rad Feverhelm M	lanager		
10.	Facility Contact Address:			· · · · · · · · · · · · · · · · · · ·
	Street Address: 2301 n Palatox City: Pensacola County: E	scambia	Zip Code:	35201
11.	Facility Contact Telephone Number: Telephone: (904) RABOGLESS ED.	fax: ( )	-	
	DEC 23 1996			
	Bureau of Air Monitoring		ן פייז	CEIVE

& Mobile Sources

DEP Form No. 63-210 900(2)

Effective: 6-25-96

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Bureau of Air Monitoring & Mobile Sources

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### Facility Information

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

Maruel Dynaclean		Date Machine Initially	Date Contro- Device		Date Machine addition	Date Control Device		Date Machine Initially	Date Control Device
Type of Machine	ID		Unstalled	117	Purchased	Installed	ID	Purchased	Installed
Example	#1	103-OCT-93	72-NOV-93	5/3	38-L F 2-21		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit	<u> </u>				***************************************				
(1) w/ ref. condenser	#1	UG APR 93	06 APB 93	1	1 2/2/2	(_	1		
(2) w/ carbon adsorber				11	My 45/1 sales		1		
(3) w/ no controls	1	i	! .	, · U ·		!	[	1	
Washer Unit	[	And the state of the Control of the state of	* ************************************	****				r	
(4) w/ ref. condenser			]	]			7 ~~		
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit									
(7) w/ ref. condenser	T			1			T		
(8) w/ carbon adsorber			1			1			
(9) w/ no controls	4.1144.414.544								
Reclaimer Unit							<u> </u>		
(10) w/ ref. condenser					]				
(11) w/carbon adsorber				1					
(12) w/ no controls									
(b) Control devices are  (c) No control devices  2.(a) What was the total of the local of the lo	are r quant gaile	equired to be ity of perchilons : ow many? [_	installed [	pere)	) purchased in	•	2 mo		
3. What is the facility's so (Indicate with an "X".  Existing small an Existing large an	Selec ea so	ource []	ication only.)	ew sn	initions found nall area sour	rce [X	]	Part II?	
***						***************************************			

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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	ntrol technology is reque with an "X".)	ired on machines	pursuant to section (5) o	Part II of this notification form?
	cisting large area source urbon adsorber	[	Refrigerated condenser	<u></u>
	ew small area source frigerated condenser	LX		
	ew large area source frigerated condenser	[]		•
to Rule 62-	•	that all steam and	I not water generating ur	to use the general permit pursuant hits on-site meet the following
boiler HP o	or less), and (2) are fire	d exclusively by n		f 10 million BTU/hr or less (298 ) iods of natural gas curtailment is fired.
All steam a No such un	nd hot water generating its on-site	units exempt	<u>X</u>	
				•
	Equipm	ent Monitoring a	and Recordkeeping Info	rmation
Check all lo	ogs which are required to	to be kept on-site	in accordance with the re	equirements of this general permit:
(a) Purchas	e receipts and solvent p	urchases		<u>(X)</u>
(b) Leak de	etection inspection and i	epair		X
(c) Refriger	rated condenser tempera	nture monitoring		[ <u>X</u> ]
(d) Carbon	adsorber exhaust perc o	encentration mon	iitoring	[]
(e) Instrum	ent calibration			[]
(f) Start-up	o, shutdown, malfunctio	n plan	•	[X]

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 15 of 16

### Surrender of Existing Air Permit(s)

Please indica	ate with an "X" the appropriate selection:
	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
内	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notif statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and in the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.
I will pro	omptly notify the Department of any changes to the information contained in this notification.    2/2/2/   Date

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# Perchloroethylene Dry Cleaning Facility Notification

### Facility Name and Location

1 Facility Overer/Company Nam	ie Mamir of corporation	eggerer or indiv	idual owner):
Dixie Clean	iers Inc		
2. Site Name (For example, plant	maine or number):		
•		,	
3. Hazardous Waste Generator lo	lentification Number:		<u></u>
95007	724		
4. Facility Location:			
Street Address: 2301 (	1. Palatox	scambia	Zip Code: 32501
City: Pensacola		s cambia	5. p 0.000; 3230 /
5. Facility Identification Number	(DEP Use):		
		03	3023V: 27 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -
	Responsible	Official	
6. Name and Title of Responsible			
Joe Gr	eenblatt		
<ol> <li>Responsible Official Mailing : Organization/Firm;</li> </ol>	Nútres:		
Street Address:			
City:	County.		Zip Code:
8. Responsible Official Telephor	ie Nuniber.		
Telephone: (904) 432	. 4423	Fax (	)
)?aiia			O(C-!-I)
racinty	Contact (Il different fi	rom Responsible	Official)
9. Name and Title of Facility Co	ntact (For example, plan	t manager):	
Rad Feverhe	Jw.		
10. Facility Contact Address:			<del></del>
Street Address:	•		
City:	County.		Zip Code:
11. Facility Contact Telephone Nu	ımber:		
Telephone: (aby) 43.	1 4423	Fax (	<b>-</b> .

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DEF Sorm No. 63-210 900(2)

Effective: 6-25-96

Juge 13 of 16

Bureau of Air Menitoring C. Mobile Sources

# # 0330231

10-1-96 Spoke to Joe Greenblatt, he is the President

P.13

6. add title- President

7. fill in

10. fill in

P. 14

1. (a) add date control device installed

1. (c) should not be marked

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### Facility Information

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

:	:	Date Machine	Date Contro		Date Machine	Date Control		Date Machine	Date Control
		Initially	Peylor	;	mittar ;	Device		Initially	Device .
Type of Machine	10		linstalled	10	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	82	98-EFE-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit								,	
(1) w/ ref. condenser	#1	06 APR 43		Τ-			T		
(2) w/ carbon adsorber							1	,	
(3) w/ no controls	]		!	,	1,,	1	, ,	T -	1
Washer Unit			, , , , , , , , , , , , , , , , , , ,						
(4) w/ ref. condenser		1							T
(5) w/ carbon adsorber									:
(6) w/ no controls				1.	Ţ <del></del> -				1
Dryer Unit		·						-	
(7) w/ ref. condenser		T							
(8) w/ carbon adsorber			1	1	1		1		
(9) w/ no controls				7	1				
Reclaimer Unit									.1
(10) w/ ref. condenser				1	1		Τ		1
(11) w/carbon adsorber	<u> </u>			·	<del>                                     </del>	<del> </del>			1
(12) w/ no controls			ļ		<del> </del> -		+		†
(b) Control devices are (c) No control devices  2.(a) What was the total of [	are re	equired to be	installed [	×		n the latest 1	2 moi	nths?	
(b) If less than 12 mont Check why it is less					_] New store	e: [] Dio	l not l	kee'p records:	: []
3. What is the facility's so (Indicate with an "X".					initions foun	d in section	(3) of	Part II?	
Existing small ar	ea so	urce []	N	ew sn	nall area sou	-			
Existing large are	ea soi	urce []	N	ew la	rge area sour	rce [	_]		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines (indicate with an "X".)	pursuant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber	Refrigerated condenser []
New small area source Refrigerated condensor [X]	
New large area source Refrigerated condenser	: •
	· · · · · · · · · · · · · · · · · · ·
·	units shall not be eligible to use the general permit pursuant d hot water generating units on-site meet the following :
	have a total hear input of 10 million BTU/hr or less (298 attural gas except for periods of natural gas curtailment e than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
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	(X)
(b) Leak detection inspection and repair	. <u>[X]</u>
(c) Refrigerated condenser temperature monitoring.	<u>[X]</u>
(d) Carbon adsorber exhaust perc concentration mo	nitoring []
(e) Instrument calibration	[]
(f) Start-up, shutdown, malfunction plan	<u>[ X ]</u>

DEP Form No. 62-213.900(2) Effective: 6-25-96

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### Surrender of Existing Air Permit(s)

<u></u> j	I hereby surrender all existing an permit authorizing operation or the facility indicated in this notification form; specifically, permit number(s)	
	No air permits currently exist for the operation of the facility indicated in this notification form.	
	Responsible Official Certification	
v4		
this notij statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility address. fication. I hereby certify, based on information and belief formed after reasonable inquiry, the standard in this notification are true, accurate and complete. Further, I agree to operate and a the air pollutant emissions units and air pollution control equipment described above so as with all terms and conditions of this general permit as set forth in Part II of this notification for	at the
this notij statemen maintain comply v	fication. I hereby certify, based on information and belief formed after reasonable inquiry, thats made in this notification are true, accurate and complete. Further, I agree to operate and a the air pollutant emissions units and air pollution control equipment described above so as	at the to orm.

DEP Form No. 62-213.900(2) Effective: 6-25-96

1. N. 107.

Page 16 of 16



# PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANN	UAL	$\nearrow$	COMPLAINT/DISC	OVERY	
So go	ASPECTION IA .		)		
AIRS 1D#: 0330231	_ TIME I	N: 1210	TIME OUT:	134	0
FACILITY NAME: Dizie	O Que	eners, I	NC.		
FACILITY LOCATION: 230/	N. 6	alafax	2.57		
Gensa	cerle	L, FL	32501		
The second of the second secon	er State of the second state of the		· · · · · · · · · · · · · · · · · ·	_	
PART I: NOTIFICATION					
(check appropriate box)					
1. Existing facility notified DARM by 9/	/1/96				<b>_</b> ià
2. New facility notified DARM 30 days	prior to star	tup			
3. Facility failed to notify DARM to use	general per	mit			
the many data and the second state of the seco	The second secon	<del>(1, α, μ) (α, β, β) (1 α α α α α α α α α α α α α α α α α α </del>			
PART II: CLASSIFICATION					
Facility indicated on notification form (check appropriate box)	that it is:				
Α.				_	
1. Existing small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)		2. New small a dry-to-dry only, transfer only, x-both types, x<1- (constructed on	x<140 gal/yr <200 gal/yr	P	
3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td></td><td>transfer only, 20 both types, 140</td><td>rea source 140<x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td></td><td></td></x<2,>		transfer only, 20 both types, 140	rea source 140 <x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,>		
This is a correct facility classification		ADA ON			
If no, please check the appropriate class	ification:				
facility qualified for a	~~~~	nit as number	above		
facility exceeds above					

# Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

### PART IV: PROCESS VENT CONTROLS

### In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A.	Has the responsible	official of a	ll new	sources	and	existing	large	area	sources:
(ch	eck appropriate boxes)								

- 1. Equipped all machines with the appropriate vent controls?
- 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?
- 3) Equipped the condenser with a <u>diverter valve</u> so airflow will be directed away from the condenser upon opening the door?
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?
- Soing chicks /No log of results. It should be keep log. In are ricinits No log condenser exceeded 45° F? (need be keep log.) In are ricinits No log
- 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?
- B. Has the responsible official of an existing large or new large area source also:
- Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?

YOY ON ON/A

DY ON BN/A

□Y □N

DY ON Profit y lenve

DY ON

ÓIY □N

2. Macoured and recorded the weeker exhaust temperature at the condenser				
Measured and recorded the washer exhaust temperature at the condense inlet and outlet weekly?	ΠY	ΠN		
Is the temperature differential equal to or greater than 20° F?	ΠY	ПΝ		İ
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	ΠY	□и	□N/A	
Is the perc concentration equal to or less than 100 ppm?	ΠY	ПN		
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ΩY	□N		
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	ШN	□N/A	
6. Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ПΝ	□N/A	
				i
PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	TY	□N		
2. Maintained rolling monthly averages of perc consumption? Find an will	/OX	ME		
3. Maintained leak detection inspection and repair reports for the following:			,	_
a. documentation of leaks repaired w/in 24 hrs? or;	/( /:-	□и	Agian !	160
<ul> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul>		1 QN	S. Co.	160 J
4. Maintained calibration data? (for direct reading instruments only) Ans electronic and	Ju DY	ПN	M/A	1
5. Maintained exhaust duct monitoring data on perc concentrations?		ПN	(RW)	
6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?	<b>P</b> Y	ПN		
7. Maintained deviation reports?	¹ □Y	ΠN	ķχ	
Problem corrected?	ΠY	ПN	NA	
8. Maintained compliance plan, if applicable?	ΠY	ПΝ	□N/A	
				1
PART VI: LEAK DETECTION AND REPAIRS	<u> </u>			]
1. Does the responsible official conduct a weekly leak detection and repair inspection?	<b>D</b> Y	ПΝ		
2. Which method of detection is used by the responsible official?	_			
Visual examination (condensed solvent on exterior surfaces)	<u>_</u> 9			
Physical detection (airflow felt through gaskets)	<u>r</u>			

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)

Odor (noticeable perc odor)

If using direct-rea	ding instrumentation,	is the equipment:	(KV)		N	
a. Capable		13×1				
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
c. Inspect	ed for leaks and obvious	s signs of wear on	a weekly basis?		N / &	
d. Kept in	a clean and secure are	a when not in use?			ן אנ	
e. Verified	for accuracy by use of	duplicate samples	(calorimetric only)?		אנ	
3. Has the facility maintain	ed a leak log?			<b>20</b> Y C	אנ ענ	
4. The following areas shou	ld be checked for leaks	by the inspector:				
		etested?		Leak I	Detected?	
Hose connections, i couplings, and val		□N	Muck cookers	ПY	DN (O)	
Door gaskets and se	eating \(\sigma\)Y	□N	Stills	ПY	DNA	
Filter gaskets and s	eating	□N	Exhaust dampers	ПY	□N(Q)	
Pumps	BY	□N	Diverter valves	ПY	DN W	
Solvent tanks and c	containers DY	□N	Cartridge filter housings	ΠY	DN (T)	
Water separators	□Y	DN (N)				
Name of Resp	mbatt onsible Official					

12.12.96 Date of Inspection

Dec 97
Approximate Date of Next Inspection



ADDITIONAL	SITE INFO	RMATION.
ADDITIONAL	SILEBUIO	MINIA LLUII.

Ranger 55 - 518 44:	THE ES
( 3411-855	12 Sar andanio
2/0	• 

Dynaclean, Worldwedle, INC. Sandra M. Morrisch (3:7) 668-3208 (marian, IN)

machine machinel to use Dynaclean no liver ter value maind manual only shows exhaut value.

MARVEL Technico Servis, 210-301-8551, San Centario

Says machinisfon shut of when door is open I there is, no circulation of air in No denn her value.

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL CO	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 1210 TIME OUT: 12 5	AIRS ID#: 033023/
TYPE OF FACILITY: 0.C,	
FACILITY NAME: Diffe ( leanin I	DATE: 12.12.96
FACILITY LOCATION: 230/ Ni Walaf	OF NC?
Jersealer F.L.	3 2501
RESPONSIBLE OFFICIAL: (Jac 6 reen black	PHONE NUMBER: 432-4423
Based on the results of the compliance requirements evaluation compliance with DEP Rule 62-213.300, Florida Administration of the compliance requirements evaluation of the compliance requirements and the compliance requirements are compliance of the compliance of the compliance requirements are compliance of the compliance of the compliance requirements are compliance of the compliance of the compliance requirements are compliance of the compliance of the compliance requirements are compliance of the compliance requirements are compliance of the compliance of the compliance requirements are compliance of the compliance of	
Based on the results of the compliance requirements evaludiscrepancies were noted:	nated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
No Temp measurery log	Non+ required bised on Site need to keep up logs.
NO records of repair - los	- see to keep ay rogy.
0	
	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	<u> </u>
	\$
,	
· .	
COMMENTS: )	
comments: No od to de termino regun this type of marchine:	rement to Liver ter value on
this type of marking	
The Annual Compliance Certification form has been properly certi	fied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: Dec 97	
(A)	pproximate)
INSPECTION CONDUCTED BY: ( har / 03 1/	or mn N;
	Please Print)  WI/IL-9 30 (
INSPECTOR'S SIGNATURE: (Value) / Common of the common of t	PHONE NUMBER: 944-856/
Page	/of / Revised 10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM



ACILITY NAME: DIVIE Cleaners Inc DATE: 12/12/96
ACILITY LOCATION: 2301 N. Palatox
Pensacola FL 32501
14.02.000 1.000
nnual Reporting Period: Sept 3 19 6 TO Dec 18 1996
ased on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 2-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.
NO, complete the following:
1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
xact period of non-compliance: fromto
ction(s) taken to achieve compliance:
fethod used to demonstrate compliance:
2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
xact period of non-compliance: fromtoto
action(s) taken to achieve compliance:
fethod used to demonstrate compliance:
s the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements nade in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based pon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for div-to dry facilities or 1,800 gallons per ear for transfer or combination facilities.
Name (Please Print)  Name (Signature Date

<sup>\*</sup>This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM AIRS ID#0330231 DIXIE CLEANERS JOE GREENBLATT 2301 N PALAFOX PENSACOLA FL 32501

M

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	ַ יַּטענ	Non Kemove L	auci			
Annual Reporting Period:	3/1	1948	TO		3/1	_19 <u>44</u>
Based on each term or condition of the Title					vith DEP Rule	
If NO, complete the following:						
#1. Term or condition of the general permi	t that has not been in	n continuous co	ompliance du	ring the reportin	ng period stated	l above:
Exact period of non-compliance: from	·		to			
Action(s) taken to achieve compliance:		_				
Method used to demonstrate compliance:		· 			· 	
#2. Term or condition of the general permi	t that has not been in	1 continuous co	ompliance du	ring the reportin	g period stated	above:
Exact period of non-compliance: from			to			
Action(s) taken to achieve compliance:						
Method used to demonstrate compliance:						
As the responsible official, I hereby certify, bas notification are true, accurate and complete. I does not exceed 2,100 gallons per year for dry-	Further, my annual co	nsumption of p	erchloroethyle	ne solvent, based	upon purchase	
responsible official:		<del>1</del>	Je 11	undall_		798
Na:	me (Please Print)		Sign	nature ·	Da	ite

<sup>\*</sup>This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.



# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Dixie Chean	er		DATE:	6-18-98
FACILITY LOCATION: 230 / W. Pa	lafox	st.		
•	, , , , ,	•		
Annual Reporting Period: 12/13/96	19 T	0	6/18	19 <u>98</u>
Based on each term or condition of the Title V general air per 62-213.300, Florida Administrative Code (F.A.C.), during the			<del>_</del> _/	P Rule
If NO, complete the following:				
#1. Term or condition of the general permit that has not beer	in continuous con	upliance during th	e reporting perio	d stated above:
				ш П
Exact period of non-compliance: from		to	Q	Jean of More
Action(s) taken to achieve compliance:		•		
Method used to demonstrate compliance:				1998 Monitor Sources
#2. Term or condition of the general permit that has not been	in continuous con	npliance during th	e reporting perio	ing
Exact period of non-compliance: from		to		
Action(s) taken to achieve compliance:				
Method used to demonstrate compliance:				
As the responsible official, I hereby certify, based on information made in this notification are true, accurate and complete. Find upon rolling averages of purchase receipts, does not exceed year for transfer or combination facilities.  RESPONSIBLE OFFICIAL:  Name (Please Print)	urther, my annual o	consumption of pe	rchloroethylene s facilities or 1,80	solvent, based

\*This form is made available to you as an aid in order to meet your annual compliance certification reprintments. It is at the discretion of the responsible official to use this form.

Page \_\_\_\_ of \_\_\_\_\_.

JUL 0 1 1998

### PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	ANNUAL	COMPLAINT/DISCOVERY	Y 🗆
·	RE-INSPECTIO		
AIRS 1D#: (5) 33023/ 1	DATE: 6/18/9	TIME IN: 1300 TIME OUT	r: <u>1320</u>
FACILITY NAME: Diffe	e Cleane	ns Inc.	·
FACILITY LOCATION: $\frac{23}{2}$	301 N. DE	rlafey	
<u>Ka</u>	usucola F	L 32501	· ·
RESPONSIBLE OFFICIAL:	Jac Greenb	helm PHONE: 50-432	-4423
CONTACT NAME:	d Fever	helm PHONE: 5AME	<u>-                                    </u>
PART I: NOTIFICATION			
(check appropriate box)			
1. New facility notified DARM 3	· • •		
2. Facility failed to notify DARM	A to use general per	rmit	
PART II: CLASSIFICATION			
Facility indicated on notification (check appropriate box)	on form that it is:	☐ No notification form☐ Drop store/out of business	
			s/petroieum
<b>A.</b>	_	-	s/petroleum
A. 1. Existing small area sourc		2. New small area source	s/petroleum
A. 1. Existing small area sourcedry-to-dry only, x < 140 gal/yr	-	2. New small area source dry-to-dry only, x < 140 gal/yr	szpetroleum
A. 1. Existing small area sourc	-	2. New small area source	sypetroleum
A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	-	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr	Z m
A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source	e	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)	R E
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1</li> </ul>	e □ 00 gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only 140 < x < 2 100 gal/yr	REC
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800</li> </ul>	e □ .00 gal/yr ) gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only 140 < x < 2 100 gal/yr	REC
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1</li> </ul>	e □ .00 gal/yr ) gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only 140 < x < 2 100 gal/yr	REC
A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga	e □ 00 gal/yr ) gal/yr al/yr	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only 140 < x < 2 100 gal/yr	REC
<ul> <li>A. <ol> <li>Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)</li> <li>This is a correct facility cla</li> <li>If no, please check the again facility</li> </ol> </li> </ul>	e □ 00 gal/yr 0 gal/yr al/yr al/yr ussification ppropriate classific y qualified for a ger	2. New small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after $12/9/91$ )  4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$ ) $\square$	RECE

### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) AINE NO YO 1. Storing perchloroethylene in tightly sealed and impervious containers? ANGE NO YO 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? NO YE 4. Draining cartridge filters in their housing or in sealed containers for at DY DN A/MID least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) MO YE 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? DY ON ON/A 3. Equipped the condenser with a diverter valve so airflow will be directed away from the $\Box$ Y $\Box$ N DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated MO YE condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after MO AG verifying that the coolant had been completely charged?

В.	Has the responsible official of an existing large or new large area source also:		
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ŊΥ	□N
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ωY	ON ON/A
	Is the temperature differential equal to or greater than 20° F?	$\Box$ Y	□N ☑N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	ΩY	ON SIN/A
	Is the perc concentration equal to or less than 100 ppm?	$\square Y$	אומם אם
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ΟY	ON DN/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y \	אום אס
6.	Routed airflow to the carbon adsorber (if used) at all times?	ПΥ	ON ON/A

### PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) ND YE 1. Maintained receipts for perc purchased? MD YE 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: No leaks a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days AYNE NO YO and parts installed w/in 5 days of receipt? DY DN DN/A 4. Maintained calibration data? (for applicable direct reading instruments) DY DN DN/A 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? QY DN DY DN DN/A 7. Maintained deviation reports? DY DN DN/A Problem corrected? DY DN DN/A 8. Maintained compliance plan, if applicable?

_					
_	ART VI: LEAK DETECTION AND				
1.	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
	inspection?			ΛŒ	ПN
2.	Has the facility maintained a leak log	?		ABA	$\square$ N
3.	3. Does the responsible official check the following areas for leaks?				
÷	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers		A/NØ NE
	Door gaskets and seating	AVA ON ON/A	Stills		A/MD NE
	Filter gaskets and seating	DY DN BN/A	Exhaust dampers		A/NE NE
	Pumps	DY ON ON/A	Diverter valves	□Y Ć	A/NE NE
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	Xay c	IN DIN/A
	Water separators	O AME NO YO	yna Clean System		
4.	Which method of detection is used by	the responsible official?	) and		
	Visual examination (condensed	solvent on exterior surfac	es)	Ø	
	Physical detection (airflow felt t	hrough gaskets)		Ð	
	Odor (noticeable perc odor)		`	EJ	
	Use of direct-reading instrumen	tation (FID/PID/calorimet	cric tubes)	a	
	Halogen leak detector			<b>(2)</b>	
	If using direct-reading inst	trumentation, is the equi	pment:	□N/A	
	a. Capable of detecting	g perc vapor concentration	s in a range of 0-500 ppm?		אנ
	<ul><li>b. Calibrated against a (PID/FID only)?</li></ul>	standard gas prior to and	after each use		אכ
	c. Inspected for leaks a	and obvious signs of wear	on a weekly basis?		אנ
	d. Kept in a clean and	secure area when not in u	se?		אנ
	e. Verified for accurac	y by use of duplicate samp	oles (calorimetric only)?		אנ

Charles M Norman	6.18.98
Inspector's Name (Please Print)	Date of Inspection
Charle Hornian	June 99
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
\$	

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL \(  \) COM	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 1200 TIME OUT:	AIRS ID#: 033023/
FACILITY NAME: Define Channels  FACILITY LOCATION: 2301 Al Palla for	DATE: 6.18.9)
RESPONSIBLE OFFICIAL: Dae Greenblat	PHONE NUMBER: 432-41/23
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluated discrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	•
•	
COMMENTS: Good o peration.	
The Annual Compliance Certification form has been properly certification	
DATE OF NEXT INSPECTION: 19	Let 1 Forte
INSPECTION CONDUCTED BY: Charlor Non	
INSPECTOR'S SIGNATURE: Must form	PHONE NUMBER: 595-836

Page / of / .

Revised 10/96

AIRS ID#: 0330231

Acer

Revised 10/10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Cleaners	DATE: TENTER
FACILITY LOCATION: 230'	1 n Palatox	Sollonito
Pens	sacola FL 32501	* 7 <sub>6</sub>
Annual Reporting Period: 6.18.9	78 19 TO 6.1	· 9 9 19
Based on each term or condition of the Title	e V general air permit, my facility has remained in com	pliance with DEP Rule
62-213.300, Florida Administrative Code (I	F.A.C.), during the period covered by this statement.	YES UNO
If NO, complete the following:		
#1. Term or condition of the general permi	t that has not been in continuous compliance during the	reporting period stated above:
Exact period of non-compliance: from	to	-
Action(s) taken to achieve compliance:	ENTERED	·
Method used to demonstrate compliance:	JUN 0 4 1999	
#2. Term or condition of the general permi	it that has not been in continuous compliance during the	e reporting period stated above:
Exact period of non-compliance: from	to	:
Action(s) taken to achieve compliance:		
Method used to demonstrate compliance:	·	

\*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

Page of .

# PERCHLOROETHYLENE DRY CLEANERS

T	Y	P	E	0	F	1	N	S	P	E	C	7	ľ	O	N	Į
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PERO	CHLOROET	HYLENE D	RY CLEAN	$_{ m ERS}$ $\sqrt{1}$	<b>5</b>
		GENERAL PE			
	COMPLIANCE	INSPECTION (	CHECKLIST	OU V	
TYPE OF INSPECTION:	ANNUAL		COMPLAINT	DISGOVERY	106
	RE-INSPECTI	ON D		NO T	Sto. C.
	. RE-INSPECTI	ON G		TO THE STATE OF TH	, 3 O
	1.1.	1001	1235PM		76
AIRS 1D#: 033023/	DATE: <u>/ 6/ / /</u>	99/ TIME	N. TOTA	TIME OUT:	5 13 <sub>3</sub>
FACILITY NAME: Dilie	e (Yleanin	M 1			
7	00 1	0 1			<del>;</del>
FACILITY LOCATION:	2301 N.	Talafa	<u> </u>		
	221200000	, FI	32501		i i
	00	128/	11	22 11 11	1 2
RESPONSIBLE OFFICIAL:	fre freen	blatt	PHONE:	32-440	
CONTACT NAME: Ka	d Ferry	Relm	PHONE:	ame	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Manager.			<del></del>	
PART I: NOTIFICATION					
(check appropriate box)			NTEDER		
New facility notified DARM	1 30 days prior to st	artun	NTERED		
		JU	N O 4 1999		
2. Facility failed to notify DAF	KM to use general pe	ermit			
PART II: CLASSIFICATIO	N				
Facility indicated on notificat	ion form that it is:		☐ No notificat	ion form	
(check appropriate box)			☐ Drop store/o	out of business/p	etroleum
A				(X	
<ol> <li>Existing small area sou dry-to-dry only, x &lt; 140 gal</li> </ol>		2. New small	area source y, x < 140 gal/yr	(4)	
transfer only, x < 200 gal/yr		transfer only, x		)	
both types, x < 140 gal/yr		both types, x <	~ ·		\$
(constructed before 12/9/91)	)	• •	or after 12/9/91)		
2 7 1 1 1	-				1
3. Existing large area sour		4. New large		cal/ar	
dry-to-dry only, $140 \le x \le 2$ transfer only, $200 \le x \le 1,80$			<sup>1</sup> , 140 ≤ x ≤ 2,100 .00 ≤ x ≤ 1,800 ga		
both types, $140 \le x \le 1,800$			$0 \le x \le 1,800 \text{ gal/y}$		
(constructed before 12/9/91)			or after 12/9/91)		
5. This is a correct facility of	classification	DY ON	□Can not dete	rmine	1
If no, please check the	appropriate classifi	ication:			\
- ·	lity qualified for a g		umber	above	
	lity exceeds above li	-			
B. The total quantity of perchlefacility was 119, Zgallons	oroethylene (perc) p			-	y cleaning

# (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? DY ON 4. Draining cartridge filters in their housing or in sealed containers for at OY ON ĎN/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN DN/A PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) ND YE 1. Equipped all machines with the appropriate vent controls? DY DN DN/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated NO YE condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after MC AG verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility:

B. Has the responsible official of an existing large or new large area source also: MA	
Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	OY ON
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	□Y □N □N/A
Is the temperature differential equal to or greater than 20° F?	□Y □N □N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber,	
if machines are equipped with a carbon adsorber?	OY ON ON/A
Is the perc concentration equal to or less than 100 ppm?	OY ON ON/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	OY ON ON/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	□Y □N □N/A

### PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? NO YO 2. Maintained rolling monthly total of perc consumption? MD AB 3. Maintained leak detection inspection and repair reports for the following: A/NE NO YES a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days DY DN DN/A and parts installed w/in 5 days of receipt? A/NE NO YO 4. Maintained calibration data? (for applicable direct reading instruments) A/NE ND YD 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? NO YO DY DN DN/A 7. Maintained deviation reports? DY DN BN/A Problem corrected? DY DN DN/A 8. Maintained compliance plan, if applicable?

P	ART VI: LEAK DETECTION AND	REPAIRS		
1.	Does the responsible official conduct	a weekly (for small source	es, bi-weekly) leak detection	and repair
	inspection?			DY ON
2.	Has the facility maintained a leak log	?	(	DY DN
3.	Does the responsible official check th	e following areas for leak	s?	
	Hose connections, fittings, couplings, and valves	BY ON ON/A	Muck cookers	AN/A NO VEN/A
	Door gaskets and seating	N/A	Stills	A/N/A
	Filter gaskets and seating	N/A N DN/A	Exhaust dampers	A/N/A
	Pumps	MY ON ON/A	Diverter valves	A/N/A
	Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	• •
	Water separators	AN ON BUNA	Ceses Dyna Ce	Con System.
4.	Which method of detection is used by	the responsible official?		_
	Visual examination (condensed	solvent on exterior surfac	es)	Ø
	Physical detection (airflow felt	through gaskets)	·	Ø
	Odor (noticeable perc odor)			
	Use of direct-reading instrumen	tation (FID/PID/calorime	tric tubes)	
	Halogen leak detector			<b>Z</b> Z
	If using direct-reading ins	trumentation, is the equi	pment:	421N/A
	a. Capable of detecting	g perc vapor concentration	ns in a range of 0-500 ppm?	OY ON
	<ul><li>b. Calibrated against a (PID/FID only)?</li></ul>	standard gas prior to and	after each use	OY ON
	c. Inspected for leaks	and obvious signs of wear	on a weekly basis?	OY ON
	d. Kept in a clean and	secure area when not in u	se?	OY ON
	e. Verified for accurac	cy by use of duplicate sam	ples (calorimetric only)?	OY ON
		a de la companya de		•

Charles Mornion	6.1.99
Inspector's Name (Please Print)	Date of Inspection
Clark M Nomon	8-12 mus
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:		
,		
		•
	v.	
•		
·		<u></u>

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

	APLAINT/DISCOVERY RE-INSP	ECHON DE
TIME IN: 1280 PM TIME OUT: 1305	AIRS ID#: 033 &	23/10 K
TYPE OF FACILITY: DC		Sylvan
FACILITY NAME: Difia Cleanons	DATE:	1/9/99
FACILITY LOCATION: 230 1 N Galafa	<u></u>	
Conscalar, FC 3250	/	
RESPONSIBLE OFFICIAL: On Granblady	PHONE NUMBER:	
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra		be in
Based on the results of the compliance requirements evaluated discrepancies were noted:	ated during this inspection, the following complia	ince
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUI	IRED
<del></del>		2
	<u> </u>	
	ENTERE	
	JUN 0 4 1999	:
COMMENTS: Good record & well man	Lained equips	
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector.	] NO
DATE OF NEXT INSPECTION: 8-12 mos	pproximate)	
INSPECTION CONDUCTED BY: PHAR les Norma	w	
INSPECTOR'S SIGNATURE: Jack Monus	ease Print) PHONE NUMBER: 595-8	3 264
Page 1	of ] 7 /222	Revised 10/96

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: AN	NUAL 💢	COMPL	AINT/DISCOVERY	RE-INSPE	TION [
TIME IN: /230 PM	TIME OUT:	305	AIRS ID#:_	03380	3/1
TYPE OF FACILITY:	<u> </u>			413 Or	5
FACILITY NAME: Difie	- Cleanor	$\sim$		DATE	19099
FACILITY LOCATION: 230	1 N Gal	afor			6
	Ru.FL 30	2501		<i>"</i>	
RESPONSIBLE OFFICIAL:	regulati	<u> </u>	PHONE NUME	BER:	
Based on the results of the con compliance with DEP Rule 62.	•		•	e facility is found to be	e in
Based on the results of the condiscrepancies were noted:	pliance requirements	s evaluated	during this inspection, the	e following complianc	e
COMPLIANCE REQUIRE	MENT/PROBLE	CM	FOLLOW-UP A	CTION REQUIR	ED
				-	
					:
			ENTERER	•	
			JUN 0 4 1999	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Ţ,			: 139g		
					·
•					
COMMENTS:	3 well n	an Le	ained egings		
				•	
The Annual Compliance Certification for	orm has been properly	y certified	and submitted to the inspe	ctor. YES	NO [
DATE OF NEXT INSPECTION:	1-12 mis				
	2		ximate)		
INSPECTION CONDUCTED BY:	MARIES NO	mrr			
INSPECTOR'S SIGNATURE:	// / ^		Print) PHONE NUME	BER: 59 ( - 8 )	764
	The state of the s		-1	2/222	

AIRS ID#: <u>033023/</u>

Kop

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

			•	
FACILITY NAME:	PLENNERS	<u>.</u>	DATE:	The state of the s
FACILITY LOCATION: 2301 /	V. PALAFOX			R B. C
FACILITY LOCATION: 2301 /	IN FL 32	501		Nonigeria (
Annual Reporting Period: $\frac{6/2/9}{}$	9 19	то <u>3/</u>	21/00	19
Based on each term or condition of the Title V62-213.300, Florida Administrative Code (F.A	-	=	<u> </u>	EP Rule
If NO, complete the following:				
1. Term or condition of the general permit t	hat has not been in continuous	s compliance durir	ng the reporting peri	od stated above:
Exact period of non-compliance: from	ENTERED	to	REVIEWE MAR 29 /11	
Action(s) taken to achieve compliance:	MAR 2 9 2000			
Method used to demonstrate compliance:				
#2. Term or condition of the general permit t	hat has not been in continuous	s compliance durir	-	
Exact period of non-compliance: from		to	RECEIV	- L
Action(s) taken to achieve compliance:			HAR 24	
Method used to demonstrate compliance: _			Northwest DEP	Florida
As the responsible official, I hereby certify, be made in this notification are true, accurate an upon rolling averages of purchase receipts, depar for transfer or combination facilities.  RESPONSIBLE OFFICIAL:	nd complete. Further, my ann	ual consumption of	of perchloroethylene odry facilities or 1,8	solvent, based
		V		<u> </u>

<sup>\*</sup>This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

# TLE V AIR QUALITY GENERAL RMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 💢 COM	PLAINT/DISCOVERY [ "	RE-INSPECTION
TIME IN: OTIO A	7 TIME OUT: 0945	AIRS ID#: (23	36731
TYPE OF FACILITY:	RYCLEAN	Sur MAR	
FACILITY NAME:	rie Cleavers	CALOR I	A. 3. 12 (1000)
FACILITY LOCATION:	301 N. Halafuf	Obje 11	70/
	esocuter 32501	04,	On it
RESPONSIBLE OFFICIAL:	JOE GRITT-NBLATT	PHONE NUMBER:	132-4423
التسكيا	the compliance requirements evalua Rule 62-213.300, Florida Administra		is found to be in
Based on the results of discrepancies were not	the compliance requirements evaluated:	ted during this inspection, the follow	ing compliance
COMPLIANCE REQ	UIREMENT/PROBLEM	FOLLOW-UP ACTIO	N REQUIRED
	NTERED		
MA	R 2 7 2000		
<del></del>			
		•	
COMMENTS: Good A	e and s were my	AINTAINED EQUIP.	
	cation form has been properly certific	ed and submitted to the inspector.	YES NO
DATE OF NEXT INSPECTION	ON: 12 M 15	· 	Left for the C
INSPECTION CONDUCTED	BY: CHANLES NORM		
INSPECTOR'S SIGNATURE	1// 00001	ease Print)  PHONE NUMBER: 5	795-836¥
			K 1222  Revised 10/96



# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	×	COMPLAINT/DISCOVERY	ם
AIRS ID#: 03'3023/	DATE: 3/21/00	TIME	IN: <u>0910</u> TIME OUT: <u>(</u>	3945
FACILITY NAME:	xie CLE	INCR	2	
FACILITY LOCATION: 2	301 N. 6	ALME	0× S/	
	imacela			
	<i>→</i>		PHONE: 432-44Z	Ž
			PHONE:	
PART I: NOTIFICATION				
(check appropriate box)		<del>_</del>		
1. New facility notified DARM	30 days prior to startup	,	ENTERER	
2. Facility failed to notify DAR!	M to use general permit	ı	MAR 2 7 2000	
			11/11/ KL / 6400	
PART II: CLASSIFICATION				
Facility indicated on notification			☐ No notification form	
				etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source.	on form that it is:	New small	☐ No notification form ☐ Drop store/out of business/pe	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/y	on form that it is:  ce 2. yr dr	y-to-dry only	☐ No notification form ☐ Drop store/out of business/perarea source  y, x < 140 gal/yr	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr	ce 2.	y-to-dry only ansfer only, x	□ No notification form □ Drop store/out of business/pearea source v, x < 140 gal/yr < 200 gal/yr	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/y	ce 2. yr dr	ry-to-dry only ansfer only, x oth types, x <	□ No notification form □ Drop store/out of business/pearea source v, x < 140 gal/yr < 200 gal/yr	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	ce 2.  yr dr  bo	y-to-dry only ansfer only, x oth types, x < constructed or	□ No notification form □ Drop store/out of business/perarea source  of x < 140 gal/yr  of 200 gal/yr  140 gal/yr  of or after 12/9/91)	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source	ce 2.  yr dr  bo (co	y-to-dry only ansfer only, x oth types, x < onstructed or . New large:	□ No notification form □ Drop store/out of business/perarea source  of x < 140 gal/yr  of 200 gal/yr  140 gal/yr  of or after 12/9/91)	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,800	on form that it is:  ce	ry-to-dry only ansfer only, x oth types, x < constructed or New large: ry-to-dry only ansfer only, 2	□ No notification form □ Drop store/out of business/perarea source  of x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)  area source □ of 140 ≤ x ≤ 2,100 gal/yr 100 ≤ x ≤ 1,800 gal/yr	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)	on form that it is:  ce	ry-to-dry only ansfer only, x oth types, x < constructed or New large: ry-to-dry only ansfer only, 2 oth types, 140	□ No notification form □ Drop store/out of business/per area source $x, x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 12/9/91$ $x < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 $	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,800	on form that it is:  ce	ry-to-dry only ansfer only, x oth types, x < constructed or New large: ry-to-dry only ansfer only, 2 oth types, 140	□ No notification form □ Drop store/out of business/perarea source  of x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)  area source □ of 140 ≤ x ≤ 2,100 gal/yr 100 ≤ x ≤ 1,800 gal/yr	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)	ce 2.  yr dr  be (ce 4. 100 gal/yr dr 0 gal/yr tr gal/yr be	ry-to-dry only ansfer only, x oth types, x < constructed or New large: ry-to-dry only ansfer only, 2 oth types, 140	□ No notification form □ Drop store/out of business/per area source $x, x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 12/9/91$ $x < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 < 100 $	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 \le x \le 2, transfer only, 200 \le x \le 1,800 go (constructed before 12/9/91)  5. This is a correct facility class of the property of the second constructed before 12/9/91)	ce 2.  yr dr  bo  ce 4.  100 gal/yr dr  gal/yr bo  cassification	ry-to-dry only ansfer only, x oth types, x < constructed or New large: ry-to-dry only ansfer only, 2 oth types, 140 constructed or 14 On.	No notification form  □ Drop store/out of business/per area source $x, x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 \le x \le 2, transfer only, 200 \le x \le 1,800 go (constructed before 12/9/91)  5. This is a correct facility class of the constructed before 12/9/91)	on form that it is:  ce	ry-to-dry only ansfer only, x oth types, x < constructed or . New large: ry-to-dry only ansfer only, 2 oth types, 140 constructed or	□ No notification form □ Drop store/out of business/per  area source (x, x < 140 gal/yr 140 gal/yr 140 gal/yr 140 source (x, 140 ≤ x ≤ 2,100 gal/yr 100 ≤ x ≤ 1,800 gal/yr (x) or after 12/9/91) □ Can not determine  umber above	etroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 \le x \le 2, transfer only, 200 \le x \le 1,800 go (constructed before 12/9/91)  5. This is a correct facility class of the constructed before 12/9/91)	on form that it is:  ce	ry-to-dry only ansfer only, x oth types, x < constructed or . New large: ry-to-dry only ansfer only, 2 oth types, 140 constructed or	No notification form  □ Drop store/out of business/per area source $x, x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$	etroleum

PART III: GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
Storing perchloroethylene in tightly sealed and impervious containers?	□Y □N MAN/A
2. Examining the containers for leakage?	DY DN <b>M</b> N/A
3. Closing and securing machine doors except during loading/unloading?	MD A K
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	OY ON AN/A
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON MIN'A
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part V.	
If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).	
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).	
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)	. • • • • •
1. Equipped all machines with the appropriate vent controls?	ØY □N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	DAY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?  Output  Description:	□Y □N <b>⊠</b> N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	May on
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON MAN/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after	PSV DN

19 1

B. Has the responsible official of an existing large or new large area source also	A:
B. Thas the responsible official of all existing large of new large area source are	0.
Measured and recorded the exhaust temperature on the outlet side of the condens on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ser located
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	□Y □N □N/A
ls the temperature differential equal to or greater than 20° F?	DY DN DN/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber,	
if machines are equipped with a carbon adsorber?	DY DN DN/A
Is the perc concentration equal to or less than 100 ppm?	OY ON ON/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contract or expansion; is at least 2 duct diameters unstream from any hand, contraction	tion,
or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	OY ON ON/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y □N □N/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes)			
1. Maintained receipts for perc purchased?	<b>⊠</b> Y □N		
2. Maintained rolling monthly total of perc consumption?	ØY □N		
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	□Y □N <b>⊠</b> N/A		
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	OY ON ON/A		
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON BAN/A		
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DYN/A		
6. Maintained startup/shutdown/malfunction plan?	ÒXY □N		
7. Maintained deviation reports?	OY ON BIN/A		
Problem corrected?	בא עם ארא <b>א</b> מאר		
8. Maintained compliance plan, if applicable?	A/NE NO YO		

### PART VI: LEAK DETECTION AND REPAIRS

١.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
	inspection?			<b>23</b> Y	$\Box$ N
2.	Has the facility maintained a leak log	?		⊠Y	ПN
3.	Does the responsible official check th	e following areas for leaks	?		
	Hose connections, fittings,				
	couplings, and valves	MY DN DN/A	Muck cookers	ΩY	DN ØMN/A
	Door gaskets and seating	SPY ON ON/A	Stills	ΩY	□N <b>⊠</b> N/A
	Filter gaskets and seating	CYY ON ON/A	Exhaust dampers	ΠY	□N <b>Ş</b> M/A
	Pumps	MY ON ON/A	Diverter valves	ΠY	□N <b>Ø</b> N/A
	Solvent tanks and containers	YAY ON ON/A	Cartridge filter housings		
	Water separators	□Y □N <b>⊠</b> N/A	(USGS DYNA (	CLG	W N
4.	Which method of detection is used by	the responsible official?	1343/EM.		•
	Visual examination (condensed	solvent on exterior surfac	es)	À	
	Physical detection (airflow felt	through gaskets)		Ça	
	Odor (noticeable perc odor)			$\mathbf{Q}$	
	Use of direct-reading instrumen	tation (FID/PID/calorimet	ric tubes)		
	Halogen leak detector			M	
	If using direct-reading inst	rumentation, is the equi	oment:	XN/	Α.
	a. Capable of detecting	g perc vapor concentration	s in a range of 0-500 ppm?	$\Box$ Y	□N .
		standard gas prior to and	after each use		
	(PID/FID only)?				□N
		and obvious signs of wear		ΩY	□N .
	d. Kept in a clean and	secure area when not in u	se?	ΩY	□N
	e. Verified for accurac	y by use of duplicate sam	ples (calorimetric only)?	ŪΥ	ΠN

CHARLES NORMAN 3/21/QA	
Inspector's Name (Please Print)	Date of Inspection
(Such Moman	8-12 mos
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:		·
•		
•		
	•	
		•
·		
•		

# Ktol

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 📉	COMPLAINT/DISCOVERY	RE-INSPECTION
TIME IN:	TIME OUT:	AIRS ID#:	33023/
TYPE OF FACILITY:	2		
	DINIE CLEMNE	ns, INC.	DATE: 1/17/01
FACILITY LOCATION: 2	301 N. PA	1AFOX ST.	
Pe	NS Acola	32501	
RESPONSIBLE OFFICIAL:	Gary Vick	PHONE NUMBER:	
	of the compliance requiremen	nts evaluated during this inspection, the fac	
Based on the results discrepancies were n		nts evaluated during this inspection, the foll	owing compliance
COMPLIANCE RE	QUIREMENT/PROBL	EM FOLLOW-UP ACTI	ON RÉQUIRED
		aureau of l	
		JAN 1 9 200	
	· · · · · · · · · · · · · · · · · · ·		
COMMENTS: Comple	te hem notifi	CATION FORM + FORMAR	O TO ME.
G00 d	records as al	Pways.	· · · · · · · · · · · · · · · · · · ·
The Annual Compliance Certi	fication form has been prope	erly certified and submitted to the inspector	YES NOX
DATE OF NEXT INSPECT	ION:		tel & for KO.
INSPECTION CONDUCTE	DBY: CHARLES A	(Approximate)  Vor man  (Please Print)	
INSPECTOR'S SIGNATUR	E. Males Mille	PHONE NUMBER:	
		Page / of /.	Revised 10/96

### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST ENTERED

TYPE OF INSPECTION:

ANNUAL (INS1, INS2)

COMPLAINT/DISCOVERY (CI)

RE-INSPECTION (FUI) □

AIRS ID#: 033023   DATE: 1/17/0/ TIME IN: TIME OUT:		
FACILITY NAME: DIXIE CLEANERS INC.		
FACILITY LOCATION: 2301 N,		
PENSACOL		
RESPONSIBLE OFFICIAL: GOAY VICK		
. ~ .		
CONTACT NAME: RAD FRUETH	PHONE: 432-4423	
·		
PART I: NOTIFICATION		
(check appropriate box)	Facility Compliance Status: IN 🕱	
1. New facility notified DARM 30 days prior to startu	ip 🗆 (ARMS Data) MNC 🗆	
2. Facility failed to notify DARM to use general perm	nit 🗆 SNC 🗆	
PART II: CLASSIFICATION		
Facility indicated on notification form that it is:	☐ No notification form	
(check appropriate box)  A.	☐ Drop store/out of business/petroleum	
·	2. New small area source	
	dry-to-dry only, x < 140 gal/yr	
	transfer only, x < 200 gal/yr both types, x < 140 gal/yr	
'	(constructed on or after 12/9/91)	
II	4. New large area source	
	dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$	
	transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr	
<b> </b>	(constructed on or after 12/9/91)	
5. This is a correct facility classification	Y 🗆 N 🗆 Can not determine	
If no, please check the appropriate classificat	ion:	
I	ral permit as number above	
facility exceeds above limi	ts and is not eligible for a general permit	
B. The total quantity of perchloroethylene (perc) pure facility was /c/gallons.	chased within the preceding 12 months by this dry cleaning	

PART III: GENERAL CONTROL REQUIREMENTS				
Is the responsible official of the dry cleaning facility: (check appropriate boxes)				
1. Storing perchloroethylene in tightly sealed and impervious containers?	אומ אם עם			
2. Examining the containers for leakage?	DY DN MN/A			
3. Closing and securing machine doors except during loading/unloading?	MA ON			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	IN A CLETAN DAVA			
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY DN DN/A			
PART IV: PROCESS VENT CONTROLS	<u> </u>			
In Part II-A:				
If classification 1 has been checked, no controls are required. Proceed to Pa	rt V.			
If classification 2 has been checked, the machine should be equipped with a (complete A below).	If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).			
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993				
If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).				
A. Has the responsible official of all new sources and existing large area sou (check appropriate boxes)	rces:			
1. Equipped all machines with the appropriate vent controls?	· DY DN			
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A			
3. Equipped the condenser with a diverter valve so airflow will be directed away from th condenser upon opening the door?	e DY DN DN/A			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY ON			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON ON/A			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON			

NA

В.	Has the responsible official of an existing large or new large area source also:	
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	MY ON
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON MAKA
	Is the temperature differential equal to or greater than 20° F?	DY DN QN/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	אומב אם עם
	Is the perc concentration equal to or less than 100 ppm?	א'אפ' אם עם
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	OY ON ON'A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY DN QN'A
6.	Routed airflow to the carbon adsorber (if used) at all times?	DY DN QN/A

#### PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) ZY DN 1. Maintained receipts for perc purchased? NO YES 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days OY ON and parts installed w/in 5 days of receipt? DA DN DN/V 4. Maintained calibration data? (for applicable direct reading instruments) א'אפ' אם עם 5. Maintained exhaust duct monitoring data on perc concentrations? NO YE 6. Maintained startup/shutdown/malfunction plan? A/ME NO YO 7. Maintained deviation reports? DY DN DN/A Problem corrected? DY DN\DN/A 8. Maintained compliance plan, if applicable?

PAR	PART VI: LEAK DETECTION AND REPAIRS			
1. D	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair			
ir	spection?			NO VB
2. H	as the facility maintained a leak log	??		NO YES
3. D	oes the responsible official check the	he following areas for leaks	s?	
	Hose connections, fittings, couplings, and valves	אואם אם צם	Muck cookers	DY QN DN/A
	Door gaskets and seating	DY ON ON/A	Stills	אומ אם עם
	Filter gaskets and seating	A/אם אם צם	Exhaust dampers	DY DN WN/A
	Punips	OY ON ON/A	Diverter valves	אומס אם עם
	Solvent tanks and containers	A/KO NO YO	Cartridge filter housings	ם או או אם אם
	Water separators	AVABANO AO		
4. W	hich method of detection is used b	y the responsible official?		
	Visual examination (condensed	d solvent on exterior surfac	es)	à
	Physical detection (airflow felt through gaskets)			<b>D</b>
	Odor (noticeable perc odor)			Ò
	Use of direct-reading instrument	ntation (FID/PID/calorimet	tric tubes)	
	Halogen leak detector			
	If using direct-reading ins	strumentation, is the equi	pment:	ØN/A
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?			DY DN .
<u> </u>   	b. Calibrated against a standard gas prior to and after each use  (PID/FID only)?			אם עם
	c. Inspected for leaks and obvious signs of wear on a weekly basis?			DY DN
d. Kept in a clean and secure area when not in use?			DY DN	
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?			DY DN

HARLES NORMAN	1/17/01
Inspector's Name (Please Print)	Date of Inspection
Manual	· 
1 Worm 11/1/1/Men	
Inspector's Signature	Approximate Date of Next Inspection

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Bureau of Air Monitoring & Mobile Sources

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Obj.: 002273

Fund: 20-2-035001

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