

Department of Environmental Protection

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

David B. Struhs Secretary

May 6, 2002

Mr. Jerry Welch Gulf Coast Professional Cleaners 1791-1 Boyscout Drive Ft. Myers, Florida 33907

Re: Facility No.: 0710210-001

Dear Mr. Welch:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on April 1, 2002.

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

Joe Kahn, Acting Chief Bureau of Air Monitoring

and Mobile Sources

JK/jw

cc: Mr. Sherrill Culliver, South District

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

07/02/0-00/

Page 15

1(a) RC shouldbe circled under Control
Device Required for New machines.

1(b) Markout "I" by washess. Only for
perc Machines.

Page 16 4. New machines at small area source

should be marked.

8 pake with Jerry Welch and he stated that he only has one pere using machine and it is Pry to Dry. He also stated the dry today machine has a ref. condenser and Carbon adsorber for control devices CAP

Best Available Copy

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM OF A 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.

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):			
2. Site Name (For example, plant name or number):	nen Lla		
3. Hazardous Waste Generator Identification Number:			
4. Facility Location: 1701-1 Boyscot on Street Address:			
City: CT, MYENI County: FL	Zip Code: 33 907		
5 Eacility Identification Number (DEP Use ONLY = do not fill in):			
Responsible Official			
6. Name and Title of Responsible Official:			
Name: Jeany welch Title:	co-onne		
7. Responsible Official Mailing Address: Organization/Firm: C COAST PWR 255102 Street Address: Val- Baysoct Dr.	{		
City: ET . Myens & County: Lee	Zip Code: 33907		
8. Responsible Official Telephone Number:			
Telephone: (ay) 277-0450 Fax:	(941)549-6715		
Facility Contact (If different from Responsible Official)			
9. Name and Title of Facility Contact (For example, plant manager):			
Same			
10. Facility Contact Address:			
Street Address:	·		
City: County:	Zip Code:		
11. Facility Contact Telephone Number:	RECEIVED		
Telephone: () - Fax:	() - MAR 2 1 5002		
<u> </u>	TOTAL N		

DEP Form No. 62-213.900(2) Effective: 2/24/99

Facility Name and Location

D.E.P. - South District

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 Control Device Required* Status Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Existing New RC(CA)None required SAM Existing/New RC/CA/None required RC/CA/None required Existing/New RC = refrigerated condenser CA = carbon adsorber *CONTROL DEVICE KEY: 1.(b) TRANSFER MACHINES ONLY How many washers do you have on-site? How many dryers/reclaimers do you have on-site? 编 九至张 双王 经现代价值 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 Control Device Required* Date Control Device Installed Status (if already included at time of From Manufacturer (circle one) (circle one) purchase, write "SAME") Existing/New RC/CA/None required RC/CA/None required Existing/New Existing/New RC/CA/None required RC = refrigerated condenser CA = carbon adsorber *CONTROL DEVICE KEY: 2.(a) How much perchloroethylene (perc) have you used within the last 12 months? [30] 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 [

DEP Form No. 62-213.900(2) Effective: 2/24/99 Unopened store [____] (date of expected opening

Best Available Copy

3. What is the facility's source Indicate with an "X". Seld		n the definitions found in section (3) of Part II?
Small Area Source	X	
Transfer only	nachines only on-site y on-site e types on-site	(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)
Large Area Source		
Transfer onl	nachines only on-site y on-site e types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)
4. What control technology is (Indicate with an "X".)	required on machines	pursuant to section (5) of Part II of this notification form?
Existing machines at (NONE REQUIRED)		New machines at small area source Refrigerated condenser
Existing machines at Carbon adsorber Refrigerated condens		New machines at large area source Refrigerated condenser []
	ify that all steam and he is to a stach	units shall not be eligible to use the general permit pursuant to not water generating units on-site meet the following exemption ed memo for the criteria). OR
No such units on-site		
How many boilers do you hav	e on-site? [1]	
For each boiler, indicate its ho	orsepower (HP) rating	: (\S)[_]
What type of fuel do you use?	X propane No. 2 fu No. 6 fu	el oil No. 4 fuel oil
6. Equipment Monitoring and	Recordkeeping Inform	mation
Check all logs which are requ	ired to be kept on-site	in accordance with the requirements of this general permit:
(a) Purchase receipts and solv	ent purchases/solvent	addition log
(b) Leak detection inspection	and repair	رکی
(c) Refrigerated condenser ter	nperature monitoring	
(d) Carbon adsorber exhaust j	perc concentration mo	onitoring
(e) Startup, shutdown, malfu	nction plan	MECEIVED

D.E.P. - South District

MAR 2 1 2002

7. Surrender o	f Existing DEP Air Permit(s)
Please indicat	e 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
-6	No DEP air permits currently exist for the operation of the facility indicated in this notification form.
Responsible (Official Certification
this notification statement maintain comply was I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the is made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to eith all terms and conditions of this general permit as set forth in Part II of this notification form. Importly notify the Department of any changes to the information contained in this notification. Date

DEP Form No. 62-213.900(2) Effective: 2/24/99

466484 DEC26 2066 Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Printed on recycled paper.

Do NOT Remove Label AIRS ID# 710210 GULF COAST PROFESSIONAL CLEANERS LLC 1791-1 Boyscout Drive FT MYERS, FLORIDA 33907

FLAIR ACCT. CODE 372020350013755010000 **BENIFITTING OBJECT CODE 002000 BENIFITTING CATEGORY 000200**

FOR GOVERNMENT USE ONLY

ORG.: 37550101000 EO: A1

FUND: 20-2-035001 **OBJECT: 002273**

FORT MYERS FL 33

Gulf Coast Professional Cleaners 1791-1 Boy Scout Drive Fort Myers, FL 33907

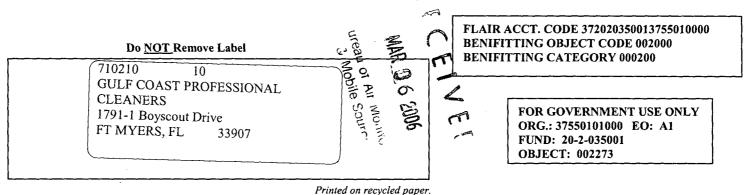
جنجير فتراجير

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

35312+3030-30 B033

459551 MAR 2 2008 Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00



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# 710210 10
GULF COAST PROFESSIONAL
CLEANERS
1791-1 Boyscout Drive
FT MYERS, FL 33907

Printed on recycled paper.

ORG: 37550 000 EG: A1

FUND: 20-2-035001

LE31	(Domestic Mail O	MAIL REC	Coverage Provided)
170	OFF	ICIAL	. USE
	Postage	\$	
4000	Certified Fee		
	Return Reciept Fee (Endorsement Required)		Postmark Here
吕	Restricted Delivery Fee (Endorsement Required)		
0.5	AIRS ID# 7102		
GULF COAST PROFESSIONAL CLEANERS			
7003	1791-1 Boyscon	ut Drive	
	FT MYERS, FL	J 33907	
	PS Form 3800, June 200	2	See Reverse for instructions
L J	PS FORM 3600, June 200.		See Reverse for instructions

SENDER: COMPLETE TH	IS SECTION	COMPLETE THIS SECT	TION ON DELIVE	RY .
 Complete items 1, 2, and item 4 if Restricted Delive Print your name and add so that we can return the Attach this card to the ba or on the front if space points. 	ery is slesired. ress on the reverse card to you. lick of the mailpiece,	B. Received by (Print of Name) C. Date of Mickey Welch 2/7/		Agent Addressee Date of Delivery Organization
Article Addressed to:		If YES, enter delivery		□ No
AIRS ID# 710210 1st GULF COAST PROF CLEANERS	E22IOIVE		·	
1791-1 Boyscout Driv FT MYERS, FL 3390	ve 17	Registered D	☐ Express Mail☐ Return Receip	t for Merchandise
		.4. Restricted Delivery?	(Extra Fee)	☐ Yes
Article Number (Transfer from service label)	7003 0500	0004 0144	P537	:
PS Form 3811, August 200	1 Domestic Retu	urn Receipt		102595-02-M-1540

UNITED STATES POSTAL SERVICE RS.

PM 33 POSTAGES FROM POST

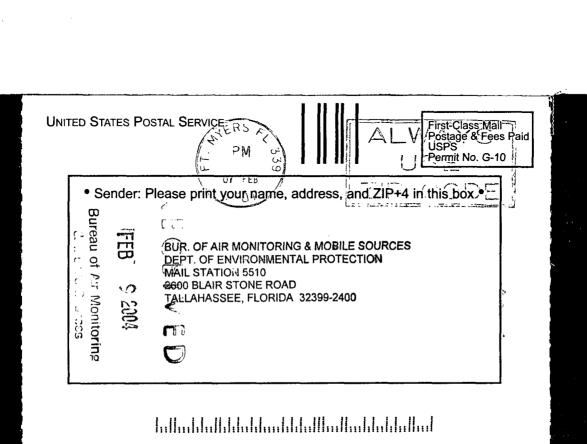
J 0003 5650 9721	Postage \$ Certified Fee (Endorsement Required)	VICETM NAILTM RECEIPT No Insurance Coverage Provided) Visit our website e/ www.u.u.ps.com C A Postmark Here
7003 2260	Restricted Delivery Fee (Endorsement Required) Total Postage ID# 710: JERRY GULF C Street, Apt. No.; 1791-1 II or PO Box No. City, State, ZIP4 PS Form 3800, June 2002	WELCH OAST PROFESSIONAL CLNRS OYSCOUT DRIVE

٠,

,

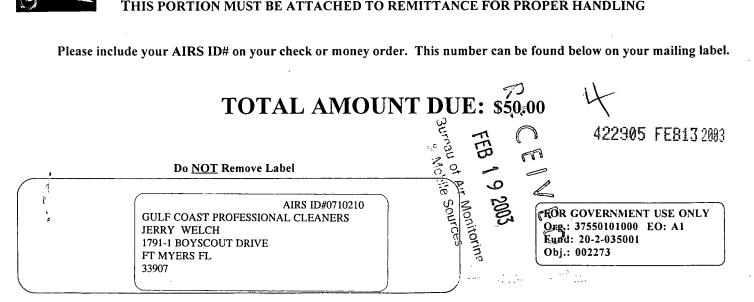
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X DAddresses B. Received by (Printed Name) C. Date of Delivery	
1. Article Addressed to:	D. Is delivery address different from item 1?	
ID# 7·10210 JERRY WELCH GULF COAST PROFESSIONAL CLNRS 1791-1 BOYSCOUT DRIVE FT MYERS, FL 33907		
	3. Service Type Certified Mail	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7003 22 (Transfer from service label)	60 0003 5650 9721	
PS Form 3811, August 2001 Domestic Retu	ırn Receipt 102595-02-M-1540	

۱ ۰





Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.



	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
HF5	60 Lt ici		Par Ar
-0		1014	
80	Postage	\$	141
H H	Certified Fee		Postmarin
m	Return Receipt Fee (Endorsement Required)		Here'
0.07	Restricted Delivery Fee (Endorsement Required)		V
20		ATRO	
0	3 1791-1 BOYSCOU	T DRIVE	
700	FT MYERS FL 33907		
	PS korm souv jivay assa		e contentations

FENDER STANFIODE SERVICE SERVI	Not Section on Delivery
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: AIRS ID#0710210 GULF COAST PROFESSIONAL CLEANERS JERRY WELCH 1791-1 BOYSCOUT DRIVE FT MYERS FL 33907	B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
	3. Service Type Certified Mail
2. Article Number (Transfer from service label) 7000 1670	0013 3108 6465
PS Form 3811, August 2001 Domestic Retu	urn Receipt 102595-02-M-1035

United States Postal Service

First-Class Mail Postage & Fees Paid USPS Permit No. G-10

Sender: Please print your name, address, and ZIP+4 in this box of FEB 1 0 2003

BUR. OF AIR MONITORING & MOBILE SOURGEST MODITORING MAIL STATION 5510
2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

Inthodological delication of the Ither than I delicated and the Ither than I delicated and the Ither than I delicated and the I delicated and the Ither than I delicated and the Ither than I delicated and the I delicated and th



435972 FEB 42004

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

719210 JERRY WELCH GULF COAST PROFESSIONAL CLEANERS 1791-1 BOYSCOUT DRIVE FT MYERS FL 33907 FOR GOVERNMENT USE ON Org.: 37550101000 EO: A1 Fund: 20-2-035001 Obj.: 002273