

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

December 31, 1996

Mr. Ramesh Joshi Lancaster Square Cleaners 725 West Lancaster Road Orlando, Florida 32809

Facility I.D. No. 0950354

Dear Mr. Joshi:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on October 14, 1996.

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, Florida 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,

Dotty Diltz, Chief

Bureau of Air Monitoring

and Mobile Sources

DD/jw

cc: Mr. Louis Nichols, Central District

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

Printed on recycled paper.

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PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	ľα	COMPLAINT/DISC	COVERY	
	RE-INSPECTION				N
				<u>p</u>	
AIRS 1D#: <u>0950354</u>	-			سا رسا	0341
FACILITY NAME: La				Mobility A	2
FACILITY LOCATION: _	725 West	Lancas	ster Road	Sources	1999
_	Orlando, FL	3280)9		
RESPONSIBLE OFFICIAI	L: Ramesh J	Toshi	PHONE: 407-	857-76	075
CONTACT NAME:				<u> </u>	
PART I: NOTIFICATION					
(check appropriate box)		<u> </u>			
New facility notified DAR	M 30 days prior to startur	p ·			
2. Facility failed to notify DA					a
PART II: CLASSIFICATI	ON				
PART II: CLASSIFICATE Facility indicated on notific (check appropriate box)		1 1 1 1 1	☐ No notification f	orm f business/pet	troleum
Facility indicated on notific	ation form that it is: ource \(\oldsymbol{\su} \) al/yr \(\oldsymbol{tr} \) bo	ransfer only, x oth types, $x <$	Drop storcyout of area source x < 140 gal/yr < 200 gal/yr	f business/pet	tiona)
Facility indicated on notific (check appropriate box) A. 1. Existing small area so dry-to-dry only, x < 140 g transfer only, x < 200 gall both types, x < 140 gal/yr	ation form that it is: Durce 2. gal/yr dr /yr tr bo Ource 4. ≤ 2,100 gal/yr tr ,800 gal/yr tr 00 gal/yr bo	ry-to-dry only, x ransfer only, x oth types, x < constructed on New large 2 lry-to-dry only ransfer only, 2 both types, 140	Top store out of area source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	business/per	tiona)
Facility indicated on notific (check appropriate box) A. 1. Existing small area so dry-to-dry only, x < 140 g transfer only, x < 200 gall both types, x < 140 gal/yr (constructed before 12/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9	ation form that it is: ource 2. gal/yr dr by tr bol) (c	ry-to-dry only, x ransfer only, x oth types, x < constructed on New large 2 lry-to-dry only ransfer only, 2 both types, 140	The proposition of the proposit	business/per	tiona)
Facility indicated on notific (check appropriate box) A. 1. Existing small area so dry-to-dry only, x < 140 g transfer only, x < 200 gall both types, x < 140 gal/yr (constructed before 12/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9/9	ation form that it is: ource 2. gal/yr dr by tr bol) (c	ry-to-dry only, ransfer only, x oth types, x < constructed on . New large a lry-to-dry only ransfer only, 2 oth types, 140 constructed on	The Drop store out of the Area source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ 140 gal/yr or after $12/9/91$) Area source $140 \le x \le 2,100 \text{ gal/yr}$ or after $1,800 \text{ gal/yr}$ or after $12/9/91$) Can not determine the Drop of the Drop store $12/9/91$ and $12/9/91$ area source $12/9/91$ and $12/9/91$ area and $12/9/91$ area source $12/9/91$ and $12/9/91$ area source $12/9/91$ area source $12/9/91$ and $12/9/91$ area source $12/9/91$ are source $12/9/91$ area source $12/9/91$ are source $12/9/91$ area source $12/9$	business/per	tiona)

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?	OY ON ON/A
2. Examining the containers for leakage?	OY ON ON/A
3. Closing and securing machine doors except during loading/unloading?	OY ON
 Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 	OY ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ON/A
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part V	<i>'</i> .
If classification 2 has been checked, the machine should be equipped with a refr (complete A below).	igerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber minimalled prior to September 22, 1993	9
If classification 4 has been checked, the machine should be equipped with a refr (complete A and B below).	igerated condenser
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?	OY ON
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 the condenser upon opening the door?	OY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	חם אם
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?	חס אם

B.	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?	ΩY	ΩΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	.ПҮ	ПN	□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 peachings are equipmed with a cycles of the day?	ΩV		CDAYA
	if machines are equipped with a carbon adsorber?			
	Is the perc concentration equal to or less than 100 ppm?	U I	LIN	□N/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duet diameters downstream of any bend, contraction, or expansion, is at least 2 duet diameters upstream from any bend, contraction,		·	•
	or expansion; and downstream from no other inlet?	ΩY	ПИ	□n/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩÝ	ПИ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	Ωy	מם	□N/A

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	OY ON			
2. Maintained rolling monthly total of perc consumption?	OY ON			
3. Maintained leak detection inspection and repair reports for the following:				
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON ON/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)	אואם אם צם			
5. Maintained exhaust duct monitoring data on perc concentrations?				
6. Maintained startup/shutdown/malfunction plan?				
7. Maintained deviation reports?				
Problem corrected?				
8. Maintained compliance plan, if applicable?				

PART VI: LEAK DETECTION AND REPAIRS				
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
inspection?			□Y □N	
2. Has the facility maintained a leak log?			OY ON	
3. Does the responsible official check the f	following areas for leaks?			
Hose connections, fittings, couplings, and valves	OY ON ON/A	Muck cookers	OY ON ON/A	
Door gaskets and scating	OY ON ON/A	Stills	אואם אם צם	
Filter gaskets and seating	OY ON ON/A	Exhaust dampers	OY ON ON/A	
Pumps	OY ON ON/A	Diverter valves	OY ON ON/A	
Solvent tanks and containers	DY DN DN/A	Cartridge filter housings	OY ON ON/A	
Water separators	OY ON ON/A		l	
4. Which method of detection is used by th	ne responsible official?			
Visual examination (condensed so	olvent on exterior surfaces)		<u>.</u>	
Physical detection (airflow felt thr	ough gaskets)		. .	
Odor (noticeable perc odor)		•		
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)				
Halogen leak detector			<u> </u>	
If using direct-reading instrumentation, is the equipment:			□N/Λ	
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?			OY ON	
 b. Calibrated against a standard gas prior to and after each use (PID/FID only)? 			ΟΥ ON	
c. Inspected for leaks an	d obvious signs of wear on	a weekly basis?	DY DN	
d. Kept in a clean and se	ecure area when not in use	?	DY DN.	
e. Verified for accuracy	by use of duplicate sample	s (calorimetric only)?	DY DN	
		_		
Ilka Bundy 11-29-99				
Inspector's Name (Please Pri	Inspector's Name (Please Print) Date of Inspection			
Alka Bund	Alka Blunch N/A			
Inspector's Signature Approximate Date of			Next Inspection	

ADDITIONAL SITE INFORMATION:

725 West Lancaster Road. The Store is empty.

Mra Brown 1+29-99

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

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TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTIO	N 🖾
FACILITY NAME: <u>Lancastav</u> FACILITY LOCATION: <u>725</u> . W	Square Cleaner 2. Lancaster Rd
_ Orlando	FI 32809
	Justi PHONE: 407 857-7075
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to star	rtup 🗆
2. Facility failed to notify DARM to use general per	rmit 🚨
·	
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form☐ Drop store/out of business/petroleum
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)	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)
3. Existing 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 before $12/9/91$)	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 $12/9/91$)
5. This is a correct facility classification	□Y □N □Can not determine
	cation: eneral permit as number above mits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) p facility was SO gallons.	ourchased 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 scaled and impervious containers?	OY ON ON/A
2. Examining the containers for leakage?	OÝ ON ONA
3. Closing and securing machine doors except during loading/unloading?	ØY □N
4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal?	OY ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON OM/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 refriedment $(complete A below)$.	gerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber mu installed prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refr (complete A and B below).	igerated condenser
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?	OY ON
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 the condenser upon opening the door?	OY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	□Y □N
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 verifying that the coolant had been completely charged?	חם מח

B.	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?	ΠY	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	ПN	ΠN/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ΠN	□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	ПN	□N/A
	Is the pere concentration equal to or less than 100 ppm?	ΠY	ПΝ	□N/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?	ШΥ	ПN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ПΥ	□и	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	. 🗆 N	□N/A

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes)			
1. Maintained receipts for perc purchased?	DY ON		
2. Maintained rolling monthly total of perc consumption?	CDY CIN		
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	CAY ON ON/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? 	מ/אם אם אָם		
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON DATA		
5. Maintained exhaust duct monitoring data on perc concentrations?			
6. Maintained startup/shutdown/malfunction plan?			
7. Maintained deviation reports?	OY ON ⊡M\A		
Problem corrected?	OY ON ON/A		
8. Maintained compliance plan, if applicable?	OY ON DATA		

PA	ART VI: LEAK DETECTION AND F	REPAIRS				
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?				ĽΊΥ	ΩΝ
2.	Has the facility maintained a leak log?				₽Ý	□N
3.	Does the responsible official check the	following are	as for leaks?			
	Hose connections, fittings, couplings, and valves	OY ON I	□N/A	Muck cookers		In □n/a
	Door gaskets and scating	άγ on (□N/A	Stills		IN □N/A
	Filter gaskets and scating	ו אם צנם		Exhaust dampers	UY C	IN □N/A
	Pumps	ו אם צם	□N/A	Diverter valves		IN 🗆 N/A
	Solvent tanks and containers	ו אם צום	□N/A	Cartridge filter housings		IN □N/A
	Water separators	DX DN I	□N/A			
4.	Which method of detection is used by the	ne responsibl	e official?			
	Visual examination (condensed so	olvent on exte	erior surfaces)		a	
	Physical detection (airflow felt the	ough gaskets	s)			
	Odor (noticeable perc odor)					
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)						
	Halogen leak detector					
If using direct-reading instrumentation, is the equipment:				DH/A		
	a. Capable of detecting p	oerc vapor co	ncentrations in	a range of 0-500 ppm?	□Y □	NE
	b. Calibrated against a s (PID/FID only)?	tandard gas j	prior to and aft	er each use		אכ
	c. Inspected for leaks an	d obvious sig	gns of wear on a	a weekly basis?	UY D	ИĽ
	d. Kept in a clean and se	ecure area wl	hen not in use?			ИC
	e. Verified for accuracy	by use of dup	olicate samples	(calorimetric only)?		ИС
	Inspector's Name (Please Prin	tclev		Date of Inspe	4 147	
	Add Tld) 	Approximate Date of	1 198	

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	APLAINT/DISCOVERY RE-INSPECTION RE-INSPECTION
TIME IN: 11.15 TIME OUT: 11. TYPE OF FACILITY: Dry Cleanev FACILITY NAME: Lawcastry Square	45 AIRS ID#: 0950354 e Cleaners DATE: 11/24/97
FACILITY LOCATION: 725 W. Lancas Orlando Fl	32809
RESPONSIBLE OFFICIAL: Ramesh Jush:	PHONE NUMBER: 407 859-7075
Based on the results of the compliance requirements evaluations compliance with DEP Rule 62-213.300, Florida Administr	ative Code (F.A.C.).
Based on the results of the compliance requirements evaluation discrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	,
COMMENTS:	
Facility in Cou	npliance
The Annual Compliance Certification form has been properly certification.	fied and submitted to the inspector. YES NO
INSPECTION CONDUCTED BY:	pproximate) FletcheV Idase Print) PHONE NUMBER: 407 836-9524

Revised 10/96

٠.,		# 0950354 BEST AVAILABLE COM	$P^{Y} \cap D =$
		11-12-96	
		Spoke to Lancaster	
		Cleaners Ramesh.	
1.	Facility Own	Cleaners, Ramesh Joshi is the owner	
	'HAM		
2.	Site Name (F	P.13	<u></u>
[-ANCAS	6. add title - owner	
3.	Hazardous V	P.14	
	FLD		
4.	Facility Loc	1. (c) should be marked	
	Street Addr City:		32809
₹3ks	Facility Ide	·	
	a cility ide	Official Mailing Address: VFirm: 725 W. LANCASTGZ. P.D.—IEOE 685: SS:	950357
	1.3	Tiene A Es	
		(2 NOV 1996 8)	
6.	Name and	של מברועבה אל היים ביים ביים ביים ביים ביים ביים ביים	·
		& WINTIATA SAY	
7.	Responsible (Official Mailing Address:	
	Organization	Firm: 725 W. LANCASTGZ PO-10	
	Street Addres City:	COLLANDO County: ORLANGE 2	Cip Code: 32809
	Dagnamailda (
8.	Telephone:	Official Telephone Number: (107) 857- 7075 Fax: () -	
L		03, (0/)	
		Facility Contact (If different from Responsible Official)	
9.	Name and Tit	tle of Facility Contact (For example, plant manager):	
i	/		

9. Name and Title of Facility Contact (For example, p	olant manager):		
RAMESH JOSHI			
10. Facility Contact Address:			
SILCAN) U	RD ORANGE	Zip Code:	32809
11. Facility Contact Telephone Number:			
Telephone: (407) 857-707 Y	Fax: ()	-	
(5. 33 1.51)		·	

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OCT 1 4 1996

Bureau of Air Monitoring & Mobile Sources Page 13 of 16

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1 Facility Owner/Company Name (Alama of companting agency or individual course)
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
KAMESH JOSHI
2. Site Name (For example, plant name or number):
LANCASTER SO CLEANERS 3. Hazardous Waste Generator Identification Number:
3. Hazardous Waste Generator Identification Number:
FLD 981025661
4. Facility Location:
Street Address: 725 W. LANCASTER RD
City: ORLANDO County: ORANGE Zip Code: 32809
5. Facility Identification Number (DEP Use):
9501381 0950354
Responsible Official
6. Name and Title of Responsible Official:
DANCEY TOSHI (DINICA)
PAMESH JOSHI (OWNER) My 7. Responsible Official Mailing Address:
Organization/Firm: 725 W. LANCASTAR RD
Street Address
City: ORLANDO County: ORLANGE Zip Code: 32809
8. Responsible Official Telephone Number:
Telephone: (107) 857- 7075 Fax: () -
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
RAMESH JOSHI
10. Facility Contact Address:
Street Address: 725 W. LANCASTAL RD
City: ORUNDU County: ORANGE Zip Code: 32809
11. Facility Contact Telephone Number:
201 031101)
:VFD
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4006
OCT 1 4 1996

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

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Bureau of Air Monitoring & Mobile Sources

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.

4.1		Date	Date		Date	Date	_	Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	lD	Purchased	Installed	ID	Purchased	Installed	lD	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit								7	
(1) w/ ref. condenser	·	1983			•				
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls			_						
Dryer Unit			-					•	* . ;
(7) w/ ref. condenser									
(8) w/ carbon adsorber		E							
(9) w/ no controls			-						
Reclaimer Unit									
(10) w/ ref. condenser]							
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are (c) No control devices 2.(a) What was the total q [APR 80] (b) If less than 12 mont Check why it is less	are re luant galle	equired to be ity of perchlo ons ow many? [_	installed [_/ proethylene (perc)	purchased in	the latest 12		,	· r ' 1
3. What is the facility's son (Indicate with an "X". √ Existing small are	urce Selec	classification t one classifi	based on the cation only.)	e defi	- -	d in section (2	,		
Existing large are	a so	arce []	Ne	w laı	rge area sour	ce []]		

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

	icate with an "X".)	uired on machine	s pursuant to sect	10n (3) 01 P	art II of this noti	
	Existing large area source Carbon adsorber	<u>e</u>	F Refrigerated co	ondenser		
	New small area source Refrigerated condenser		٨/	A		
	New large area source Refrigerated condenser		/~	/ / \		
	•					
to Rule	cility which contains non-e 62-213.300, F.A.C. Verifion criteria or that no such	y that all steam a	nd hot water gene			
boiler F	m and hot water generatin HP or less), and (2) are fire which propane or fuel oil c	ed exclusively by	natural gas excep	ot for period	ds of natural gas	
	m and hot water generating units on-site	g units exempt				
	Equipn	nent Monitoring	and Recordkeep	oing Inforn	nation	
Check a	all logs which are required	to be kept on-site	e in accordance w	ith the requ	. •	general permit:
(a) Purc	chase receipts and solvent p	ourchases				
(b) Leal	k detection inspection and	repair				
(c) Refr	igerated condenser temper	ature monitoring			[]	
(d) Carl	oon adsorber exhaust perc	concentration mo	onitoring			
(e) Instr	ument calibration					
/(f) Star	t-up, shutdown, malfunctio	on plan				

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

Surrender of Existing Air Permit(s)

	I hereby surrender all existing air permits authorizing operation of 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
this notif	lersigned, am the responsible official, as defined in Part II of this form, of the facility addressed i ication. I hereby certify, based on information and belief formed after reasonable inquiry, that th ts made in this notification are true, accurate and complete. Further, I agree to operate and
this notifi statement maintain	
this notifi statement maintain comply w	ication. 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
this notifi statement maintain comply w	ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the stande 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 with all terms and conditions of this general permit as set forth in Part II of this notification form. Imply notify the Department of any changes to the information contained in this notification.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL CO	MPLAINT/DISCOV	ERY 📋	RE-INSPECTION
		IRS ID#: 09	50354
	ne Clear	RL	TE: 5/21/97
RESPONSIBLE OFFICIAL: Ramesh Jushi	<u>3 2 80°</u> PHO1		7 857-7075
Based on the results of the compliance requirements eval compliance with DEP Rule 62-213.300, Florida Adminis Based on the results of the compliance requirements eval discrepancies were noted:	uated during this insp trative Code (F.A.C.) uated during this insp	ection, the facility i	s found to be in
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOV	V-UP ACTION	REQUIRED
Mazardous Container Not Seated	SIX	mouth	vernspection
Perc Receipts Not on Site	. "	11	(1
No Perc Rolling Consumption	()	Ŋ	u
No Leak Check Log	(2)	11	V
No Corrective Action Form	(3)	te	
COMMENTS:	_		
The Annual Compliance Certification form has been properly cer	tified and submitted to	o the inspector.	YES NO
DATE OF NEXT INSPECTION: 1 21 97	1		
INSPECTION CONDUCTED BY: [DDD]	Approximate) Etchev Please Print)		
INSPECTOR'S SIGNATURE: TO THE SIGNATURE	РНОГ	NE NUMBER: E	36-9524

Page___of_

Revised 10/96

0950354

11-12-96
Spoke to Lancaster.
Cleaners, Ramesh
Joshi is the owner,

P.13
6. add title - owner

P.14
1. (c) Should be marked

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

<u> </u>
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
RAMESH JOSHI
2. Site Name (For example, plant name or number):
.
LANCASTER SO CLEANERS
3. Hazardous Waste Generator Identification Number:
FLD 981025661
4 Facility Location:
Street Address: 725 W. LANCASTER RD
City: ORLANDO County: ORANGE Zip Code: 32809
5. Facility Identification Number (DEP Use):
9501381 0950354
Responsible Official
,
6. Name and Title of Responsible Official:
D Tau
PAMESH JOSHI
7. Responsible Official Mailing Address: Organization/Firm: 725 W. LANCASTGZ RD
Street Address:
Street Address: City: ORLANDO County: ORLANGE Zip Code: 32809
8. Responsible Official Telephone Number:
Telephone: (107) 857- 7075 Fax: () -
Facility Contact (If different from Responsible Official)
Tuoming Community (in united the state of th
9. Name and Title of Facility Contact (For example, plant manager):
RAMESH JOSHI
·
10. Facility Contact Address:
Street Address: 725 IN. LANCASTOR PD
City: County: The Code: 250
City. ORLANDU County. ORANGE Zip Code. 52809
11. Facility Contact Telephone Number:
Telephone: (407) 851-107-y Fax: () -
RECEIVED
~ ECFIVED
KEC.

OCT 1 4 1996

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.

#1	/983					#3		02-MAR-9
	/983							
								- Frank Color Color
NA.			, e		tan in the second			
	(x 1 , x si)		, e7.			· .	processors	
,XXX	V 1, 4		. 27.				p. 1	
N/A			: #2.		ta, i i i i i i i i i i i i i i i i i i i		p * * * * * * * * * *	
		 						l
are r quant gallo	ons ow many? [_	installed [_ oroethylene (perc)					[]
	et one classifi	cation only.)	1	nall area sour	ce []	3) of	Part II?	
	gallo hs, ha than urce Selec	gallons hs, how many? [_s than 12 months:	gallons hs, how many? [] months than 12 months: New owner: urce classification based on the Select one classification only.)	gallons hs, how many? [] months than 12 months: New owner: [urce classification based on the defi Select one classification only.) ea source [] New sm	gallons hs, how many? [] months than 12 months: New owner: [] New store: urce classification based on the definitions found Select one classification only.) ea source [] New small area sour	gallons hs, how many? [] months than 12 months: New owner: [] New store: [] Did urce classification based on the definitions found in section (3) Select one classification only.) ea source [] New small area source []	gallons hs, how many? [] months than 12 months: New owner: [] New store: [] Did not k urce classification based on the definitions found in section (3) of Select one classification only.) ea source [] New small area source []	hs, how many? [] months than 12 months: New owner: [] New store: [] Did not keep records: urce classification based on the definitions found in section (3) of Part II? Select one classification only.)

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Existing large area source Carbon adsorber New small area source Refrigerated condenser New large area source Refrigerated condenser
New large area source Refrigerated condenser S. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuar to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following
Refrigerated condenser [] 5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuar to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following
to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following
to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following
to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following
All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.
√All steam and hot water generating units exempt No such units on-site []
Equipment Monitoring and Recordkeeping Information
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
Check all logs which are required to be kept on-site in accordance with the requirements of this general permit
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
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 (b) Leak detection inspection and repair
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 (b) Leak detection inspection and repair (c) Refrigerated condenser temperature monitoring

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

Surrender of Existing Air Permit(s)

lease indica	te 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)
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifi 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 ts 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 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. $ \int_{-\infty}^{\infty} $
Signature	Date Date

Orange County Environmental Protection Department



TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ADDRESS RE-INS	a. PECTION		l ·	COMP	.ХГИТИЛ.	DISCOVERY	ť	Ü
AIRS 10#: 0950 354 DATE: FACILITY NAME: Lawc FACILITY LOCATION: 725 COVIG	uste W.	J 5	- 809 nca	ne. ster	Cle Rd	anel-s		
PART I: NOTIFICATION								
(check appropriate box)								
1. Existing facility notified DARM by 9/1/	96							القا
2. New facility notified DARM 30 days pri	or to start	пр						
3. Facility failed to notify DARM to use go	meral peri	nit						ם
Facility indicated on notification form the (check appropriate box)	ant it is:	7, 700	E Property of the Control of the Con		TOTAL SERVICE	***************************************		
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)	ux .	2. New dry-to-d transfer both typ (constru	ry only, only, xecs, x<1	x<140 g <200 gal 40 gal/ya	gal/yr /yr	:		
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>dry-to-d transfer both typ</td><td>lry only, only, 2 oes, 140</td><td>00<x<1, <x<1,80< td=""><td>rce 2, 100 g 800 gal/yr 0 gal/yr 12/9/91)</td><td>yr</td><td></td><td></td></x<1,80<></x<1, </td></x<2,>		dry-to-d transfer both typ	lry only, only, 2 oes, 140	00 <x<1, <x<1,80< td=""><td>rce 2, 100 g 800 gal/yr 0 gal/yr 12/9/91)</td><td>yr</td><td></td><td></td></x<1,80<></x<1, 	rce 2, 100 g 800 gal/yr 0 gal/yr 12/9/91)	yr		
This is a correct facility classification		GY	ПП					
If no, please check the appropriate classi	fication:							
facility qualified for a g								
B. The total quantity of perchloroethyler facility was gallons.	ве (реге) р	urchased	within	the prec	eding 12	months by t	his dry	cleaning

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly scaled 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 scaled containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber UY UN WN/A beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part 11-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) UY UN 1. Equipped all machines with the appropriate yent controls? AVAL ALL YEL 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 DY DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated UY UN condenser on a weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after UY UN verifying that the coolant had been completely charged?

B.	Has the responsible official of an existing large or new large area source also:		=CFT]
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?	ÜY	LIN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΞY	И□	
	Is the temperature differential equal to or greater than 20° F?	ŬΥ	ΠИ	
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	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ÜΥ	ШΝ	
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring pere concentrations is at least 8 duet diameters downstream of any bend, contraction, or expansion; is at least 2 duet diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ΞY	ПΝ	
5.				
	condenser coils?	ÜY	ПN	□N/Λ
6.	Routed airflow to the carbon adsorber (if used) at all times?	ÜΥ	ПN	□N/Λ

PART V: RECORDKEEPING REQUIREMENTS		
Has the responsible official: (check appropriate boxes)	; (;	
1. Maintained receipts for pere purchased?	÷1.	CIY CIM
2. Maintained rolling monthly averages of perc consumption?	*.;	OY GW
3. Maintained leak detection inspection and repair reports for the following:	Ü	/
a. documentation of leaks repaired w/in 24 hrs? or;		בוץ טאל
b documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	•	מאט ענט
4. Maintained calibration data? for direct reading instruments only)		איאנט אנט צנט
5. Maintained exhaust duct monitoring data on perc concentrations?	£*	א/א אם צם
6. Maintained startup/shutdown/malfunction plan?		מצ טא אט
7. Maintained deviation reports?		בוא בזא
Problem corrected?	c ,	עט פאס
8. Maintained compliance plan, if applicable?		אואט אט אט

Name of the state	····	
PART VI: LEAK DETECTION AND REPAIRS	ţ	
1. Does the responsible official conduct a weekly leak detection and repair inspection?		' UN

2. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable pere odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) If using direct-reading instrumentation, is the equipment: a. Capable of detecting pere vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? c. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating Filter gaskets and seating Filter gaskets and seating Y UN Exhaust dampers Y Pumps Cattridge filter housings	
Physical detection (airflow felt through gaskets) Odor (noticeable pere odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) If using direct-reading instrumentation, is the equipment: a. Capable of detecting pere vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? c. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating EY IN Stills Filter gaskets and seating IY Diverter valves	·
Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? e. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating If IN Stills If IN Stills If IN Stills If IN Diverter valves Diverter valves	
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a. Capable of detecting pere vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? e. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating TY IN Muck cookers Pumps Ty IN Exhaust dampers Ty Pumps Diverter valves	
b. Calibrated against a standard gas prior to and after each use (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? c. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating TY IN Muck cookers Pumps Ty IN Exhaust dampers Y Pumps Diverter valves	Ν
(PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? e. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating Y IN Stills Y Filter gaskets and seating Y UN Exhaust dampers Y Pumps	
d. Kept in a clean and secure area when not in use? c. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating Filter gaskets and seating Y N Exhaust dampers Pumps Diverter valves	И
c. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating TY IN Stills Filter gaskets and seating Y IN Exhaust dampers LY Pumps Diverter valves	И
3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating TY IN Muck cookers DY Filter gaskets and seating Y IN Exhaust dampers Pumps Y IN Diverter valves	14
4. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating HY IN Muck cookers Y Door gaskets and seating HY IN Stills Filter gaskets and seating HY IN Exhaust dampers HY Pumps HY IN Diverter valves	N _
Hose connections, fittings, couplings, and valves Door gaskets and seating TY IN Muck cookers DY Filter gaskets and seating TY IN Exhaust dampers Pumps TY IN Diverter valves	N
Couplings, and valves Door gaskets and seating TY TN Stills TY Filter gaskets and seating TY TN Exhaust dampers TY Pumps TY TN Diverter valves	
Filter gaskets and seating	ΠN
Pumps Diverter valves DY	ПN
	ПИ
Solvent tanks and containers	ПN
borrow made and commission and a serious and commission and commis	ПN
Water separators CIN	

Kamesn Jushi	:
Name of Responsible Official	
Todd Fletcher	5/21/97
Inspector's Name (Please Print)	Date of Inspection
Hold Ottel	11/21/97
Inspector's Signature	Approximate Date of Next Inspection

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ACC

TVPE	OF	INSPECTION:
* * * * * * * * * * * * * * * * * * * *	OY.	ANDLECTION,

ANNUAL 11/20/98

COMPLAINTYDISCOVERY

 \Box

AIRS ID#: 0950354 DATE: 11 24/97 TIME IN: 11:15 TIME OUT: 11:45 FACILITY NAME: Lancaster Square Cleaner FACILITY LOCATION: 725. W. Lancaster Rd Orlando Fl 32809 RESPONSIBLE OFFICIAL: Romesh Justi PHONE: 407 857-7075 CONTACT NAME: PHONE:
responsible official: Romesh Jushi PHONE: 407 857-7075
responsible Official: Romesh Jushi PHONE: 407 857-7075
RESPONSIBLE OFFICIAL: Romesh Jushi PHONE: 407 857-7075
,
CONTACT NAME:PHONE:
PART I: NOTIFICATION
(check appropriate box) 1. New facility notified DARM 30 days prior to startup 2. Facility failed to notify DARM to use general permit
2. Facility failed to notify DARM to use general permit
2. Tuesticy failines to hearly 27 feet to take general portion
PART II: CLASSIFICATION
Facility indicated on notification form that it is: (check appropriate box) (Check appropriate box) Drop store/out of business/petroleum
A. 1. Existing small area source 2. New small area source □
1. Existing small area source
transfer only, $x < 200 \text{ gal/yr}$ transfer only, $x < 200 \text{ gal/yr}$
both types, $x < 140$ gal/yr both types, $x < 140$ gal/yr (constructed before 12/9/91) (constructed on or after 12/9/91)
(constructed before 1217171)
3. Existing large area source 4. New large area source
dry-to-dry only, $140 \le x \le 2,100$ gal/yr dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr
both types, $140 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr
(constructed before 12/9/91) (constructed on or after 12/9/91)
5. This is a correct facility classification $\square Y$ $\square N$ \square Can not determine
If no, please check the appropriate classification:
facility qualified for a general permit as number above facility exceeds above limits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	VHUNI	र्घ	COMPLAINTIDISCOVERY	
	RE-INSPECTION			
AIRS ID#: <u>0950354</u> D	· - •			510
FACILITY NAME: Lang	ι		^	
FACILITY LOCATION: 72			Kd.	
'	rlando, FL			
RESPONSIBLE OFFICIAL:	Romesh Josh	<u> </u>	PHONE: 407-857-707	5
CONTACT NAME:		1	PHONE:	
PART I: NOTIFICATION				
(check appropriate box)		R	ECEIVED	
1. New facility notified DARM 3			per a a (009	ü -
2. Facility failed to notify DARN	A to use general permit		DEC 2 8 1998	
DANCH OLAGGICACION		В	Sureau of Air Monitoring	
PART II: CLASSIFICATION		В	ureau of Air Monitoring & Mobile Sources	
PART II: CLASSIFICATION Facility indicated on notification (check appropriate box)		В		roleum
Facility indicated on notification	on form that it is: ce	New small ar y-to-dry only, x nsfer only, x < th types, x < 14	& Mobile Sources No notification form Drop store/out of business/per ea source < 140 gal/yr 200 gal/yr	
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	on form that it is: ce	New small ary-to-dry only, x sit types, x < 14 onstructed on one of the work of the types, 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 < 140 <	& Mobile Sources No notification form Drop store/out of business/per ea source < 140 gal/yr 200 gal/yr 40 gal/yr after 12/9/91)	
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 gal/yr both types, 140 \le x \le 1,800 gal/yr 140 \le x \le	on form that it is: ce	New small ary-to-dry only, xonsfer only, x < 14 onstructed on only. New large ary-to-dry only, the types, 140 < to the types,	& Mobile Sources ☐ No notification form ☐ Drop store/out of business/per ea source ☐ x < 140 gal/yr ☐ 200 gal/yr ☐ 40 gal/yr ☐ a fter 12/9/91) ea source ☐ 140 ≤ x ≤ 2,100 gal/yr ☐ x ≤ 1,800 gal/yr ☐ x ≤ 1,800 gal/yr	
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 gal/yr (constructed before 12/9/91) 5. This is a correct facility classing in a correct fa	on form that it is: ce	New small ary-to-dry only, ynsfer only, x < to-dry only, x < to-dry only, x < to-dry only, to-dr	& Mobile Sources □ No notification form □ Drop store/out of business/pet ea source □ (< 140 gal/yr 200 gal/yr 40 gal/yr after 12/9/91) ea source □ (40 ≤ x ≤ 2,100 gal/yr 0 ≤ x ≤ 1,800 gal/yr 0 x ≤ 1,800 gal/yr 0 after 12/9/91) □ Can not determine	

(check appropriate boxes) 1. Storing perchloroethylene in tightly scaled and impervious containers? DAY CIN CIN/A DY ON ONA 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 scaled containers for at MY UN UNIA least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber CIY UN UN/A 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) 1. Equipped all machines with the appropriate vent controls? CIY ON CIY UN UN/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 CIY CIN CIN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? DY UN 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? UY UN UN/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? DY DN

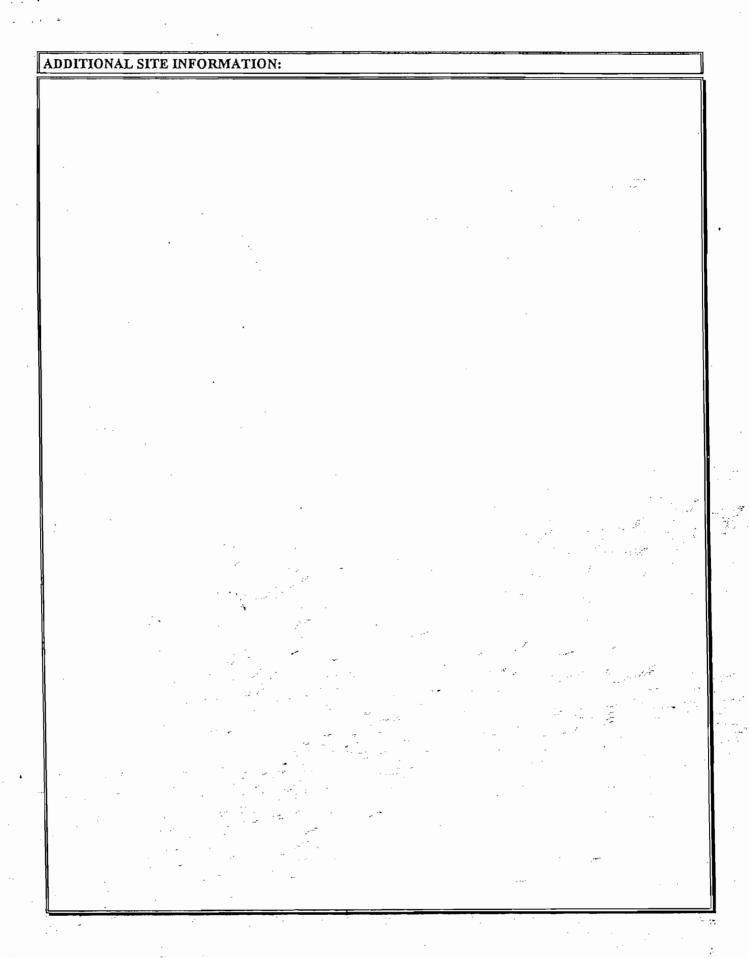
PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility:

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?	ĽΙΥ	UN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ĽΙΥ	ŪΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΩY	ПИ	
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	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	CΙΥ	ШN	ロット
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	DN	□n/ ∧
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ПΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ΩИ	□N/A

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: MY UN ONIA 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 and parts installed w/in 5 days of receipt? DY DN MYNA 4. Maintained calibration data? for applicable direct reading instruments) DY DN PN/A 5. Maintained exhaust duct monitoring data on perc concentrations? END CIN 6. Maintained startup/shutdown/malfunction plan? DY ON DANA 7. Maintained deviation reports? DY DN BYNA Problem corrected? DY DN PM/A 8. Maintained compliance plan, if applicable?

PART	VI: LEAK DETECTION AND R	REPAIRS			
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
insp	ection?			מט אם	
2. Has	the facility maintained a leak log?			DY ON	
3. Docs	s the responsible official check the	following areas for leaks:	?		
	Hose connections, fittings, couplings, and valves	CY ON ON/A	Muck cookers	EY ON ON/A	
	Door gaskets and scating	DY ON ON/A	Stills	DY ON ON/A	
	Filter gaskets and scating	MA ON CIN/V	Exhaust dampers	איאם אם אם	
	Pumps	MY ON ON/A	Diverter valves	DAY ON ON/A	
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	DY ON ON/A	
	Water separators	CA CIN CIN/V			
4. Whi	ch method of detection is used by the	he responsible official?			
	Visual examination (condensed so	olvent on exterior surface	es)	□	
	Physical detection (airflow felt the	rough gaskets)			
	Odor (noticeable perc odor)				
	Use of direct-reading instrumenta	tion (FID/PID/calorimet	ric tubes)	a	
	Halogen leak detector				
	If using direct-reading instr	nmentation, is the equip	oment:	DZN/A	
	a. Capable of detecting	pere vapor concentration	s in a range of 0-500 ppm?	OY ON	
	b. Calibrated against a s (PID/FID only)?	standard gas prior to and	after each use	חם אם	
	c. Inspected for leaks ar	d obvious signs of wear	on a weekly basis?	אם עם	
	d. Kept in a clean and s	ecure area when not in u	sc?	OY ON	
	e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	DY DN	
••					
				e e e e e e e e e e e e e e e e e e e	
			i jako sah		
II	ika Bundy / Assefa Ho	ilemarian	12/3/9	18	
	Inspector's Name (Please Pri		Date of Inspe	ection	
	Alka Bunsh	/	12/3/0	99	
	Inspector's Signature		Approximate Date of	Next Inspection	



TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COMP	LAINT/DISCOVERY RE-INSPECTION
TIME IN: 1450 TIME OUT: 1510	AIRS ID#: 0950354
TYPE OF FACILITY: Dry Cleaner	
FACILITY NAME: Lancaster Square Cleaner	DATE: 12/3/98
FACILITY LOCATION: 725 West Lancaster Rd	
Orlando FL 32809	·
RESPONSIBLE OFFICIAL: Romesh Joshi	PHONE NUMBER: 407-857-7075
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administrati	•
Based on the results of the compliance requirements evaluate discrepancies were noted:	d during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
·	
	DECELVES
	RECEIVED
	DEC 2 8 1998
	Bureau of Air Monitoring & Mobile Sources
)	
COMMENTS:	
Facility in compliance.	
The Annual Compliance Certification form has been properly certifie	d and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: $12/3/6$	99
(Plea	/ Assefa Hailemariam
INSPECTOR'S SIGNATURE: Ma Bundy	PHONE NUMBER: 836-9524
	of Revised 10/96

Z 333 613 024 US Postal Service Receipt for Certified Mail AIRS ID 0950354 RAMESH JOSHI RAMESH JOSHI 725 W LANCASTER RD ORLANDO FL 32809 \$ Postage Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address Date, & Addressee's A TOTAL Postage & Postmark or Date \$ TOTAL Postage & Fees

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3. Article Addressed to: RAMESH JOSHI RAMESH JOSHI 725 W LANCASTER RD ORLANDO FL 32809	AIRS ID.0950354	4b. Service Registere	Type ed © Certified Mail □ Insured ceipt for Merchandise □ COD /
5. Received By: (Print Name) 6. Signature) (Addressee or Ager X / MOS L	nt)	8. Addressed and fee is	e's Address (Onlý if requested paid)

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Fund: 20-2-035001 Obj.: 002273

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Postmark or Date

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s your RETURN	5. Received By: (Print Name) 6. Signature: (Addressee or Agent)	8. Addressee's Address (Only if requested and fee is paid)		f requested	Thank
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Obj.: 002273

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■ Write *Return Receipt Requested* on the mailpiece below ■ The Return Receipt will show to whom the article was de delivered.	he article number. vered and the date 2. Restricted Delivery Consult postmaster for fee.
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5. Received By: (Print Name) 6. Signature: (Addressee or Agent) X พายอิน	8. Addressee's Address (Only if requested and fee is paid)





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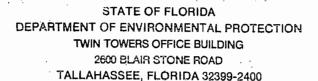
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Obj.: 002273



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LANCASTER SQ CLEANERS
RAMESH JOSHI
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ORLANDO FL 32809

Eureau of Air Monitoring and Mobile Sources.

FEB 10.00

LANC725 328093027 1199 26 02/16/00 FORWARD TIME EXP RTN TO SEND :LANCASTER CLEANERS 7313 WETHERSFIELD DR ORLANDO FL 32819-5043

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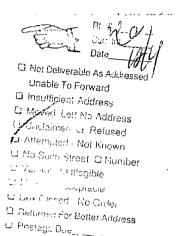
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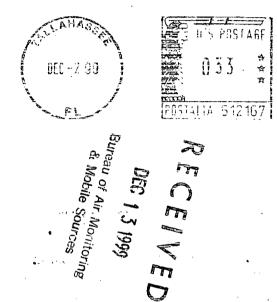
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DEPARTMENT OF ENVIRONMENTAL PROTECTION
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TALLAHASSEE, FLORIDA 32399-2400

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BAMMS/BCO JOEY ROBERTS 5510





AIRS ID # 0950354

LANCASTER SQ:CLEANERS

RAMESH JOSHI

725-W-LANCASTER RD

ORLANDO FL 32809

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