



Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

June 14, 2005

Mr. Thomas Scott, Jr.
Orlando Plating Company
601 North Orange Blossom Trail
Orlando, Florida 32802

Re: Facility No.: 0951287-001

Dear Mr. Scott, Jr:

The Department has received the Title V General Permit Notification Form for the chromium electroplating and anodizing facility that you submitted on April 15, 2005.

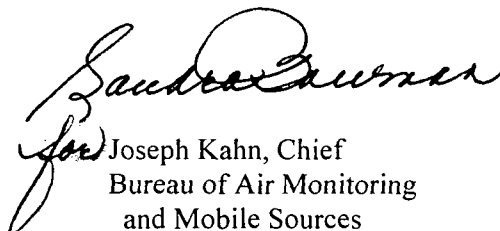
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

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

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,


Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Ms. Marie Driscoll, Orange County

"More Protection, Less Process"

Printed on recycled paper.

EMISSION FEE DATES
NO ACTIVITY FOR FACILITY. ✓.....
SOC REPORTS
COMP. STATUS - SNC MNC IN

7BP07621

CHROMIUM ELECTROPLATING AND ANODIZING
AIR GENERAL PERMIT NOTIFICATION FORM

OC
MD

Part III. Notification of Intent to Use General permit

RECEIVED
APR 15 2005
Bureau of Air, Water,
& Noise Resources

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): Orlando Plating Company
2. Site Name (For example, plant name or number):
3. Hazardous Waste Generator Identification Number: FLD981027667
4. Facility Location: Street Address: 601 N. Orange Blossom Trail City: Orlando County: Orange Zip Code: 32802
5. Facility Identification Number (DEP Use ONLY - do not fill in): 0951287-001

Responsible Official

6. Name and Title of Responsible Official: Name: Thomas Scott, Jr. Title: Owner
7. Responsible Official Mailing Address: Organization/Firm: Street Address: P.O. Box 2609 City: Orlando County: Orange Zip Code: 32802
8. Responsible Official Telephone Number: Telephone: (407) 843 - 1140 Fax: (407) 843 - 0108

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): Curtis Clark, EHS Manager
10. Facility Contact Address: Street Address: 1372 Rocky Road City: Kissimmee County: Osceola Zip Code: 34744
11. Facility Contact Telephone Number: Telephone: (407) 843 - 1140 Fax: (407) 843 - 0108

Facility Information

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

HARD CHROMIUM PLATING TANKS

DATE PURCHASED	UNIT CLASS (circle one)	DATE CNTRL DEVICE INSTALLED	CONTROL DEVICE (see key)	APPLICABLE STANDARD (see key)
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			

Key for Control Device Type

PBS = packed-bed scrubber
 CMP = composite mesh pad
 PBS/CMP = packed-bed scrubber and composite mesh pad
 FS = fume suppressant only
 FS/WA = fume suppressant with a wetting agent
 FM = fiber-bed mist eliminator
 WA = wetting agent

Applicable Standard Key

a = 0.03 mg/dscm
 b = 0.015 mg/dscm
 c = alternative standard for multiple tanks under common control

Is the facility's cumulative potential rectifier capacity greater than 60 million ampere-hours per year?

Yes No

1.b. Provide the information below for each decorative electroplating or anodizing machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

DECORATIVE AND ANODIZING TANKS

DATE PURCHASED	UNIT CLASS (circle one)	DATE CNTRL DEVICE INSTALLED	CONTROL DEVICE (see key)	APPLICABLE STANDARD (see key)
	New/Existing	03/30/05	FS/WA	Y
	New/Existing	03/30/05	FS/WA	
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			

Key for Control Device Type

PBS = packed-bed scrubber
CMP = composite mesh pad
PBS/CMP = packed-bed scrubber and composite mesh pad
FS = fume suppressant only
FS/WA = fume suppressant with a wetting agent
FM = fiber-bed mist eliminator
WA = wetting agent

Applicable Standard Key

x = 0.01 mg/dscm
y = 45 dynes/cm
z = records of bath components
(trivalent Cr tanks only)
c = alternative standard for multiple tanks
under common control

2. Indicate the date by which the facility must meet the requirements of paragraph (5) of Part II:

(Note: if your facility contains both hard and decorative plating or anodizing units, you must check each applicable date)

January 25, 1996 January 25, 1997

3. Indicate how the facility will fulfill the compliance demonstration:

The facility will conduct an initial performance test

The facility will use a wetting agent to reduce emissions and will meet the existing surface tension limit in No. 1 above.

4. 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) Equipment maintenance | <input type="checkbox"/> | (b) Equipment inspection and repair | <input checked="" type="checkbox"/> |
| (c) Equipment malfunctions | <input type="checkbox"/> | (d) Operation and maintenance checklist | <input type="checkbox"/> |
| (e) Instrument calibration
(used during initial performance test) | <input type="checkbox"/> | (f) Start-up, shutdown, malfunction plan | <input type="checkbox"/> |
| (g) Performance test results | <input checked="" type="checkbox"/> | (h) Equipment monitoring | <input type="checkbox"/> |
| (i) Excess emissions | <input type="checkbox"/> | (j) Operating periods | <input checked="" type="checkbox"/> |
| (k) Rectifier capacity | <input checked="" type="checkbox"/> | (l) Fume suppressant records | <input checked="" type="checkbox"/> |
| (m) Purchase records of wetting agent components | <input checked="" type="checkbox"/> | | |

5. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are:

No DEP air permits currently exist for the operation of the facility indicated in this notification form.

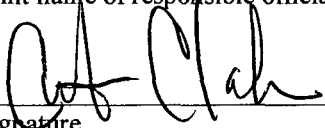
Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

Curtis Clark, EHS Manager

Print name of responsible official



Signature

4/13/05

Date

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

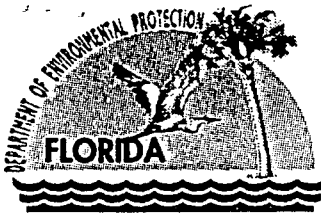
I will promptly notify the Department of any changes to the information contained in this notification.

THOMAS W. SCOTT, JR.
Print name of responsible official

TH Scott
Signature

4-29-05
Date

RECEIVED
MAY 06 2005
DEPARTMENT OF AIR MONITORING
& MOBILE SOURCES



Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

April 15, 2005

Mr. Curtis Clark
CRC Consulting, Inc. # 0951287-002 (CR)
1372 Rocky Road
Kissimmee, Florida 34744

Re: Orlando Plating Company
I.D. No.: FLD981027667

Dear Mr. Clark:

The Bureau of Air Monitoring and Mobile Sources recently received your Chromium Electroplating and Anodizing Facility Form and check (#027471) in the amount of \$50.

We appreciate your submittal. However, your check is being returned to you since it is not due at this time. Fees are due and payable between January 15 and March 1 in the year following each year for which the facility is in operation and subject to the requirements of the general permit. The department will send you an invoice in time for the next payment cycle.

If you have any questions, please call me at 850/921-7744.

Sincerely,



ORLANDO PLATING COMPANY

P.O. BOX 2609 • ORLANDO, FLORIDA 32802

PHONE (407) 843-1140

Fifty Dollars and no/100



WACHOVIA

WACHOVIA
Central Region Group
Orlando, Florida 32802

63-751
631

027471

DATE
04/13/05

AMOUNT
\$50.00

PAY
TO THE
ORDER
OF:

Dept. of Environmental Protection
Division of Air Resources Management

General Air Permit



CRC CONSULTING, INC.
1372 Rocky Road – Kissimmee, Florida 34744
Phone: 321-239-2068 Fax: 407-846-8757

RECEIVED
APR 22 2005
Bureau of Air Monitoring
& Mobile Sources

To: General Permits Section
From: Curtis Clark
Date: April 13, 2005
Subject: Initial Notification for Techni-Chrome

Good morning! Enclosed is a General Air Permit, as well as a filling check of \$50.00.

If you have any questions, please feel free to call.

Thank you,

Curtis Clark
President

CC/jc

enclosure



Department of Environmental Protection

Jeb Bush
Governor

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

Colleen M. Castille
Secretary

April 15, 2005

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1372 Rocky Road
Kissimmee, Florida 34744

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I.D. No.: FLD981027667

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If you have any questions, please call me at 850/921-7744.

Sincerely,

Bruce Thomas, P.E.
Mobile Source Control Section



ORLANDO PLATING COMPANY

P.O. BOX 2609 • ORLANDO, FLORIDA 32802

PHONE (407) 843-1140

Fifty Dollars and no/100



WACHOVIA
Central Region Group
Orlando, Florida 32802

63-751
631

027471

DATE

04/13/05

AMOUNT

\$50.00

PAY
TO THE
ORDER
OF:

Dept. of Environmental Protection
Division of Air Resources Management

General Air Permit



CRC CONSULTING, INC.
1372 Rocky Road – Kissimmee, Florida 34744
Phone: 321-239-2068 Fax: 407-846-8757

RECEIVED
APR 15 2005
Bureau of Air, Water,
& Mobile Sources

To: General Permits Section
From: Curtis Clark
Date: April 13, 2005
Subject: Initial Notification for Orlando Plating Company

Good morning! Enclosed is a General Air Permit, as well as a filling check of \$50.00.

If you have any questions, please feel free to call.

Thank you,

Curtis Clark
President

CC/jc

enclosure

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: \$50.00

Refund 2/16

Do **NOT** Remove Label

951287 10
ORLANDO PLATING COMPANY
601 N Orange Blossom Trail
ORLANDO, FL 32802

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

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

Printed on recycled paper.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

458984 FEB162006

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# 951287 1st
ORLANDO PLATING COMPANY
601 N Orange Blossom Trail
ORLANDO, FL 32802

Bureau of Air Monitoring
& Mobile Sources

FEB 20 2006

RECEIVED

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

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

Printed on recycled paper.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

469475 FEB 20 2007

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID 0951287
ORLANDO PLATING COMPANY
601 N Orange Blossom Trail
ORLANDO, FLORIDA 32802

URCEN U1 A
Mobile Storage

FEB 22 2007

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

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

Printed on recycled paper.

ORLANDO PLATING COMPANY ORLANDO, FLORIDA 32802

029246

Title V Air General Permits - AIRS ID 0951287 - \$50.00

Orlando Plating Co.
P. O. Box 2609
Orlando, FL 32802-2609



32802-2609

