## SURFACE COATING OPERATIONS AIR GENERAL PERMIT REGISTRATION FORM

10/12/2009

Part II. Notification to Permitting Office

& Mobile Sources

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

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

Registration Type		0431367	
Check one:			
INITIAL REGISTRATION -  Construct and operate a pro Operate an existing facility air operation permit to an ai	posed new facility. not currently using an air general	permit (e.g., a facility proposing	to go from an
Continue operating the facil Continue operating the facil Make an equipment change	ity after expiration of the current ity after a change of ownership. requiring re-registration pursuan	ral permit) - Notification of intent term of air general permit use. t to Rule 62-210.310(2)(e), F.A.C ler Rule 62-210.310(2)(d), F.A.C.	., or any
Surrender of Existing Air Opera	tion Permit(s) - For Initial Reg	istrations Only	·····
If the facility currently holds one of or operator upon the effective date operation permits being surrendered	of this air general permit. In suc	ch case, check the first box, and in	ndicate the
All existing air operation pe general permit; specifically		surrendered upon the effective dat	e of this air
No air operation permits cur	rently exist for this facility.		
General Facility Information			
Facility Owner/Company Name (Noperates, controls, or supervises the		ndividual owner who or which ov	vns, leases,
Peachy Production, LLC.			1,-71
Site Name (Name, if any, of the far owned, a registration form must be MAACO Collision Repair ar	completed for each.)	lis Plant, etc. If more than one fa	cility is 100 HOV
Facility Location (Provide the physical Provide the Physical		necessarily the mailing address.)	
Street Address:11219 Orange B City:Orlando	lossom Trail County:Orange	Zip Code:32837	ARGU MA
L			

DEP Form No. 62-210.920(1)(c) Effective: January 10, 2007

Facility Start-Up Date (Estimated start-up date of proposed **new** facility.)(N/A for existing facility) November, 2009

ZOUG MON -2 WHID: 05

air general permit.) Print Name and Title: Caroline Peach, Owner  Owner/Authorized Representative Mailing Address Organization/Firm: Peachy Production, LLC. dba MAACO Collision Repair and Auto Painting Street Address: 3444 Hammock Grove Road City: Groveland County: Lake Zip Code: 34736  Owner/Authorized Representative Telephone Numbers Telephone: (407) 466 6634 Caroline Fax: Cell phone (optional): (407) 832 0590 Matt  Facility Contact (If different from Owner/Authorized Representative) Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility) Print Name and Title:  Facility Contact Mailing Address Organization/Firm: Street Address: City: County: Zip Code:  Facility Contact Telephone Numbers Telephone: Fax: Cell phone (optional):  Owner/Authorized Representative Statement  This statement must be signed and dated by the person named above as owner or authorized representative  I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form as eas to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.  I will promptly notify the Department of any changes to the information contained in this registration form.  Signature		by signing this form below, o	certifies that the facility is eligible to use this
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Street Address:3444 Hammock Grove Road City:Groveland County:Lake Zip Code:34736  Owner/Authorized Representative Telephone Numbers Telephone:(407) 466 6634 Caroline Fax: Cell phone (optional):(407) 832 0590 Matt  Facility Contact (If different from Owner/Authorized Representative)  Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.) Print Name and Title: Facility Contact Mailing Address Organization/Firm: Street Address: City: County: Zip Code:  Facility Contact Telephone Numbers Telephone: Fax: Cell phone (optional):  Owner/Authorized Representative Statement  This statement must be signed and dated by the person named above as owner or authorized representative  1, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form so lightly for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.  I will promptly notify the Department of any changes to the information contained in this registration form.	Owner/Authorized Representative Ma	iling Address	
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form.	the State of Florida and Futes of the	ne Department of Environmen	uai i rolection and revisions thereoj.
		nent of any changes to the info	ormation contained in this registration
	Rieach		11/3/2009
	Signature		

DEP Form No. 62-210.920(1)(c) Effective: January 10, 2007

Owner/Authorized Representative

### Material Usage Rates

If this is an initial registration for a surface coating operation, provide an estimate of the average quantity of volatile organic compounds in all coatings (solvents and thinners) expected to be used on a daily basis.

38 lbs/day

If this is a **re-registration** for an existing surface coating operation, provide the highest monthly average of the daily quantity of volatile organic compounds in all coatings (solvents and thinners) used in the last five years. Indicate the month and year during which this usage occurred.

## **Description of Facility**

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

Peachy Production, LLC. dba MAACO Collision Repair and Auto Painting, is an auto body shop used for the refinishing and resurfacing of automobiles. The shop will also be surface coating trash cans. The surface coating of trash cans will use the identical products and methods as autobody refinishing. This facility is installing two Garmat Tier1 paint spray booths with integrated drying burners. The paint spray booth is a pressurized semi-downdraft booth with glass fiber filtration media (99.5% efficiency) for particulate control. The booth burners each contain a 997,000 Btu natural gas fired burner.

The emissions from the equipment will consist of VOC's and a small amount of particulate after filtration. Criteria pollutants from the combustion of natural gas are also emitted. The applicator is a high efficiency gravity feed gun that provides equal or better efficiency of transfer than HVLP. A Hercules GW/R-T totally enclosed gun washer will also be used for cleanup.

This equipment meets the criteria for the MACT standard 40CFR Part63 subpartHHHHHHH

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DEP Form No. 62-210.920(1)(c) Effective: January 10, 2007

# \* ADDENDUM TO ORIGINAL BELISTEATION FORM. PELEIPT DATED 11/05/09.

N	1a	terial	Usage	Rates

If this is an initial registration for a surface coating operation, provide an estimate of the average quantity of volatile organic compounds in all coatings (solvents and thinners) expected to be used on a daily basis.

38 lbs/day

If this is a **re-registration** for an existing surface coating operation, provide the highest monthly average of the daily quantity of volatile organic compounds in all coatings (solvents and thinners) used in the last five years. Indicate the month and year during which this usage occurred.

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The emissions from the equipment will consist of VOC's and a small amount of particulate after filtration. Criteria pollutants from the combustion of natural gas are also emitted. The applicator is a high efficiency gravity feed gun that provides equal or better efficiency of transfer than HVLP. This equipment meets the criteria for the MACT standard 40CFR Part63 subpartHHHHHHH

DEP Form No. 62-210.920(1)(c) Effective: January 10, 2007

Material Usage Rates If this is an initial registration for a surface coating operation, provide an estimate of the average quantity of volatile organic compounds in all coatings (solvents and thinners) expected to be used on a daily basis. 38 lbs/day If this is a re-registration for an existing surface coating operation, provide the highest monthly average of the daily quantity of volatile organic compounds in all coatings (solvents and thinners) used in the last five years. Indicate the month and year during which this usage occurred. Description of Facility Below, or as an attachment to this form, provide a description of the surface coating operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used. Peachy Production, LLC. dba MAACO Collision Repair and Auto Painting, is an auto body shop used for the refinishing and resurfacing of automobiles. The shop will also be surface coating trash cans. The surface coating of trash cans will use the identical products and methods as autobody refinishing. This facility has two existing CMC Manurfacturing paint booths. The booth air makeup units each contain a 999,000 BTU/hr natural gas fired burner (2 total). The intake and exhaust HP for each booth is 10 HP, respectively. The paint spray booth filtration media has a minimum efficiency of 98%. The emissions from the equipment will consist of VOC's and a small amount of particulate after filtration. Criteria pollutants from the combustion of natural gas are also emitted. The applicator is a high efficiency gravity feed gun that provides equal or better efficiency of transfer than HVLP. This equipment meets the criteria for the MACT standard 40CFR Part63 subpartHHHHHHH

## Karen McCoach

From:

"Karen McCoach" < kmccoach@tsicompliance.com>

To:

<Dickson.Dibble@dep.state.fl.us>

Cc:

"Nancy Marconi" <nmarconi@maaco.com>; <carolinepeach@extremecleanusa.com>;

<mattpeach@extremecleanusa.com>

Sent:

Wednesday, December 02, 2009 11:29 AM

Attach:

revisedp8.pdf

Subject:

revised page 8 of the Air General Permit Registration Form

Hello Dick,

As we discussed yesterday, I am sending you the revised page 8 of the Air General Permit Registration Form for Peachy Production, LLC dba MAACO Collision Repair and Auto Painting located at 11219 Orange Blossom Trail in Orlando. As we discussed, the facility is opening a new MAACO at an existing body shop that does not have a current registration. The paint spray booths are existing. The two booths have an air makeup unit burning natural gas rated at 999,000 BTU/hr, each. The intake and exhaust HP for each booth is 10 HP, respectively.

I will also send you this revised page using Fed Ex for delivery tomorrow. Please let me know if you have any further questions or require additional information. Thank you. Karen

Excellence in Air Testing and Technical Services.



Karen McCoach TSI Compliance Services, Inc.

200 Bethlehem Drive, Suite 205 Morgantown, PA 19543 **Phone**: 610-286-0305

Fax: 610-286-0306

Website: www.TSIcompliance.com

## TSI COMPLIANCE SERVICES, INC.

200 Bethlehem Drive, Morgantown, PA 19543 610/286-0305 FAX 610/286-0306

## LETTER OF TRANSMITTAL



RECEIVEL

Date:

12/2/09

Job No.: 09-027.013

Gureau of Air Monitorin.

	,	& Moi	oile Sources				
То:	FDEP - DARM			Attention:	Dick Dibble		
	Air General Permit Program		F	RE:	Revised Page 8		
	111 South Magnolia Drive, Suite 9			Air General	Permi	it Registrat	ion Form
	Tallahassee, I	FL 32301		· .			·
WE AR	E SENDING YOU	ATTACHED	UNDER	SEPARATE C	OVER V	IA	THE FOLLOWING ITEMS:
	SHOP DRAWINGS	PRINTS	СОРУС	OF LETTER		SAMPLES	SPECIFICATIONS
	CHANGE ORDER	PLANS	REPOR'	ΓS		Revised Pag	e 8 of Air General Permit Registration
COPI	ES DATE	NUMBER				DESCRIPTION	
_1		P. 8	Revised p. 8 of the	Air General I	Permit F	Registration for	or Peachy Production, LLC
11				12/2/09 with copy of submittal attached in pdf file			
				· · · · · · · · · · · · · · · · · · ·			
			<del></del>				
REASO	N FOR TRANSMITTA	AL CHECKED BELOW:					
	FOR APPROVAL APPROVED AS SUBMITTED RESUBMIT COPIES FOR APPROVAL					COPIES FOR APPROVAL	
	FOR YOUR USE RETURNED FOR CORR			ONS	SUBMI	Т	COPIES FOR DISTRIBUTION
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APPROVED AS NOTED							
FOR BIDS DUE PRINTS RETURNED AFTER LOAN TO US							
REMARKS: Please let me know if you have any further questions. Thank you. Karen							
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				_		<u>/</u>	
COPY T	O: Nancy Marconi			SIGNED	) ZO	ven Th	Cloach

PLEASE NOTIFY US AT ONCE IF ENCLOSURES ARE NOT AS NOTED ABOVE.

From: Origin ID: RDGA (610) 286-0305

Karen McCoach

TSI Compliance Services, Inc. 200 Bethlehem Drive

Morgantown, PA 19543

09300307312023

SHIP TO: (850) 921-9586

**BILL SENDER** 

**Dick Dibble** FDEP-DARM 111 S MAGNOLIA DR STE 9 **AIR GENERAL PERMIT PROGRAM** TALLAHASSEE, FL 32301

Ship Date: 02DEC09 ActWat 0.5 LB CAD: 7570820/INET9090 Account#: S

Delivery Address Bar Code



MAACO 09-027.013

Invoice # PO#

Dept#



0201

7981 8469 4817

THU - 03DEC

Δ2 STANDARD OVERNIGHT

**RES** 

32301 FL-US



After printing this label:

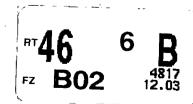
1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.

2. Fold the printed page along the horizontal line.

3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com.FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic valueof the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable instruments and other items listed in our ServiceGuide. Written claims must be filed within strict time limits, see current FedEx Service Guide.



## Dibble, Dickson

From:

Karen McCoach [kmccoach@tsicompliance.com]

Sent:

Wednesday, December 02, 2009 11:29 AM

To:

Dibble, Dickson

Cc:

Nancy Marconi; carolinepeach@extremecleanusa.com; mattpeach@extremecleanusa.com

Subject:

revised page 8 of the Air General Permit Registration Form

Attachments:

revisedp8.pdf

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I will also send you this revised page using Fed Ex for delivery tomorrow. Please let me know if you have any further questions or require additional information. Thank you. Karen

Excellence in Air Testing and Technical Services.



Karen McCoach TSI Compliance Services, Inc.

200 Bethlehem Drive, Suite 205 Morgantown, PA 19543 Phone: 610-286-0305 Fax: 610-286-0306

Website: www.TSIcompliance.com

# Initial Notification 40CFR63HHHHHH

2009 NOV -5 AM IO: 02

FLORIDA DEPARTMENT OF

## **INITIAL NOTIFICATION** Paint Stripping and Miscellaneous Surface Coating Area Source Rule Subpart HHHHHH 40 CFR 63.11169 – 63.11180

1.	Company Name (if applicab	le) <u>Peachy Proc</u>	luction, LLC. dba N	IAACO Collision Re	epair and Auto	Painting	_
2.	Information about the own	er and operator	••				
	a. Owner's Name and Title	•		ners	•		
	Owner's Street Address	3444 Hammoc		Groveland	FL	34736	
	Owner's officer / touress	Street	it Olove Itoda	City		State	Zip
	Owner's telephone numb		2 0590 cellular	Oity		State	Δip
	Owner's email (if available	e) <u>mattpead</u>	ch@extremecleanu	sa.com			
	Is the Operator the same personal of the Operator information is additional operators):			s 🛭 No 🗌 ng (Attach a list wit	h the same inf	formation for	-
	<ul> <li>b. Operator's Name and Title Operator's Street Address</li> </ul>						
		Street		City		State	Zip
	Operator's telephone num Operator's email (if availa						
	Is there any other certifying of If Certifying Official informati c. Certifying Official's Name Certifying Official's Stree	on is different ple and Title It Address	ease provide the fo	llowing:	· <b>⊠</b>		
			Street	City		State	Zip
	Certifying Official's telepl Certifying Official's email	none number _ l (if available) _					
3.	The street address (physical 11219 South Orange Blos			e ando	FL 328	37	
	Street		City		State	Zip	
	Are the compliance record If the location of compliant						
	Street		City		State	Zip	
	Is the source a motor vehicustomer's location, rather Yes \(\sumset \) No \(\sumset \)			ating operation tha	at repairs vehic	cles at the	
4.	Identification of Standar  ☑ Yes, I am subject to 40	OCFR Part 63 S	Subpart HHHHHHH, I				
	Pollutants: Paint Strip	ping and Misceli	laneous Surface Co	pating Operations a	at Area Source		
					=	NOV NOV	
					Rich	<b>~</b>	)
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					<del></del>		A 2

5.	A brief description of the type of operation:  For Surface Coating Operations  a. I am a:
6.	Other (please describe)  Methylene Chloride (MeCl) Used by Paint Stripping Operations
	Do you plan to use more than 1 ton of MeCl annually? Yes \( \text{No} \text{ No} \text{ \( \text{No} \)
7.	Compliance Status, please check one:  For paint stripping operations, the relevant requirements that you must evaluate in making this determination are specified in 40 CFR 63.11173(a) through (d) of this subpart. For surface coating operations, the relevant requirements are specified in 40 CFR 63.11173(e) through (g) of this subpart.  I am already in compliance with each of the relevant requirements  I will be in compliance with each of the relevant requirements by the compliance date  New Source (after Jan 9, 2008) Compliance date is date of startup  New Source (after September 17, 2007 but before January 9, 2008) Compliance date is January 9, 2008  Existing source (before September 17, 2007) Compliance date is January 10, 2011
8.	Certification of compliance status  You must check one:  Note: Initial startup is the first time equipment is brought online in a paint stripping or surface coating operation, and paint stripping or surface coating is first performed.  ☑ I am a new source (Initial startup was on or after January 9, 2008) Date Projected 11-2009  ☐ I am a new source (Initial startup was after September 17, 2007 but before January 9, 2008) Date  If your source is a new source, a responsible official, whose information is provided above, must certify by signing below that the source is in compliance with each of the relevant requirements of this subpart.
	☐ I am an existing source (Initial startup was before September 17, 2007) Date If your source is an existing source, a responsible official, whose information is provided above, may certify below that the source is already in compliance with each of the relevant requirements of this subpart or certification may be done by March 11, 2011 in the Notification of Compliance Status as specified in 40 CFR Section 63.11175(b)
	the truth, accuracy, and completeness of this notification. The source has complied with all the relevant rds of this subpart. This initial notification also serves as the notification of compliance status
Signatu	ire of responsible official: owner/ operator (circle one)
	Please Print Name Also Caroline Peach Secounting 02
	कि 🗸 जि

### Submit Initial Notification as follows:

- a. To the appropriate Regional Office of the EPA (see addresses below); and
- b. If the State has been delegated the authority for this regulation under section 112(I) of the Clean Air Act, submit the notification to the appropriate State agency found at the following link: <a href="http://www.4cleanair.org/contactUsaLevel.asp">http://www.4cleanair.org/contactUsaLevel.asp</a>

## Addresses of EPA Regional Offices:

EPA Region I (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont), Director, Air, Pesticides and Toxics Division, One Congress Street, Suite 1100 (SEA), Boston, MA 02114, Attn: Air Compliance Clerk.

EPA Region II (New Jersey, New York, Puerto Rico, Virgin Islands), Director, Air and Waste Management Division, 290 Broadway, New York, NY 10007-1866.

EPA Region III (Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia), Director, Air Protection Division, 1650 Arch Street, Philadelphia, PA 19103.

EPA Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee), Director, Air, Pesticides and Toxics Management Division, Atlanta Federal Center, 61 Forsyth Street, Atlanta, GA 30303–3104.

EPA Region V (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin), Director, Air and Radiation Division, 77 West Jackson Blvd., Chicago, IL 60604–3507.

EPA Region VI (Arkansas, Louisiana, New Mexico, Oklahoma, Texas), Director, Air, Pesticides and Toxics, 1445 Ross Avenue, Dallas, TX 75202–2733.

EPA Region VII (Iowa, Kansas, Missouri, Nebraska), Director, Air, RCRA, and Toxics Division, U.S. Environmental Protection Agency, 901 N. 5th Street, Kansas City, KS 66101.

EPA Region VIII (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming), Director, Air and Toxics Technical Enforcement Program, Office of Enforcement, Compliance and Environmental Justice, 1595 Wynkoop Street, Denver, CO 80202-1129.

EPA Region IX (Arizona, California, Hawaii, Nevada, American Samoa, Guam), Director, Air and Toxics Division, 75 Hawthorne Street, San Francisco, CA 94105.

EPA Region X (Alaska, Idaho, Oregon, Washington), Director, Office of Air, Waste and Toxics, 1200 6<sup>th</sup> Ave., Suite 900, AWT-107, Seattle, WA 98101.