



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

August 6, 2001

Mr. Jayanti Bulsara
Ivy French Cleaners
7885 North Federal Highway
Boca Raton, Florida 33487

Re: Facility No.: 0990384-002

Dear Mr. Bulsara:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 27, 2001.


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,


Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Al Grasso, Palm Beach County

"More Protection, Less Process"

Printed on recycled paper.



Department of Environmental Protection

Jeb Bush
Governor

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

David B. Struhs
Secretary

June 29, 2001

Mr. Jayanti Bulsara
Ivy French Cleaners
7885 North Federal Highway
Boca Raton, Florida 33487

Dear Mr. Bulsara:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on June 27.

In reviewing your submittal, it was noted that Ivy French Cleaners elected to surrender its existing Title V air general permit (AIRS ID 0990384). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 840/921-9583.

Sincerely,

Sandra Bowman
Bureau of Air Monitoring
and Mobile Sources

SB/
Enclosure
cc: Mr. Al Grasso, Palm Beach County

"More Protection, Less Process"

Fees Paid
SOC 1
Compliance IN

Below facilities are listed as Active in GPCI even though they are Inactive

- 1.) Bargain D/C- AIRS #453- Closed- Verified by inspection
- 2.) Garmen Care- AIRS #628- Closed- Verified by inspection
- 3.) Ivy French Cleaners- AIRS #384- Closed- Verified by phone call ~~---~~ #0990384
- 4.) Oceanside Cleaners- AIRS #363- Closed- Verified by inspection
- 5.) Special Touch Cleaners- AIRS #584- Drop Store- Verified by inspection

0990384-002

p16

(e) Required. Should be marked

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Bureau of Air, Noise & Water Services
RECEIVED
JUN 27 2001

Part III. Notification of Intent to Use General Permit

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

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): JAYANTI BULSARA / FULLMOON CLEANERS, INC.
2. Site Name (For example, plant name or number): Ivy French cleaners,
3. Hazardous Waste Generator Identification Number: FLD 053370177
4. Facility Location: Street Address: 7885. N. Federal Hwy. City: Boca Raton County: Palm Beach Zip Code: 33487
5. Facility Identification Number (DEP Use ONLY - do not fill in): 0990384-002

Responsible Official

6. Name and Title of Responsible Official: Name: JAYANTI BULSARA Title: PRESIDENT.
7. Responsible Official Mailing Address: Organization/Firm: SAME AS ABOVE Street Address: City: BOCA RATON County: PALM BEACH Zip Code: 33487
8. Responsible Official Telephone Number: Telephone: (561) 997-9751 Fax: (561) 394-5125.

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): SAME AS ABOVE
10. Facility Contact Address: Street Address: City: County: Zip Code:
11. Facility Contact Telephone Number: Telephone: () - a Fax: () -

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site? [1]

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1996	Existing <input checked="" type="radio"/> New <input type="radio"/>	<input checked="" type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	SAME
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site? []

How many dryers/reclaimers do you have on-site? []

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

[180] gallons (You must fill this in)

(b) If less than 12 months, how many? [] months

Check why it is less than 12 months: New owner: [] Did not keep records: []

New store: [] New machine []

Unopened store [] (date of expected opening _____)

3. What is the facility's source classification based on the definitions found in section (3) of Part II? Indicate with an "X". Select one classification only.)

Small Area Source

Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
Transfer only on-site (used less than 200 gallons of perc per year)
Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
Transfer only on-site (used 200 - 1,800 gallons of perc per year)
Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)

Existing machines at small area source
(NONE REQUIRED)

New machines at small area source
Refrigerated condenser

Existing machines at large area source
Carbon adsorber
Refrigerated condenser

New machines at large area source
Refrigerated condenser

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site? /

For each boiler, indicate its horsepower (HP) rating: 110 140

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. 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
AIR ID # 0990038400/AC
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

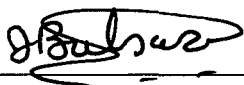
Responsible Official Certification

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.

JUYANTI BULSANA

Print name of responsible official



Signature

6/22/01

Date

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
JUN 27 2001
Bureau of Air Monitoring
& Mobile Sources

Part III. Notification of Intent to Use General Permit

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

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	JAYANTI BULSARA / FULLMOON CLEANERS, INC.
2. Site Name (For example, plant name or number):	Ivy French cleaners,
3. Hazardous Waste Generator Identification Number:	FLD 053370177
4. Facility Location: Street Address: City: Boca Raton County: FL Zip Code: 33487.	7885. N. Federal Hwy.
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0990384-002

Responsible Official

6. Name and Title of Responsible Official: Name: JAYANTI BULSARA Title: PRESIDENT.	
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: County: Zip Code:	SAME AS ABOVE.
8. Responsible Official Telephone Number: Telephone: (561) 997-9751 Fax: (561) 394-5125.	

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RECEIVED
JUL 16 2001
Bureau of Air Monitoring
& Mobile Sources

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_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

N/A

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New store: New machine

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(Indicate with an "X".)

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(NONE REQUIRED)

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Refrigerated condenser

Existing machines at large area source
Carbon adsorber
Refrigerated condenser

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Refrigerated condenser

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What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

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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

AIRS ID # 0990-384-001AC

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

CORRECT

JB.

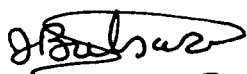
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I will promptly notify the Department of any changes to the information contained in this notification.

JYANTI BULSANA

Print name of responsible official



Signature

6/22/01

Date

7/12/01

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

743452 DEC172004

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# 990384 10
IVY FRENCH CLEANERS
7885 N Federal Hwy
BOCA RATON, FL 33487

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

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

990384 10
IVY FRENCH CLEANERS
7885 N Federal Hwy
BOCA RATON, FL 33487

450057 FEB 13 2006
RECEIVED
FEB 15 2006
Bureau of Air, Inland
& Marine Services
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

436575 FEB192004

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

ID# 990384
JAYANTI BULSARA
IVY FRENCH CLEANERS
7885 N FEDERAL HWY
BOCA RATON, FL 33487

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273

FULL MOON CLEANERS, INC.
D/B/A IVY FRENCH CLEANERS

6360

DEPT. OF ENVIRONMENTAL PROTECTION

12-06-02

06360

12/02.....50.00



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: \$50.00

420560 DEC 12 2002

Do **NOT** Remove Label

AIRS ID#0990384
IVY FRENCH CLEANERS
JAYANTI BULSARA
7885 N FEDERAL HWY
BOCA RATON FL
33487

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: 12812
Fund: 20-2-035001
Obj.: 002273

DEC 10 2002
Bur. of Air
& Mobile
Services
Monitoring

FULL MOON CLEANERS, INC.

D/B/A IVY FRENCH CLEANERS
DEPT. OF ENVIRONMENTAL PROTECTION

12-21-01

05896

5896

12/01.....50.00



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: \$50.00

412345 DEC282001

Do **NOT** Remove Label

AIRS ID # 0990384
IVY FRENCH CLEANERS
JAYANTI BULSARA
7885 N FEDERAL HWY
BOCA RATON FL
33487

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273

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Restricted Delivery Fee (Endorsement Required)		
Total		

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ID# 990384

Sent To JAYANTI BULSARA

Street or PO IVY FRENCH CLEANERS

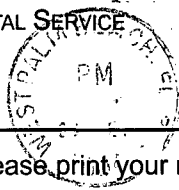
City, State BOCA RATON, FL 33487

PS Form 3811, August 2001

7003 2260 0003 5650 0636

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>J. Bulsara</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin: 5px 0;"> <p>ID# 990384 JAYANTI BULSARA IVY FRENCH CLEANERS 7885 N FEDERAL HWY BOCA RATON, FL 33487</p> </div>	<p>B. Received by (Printed Name):</p> <p>C. Date of Delivery 2-6-04</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number <i>(Transfer from service label)</i></p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>7003 2260 0003 5650 0636</p>	
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540</p>	

UNITED STATES POSTAL SERVICE



First-Class Mail
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Permit No. G-10

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DEPMOBILE SOURCE CONTROL PROGRAM
DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring
& Mobile Sources

FEB 12 2004

RECEIVED