

Jeb Bush  
Governor

# Department of Environmental Protection

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

David B. Struhs  
Secretary

September 5, 2001

Ms. Anne Prece  
West Boca Dry Cleaners  
8177 West Glades Road #18  
Boca Raton, Florida 33434

Re: Facility No.: 0990388-002

Dear Ms. Prece:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 3, 2001.

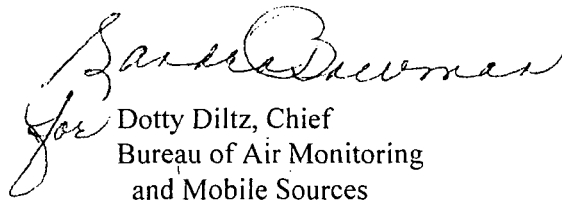
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

561-736-9995 plan

Fees Paid 96-00  
SOC Ø  
Compliance IN

0990388-002

P15

1(a) New should be circled under Status for each machine.

RC should be circled under Control Device Required for July, 1999 machine.

add Date Control Device Installed for each machine.

P16

4. New machines at large area source should be marked. Mark out "v" under Existing machines at large area source.

P17 Responsible official sign and date for changes.

8/27/2001 Spoke to Ann and John Preece and they stated the machines have built in refrigerated condensers for control devices.

PERCHLOROETHYLENE DRY CLEANER  
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED  
AUG - 3 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): Sibling Rivalry ENT. Inc.
2. Site Name (For example, plant name or number): West Boca Dry Cleaners
3. Hazardous Waste Generator Identification Number: 50-73-01514
4. Facility Location: Street Address: 8177 W. GLADES RD #118 City: BOCA RATON County: P.B.C. Zip Code: 33434
5. Facility Identification Number (DEP Use ONLY - do not fill in): 0990388-002

Responsible Official

6. Name and Title of Responsible Official: Name: ANNE PRECE Title: PRESIDENT
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 8177 W. GLADES RD. City: BOCA RATON County: P.B.C. Zip Code: 33434.
8. Responsible Official Telephone Number: Telephone: (305) 482-1782 Fax: (305) 482-1440

Facility Contact (If different from Responsible Official)

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

**Facility Information**

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

How many dry-to-dry machines do you have on-site? [ 2 ]

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")
9/1/94	Existing/New	RC/CA/None required	_____
7/99	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?

[ 202.5 ] 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?  1

For each boiler, indicate its horsepower (HP) rating:   4  0

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 \_\_\_\_\_
- 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.*

ANNIE PRECE

Print name of responsible official

Annie Prece, JMS  
Signature

7/30/01  
Date

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.

466577 DEC28 2006

PERMIT  
EXPIRED  
ANTHONY - N.H. 2004  
WILL RETURN  
CALL  
NEW OWNER

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 990388  
SIBLING RIVALRY  
ENTERPRISES INC  
8177 West Glades Road #18  
BOCA RATON, FLORIDA 33434

Printed on recycled paper.

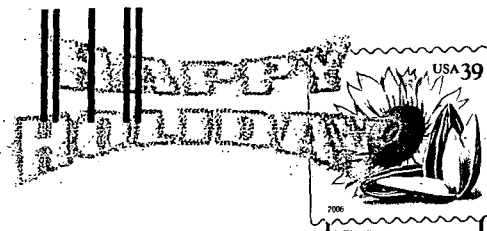
FLAIR ACCT. CODE 372020350013755010000  
BENEFITTING OBJECT CODE 002000  
BENEFITTING CATEGORY 000200

FLAIR  
& Mobile Sources  
Monitoring  
DEC 29 2006

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

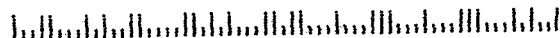
West Boca Dry Cleaners  
8177 Glades Rd  
Boca Raton, FL 33434-4071

WEST PALM BEACH  
FL 334  
23 DEC 2006 PM 7 L



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

323153070 8099





BEST AVAILABLE COPY

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

0458875 FEB 13 2006  
RECEIVED

FEB 15 2006

TOTAL AMOUNT DUE: \$50.00

Bureau

Do NOT Remove Label

AIRS ID# 990388 1st  
WEST BOCA DRY CLEANERS  
8177 West Glades Road #18  
BOCA RATON, FL 33434

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.



(cut here)

THIS PORTION MUST BE

FOR PROPER HANDLING

434343 DEC 15 2003

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

990388  
ANNE PRECE  
WEST BOCA DRY CLEANERS  
8177 W GLADES ROAD #18  
BOCA RATON FL 33434

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

RECEIVED  
DEC 17 2003  
Bureau of Air  
Mailing

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**

Do NOT Remove Label

AIRS ID#0990388
WEST BOCA DRY CLEANERS ANNE PRECE 8177 W GLADES ROAD #18 BOCA RATON FL 33434

Bureau of Air Monitoring  
& Mobile Sources

DEC 18 2002

420757 DEC16 2002

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

AIRS ID# 990388      10
WEST BOCA DRY CLEANERS 8177 West Glades Road #18 BOCA RATON, FL 33434

Bureau of Air Monitoring  
& Mobile Sources

DEC 23 2002

RECEIVED

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1 FUND: 20-2-03500 OBJECT: 002273
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THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

411904 DEC 19 2001

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

AIRS ID # 0990388  
 WEST BOCA DRY CLEANERS  
~~ANNE PRICE~~ ANTHONY MULE'  
 8177 W GLADES ROAD #18  
 BOCA RATON FL  
 33434

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



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

412612 JAN 4 2002

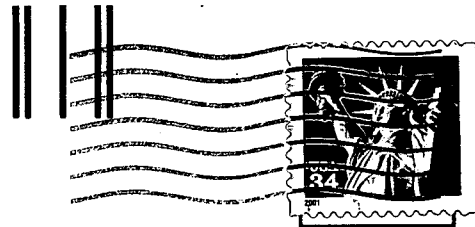
Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

AIRS ID # 0990389  
 SAI CLEANERS INC  
 BHARAT B JOSHI  
 5044 W ATLANTIC AVENUE  
 DELRAY BEACH FL  
 33484

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



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

32315+3070 99

