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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 12:50 TIME OUT: 1:3	0 AIRS ID#: 0990421
TYPE OF FACILITY: Dry Cleaning	
FACILITY NAME: Star Brite ele	can er S DATE:
FACILITY LOCATION: 7/ E. In dian	Jouen Rd
Jupiter F-L	33477
RESPONSIBLE OFFICIAL: Charles Whit	PHONE NUMBER: 147-3035
Based on the results of the compliance requirements evalue compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evalu discrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
:	-
	·
	-
· · ·	
GO) 0 / THE	
COMMENTS:	•
The Annual Compliance Certification form has been properly certification form $2-2$	ied and submitted to the inspector. YES NOTE NOTE
DATE OF NEXT INSPECTION:	proximate) /
INSPECTION CONDUCTED BY:	ChoKShi egse Print)
INSPECTOR'S SIGNATURE: 2.V Chofel	PHONE NUMBER: 355-3070

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANN RE-II	UAL NSPECTION		COMPLAINT/DISC	OVERY	<u>. </u>
AIRS ID#: 0990 421 DATE: FACILITY NAME: Star T FACILITY LOCATION: 71 Conc Typ PART I: NOTIFICATION	3×i+e =. I		aners	E OUT:_ L Her_ 4-7-	3035
(cpeck sobtobusts pox)					
i. Existing facility notified DARM by 9.					X
2. New facility notified DARM 30 days	•	•			α`
3. Facility failed to notify DARM to use	general perm				
PART II: CLASSIFICATION					
Facility indicated on notification form (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)		•	x<140 gal/yt <200 gal/yt 40 gal/yt or after 12/9/91)	*	
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)="" a="" appropriate="" before="" both="" check="" class<="" classification.="" correct="" facility="" gal="" if="" is="" no,="" only,="" please="" td="" the="" this="" transfer="" types,="" yr=""><td>t t</td><td>ransfer only, 20 both types, 140-</td><td>rea source 140<x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td></td><td></td></x<2,>	t t	ransfer only, 20 both types, 140-	rea source 140 <x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,>		
facility qualified for a facility exceeds above. B. The total quantity of perchloroethyle facility was 20 gallons.	imits and is r	not eligible for	a general permit	is 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 sealed 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 sealed containers for at least 24 hours prior to disposal?
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber 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?



2. Equipped dry-to-dry machines with a closed-loop vapor venting system?

AT ON ONA

3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?

d√i □n □n/y

4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?

XY DI

5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?

WY ON

6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

ØX □N

В.	Has the responsible official of an existing large or new large area source also:		
I.	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?	ΟY	ПИ
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	□N
	Is the temperature differential equal to or greater than 20° F?	ΩY	ND
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?	ΟY	
	Is the perc concentration equal to or less than 100 ppm?	QΥ	ON_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?	QΥ	□NN/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	UY	ON ON/A
ó.	Routed airflow to the carbon adsorber (if used) at all times?	ПY	□N □N/A
_			
P	ART V: RECORDKEEPING REQUIREMENTS		

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
Maintained receipts for perc purchased?	XYY ON
2. Maintained rolling monthly averages of perc consumption?	´₽¥Y □N
3. Maintained leak detection inspection and repair reports for the following:	,
a. documentation of leaks repaired w/in 24 hrs? or;	ØF □N
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 3 days of receipt?	AA CIN
4. Maintained calibration data? (for direct reading instruments only)	OY ON SAMA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ONXN/A
6. Maintained startup/shutdown/malfunction plan?	AY DY
7. Maintained deviation reports?	ATY ON
Problem corrected?	YY ON
8. Maintained compliance plan, if applicable?	'dy on ana

PART VI: LEAK DETECTION AND REPAIRS		
1. Does the responsible official conduct a weekly leak detection and repair inspection?	AY ON	,

Visual examination (condensed)		sible officia exterior su	· · · · · · · · · · · · · · · · · · ·	œſ	
Physical detection (airflow felt the				\Diamond	
Odor (noticeable perc odor)	3 3	,			
Use of direct-reading instrument	ation (FID	/PID/calor	imetric tubes)	()	XN/A
If using direct-reading instrum					/
a. Capable of detecting	perc vapo	r concentra	itions in a range of 0-500 ppm?	QY Q	N_N/A
b. Calibrated against a (PID/FID only)?	standard g	gas prior to	and after each use	םץ םו	NN/A
c. Inspected for leaks a	nd obviou	s signs of w	ear on a weekly basis?	OY O	N_NA
d. Kept in a clean and	secure area	a when not	in use?	ay a	NN/A
e. Verified for accurac	y by use of	duplicate s	samples (calorimetric only)?	QY Q	N_N/A
3. Has the facility maintained a leak log	?			Ax a	N_N/A
4. Does the responsible official check the	following	g areas for l	eaks?	\	
Hose connections, fittings, couplings, and valves	ØY	ПD	Muck cookers	, QY	ON X
Door gaskets and seating	X	ND	Stills	XY	□ии
Filter gaskets and seating	AA	ND	Exhaust dampers	ΟY	ON XN
Pumps	XY	ПD	Diverter valves	XY	ON_N
Solvent tanks and containers	#\ <u>Y</u> -	ПN	Cartridge filter housing	s Y	□й_и
Water separators	ZQ.	ПD		<i>'</i> \	
Name of Responsible Office	riai (Signa	ature)	Name of Responsible Official		561) & Phone
AN (horth	! (` '		Date of Ins	nection	
Inspector's Name (Please P	rint)			hecaou	• //
70,000	rint)		2 - 28 - Approximate Date of	-98	pection
Inspector's Name (Please P	n	g Machir	Approximate Date o	-98	pection (es. No
Inspector's Name (Please P	n	g Machir	Approximate Date o	-98	pection No

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL 🗹 CO	OMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 11:45 TIME OUT: 6	2:05 AIRS ID#: 0990421
	aners DATE: 9-8-98 town 72d
· Jupitez, F	L 33477
RESPONSIBLE OFFICIAL: Charles White	PHONE NUMBER: 747 - 3035
compliance with DEP Rule 62-213.300, Florida Admini	·
Based on the results of the compliance requirements eva discrepancies were noted:	uluated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
•	- Pr
	& Moderate Str. Comments of the Comments of th
	· Sources of
· · · · · · · · · · · · · · · · · · ·	
•	***
COMMENTS:	
The Annual Compliance Certification form has been properly c	ertified and submitted to the inspector. YES NOT
DATE OF NEXT INSPECTION: Sept	(Approximate) /
INSPECTION CONDUCTED BY:	Chokshi .
INSPECTOR'S SIGNATURE: ()- Chon,	PHONE NUMBER: 355-3070

PERCHLOROETHYLENE DRY CLEANERS

Aprils

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE	OF	INICHI	にんてい	CAL
ITPL	()r	HYSEL	r. U I I	UIT.

ANNUAL

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COMPLAINT/DISCOVERY

RE-INSPECTION

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B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 19.50 gallons.

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) □N □N/A 1. Storing perchloroethylene in tightly sealed and impervious containers? ON ON/A 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 sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DYN/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? 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 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? 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?

				· · · · · · · · · · · · · · · · · · ·
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?	\Box	ΠN	
	\(\text{\text{\$\frac{1}{2}\text{\$\frac{1}\text{\$\frac{1}{2}\text{\$\frac{1}\text{\$\frac{1}\text{\$\frac{1}\text{\$\frac{1}\text{\$\frac{1}\text{\$\frac{1}\$		_,	
2.	Measured and recorded the washer exhaust temperature at the condenser			
١~.	inlet and outlet weekly?	Πv	ΠNI I	□N/A
	iniet and outlet weekly?	u i	C314	⊔IV/A
	Is the temperature differential equal to or greater than 20° F?	ΩY	□N I	□N/A
1				
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,			
		ΠV		□N/A
	if machines are equipped with a carbon adsorber?	u i	UN I	UN/A
l	Is the perc concentration equal to or less than 100 ppm?	ΠY	□N I	□N/A
4	Assured that the sampling port on the carbon adsorber exhaust for measuring			
٦.	perc concentrations is at least 8 duct diameters downstream of any bend, contraction,			
1				
	or expansion; is at least 2 duct diameters upstream from any bend, contraction,			
	or expansion; and downstream from no other inlet?	ШY	UN	□N/A
	·			
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
l	condenser coils?	\Box Y	□N □	□N/A
1				
6	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	□N	□N/A
Ľ.	Atoutou antito a to allo out oou amorton (it about) at an times.		,	—

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 ON ON/A 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 DY ON ON/A and parts installed w/in 5 days of receipt? DY DN ØN/A 4. Maintained calibration data? (for applicable direct reading instruments) DY DN PN/A 5. Maintained exhaust duct monitoring data on perc concentrations? ØY ON 6. Maintained startup/shutdown/malfunction plan? ZY ON ON/A 7. Maintained deviation reports? MY ON ON/A Problem corrected? DY DN ZN/A 8. Maintained compliance plan, if applicable?

. Does the responsible official conduct	a weekly (for small sourc	es, bi-weekly) leak detection a	nd repair
inspection?			DY DN
2. Has the facility maintained a leak log			DY DN
3. Does the responsible official check th	e following areas for leak	s?	
Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	DY DN DN/A
Door gaskets and seating	DY ON ON/A	Stills	MY ON ON/A
Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY DN DN/A
Pumps	DY ON ON/A	Diverter valves	DY ON ON/A
Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	MY ON ON/A
Water separators	DY ON ON/A		
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surfac	es)	Ø
Physical detection (airflow felt	hrough gaskets)		Ø
Odor (noticeable perc odor)			
Use of direct-reading instrumen	tation (FID/PID/calorime	tric tubes)	AN/A
Halogen leak detector			DW/A
If using direct-reading inst	trumentation, is the equi	pment:	ØN/A
a. Capable of detecting	g perc vapor concentration	ns in a range of 0-500 ppm?	DY DN
_	standard gas prior to and	after each use	D., D.,
(PID/FID only)?			OY ON
·	and obvious signs of wear	•	DY DN
	secure area when not in u		DY DN
e. Verified for accurac	y by use of duplicate sam	ples (calorimetric only)?	OY ON
Phale & Marie	9/29/98	CHARLES 6.	WHITE
Filipkowski ponsible Official's Na	me	Responsible Offi	SWSh cial's Sig
(Please Print) R // Chotesh	~	9-8-9	8
Inspector's Name (Please P	rint)	Date of Inspection	

4 of 5

Approximate Date of Next Inspection

DDITIONAL SITE INFORMATION:
THOMASTIE INFORMATION.
Secondary Containment for: Dry Cleaning Machine & Storage area [] [] Waste area [] [] Spotting area Sealed [] []
. Disposal of Water from Water Separator using approved evaporator [] or contracted Wastewater service [] []
Ontainent. Asked to Klasse oren and Containent. Asked to Klasse oren and Komove Water.
Containent. Asked to klasse oren and
Komove Water.
* Safety Kleen picks the west
as needed
Asked to keep all records too Perc Purchase, leak check, & tempera
Perc Purchase, leak check, & Temper

* Second top was made to inspect records

Monitoring on site..

* Need to organize all records.

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TITLE VAIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL CO	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:15 TIME OUT: 10:	45CE AIRS 10=: 0990421
TYPE OF FACILITY: Doy Cleaning FACILITY NAME: STAR BRITE CLE FACILITY LOCATION: 7/E. Indian	EANERS DATE: 6-21-99
Jupiter,	FL 33477
RESPONSIBLE OFFICIAL: Charles Whit	e PHONE NUMBER: 747-3037
Based on the results of the compliance requirements evaluations with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluations.	trative Code (F.A.C.).
discrepancies were noted:	
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
· · · · · · · · · · · · · · · · · · ·	
	-
COMMENTS:	•
	2000
INSPECTION CONDUCTED BY: R.V. Cho.	Approximate) KShi Please Print) G PHONE NUMBER: Sx + 1174

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PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

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ANNUAL

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COMPLAINT/DISCOVERY

Q

RÉ-INSPECTION

a

AIRS ID#: 0990 421 DATE: 6-21-99 TIME IN: 10:15 TIME OUT: 10: 45				
FACILITY NAME: STAR BRITE CLEANERS				
FACILITY LOCATION: 71 E. In diantown Rd				
Jupiter, FL 33477				
RESPONSIBLE OFFICIAL: Charles White PHONE: 747-3037				
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				
PART II: CLASSIFICATION				
Facility indicated on notification form that it is:				
(check appropriate box) A. □ Drop store/out of business/petroleum				
1. Existing small area source 2. New small area source				
dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr transfer only, x < 200 gal/yr				
both types, x < 140 gal/yr (constructed before 12/9/91) both types, x < 140 gal/yr (constructed on or after 12/9/91)				
3. Existing large area source □ 4. New large area source □ dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr				
transfer only, $200 \le x \le 1,800$ gaVyr transfer only, $200 \le x \le 1,800$ gaVyr				
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				
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 facility was 30 gallons. for 1998, In 1999, So for O gal used				

Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed 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 sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber 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)

Equipped all machines with the appropriate vent controls?
 Equipped dry-to-dry machines with a closed-loop vapor venting system?
 Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?
 Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?
 Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?
 Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

ก	Has the responsible official of an existing large or new large area source also:		
Ο.	tras the responsible official of the existing large of flew large area source also.		
ι.	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?	אם עם	
2.	Measured and recorded the washer exhaust temperature at the condenser		
	inlet and outlet weekly?	ם אם אם	JN/A
	Is the temperature differential equal to or greater than 20° F?	ם אם אם	JN/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?	DY DN (N/A .
	Is the perc concentration equal to or less than 100 ppm?	מ אם צם	⊐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?	OY ON (N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	·OY ON (⊐ \1/4
	Condenset Cons.	ai ak (AWI
6.	Routed airflow to the carbon adsorber (if used) at all times?	אם צם	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	MY ON
2. Maintained rolling monthly total of perc consumption?	ZY 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?	DY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	אאַ אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	אואם אם צם
6. Maintained startup/shutdown/malfunction plan?	DY ON
7. Maintained deviation reports?	AMO NO YA
Problem corrected?	MY ON ON/A
Maintained compliance plan, if applicable?	אאב אם צם

PA	RT VI: LEAK DETECTION AND	REPAIRS			
١.	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
	inspection?			MD YD,	
2.	Has the facility maintained a leak log	; ·		DY ON	
3.	. Does the responsible official check the following areas for leaks?				
	Hose connections, fittings, couplings, and valves	, DY ON ON/A	Muck cookers	OY ON DAN/A	
	Door gaskets and seating	DY ON ON/A	Stills	אומם מם צעם	
i	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	OY ON DANA	
	Pumps	MY ON ON/A	Diverter valves	DY ON ON/A	
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housing	gs DY ON ON/A	
	Water separators	DY ON ON/A		•	
4.	Which method of detection is used b	y the responsible official?		· / · /	
	Visual examination (condensed	l solvent on exterior surfac	es)		
	Physical detection (airflow felt through gaskets)				
	Odor (noticeable perc odor)				
	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)				
	Halogen leak detector			PIM	
	If using direct-reading in	strumentation, is the equ	ipment:	J2N/A	
	a. Capable of detection	ng perc vapor concentratio	ns in a range of 0-500 ppm?	OY ON	
	b. Calibrated against (PID/FID only)?	a standard gas prior to and	l after each use	DY DN	
	c. Inspected for leak	s and obvious signs of wea	r on a weekly basis?	DY DN	
	d. Kept in a clean an	d secure area when not in t	use?	אם עם	
	e. Verified for accur	acy by use of duplicate san	nples (calorimetric only)?	DY DN	
	•	•			

PHARLES 8, WHITE
esponsible Official's Name
(Please Print)

Responsible Official's Signature

6-21-99
Date of Inspection

Une 2000

Approximate Date of Next Inspection

DOITIONAL SITE INFORMATION:
Yes NO
Yes NO Secondary Containment for: Dry Cleaning Machine & Storage area [] Waste area
Spotting area Sealed [X] []
. Spotting area is jæling of
Owner Says he will rosed ASAP
The Contract of the Contract o
. Disposal of Water from Water Separator using approved evaporator []
or contracted Wastewater service [] []
Safety Kleen picks up The Waste When Glied
* FDEP 1999 Calenda was given to Charles white
in the state of the
Y Needs to Clean de asound dry
Cleaning Muline - Area was wet
Marke Condensing.
Koep area doy.
* Asked to keep all leak check & Perc Purchase receipts on Site
forc factors.
A QUINT Send leak Check selos & Perc Purche receipts to the out grice. At time of Inspection has charles white said he keeps records of leak check perc Purchase, were at home, Asked to keep on site
perc Purchase, were at home, Asked to keep on site

TITLE VAIR QUALI	ITY GENERAL PERMIT- "
	OMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: TIME OUT:	AIRS ID#: 0990421
TYPE OF FACILITY: D-1 Cleamer	DATE: 7/8/10
RESPONSIBLE OFFICIAL: Chambes With	PHONE NUMBER: 747 3037
Based on the results of the compliance requirements evaluation compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluation discrepancies were noted:	nated during this inspection, the facility is found to be in rative Code (F.A.C.). Tated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	P
	LUG - T
	Cand Sources
	· ·
COMMENTS:	
The Annual Compliance Certification form has been properly certified	and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: (Appro	oximate)
INSPECTION CONDUCTED BY: M Liebler (Please INSPECTOR'S SIGNATURE: M Liebler	Print) PHONE NUMBER: 355 3070

Γ	
AIRS ID#: <u>099042/</u> DATE: 1/14	TIME OUT:
FACILITY NAME:	CANCES.
FACILITY LOCATION: 7/ E. Zw	diantow. JRD.
	F/ 33477
	Jh.: k PHONE: 747 - 3037.
	PHONE:
	
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	
2. Facility failed to notify DARM to use general po	permit
·	e e kar
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box) A.	☐ No notification form ☐ Drop store/out of business/petroleum
•	
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 ≤ x ≤ 2,100 gal/yr	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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr
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, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large 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 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classific facility qualified for a get	dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after $12/9/91$) 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 $12/9/91$) $\square Y \square N \square Can$ not determine cation:

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1	BEST AVAILABLE COPY . Storing perchloroethylene in tightly sealed and impervious containers?	DY ON ON/A
2.	Examining the containers for leakage?	DY ON ON/A
3.	. Closing and securing machine doors except during loading/unloading?	אם אַב
4.	Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ØY □N □N/A
5.	. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON XIN/A

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)

l.	1. Equipped all machines with the appropriate vent controls?				
^					

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 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?

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?

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Best Available Copy

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?	口力	ПN	
2.	. Measured and recorded the washer exhaust temperature at the condenser	_		
	inlet and outlet weekly?	ΠY	ПN	□N/A
	ls the temperature differential equal to or greater than 20° F?	ΩY	מם	□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?	Πv	ואם	□N/A
	-			
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ΠИ	□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?	□Y	ВИ	□N/A
	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ΠИ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ПY	ПИ	□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?	DA 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?	DY ON ON/A			
4. Maintained calibration data? (for applicable direct reading instruments)	ם א אא א א א			
5. Maintained exhaust duct monitoring data on perc concentrations?	אא א א א א א א א			
6. Maintained startup/shutdown/malfunction plan?	QY ON			
7. Maintained deviation reports?	ZY ON TONA			
Problem corrected?	אואים אם אם			
8. Maintained compliance plan, if applicable?	ווא אל אם אם יי			

2. 1	las the facility maintained a leak log	PEST AVA	ILABLE COPY	אם אָעָ
3. L	Does the responsible official check th	e following areas for leak	s?	
	Hose connections, fittings, couplings, and valves	MANO NO YE	Muck cookers	DY DN XN/A
	Door gaskets and seating	DY ON ON/A	Stills	MY ON ON/A
	Filter gaskets and seating	אואם אם אם	Exhaust dampers	DY DN XXN/A
	Pumps	DY ON ON/A	Diverter valves	DY □N □N/A
	Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	ØY ON ON/A
	Water separators	DY ON ON/A		.
4. WI	nich method of detection is used by	the responsible official?		
	Visual examination (condensed s	olvent on exterior surface	es)	
-	Physical detection (airflow felt th	rough gaskets)		d
	Odor (noticeable perc odor)	•		
-	Use of direct-reading instrumenta	ation (FID/PID/calorimetr	ric tubes)	XZ NA
Ŭ.	Halogen leak detector		•	X NA
1	If using direct-reading instr	umentation, is the equip	ment:	X N/A
			s in a range of 0-500 ppm?	אם צם
		tandard gas prior to and a		חס אם
.	c. Inspected for leaks an	d obvious signs of wear o	on a weekly basis?	OY ON
) ,	d. Kept in a clean and se	cure area when not in use	e?	מם עם
.	e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	DY DN
. [
			0//11-	M 11/2
Respons	ible Official's Name		Responsible Office	cial's Signatu
	(Please Print)	. •		
h	' hiebler		7/12/2	O
	Inspector's Name (Please Prin	t)	Date of Inspection	-

Approximate Date of Next Inspection

Inspector's Signature

AD	DITIONALSI	re information:		·		
1.	vrsforoe2	Containment for:	Dry Cleaning	Machine & Storage area	Yes	NO 1
	becommun'y		and anomaring	Waste area	V)	[]
			-	Spotting area Sealed	1/1	[]
				-	7	
			•			
			·.	,		
				•		•
	_	•				
				•		
2.	Disposal o	f Water from Wate	r Separator us	ing approved evaporator	[/]	[]
	•,			Wastewater service	1/1	[]
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Z ,210 662 402 **US Postal Service** Receipt for Certified Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse). 10 AIRS ID # 0990421001AG CHARLES WHITE STAR BRITE CLEANERS 71 EAST INDIANTOWN ROAD JUPITER FL 33477 Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address PS Form **3800**, **TOTAL** Postage & Fees \$ Postmark or Date

at line over top of envelope to at line over top of envelope to a tinht of the return address	
 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. 	C. Signature Agent Addressee
1. Article Addressed to: 10 AIRS ID # 0990421001AG CHARLES WHITE STAR BRITE CLEANERS	If YES, enter deliven address below:
71 EAST INDIANTOWN ROAD JUPITER FL 33477	3 Service Type 3 Service Type 4. Restricted Delivery? (Extra Fee) 3 Service Type 9 Service 9 S
2. Article Number (Copy from service label)	J
PS Form 3811, July 1999 Dome	estic Return Receipt 102595-99-M-1789

7	US Postal Service Receipt for Certifi No Insurance Coverage Pro Do not use for International I AIRS ID#: CHARLES WHITE CHARLES WHITE 1 EAST INDIANTOWN ROA UPITER FL 33477	vided. Mail <i>(See reven</i> 0990421	sa)	
	Certified Fee			
	Special Delivery Fee			
	Restricted Delivery Fee			
	Return Receipt Showing to Whom & Date Delivered			
	Return Receipt Showing to Whom, Date, & Addressee's Address			
	TOTAL Postage & Fees Postmark or Date			
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card to you.	on the reverse of this form so that w		I also wish to receive the following services (for an extra fee):	- (((((((((((((((((((
permit.	the mailpiece, or on the back if spa ted* on the mailpiece below the arti		1. Addressee's Address	ervi
	to whom the article was delivered a			ptS
3. Article Addressed to:	-	4a. Article N	<u> </u>	'n Rece
AIRS ID#: 0990421 CHARLES WHITE CHARLES WHITE 71 EAST INDIANTOWN ROAD		4b. Service Registere Express	Type ed ☐ Certified	Thank you for using Return Receipt Service
JUPITER FL 33477		7. Date of De	elivery 9/97	c you for
5. Received By: (Print Nat	ne)	8. Addressee's Address (Only if requested and fee is paid)		

. P 265 302 248

CHARLES WHITE 71 EAST INDIANTOWN ROAD JUPITER FL 33477 5. Received By: (Print Name) 6. Signature: (Addressee or Agent) PS Form 3811, December 1994

is your RETURN ADDRESS completed on the reverse side?

Domestic Return Receipt

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

RECEIVED MAIL ROOM

MAR -6 97

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID#: 0990421 CHARLES WHITE

CHARLES WHITE
71 EAST INDIANTOWN ROAD
JUPITER FL 33477

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001

Оы.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0355890

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TOTAL AMOUNT DUE: \$50.00

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STAR BRITE CLEANERS CHARLES WHITE 71 EAST INDIANTOWN ROAD JUPITER FL 33477 MAIL RO

FOR GOVERNMENT USE ON Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

389580

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 # 0990421

STAR BRITE CLEANERS CHARLES WHITE 71 EAST INDIANTOWN ROAD JUPITER FL 33477 DEC 16 99

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

V

301450

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

RECEIVED MAIL ROOM

JAN 30 98

Do NOT Remove Label

AIRS ID#0990421

CHARLES WHITE CHARLES WHITE '71 EAST INDIANTOWN ROAD JUPITER FL 33477

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273



403831

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

Remove Label AIRS ID # 0990421 S

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STAR BRITE CLEANERS CHARLES WHITE 71 EAST INDIANTOWN ROAD JUPITER FL 33477

FOR GOVERNMENT USE ONLY Org.: 37550191000 EO: A-Fund: 20-2-035001 Obj.: 002273

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Survey Store & CE LE ON SURVEY SURVEY STORE SURVEY STORE SURVEY S

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0990421

CHARLES WHITE CHARLES WHITE

71 EAST INDIANTOWN ROAD JUPITER FL 33477

	Do <u>NC</u>	<u>T</u> Remove Label		·
Annual Reporting Period:	JAN 1	_19 <u>97</u> TO	JA.	J1 19 98
Based on each term or condition of the Tit 62-213.300, Florida Administrative Code		· •	<u> </u>	DEP Rule
If NO, complete the following:				
#1. Term or condition of the general perm	nit that has not been in co	ontinuous compliance duri	ng the reporting per	iod stated above:
+ + +	<u> </u>			
Exact period of non-compliance: from		to	.	
Action(s) taken to achieve compliance:		· · · · · · · · · · · · · · · · · · ·	· · · · ·	
Method used to demonstrate compliance:				
#2. Term or condition of the general perm Exact period of non-compliance: from				
		to		
Action(s) taken to achieve compliance:			·	
Method used to demonstrate compliance:	· · · · · · · · · · · · · · · · · · ·			
As the responsible official, I hereby certify, be notification are true, accurate and complete. does not exceed 2,100 gallons per year for dry	Further, my annual const	umption of perchloroethylen	e solvent, based upon	purchase receipts,
RESPONSIBLE OFFICIAL: CHA	Las WHite ame (Please Print)	Signal Signal	aftire .	1/10/gs
14	ante (1 10ase 1 1111t)	Sign		. Duit

11/06/97

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.