

Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

December 17, 2008

Mr. John R. Gits Sun Cleaners, LLC 1201 U.S. Highway #1, Suite 7 North Palm Beach, Florida 33408

Re: Facility No.: 0990476-004

Dear Mr. Gits:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 14, 2008.

Pursuant to Florida Statutes section 403.814(1), authority to operate under general permits commences thirty (30) days after receipt of the notification form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after five (5) years. Therefore, a new registration form must be received no later than five (5) years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

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,

, Sandra F. Veazey, Chief Bureau of Air Monitoring and Mobile Sources

SFV/pg

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

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. completed form to the address listed in the instructions and keep a copy of the form for your files.

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):

,	John R. GITS-SUN CleanERS LLC.
2.	Site Name (For example, plant name or number):
	Sun Cleaners L.L.C.
3.	Hazardous Waste Generator Identification Number:
	FLROODO 29777 Facility Location: 1201 k.S. Hiway #1
4.	Facility Location: 1201 le.S. Hiway #1 Street Address:
	City: North Pulm Beach Palm BeachZip Code: 33408
5.	Facility Identification Number (DEP Use ONLY - do not fill in): 0990 476 -004
	011011001
Res	sponsible Official
	Name and Title of Responsible Official:
	me: John R. GITS Title: MANAGER
7.	Responsible Official Mailing Address:
	Organization/Firm: SUNCLEANERS LILLERY
	Street Address: 1201 45 HIWAY T Tin Codes
	Responsible Official Mailing Address: Organization/Firm: SUNCLEANERS L.L.C. Street Address: 1201 45 H. WAY # 1 Suite # 7 City: N. Palm Beach Palm BEACH Zip Code: 33408
8.	Responsible Official Telephone Number:
	Telephone: (561) 622 8849 Fax: (N/A) -
Fac	cility Contact (If different from Responsible Official)
	Name and Title of Facility Contact (For example, plant manager):
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	SAME AS ABOUT
10.	Facility Contact Address:
	Street Address:
	City: Zip Code:
_	
11.	Facility Contact Telephone Number:
	Telephone: () - Fax: () -

DEP Form No. 62-213.900(2)

Facility Name and Location

Effective: 2/24/99

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY How many dry-to-dry machines do you have on-site? For each dry-to-dry machine on-site, please provide the following information: Date Control Device Installed Date Initially Purchased Status Control Device Required* From Manufacturer (if already included at time of (circle one) (circle one) purchase, write "SAME") 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 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 Control Device Installed Date Initially Purchased Status Control Device Required* From Manufacturer (circle one) (circle one) (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 adsorber2.(a) How much perchloroethylene (perc) have you used within the last 12 months? [60] 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 [____]

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Unopened store [] (date of expected opening

	lity's source classification an "X". Select one classi			ns found in sec	tion (3) of	Part II?
Small Are	ea Source					
I	Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site		(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)			
Large Are	ea Source	[]				
7	Dry-to-dry machines only Transfer only on-site Both machine types on-si		(used 200 - 1	2,100 gallons o ,800 gallons o ,800 gallons o	f perc per	year)
4. What control tec (Indicate with a	chnology is required on n in "X".)	nachines p	ursuant to sec	ction (5) of Par	t II of this	notification form?
	nachines at small area son REQUIRED) [X]	<u>urce</u>		v machines at s rigerated cond		source]
Carbon ad	nachines at large area sou dsorber [] ted condenser []	urce		v machines at l rigerated cond		source]
Rule 62-213.300, F	n contains non-exempt en F.A.C. Verify that all stea such units exist on-site (se	am and ho	t water genera	ating units on-		
All steam and hot we No such units on-si	water generating units exe	empt	[X] OR			
How many boilers	do you have on-site?					
For each boiler, inc	dicate its horsepower (HF) rating: [10][_]			
What type of fuel d		propane No. 2 fuel No. 6 fuel	oil [natural gas No. 4 fuel Other (plea	oil	
6. Equipment Moni	itoring and Recordkeepin	ng Informa	tion			
Check all logs which	ch are required to be kept	t on-site in	accordance v	with the require	ements of t	this general permit:
(a) Purchase receip	ts and solvent purchases/	solvent ad	dition log		<u> </u>	
(b) Leak detection	inspection and repair			I	[_ X]	
(c) Refrigerated condenser temperature monitoring						
(d) Carbon adsorber exhaust perc concentration monitoring						
(e) Startup, shutdown, malfunction plan						

DEP Form No. 62-213.900(2) Effective: 2/24/99

7. Surrender o	of Existing DEP Air Permit(s)					
Please indicat	te 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					
this notifi statement maintain comply w I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in faction. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form. In the Department of any changes to the information contained in this notification. In the Department of any changes to the information contained in this notification. Date Date					

Wise, Jane

From:

Wise, Jane

Sent:

Monday, November 24, 2008 4:56 PM

To:

'james_stormer@doh.state.fl.us'; 'Thomas_Tittle@doh.state.fl.us'

Cc:

Veazey, Sandra; Bowman, Sandy

Subject:

Recently Received AG Registrations

Attachments: 0990476-004.pdf; 0990634-002.pdf

The attached documents represent recently received air general permit registration forms for your area. As requested, each form has been scanned and attached for your office use. These registrations are currently in the 30-day review cycle. We request that any updates to EU information be made after the 30-day review cycle ends. The actual receipt date and other facility information may be obtained in GPCI.

The complete scanned file for each facility will be available in ADH Search after the 30-day review cycle.

If you have any questions or comments, please contact Dick Dibble at 850/921-9586 or by e-mail at dickson dibble@dep.state.fl.us or Sandy Bowman at 850/921-9583 or by e-mail at sandy bowman@dep.state.fl.us

NORTH Palm Beach, H. 12 NOV 2008 PM 33408-3550 General Permite Section Bureau of hir Monitoring + Nobile Sonces, M55510 Dept. of Environmental Protection 2600 Blair Stown Road Tallahue, Fl 32399-2400 323::+6762"""

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