

Jeb Bush  
Governor

# Department of Environmental Protection

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

David B. Struhs  
Secretary

April 1, 2002

Mr. Philip Cohen  
Tropical Cleaners and Laundry  
1726 Annandale Circle  
Royal Palm Beach, Florida 33411

Re: Facility No.: 0990488-002

Dear Mr. Cohen:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 25, 2002.

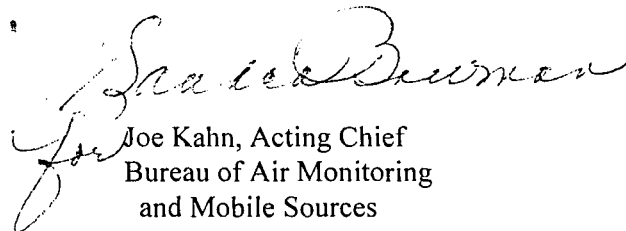
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

  
Joe Kahn, Acting Chief  
Bureau of Air Monitoring  
and Mobile Sources

JK/jw

cc: Mr. Al Grasso, Palm Beach County

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

Printed on recycled paper.

Fees Paid 97-01  
SOE 2  
Compliments I N

PERCHLOROETHYLENE DRY CLEANER  
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED  
FEB 25 2002  
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):	TROPICAL CLEANERS & LAUNDRY, INC.
2. Site Name (For example, plant name or number):	TROPICAL CLEANERS & LAUNDRY
3. Hazardous Waste Generator Identification Number:	FLD 980843288
4. Facility Location: Street Address: City: West PALM BEACH County: PALM BEACH Zip Code: 33405	3318 South Dixie Hwy.
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0990488-002

Responsible Official

6. Name and Title of Responsible Official: Name: Philip COHEN Title: PRESIDENT	
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: ROYAL PALM BEACH County: PALM BEACH Zip Code: 33411	1726 ANNANDALE Circle
8. Responsible Official Telephone Number: Telephone: (561) 753-0687 Fax: (561) 753-0687	

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	HAL GERNSTADT - GENERAL MANAGER
10. Facility Contact Address: Street Address: City: West PALM BEACH County: PALM BEACH Zip Code: 33405	3318 South Dixie Hwy.
11. Facility Contact Telephone Number: Telephone: (561) 833-3120 Fax: (561) 833-7203	

**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")
<u>11/16/95</u>	Existing <input checked="" type="radio"/> New <input type="radio"/>	<input checked="" type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	<u>Same</u>
_____	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?**

390 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:

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 0990488
- 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.*

Philip Cohen  
Print name of responsible official

  
Signature

02/14/02  
Date

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

459467 MAR 01 2006

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

**TOTAL AMOUNT DUE: \$50.00**

RECEIVED  
MAR 03 2006  
Bureau of Alcohol, Tobacco & Firearms

Do **NOT** Remove Label

AIRS ID# 990488 1st  
TROPICAL CLEANERS - SOUTH  
DIXIE  
3318 S Dixie Hwy  
WEST PALM BEACH, FL 33405

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

458673 FEB 6 2006

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

**TOTAL AMOUNT DUE: \$50.00**

50.00

Do **NOT** Remove Label

990488 10  
TROPICAL CLEANERS - SOUTH DIXIE  
3318 S Dixie Hwy  
WEST PALM BEACH, FL 33405

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

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

434369 DEC172003

**TOTAL AMOUNT DUE: \$50.00**

RECEIVED  
DEC 22 2003  
Bureau of Air Monitoring  
& Mobile Sources

X

Do NOT Remove Label

990488 PHILIP COHEN TROPICAL CLEANERS - SOUTH DIXIE 1726 ANNANDALE CIRCLE ROYAL PALM BEACH FL 33411
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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.

443455 DEC172004

**TOTAL AMOUNT DUE: \$50.00**

✓

Do NOT Remove Label

AIRS ID# 990488      10 TROPICAL CLEANERS - SOUTH DIXIE 3318 S Dixie Hwy WEST PALM BEACH, FL 33405
---

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





THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

420502 DEC11 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**

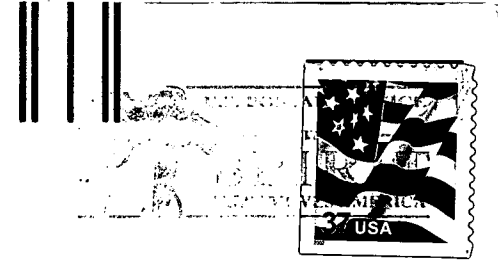
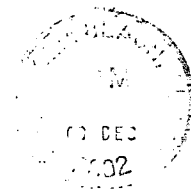
Do **NOT** Remove Label

AIRS ID#0990488  
 TROPICAL CLEANERS - SOUTH DIXIE  
 PHILIP COHEN  
 1726 ANNANDALE CIRCLE  
 ROYAL PALM BEACH FL  
 33411

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

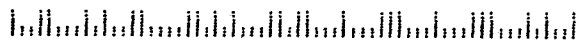
RECEIVED  
 DEC 13 2002  
 Bureau of Air Monitoring  
 & Mobile Sources

Tropical Cleaners & Laundry  
 3318 South Dixie Hwy  
 West Palm Beach FL 33405



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

32315+3070 99



PHILIP COHEN  
1726 ANNANDALE CIRCLE  
ROYAL PALM BEACH, FL 33411

RETURN RECEIPT  
REQUESTED

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.  
FOLD AT DOTTED LINE  
**CERTIFIED MAIL**



7000 0520 0016 2519 5025



UNITED STATES  
POSTAL SERVICE

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32399

U.S. POSTAGE  
PAID  
PALM BEACH, FL  
33480  
FEB 21, 02  
AMOUNT

**\$3.94**  
00040154-02

GENERAL PERMITS SECTION  
BUREAU OF AIR MONITORING, MS 5510  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FL 32399-2400

32399+2400 01

