

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

July 22, 1997

Ms. Elizabeth Cohrera President Vogue Cleaners 23037 South State Road 7 Boca Raton, Florida 33428

Facility No.: 0990502 Re:

Dear Ms. Cohrera:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 20, 1997.

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

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

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL	COM	PLAINT/DISC	OVERY	RE-	INSPECTION	
TIME IN: 0:50	TIME OUT:	11:2	0	_AIRS ID#:	0990	502	
TYPE OF FACILITY:	M. CLBA	men			· -		
FACILITY NAME: VC	stue a	5AN	M	•	DATE:	5-20.	-97
FACILITY LOCATION: 2	3037 S	<u>. S</u>	R7,	BOCAR	ATON, 1	-L 334	28
RESPONSIBLE OFFICIAL:	UZABETH C	ABRZA	PI	HONE NUMI	BER: (561)	188-066	8
Based on the results of th compliance with DEP Ru					e facility is fou	ind to be in	
Based on the results of the discrepancies were noted	•	its evalua				•	
COMPLIANCE REQU	IREMENT/PROBL				CTION RE		
they failed to	o notity in	1996	Notifi them is issued	ation 1994 Ju	708m 1997. June	s were Air ID	given # Wa
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	· · · · · · · · · · · · · · · · · · ·					į	
						i	
						}	
COMMENTS:							
	<i>:</i>						
							·
The Annual Compliance Certificat		ly certifie	d and submitte	d to the inspe	ctor. YE	S NO	<u></u>
DATE OF NEXT INSPECTION	:	(App	roximate				
INSPECTION CONDUCTED B	Y: Don's	0	<u> 71k</u>	(YSM)	E		
INSPECTOR'S SIGNATURE:	Downer SI	KARAS	rise Print)	ONE NUMB	ER. (56)	355-45	37

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

l.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	CABURS Enterprises Coop, DRA Word Cherne
2.	Site Name (For example, plant name or number):
	Vogue Cleaners
3.	Hazardous Waste Generator Identification Number:
4.	Facility Location: Street Address: 23034 90. St. Rd 3.
	Street Address: 23034 SD. St. Rd 7. City: POCH RAL County: Dalm Pon. Zip Code: 33438
5.	Facility Identification Number (DEP Use):
	0990502
•	Responsible Official
6.	Name and Title of Responsible Official:
0.	EUZABOTH COMPERA, MESICLUS
7.	
	Organization/Firm: Street Address: And as Asoul
	Street Address: County: Zip Code:
8.	Responsible Official Telephone Number: Telephone: (50) 48-066 Fax: () -
	Facility Contact (If different from Responsible Official)
	Name and Title of Facility Contact (For example, plant manager):
9.	Name and Title of Facility Contact (For example, plant manager).
10.	Facility Contact Address:
	Street Address:
	City: Zip Code:
11	Facility Contact Telephone Number:
	Telephone: () - Fax: () -
	PECEIVED

JUN 2 0 1997

Bureau of Air Monitoring & Mobile Sources

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Facility Information

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit		11/ .	,						
(1) w/ ref. condenser	1	444							
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit					•				ı
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		•						<u> </u>	
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									•
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									٠.
(b) Control devices are (c) No control devices 2.(a) What was the total of	are r	equired to be	installed		purchased in	the latest 12	mor	aths?	
(b) If less than 12 mont Check why it is less	hs, h	ow many? [_			_] New store	: [] Did	not k	eep records:	· []
3. What is the facility's so (Indicate with an "X".					nitions found	d in section (3	3) of	Part II?	
Existing small ar	ea so	urce []	Ne	w sn	nall area sour	rce 🔀			
Existing large are	ea soi	ırce []	Ne	w lai	ge area sour	ce []			

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 What control technology is required on machines pursuant to (Indicate with an "X".) 	section (5) of Part II of this notification form?
Existing large area source. Carbon adsorber Refrigerate	ed condenser
New small area source Refrigerated condenser	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall n to Rule 62-213.300, F.A.C. Verify that all steam and hot water exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total boiler HP or less), and (2) are fired exclusively by natural gas e during which propane or fuel oil containing no more than one p	except for periods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Record	keeping Information
Check all logs which are required to be kept on-site in accordan	ce with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	$\boldsymbol{\times}$
(b) Leak detection inspection and repair	<u>×</u> <u>×</u> <u>×</u>
(c) Refrigerated condenser temperature monitoring	·
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	. (\(\)
(f) Start-up, shutdown, malfunction plan	· K

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Surrender of Existing Air Permit(s)

se indicate	with an "X" the appropriate selection:
	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
4	No air permits currently exist for the operation of the facility indicated in this notification form.
	Demonstrate Official Continue
	Responsible Official Certification
	· · · · · · · · · · · · · · · · · · ·
this notific statements maintain th	rsigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ation. I hereby certify, based on information and belief formed after reasonable inquiry, that the made in this notification are true, accurate and complete. Further, I agree to operate and he air pollutant emissions units and air pollution control equipment described above so as to hall terms and conditions of this general permit as set forth in Part II of this notification form.
I will prom	ptly notify the Department of any changes to the information contained in this notification.
Signature	Ohn 5/20/97
	I, the unde this notific statements maintain th comply wit

DEP Form No. 62-213.900(2) Effective: 6-25-96 ARMS

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INSPECTION Q
AIRS ID#: 0990 502 DATE: 5/20/9 TIME IN: 10:50 TIME OUT: 11:20 FACILITY NAME: VOKUE CLEGNERS FACILITY LOCATION: 23037 S. SR7, bolor RATON, FE 33428
PART I: NOTIFICATION
(check appropriate box)
1. Existing facility notified DARM by 9/1/96
2. New facility notified DARM 30 days prior to starting
3. Facility failed to notify DARM to use general permit
PART II: CLASSIFICATION
Facility indicated on notification form that it is: (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) 7. 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)
3. Existing large area source 4. New large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" 91)<="" after="" before="" both="" dry-to-dry="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""></x<2,>
dry-to-dry only, 140 <x<2, 100="" 140<x<1,800="" 200<x<1,800="" both="" gal="" only,="" td="" transfer="" types,="" yr="" yr<=""></x<2,>
dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 140<x<2,="" 200<x<1,800="" 9="" 91)="" 91)<="" after="" before="" both="" dry-to-dry="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""></x<2,>
dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 140<x<2,="" 200<x<1,800="" 9="" 91)="" 91)<="" a="" after="" before="" both="" classification="" correct="" dry-to-dry="" facility="" gal="" is="" on="" only,="" or="" td="" this="" transfer="" types,="" yr=""></x<2,>

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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?

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ND YE

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 prior to September 22, 1993 installed

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 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?

 $AM\square$

ON ON/A

		<u>/</u>		_
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?	QΥ	□и	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?		ΩN	
	Is the temperature differential equal to or greater than 20° F?	ЦY	ПN	
ĵ.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is yenning to the adsorber, if machines are equipped with a carbon adsorber?	QΥ	ПN	□N/A:
	Is the perc concentration equal to or less than 100 ppm?	QΥ	ПN	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	ПN	N/Ą
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?		,	□N/A.
ó.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	ПN	ON/A
				!
P	ART V: RECORDKEEPING REQUIREMENTS			
	(as the responsible official: check appropriate boxes)			
l.	. Maintained receipts for perc purchased?	Θ¥	. □N	}
2.	Maintained rolling monthly averages of perc consumption?	4	- ОИ	
3.	. Maintained leak detection inspection and repair reports for the following:	(
ľ	a. documentation of leaks repaired w/in 24 hrs? or;	1/2×	ДИ	
-	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.		

1. Maintained receipts for perc purchased?	ek on :
2. Maintained rolling monthly averages of perc consumption?	TY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON
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 un
4. Maintained calibration data? (for direct reading instruments only)	OY ON ANA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON N/A
6. Maintained startup/shutdown/malfunction plan?	⊕X □N
7. Maintained deviation reports?	TAX □N
Problem corrected?	אם אל
8. Maintained compliance plan, if applicable?	DY ON DNA
	1
PART VI: LEAK DETECTION AND REPAIRS	

1. Does the responsible official conduct a weekly leak detection and repair inspection?

2. Which method of detection is used	by the respon	sible offici	ial?	1.75-2	•
Visual examination (conden			7	X	
Physical detection (airflow f			•		
Odor (noticeable perc odor)				1	
Use of direct-reading instru	nentation (FIL)/PID/calo	rimetric tubes)		N/A
If using direct-reading inst	rumentation,	is the equ	ipment:		7
a. Capable of detec	ting perc vapo	r concentr	ations in a range of 0-500 ppm?	□Y (A/N/A
b. Calibrated agair (PID/FID only)?		gas priorac	and after each use	□Y (N/A
c. Inspected for lea	ıks and obviou	s signs of v	wear on a weekly basis?	QY (N/A NC
d. Kept in a clean	and secure are	a when no	t in use?	QY (A/N_NC
e. Verified for acc	rracy by use of	duplicate	samples (calorimetric only)?	QY (N/A
3. Has the facility maintained a leak	log?			dr	אב
4. Does the responsible official chec	k the following	g areas for	leaks?	(
Hose connections, fittings, couplings, and valves	g X	ИO	Muck cookers	, OY	A M ZND
Door gaskets and seating	×	ИD	Stills	X	□N_NA
Filter gaskets and seating	**	ПN	Exhaust dampers	ΩY	AMA
Pumps	· X	ПΩ	Diverter valves	YY	A N_ND
Solvent tanks and container	s XX	ПN	Cartridge filter housing	s XY	A N ND
Water separators	X ₄	ИО		·	
& am			EVZIBRYCE	larev	x 488-1
Name of Responsible	Official (Signa	iture)	Name of Responsible Official		
Down CO	SIKAZU	JE	5/20/	97	
Inspector's Name (Please	se Print)		Date of Inst	ection	
Donaco	Sucar	νE	5/20/9	18	}
Inspector's Signatur			Approximate Date of	Next In	spection
condary Containment for: D	ry Cleanin	a Maahi	an C Character		Xes No
i i i i i i i i i i i i i i i i i i i	-1. OTEGUTII	A LECTIF		,	H []
			Waste area] X(
enogal of Water 5			Spotting area Seale	ea	1 1/4)
sposal of Water from Water				[] []
	or Waste_E	land 12%	Picksup Water)	~	/ r 1

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DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0990502 CABAS ENTERPRISES CORP ELIZABETH COHRERA 23037 SO SR 7 **BOCA RATON FL 33428** Do NOT Remove Label Dec Annual Reporting Period: Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule \square NO 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Exact period of non-compliance: from

Exact period of non-compliance: from Action(s) taken to achieve compliance:

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

Action(s) taken to achieve compliance:

Method used to demonstrate compliance:

Method used to demonstrate compliance:

RESPONSIBLE OFFICIAL: EUZSSEL CLINER

Name (Please Print)

Signature

^{*}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.

BEST AVAILABLE COPY

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

. . - .

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY RE-INSPECTION
	110AIRS ID#: 0990 502
TYPE OF FACILITY: Doy Cleans	x3
FACILITY NAME: VOGUE Cle	aners DATE: 7-29-98
FACILITY LOCATION: 23037 5,5	
Bola Raton,	FL 33428
RESPONSIBLE OFFICIAL: Sandy Cabre?	YaPHONE NUMBER: 488-0668
Based on the results of the compliance requirements e	valuated during this inspection, the facility is found to be in
compliance with DEP Rule 62-213.300, Florida Admi	n e e e e e e e e e e e e e e e e e e e
Based on the results of the compliance requirements e discrepancies were noted:	valuated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	1 FOLLOW-UP ACTION REQUIRED
COM BIFLIOD ICQUICEMENT IN NOBERIA	1 OBEOW OF RETION REQUIRED
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	- Ple Mis C
·	43° 1 1
	To The state of th
	Out to the
-	
COMMENTS:	
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	·
The Annual Compliance Certification form has been properly	certified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	My 1989
0.1/	(Approximate)
INSPECTION CONDUCTED BY:	ChoKshl (Place Print)
INSPECTOR'S SIGNATURE Q.V. Choks	(Please Print) 355-3070
Marector's SIGNATURE	PHONE NUMBER:

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

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TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION , U
AIRS ID#: 0990 502 DATE: 7-29-98 TIME IN: 9:45 TIME OUT: 10:10 FACILITY NAME: VOGUE CLEANERS FACILITY LOCATION: 23037 51. 5R7 BOCA RATON, FL 33428 RESPONSIBLE OFFICIAL: Sandy Cabrera PHONE: 488-0668 CONTACT NAME:
P
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. 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) Check appropriate box) 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)
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 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) (constructed on or after 12/9/91) 5. This is a correct facility classification ☐ The facility qualified for a general permit as number above 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. They install New Machine in oct 1997 They have not bought perc since them. Estimated 1 of 5 They 1998 Revised 8/11/97
for 1998

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?

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MO YO

DY ON ON/A

DY ON PANA

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?

אם אַעם

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

MY DN DN/A

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

DY ON ON/A

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

EY ON

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

MY ON ON/A

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

DY DN

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?	OY ON	
2.	Measured and recorded the washer exhaust temperature at the condenser	ם אם עם	NI/A
	inlet and outlet weekly?	ם יום, דם	IVA
	Is the temperature differential equal to or greater than 20° F?	OY ON O	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,	ם אם צִׁם	\ 7 /4
	if machines are equipped with a carbon adsorber?	ם אם גם	N/A
	Is the perc concentration equal to or less than 100 ppm?	ם 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 C	N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual	× .	
	condenser coils?	ם אם אם	IN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ם אם אם	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 averages of perc consumption?	אם צום		
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?	אומם מם צאב		
4. Maintained calibration data? (for applicable direct reading Instruments)	CY ON DINA		
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN PANIA		
6. Maintained startup/shutdown/malfunction plan?	MO YES		
7. Maintained deviation reports?	אואם אם אם		
Problem corrected?	אואם אם צום,		
8. Maintained compliance plan, if applicable?	בואָב, אם צם		

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair ПN inspection? ΩN 2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, DY ON ON/A Muck cookers DY DN DN/A couplings, and valves DY ON ONA MY ON ONA Stills Door gaskets and seating אואם אם צבא DY DN/EN/A Filter gaskets and seating Exhaust dampers DY ON ONA AVIO NO YM Diverter valves Pumps Cartridge filter housings AY ON ON/A Solvent tanks and containers OY ON ON/A MY ON ONA Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN . b. Calibrated against a standard gas prior to and after each use NO YO (PID/FID only)?

c. Inspected for leaks and obvious signs of wear on a weekly basis?

e. Verified for accuracy by use of duplicate samples (calorimetric only)?

d. Kept in a clean and secure area when not in use?

Responsible Official'	8	Name
(Please Print)		

RV Chokshi'
Inspector's Name (Please Print)

Inspector's Signature

Responsible Official's Signature

DY DN

DY DN

DY DN

Date of Transiti

Date of Inspection

Approximate Date of Next Inspection

ADDITIONAL SI	TE INFORMATION:			
1. Secondary	Containment for:	Dry Cleaning	Machine & Storage Waste area Spotting area Seal	
2. Disposal	of Water from Wate		sing approved evapo	
	`.	or contracte	d Wastewater servi	œ [1]
,	· ••			
			· · · · ·	
		·		
,				

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	AMMUAL	COMP	LAINT/DISCOVERY	RE-INSPECTION
TIME IN: 11:35	TIME OUT:/=	2:05	AIRS ID#:	990502
-	Dry Cleaning			
		FANE		DATE: 4-29-99
FACILITY LOCATION: 2	3037 South	1 Sta	75	41)
	Boca Raton	FL	33428	
RESPONSIBLE OFFICIAL:_E	Elizabeth C	abrez	PHONE NUMBER	2: <u>561-488-0668</u>
'UL	f the compl <u>i</u> ance requireme Rule 62-213.300, Florida A		ed during this inspection, the fa ive Code (F.A.C.).	cility is found to be in
		nts evaluat	ed during this inspection, the fo	ollowing compliance
discrepancies were no COMPLIANCE REC		r read - 1	FOLLOWITH A CO	CTON DROYED DO
COMPLIANCE REC	ZOTKENTENT/FROD	PEIAT	FOLLOW-UP ACT	TON REQUIRED
·				
		and the state of the state of		
•				
1				
			·	
			•	
	· ·			
COMMENTS:			<u> </u>	
COMMENTS:			•	
ů.	*	•		
	•		•	
The Annual Compliance Cer	tification form has been pro	perly certi	fied and submitted to the inspec	tor. YES NOX
DATE OF NEXT INSPEC	Λ.		2000	
	•	. ()	noravimata)	
INSPECTION CONDUCT	ED BY: R.V.	Chok	shi	
INSPECTOR'S SIGNATU	010/11	1 (P	ICASC I I III I	200 200
INSPECTOR'S SIGNATU	RE(L'V-Choly)	h	PHONE NUMBE	ER: 355-3070

ARM3

PERCHLOROETHYLENE DRY CLEANERS

TITLE VIGENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL

X

COMPLAINT/DISCOVERY

Q

RE-INSPECTION

AIRS ID#: 0990502 DATE: 4-29-99 TIME IN: 11:35 TIME OUT: 12:05					
FACILITY NAME: VOGUE CLEANEDS					
FACILITY LOCATION: 23037 South State Rowte 7					
BOCA RATON, FL 33428					
RESPONSIBLE OFFICIAL:PHONE:					
CONTACT NAME: SElizabeth Cabreva PHONE: -488 - 0668					
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) □ No notification form □ Drop store/out of business/petroleum					
1. Existing small area source					
3. Existing large area source ☐ 4. New large area source ☐ dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 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 So faz 1999 = 10 998					

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?

DY ON ON/A

DY ON ON/A

ND YES

AND NO YD

DY DN PN/A

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? PY ON

DY ON ON/A

.

DY ON ON/A

ZY ON

ZY ON ON/A

2Y = 1

_			
ช.	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?		N
2.	Measured and recorded the washer exhaust temperature at the condenser		
	inlet and outlet weekly?		A/ND N
	Is the temperature differential equal to or greater than 20° 52	OY O	N DN/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,	D., D.	
	if machines are equipped with a carbon adsorber?	UY U	AIND N
	Is the perc concentration equal to or less than 100 ppm?		N DN/A
١.			
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?	nv n	N □N/A
	or expansion, and downstream from no outer finet:	G 1 G	N CINA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual		
	condenser coils?		N DN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?		AVA N
<u> </u>			

Control of the Contro	
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?	ØY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	A/NO NO YE
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? Ger applicable direct reading instruments)	אואבע אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN ØN/A
6. Maintained startup/shutdown/malfunction plan?	אס אס
7. Maintained deviation reports?	AND ND YA
Problem corrected?	AY ON ON/A
3. Maintained compliance plan, if applicable?	DY DN ZNA

	VI. LEAR DETECTION AND A					
I. Doe	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
insp	ection?			<oy on<="" td=""></oy>		
2. Has	the facility maintained a leak log?	٠.		DY ON		
3. Do	es the responsible official check the	following areas for lea	ks?			
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	DY DN DN/A		
	Door gaskets and seating	AIND אם אם	Stills	DY ON ON/A		
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY ON ONA		
	Pumps	DY ON ONA	Diverter valves	AND NO PE		
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housing	ngs DY ON ON/A		
	Water separators	אותם אם צם				
4. W	nich method of detection is used by	the responsible official	?			
	Visual examination (condensed solvent on exterior surfaces)					
	Physical detection (airflow felt through gaskets)					
	Odor (noticeable perc odor)					
	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)					
	Halogen leak detector					
	If using direct-reading instrumentation, is the equipment:					
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					
	b. Calibrated against a (PID/FID only)?	a standard gas prior to a	nd after each use	מם עם		
	c. Inspected for leaks	and obvious signs of w	ear on a weekly basis?	DY DN		
	d. Kept in a clean and	l secure area when not i	n use?	מם עם		
	e. Verified for accura	cy by use of duplicate s	amples (calorimetric only)?	אם צם		
	•	_				
<u> </u>						

Responsible Official's Name (Please Print)

R. V. Chotshi.

Inspector's Signature

Responsible Official's Signature

 $\frac{4-29-99}{\text{Date of Inspection}}$

Approximate Date of Next Inspection

DDITIONAL SITE INFORMATION:
Yeg NO Secondary Containment for: Dry Cleaning Machine & Storage area [] [] Waste area [] [] Spotting area Sealed [] []
2. Disposal of Water from Water Separator using approved evaporator [] {] or contracted Wastewater service [] []
MIF picks up the waste who

		ALITY GENERAL PERMI SUMMARY REPORT	T - ""
TYPE OF INSPECTION:	ANNUAL 📈	COMPLAINT/DISCOVERY	RE-INSPECTION [
TIME IN: 9: 30	TIME OUT: 10	: 15 AIRS ID#:	0990502
TYPE OF FACILITY: Dey	CLANE JG		
FACILITY NAME: Voyu			DATE: 3/23/00
FACILITY LOCATION: 23	037 South SR	7	
	RATOJ, F/ 3342	8,	
RESPONSIBLE OFFICIAL: E.	lizabeth (Abeeca	PHONE NUMB	ER: 488 -0668
4	compliance requirements e e 62-213.300, Florida Adm	evaluated during this inspection, the inistrative Code (F.A.C.).	facility is found to be in
discrepancies were noted:	•	valuated during this inspection, the	following compliance
COMPLIANCE REQUI	REMENT/PROBLEM	FOLLOW-UP AC	TION REQUIRED
•			70 m
	:	a Mobil	APR 12
		Sources	2000 E U
	•	950	
OMMENTS:			
: *			
,			
ne Annual Compliance Certification	form has been properly cert	ified and submitted to the inspector.	YES NO
ATE OF NEXT INSPECTION:		Aech 2001	
		pproximate)	
SPECTION CONDUCTED BY:_		Rey Direk Please Print)	

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

	ANNUAL RE-INSPECT	ΓΙΟΝ	٦	COMPLA	AINT/DISC	OVERY	
AIRS ID#: <u>0990 502</u> DAT	, ,	,	_ TIMI	E IN: 9:30	TIM	E OUT: _/	0:15
FACILITY NAME: Vogus	CLEANER:	<u> </u>			.		-
FACILITY LOCATION: 23			tate Ro	17			
·	CA RATO						
RESPONSIBLE OFFICIAL : F/:	zaheth Ca	Berea		PHONE: _	488 -	0668	·
				PHONE: _		<u>.</u>	
PART I: NOTIFICATION		· · ·				2000	
(check appropriate box)							
New facility notified DARM 30 da	us prior to st	artun					
	•	•					
2. Facility failed to notify DARM to t	ise general p	еппи					
PART II: CLASSIFICATION				<u> </u>			e.1-
Facility indicated on notification for	m that it is:			□ No notifi	cation form	n	
(check appropriate box)				☐ Drop stor			oleum
A. 1. Existing small area source		2. Ne	y small:	area source.)XÍ	
dry-to-dry only, x < 140 gal/yr		dry-to	-dry only	x, $x < 140$ gal/y.			
transfer only, x < 200 gal/yr			• •	< 200 gal/yr			
both types, x < 140 gal/yr (constructed before 12/9/91)				140 gal/yr or after 12/9/9	1)		
3. Existing large area source		4 No	w lorge o	rea source	Г	_	
dry-to-dry only, $140 \le x \le 2,100$ ga				$140 \le x \le 2,10$			
transfer only, $200 \le x \le 1,800$ gally	-	-		$00 \le x \le 1,800$		-	
both types, $140 \le x \le 1,800$ gal/yr		-	•	$\leq x \leq 1,800 \text{ ga}$			
(constructed before 12/9/91)		(consti	ructed on	or after 12/9/9	1)		
5. This is a correct facility classifica	tion	XY	ΠN	□Can not de	termine		
If no, please check the appropr	riate classific	ation:					·
☐ facility quali	fied for a ger	neral per		mber			
☐ facility exceed	eds above lin	nits and i	is not elig	ible for a gener	al permit		
The total quantity of perchloroethyle facility was 40 gallons. mass	ene (perc) pu よった。	rchased	within the	e preceding 12	months by	this dry cl	eaning

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) XY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? MY 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 XY ON ON/A 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? DY DN XIN/A 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 cheeked, 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) XY ON 1. Equipped all machines with the appropriate vent controls? \mathbf{X} Y \square N \square N/A 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 MY ON ONA condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated AY DN condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the AYO NO YE condenser exceeded 45° F? Conducted all temperature monitoring after an appropriate cooldown period and after XIY DN verifying that the coolant had been completely charged?

]	B. Has the responsible official of an existing large or new large area source also:	
]	. 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?	OY ON
2	. Measured and recorded the washer exhaust temperature at the condenser	
	inlet and outlet weekly?	DY DN DN/A
	Is the temperature differential equal to or greater than 20° F?	OY ON ON/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 adsorder?	OY ON ON/A
	Is the perc concentration equal to ox less than 100 ppm?	DY DN DN/A
4.	Assured that the sampling port on the parbon 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 ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OA OM OWY
6.	Routed airflow to the carbon adsorber (if used) at all times?	DY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased? Not Affilty	MA DN
2. Maintained rolling monthly total of perc consumption?	AA DN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם ציאל
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	> Y □N □N/A
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON XINA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON X N/A
6. Maintained startup/shutdown/malfunction plan?	X Y ON
7. Maintained deviation reports?	AY ON ON/A
Problem corrected?	אואם אם ציאל
8. Maintained compliance plan, if applicable?	DY DN XVIVA

YD	DITIONAL	SITE INFORMAT						
				,				-
1.	Samilar Samilar	~r Containment	- for:	מית ב	eaning M	achine & Storage area	Yes IV 1	α <i>α</i> : 1
Α.	accusam.	y willeans.	101	my		aste area	ľXj ľXj	[]
					••	potting area Sealed	[X] [V]	r
					ے۔	Decing area many	1	L
	•							
					. •	•		
	·					·		
		:					٠	
		• •				•		
2.	Disposal	of Water from	n Water	r Separa	tor using	g approved evaporator	[]	KI
	· .					astewater service	[]	[]
		`\		•	:		χ,	
		~				1 ,,		
		(A) MCF	7:ck	s up 11	he waste	e sludge And the		
	·)	WASH	wate.	е.		•		
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1. Does the responsible official-conduc	ta-weekly (for small sour	ces, bi-weekly) leak detection	and repair
inspection?			MD YX
2. Has the facility maintained a leak log	?		MD Y
3. Does the responsible official check the	ne following areas for leal	ks?	
Hose connections, fittings, couplings, and valves	X Y ON ON/A	Muck cookers	□Ү □И 🕅 ИІА
Door gaskets and seating	אואם אם איש	Stills	XIY ON ON/A
Filter gaskets and seating	אומם מם צ ואל	Exhaust dampers	ANN NO YO
Pumps	MY ON ONIA	Diverter valves	אואם אם צוא
Solvent tanks and containers	AVA NO YX	Cartridge filter housings	אואם אם צוא
Water separators	ANO NO YX		
1. Which method of detection is used by	the responsible official?		
Visual examination (condensed :	solvent on exterior surfac	es) .2~	×
Physical detection (airflow felt the	rough gaskets)		×
Odor (noticeable perc odor)	· .		N
Use of direct-reading instrument	ation (FID/PID/calorimen	ric tubes)	XI WA
Halogen leak detector			× va
If using direct-reading instr	umentation, is the equip	oment:	X N/A
a. Capable of detecting	perc vapor concentrations	s in a range of 0-500 ppm?	DY DN
b. Calibrated against a s (PID/FID only)?	tandard gas prior to and a	after each use	DY DN
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)?	אם אם
Elizebati Obj		Responsible Office	rial's Sim
(Please Print)	•		~ Digit
Inspector's Name (Please Prin	t)	Date of Inspection	·
Quan Dunk		MARCH 20	00/

OCC.P.	_	LITY GENERAL PERMIT- SUMMARY REPORT	
TYPE OF INSPECTION:	• •	COMPLAINT/DISCOVERY	RE-INSPECTION
TIME IN:	TIME OUT:	AIRS ID#: 0 C	790 502
TYPE OF FACILITY:) ~ Cleaning	·- 	
FACILITY NAME:	Logue Cleans	•	DATE: A. 8 C
FACILITY LOCATION:	23037 SR7	Bora Roton 33426	
RESPONSIBLE OFFICIAL:	ifabeth Cabrere	PHONE NUMBER:	468 0668
compliance with DEP Re	ıle 62-213.300, Florida Admir	valuated during this inspection, the facil nistrative Code (F.A.C.). valuated during this inspection, the follo	:
discrepancies were noted	-	· .	wing compnance
COMPLIANCE REQU	IREMENT/PROBLEM	FOLLOW-UP ACTIO	N REQUIRED
Resolution		•	
•			
	•		
	•		
OMMENTS:			
			•
ne Annual Compliance Certification	ı form has been properly certif	fied and submitted to the inspector.	YES NO
ATE OF NEXT INSPECTION:_		proximate)	
SPECTION CONDUCTED BY:	h Liebl	· · · · · · · · · · · · · · · · · · ·	
SPECTOR'S SIGNATURE:	: Plu	ease Print) Output PHONE NUMBER: 3	55 3070.

BEST AVAILABLE COPY

PERCHLOROETHYLENE DRY CLEANERS

TITLE VIGENERAL PERMIT COMPLIANCE INSPECTION CRECKLIST

TYPE OF INSPECTION:	ANNUAL		COMPLAINT/DISC	OVERY C	1
RSCOAP	RE-INSPECTION	а			
AIRS ID#: 0 9 9 0 502	DATE:	TIME IN	:TIM	E OUT:	
FACILITY NAME:V	oque Clear	400)			
FACILITY NAME:V	⁰ 23037 S	R7	Bock Ruton	33428	
RESPONSIBLE OFFICIAL:	Elizabeth (ubrer a	PHONE: 408	0668	·
CONTACT NAME:			PHONE:		
		the party for the same			54) / mark 20 . mark
PART I: NOTIFICATION					
(check appropriate box) .					
1. New facility notified DARM	l 30 days prior to startup				
2. Facility failed to notify DAF	RM to use general permit		ż.,		a .
		Carried Street, Street			TAX SALES OF THE
	<u> </u>	·	27.7.2		••• <i>i</i> •
PART II: CLASSIFICATIO	N .	· · · · · · · · · · · · · · · · · · ·	2010		
PART II: CLASSIFICATION Facility indicated on notificate (check appropriate box) A.			☐ No notification fo		um
Facility indicated on notificat	ion form that it is: ree	ansfer only, x oth types, x <	☐ Drop store/out of rea source x < 140 gal/yr < 200 gal/yr		um
Facility indicated on notificat (check appropriate box) A. 1. Existing small area sou dry-to-dry only, x < 140 gat transfer only, x < 200 gally both types, x < 140 gallyr	ion form that it is: ree	ry-to-dry only, ansfer only, x oth types, x < constructed on . New large a ry-to-dry only ransfer only, 20 oth types, 140	Drop store/out of rea source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	business/petrole	um
Facility indicated on notificate (check appropriate box) A. 1. Existing small area soundry-to-dry only, x < 140 gaintransfer only, x < 200 gally both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area soundry-to-dry only, 140 < x < 1,800 transfer only, 200 < x < 1,800 both types, 140 < x < 1,800 transfer only, 200 t	ion form that it is: ree	ry-to-dry only, ansfer only, x oth types, x < constructed on . New large a ry-to-dry only ransfer only, 20 oth types, 140	□ Drop store/out of rea source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91) rea source 140 ≤ x ≤ 2,100 gal/y ≤ x ≤ 1,800 gal/yr ≤ x ≤ 1,800 gal/yr	business/petrole	um
Facility indicated on notificate (check appropriate box) A. 1. Existing small area soundry-to-dry only, x < 140 gate transfer only, x < 200 gally both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area soundry-to-dry only, 140 \le x \le 1,800 (constructed before 12/9/9) 5. This is a correct facility If no, please check the	ion form that it is: ree	ry-to-dry only, ansfer only, x oth types, x < constructed on . New large a ry-to-dry only cansfer only, 20 oth types, 140 constructed on	□ Drop store/out of rea source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91) rea source 140 ≤ x ≤ 2,100 gal/yr 00 ≤ x ≤ 1,800 gal/yr or after 12/9/91) □ Can not determin	business/petrole	um

Daniel C(157)

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN DN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? MY 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 ZY ON ON/A 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? DY DN DN/A PART IV: PROCESS VENT CONTROLS In Part II-A: If classification I 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) DY ON 1. Equipped all machines with the appropriate vent controls? DY ON ON/A 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 DY DN DN/A 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 DY ON ON/A condenser exceeded 45°F? Conducted all temperature monitoring after an appropriate cooldown period and after אם עם verifying that the coolant had been completely charged?

E	3. 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?	$\Box \lambda$	ПN	
2	. Measured and recorded the washer exhaust temperature at the condenser			
	inlet and outlet weekly?	ΠY	ΠN	□N/A
	ls the temperature differential equal to or greater than 20 F?	ΠY	ΠN	□N/A
	Managed and recorded the management on in the public place weekly			
∦3.	Measured and recorded the perc concentration in the exhaust stream weekly			
ll .	at the end of the final drying cycle while the machine is venting to the adsorber,			
	if machines are equipped with a carbon adsorber?	ЦY	UИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	□N	□N/A
ĺ.				
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring			
	perc concentrations is at least 8 duct diameters downs ream 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?	ΠY	ПN	□N/A
_				
٥.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
	condenser coils?	ΠY	ПN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ПΥ	ΠИ	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם עם
2. Maintained rolling monthly total of perc consumption?	DY ON
3. Maintained leak detection inspection and repair reports for the following:	,
a. documentation of leaks repaired w/in 24 hrs? or;	MY 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?	אוחם אם צוש
4. Maintained calibration data? (for applicable direct reading instruments)	אואפו אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	אואקלי אם צם
6. Maintained startup/shutdown/malfunction plan?	אם עוש
7. Maintained deviation reports?	AY ON ON/A
Problem corrected?	אואם אם צם
8. Maintained compliance plan, if applicable?	OY ON ON/A

AD.	DITIONAL SI	TE INFORMATI	ON:		· •				
1.	Secondary	Containment	for:	Dcy	Cleaning	Machine & Stora Waste area Spotting area S		Yes	00/
									•
2.	Disposal o	 f Water from				ing approved eva Wastewater ser :		Ϋ́I	(T) []
	,	:	:						
		· · ·				evner.	•	·	
					•				

		ces, bi-weekly) leak detection	and repair
inspection?		•	MY ON
2. Has the facility maintained a leak log	?	• •	OY ON
3. Does the responsible official check the	ne following areas for lead	cs?	
Hose connections, fittings, couplings, and valves	איחם אם אַע	Muck cookers	DY DN TANA
Door gaskets and seating	אואם אם צום	Stills	DY ON ON/A
Filter gaskets and seating	אואם אם צום	Exhaust dampers	DY DN DN/A
Pumps .	אוחם אם עצ	Diverter valves	אותם אם צום,
Solvent tanks and containers	ארם אם Y	Cartridge filter housings	MY ON ON/A
Water separators	אואם אם צבל		
1. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surfac	ės)~	6
Physical detection (airflow felt to	hrough gaskets)		Ø
Odor (noticeable perc odor)		•	4
Use of direct-reading instrument	ation (FID/PID/calorimen	ric tubes)	MAIA
Halogen leak detector	·		AND
If using direct-reading instr	umentation, is the equip	oment:	□N/A
a. Capable of detecting	perc vapor concentrations	s in a range of 0-500 ppm?	DY DN
b. Calibrated against a s (PID/FID only)?	standard gas prior to and a	ifter each use	חס מס
c. Inspected for leaks ar	nd obvious signs of wear o	on a weekly basis?	אם צם
d. Kept in a clean and s	ecure area when not in use	e? .	DY DN
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	DY DN
		A 810001	eln Gb
onsible Official's Namo (Please Print)	 , ;	Responsible Offic	cial's Sign
Inspector's Name (Please Prin		Date of Inspection	01
mller !	,	Date of hispection	0 ~
Inspector's Signature			ext Inspection

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ıo	Restricted Delivery Fee]		
199	Return Receipt Showing to Whom & Date Delivered					
, Apri	Return Receipt Showing to Whom, Date, & Addressee's Address					
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PS Form 3800 , April 1995	Postmark or Date					

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AIRS ID # 0990480 COMMERCE DRY CLEANERS BHUPENDRA PATEL 880 JUPITER PARK DRIVE #1	: :
JUPITER FL 33458	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
}	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service Jabel) 2333667346	
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789

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DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400 DARM/MOBILE SOURCE CONTROL PROGRAM DEPT. OF ENVIRONMENTAL PROTECTION MAIL STATION 5510 POLICY OF TALLAHASSEE, FLORIDA 32399-24000 PAR MONTROL PROGRAM PRODUCTION OF TALLAHASSEE, FLORIDA 32399-24000 PAR MONTROL PROGRAM PROTECTION OF TALLAHASSEE, FLORIDA 32399-24000 PAR MONTROL PROGRAM PROTECTION OF TALLAHASSEE, FLORIDA 32399-24000 PAR MONTROL PROTECTION OF TALLAHASSEE, FLORIDA AND PAR MONTROL PROTECTION OF TALLAHASSEE, FLORIDA AN 01

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1. Article Addressed to: 10 AIRS ID # 0990502 ELIZABETH CABRERA VOGUE CLEANERS 23037 SO SR 7 BOCA RATON FL 33428	If YES, enter delivery address below: ☐ No
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	4. Restricted Delivery? (Extra Fee) ☐ Yes
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BOCA RATON FL 33428	3. Service Type Certified Mail
2. Article Number (Copy from service label) 2 210 662 4 35	
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VOGUE CLEANERS

AIRS ID # 0990502

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Obj.: 002273



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