

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

October 15, 1998

Mr. Patel Alpesh Wellington Home Laundry & Cleaners 11360 Fortune Circle, Suite E-2 Wellington, Florida 33414

Re: Facility No.: 0990558

Dear Mr. Alpesh:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 30, 1998.

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"

0990558 4. Add County 1(a) Add date control clevice installed or if no control device, list date by (3) w/ no controls. 4. Existing large area source R.C. should not be marked Warb out and initial. (c) that required. Responsible Official sign and date for changes.

Perchloroethylene Dry Cleaning Facility Notification **Facility Name and Location** 1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): Facility Location: Street Address: County: Responsible Official Name and Title of Responsible Official: Responsible Official Mailing Address: Organization/Firm: Street Address: City: Zip Code: 8. Responsible Official Telephone Number: Fax: (56) 790-4453 (561)798-4444, Telephone: Facility Contact (If different from Responsible Official) Name and Title of Facility Contact (For example, plant manager): 10. Facility Contact Address: Street Address: City: County: Zip Code: 11. Facility Contact Telephone Number: Telephone: (Fax: ())

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

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.

Example #// Dry-to-Dry Unit (1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls Washer Unit (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls Dryer Unit (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 (b) Control devices are required. (c) No control devices are 2.(a) What was the total quantal gall gall gall gall (b) If less than 12 months, In the Check why it is less than 3. What is the facility's source	Initi	e chine ially chased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
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(b) Control devices are requested. (c) No control devices are 2.(a) What was the total quantage of the control of the contro									
	antity of	red to be f perchlo 80	installed [perc)	purchased in	ight the	e (Susian	Jan. 19
(Indicate with an "X". Sele Existing small area so Existing large area so	elect one	classifi	cation only.) Ne	w sm	nitions found all area sour ge area sour	ce []	3) of 1	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines pursuant to section (5) (Indicate with an "X".)	of Part II of this notification form?
Existing large area source Carbon adsorber Refrigerated condens	er 🕌
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall not be eligib to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total heat input boiler HP or less), and (2) are fired exclusively by natural gas except for puduring which propane or fuel oil containing no more than one percent sulfit	eriods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Recordkeeping In	formation
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	
(b) Leak detection inspection and repair	\subseteq
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

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

Surrender of Existing Air Permit(s)

Please indicate	e 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)
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifi statement maintain i	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form.
I will proi	nptly notify the Department of any changes to the information contained in this notification.
Signature	Alc. 17 Date

BEST AVAILABLE COPY

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:55 TIME OUT: 11:40	0AIRS ID#: 0990558
TYPE OF FACILITY: Doy Cleaning	<u>-</u>
FACILITY NAME: Wellington Home	aundry & cleans DATE: 9-23-98
	ine Circle
· Willington, FL	- 334/4
RESPONSIBLE OFFICIAL: A pesh Pate	PHONE NUMBER: 798-4444
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evalua discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
Asked to Seal Spotting	DEP will be informed
area As soon as possible	
Also asked to keep alea Clean & dry in Secondary Contein. ment and around Containment	
Clean & dry in Secondary Contein.	ļ ⁻
ment and around containment	,
•	P
	S. T. S.
	The Source of th
	Contraction of the contraction o
•	₹ *
COMMENTS:	
The Annual Compliance Certification form has been properly certification	Sied and submitted to the inspector YES NOW
Gat 1	999
DATE OF NEXT INSPECTION: (A)	pproximațe)
INSPECTION CONDUCTED BY: RUCh	lease Print)
INSPECTOR'S SIGNATURE A - Chorshe	PHONE NUMBER: 355-3070

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ARM	5
<i>/</i> '	

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION

<u>an agran, a francis e sacrate e cara sua francis e cara e consecuencia de la consecuenci</u>	the second secon	
	78 TIME IN: 10:55 TIME OUT: 11:40	
FACILITY NAME: Wellington	Home Launday & cleeners	
FACILITY LOCATION: 113 60 - 1	=2 Fortune Circle	
1.101/2 along	E) 32/11/1	
[Dellagton	, FC 33414	
RESPONSIBLE OFFICIAL: Alpesh	Pate/ PHONE: 798-4444	
CONTACT NAME:	PHONE: -4445	
CONTACT NAME:	PHONE:	
	·	
PART I: NOTIFICATION		
(check appropriate box)		
1. New facility notified DARM 30 days prior to star	tup	
2. Facility failed to notify DARM to use general permit		
PART II: CLASSIFICATION	New owner	
Facility indicated on notification form that it is:	No notification form Helped fill No	
(check appropriate box)	☐ Drop store/out of business/petroleum	
A. ,	•	
1. Existing small area source	2. New small area source	
dry-to-dry only, x < 140 gal/yr	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	both types, x < 140 gal/yr	
(constructed before 12/9/91)	(constructed on or after 12/9/91)	
3. Existing large area source	4. New large area source	
dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$	dry-to-dry only, $140 \le x \le 2,100$ gal/yr	
transfer only, $200 \le x \le 1,800$ gal/yr	transfer only, $200 \le x \le 1,800$ gal/yr	
both types, $140 \le x \le 1,800$ gal/yr	both types, $140 \le x \le 1,800 \text{ gal/yr}$	
(constructed before 12/9/91)	(constructed on or after 12/9/91)	
5. This is a correct facility classification	Y DN DCan not determine	
If no, please check the appropriate classific	ation:	
facility qualified for a get	neral permit as number above	
☐ facility exceeds above lin	nits and is not eligible for a general permit	
R. The total quantity of perchloroethylene (perc) at	irchased within the preceding 12 months by this dry cleaning.	
	30 Since the owner has bou	

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? 2. Examining the containers for leakage? □N □N/A 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN QN/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? אם צם 2. Equipped dry-to-dry machines with a closed-loop yetpor venting system? Y ON ON/A 3. Equipped the condenser with a diverter valve so airflow will be directed away from the ФY □N □N/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated DY ON 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? □N □N/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after DY DN verifying that the coolant had been completely charged?

_		
В.	Has the responsible official of an existing large or new large area source also:	
١,	Managed and recorded the exhaust temperature on the outlet side of the condensar located	
١.	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
۱,	Measured and recorded the washer exhaust temperature at the condenser	
4.	•	_
	inlet and outlet weekly?	OY ON ON/A
1		
	Is the temperature differential equal to or greater than 20° F?	OY ON ON/A
1		
1	Measured and recorded the perc concentration in the exhaust stream weekly	•
٦.		
	at the end of the final drying eycle while the machine is venting to the adsorber,	
	if machines are equipped with a carbon edsorber?	OY ON ON/A
	Is the perc concentration equal to or less than 100 ppm?	QY QN QN/A
	Assured that the sampling port on the carbon adsorber exhaust for measuring	
4.		
	perc concentrations is at least 8 duet 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?	DY DN DN/A
	or expansion, and downstream from no other finet?	GI UN UNA
	<u> </u>	
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual	
	condenser coils?	DY DN DN/A
	condense cons:	ar an ana
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A
	(1)	
느		

Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? NO YO 2. Maintained rolling monthly total of perc consumption? ФY OИ 3. Maintained leak detection inspection and repair reports for the following: TY 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 DIY DN DN/A and parts installed w/in 5 days of receipt? DY DN ZÎN/A 4. Maintained calibration data? (for applicable direct reading instruments) DY DN ØN/A 5. Maintained exhaust duct monitoring data on perc concentrations? ØY □N 6. Maintained startup/shutdown/malfunction plan? DY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS

7. Maintained deviation reports?

Problem corrected?

8. Maintained compliance plan, if applicable?

DY DN DN/A

DY DN PN/A

PART	VI: LEAK DETECTION AND	REPAIRS			
I. Doe	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
insp	ection?			MY ON	
2. Has	the facility maintained a leak log?	•		AY ON	
3. Doe	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 ON/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	MY ON ON/A	Diverter valves	MY ON ON/A	
ĺ	Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	MY ON ON/A	
	Water separators	ZY ON ON/A			
4. Wh	ich 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)			PAR	
	Halogen leak detector			DY IK	
	If using direct-reading instrumentation, is the equipment:			ĎN/A	
	a. Capable of detecting	perc vapor concentrations i	in a range of 0-500 ppm?	OY ON	
-	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?			מם צם	
5	c. Inspected for leaks and obvious signs of wear on a weekly basis?			מם צם	
	d. Kept in a clean and secure area when not in use?				
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?			OY ON	

PATEL ALPESH S.
Responsible Official's Name
(Please Print)
R.V. Chokshi
Inspector's Name (Please Print)

Inspector's Signature

Responsible Official's Signature

9-23-98

Date of Inspection

Approximate Date of Next Inspection

1. Secondary Containment for: Dry Cleaning Machine & Storage area [/] [] Waste area Spotting area Sealed [] The Asked to seal Spotting area as soon as pessible 2. Disposal of Water from Water Separator using approved evaporator [] [] or contracted Wastewater service [] [] Safety [Clean pich up the Waste to keep Explained & Record & Leak Check & Temp Monitoring for Condensor weekly Asked to Record & Perc Purc Purchase on Explained That Record keeping [s mandatory by State & Florida Law Asked to clean floor around dry cleaning Machine Floor has some black Tar sports [may be coming man Floor has some black Tar sports [may be coming man Also asked to dry & area in the Secondary Containment		ADDITIONAL SITE INFORMATION:	1
2. Disposal of Water from Water Separator using approved evaporator II [] or contracted Wastewater service [] [] Safety [Cheen pich, up The Wester to keep to keep for Condenser Weekly for Condenser Weekly Asked to Record of Perc Purc Purchase on Form Form Figure of That Record keeping is mandatory by State of Florida Law Asked to clean ploor around dry cleaning Mahine Floor has some black Tar spots (may be coming round) Mick cocker ets Mick of the contractor of the contractory Mick occuping the contractory Mick occuping the ping is mandatory Still-Mick occuping the ping is mandatory The ping is the ping is mandatory All the ping is mandatory The ping is the ping is mandatory The ping is mandatory The ping is the ping is mandatory The ping is mandatory The ping is the ping is mandatory The ping is the ping is mandatory The ping is the ping is the ping is mandatory The ping is the p		1. Secondary Containment for: Dry Cleaning Machine & Storage area [/] [] Waste area [/] []	
2. Disposal of Water from Water Separator using approved evaporator II [] or contracted Wastewater service [] [] Safety [Cheen pichs. Cys The Waste When Called to keep Explained & Record Leak Check & Temp Monitoring for Condensor Weekly Asked to Record of Perc Purc Purchase on Form Explained That Record Keeping is mandatory by State of Florida Law Asked to clean floor around dry cleaning Machine Floor his some black Tax spots (may be coming from Mick cocknets	77	Asked to seal spotting area as soon as possible	
Safety Chean pichs up the Waster Safety Chean pichs up the Waster to keep to keep Explained & Record & Leak Check & Temp Monitoring for Condonser weekly Asked to Record & Perc Purchase on Form Explained That Record keeping is mandatory by State & Florida Law Asked to clean floor around dry cleaning Machine Floor has some black Tar spots - may be coming from Still-Mark cocker etg Muck cocker etg			
Explained & Record Leak Check & Temp Monitoring for Condonser weekly Asked to Record of Perc Purchase on Form Explained That Record keeping is mandatory by State of Florida Law Asked to clean floor around dry cleaning Marhine Floor has some black Tar spots - (may be coming from Mick cocker etc.)			
Explained & Record Leak Check & Temp Monitoring for Condonser weekly Asked to Record of Perc Purchase on Form Explained That Record keeping is mandatory by State of Florida Law Asked to clean floor around dry cleaning Markine Floor has some black Tar spots - (may be coming from Mick cocker etc.)		Safety Clean pichs up The Weste	
Form Explained That Record Keeping is mandatoxy by State of Florida Law Asted to clean floor around dry cleaning Machine Floor has some black Tax spots - (may be coming from Muck cocker etg Muck		Explained Record Leak Check & Temp Monitoring	
Explained That Record Keeping is mandatory by State of Florida Law Floor has some black Tax spots - (may be coming from The Still-Mack cocker ety Muck	(X)	for Condenser Weekly Asked to Record of Perc Purchase on	
Asted to clean floor around dry cleaning Machine Floor has some black Tar spots - (may be coming from 5+111-Mack cocker etg Muck	1	tam.	osy
As ted to clean floor around dry cleaning Mathine Floor has some black Tar spots - (may be coming from 54111- Muck cocker etg Muck Also asked to dry & area in the Secondary Containment		by state of Florida Law	
I Also asked to dry & area in the Secondary Coritainmen	7	Asted to Clean floor around dry cleaning Me Floor has some black Tar spots - may be coming.	rom rety
a dry cleaning Machine -(man be Water - The not kn	7	Also asked to dry dare in the Secondary Coritor of dry Cleaning Marchine - (may be Water- I do	inmen not kn

Lake Worth. 969 0066 641 0268 Foned- Hill Mill. Fonest. 498 0505 - Linton Blud. 998 006 Yamte -M. Road

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TITLE VAIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

BEST AVAILABLE COPY

YPE OF INSPECTION: ANNUAL	X	COMPLAINT/DI	SCOVERY	RE-I	NSPECTION
TIME IN: //: 20 TIM	E OUT: /2:	10	AIRS ID#:	0990558	
TYPE OF FACILITY: Dey Cleaning	j			•	
ACILITY NAME: Wellington Ho.		+ CLEANCES		DATE:_	1/29/00
ACILITY LOCATION: 1/360 -	•				
· Wellington					•
RESPONSIBLE OFFICIAL: Alpesh 7	,		_РНОМЕ МИМВЕ	R: 798 -	4444
Based on the results of the compliance compliance with DEP Rule 62-213.30 Based on the results of the compliance discrepancies were noted:	00, Florida Admii e requirements ev	nistrative Code (F valuated during th	.A.C.). is inspection, the f	ollowing com	pliance
COMPLIANCE REQUIREMENT	[/PROBLEM	r For	LOW-UP AC	TION REQ	URED
		1	•		
•		~		70	
	·		FEB ureau of A & Mobil	0	•
	• . •		9 200 ir Monitori e Sources	<	•
		• • • • • • • • • • • • • • • • • • •	: ਲੋ		
	•			• .	
•	-				
COMMENTS:			•		
		• .			
The Annual Compliance Certification form has	been properly c	ertified and submit	ned to the inspecto	or. YES[
DATE OF NEXT INSPECTION:		(Approximate)			
INSPECTION CONDUCTED BY:	•	ffre / Dizak (Please Print)		•	
INSPECTOR'S SIGNATURE: Quin	Dinde	. P	HONE NUMBER	:: <u>355 - <i>3</i>0</u>	70 XT 1139

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECT	COMPLAINT/DISCOVERY
AIRS ID#: 0990558 DATE: 1/28	00 TIME IN: 11: 20 TIME OUT: 12: 10
FACILITY NAME: Welling to I thone	LAUNCE, Md Cleanels
FACILITY LOCATION: //360 E3	FORTURE CIRCLE
Welling to	J F1 33414
RESPONSIBLE OFFICIAL: Alpesh Pa	PHONE: 798 - 4444
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
New facility notified DARM 30 days prior to st	
2. Facility failed to notify DARM to use general po	ermit
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box)	☐ Drop store/out of business/petroleum
A. 1. Existing small area source	2. New small area source
dry-to-dry only, x < 140 gal/yr	dry-to-dry only, x < 140 gal/yr
transfer only, x < 200 gal/yr both types, x < 140 gal/yr	transfer only, x < 200 gal/yr both types, x < 140 gal/yr
(constructed before 12/9/91)	(constructed on or after 12/9/91)
5 5	4. New large area source
dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$ transfer only, $200 \le x \le 1,800 \text{ gal/yr}$	dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr
both types, $140 \le x \le 1,800 \text{ gal/yr}$	both types, $140 \le x \le 1,800 \text{ gal/yr}$
(constructed before 12/9/91)	(constructed on or after 12/9/91)
5. This is a correct facility classification	YY DN DCan not determine
If no, please check the appropriate classific	ation:
• •	neral permit as number above
facility exceeds above lin	nits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) pure facility was 130 gallons. fac 1999	rchased within the preceding 12 months 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?	AND ND VA
2. Examining the containers for leakage?	$\mathbf{A}_{\mathbf{A}}$ on onva
3. Closing and securing machine doors except during loading/unloading?	XY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	אַארם אם צ
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY DN X N/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 refe (complete A below).	rigerated condenser
If classification 3 has been checked, the machine should be equipped with eithe condenser or a carbon adsorber (complete A and B below). Carbon adsorber m prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	igerated condenser
A. Has the responsible official of all new sources and existing large area source (check appropriate boxes)	s:
1. Equipped all machines with the appropriate vent controls?	חם אם
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	חס אם
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON ON/A
5. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	חט מע

-10		
1	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?	ロハロり
2	. Measured and recorded the washer exhaust temperature at the condenser	
	inlet and outlet weekly?	DY DN DN/A
	ls the temperature differential equal to or greater than 20° F?	□Y □N □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.	OY ON ON/A
	Is the perc concentration equal to or less than 100 ppm?	OY ON ON/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 □N □N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual	
	condenser coils?	A/MO NO YO
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	χ Y \Box N
2. Maintained rolling monthly total of perc consumption?	AA ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	A'Y 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?	MY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	ANA X NO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	AYA X NO YO
6. Maintained startup/shutdown/malfunction plan?	. 🕱 и 🗆 и
7. Maintained deviation reports?	ANG NO YX
Problem corrected?	DAY ON ON/A
8. Maintained compliance plan, if applicable?	ANA אם צם

Anr	DITIONAL SITE INFORMATION:	-	
LLDL	ATTOTAL STALE MATORIAL TOTAL		
		Yes	NO.
1.	Secondary Containment for: Dry Cleaning Machine & Storage area	[X]	[]
	Waste area	Σ	[]
	Spotting area Sealed	·[]	[X]
	(A) Spotting ARRA is Not sealed. mentioned		
	me. Pakl that this near must be scaled		
			:
	•	·	
2.	Disposal of Water from Water Separator using approved evaporator	$[\chi]$	[]
	or contracted Wastewater service	[]	[×]
		`	
	(A) SARTY KLEW PICKS up the waste sludge.		
•			
	·		

	•••		
		•	٠٠ .

1. Does the responsible official conduct	a weekly (for small sour	ces, bi-weekly) leak detection	and repair
inspection?			XY DN
2. Has the facility maintained a leak log	•		DALA ON
3. Does the responsible official check the	e following areas for lead	ss?	
Hose connections, fittings, couplings, and valves	MY ON ONIA	Muck cookers	OY ON XÍN/A
Door gaskets and seating	AND NO TA	Stills	XY ON ON/A
Filter gaskets and seating	AND NO YX	Exhaust dampers	OY ON XNA
Pumps	XY ON ON/A	Diverter valves	DY ON ON/A
Solvent tanks and containers	MY ON ONA	Cartridge filter housings	MY ON ON/A
Water separators	AND NO YK		-
Which method of detection is used by	the responsible official?		
Visual examination (condensed s	olvent on exterior surfac	es) ¿~	(2)
Physical detection (airflow felt th	rough gaskets)		×
Odor (noticeable perc odor)			×
Use of direct-reading instrumenta	tion (FID/PID/calorimet	ric tubes)	XI WA
Halogen leak detector		•	A VV
If using direct-reading instr			ØN/A
•		s in a range of 0-500 ppm?	
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	on a weekly basis?	DY DN
d. Kept in a clean and se	cure area when not in us	e?	OY ON
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	DY DN
Alpento Pat	- J	Ali	
onsible Official's Name (Please Print)		Responsible Offic	cial's Sign
Inspector's Name (Please Prin	t)	Date of Inspection	
Quan Duni		JAN 2001	

,	•	•••	SUMMARY REPORT	BEST AVAILABLE COPY
	CTION:	ANNUAL [[]	COMPLAINT/DISCOVERY	RE-INSPECTION
./		TIME OUT:	AIRS ID#:	0990 558
FACILI	TY: D-1	cleaner Lad		
IMAK YTI,	<u> </u>	inten Dune Clea		DATE: 3/19/01
LILITY LOCA	TION:	1360 82	Fortune Cir.	
		Welligten		•
RESPONSIBLE O	fficial:	alpert Publ	PHONE NUMBER	: 798 - 477Y.
		compliance requirements events 62-213.300, Florida Admin	aluated during this inspection, the facistrative Code (F.A.C.).	cility is found to be in
_	he results of the ies were noted:	compliance requirements eva	aluated during this inspection, the fol	lowing compliance
COMPLIAN	ICE REQUII	REMENT/PROBLEM	FOLLOW-UP ACTI	-
•	•	. •		APR - 6 APR - 6 Reau of Air gamobile
				E D 2001 Monitoring gources
	•			
				•
· .	• .	•		
· · · · · · · · · · · · · · · · · · ·	, -			•
OMMENTS:				
		•		•
e Angual Complian	ce Certification	form has been properly ce⇒if	ied and submitted to the inspector.	YES NOF
TE OF NEXT INS		ionin nas been property certific	:	
SPECTION CONE	•	(Ap)	proximate)	
SPECTOR'S SIGN	ATTIDE.	· Lu	_ PHONE NUMBER:	55 3070

-PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: AMNUAL	COMPLAINT/DISCOVERY
RE-INSPECTION	ם אמ
AIRS ID#: 6990 458 DATE: 1/9/0	TIME IN: TIME OUT:
FACILITY NAME: Welligh 1	tone land + Cleuneri
FACILITY LOCATION: 11360 e	c Fortuge Cin
Wellig	do = 33714
RESPONSIBLE OFFICIAL: Alger	PHONE: 798 4444
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	•
(check appropriate box)	
1. New facility notified DARM 30 days prior to star	tup . 🗖
2. Facility failed to notify DARM to use general per	·
	the section of the se
PART II: CLASSIFICATION Facility indicated on notification form that it is: (check appropriate box)	□ No notification form □ Drop store/out of business/petroleum
Facility indicated on notification form that it is:	□ No notification form
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	☐ No notification form ☐ Drop store/out of business/petroleum 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
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) 3. Existing 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	No notification form □ Drop store/out of business/petroleum 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 transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
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) 3. Existing 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 before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classific facility qualified for a get	□ No notification form □ Drop store/out of business/petroleum 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 transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

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?	AV ON ONA
2. Examining the containers for leakage?	AVON ON/A
3. Closing and securing machine doors except during loading/unloading?	DY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY DN DAVA
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 refrig (complete A below).	erated condenser
If classification 3 has been checked, the machine should be equipped with either a condenser or a carbon adsorber (complete A and B below). Carbon adsorber must prior to September 22, 1993	refrigerated t have been installed
If classification 4 has been checked, the machine should be equipped with a refrig (complete A and B below).	erated condenser
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?	□У □И
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	DY DN DN/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	מם עם
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	
	OY ON ONA

.

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?	מע עם
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	רא מו אם אים אות
Is the temperature differential equal to or greater than 20° F?	DY DN 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, if machines are equipped with a carbon adsorber?	אום אם צם
Is the perc concentration equal to or less than 100 ppm?	AVAD ND YD
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 ON/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	אואם אם צם:
6. Routed airflow to the carbon adsorber (if used) at all times?	אותם מם עם.
· · · · · · · · · · · · · · · · · · ·	(8 m.)
PART V: RECORDKEEPING REQUIREMENTS	<u></u>
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 a. documentation of leaks repaired w/in 24 hrs? or; DY ON ONA 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? 4. Maintained calibration data? (for explicable direct reading instruments) AVADY NO YO 5. Maintained exhaust duct monitoring data on perc concentrations? DY DN DXXA MY ON 6. Maintained startup/shutdown/malfunction plan? PAND ND SAN 7. Maintained deviation reports? MY ON ONA Problem corrected? Maintained compliance plan, if applicable? DY DN QN/A

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PART VI: LEAK DETECTION AND	REPAIRS			···
1. Does the responsible official conduct	a weekly (for small source	es, bi-weekly) leak detection a	and repair	Î
inspection?			POY ON	1
2. Has the facility maintained a leak log	?		אם אם	
3. Does the responsible official check th	e following areas for leak	ss?		8
Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	מא מם עם	
Door gaskets and seating	DY ON ON/A	Stills	ANA NO YEAR	
Filter gaskets and seating	אואם אם צם	Exhaust dampers	DY DN DN/A	
Pumps	MY ON ONIA	Diverter valves	אואם אם אם	
Solvent tanks and containers	אואם אם אוא	Cartridge filter housings	אואם אם צם אואם	
Water separators	DY ON ON/A			: ·
4. Which method of detection is used by	the responsible official?			
Visual examination (condensed	_		6	
Physical detection (airflow felt	_		<u>.</u>	
 Odor (noticeable perc odor) 	,		Z ·	
Use of direct-reading instrumen	tation (FID/PID/calorime	tric tubes)	NA	
Halogen leak detector			M MA	
If using direct-reading ins	trumentation, is the equ	inment:	□N/A	
		ns in a range of 0-500 ppm?	DY DN	33
	a standard gas prior to and			
c. Inspected for leaks	and obvious signs of wea	r on a weekly basis?	עם עם	
	secure area when not in t	•	אם צם.	
		nples (calorimetric only)?	ם אם מ	
,	oy by the or eupheate said	ipies (calorimeate omy):	21 21	
			1	-
- Aloke U		$\epsilon A(l)$		
ponsible Official's Na	LTRE	Responsible Offi	cial's sim	2 511 55
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ha Lighton		2//9/	a 1	
Inspector's Name (Please	Priat)	Date of Inspection	<u>U</u>	
. 0 . 1				
- m hill		2/0 ~		
Inspector's Signature		Androximate Date of	Nevelan	

Approximate Date of Next Inspection

ADDITIONAL SITE INFO	RMATION:		
1. Secondary Conta	inment for: Dry C	leaning Machine & Storag Waste area Spotting area Se	
	`.		
2. Disposal of Wat	er from Water Sepa	erator using approved eva entracted Wastewater serv	
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STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
TWIN TOWERS OFFICE BUILDING
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

AC5521

BAMMS/BCO JOEY ROBERTS 5510

> AIRS ID # 0990 ELLINGTON HAME LAUNDRY &

CLEANÉRS

11360 E-2 FORTUNE CIR

CERTIFIED

Z 333 667 361

=MAIL



2.98 Å

Name A-18,27 Oc. 2nd North

SENDER: COMPLETE THIS SECTION A. Received by (Please Print Clearly) B. Date of Delivery ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse C. Signature so that we can return the card to you. ☐ Agent Attach this card to the back of the mailpiece, X ☐ Addressee or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: ☐ No If YES, enter delivery address below: AIRS ID # 0990558 WELLINGTON HAME LAUNDRY & **CLEANERS** PATEL ALPESH 3. Service Type 11360 E-2 FORTUNE CIR Certified Mail
Registered ☐ Express Mail **WELLINGTON FL 33414** ☐ Return Receipt for Merchandise Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) Yes PS Form 3811, July 1999 102595-99-M-1789 , Z 333 667 361 US Postal Service **Receipt for Certified Mail** No Insurance Coverage Provided. Do not use for international Mail (See reverse) Sent to AIRS ID # 0990558 WELLINGTON HAME LAUNDRY & **CLEANERS** PATEL ALPESH 11360 E-2 FORTUNE CIR WELLINGTON FL 33414 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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FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273



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Fund: 20-2-035001

Obj.: 002273

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Tream of Air Mobile Sources

AIRS ID # 0990558

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Org:::35

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Fund: 20-2-035001
Obj.::]002273 11360 E-2 FORTUNE CIR WELLINGTON FL 33414

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-9		ON HAME LAUND	RY &		
CLEANERS					
7000	7693 LAKE WORTH LAKE WORTH FL 33467				
7					
)	PS Fo			Instructions	

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 Complete items 1, 2, and 3. Also complete item 4 if Restrictêd 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, 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature
or on the front if space permits.	Addressee
Article Addressed to:	D. Is delivery address different from item 1?
AIRS ID # 0990558 WELLINGTON HAME LAUNDRY &	
CLEANERS	3. Service Type
ALPESH PATEL	Certified Mail
7693 LAKE WORTH LAKE WORTH FL 33467	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label) 7000 0600 502 (4. Restricted Delivery? (Extra Fee) Yes

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DARM/MOBILE SOURCE CONTROL PROGRAMA
DEPT. OF ENVIRONMENTAL PROTECTIONS
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

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