

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

July 30 2001

Mr. Gary Rampino
Olympian Cleaners
11926 Seminole Boulevard
Largo, Florida 33778

Re: Facility No.: 1030297-002

Dear Mr. Rampino:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 20, 2001.

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. Gary Robbins, Pinellas County

"More Protection, Less Process"

Printed on recycled paper.

Fees Paid
GOC ✓

Olympian Cleaners
11926 Seminole Boulevard
Largo, Florida 33778
(727) 586-2012

RECEIVED

FEB 17 2003

February 14, 2003

Bureau of Air Monitoring
& Mobile Sources

Ms. Sandy Bowman
General Permit Section
BAMMS, MS 5510
Florida Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2420

Re: Title V

Dear Ms. Bowman:

There is New Ownership of Olympian Cleaners that was effective February 6, 2003. Please rescind the Title V General Permit.

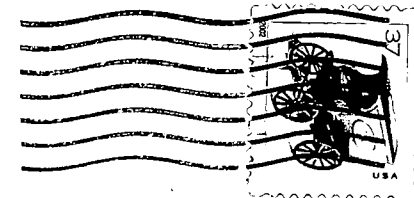
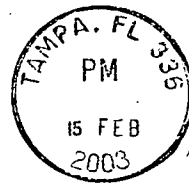
I wish to thank you in advance concerning the above matter. If you should have any questions concerning the above matter, please don't hesitate to call the number listed above.

Respectfully,

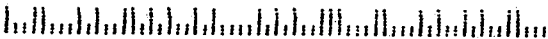


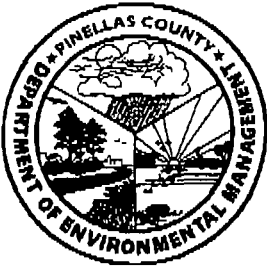
Gary Rampino

OLYMPIAN CLEANERS
11926 SEMINGLE BLVD.
LARGO FL 33778



Ms. Sandy Beerman
General Permit Section
BAMMS, MS 5510
Florida Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

32399+2400 



Department of Environmental Management AIR QUALITY DIVISION

300 S. Garden Avenue, Clearwater, FL 33756
Telephone (727) 464-4422
Fax (727) 464-4420
Suncom: 570-4422

DATE: 2/19/03

PAGES(S) 2
(including fax cover)

TO: Rick Butler
FDEP/Tallahassee

FAX #: _____

SUBJECT: Rescinding request letter from
Olympian Cleaners previous RO.

RECEIVED
FEB 19 2003
Bureau of Air Monitoring
& Mobile Sources

Person Sending Fax: _____

Olympian Cleaners
11926 Seminole Boulevard
Largo, Florida 33778
(727) 586-2012

RECEIVED
FEB 18 2003

February 14, 2003

Mr. Gary Robbins
Pinellas County Air Quality Division
300 South Garden Avenue
Clearwater, Florida 33756

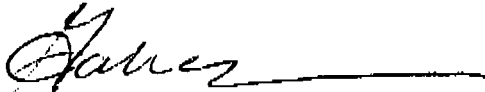
Re: Title V

Dear Mr. Robbins:

There is New Ownership of Olympian Cleaners that was effective February 6, 2003. Please rescind the Title V General Permit.

I wish to thank you in advance concerning the above matter. If you should have any questions concerning the above matter, please don't hesitate to call the number listed above.

Respectfully,



Gary Rampino

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JUN 02 2001

Bureau of Air Monitoring
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	GARY RAMPINO		
2. Site Name (For example, plant name or number):	OLYMPIAN CLEANERS		
3. Hazardous Waste Generator-Identification Number:	FD 038 024 618		
4. Facility Location:			
Street Address:			
City:	County:	Zip Code:	
11976 SEMINOLE BLVD	LARDO (FLORIDA)	33778	
5. Facility Identification Number (DEP Use ONLY - do not fill in):	10300917-002		

Responsible Official

6. Name and Title of Responsible Official:			
Name:	GARY RAMPINO	Title:	Owner
7. Responsible Official Mailing Address:			
Organization/Firm:			
Street Address:			
City:	County:	Zip Code:	
11976 SEMINOLE BLVD	LARDO FL	33778	
8. Responsible Official Telephone Number:			
Telephone: (787) 586-2014	Fax: () -		

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	None		
10. Facility Contact Address:			
Street Address:			
City:	County:	Zip Code:	
11. Facility Contact Telephone Number:			
Telephone: () -	Fax: () -		

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
NOV - 91	Existing/New	RC/CA/None required	SAME
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening)

3. What is the facility's source classification based on the definitions found in section (3) of Part II? Indicate with an "X". Select one classification only.)

Small Area Source

- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
Transfer only on-site (used less than 200 gallons of perc per year)
Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
Transfer only on-site (used 200 - 1,800 gallons of perc per year)
Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)

Existing machines at small area source
(NONE REQUIRED)

New machines at small area source
Refrigerated condenser

Existing machines at large area source
Carbon adsorber
Refrigerated condenser

New machines at large area source
Refrigerated condenser

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt
No such units on-site

OR

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating:

What type of fuel do you use?

 propane No. 2 fuel oil No. 6 fuel oil natural gas No. 4 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

(a) Purchase receipts and solvent purchases/solvent addition log

(b) Leak detection inspection and repair

(c) Refrigerated condenser temperature monitoring

(d) Carbon adsorber exhaust perc concentration monitoring

(e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are: 103 0297 001
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

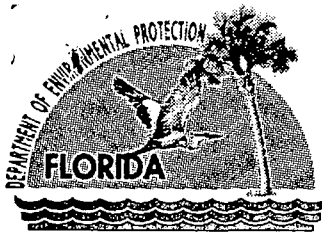
I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

GARY RAMPINO
Print name of responsible official

Gary Rampino
Signature

6/12/07
Date



Jeb Bush
Governor

Department of Environmental Protection

RECEIVED
JUL - 5 2001
Bureau of Air Monitoring
& Mobile Sources

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

David B. Struhs
Secretary

June 22, 2001

Mr. Gary Rampino
Olympian Cleaners
11926 Seminole Boulevard
Largo, Florida 33778

Dear Mr. Rampino:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on June 20.

In reviewing your submittal, it was noted that Olympian Cleaners elected to surrender its existing Title V air general permit (AIRS ID 1030297). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 840/921-9583.

Sincerely,

Sandra Bowman
Bureau of Air Monitoring
and Mobile Sources

SB/
Enclosure
cc: Mr. Gary Robbins, Pinellas County

"More Protection, Less Process"

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JUN 20 2001
Bureau of Air Monitoring & Mobile Sources
2001 corrected

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JUL - 5 2001
Bureau of Air Monitoring & Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): <i>GARY RAMPINO</i>
2. Site Name (For example, plant name or number): <i>OLYMPIAN CLEANERS</i>
3. Hazardous Waste Generator Identification Number: <i>FD 038 024 618</i>
4. Facility Location: Street Address: City: <i>11926 Seminole Blvd</i> County: <i>Largo (Pinellas)</i> Zip Code: <i>33778</i>
5. Facility Identification Number (DEP Use ONLY - do not fill in): <i>1030291-002</i>

Responsible Official

6. Name and Title of Responsible Official: Name: <i>GARY RAMPINO</i> Title: <i>OWNER</i>
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: <i>11926 Seminole Blvd</i> County: <i>Largo FL</i> Zip Code: <i>33778</i>
8. Responsible Official Telephone Number: Telephone: <i>(727) 586-2012</i> Fax: () -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): <i>None</i>
10. Facility Contact Address: Street Address: City: _____ County: _____ Zip Code: _____
11. Facility Contact Telephone Number: Telephone: () - _____ Fax: () -

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
<u>NOV - 91</u>	<u>Existing</u> /New	RC/ <u>CA</u> /None required	<u>Same</u>
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

39 gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening _____)

3. What is the facility's source classification based on the definitions found in section (3) of Part II?

Indicate with an "X". Select one classification only.)

Small Area Source

Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)

Transfer only on-site (used less than 200 gallons of perc per year)

Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)

Transfer only on-site (used 200 - 1,800 gallons of perc per year)

Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?

(Indicate with an "X".)

Existing machines at small area source

(NONE REQUIRED)

New machines at small area source

Refrigerated condenser

Existing machines at large area source

Carbon adsorber

Refrigerated condenser

New machines at large area source

Refrigerated condenser

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria):

All steam and hot water generating units exempt

OR

No such units on-site

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating:

What type of fuel do you use?

propane

natural gas

No. 2 fuel oil

No. 4 fuel oil

No. 6 fuel oil

Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

(a) Purchase receipts and solvent purchases/solvent addition log

(b) Leak detection inspection and repair

(c) Refrigerated condenser temperature monitoring

(d) Carbon adsorber exhaust perc concentration monitoring

(e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are 92
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

GARY RAMPINO
Print name of responsible official

Gary Rampino
Signature

6/27/2001
Date

Gary Rampino

6/27/2001

PORTION MUST BE ATTACHED TO RECEIPTANCE FOR PROPER HANDLING

420498 DEC11 2002

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID#1030297
OLYMPIAN CLEANERS GARY RAMPINO 11926 SEMINOLE BLVD LARGO FL 33778

Bureau of Air Monitoring
& Mobile Sources

DEC 13 2002

FOR GOVERNMENT USE ONLY Org.: 3755010100 EO: A1 Fund: 20-2-035001 Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label. 412242 DE0000001

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID # 1030297
OLYMPIAN CLEANERS
GARY RAMPINO
11926 SEMINOLE BLVD
LARGO FL
33778

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



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

32315+3070 99

