PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

22 mg

Part III. Notification of Intent to Use General Permit

". Misbile Source.

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 LeBretton Tuclustries 22C 1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):					
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):				
	KOSS Rockty The Hampton CE	Ster			
2.	Site Mame (For example, plant name or number):				
	Fourtain Cleaner's				
3.	Hazardous Waste Generator Identification Number:				
	F1D984248252				
4.	Facility Location: SU/te B				
	Facility Location: Sulte B Street Address: 2790 Gulf to Bay Blvd City: 01				
 	City: Clearwater County: Pinellers	Zip Code: 3375-9			
5.	Facility Identification Number (DEP Use ONLY - do not fill in):				
	i i n	30300-0			
		JUJUG			
	sponsible Official				
6.	Name and Title of Responsible Official:				
Naı	Responsible Official Mailing Address: 3914 Mirror lake A	EQ			
7.	Responsible Official Mailing Address: 5914 mirror lake A	re Sterner LeBritton			
	Organization/Firm: Street Address: 6914 mirror lake Are				
1	Street Address: 6414 ////707 14AC/F				
	City: Tamper County: Hills bevisl	Zip Code: 33 6 34			
8.	Responsible Official Telephone Number:	Zip Code: 33 8 34			
8.	City: 7amper County: Hills bevire	Zip Code: 33 8 34			
8.	Responsible Official Telephone Number:	Zip Code: 33 6 34			
Fac	Responsible Official Telephone Number: Telephone: (\$13) \$85-7743 Fax: (Zip Code: 33 6 34			
Fac	Responsible Official Telephone Number: Telephone: (\$13) \$85-7743 Fax: (Zip Code: 33 8 34			
Fac	Responsible Official Telephone Number: Telephone: (\$13) \$85-7743 Fax: (Zip Code: 33 B 34			
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• Fac 9.	Responsible Official Telephone Number: Telephone: (\$13) \$85-7743 Fax: (Zip Code: 33 8 34 Zip Code:			
9.	Responsible Official Telephone Number: Telephone: (\$13) \$85-7743 Fax: (
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Facility 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")
2004	Existing/Ne	w RC/CA/None required	SANAO
20114	Existing/Ne	•	SAMI
	Existing/Ne		
<u> </u>			46 ²
*CONTROL DEVICE K	EY: RC = re	efrigerated condenser CA =	carbon adsorber
	THINES ONLY		
1.(b) TRANSFER MAC How many washers do yo			
How many dryers/reclain		ito? [\ \	
		after September 22, 1993 are allowing info	wed to operate under this general rmation:
permit). For each transfe Date Initially Purchased			
permit). For each transfe Date Initially Purchased	er machine on-site	, please provide the following info Control Device Required*	mation: Date Control Device Installed (if already included at time of
permit). For each transfe Date Initially Purchased	Status (circle one)	, please provide the following info Control Device Required* (circle one)	mation: Date Control Device Installed (if already included at time of
permit). For each transfe Date Initially Purchased	Status (circle one) Existing/New	, please provide the following info Control Device Required* (circle one) RC/CA/None required	mation: Date Control Device Installed (if already included at time of
permit). For each transfe Date Initially Purchased	Status (circle one) Existing/New Existing/New	, please provide the following info Control Device Required* (circle one) RC/CA/None required RC/CA/None required	mation: Date Control Device Installed (if already included at time of
permit). For each transfe Date Initially Purchased	Status (circle one) Existing/New Existing/New Existing/New	, please provide the following info Control Device Required* (circle one) RC/CA/None required RC/CA/None required RC/CA/None required	mation: Date Control Device Installed (if already included at time of
Permit). For each transfer Date Initially Purchased From Manufacturer *CONTROL DEVICE K 2.(a) How much perchlo	Status (circle one) Existing/New Existing/New Existing/New Existing/New	RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required	Date Control Device Installed (if already included at time of purchase, write "SAME")
Permit). For each transfer Date Initially Purchased From Manufacturer *CONTROL DEVICE K 2.(a) How much perchlo	Status (circle one) Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New	RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required CA =	Date Control Device Installed (if already included at time of purchase, write "SAME")
*CONTROL DEVICE K 2.(a) How much perchlo [25.//0gallo (b) If less than 12 more	Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New EY: RC = re roethylene (perc) lens (You must fill onths, how many? [RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required CA =	Date Control Device Installed (if already included at time of purchase, write "SAME") carbon adsorber onths?
CONTROL DEVICE K 2.(a) How much perchlo [25.//0gallo (b) If less than 12 more	Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New EY: RC = re roethylene (perc) lens (You must fill onths, how many? [control Device Required (circle one) RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required CA = that you used within the last 12 m this in) months	Date Control Device Installed (if already included at time of purchase, write "SAME") carbon adsorber onths?

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3. What is the facility's source cla Indicate with an "X". Select		n the definitions found in section (3) of Part II? 12 2 \(\text{only.} \)
Small Area Source	L X	Burer
Dry-to-dry mad Transfer only o Both machine		(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)
Large Area Source		
Dry-to-dry mac Transfer only o Both machine		(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)
4. What control technology is rec (Indicate with an "X".)	quired on machines p	pursuant to section (5) of Part II of this notification form?
Existing machines at sm (NONE REQUIRED)	all area source	New machines at small area source Refrigerated condenser [X]
Existing machines at lar Carbon adsorber Refrigerated condenser	ge area source	New machines at large area source Refrigerated condenser []
	that all steam and h	units shall not be eligible to use the general permit pursuant to ot water generating units on-site meet the following exemptioned memo for the criteria).
All steam and hot water generation No such units on-site	ng units exempt	X OR
How many boilers do you have o	n-site?	
For each boiler, indicate its horse	epower (HP) rating:	451
What type of fuel do you use?	[] propane [] No. 2 fue [] No. 6 fue	
6. Equipment Monitoring and Re	cordkeeping Inform	nation
Check all logs which are required	f to be kept on-site i	in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent	purchases/solvent a	addition log
(b) Leak detection inspection and	l repair	_X_
(c) Refrigerated condenser temper	erature monitoring	[X]
(d) Carbon adsorber exhaust pero	concentration mon	itoring [X]:
(e) Startup, shutdown, malfuncti	on plan	Γ Χ 1

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7. Surrender of Existing DEP Air Permit(s) Please indicate with an "X" the appropriate selection: [No DEP air permits currently exist for the operation of the facility indicated in this notification form; the permit number(s) are [D30300-004-AG] [No DEP air permits currently exist for the operation of the facility indicated in this notification form. Responsible Official Certification [In 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. [I will promptly notify the Department of any changes to the information contained in this notification. [Print having of responsible official] [Print having of responsible official]

LeBrettun Luclustreis Fountain Cleanors TAIRFA FL 333 BARNT PUTTERNING ME 2790 Galf to Bay Blod. "W MAR DOID PHY 7.1 Clearwater F1, 33759 Mr. Dickson Dibble General Permits Section Bureau of Air movitoring and Moble Sources MS5511 Department of Environmental Protection 2600 Blair Stone Road