

RECEIVED

JUL 28 2011

PERCHLOROETHYLENE DRY CLEANERS BUREAU OF AIR REGULATION
AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

Facility Identification Number - If known (seven digit number)

1030318 - 004

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing permitted facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit). If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. (See "Surrender of Existing Air Operation Permit(s)" below.)
- Operates an existing facility not currently permitted or using an air general permit.

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C.
- Any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only, if Applicable

All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):

1030318 - 003

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

Fashion Cleaners + Shirt Laundry Inc

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a complete registration must be submitted for each.)

FASHION CLEANERS

Facility Location (Physical location of the facility, not necessarily the mailing address.)

Street Address: 1152 Court St
 City: Jeanerette County: Pirellas Zip Code: 33756 - 5705

Facility Start-Up Date (Estimated start-up date of proposed new facility.) (N/A for existing facility.)

N/A

Facility Contact

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: Michael Song - President

Facility Contact Telephone Numbers

Telephone: 727-461-1137

Fax: 727-461-1137

Cell phone: X

E-mail: X

Facility Contact Mailing Address

Organization/Firm: _____

Mailing Address: 1152 Court St

County: Pinellas

Zip Code: 33756

City: Clearwater

Other Contact/Representative (to serve as additional Department contact)

Name and Position Title

Print Name and Title: _____

Other Contact/Representative Telephone Numbers

Telephone: _____

Fax: _____

Cell phone: _____

E-mail: _____

Other Contact/Representative Mailing Address

Organization/Firm: _____

Mailing Address: _____

County: _____

Zip Code: _____

City: _____

Facility Information

1.(a) DRY-TO-DRY MACHINES

How many dry-to-dry machines do you have on-site? [1]

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

DATE MACHINE INSTALLED	UNIT CLASS (Check one)	CONTROL DEVICE (see key)	DATE CONTROL DEVICE INSTALLED
DEC 16 2002	<input checked="" type="checkbox"/> New <input type="checkbox"/> Existing	RC	SAME
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		

Control Device Key: RC = Refrigerated Condenser CA = Carbon Adsorber NR =None Required

1. (b) Is the facility a co-residential Dry Cleaning facility?
 Yes No

For each dry-to-dry machine located at a co-residential facility Dry Cleaning facility, please provide the following information:

DATE MACHINE INSTALLED	UNIT CLASS (Check one)	PERC DRY CLEANING MACHINE	CONTROL DEVICE (see key)	VAPOR BARRIER ENCLOSURE
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO

Control Device Key: RC = Refrigerated Condenser CA = Carbon Adsorber NR =None Required

2. Perchloroethylene Usage

If this is an **initial registration** for a perchloroethylene dry cleaner, provide an estimate of the facility's expected amount of perchloroethylene to be used over the next 12-month period.

If this is a **re-registration** for a perchloroethylene dry cleaner, provide the amount of perchloroethylene used in the most recent 12 months.

25 gallon

3. Provide information on all steam and hot water generating units (boiler) on-site or that no such units exist on-site.

No steam and hot water generating units (boiler) onsite

BOILER	HORSEPOWER	FUEL TYPE*
3/31/07 1	30	PROP

*Fuel Type – propane, No. 2 fuel oil, No. 4 fuel oil, No. 6 fuel oil, natural gas, electric, or other

Spoke with Michael Song of
Fashion Cleaners. He said
He wishes to renew permit
and did not send application
workbook because nothing
changed.

7/28/11

9:35 AM

ML

Air Resource Management System - Facility													
AREA	Office *	SWPH	SW: PINELLAS	County *	PINELLAS	AIRS ID	ARMINV01			1030318			
Owner/Comp *	FASHION CLEANERS & SHIRT LAUNDRY INC					Site	FASHION CLEANERS						
Directions													
Street	1152 Court St									Validate Address			
City *	CLEARWATER				Zip	33756	5705						
UTM Zone	17	East	323.97	North	3094.18	Latitude	27	57	39.9391	Longitude	82	47	22.1518
Status *	A	ACTIVE			Maj Group SIC *	72	PERSONAL SERVICES						
Reloc	N	Shtdwn Dt				Strt Dt							
Gov Fac *	D	NOT OWNED OR OPERATED BY A FEDERAL, STATE, OR LOCAL GOVE				HAZ Waste Generator ID: FLD	032206807						
AOR Req *	N	Ozone SIP Facility *	N	Type	10	PCE Drycleaning Facilities							
Compliance Tracking										Current Permit Indicator	AG		
Title V	TITLE V	non-HAP Class	MINOR		HAP Class	MINOR		Public Exempt					
# of Emis Units	C		A		I		Generator Rating				MW		
Comment													

FASHION CLEANERS, INC.

1152 COURT STREET
CLEARWATER, FL 33756

TAMPA FL 335

SAINT PETERSBURG FL

19 JUL 2011 PM 6 T



32315+3070

