

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

November 9, 2001

Mr. James R. Scott, Jr.
Scott's Custom Cleaners
755 North Indian Rocks Road
Belleair Bluffs, Florida 33770

Re: Facility No.: 1030340-002

Dear Mr. Scott:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on October 4, 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,

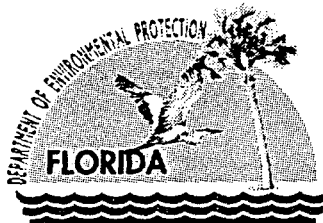

Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Gary Robbins, Pinellas County

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

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Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

February 25, 2004

Mr. James B. Scott, Jr.
Scott's Northwood Cleaners
2454 North McMullen Booth Road
Clearwater, Florida 33759

10 30340

Dear Mr. Scott:

Thank you for your note informing the Division of Air Resource Management that Scott's Custom Cleaners was sold and that you are the new owner. Your note was received on February 24 and the status of Scott's Custom Cleaners has been changed to *inactive* in our database.

In accordance with Rule 62-213.300(3), Florida Administrative Code (F.A.C.), the Title V Air General Permit is **not-transferable** and **does not** follow a change in ownership of the facility. As the new owner of Scott's Northwood Cleaners, you will be eligible to operate under the terms of a Title V air general permit provided the enclosed Perchloroethylene Dry Cleaner Air General Permit Notification Form is completed and submitted to the department.

If you have any questions or need additional information or assistance, please call me at 850/921-9583.

Sincerely,

A handwritten signature in black ink, appearing to read "Sandra Bowman".

Sandra Bowman
Mobile Source Control Section
Bureau of Air Monitoring
and Mobile Sources

SB/

Enclosure

cc: Matt McCann, Pinellas County

103 0340 - 002

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OCT - 4

Bureau of Air Monitoring & Mobile Sources

Prior to completion

page 15

1(a) Add Date Initially Purchased from Manufacturer

None Required should be marked under Control Device Required.

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OCT 2 2001
nd
les.

Facility Name

1. Facility Name: Sa

2. Site Name: S

3. Hazard: Soft

4. Facility Street: _____ City: _____

5. Facility _____

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DEC 20 2001

RECEIVED
MAR 8 2002
Bureau of Air Monitoring & Mobile Sources

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TS

Responsible Person

6. Name: _____

7. Responder Organization: _____ Street: _____ City: _____

8. Responder Telephone: _____

Facility Contact

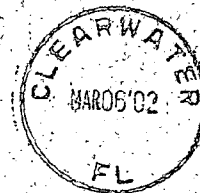
9. Name: Sa

10. Facility Contact Address: 2454 McMullen Booth Road
Street Address: _____ City: Clearwater County: Pinnellas Zip Code: 33759

11. Facility Contact Telephone Number: Telephone: (727) 726-1677 Fax: () -

**PINELLAS COUNTY
BOARD OF
COUNTY
COMMISSIONERS**

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
AIR QUALITY DIVISION
300 SO. GARDEN AVE.
CLEARWATER, FL 33756



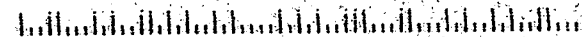
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Title V General Permits Office
Bureau of Air Monitoring and Mobile Sources MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

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Bureau of Air Monitoring
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
OCT 2 2001

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):	James R Scott, JR
2. Site Name (For example, plant name or number):	Scott's Custom Cleaners
3. Hazardous Waste Generator Identification Number:	Safety Kleen FID 982172892
4. Facility Location: Clearwater Street Address: 2454 McMullen Booth Rd. City: Clearwater County: Pinellas County Zip Code: 33759	
5. Facility Identification Number (DEP Use ONLY - do not fill in)	1030340-002

Responsible Official

6. Name and Title of Responsible Official: Name: James R. Scott Jr. Title: President
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 755 N. Indian Rdc Rd City: Belleair Bluffs County: Pinellas Zip Code: 33770
8. Responsible Official Telephone Number: Telephone: (727) 726-1677 Fax: () -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): Sandra DeFosses
10. Facility Contact Address: 2454 McMullen Booth Road Street Address: City: Clearwater County: Pinellas Zip Code: 33759
11. Facility Contact Telephone Number: Telephone: (727) 726-1677 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")
1-1-88 JRSJr.	Existing/New	RC/CA/None required	Same JRSJr. 3-4-02 prior to Dec 8 1991
Economatic	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

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?

[136] gallons (You must fill this in)

(b) If less than 12 months, how many? ~~7~~ 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

- JRSJ
3-4-02
- 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

- JRSJ
3-4-02
- 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 _____
- 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.

X JAMES R SCOTT, JR.
Print name of responsible official

X James R Scott Jr
Signature

X 10-26-01
Date

James R Scott Jr 3-4-02

103 0340 - 002

page 15

1(a) Add Date Initially Purchased from
Manufacturer

None Required should be marked under
Control Device Required.

DEP ROUTING AND TRANSMITTAL SLIP

TO: (NAME, OFFICE, LOCATION) 3. _____
1. _____ 4. _____
2. _____ 5. _____

PLEASE PREPARE REPLY FOR:

- SECRETARY'S SIGNATURE
- DIV/DIST DIR SIGNATURE
- MY SIGNATURE
- YOUR SIGNATURE
- DUE DATE _____

ACTION/DISPOSITION

- DISCUSS WITH ME
- COMMENTS/ADVISE
- REVIEW AND RETURN
- SET UP MEETING
- FOR YOUR INFORMATION
- HANDLE APPROPRIATELY
- INITIAL AND FORWARD
- SHARE WITH STAFF
- FOR YOUR FILES

COMMENTS:

FROM: _____ DATE: _____ PHONE: _____

RECEIVED
OCT - 4 2001

Bureau of Air Monitoring
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
OCT 2 9 2001
Bureau of Air Monitoring
& Mobile Sources

Part III. Notification of Intent to Use General Permit

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Responsible Official

6. Name and Title of Responsible Official: Name: James R. Scott Jr. Title: President
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 755 N. Indian Rock Rd City: Belleair Bluffs County: Pinellas Zip Code: 33770
8. Responsible Official Telephone Number: Telephone: (727) 726-1677 Fax: () -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	Sandra DeFosses
10. Facility Contact Address: Street Address: 2454 McMullen Booth Road City: Clearwater County: Pinellas Zip Code: 33759	
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<u>Economatic</u>	<u>Existing</u> /New	RC/CA/None required	<u>prior to Dec 8 1991</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?

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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?

136 gallons (You must fill this in)

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

- | | |
|--|---|
| <u>Existing machines at small area source</u>
(NONE REQUIRED) <input checked="" type="checkbox"/> | <u>New machines at small area source</u>
Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u>
Carbon adsorber <input type="checkbox"/>
Refrigerated condenser <input type="checkbox"/> | <u>New machines at large area source</u>
Refrigerated condenser <input type="checkbox"/> |

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? 1

For each boiler, indicate its horsepower (HP) rating: 15

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:

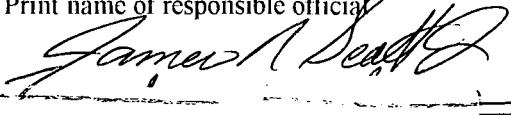
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I will promptly notify the Department of any changes to the information contained in this notification.

X JAMES R SCOTT, JR.
Print name of responsible official

X 
Signature

X 10-26-07
Date



Florida
Department of
Environmental Protection

Jeb Bush
Governor

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

David Struhs
Secretary

F A X T R A N S M I T T A L S H E E T

DATE: 12/6/01

TO: Margaret Dennis

PHONE: _____

FAX: _____

FROM: Rebecca Butler

PHONE: 850-921-9586

Division of Air Resources Management

FAX: 850.922.6979

RE: 1030340-002

CC: _____

Total number of pages including cover sheet: 6

Message

If there are any problems with this fax transmittal, please call the above phone number.

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

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THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

X

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

*H13017
pd 1/14/02*

Do **NOT** Remove Label

AIRS ID # 1030340
SCOTT'S CUSTOM CLEANERS
JAMES R SCOTT JR
755 NORTH INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL
33770

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



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

421351 JAN 6 2003

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#1030340

SCOTT'S CUSTOM CLEANERS
JAMES R SCOTT JR
755 NORTH INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL
33770

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

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Bureau of Air Monitoring
& Mobile Sources