

## Department of Environmental Protection

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

Virginia B. Wetherell Secretary

January 15, 1996

Mr. Antonio Lombardo Loehmann's Dry Cleaners, Inc. 2551 Drew Street #103 Clearwater, Florida 34625

Re: Facility I.D. No. 1030343

Dear Mr. Lombardo:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 3, 1996.

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. Louis Fernandez, Southwest District

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

### Perchloroethylene Dry Cleaning Facility Notification

#### **Facility Name and Location**

	·
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
M	ARIA A LOTBARDO/LOCHNANNIS DRYCLETANONS, INC.
2.	Site Name (For example, plant name or number):
	LOEHMANNIS DRY CLEANERS /NC.
3.	Hazardous Waste Generator Identification Number:
	FLD 984250423
4.	Facility Location: Street Address: 2551 ADD ST # 103
	Street Address: 255/ DREW ST # 103 City: CLEAR WATER County: PINECLAS Zip Code: 34625
5:	Facility Identification Number (DEP Use):
	1030343
	Responsible Official
	•
6	Name and Title of Responsible Official:
	ANTONIO LOMBARDO MANACER
7.	Responsible Official Mailing Address: Organization/Firm: LOEHMANN'S DRY CLEANUTS
	Street Address: 255/ 10 81.1 CT SUITE 103
	Street Address: 2551 DREW ST SUITS 103 City: CLEARWATOR County: PINECIAS Zip Code: 34625
8.	1
	Telephone: (8/3) 797 - 708/ Fax: ( ) -
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
10.	Facility Contact Address:
	Street Address:
	City: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: ( ) - Fax: ( ) -
	<u></u>
	·

RECEIVED

SEP 3 1996

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

Bureau of Air Monitoring & Mobile Sources

# #1030343

·	Loehmann's Dry Cleaners
	Spoke W/ Antonio Lombardo-
	.1
	6 add title-Owner
<i>P.I</i> II	installed, if any, if one machine, ID#12" Should
	be changed to " " Should
P.15	be changed to " " 5. (f) required
1	
,	

#### **Facility Information**

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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
Example	#1		12-NOV-93		08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit			. 1 - 184 <sub></sub> -		<u> </u>	*	•		
(1) w/ ref. condenser		1							
(2) w/ carbon adsorber	2	FEB-86							
(3) w/ no controls									
Washer Unit	45. 1	rudi, Tres	1.9-11.00						. Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(4) w/ ref. condenser			1	ĺ	1	<u> </u>			
(5) w/ carbon adsorber									
(6) w/ no controls							_		
Dryer Unit		ti garani	List Brown L						1. 7.14
(7) w/ ref. condenser		1	1			1			
(8) w/ carbon adsorber	-			_	-		_		
(9) w/ no controls							_		
Reclaimer Unit	1,-1,-	<u> </u>		, %		,			
(10) w/ ref. condenser	-	1							
(11) w/carbon adsorber				-			_		
(12) w/ no controls									
<ul> <li>(b) Control devices are</li> <li>(c) No control devices</li> <li>2.(a) What was the total of a second of the control of the control</li></ul>	are re quant gallo	equired to be ity of perchloons ow many? [_	installed [_ oroethylene (] months	X perc)	_] purchased in				[]
3. What is the facility's so (Indicate with an "X".  Existing small are Existing large are	Selec ea so	t one classifi	cation only.)	ew sn	nitions found nall area sour	ce [	3) of ]	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines (Indicate with an "X".)	pursuant to section (5) of Part II of this notification form?
Existing large area source  Carbon adsorber  []	Refrigerated condenser []
New small area source Refrigerated condenser  []	
New large area source Refrigerated condenser  []	
	inits shall not be eligible to use the general permit pursuant I hot water generating units on-site meet the following
	have a total heat input of 10 million BTU/hr or less (298 atural gas except for periods of natural gas curtailment than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring a	nd Recordkeeping Information
Check all logs which are required to be kept on-site i	n accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	[X]
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration mon	itoring []
(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 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)				
LΧJ	No air permits currently exist for the operation of the facility indicated in this notification form.				
	Responsible Official Certification				
this notifi statement maintain	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 prod	mptly notify the Department of any changes to the information contained in this notification. $7-9.7-96$				
Men de la company de la compan	Date Date				

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

Revised 10/96

# TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL □	COMPLAINT/DISC	OVERY 🗆	RE-INSP	ECTION I
TIME IN: 3:05p.m.	TIN	ИЕ OUT: 4:15p.m.	AIRS ID#	1030343	3 001
TYPE OF FACILITY:	Perchloroeth	ylene Dry Cleaner			
FACILITY NAME:	Loehmann	's Plaza Dry Cleaner	s, Inc. DA	TE: April 2	1, 1997
FACILITY LOCATION:	2551 Drew \$	St., Unit 103, Clearw	ater, FL 346	 25	
RESPONSIBLE OFFICIA	L: MARIA A.	LOMBARDO	PHONE NU	JMBER:	797-7081
to be in compliance v	with DEP Rule 62- of the compliance	requirements evaluated of 213.300, Florida Admir requirements evaluated	nistrative Code (	F.A.C.).	
COMPLIANCE REQUI	IREMENT/PROB	LEM FOL	LOW-UP ACTI	ON REQUI	RED
COMMENTS:					
The facility was sent a copy	y of the start-up, sh	nutdown and maltunctio	n log on 4/22/97	•	
		·			
	•				
The Annual Compliance Certifica DATE OF NEXT INSPECTIO	•	July 1;	d to the inspector.	Yes 🗹	No □
INSPECTION CONDUCTED	BY:	Jettrey 1	OCC15	, <i>j</i> '	
INSPECTOR'S SIGNATURE	: JAMAN [1	MON PHON	E NUMBER:	64-44	22

Page L of L

## TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:

ANNUAL M

COMPLAINT/DISCOVERY [7]

RE-INSPECTION □

TIME IN: 10:24 am TIME OUT	: 11:00 am AIRS ID# <b>1030343 001</b>					
TYPE OF FACILITY: Perchloroethyle	ne Dry Cleaner					
FACILITY NAME: Loehmann's P	Plaza Dry Cleaners, Inc. DATE: March 12, 1997					
FACILITY LOCATION: 2551 Drew St.,	Unit 103, Clearwater, FL 34625					
RESPONSIBLE OFFICIAL: MARIA A. LON	MBARDO PHONE NUMBER: 797-7081					
Based of the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).  Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:  COMPLIANCE REQUIREMENT/PROBLEM  FOLLOW-UP ACTION REQUIRED						
1.) Monthly purchase records were not maintained as a twelve month rolling average.	Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a twelve month rolling average.					
2.) Did not have a start-up, shutdown, malfunction (SSM) plan in place, along with associated recordkeeping, on site.	If no specific procedures are available from the manufacturer, develop a SSM plan that describes procedures for maintaining and operating equipment during periods of start-up and shutdown associated with a malfunction. EPA's O&M manual may be used if no manufacturers information is available. Keep log of maintenance actions					
COMMENTS:						
The Annual Compliance Certification form has been properl DATE OF NEXT INSPECTION:	y certified and submitted to the inspector.  Yes V No  April 3, 1997  (Approximate)  Teffrey Morris					

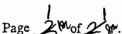
Page 1 of X 4

Revised 10/96

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

·
FACILITY NAME: Location: 2551 Drew St #103  Clear Nater, FL 34625
Annual Reporting Period: March 17, 1996 TO March 17, 1997
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.   YES  NO
If NO, complete the following:
#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
Did not have a start-up, Shutdown, malfunction (SSM Plan in Place, along with associated record keeping on-si Exact period of non-compliance: from March 17, 1996 to March 17, 1997  Action(s) taken to achieve compliance:  Develop and mantain SSM along with the deviation report.  Method used to demonstrate compliance:
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
Monthly purchase records were not maintained as a twelve month rolling average.  Exact period of non-compliance: from to to to
Action(s) taken to achieve compliance: Develop and implement record keeping procedure that maintains monthly purchases as a Method used to demonstrate compliance: 12 month rolling a verage.
As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.
RESPONSIBLE OFFICIAL: ANTONIO LOMBARDO Control Signature Date

<sup>\*</sup>This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.



## **BEST AVAILABLE COPY**

## PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	.⊠ COMP	LAINT/DISCOVERY	0	
AIRS ID#: 1030343 TIME IN: 10,24 on TIME OUT: 11,00 a.m.  FACILITY NAME: Loch mann'S Dry Cleaners  FACILITY LOCATION: 2551 Drew 5t # 103  Clear water, FL 34625					
PART I: NOTIFICATION				· 1	
(check appropriate box)					
Existing facility notified DAF	RM by 9/1/96°			<b>e</b>	
2. New facility notified DARM	30 days prior to startup				
3. Facility failed to notify DARM	M to use general permit				
	The state of the s				
PART II: CLASSIFICATION					
Facility indicated on notification (check appropriate box)	on form that it is:				
	ce 🗹 2. I dry- tran both	New small area sour to-dry only, x<140 ga sfer only, x<200 gal/ types, x<140 gal/yr structed on or after 1	al/yr yr		
(check appropriate box)  A.  1. Existing small area sourd dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr	ce 2. I dry-tran both (con ce 4. I dry-tran dry-tran dry-tran both dry-tran both dry-tran both	to-dry only, x<140 gal/sfer only, x<200 gal/types, x<140 gal/yr	al/yr yr  2/9/91)  ce		
(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 <x<2, 10="" 140<x<1,800="" 14<="" 200<x<1,800="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>ce 2. I dry-tran both (con dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran (con dry-tran dry-tra</td><td>to-dry only, x&lt;140 gasfer only, x&lt;200 gal/ types, x&lt;140 gal/yr structed on or after 1 New large area sourd to-dry only, 140<x<2 sfer only, 200<x<1,8 types, 140<x<1,800< td=""><td>al/yr yr  2/9/91)  ce</td><td></td></x<1,800<></x<1,8 </x<2 </td></x<2,>	ce 2. I dry-tran both (con dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran dry-tran (con dry-tran dry-tra	to-dry only, x<140 gasfer only, x<200 gal/ types, x<140 gal/yr structed on or after 1 New large area sourd to-dry only, 140 <x<2 sfer only, 200<x<1,8 types, 140<x<1,800< td=""><td>al/yr yr  2/9/91)  ce</td><td></td></x<1,800<></x<1,8 </x<2 	al/yr yr  2/9/91)  ce		
(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 <x<2, (constructed="" 10="" 12="" 200<x<1,800="" 9="" 91)<="" before="" gal="" only,="" td="" transfer="" yr=""><td>ce 2. I dry-tran both (con ce 4. I dry-tran dry-tran dry-tran dry-tran dry-tran con ce to the condition dry-tran dry-tra</td><td>to-dry only, x&lt;140 gaster only, x&lt;200 gal/stypes, x&lt;140 gal/yr structed on or after 1 dew large area source to-dry only, 140<x<2 140<x<1,800="" 1<="" 200<x<1,8="" after="" on="" only,="" or="" ster="" structed="" td="" types,=""><td>al/yr yr  2/9/91)  ce</td><td></td></x<2></td></x<2,>	ce 2. I dry-tran both (con ce 4. I dry-tran dry-tran dry-tran dry-tran dry-tran con ce to the condition dry-tran dry-tra	to-dry only, x<140 gaster only, x<200 gal/stypes, x<140 gal/yr structed on or after 1 dew large area source to-dry only, 140 <x<2 140<x<1,800="" 1<="" 200<x<1,8="" after="" on="" only,="" or="" ster="" structed="" td="" types,=""><td>al/yr yr  2/9/91)  ce</td><td></td></x<2>	al/yr yr  2/9/91)  ce		
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 <x<2, (constructed="" 10="" 12="" 200<x<1,800="" 9="" 91)="" a="" appropriation="" before="" check="" classified="" correct="" facility="" from="" gal="" is="" of="" only,="" please="" property="" td="" th<="" the="" this="" transfer=""><td>ce 2. I dry-tran both (con ce 4. I of gal/yr dry-tran both (con cation Y)  ate classification:  ed for a general permit as a sabove limits and is not entered to the contract of the contract</td><td>to-dry only, x&lt;140 gasfer only, x&lt;200 gal/types, x&lt;140 gal/yr structed on or after 1 lew large area sourd to-dry only, 140<x<2 1="" 140<x<1,800="" 200<x<1,8="" after="" are<="" area="" galler="" large="" lew="" on="" only,="" or="" sfer="" structed="" td="" types,=""><td>al/yr yr  2/9/91)  ce  2, 100 gal/yr 00 gal/yr gal/yr 2/9/91)  ove permit</td><td></td></x<2></td></x<2,>	ce 2. I dry-tran both (con ce 4. I of gal/yr dry-tran both (con cation Y)  ate classification:  ed for a general permit as a sabove limits and is not entered to the contract of the contract	to-dry only, x<140 gasfer only, x<200 gal/types, x<140 gal/yr structed on or after 1 lew large area sourd to-dry only, 140 <x<2 1="" 140<x<1,800="" 200<x<1,8="" after="" are<="" area="" galler="" large="" lew="" on="" only,="" or="" sfer="" structed="" td="" types,=""><td>al/yr yr  2/9/91)  ce  2, 100 gal/yr 00 gal/yr gal/yr 2/9/91)  ove permit</td><td></td></x<2>	al/yr yr  2/9/91)  ce  2, 100 gal/yr 00 gal/yr gal/yr 2/9/91)  ove permit		

1 of 4

Deviced 10/14/06

PART III: GENERAL CONTROL REQUIREMENTS				
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	,			
1. Storing perchloroethylene in tightly scaled and impervious containers?	ØY □N			
2. Examining the containers for leakage?	ON ON			
3. Closing and securing machine doors except during loading/unloading?	DY DN			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY ON			
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY ON DINIA			
PART IV: PROCESS VENT CONTROLS				
In Part II-A:	<del></del>			
in rait 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 refrigered (complete A below).	gerated condenser			
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 refrige (complete A and B below).	gerated conden <b>ser</b>			
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?	OY ON			
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 basis?	OY ON			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	מט עם			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON			
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?	OY ON			

2 of 4

Revised 10/14/96

## **BEST AVAILABLE COPY**

	'ر'
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ר אם יצם
Is the temperature differential equal to or greater than 20° F?	ראם צם
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 200 ppm?	OY ON
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
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	□Y □N □N/A
	'
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	ØY □Ņ
2. Maintained rolling monthly averages of perc consumption?	DY WIN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	CYY ON
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
4. Maintained calibration data? (for direct reading instruments only)	DY DN MINA
5. Maintained exhaust duct monitoring data on perc concentrations?	οΎ ΝΑΟ Ϋ́Ω
6. Maintained startup/shutdown/malfunction plan?	טא מא
7. Maintained deviation reports?	DY ØN
Problem corrected? (No deviation report)	אם צם
8. Maintained compliance plan, if applicable?	OY ON MN/A
PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	MA DN
2. Which method of detection is used by the responsible official?	/
Visual examination (condensed solvent on exterior surfaces)	<b>a</b> _
Physical detection (airflow felt through gaskets)	<b>5</b>
Odor (noticeable perc odor)	Ø

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)

If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN b. Calibrated against a standard gas prior to and after each use (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? DY DN d. Kept in a clean and secure area when not in use? DY DN UA UN e. Verified for accuracy by use of duplicate samples (calorimetric only)? MY ON 3. Has the facility maintained a leak log? 4. The following areas should be checked for leaks by the inspector: Leak Detected? Leak Detected? Hose connections, fittings, ŒΝ ΠY DAD! couplings, and valves Muck cookers ΠY  $\Box$ Y YEN Stills ΠY Door gaskets and seating ΠY  $\Box Y$ Filter gaskets and seating Exhaust dampers Pumps  $\Box Y$ Diverter valves  $\Box Y$ ON. **BN**  $\Box Y$ Solvent tanks and containers Cartridge filter housings DY  $\Box Y$ ΘN Water separators

Antonio Lombardo	
Name of Responsible Official	•
Jeffrey Morris	3/12/97
Inspector's Name (Please Print)	Date of Inspection
Multanis	4/3/97
Inapedior's Signature	Approximate pate of Next Inspection
/[ / / / ]	, , ,

#### ADDITIONAL SITE INFORMATION:

Suprema Super 750 Dry-Dry Model 750-52 Serial # 5TG58303333

- No secondary containment for machine
- No secondary containment for perc waste.
- uses water from water separator for spotting but removes most of it as hazardous waste.

## TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

	INSI ECTION SC	OMMAKI KEI OKI
	TYPE OF INSPECTION: ANNUAL COMP	PLAINT/DISCOVERY  RE-INSPECTION
	AIRS ID#: 1030343 001 DATE: 3/17/98	TIME IN: //:00 TIME OUT: 12:/5
	FACILITY NAME: Loehmann's Plaza Dr	y Cleaners, Inc.
	FACILITY LOCATION: 2551 Drew St., Unit 1	103 ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	_ Clearwater, FL	Bur
	RESPONSIBLE OFFICIAL: Ms. Maria A. Lombardo	Phone No.: 797-7081 PP T
	Permit No1030343-001-AG Exp. Date:1	10/02/2001 Fe 2 7 6
	Based of the results of the compliance require compliance with DEP Rule 62-213.300, Flori	ements evaluated during this inspection, the facility is build to be in ida Administrative Code (F.A.C.).
	Based on the results of the compliance require discrepancies were noted (only items which a	rements evaluated during this inspection, the following compliance are checked ):
	Inspection Summ	nary Report Guidance
	Compliance Requirement/Problem	Follow-up Action Required
	plan in place, along with associated recordkeeping, on site.	If no specific procedures are available from the manufacturer, develop a SSM plan that describes procedures for maintaining and operating equipment during periods of start-up and shutdown associated with a malfunction. EPA's O&M manual may be used if no manufacturers information is available. Keep log of maintenance actions
	Purchase receipts were not maintained properly.	Maintain all purchase receipts in a log kept on-site for determination of perchloroethylene solvent consumption.
		Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a consecutive twelve month total.
<u> </u>	measure 45°F with an accuracy of ±2°F.	Obtain verification from the manufacturer that the temperature sensor is designed to measure 45°F with an accuracy of ±2°F, or determine this by another method that the Department would consider appropriate.
	a pre-filtration system.	Facility may choose to either dispose of perc-containing separator water as hazardous waste, or incorporate a carbon filtration system with the evaporator (as per the State's guidelines).
		Store all perc and perc-containing waste in tightly sealed containers which are impervious and chemically unreactive to the solvent.
	Did not maintain a log of leak detection inspection and	Develop and implement a leak detection inspection and repair

records.

program. Maintain a log of leak detection inspection and repair

hours of detection, unless repair equipment must be ordered.

Develop and implement a leak detection inspection and repair program. Use at least one of the methods outlined in Part II, Section 7(a), of the general permit provisions, to detect leaks. Inspect the items listed in Part II, Section 7(b), for leaks. Repair leaks within 24

repair records.

inspection.

Did not conduct weekly leak detection and repair

 No calibration records for the mechanical direct reading instrumentation (halogen detector) were available.	Mechanical direct-reading instrumentation shall be operated as directed by the manufacturer and must meet the conditions in Part II, Section 7(e) of the general permit provisions
Did not measure and record the outlet temperature of the refrigerated condenser on the dry-to-dry machine (dryer, reclaimer) on a weekly basis.	Develop and implement a monitoring program. Measure and record the outlet temperature on a weekly basis. The temperature, measured at the end of the drying cycle, must not exceed 45°F.
Airflow is directed towards the refrigerated condenser upon the door being opened and no diverter valve is in place.	Equip the condenser with a diverter valve to prevent air flow to the refrigerated condenser when the door is opened.
The outlet exhaust temperature of the refrigerated condenser exceeds 45°F and was not repaired within 24 hours.	Repair or adjust condenser within 24 hours of measurement indicating that the outlet exhaust temperature of the refrigerated condenser exceeds 45°F. The repair shall be documented in the monitoring record log.
Machine doors are not closed and secure during times other than loading and unloading.	Keep doors closed and secured at all times except during loading and unloading.
Temperature monitoring was not conducted after an appropriate cooldown period and after verifying that the coolant was completely charged.	Conduct all temperature monitoring following an appropriate cooldown period and after verifying that the coolant has been completely charged.
Containers for perchloroethylene and/or perchloroethylen- containing waste were found to be leaking.	Examine the containers, used for storing perchloroethylene and/or perchloroethylene-containing waste, for leakage.
Chemical Storage containers	nment for machine i waste/
	s are required, you must take immediate corrective measures to up inspection to determine that proper corrective actions have been
The Annual Compliance Certification form has been properly	y certified and submitted to the inspector. Yes \( \square\) No \( \square\)
Inspection Conducted by: Margaret Conspector's Signature: Margaret Conducted by: Margaret Conspector's Signature: Margaret Conspecto	). Hennis (Please Print)
Inspector's Signature: Manjaret U.	Hunes
Phone Number: 464-4422	Date of next Inspection: Warch 1999

## PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

AIRS ID#: /// JOSK/ TIME IN: 3.05 A TIME OUT: \$\frac{4}{3}\]   Sp.m.  FACILITY NAME: Lochman's Plaza Cleaners  FACILITY LOCATION: 2551 Drew St # 103  Clearwater, FL 34625  PART I: NOTIFICATION  (check appropriate box)  1. Existing facility notified DARM by 9/1/96*  2. New facility notified DARM 30 days prior to startup  3. Facility failed to notify DARM to use general permit  PART II: CLASSIFICATION  Facility indicated on notification form that it is: (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x<140 gallyr transfer only, x<200 gallyr both types, x<140 gallyr transfer only, x<200 gallyr both types, x<140 gallyr transfer only, x<200 ga	COMPLIANCE	INSPECTION CHECKLIST
FACILITY NAME: Lockmann's Plaza Cleaners  FACILITY LOCATION: 2551 Drew St # 103  Clearwater, FL 34625 7977-7061  PART I: NOTIFICATION  (check appropriate box)  1. Existing facility notified DARM by 9/1/96  2. New facility notified DARM 30 days prior to startup  3. Facility failed to notify DARM to use general permit  PART II: CLASSIFICATION  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 <x<2, 100="" 140<x<1,800="" 200<x<1,800="" both="" gal="" only,="" td="" toth="" toth<="" transfer="" types,="" yr=""><td></td><td>/</td></x<2,>		/
(check appropriate box)  1. Existing facility notified DARM by 9/1/96  2. New facility notified DARM 30 days prior to startup  3. Facility failed to notify DARM to use general permit  PART II: CLASSIFICATION  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 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 <x<2, 100="" 200<="" gal="" only,="" td="" transfer="" yr=""></x<2,>	FACILITY NAME: Lochmon	n's Plaza Cleaners rew St #103
1. Existing facility notified DARM by 9/1/96 '  2. New facility notified DARM 30 days prior to startup  3. Facility failed to notify DARM to use general permit   PART II: CLASSIFICATION  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 both types, x<140 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 <x<2, 100="" 12="" 140<x<1,800="" 140<x<2,="" 200<x<1,800="" 9="" 91)="" a="" above<="" after="" as="" both="" classification="" constructed="" correct="" dry-to-dry="" facility="" for="" gal="" gallity="" general="" is="" number="" on="" only,="" or="" permit="" qualified="" td="" this="" transfer="" types,="" yr=""><td>PART I: NOTIFICATION</td><td><u> </u></td></x<2,>	PART I: NOTIFICATION	<u> </u>
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 dry-to-dry only, x<240 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr both types, x<140 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 <x<2, 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" above<="" appropriate="" as="" before="" both="" check="" classification="" classification:="" constructed="" correct="" facility="" for="" gal="" general="" if="" is="" no,="" number="" only="" only,="" permit="" please="" qualified="" td="" the="" this="" transfer="" types,="" yr=""  =""><td><ol> <li>Existing facility notified DARM by 9/1/96</li> <li>New facility notified DARM 30 days prior to sta</li> </ol></td><td>artup <math>\square</math></td></x<2,>	<ol> <li>Existing facility notified DARM by 9/1/96</li> <li>New facility notified DARM 30 days prior to sta</li> </ol>	artup $\square$
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 dry-to-dry 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)  3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 200<x<1,800="" 9="" 91)="" a="" above<="" as="" before="" classification="" correct="" facility="" for="" gal="" general="" is="" number="" only,="" permit="" qualified="" td="" this="" transfer="" yr=""><td>PART II: CLASSIFICATION</td><td></td></x<2,>	PART II: CLASSIFICATION	
1. Existing small area source	Facility indicated on notification form that it is: (check appropriate box)	
dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 140<x<2,="" 200<x<1,800="" 9="" 91)="" a="" after="" appropriate="" before="" both="" check="" classification="" classification:="" correct="" dn="" dry-to-dry="" facility="" gal="" if="" is="" no,="" on="" only,="" or="" please="" td="" the="" this="" transfer="" types,="" yr=""  =""  <=""><td>1. Existing small area source dry-to-dry only, x&lt;140 gal/yr transfer only, x&lt;200 gal/yr both types, x&lt;140 gal/yr</td><td>dry-to-dry only, x&lt;140 gal/yr transfer only, x&lt;200 gal/yr both types, x&lt;140 gal/yr</td></x<2,>	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	dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr
If no, please check the appropriate classification:   facility qualified for a general permit as number above	dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>dry-to-dry only, 140<x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""></x<2,></td></x<2,>	dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""></x<2,>
facility qualified for a general permit as number above	·	
B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was gallons.	facility qualified for a general per facility exceeds above limits and i  B. The total quantity of perchloroethylene (perc) percentage.	is not eligible for a general permit

TART III. GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
1. Storing perchloroethylene in tightly sealed and impervious container	s? QY ON
2. Examining the containers for leakage?	BY, ON
3. Closing and securing machine doors except during loading/unloadin	g? DY DN
4. Draining cartridge filters in their housing or in sealed containers for least 24 hours prior to disposal?	at CTY CIN
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon a beds according to the manufacturer's specifications?	dsorber
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
: If classification 1 has been checked, no controls are require	d. Proceed to Part V.
If classification 2 has been checked, the machine should be (complete A below).	equipped with a refrigerated condenser
If classification 3 has been checked, the machine should be condenser or a carbon adsorber (complete A and B below) installed prior to September 22, 1993	
If classification 4 has been checked, the machine should be (complete A and B below).	equipped with a refrigerated condenser
A. Has the responsible official of all new sources and existing la (check appropriate boxes)	rge area sources:
1. Equipped all machines with the appropriate vent controls?	מט עם
2. Equipped dry-to-dry machines with a closed-loop vapor venting syste	m? OY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be direct condenser upon opening the door?	ted away from the
4. Measured and recorded the temperature of the outlet exhaust stream condenser on a weekly basis?	of a refrigerated
5. Repaired or adjusted the equipment within 24 hours if the exhaust te condenser exceeded 45°F?	mperature of the
6. Conducted all temperature monitoring after an appropriate cooldown verifying that the coolant had been completely charged?	period and after
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 on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	the condenser located

Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON
Is the temperature differential equal to or greater than 20° F?	OY ON
	dr div
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is yenting 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?	DY ON
4. Assured that the sampling port on the carbon adsorper exhaust for measuring	
perc concentrations is at least 8 fluct 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
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual	
condenser coils?	OY ON ON/A
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?	MA ON
2. Maintained rolling monthly averages of perc consumption?	ØY □N
3. Maintained leak detection inspection and repair reports for the following:	/
a. documentation of leaks repaired w/in 24 hrs? or;	QA ON
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	MA CON
4. Maintained calibration data? (for direct reading instruments only)	AVAD NO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON NA
6. Maintained startup/shutdown/malfunction plan?	DY ON
7. Maintained deviation reports?	DY ON
· Problem corrected? (No Problems with machine	מם עם
Problem corrected? (No Problems with machine 8. Maintained compliance plan, if applicable?	DY DN MYA
PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	QY ON
2. Which method of detection is used by the responsible official?	/
Visual examination (condensed solvent on exterior surfaces)	\(\overline{\pi}\)
Physical detection (airflow felt through gaskets)	<b>1</b> 2

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)

 $\Box$ 

If using direct-reading instrume	ntation,	is the equipmen	it: Mt		
a. Capable of detecting p	ere vapo	or concentrations	in a range of 0-500 ppm?	ΩY	□N
b. Calibrated against a si	andard (	gas prior to and a	ufter each use		
(PID/FID only)?	60			ΠY	□И
c. Inspected for leaks and	dobviou	s signs of wear o	n a weekly basis?	ΠY	□и
d. Kept in a clean and se	cure are	a when not in use	e?	ΠY	ПИ
e. Verified for accuracy l	oy use of	duplicate sample	es (calorimetric only)?	ПΥ	DИ
3. Has the facility maintained a leak log?				ØΥ	וא⊏
4. The following areas should be checked to	for leaks	by the inspector:			
	Leak D	Detected?		Leak l	Detected?
Hose connections, fittings,	DV	563	3.4 -1 - 1	- DV	DAN
couplings, and valves	ΟY	ØN /	Muck cookers	ΠY	UN
Door gaskets and seating	ΠY	ON	Stills	$\Box$ Y	QVQ
Filter gaskets and scating	ΠY	ON	Exhaust dampers	ΟY	ON
Pumps	ΟY	UN	Diverter valves	ΟY	אנם
1 4p5	<del></del> ,-				
Solvent tanks and containers	ΠY	<b>Q</b> N	Cartridge filter housings	ΠY	DIN DIN
Water separators	ΟY	ON.			
Not 1			ACCEPTED NO.		
A FI UDD LOVI	iva	<u>r wo</u>	_	j	

Name of Responsible Official

Teff (e) (o) (i)

Inspector's Name (Please Print)

Inspector's Signature

Date of Inspection

Approximate Pate of Next Inspection

#### ADDITIONAL SITE INFORMATION:

Suprema Super 750 Dry-Dry Model 750-52 Serial # STG58303333

- No secondary containment for machine and perc waste Boggs formerly Cleaners Equipment will give Lohmann's a price quote on pans.

- Supplier a startup, shutdown for malfunction, plan.

#1030343

		Loehmann's Dry Cleaners	
		-spoke W/ Antonio Lombardo	
	Facility	10/2/96	
MA	ARIA		
2.	Site Na	P.13 6 add title-Owner	
	LOE	P.12 a.acc coce covre	
3.	Hazard		-
		P.14 1.1a) add date control device	
4.	Facility	installed, if any; if one machine, ID#1211 Should	
	Street City:	machine, ID#1211 Should	25
		he changed to "1"	25
5.	Facilit	De changed to "1"  P.15 5.(f) required	
		p. 15 J. Cr. J.	
		·	
6)	Name a		
	AN		
7.	Respor		
	Organi Street		
	City:		34625
8.	Respor		
0.	Teleph	- ·	
	NI	Title of Facility Contact (Facusary)	
9.	Name	and Title of Facility Contact (For example, plant manager):	
	~		
10.	Facility	Contact Address:	
		Address:	
	City:	County: Zip Code:	
11.	-	Contact Telephone Number:	
	Teleph	one: ( ) - Fax: ( ) -	

RECEIVED

SEP 3 1995

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

Bureau of Air Monitoring & Mobile Sources

#### **BEST AVAILABLE COPY**

## Perchloroethylene Dry Cleaning Facility Notification

#### **Facility Name and Location**

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):	
H.	ARIA A LOTBARDO/LOCHNANNIS DRYCLETANONS,INC.	
2.	Site Name (For example, plant name or number):	
	LOEHMANNIS DRY CLEANERS, INC.	
3.	Hazardous Waste Generator Identification Number:	
	FLD 984250423	
4.	Facility Location: Street Address: 255/ DREW ST # 103 City: CLEAR WATER County: PINEULAS Zip Code: 34625	
5.	Facility Identification Number (DEP Use): 1030343	4
	Responsible Official	
6.	Name and Title of Responsible Official:	
	Name and Title of Responsible Official:  ANTONIO LOMBARDO MANACER MARIA COMBARDO WARRESTER WARRE	NON
7.	Responsible Official Mailing Address:  Organization/Firm: LOEHMANN'S DRY CLEANURS  Street Address: 2551 DREW ST SUITE 103  City: CLEARWATOR County: PINECLAS  Zip Code: 34625	
8.	Responsible Official Telephone Number: Telephone: (8/3) 797 - 708/ Fax: ( ) -	
	Facility Contact (If different from Responsible Official)	
9.	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: ( ) -	

RECEIVED

SEP 3 1770

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

Bureau of Air Monitoring & Mobile Sources

#### **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.

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
:		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#]	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit		11	· .					_	
(1) w/ ref. condenser		hall/	/	l I	/ .			T	
(2) w/ carbon adsorber	Ø	FEB-86	F151-46	M	1				
(3) w/ no controls			1						
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	T.: .					•			•
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are  (c) No control devices  2.(a) What was the total of the control devices  (b) If less than 12 mont Check why it is less	are requant	equired to be ity of perchlons ow many? [_	e installed [	X perc)	purchased is				
3. What is the facility's so (Indicate with an "X". Existing small and	Selec	ct one classif	ication only.)	)	nitions foun		3) of	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines pursuant to section (Indicate with an "X".)	ion (5) of Part II of this notification form?
Existing large area source  Carbon adsorber  []  Refrigerated co	ondenser []
New small area source Refrigerated condenser  []	
New large area source Refrigerated condenser  []	
5. A facility which contains non-exempt emissions units shall not be to Rule 62-213.300, F.A.C. Verify that all steam and hot water gene exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total hea boiler HP or less), and (2) are fired exclusively by natural gas excep during which propane or fuel oil containing no more than one perce	t for periods of natural gas curtailment
All steam and hot water generating units exempt  No such units on-site	
Production Market 1 (1D) at 1	to To Commention
Equipment Monitoring and Recordkeep	
Check all logs which are required to be kept on-site in accordance w	
(a) Purchase receipts and solvent purchases	[X]
(b) Leak detection inspection and repair	[ <b>X</b> ]
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	L M
	<u> </u>

DEP Form No. 62-213.900(2)

Effective: 6-25-96

#### Surrender of Existing Air Permit(s)

	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 notif statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the ts 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 with all terms and conditions of this general permit as set forth in Part II of this notification form.
this notif statemen maintain comply w	lication. I hereby certify, based on information and belief formed after reasonable inquiry, that the ts 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
this notif statemen maintain comply w	Secution. I hereby certify, based on information and belief formed after reasonable inquiry, that the state 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 with all terms and conditions of this general permit as set forth in Part II of this notification form.

#### PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL G	COMPLAINT/DISCOVERY L RE-INSPECTION L
AIRS ID#: 0343 001 DATE:	3/17/98 TIME IN: 11:00 TIME OUT: 12:15
FACILITY NAME: Loehmann's P	Plaza Dry Cleaners, Inc.
FACILITY LOCATION: 2551 Drew St	
Clearwater, Fl	
RESPONSIBLE OFFICIAL: Ms. Maria A. L	ombardo Phone No.: 797-70 1 🛌 🦳
Permit No. 1030343-001-AG Exp.	. Date: 10/02/2001
	5 3 5
PART I: NOTIFICATION	onito
(Check appropriate box)	ing
1. Existing facility notified DARM by 9/1/96	
2. New facility notified DARM 30 days prior t	to startup $\Box$
3. Facility failed to notify DARM to use gener	ral permit
PART II: CLASSIFICATION	
Facility indicated on notification form that it is (Check appropriate box)	No notification form  Drop store / out of business / petroleum
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)	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 before 12/9/91)
3. Existing large area source dry-to-dry only, 140 <x<2,100 (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>dry-to-dry only, 140 &lt; x &lt; 2,100 gal/yr transfer only, 200 &lt; x &lt; 1,800 gal/yr both types, 140 &lt; x &lt; 1,800 gal/yr (Constructed before 12/9/91)</td></x<2,100>	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 before 12/9/91)
This is a correct facility classification:	☐N ☐ Can not determine
If no, please check the appropriate classification	on:
facility qualified for a general permit facility exceeds above limits and is	
B. The total quantity of perchloroethylene (pe	

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?		N			
2. Examining the containers for leakage?	Q-Y Q	N .			
3. Closing and securing machine doors except during loading/unloading?	gy o	N			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?		N			
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	□Y □	n Qina			
DADE IV. DDO CDCC VIDVE CONTROL C					
PART IV: PROCESS VENT CONTROLS	_				
In Part II-A:					
If classification (1) has been checked, no controls are required. Proceed to P	art 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 shecked, 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 sou	A. Has the responsible official of all new sources and existing large area sources:				
(check appropriate boxes)	Mach	Mach			
1. Equipped all machines with the appropriate vent controls?	OYON	ΠYΩN			
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	$\square$ Y $\square$ N	$\square_{Y} \square_{N}$			
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	□Y □N	□y □n			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	□Y □N	□Y □N			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	_□Y □N	□Y □Ñ			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying the coolant had been completely charged?	□Y□N	□Y <sup>□</sup> N			

## **BEST AVAILABLE COPY**

B. Has the responsible official of an existing large or new large area source a	ilso:
I. Measured and recorded the exhaust temperature on the outlet side of the conditional located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	enser
2. Measured and recorded the washer exhaust temperature at the condenser inlet outlet weekly?  Is the temperature differential equal to or greater than 20°F?	and  OY ON  OY ON
Measured and recorded the perc concentration in the exhaust stream weekly at end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?  Is the perc concentration equal to or less than 100 ppm?	the  OY ON ONA  OY ON
Assured that the sampling port on the carbon adsorber exhaust for measuring concentrations is at least 8 duct diameters downstream of any bend, contraction expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?	n, or
Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY ON ONA
Routed airflow to the carbon adsorber (if used) at all times?	OY ON ONA
'ART V: RECORDKEEPING REQUIREMENTS	
las the responsible official: check appropriate boxes)	
. Maintained receipts for perc purchased?	OY ON
. Maintained receipts for perc purchased?	OY ON
. Maintained receipts for perc purchased?	
<ul><li>Maintained receipts for perc purchased?</li><li>Maintained rolling monthly averages of perc consumption?</li></ul>	
<ul> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:</li> </ul>	□Y □N
<ul> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:</li> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> </ul>	OY ON
<ul> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following: <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> </ul>	
<ul> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following: <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instrument only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> </ul>	OY ON EMA
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instrument only)</li> </ol>	OY ON OY ON OY ON OY ON OY ON OY ON OY
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instrument only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> <li>Maintained startup/shutdown/malfunction plan?</li> </ol>	OY ON OY ON OY ON OY ON OY ON OY ON OY

PA	ART VI: LEAK DETECTION AND F	REPAIR	S			
1.	Does the responsible official conduct a	weekly l	eak dete	ection and repair inspection?	<u> P</u> ý	ΠN
2.	Which method of detection is used by the	ne respor	sible o	fficial?		
	Visual examination (conden	sed solve	ent of e	xterior surfaces)		
	Physical detection (airflow f	elt throu	gh gask	cets)	<b>Q</b>	
	Odor (noticeable perc odor)				9	
	Use of direct-reading instrur	nentation	n (FID/	PID/calorimetric tubes)		
	If using direct-reading instrumentation	on, is the	equip	ment:		
	<ul> <li>a Capable of detecting perc var 0-500 ppm.</li> <li>b. Calibrated against a standard (PID/FID only).</li> <li>c. Inspected for leaks and obvio</li> </ul>	gas prio	r to and	after each use	□Y □Y □Y	N O N
	d. Kept in a clean and secure are	ea when	not in u	ise.	$\square_{Y}$	□N
	e. Verified for accuracy by use (calorimetric only)?	of duplic	ate sam	nples	ΩΥ	ΠN
3.	Has the facility maintained a leak log?				PY	ŪN
4.	The following area should be checked f	or leaks	by the i	nspector: not operating at the time Muck cookers	e of in	p.
	Hose connections, fitting couplings, and valves	Ωen·nγ □Y		Muck cookers		ŪN
	Door gaskets and seating	$\square_{Y}$	$\square$ N	Stills	$\square_{Y}$	$\square_N$
	Filter gaskets and seating	$\square_{Y}$	$\square$ N	Exhaust dampers	$\square_{Y}$	$\square$ N
	Pumps	$\square_{Y}$	$\square N$	Diverter valves	$\square_{Y}$	$\square$ N
	Solvent tanks and containers	ΩY	ΠN	Cartridge Filter housing	ΩY	$\square$ N
	Water separators	□Y	ΠN			
	Name of Responsible Official  Morgarsh V. Hennis  Inspector's Name (Please Print)  Jayan V. Hennis  Inspector's Signature			3/9/98 Date of Inspecting 3/99 Approximate Date of New		ion

### **BEST AVAILABLE COPY**

ADDITIONAL SITE INFORMATION:	
Manufacturer Suprema  Model# Serial#	Capacitylbs
Model# Serial#	Mfg yr
Manufacturer	
Model# Serial#	Mfg yr
Totification (unpermitted sources only):  . Was the facility assisted in filling out the notification by the i  . Did the facility insist on filling out its own notification, and v	
cord keeping:  Does facility have statement/specs as to the design accuracy of temperature of 45°F w/accuracy ±2°F, or 7.2°C w/accuracy	
Iazardous Waste:  Is all perc. contaminated wastewater either treated or disposed. If wastewater is evaporated, is it an approved system, and using. Does the facility have secondary containment for the dry-dry. Does the facility have secondary containment for any perc. w	carbon filtration?
oiler:  Manufacturer Fulton  Model # Serial #	Hp <u>3</u>
Model # Serial #	Mfg yr <u>1983</u>
Fuel Type: Natural gas?  propane?  fuel oil?	□ Electric
	•
omments: Tony Lombardo - indicated will a May 1998. Crolered the pour from Co advised him that he heeds to have see machine and for waste / chemical stor	Leaven Edward (Brea)
advised him that he needs to have See	andam containment for
machine and for waste / chemical stor	rage.
	·

OITI	NAL SITE INFORMATION:
•	
· · · · · ·	
•	
	• • • • • • • • • • • • • • • • • • • •
	<del></del> :
-	
,	

## **BEST AVAILABLE COPY**

Acc

AIRS ID#: 1030343

Revised 10/10/96

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Loch	nann's	Raza	Dry Clea	infig.	_DATE: _	3/11/99
FACILITY LOCATION: 255/	Drew	JE KA	CA )03			,
FACILITY LOCATION: 2551	irwoter	- FL	MR 76 JYY	j	-	
				itoring		
Annual Reporting Period: March	17	19 <u>98</u>	ureau of Air Mon To Mobile Sour	ices cuch	Ц	19 <u>99</u>
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F	_		•			rule □NO
If NO, complete the following:						
#1. Term or condition of the general permit	that has not bee	n in continuous o	compliance during	g the report	ting period	stated above:
Exact period of non-compliance: from			to			
Action(s) taken to achieve compliance:					·	_
Method used to demonstrate compliance:						
#2. Term or condition of the general permit	that has not bee	n in continuous o	compliance during	g the report	ing period	stated above:
Exact period of non-compliance: from			to			
Action(s) taken to achieve compliance:						
i  Method used to demonstrate compliance:						
<u> </u>	2000					
As the responsible official, I hereby certify, a made in this notification are true, accurate a upon rolling averages of purchase receipts, year for transfer or combination facilities.	and complete. F does not exceed	urther, my annu 2,100 gallons pe	al consumption of	perchloroe	ethylene sc	lvent, based
RESPONSIBLE OFFICIAL: ANTON Nar	1/0 LOM	BARDO G	ful fin	ure		3-11-99 Date

\*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

Page \_\_\_\_\_ of \_\_\_\_\_.

#### PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INSPECTION COMPLAINT/DISCOVERY	
AIRS ID#: 1030343 001 DATE: 3/11/59 TIME IN: 2100 TIME OUT:  FACILITY NAME: Loehmann's Plaza Dry Cleaners, Inc.	
FACILITY LOCATION: 2551 Drew St., Unit 103	
Clearwater, FL, 33765	· 
RESPONSIBLE OFFICIAL: Maria A. Lombardo PHONE:797-708  CONTACT: PHONE:	
CONTACT: PHONE:	
PART I: NOTIFICATION	·
(Check appropriate box)	
1. Existing facility notified DARM By 9/1/96	9-
2. New facility notified DARM 30 days prior to startup	
3. Facility failed to notify DARM to use general permit	
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (Check appropriate box)  No notification form Drop store / out of business / petroleu	ım
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)  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)	<b>)</b> - •-
3. Existing large area source dry-to-dry only, 140 <x<2,100 (constructed="" 12="" 140<x<1,800="" 140<x<2,100="" 200<x<1,800="" 4.="" 9="" 91)="" 91)<="" after="" area="" before="" both="" dry-to-dry="" gal="" large="" new="" on="" only,="" or="" source="" td="" transfer="" types,="" yr=""><td>1</td></x<2,100>	1
This is a correct facility classification: $\square Y$ $\square N$ $\square$ Can not determine	
If no, please check the appropriate classification:  facility qualified for a general permit as number above facility exceeds above limits and is not eligible for a general permit	
B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this facility was gallons.	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?						
2. Examining the containers for leakage?						
3. Closing and securing machine doors except during loading/unloading?	<u>u</u> y	ПN				
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ΘÝ	ПN	□NA			
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	ΟY	ПN	□ NÁ			
				_		
PART IV: PROCESS VENT CONTROLS				_		
In Part II-A:						
If classification (1) has been checked, no controls are required. Proceed to Pa	rt 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 sour (check appropriate boxes)	rces:					
1. Equipped all machines with the appropriate vent controls?	☐ Y	ΠN				
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	QΥ	Ωи	□NA			
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	QΥ	□N	□NA			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	□ Y	□N				
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	Q Y	□ N	□NA			
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	Y	ПN				
6.						

В.	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?	□Y □N
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20°F?	OY ON ONA
	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?  Is the perc concentration equal to or less than 100 ppm?  Assured that the sampling port on the carbon adsorber exhaust for measuring perc.	□y □n □na □y □n □na
	concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?	□y □n □na
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ONA
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ONA
	Routed airflow to the carbon adsorber (if used) at all times?  ART V: RECORDKEEPING REQUIREMENTS	OY ON ONA
		OY ON ONA
PA Ha (cl	ART V: RECORDKEEPING REQUIREMENTS	OY ON ONA
PA Ha (cl	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)	QY ON
PA Ha (cl	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?	
PA Ha (cl	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?	QY ON
PA Ha (cl	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:	OY ON ONA OY ON ONA OY ON ONA
H2 (cl 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ONA
PA H2 (cl 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  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 and parts installed w/in 5 days of receipt?	OY ON ONA OY ON ONA OY ON ONA
PA H2 (cl 1. 2. 3. 4. 5.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  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 and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)	OY ON ONA OY ON ONA OY ON ONA
PA Hi (cl 1. 2. 3. 4. 5. 6.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  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 and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?	OY ON OY ON ONA OY ON ONA OY ON ONA OY ON ONA
PA Hi (cl 1. 2. 3. 4. 5. 6.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  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 and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?	OY ON ONA

PA	ART VI: LEAK DETECTIO	N AN	D REI	PAIRS		<u> </u>	
1.	Does the responsible official c inspection?	onduct	t a wee	ekly (for s	small sources, bi-weekly) leak	detect	tion and repair
2.	Has the facility maintained a le	eak log	g?			Qy	$\square$ N
3.	Does the responsible official c	heck tl	he foll	owing are	eas for leaks:		
	Hose connections, fitting couplings, and valves	<b>⊟</b> Ý	ŪN	□na	Muck cookers	Эγ	□n □na
	Door gaskets and seating	99	□N	□NA	Stills	₽y	□n □na
	Filter gaskets and seating	ΘÝ	ΠN	□NA	Exhaust dampers	Ξγ	□n □na
	Pumps	ÐΫ	ΠN	□NA	Diverter valves	ΘY	□n . □na
	Solvent tanks and containers	ΘY	□N	□NA	Cartridge Filter housing	₽y	□n □na
	Water separators	ΘÝ	$\square_N$	□NA			
4.	4. Which method of detection is used by the responsible official?  Visual examination (condensed solvent of exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:						
	J J			_	ns in a range of 0-500 ppm.		□y □n
		•			fter each use(PID/FID only).		$\square_{Y} \square_{N}$
•	c. Inspected for leaks and o	bvious	s signs	of wear o	n a weekly basis?		□y □n
	d. Kept in a clean and secu	ire are	a wher	not in u	se.		$\square_{Y} \square_{N}$
	e. Verified for accuracy by	use of	duplic	cate samp	les (calorimetric only)?		□Y □N
	Inspector's Name (Please Printing of the Inspector's Signature	1/1:5 1t)	-		$\frac{3/1/99}{\text{Date of Ins}}$ $\frac{3/3000}{\text{Approximate Date}}$		

## ADDITIONAL SITE INFORMATION:

Need Se condany Containment for waste - No pere odor in
plant. Machine is clear, but not running during isp.
_ does not appear to do a large volume. Owner was plunning
to ask ask waste hander about for recommendation for
Sunday contaminant. Machine whits to outside whorthy
before (1 minute) and of cycle. This arrange aspears
to be allowed considering the age of the martine and.
to be allowed considering the age of the machine and. The amount of per used.

## TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL GEOMPLAINT/DISCOVERY GEO					
AIRS ID#: 1030343 001 DATE: 3/11/99 TIME IN: 2:00 TIME OUT: 2:75					
FACILITY NAME: Loehmann's Plaza Dry Cleaners, Inc.					
FACILITY LOCATION:2551 Drew St., Unit 103					
Clearwater, FL, 33765					
RESPONSIBLE OFFICIAL: Maria A. Lombardo Phone: 797-7081					
Permit No. 1030343-001-AG Exp. Date: 10/02/2001					

- Based of the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).
- Based on the results of the compliance requirements evaluated during this inspection, the following compliance <u>discrepancies</u> were noted (only items which are checked):

### **Inspection Summary Report Guidance**

Compliance Requirement/Problem	Follow-up Action Required
Did not have a start-up, shutdown, malfunction (SSM) plan in place, along with associated recordkeeping, on site.	If no specific procedures are available from the manufacturer, develop a SSM plan that describes procedures for maintaining and operating equipment during periods of start-up and shutdown associated with a malfunction. EPA's O&M manual may be used if no manufacturers information is available. Keep log of maintenance actions
Purchase receipts were not maintained properly.	Maintain all purchase receipts in a log kept on-site for determination of perchloroethylene solvent consumption.
Monthly purchase records were not maintained as a consecutive twelve month total.	Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a consecutive twelve month total.
Could not confirm that temperature sensor was designed to measure 45°F with an accuracy of ±2°F.	Obtain verification from the manufacturer that the temperature sensor is designed to measure 45°F with an accuracy of ±2°F, or determine this by another method that the Department would consider appropriate.
Evaporator for separator wastewater does not incorporate a pre-filtration system.	Facility may choose to either dispose of perc-containing separator water as hazardous waste, or incorporate a carbon filtration system with the evaporator (as per the State's guidelines).
Did not store all perc, and perc-containing waste in tightly sealed containers.	Store all perc and perc-containing waste in tightly sealed containers which are impervious and chemically unreactive to the solvent.
Did not maintain a log of leak detection inspection and repair records.	Develop and implement a leak detection inspection and repair program. Maintain a log of leak detection inspection and repair records.

Compliance Requirement/Problem	Follow-up Action Required				
Did not conduct weekly leak detection and repair inspection.	Develop and implement a leak detection inspection and repair program. Use at least one of the methods outlined in Part II, Section 7(a), of the general permit provisions, to detect leaks. Inspect the items listed in Part II, Section 7(b), for leaks. Repair leaks within 24 hours of detection, unless repair equipment must be ordered.				
No calibration records for the mechanical direct reading instrumentation (halogen detector) were available.	Mechanical direct-reading instrumentation shall be operated as directed by the manufacturer and must meet the conditions in Part II, Section 7(e) of the general permit provisions				
Did not measure and record the outlet temperature of the refrigerated condenser on the dry-to-dry machine (dryer, reclaimer) on a weekly basis.	Develop and implement a monitoring program. Measure and record the outlet temperature on a weekly basis. The temperature, measured at the end of the drying cycle, must not exceed 45°F.				
Airflow is directed towards the refrigerated condenser upon the door being opened and no diverter valve is in place.	Equip the condenser with a diverter valve to prevent air flow to the refrigerated condenser when the door is opened.				
The outlet exhaust temperature of the refrigerated condenser exceeds 45°F and was not repaired within 24 hours.	Repair or adjust condenser within 24 hours of measurement indicating that the outlet exhaust temperature of the refrigerated condenser exceeds 45°F. The repair shall be documented in the monitoring record log.				
Machine doors are not closed and secure during times other than loading and unloading.	Keep doors closed and secured at all times except during loading and unloading.				
Temperature monitoring was not conducted after an appropriate cooldown period and after verifying that the coolant was completely charged.	Conduct all temperature monitoring following an appropriate cooldown period and after verifying that the coolant has been completely charged.				
Containers for perchloroethylene and/or perchloroethylen-containing waste were found to be leaking.	Examine the containers, used for storing perchloroethylene and/or perchloroethylene-containing waste, for leakage.				
Comments: Need Se candary Contamment for waste					
If the Inspection Summary Report indicates follow-up actions are required, you must take immediate corrective measures to achieve compliance. Pinellas County will perform a follow-up inspection to determine that proper corrective actions have been taken.					
Inspection Conducted by: Margaret Hennis					
Inspector's Signature:	ef Vitlanis.				
Phone Number: 464-4422					

#### INTEROFFICE MEMORANDUM

**Date:** 17-Dec-1999 08:51am

From: Margaret Hennis

mhennis@co.pinellas.fl.us

Dept: Tel No:

To: bowman s (bowman s@dep.state.fl.us)

Subject: Sources that have shut down

The following sources have new owners, thus the ARMS numbers are no longer active:

- 1. Diamond Cleaners -1030317 001 (now A & R Enterprises)
- 2. Loehmann's Cleaners 1030343 001. I will inspect this one and assist new owner with completing the notification form.
- 3. Brian Michael's Cleaners 1030392 I will inspect this one and assist new owner with completing the notification form.

Kimchok - 1030287 001 is also inactive. They no longer have their degreaser. I will send a copy of the letter we received from them with December's inspection reports.

Ihave no way of contacting former owners of Brian Michaels and Diamond Cleaners. Often when we go out to a dry cleaning store, we find a new owner there. Occasionally they contact us during the sale to assist the new owners.

#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

258805 /

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

JAN 23 97

**TOTAL AMOUNT DUE: \$50.00** 

Do NOT Remove Label

AIRS ID# 1030343 LOEHMANN'S DRY CLEANERS INC ANTONIO LOMBARDO 2551 DREW STREET SUITE 103 **CLEARWATER FL 34625** 

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Оъј.: 002273

	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No legsurance Coverage Provided)						
	95					*	7
	. 266 0500 0550 0006	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Feee  Rec 10  DANIEL LON  Stre CAMPUS WA  2551 DREW S  City, CLEARWATE	MBARDO LK CLEA T STE 103	3	3001AG	Postmark Here	TE VALLED KIN
	ļ ——	PS fermens	uz,-avv	- J		Instruction	
SENDER: COMPLETE THIS SECTION  ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted 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, or on the front if space permits.  1. Article Addressed to:  10			A. Received A. Rec	ature  ivery address s, enter deliv	Bernat Clearly)  Bernat Clearly)  Significant from ite very address below	B. Date of Delivery  Agent Addressee am 1?  Yes ow:  No	
		•			egistered sured Mail	☐ Return Red ☐ C.O.D.	ceipt for Merchandise
				4. Restr	icted Delive	ry? (Extra Fee)	☐ Yes
2. Article Number (Copy from service label)  700000520000000000009377 9552							
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952							

#### 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.

## **TOTAL AMOUNT DUE: \$50.00**

303380

Do NOT Remove Label

AIRS ID 1030343

MARIA A LOMBARDO ANTONIO LOMBARDO 2551 DREW STREET SUITE 103 CLEARWATER FL 34625 FOR GOVERNMENT USE ONEY Org.: 37550101000 EO: B1

Fund: 20-2-035001

Obj.: 002273

#### Z 333 613 239

# US Postal Service Receipt for Certified Mail No Insurance Coverage Provided

AIRS ID 1030343

MARIA A LOMBARDO ANTONIO LOMBARDO 2551 DREW STREET SUITE 103 CLEARWATER FL 34625

	Postage	\$
1995	Certified Fee	
	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to Whom & Date Delivered	
April	Return Receipt Showing to Whom, Date, & Addressee's Address	
800	TOTAL Postage & Fees	\$
S Form 3800, April 1995	Postmark or Date	

on the reverse side?	SENDER:  Complete items 1 and/or 2 for additional services.  Complete items 3, 4a, and 4b.  Print your name and address on the reverse of this form so that we card to you.  Attach this form to the front of the mailpiece, or on the back if spa permit.  Write "Return Receipt Requested" on the mailpiece below the article.  The Return Receipt will show to whom the article was delivered a delivered.	I also wish to receive the following services (for an extra fee):  1.  Addressee's Address  2.  Restricted Delivery  Consult postmaster for fee.	
Is your RETURN ADDRESS completed o	3. Article Addressed to:  AIRS ID 1030343  MARIA A LOMBARDO ANTONIO LOMBARDO 2551 DREW STREET SUITE 103 CLEARWATER FL 34625	4a. Article N 4b. Service Registere Express Return Rec 7. Date of Do	Type ed
	5. Received By: (Print Name)  ANDALO LO (BADA)  6. Signature: (Addressee or Agent)	and fee is	e's Address (Only if requested paid)
_	PS Form <b>3811</b> , December 1994	02595-97-B-0179	Domestic Return Receipt

#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0390843

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 # 1030343 LOEHMANN'S DRY CLEANERS INC ANTONIO LOMBARDO 2551 DREW STREET SUITE 103 CLEARWATER FL 34625

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273 MAIL ROOM