

Department of Environmental Protection

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

Colleen M. Castille Secretary

June 29, 2006

Mr. David Sideri Adtec II Tampa, Incorporated 5440 70th Avenue North Pinellas Park, Florida 33781

Re: Facility No.: 1030353-003

Dear Mr. Sideri:

The Department has received the Title V General Permit Notification Form for the chromium electroplating and anodizing facility that you submitted on May 26, 2006.

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,

Joseph Kahn, Chief

Bureau of Air Monitoring and Mobile Sources

JK/jw

cc: Mr. Gary Robbins, Pinellas County

"More Protection, Less Process"

Printed on recycled paper.

EMISSION FEE DATES 96 2005
NO ACTIVITY FOR FACILITY......
SOC REPORTS .5.
3/21/2605
COMP. STATUS-SNC MNC (IN)
TRIT-SOCR-Statement of
Compliance Report-

MAY 2 6 2006

CHROMIUM ELECTROPLATING AND ANODIZING AIR GENERAL PERMIT NOTIFICATION FORM

Bureau of Ar Managran & Mobile Sources

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.

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): David Sideri Adtec II, Tampa, Inc. 2. Site Name (For example, plant name or number): Adtec II Tompa, Inc. 3. Hazardous Waste Generator Identification Number: FLD 984238378 4. Facility Location: Street Address: 5440 70th Avenue North City: Pinellas Park County: Pinellas Zip Code: 33781 5. Facility Identification Number: (DED Use ONLY doing 19 in) Responsible Official 6. Name and Title of Responsible Official: Name: Dovid Sideri Title: Owner 7. Responsible Official Mailing Address: Organization/Firm: Adtec II Tampa Street Address: 5440 70th Avenue North City: Pinellas Park County: Pinellas Zip Code: 33781 8. Responsible Official Telephone Number: Telephone: (727) 522 - 4653 Fax: (727) 525 - 4368 Facility Contact (If different from Responsible Official) 9. Name and Title of Facility Contact (For example, plant manager): Halina Lesniak Lab Manager 10. Facility Contact Address: Street Address: \$4440 70th Avenue North City: Pinellas Zip Code: 33781 11. Facility Contact Telephone Number: Telephone: (727) 522= 4653 Fax: (723) 525-4368	Facility Name and Location
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DEP Form No. 62-213.900(5) Effective: 2/24/99

Facility Information

1.a. Provide the information below for each hard electroplating machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

HARD CHROMIUM PLATING TANKS

DATE	UNIT CLASS	DATE CNTRL	CONTROL	APPLICABLE
PURCHASED -	(circle one)		DEVICE	
		INSTALLED	(see key)	(see key);
	New/Existing	T 707		
·	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing	1		
	New/Existing			

	New/Existing	1	*		İ
	New/Existing				
	New/Existing				
FS = fume suppre	d scrubber esmesh,pad ced-bed scrubber an essant only uppressant with a w		a = 0.03 mg	g/dscm 🗼 🕴 ve standard for mul	tiple tanks
WA = Wetting age					·
the type of n	nformation below for the date of AND ANODIZING	its purchase, and the	ne date the control d	levice was installed	the facility. Indicat, if applicable.
DATE PURCHASED	The first of the second	DATE CNTRL DEVICE	CONTROL DEVICE	APPLICABLE STANDARD	·
FUNCHASED >	(circle one)	INSTALLED	(see key)	TO SEE A SAME OF A COMPANY OF THE PARK OF	
02/20/99	New Existing	10/20/95	FSEWA	V	
02/20/92	New/Existing)	10/20/95	rs/WA	Y	
02/2-/12	New/Existing	10/20/15	1 3/ WA	<u> </u>	
- :	New/Existing	<i>1</i>			;
•	New/Existing				
	New/Existing			***************************************	;
	New/Existing				;

DEP Form No. 62-2	13.900(5)		20
Effective: 2/24/99	3	•	

New/Existing New/Existing New/Existing

Key for Control Device Type	Applicable Standard Key				
PBS = packed-bed scrubber CMP = composite mesh pad PBS/CMP = packed-bed scrubber and composite mesh pa FS = fume suppressant only FS/WA = fume suppressant with a wetting agent FM = fiber-bed mist eliminator WA = wetting agent	x = 0.01 mg/dscm y = 45 dynes/cm ad z = records of bath components (trivalent Cr tanks only) c = alternative standard for multiple tanks under common control				
 Indicate the date by which the facility must meet the re (Note: if your facility contains both hard and decorative p date) 					
	uary 25, 1997				
3. Indicate how the facility will fulfill the compliance der	Control of the production of the control of the con				
[] The facility will conduct an initial perfo	ormance test				
[] The facility will use a wetting agent to r limit in No. 1 above.	reduce emissions and will meet the existing surface tension				
4. Equipment Monitoring and Recordkeeping Information Check all logs which are required to be kept on-site in accordance.					
(a) Equipment maintenance [] (b)	Equipment inspection and repair []				
(c) Equipment malfunctions $[\underline{ \checkmark}]$ (d)	Operation and maintenance checklist []				
(e) Instrument calibration $[\underline{\checkmark}]$ (f) (used during initial performance test)	Start-up, shutdown, malfunction plan []				
(g) Performance test results [] (h)	Equipment monitoring Operating periods [] Fume suppressant records				
(i) Excess emissions $[\underline{\checkmark}]$	Operating periods $[\underline{\checkmark}]$				
(k) Rectifier capacity [] (l)	Fume suppressant records []				
(m) Purchase records of wetting agent components	[<u> </u>				
5. Surrender of Existing DEP Air Permit(s)					
Please indicate with an "X" the appropriate selection:					
[] I hereby surrender all existing DEP air perm notification form; the permit number(s) are:					
[] No DEP air permits currently exist for the o	peration of the facility indicated in this notification form.				

DEP Form No. 62-213.900(5) Effective: 2/24/99

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.

DAVID SIDERI PRES

Print name of responsible official (

3-3-06

Date

DEP Form No. 62-213.900(5) Effective: 2/24/99

BOARD OF COUNTY COMMISSIONERS

Kenneth T. Welch - Chairman Ronnie E. Duncan - Vice Chairman Calvin D. Harris Susan Latvala John Morroni Karen Williams Seel Robert B. Stewart



May 23, 2006

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

Re: Adtec II, Tampa, Inc. – New Facility Name and Owner (currently 1030353-002-AG)

Ms. Bowman:

Enclosed is a Title V General Permit Notification for Adtec II, Tampa, Inc., 5440 70th Avenue North, Pinellas Park, FL, 33781, which was recently collected. During the most recent inspection on May 3, 2006, it was discovered that the new owner had failed to submit the required notification. The ownership changed effective November 1, 2005. Our office assisted the facility in processing this notification.

If you have any questions concerning this mailing, you may contact me at Suncom 570-4422, or by E-mail.

Sincerely,

Matt McCann Environmental Program Manager

Air Quality Division

cc: RF, PF (103 0353)

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PLEASE ADDRESS REPLY TO:

300 S. Garden Avenue Clearwater, Florida 33756

Phone: (727) 464-4422

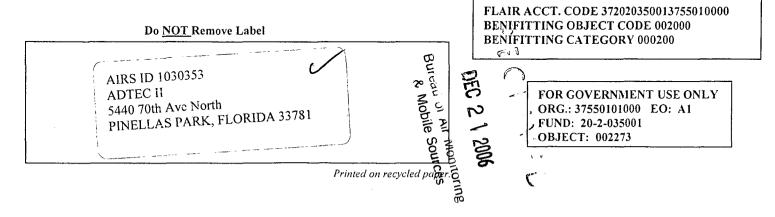
FAX: (727) 464-4420 TDD: (727) 464-4106

Website: www.pinellascounty.org

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00



AD	TEC II TAMPA, INC.								11/81	•
	Department Of	Environmental I	Protection			12	/18/2006			
. Da 12	te Type /12/2006 Bill	Reference 1030353		 Original Amt. 50.00	Bala	nce Due 50.00	Discount		Payment 50.00	
						Check	Amount		50.00	
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Wachovia Bank

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