# Perchloroethylene Dry Cleaning Facility Notification RECEIVED

### **Facility Name and Location**

	1)56 1 6 4006
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Walid . P. Rokial owner Bureau of Air Monitori
	9. Mahilo Courage
2.	Site Name (For example, plant name or number):
	Handy Craff Cleanys
3.	Hazardous Waste Generator Identification Number:
•	,
	Mary and the state of the state
4.	Facility Location:
	Street Address: 33 0 A A N.
	City: Ponte Vedra BCL County: St Johns Zip Code: 32082
5.	Facility Identification Number (DEP Use):
	1090052
	Responsible Official
6)	Name and Title of Responsible Official: WU, A・P・ とっちょみし
-	Walid P- KoliAL
_	
7.	Responsible Official Mailing Address:
	Organization/Firm: Harry CV elt Clears Street Address: 330 A1A~. 21215
	City: Poute Vadra BCL County: 54 Johns Zip Code: 32082
	Ages and the bare
8.	Responsible Official Telephone Number:
	Telephone: $(904) \ge 85 - 88/9$ Fax: ( )
	<u> </u>
	Facility Contact (If different from Responsible Official)
).	Name and Title of Facility Contact (For example, plant manager):
10.	Facility Contact Address:
	Street Address:
	City: County: Zip Code:
1	Facility Contact Telephone Number:
• •	Telephone: ( ) - Fax: ( ) -

DEP Form No. 62-213.900(2)

Effective: 6-25-96

# #1090052

!	Handy Craft Cleaners
į į	6. add title - Owner - from #1.
P.14	1.(a) add date control device
	1.(a) add date control device installed 1.(c) mark out "\" and initial 3. Should be new large area
	3. Should be new large area
p.15	Source 4. Should be new large area Source Wrefrig. con.
1	Source Wretrig. Con.

### **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	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR
Dry-to-Dry Unit		01-Apr-9	5 40	ren	Ja 39	<u></u>		·	4. 411.
(1) w/ ref. condenser									
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit		CERT	5 1						
(4) w/ ref. condenser									
(5) w/ carbon adsorber								_	
(6) w/ no controls									
Dryer Unit	· .			++0					ati daya
(7) w/ ref. condenser							<u> </u>		
(8) w/ carbon adsorber									
(9) w/ no controls				_					
Reclaimer Unit	4 ,	a to the second		• • • • • • • • • • • • • • • • • • • •	***	\$			ale e te
	+								
(10) w/ ref. condenser									ı
(10) w/ ref. condenser (11) w/carbon adsorber							· · · · · ·		
(11) w/carbon adsorber (12) w/ no controls	requi	ired but not	vet installed		1				
(11) w/carbon adsorber (12) w/ no controls  (b) Control devices are (c) No control devices  2.(a) What was the total of	are ro	equired to be ity of perchlons ons	installed [oroethylene (	perc)				eep records:	

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(4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)						
Existing large area source Carbon adsorber  Refrigerated condenser  []						
New small area source Refrigerated condenser  New large area source Refrigerated condenser						
New large area source Refrigerated condenser						
5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site:						
All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.						
All steam and hot water generating units exempt No such units on-site						
Equipment Monitoring and Recordkeeping Information						
Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:						
(a) Purchase receipts and solvent purchases						
(b) Leak detection inspection and repair						
(c) Refrigerated condenser temperature monitoring						
(d) Carbon adsorber exhaust perc concentration monitoring						
(e) Instrument calibration						
(f) Start-up, shutdown, malfunction plan						

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### Surrender of Existing Air Permit(s)

lease indicat	re 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)				
<u>X</u>	No air permits currently exist for the operation of the facility indicated in this notification form.				
	Responsible Official Certification				
this notifi statemeni maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in facility. I hereby certify, based on information and belief formed after reasonable inquiry, that the its 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.				
I will pro	mptly notify the Department of any changes to the information contained in this notification.				
Signature	Date 12-13-1996				

AIRS ID#: 1090052



# DRY CLEANER AIR QUALITY GENERAL PERMITCT 3 1997 ANNUAL COMPLIANCE CERTIFICATION FORM Bureau of Air Monitoring

& Mobile Source DATE: FACILITY LOCATION: IZDIRA BIZACH, ST. JOHNS Annual Reporting Period: 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. 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: DING TEMP 1 Exact period of non-compliance: from ECKS - WAINTHIN LOS Action(s) taken to achieve compliance: 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: MAINTAINING INSPECTION DEC 19, 1916 to SEP 3, 1997 Exact period of non-compliance: from Action(s) taken to achieve compliance: ANNUAL TRISPECTION Method used to demonstrate compliance: 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:

\*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



TYPE OF INSPECTION:

PART I: NOTIFICATION

ANNUAL

<u>b</u>/

COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS ID#: 1090052 DATE: 9/3/97 TIME IN: 10:00 TIME OUT: 10:42

FACILITY NAME: HANDY CRAFT CLEANERS

FACILITY LOCATION: 330 AIA N. # 1219

PONTE VEDRA BEACH, ST. JOHNS

RESPONSIBLE OFFICIAL: WALID KORIAL PHONE: 904-285-8819

CONTACT NAME: PHONE:

(check appropriate box)				
1. New facility notified DARM 30 days prior to startup				
2. 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/petroleum			
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)			
3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$ )	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$ )			
5. This is a correct facility classification  If no, please check the appropriate classific  facility qualified for a ger  facility exceeds above lim				
B. The total quantity of perchloroethylene (perc) pu facility was 124 gallons.	archased within the preceding 12 months by this dry cleaning			

# 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? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

### PART IV: PROCESS VENT CONTROLS

### In Part 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 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 sources: (check appropriate boxes)

			_
1.	Equipped all machines with the appropriate vent controls?	DY.	ND
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	DY.	ON ON/A
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?		ON ON/A
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	ΟY	<b>D</b> N
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	ΟY	ON DENIA
6.	Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	ΟY	<b>E</b> N

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?	ΠY	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	□и	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ПN	□N/A
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?	ΟY	□и	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΩY	ΠN	□N/A
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?	ΩY	□N	; □N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y	□N	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ПN	□N/A

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official: (check appropriate boxes)					
1. Maintained receipts for perc purchased?	DY ON				
2. Maintained rolling monthly averages of perc consumption?	□Y ØX				
3. Maintained leak detection inspection and repair reports for the following:	,				
a. documentation of leaks repaired w/in 24 hrs? or;	DY OPN DN/A				
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 ON/A				
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON ON/A				
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DNAVA				
6. Maintained startup/shutdown/malfunction plan?	DAY ON				
7. Maintained deviation reports?	OY ON TOXYA				
Problem corrected?	OY ON DAVA				
8. Maintained compliance plan, if applicable?	OY ON BONIA				

PART VI: LEAK DETECTION AND REPAIRS  1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?  2. Has the facility maintained a leak log?  3. Does the responsible official check the following areas for leaks?  Hose connections, fittings, couplings, and valves  Door gaskets and seating  DOON DNA  Filter gaskets and seating  DOON DNA  Filter gaskets and seating  DOON DNA  Pumps  DOON DNA  Pumps  DOON DNA  Cartridge filter housings  DOON DNA  Water separators  DOON DNA  Water separators  DOON DNA  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector				
1.	Does the responsible official conduct a	weekly (for small sources	s, bi-weekly) leak detection as	nd repair
	inspection?			DAY ÖN
2.	Has the facility maintained a leak log?			□Y ODAY
3.	Does the responsible official check the	following areas for leaks	?	
		ON ON/A	Muck cookers	DY ON ON/A
	Door gaskets and seating	DAY ON ON/A	Stills	ON ON/A
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY ON ON/A
	Pumps	ON ON/A	Diverter valves	DY ON ON/A
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	ON ON/A
	Water separators	DY ON ON/A		
4.	Which method of detection is used by	the responsible official?		
	Visual examination (condensed s	solvent on exterior surface	s)	0
	Physical detection (airflow felt th	rough gaskets)		
	Odor (noticeable perc odor)	•		
	Use of direct-reading instruments	ation (FID/PID/calorimetr	ric tubes)	<u> </u>
	Halogen leak detector	eekly (for small sources, bi-weekly) leak detection and repair		
	If using direct-reading inst	□N/A		
	a. Capable of detecting	perc vapor concentrations	in a range of 0-500 ppm?	OY ON
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use	OY ON
	c. Inspected for leaks as	nd obvious signs of wear o	on a weekly basis?	□Y □N
	d. Kept in a clean and s	secure area when not in us	ee?	□Y □N
	e. Verified for accuracy	by use of duplicate sample	es (calorimetric only)?	DY DN

K. A. BANKS		r	7/3/97
Inspector's Name (Please Print)			Date of Inspection
Bambas	_	:	9/98
Inspector's Signature			Approximate Date of Next Inspection

ADDITIONAL SITE INFORM	IATION:		
		·	
·			
	·		
			. •
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	1		

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 4	COMPL	AINT/DISC	OVERY	RE-INSPEC	TION [
TIME IN: 10:00	TIME OUT:	10:42	2	_AIRS ID#:	1090052	
TYPE OF FACILITY:	DRY CLEANE	R	-			· .
FACILITY NAME:	ANDY CRAFT	- CUZA	NERS		DATE:	13/97
FACILITY LOCATION:	330 A 1A	N. #	1219	<del></del>	-	
	PONTE VEDRA	BEACH		JOHNS		
RESPONSIBLE OFFICIAL:	WALLD KOF	RIAL	PI	HONE NUMBER	904-285	-8819
	the compliance requirem Rule 62-213.300, Florida				acility is found to b	e in
Based on the results of discrepancies were note	the compliance requiremed:	ents evaluated	d during this	inspection, the f	ollowing complian	æ
COMPLIANCE REQ	UIREMENT/PROB	LEM	FOLL	OW-UP ACT	TON REQUIR	ED
NOT DOING	TEMP CHECK	K	Do	CHECKS	AND	
OR MAINTAI			,	-	RECORDS	
NOTMAINTE			- M A		INSPECTA	THE LOR
INS PECTION	1 hos			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·	24 400
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		1				,
				,		,
		·				
COMMENTS:			-			
· · · · · · · · · · · · · · · · · · ·		· · · · · ·		_		
The Annual Compliance Certific	cation form has been pro	perly certified	and submitt	ed to the inspect	or. YES	NO
DATE OF NEXT INSPECTIO	)N:	9/9	8	•	<u> </u>	
	D	(Appro	oximate)			
INSPECTION CONDUCTED	BY:	<i>1 14 1 DAA</i> APleas	e Print)		<u></u>	
INSPECTOR'S SIGNATURE	: Bar	ulea		(ONE NUMBE)	R: <u>904-448</u>	3-4310
	• •	Pageof_			X Z	242 Revised 10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM AIRS ID 1090052 WALID P. KORIAL WALID P KORIAL 330 ALAN #1215 PONTE VEDRA BEACH FL 33082

Do NOT Remove Label Annual Reporting Period: 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. 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: Exact period of non-compliance: from Action(s) taken to achieve compliance: 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: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: 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 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.

<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.

## PERCHLOROETHYLENE DRY CLEANERS

### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

6

TYPE OF INSPECTION: ANNU RE-IN:	SPECTION   COMPLAINT/DISCOVERY   SPECTION
AIRS ID#: 109 0052 DATE: CAS	9/21/98 TIME IN: 9:00 TIME OUT: 9:40
FACILITY LOCATION: 330 A	
•	
Ponte (	Jedra Beach, FC.
RESPONSIBLE OFFICIAL: WALL	D P. KORIAL PHONE: 904 285-8819
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days pr	•
2. Facility failed to notify DARM to use g	general permit
PART II: CLASSIFICATION	
Facility indicated on notification form the (check appropriate box)	hat it is:  □ No notification form □ Drop store/out of business/petroleum
Facility indicated on notification form the (check appropriate box)  A.	
Facility indicated on notification form the (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)	□ Drop store/out of business/petroleum  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)  4. New large area source
Facility indicated on notification form the (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 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr	<ul> <li>□ Drop store/out of business/petroleum</li> <li>□ 2. New 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         (constructed on or after 12/9/91)</li> <li>□ 4. New large area source         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 on or after 12/9/91)</li> </ul>
Facility indicated on notification form the (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 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)  5. This is a correct facility classification of the properties of the properties of the properties facility qualified	Drop store/out of business/petroleum  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)  4. New large area source 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 on or after 12/9/91)  Description:  □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

# 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? DY DN **Q**N/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at Y ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber CAY ON ON/A beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS

### In Part 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 refrigerated condenser (complete A helow).

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 sources:
(ch	eck appropriate boxes)

(0)	leek appropriate ookes)			
1.	Equipped all machines with the appropriate vent controls?	\$0	N	
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	YY	ПИ	□N/A
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	<b>4</b> Y	מם	□N/A
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	<b>P</b> Y	ПN	
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	$\not\!$	NO	□N/A
6.	Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	<b>J</b> ey	ПN	•

	as the responsible official of an existing large or new large area source also:			
	easured and recorded the exhaust temperature on the outlet side of the condenser located a dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ΠY	ПΝ	
	easured and recorded the washer exhaust temperature at the condenser let and outlet weekly?	ΟY	ПΝ	□N/A
	ls the temperature differential equal to or greater than 20° F?	$\Box$ Y	ПΝ	□N/A
at	easured and recorded the perc concentration in the exhaust stream weekly the end of the final drying cycle while the machine is venting to the adsorber, machines are equipped with a carbon adsorber?	ΟY	מם	□N/A
	Is the perc concentration equal to or less than 100 ppm?	$\Box$ Y	ПΝ	□N/A
pc or	essured that the sampling port on the carbon adsorber exhaust for measuring ere concentrations is at least 8 duct diameters downstream of any bend, contraction, expansion; is at least 2 duct diameters upstream from any bend, contraction, expansion; and downstream from no other inlet?	ΟY	N	□N/A
	quipped transfer machines (dryers, reclaimers, and washers) with individual ondenser coils?	ΟY	ПN	□N/A
6. Ro	outed airflow to the carbon adsorber (if used) at all times?	ΟY	אם	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	AN □N
2. Maintained rolling monthly averages of perc consumption?	MD Y DN
3. Maintained leak detection inspection and repair reports for the following:	·
a. documentation of leaks repaired w/in 24 hrs? or;	A/NO NO Y
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	AND NO YE
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON <b>B</b> N/A
5. Maintained exhaust duct monitoring data on perc concentrations?	אמ <b>קלי</b> אם עם
6. Maintained startup/shutdown/inalfunction plan?	M DN
7. Maintained deviation reports?	AVN DN DN/A
Problem corrected?	AVA UN UN/A
8. Maintained compliance plan, if applicable?	AVA NO YØ

PA	RT VI: LEAK DETECTION AND	REPAIRS				
1. ]	Does the responsible official conduct a	weekly (for sma	all sources, bi	-weekly) leak detection ar	nd repair	
j	inspection?				<b>Y</b> Y (	אב
2. 1	Has the facility maintained a leak log?				<b>Æ</b> YY (	אב
3. 1	Does the responsible official check the	following areas	for leaks?			
	Hose connections, fittings, couplings, and valves	ים אם צלם	N/A	Muck cookers	Ør □n	□N/A
Ī	Door gaskets and scating	ום אם צי	N/A	Stills	<b>Ø</b> Y □N	□N/A
	Filter gaskets and seating	ום אם צי	N/A	Exhaust dampers	$\triangleright$ Y $\square$ N	□N/A
	Pumps	40 DN DI	N/A	Diverter valves	$ \mathcal{A}_{Y} \square_{N} $	□N/A
	Solvent tanks and containers	A DN DI	N/A	Cartridge filter housings	₽Y □N	□N/A
	Water separators	נם אם צאָס	N/A			
4. \	Which method of detection is used by	he responsible o	official?			
	Visual examination (condensed s	olvent on exteri	or surfaces)		É	
	Physical detection (airflow felt th	rough gaskets)			<b>F F F F F F F F F F</b>	
	Odor (noticeable perc odor)				40	
	Use of direct-reading instrument	ation (FID/PID/	calorimetric t	ubes)		
	Halogen leak detector					
	If using direct-reading inst	umentation, is	the equipme	nt:	□N/A	
	a. Capable of detecting	perc vapor conc	entrations in	a range of 0-500 ppm?	DY DN	
	b. Calibrated against a (PID/FID only)?	standard gas pri	or to and afte	r each use	DY DN	
	c. Inspected for leaks as	nd obvious signs	of wear on a	weekly basis?	DY DN	
	d. Kept in a clean and s	ecure area wher	n not in use?		□Y □N	
	c. Verified for accuracy	by use of duplic	cate samples (	(calorimetric only)?	□Y □N	**.
	<u> </u>	<del></del>				

Christopher L. Scott	9-21-98
Inspector's Name (Please Print)	Date of Inspection
At led H	9-99
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

ForentA

Miraclean 335

W) Diverter

# M

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: HANDY Craft Cleaners		DATE: 9/21/98
FACILITY LOCATION: 330 ALA North		
Poste Vedra Beach, FL. 3	2082	<del>_</del>
Annual Reporting Period: Sept. 97 19_	TO <u>Sept. 9</u>	<u>8</u> 19
Based on each term or condition of the Title V general air permit, my facili 62-213.300, Florida Administrative Code (F.A.C.), during the period cover	· ·	
If NO, complete the following:	P	
#1. Term or condition of the general permit that has not been in continuous	s compliance during the report	ng period stated above:
Exact period of non-compliance: from	10 80 7	
Action(s) taken to achieve compliance:	S S S S S S S S S S S S S S S S S S S	
Method used to demonstrate compliance:	Lices Into	
#2. Term or condition of the general permit that has not been in continuous	s compliance during the reporti	ng period stated above;
Exact period of non-compliance: from	to	<u> </u>
Action(s) taken to achieve compliance:		
Method used to demonstrate compliance:		
As the responsible official, I hereby certify, based on information and beliemade in this notification are true, accurate and complete. Further, my annupon rolling averages of purchase receipts, does not exceed 2,100 gallons year for transfer or combination facilities.  RESPONSIBLE OFFICIAL: WALL P. KorlA	ual consumption of perchloroe	thylene solvent, based
Name (Please Print)	Signature	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.

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

V

TYPE OF INSPECTION: ANNUAL Y	COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 9:00 TIME OUT: 9:4	airs id#: 109005 Z
TYPE OF FACILITY: Dry Cleaner	
FACILITY NAME: HANDY Craft Cleaners	DATE: 9/21/98
FACILITY LOCATION: 330 AIA North	·
Ponte Vedra Beach,	FL. 32082
RESPONSIBLE OFFICIAL: Walld Korlay	PHONE NUMBER: 904-285-8819
Based on the results of the compliance requirements ev compliance with DEP Rule 62-213.300, Florida Admir	valuated during this inspection, the facility is found to be in nistrative Code (F.A.C.).
Based on the results of the compliance requirements ev discrepancies were noted:	valuated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	· ·
COMMENTS:	
The Annual Compliance Certification form has been properly or	ertified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: 9-9	9
· ·	(Approximate)
INSPECTION CONDUCTED BY: Christopher	(Please Print)
INSPECTOR'S SIGNATURE: Cht.	PHONE NUMBER: 904- 448- 4310 125-5

Page\_\_\_of\_\_\_.

Revised 10/96

PERCHLOROETHYLENE DRY CLE	NER	S
TITLE V GENERAL PERMIT	- [ ]	
COMPLIANCE INSPECTION CHECKLIST		
$ \psi_{\mathcal{L}}\rho$	a	

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	COMPLAINTID,  de Mobile Soince	itoria	
AIRS ID#: 1090052		_ TIME IN: _ 7-30 _ 1	rime out: _/	10:15
FACILITY NAME: Hand	y Craft Clear	iels		
FACILITY LOCATION: 🚄	330 AIA Nor	H		
	Ponte Vedra Bea	ch, 32082		
RESPONSIBLE OFFICIAL	: Walid Kori	PHONE: 904	-285-89	519
CONTACT NAME:		PHONE:		
PART I: NOTIFICATION				
(check appropriate box)				
1. New facility notified DAR	M 30 days prior to startup			
2. Facility failed to notify DA	RM to use general permit			
PART II: CLASSIFICATIO	)N			
		<u> </u>		
Facility indicated on notifica	ation form that it is:	□ No notificatio		troleum
Facility indicated on notifica (check appropriate box)  A.	ation form that it is:	□ No notificatio □ Drop store/ou		troleum
(check appropriate box)  A.  1. Existing small area sou	urce 🗆 2. 1	☐ Drop store/ou New small area source		troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 ga	urce 🛭 2. l aVyr dry	□ Drop store/ou New small area source to-dry only, x < 140 gal/yr		troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 gatransfer only, x < 200 gal/y	urce 🗅 2. l al/yr dry yr tran	Drop store/ou New small area source to-dry only, $x < 140$ gal/yr ssfer only, $x < 200$ gal/yr		troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 ga	urce 🗆 2. I al/yr dry yr tran boti	□ Drop store/ou New small area source to-dry only, x < 140 gal/yr		troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 galyr both types, x < 140 galyr (constructed before 12/9/9)  3. Existing large area sor	urce \( \text{\tiny{\text{\tinit}\\ \text{\texi{\texi{\text{\text{\texi{\text{\texi{\texi{\texi\texi{\texi}\texitt{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\tex{	Drop store/ou  New small area source to-dry only, x < 140 gal/yr asfer only, x < 200 gal/yr a types, x < 140 gal/yr astructed on or after 12/9/91)  New large area source	t of business/pe	troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 gatransfer only, x < 200 gal/y both types, x < 140 gal/yr (constructed before 12/9/9)  3. Existing large area sordry-to-dry only, 140 \le x \le 1	urce	Drop store/ou  New small area source to-dry only, x < 140 gal/yr sfer only, x < 200 gal/yr types, x < 140 gal/yr astructed on or after 12/9/91)  New large area source to-dry only, 140 ≤ x ≤ 2,100 g	t of business/pe	troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 gatransfer only, x < 200 gal/y both types, x < 140 gal/yτ (constructed before 12/9/9)  3. Existing large area sordry-to-dry only, 140 ≤ x ≤ transfer only, 200 ≤ x ≤ 1,50 cm.	urce	New small area source to-dry only, $x < 140$ gal/yr sifer only, $x < 200$ gal/yr types, $x < 140$ gal/yr astructed on or after 12/9/91)  New large area source to-dry only, $140 \le x \le 2,100$ gal/sifer only, $200 \le x \le 1,800$ gal/	t of business/pe	troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 gatransfer only, x < 200 gal/y both types, x < 140 gal/yr (constructed before 12/9/9)  3. Existing large area sordry-to-dry only, 140 \le x \le 1	urce	Drop store/ou  New small area source to-dry only, x < 140 gal/yr sfer only, x < 200 gal/yr types, x < 140 gal/yr astructed on or after 12/9/91)  New large area source to-dry only, 140 ≤ x ≤ 2,100 g	t of business/pe	troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 gatransfer only, x < 200 gal/y both types, x < 140 gal/yτ (constructed before 12/9/9)  3. Existing large area sordry-to-dry only, 140 ≤ x ≤ transfer only, 200 ≤ x ≤ 1, both types, 140 ≤ x ≤ 1,800	2. 1 al/yr dry yr tran both 1) (con urce	New small area source sto-dry only, $x < 140$ gal/yr asfer only, $x < 200$ gal/yr a types, $x < 140$ gal/yr astructed on or after 12/9/91)  New large area source sto-dry only, $140 \le x \le 2,100$ gal/at types, $140 \le x \le 1,800$ gal/at types, $140 \le x \le 1,800$ gal/yr at types, $140 \le x \le 1,800$ gal/yr	t of business/pe	troleum
(check appropriate box)  A.  1. Existing small area sordry-to-dry only, x < 140 gal transfer only, x < 200 gal/y both types, x < 140 gal/yr (constructed before 12/9/9)  3. Existing large area sordry-to-dry only, 140 ≤ x ≤ transfer only, 200 ≤ x ≤ 1, both types, 140 ≤ x ≤ 1,800 (constructed before 12/9/9)  5. This is a correct facility  If no, please check the	urce	New small area source to-dry only, $x < 140$ gal/yr asfer only, $x < 200$ gal/yr a types, $x < 140$ gal/yr astructed on or after $12/9/91$ )  New large area source to-dry only, $140 \le x \le 2,100$ gal/yr astructed on or after $12/9/91$ )  The proposition of the state	al/yr mine bove	troleum

Is the responsible official of the dry cleaning facility:	Control and the second
(check appropriate boxes)	
1. Storing perchloroethylene in tightly sealed and impervious containers?	אוא או אם אם אם
2. Examining the containers for leakage?	DY DN DWIA
3. Closing and securing machine doors except during loading/unloading?	ADY DH
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY ON ONA
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	AINIE NO YO

### PART IV: PROCESS VENT CONTROLS

10	3	4	7 1		
10	~	***		_ 13	•

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 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).

	Has the responsible official of all new sources and existing large area sources: neck appropriate boxes)			
1.	Equipped all machines with the appropriate vent controls?	₹BY	מם	
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	ØY	מם	□N/A
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Bey	מם	□N/A
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	DV.	ОN	
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	`Day	מם	□N/A
6.	Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	Æ¥.	מם	

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?	ΟY	ΠN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ИΩ	□N/A
	ls the temperature differential equal to or greater than 20° F?	ΩY	DИ	□N/A
3.	Measured and recorded the pere 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?	ΟY	ПN	-DN/A
	Is the pere concentration equal to or less than 100 ppm?	ΟY	ΠN	□N/A
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?	ΟY	NO.	□n/a
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	ПN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	מם	□N/A
_				

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	DAY DX
2. Maintained rolling monthly averages of perc consumption?	AGTA ON
3. Maintained leak detection inspection and repair reports for the following:	
<ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> </ul>	AVA ON O
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	DY DN BNA
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN BANA
5. Maintained exhaust duct menitoring data on perc concentrations?	AMPONO YO
6. Maintained startup/shutdown/malfunction plan?	ФУ □И
7. Maintained deviation reports?	אאם אם אם
Problem corrected?	AVAGE NO YO
8. Maintained compliance plan, if applicable?	אוא אם אם אם

### PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair ПN inspection? ΜY 2. Has the facility maintained a leak log? $\square N$ 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, אואם אם צוצל אומם מם צאל Muck cookers couplings, and valves MY DN DN/A AYNO NO YQ Stills Door gaskets and scating MY ON ONA YOY ON ON/A Filter gaskets and seating Exhaust dampers MY ON ON/A **V**OY ON ON/A Diverter valves Pumps MY ON ON/A MY ON ON/A Cartridge filter housings Solvent tanks and containers Y DN DN/A Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector □N/A If using direct-reading instrumentation, is the equipment: DY DN a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use DY DN (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? DY DN c. Verified for accuracy by use of duplicate samples (calorimetric only)? DY DN

Christopher L. Scott	9-7-99
Inspector's Name (Please Print)	Date of Inspection
MA I LA	9-2000

Inspector's Signature

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
	·

AIRS ID#: 109 0052

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

<u> </u>	
	DATE: 9-7-99
FACILITY LOCATION: 330 AIA NOTH	
Ponte Vedra Reach, FL	32082
· · · · · · · · · · · · · · · · · · ·	
Annual Reporting Period: Sept 1998 TO	Sept 1999
Based on each term or condition of the Title V general air permit, my facility has rema 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this st	
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous compliance	e during the reporting period stated above:
Exact period of non-compliance: from	0
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	·
#2. Term or condition of the general permit that has not been in continuous compliance	te during the reporting period stated above:
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and belief formed at made in this notification are true, accurate and complete. Further, my annual consumupon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for year for transfer or combination facilities.	ption of perchloroethylene solvent, based
RESPONSIBLE OFFICIAL: Wald Koral Name (Please Print)	Signature Date
	<u> </u>

<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.

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL W	COM	PLAINT/DISCOVE	RY	RE-INSPEC	TION
TIME IN: 9:30	TIME OUT:	0:15	AI	RS ID#: 109	0052	
TYPE OF FACILITY: Day	Cleaner					
FACILITY NAME: Ha	1 0 01 -	eane	رح	Г	OATE: 9 - 7	1-99
, , ,	. \		· ·		ALL.	
FACILITY LOCATION: 3	70		· ·			
		eacl	, 32082	-		
RESPONSIBLE OFFICIAL: _(	Dalid Korial		PHON	e number $q_{\scriptscriptstyle \mathcal{O}}$	<u>14-285-</u>	<u>- 8819                                   </u>
	f the compliance requirement Rule 62-213.300, Florida Ad				y is found to be	e in
Based on the results of discrepancies were not	f the compliance requiremented:	ts evalua	ted during this insp	ection, the follow	ving complianc	e :
COMPLIANCE REQ	UIREMENT/PROBLI	EM	FOLLOW	-UP ACTIO	N REQUIRE	E <b>D</b>
	•					
•						,
		.				
					, i	
			_	_		
						:
			·			
•			·			
			•			•
		_				
COMMENTS:						
			·			
	•					
The Annual Compliance Certif	ication form has been proper	rly certifi	ied and submitted to	the inspector.	YES	NO
	O ~			<b>-</b> .	7.	
DATE OF NEXT INSPECTION	υπ: <i>Ο</i>		proximate)			·
THORN CONTON		( <u></u>		_		
INSPECTION CONDUCTED	BY: hrstop	ne Con	ase Print)			
	alet 1	Pie	24	2	مال (الالا.	4717
INSPECTOR'S SIGNATURE	: ////	1	PHON	E NUMBER: <u>9</u>	11 170	V155
	~ //		.f			トdノン Parisod 10/04
	Pa	agec	of			Revised 10/96

# AIRS 1D#: 1090052 DR

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

<u> </u>					
FACILITY NAME: Handy Cra	A Clean	er		<b>p</b> _n	ATE: 9/22/00
FACILITY LOCATION: 380 Al	1 North	Suite.	215	.,4	
- Ponte V.Q	tra Boar	ch, Flor	nole &	2082	<i></i>
Annual Reporting Period: SIPTIME	· · · · · · · · · · · · · · · · · · ·	19	TO(	To Alma	200 19
Based on each term or condition of the Title V 62-213.300, Florida Administrative Code (F.A.	general air permi	t, my facility h	as remained by this statem	in compliance in	gth DEP Rule
If NO, complete the following:					
#1. Term or condition of the general permit t	hat has not been ir	continuous co	ompliance du	ring the reportin	g 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	hat has not been in	ı continuous co	ompliance du	ring the reportin	g period stated above:
Exact period of non-compliance: from			to	,	
Action(s) taken to achieve compliance:	•			-	
Method used to demonstrate compliance:					
As the responsible official, I hereby certify, be made in this notification are true, accurate a upon rolling averages of purchase receipts, a year for transfer or combination facilities.  RESPONSIBLE OFFICIAL:  Name	nd complete. Furt	her, my annuai	l consumption year for dry	n of perchloroeti	hylene solvent, based

<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.

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 2	COMPLAINT/DISCOVE	ERY	RE-INSPECTION
TIME IN: 12:25	TIME OUT: 12	2:35 AI	RS ID#: 100	90052
TYPE OF FACILITY: DYU	Cleaner			
FACILITY NAME: HOLD	dy Craft Clea	ner		DATE: 9/22/00
FACILITY LOCATION:	DAIAN duit	p 215	20100	<del> </del>
( <u></u>	onto Yeara Bea	11/1/	_32082	001) 205, 0.610
RESPONSIBLE OFFICIAL:	Natio Konau	PHON	ie number:	.4043283-8819
ري ا	the compliance requirements ex Rule 62-213.300, Florida Admi	-		y is found to be in
Based on the results of discrepancies were note	the compliance requirements eved:	valuated during this inspe	ection, the follow	ving compliance
COMPLIANCE REQ	UIREMENT/PROBLEM	follow	V-UP ACTIO	N REQUIRED
	,			•
·				
				······································
	-		•	
·	· .			
	· · · · · · · · · · · · · · · · · · ·			
COMMENTS:	·			
		,		
The Annual Court 1: 00 1:55				
The Annual Compliance Certific		mhor 2001	the inspector.	YES NO NO
DATE OF NEXT INSPECTIO		(Approximate)		
INSPECTION CONDUCTED	Hoo Han IA	YNN		<u> </u>
INSPECTOR'S SIGNATURE:	Hollor II ( ).	(Please Print)	e number: (	
	The state of the s		S NOMEDIA	, , ,
	Pag	eof		Revised 10/96

# PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	ANNUAL	CO	MPLAINT/DISCOVERY	
V	RE-INSPECTION			
airs id#: <u>1090052</u> i	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		2:25 time out: <u>/</u>	2:35
FACILITY NAME: HONC	dy Craft Cl	eaners		
FACILITY LOCATION:	BO AIA NOV	th Suite	215	
( <u>4</u> 6	nte Vedra	Blach, Flo	rida 32082	2
RESPONSIBLE OFFICIAL:	Walid Ko	no pho	DNE: <u>(</u> 904)285-8	3819
CONTACT NAME:		РНС	ONE:	
PART I: NOTIFICATION				·
(check appropriate box)				
1. New facility notified DARM				
2. Facility failed to notify DARM	M to use general permit			
DADTH. OLICOTROLETON				
HEARS IN CLASSIBIL'ATION	· · · · · · · · · · · · · · · · · · ·		<del></del>	
PART II: CLASSIFICATION			In natification form	
Facility indicated on notificatio (check appropriate box)			No notification form Drop store/out of business/pe	troleum
Facility indicated on notificatio (check appropriate box) A.	on form that it is:		Orop store/out of business/pe	troleum
Facility indicated on notificatio (check appropriate box)  A.  1. Existing small area source	on form that it is:	New small area so	Orop store/out of business/pe	troleum
Facility indicated on notificatio (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	on form that it is:	New small area so y-to-dry only, x < 1 nsfer only, x < 200	Orop store/out of business/pe ource 40 gal/yr gal/yr	troleum
Facility indicated on notificatio (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/y	on form that it is:  ce	New small area so y-to-dry only, $x < 1$	Drop store/out of business/pe burce 40 gal/yr gal/yr gal/yr	troleum
Facility indicated on notificatio (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)	on form that it is:  ce	New small area so y-to-dry only, $x < 1$ onsfer only, $x < 200$ th types, $x < 140$ gaponstructed on or after	Orop store/out of business/pe  ource 40 gal/yr gal/yr sl/yr er 12/9/91)	troleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr both types, x < 140 gal/yr	on form that it is:  ce	New small area so y-to-dry only, x < 1 onsfer only, x < 200 th types, x < 140 gas onstructed on or after New large area so y-to-dry only, 140 <	Orop store/out of business/pe  ource  40 gal/yr gal/yr al/yr er 12/9/91)  ource <pre> x \le 2,100 gal/yr</pre>	troleum
Facility indicated on notificatio (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 ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800	on form that it is:  ce	New small area so y-to-dry only, x < 1 onsfer only, x < 200 th types, x < 140 gap onstructed on or after the second of the second on the secon	Orop store/out of business/pe  ource  40 gal/yr gal/yr al/yr er 12/9/91)  ource  ≤ x ≤ 2,100 gal/yr ≤ 1,800 gal/yr	troleum
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# PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) OY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? CIY ON CHYA DY ON 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at OY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? CHY ON ON/A PART IV: PROCESS VENT CONTROLS In Part 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 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 sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? ND YD 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? DY ON ON/A 3. Equipped the condenser with a diverter valve so airflow will be directed away from the CY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated ND~YQ condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

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	ΩΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ПN	□N/A
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?	ΠY	ПΝ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПΝ	□N/A
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?	ПY	ПИ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	□N.	.□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	ΠN	□N/A

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	QY ON			
2. Maintained rolling monthly total of perc consumption?	OY ON			
3. Maintained leak detection inspection and repair reports for the following:				
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ON/A			
<ul> <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>	OY ON ON/A			
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON QN/A			
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON ON/A			
6. Maintained startup/shutdown/malfunction plan?	□Y □N			
7. Maintained deviation reports?	OY ON ONTA			
Problem corrected?	OY ON ON/A			
8. Maintained compliance plan, if applicable?	OY ON WON/A			

### PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? DY $\square$ N 2. Has the facility maintained a leak log? QY- $\square N$ 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, MY DN DN/A DY ON ON/A Muck cookers couplings, and valves DY ON ON/A DY ON ON/A Stills Door gaskets and seating DY DN DN/A DY ON ON/A Filter gaskets and seating Exhaust dampers DY ON ON/A DY ON ON/A Diverter valves Pumps MY ON ON/A DY ON DN/A Solvent tanks and containers Cartridge filter housings ΦY ON ON/A Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on 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: DN/A a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? QY QN b. Calibrated against a standard gas prior to and after each use DY DN (PID/FID only)? 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? QY QN e. Verified for accuracy by use of duplicate samples (calorimetric only)? OY ON

Inspector's Name (Please Print)

Output

Inspector's Signature

Approximate Date of Next Inspection

Forenta Miraclan 335

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HANDY CRAFT CLEANERS WALID P KORIAL 330 A1A NORTH #1215 PONTE VEDRA BEACH FL 33082 15 99 15 99 None

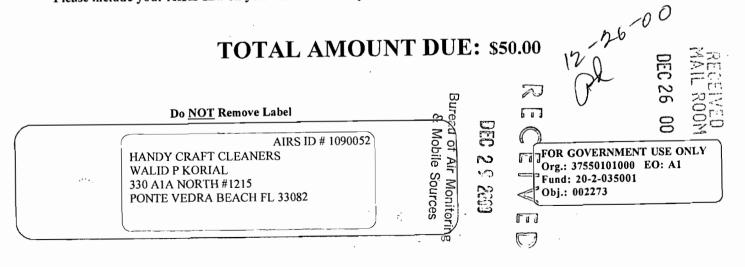
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FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273







TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

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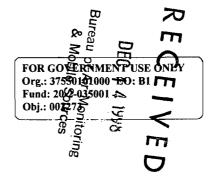
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WALID P KORIAL
330 ALAN #1215
PONTE VEDRA BEACH FL 33082

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Fund: 20-2-035001 Obj.: 002273

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	Certified Fee	
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10	Restricted Delivery Fee	
April 1995	Return Receipt Showing to Whom & Date Delivered	
April	Return Receipt Showing to Whom, Date, & Addressee's Address	
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n the reverse side?	■Print your name and address on the reverse of this form so that we can return this card to you.  ■Attach this form to the front of the mailpiece, or on the back if space does not permit.		I also wish to receive the following services (for an extra fee):  1.  Addressee's Address 2.  Restricted Delivery Consult postmaster for fee.	
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_	PS Form <b>3811</b> , December 1994	2595-97-B-0179	Domestic Return Receipt	1

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Fund: 20-2-035001 Obj.: 002273

& S

### **Butler, Rick**

From:

Alvarez, Fred

Sent:

Friday, September 19, 2003 1:53 PM

To: Cc: Butler, Rick Banks, Richard

Subject:

Handicraft Cleaners #1090052

Rick-Handicraft Dry Cleaners Air ID # 1090052 perc machine was removed on 9/13/03 and placed in storage as per Responsible Officer, Walid Korial. I went ahead & performed a gen permit inspection today & logged-it into ASGP but I'm not sure how to place subj in the inactive "files." Gracias.

Fred