

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

September 21, 2001

Ms. June Hutch
Washing Well
2058 South Jefferson Street
Perry, Florida 32347

Re: Facility No.: 1230048-003

Dear Ms. Hutch:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 20, 2001.


Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements of the Title V general permit.

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

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

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,


Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Rick Banks, Northeast District

"More Protection, Less Process"

Printed on recycled paper.

Grant, Patricia

From: Bowman, Sandy

Sent: Thursday, June 29, 2006 11:25 AM

To: Grant, Patricia

Cc: Thomas, Bruce X.

Pat,

Please inactivate AIRS ID #1230048-003. Rick Banks called and said the facility is not operating as a perc drycleaner. The facility is now a laundromat.

Thank you.

Sandy

7/14/2006

1230048-003

P.15

1(a) Place Purchase date in space provided
Existing should be circled under
Status.

2(a) Add number of gallons of peric purchased
in past 12 months. If none add "0"

P.17

Responsible official sign and date for changes
made

DEP ROUTING AND TRANSMITTAL SLIP

TO: (NAME, OFFICE, LOCATION)

3. _____

1. _____

4. _____

2. _____

5. _____

PLEASE PREPARE REPLY FOR:

COMMENTS:

____ SECRETARY'S SIGNATURE

____ DIV/DIST DIR SIGNATURE

____ MY SIGNATURE

____ YOUR SIGNATURE

____ DUE DATE _____

ACTION/DISPOSITION

____ DISCUSS WITH ME

____ COMMENTS/ADVISE

____ REVIEW AND RETURN

____ SET UP MEETING

____ FOR YOUR INFORMATION

____ HANDLE APPROPRIATELY

____ INITIAL AND FORWARD

____ SHARE WITH STAFF

____ FOR YOUR FILES

FROM: _____ DATE: _____ PHONE: _____

RECEIVED

AUG 20 2001

Bureau of Air Monitoring
C. Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	Washing Well		
2. Site Name (For example, plant name or number):	123		
3. Hazardous Waste Generator Identification Number:	123-0048		
4. Facility Location: Street Address:	2058 S. Jefferson Street	County:	Zip Code:
City:	PERRY	Taylor	32347
5. Facility Identification Number (DEP Use ONLY - do not fill in):	1230048-003		

Responsible Official

6. Name and Title of Responsible Official: Name:	June Hatch	Title:	Pres
7. Responsible Official Mailing Address: Organization/Firm: Street Address:	2058 South Jefferson Street	County:	Zip Code:
City:	123 PERRY	Taylor	32347
8. Responsible Official Telephone Number: Telephone:	(850) 584-5225	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:	() -

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

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

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

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
5/18/90	EXISTING		
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

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

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening _____)

3. What is the facility's source classification based on the definitions found in section (3) of Part II?
Indicate with an "X". Select one classification only.)

- Small Area Source
- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
Transfer only on-site (used less than 200 gallons of perc per year)
Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
Transfer only on-site (used 200 - 1,800 gallons of perc per year)
Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?
(Indicate with an "X".)

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

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site?

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

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

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

June Hatch
Print name of responsible official

Gene Hatch
Signature

08.17.01
Date

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Received by <i>(Please Print Clearly)</i> B. Date of Delivery 2-6-3	
1. Article Addressed to: <div style="text-align: right;">AIRS ID#1230048</div> WASHING WELL INC JUNE HATCH 2058 S JEFFERSON STREET PERRY FL 32347		C. Signature X <i>Ferna DePa</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: <i>Ferna DePa</i>	
2. Article Number <i>(Transfer from service label)</i>		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
7001 0320 0001 7975 5755		4. Restricted Delivery? <i>(Extra Fee)</i> <input type="checkbox"/> Yes	
PS Form 3811, March 2001		Domestic Return Receipt	
		102595-01-M-1424	

U.S. Postal Service CERTIFIED MAIL RECEIPT <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
OFFICIAL USE	
Postage \$	<i>[Signature]</i> Postmark Here
Certified Fee	
Return Receipt Fee <i>(Endorsement Required)</i>	
Restricted Delivery Fee <i>(Endorsement Required)</i>	
Total Postage & Fees	
AIRS ID#1230048	
Sent WASHING WELL INC Street JUNE HATCH or PO 2058 S JEFFERSON STREET City PERRY FL 32347	
PS Form	Instructions

7001 0320 0001 7975 5755

CUT HERE)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

459956 MAR17 2006

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

TOTAL AMOUNT DUE: \$75.00

Do **NOT** Remove Label

AIRS ID# 1230048
WASHING WELL INC
2058 S Jefferson St
PERRY, FL 32347

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.

...KE)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

443730 DEC272004

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID# 1230048 10
WASHING WELL INC
2058 S Jefferson St
PERRY, FL 32347

Bureau of Air Monitoring
& Mobile Sources

DEC 28 2004

RECEIVED

FOR GOVERNMENT USE ONLY
ORG.: 37550101000
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.



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.

435837 JAN 30 2004

TOTAL AMOUNT DUE: \$50.00


Do **NOT** Remove Label

1230048
JUNE HATCH
WASHING WELL INC
2058 S JEFFERSON STREET
PERRY FL 32347

U.S. Dept. of Air Monitoring
Mobile Sources

RECEIVED
FEB 3 2004

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

 THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

422598 FEB 7 2003

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

WASHING WELL INC
JUNE HATCH
2058 S JEFFERSON STREET
PERRY FL
32347

AIRS ID#1230048

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: 12812
Fund: 20-2-035001
Obj.: 002273

Bureau of Air Monitoring
& Mobile Sources

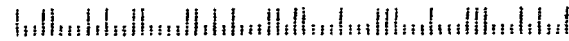
FEB 12 2003

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

32315+3070 99



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

412161 DEC24 2001

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 # 1230048
WASHING WELL INC
JUNE HATCH
2058 S JEFFERSON STREET
PERRY FL
32347

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

Washington Well
2058 S. Jefferson St
Perry St 32348



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

32315+3070 99

