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PERCHLOROETHYLENE DRY CLEANER Bureau of Air Monitoring AIR GENERAL PERMIT NOTIFICATION FORM & 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.

	Anton's Beachside Quik C	lea _y	
2.	Site Name (For example, plant name or number):		
3.	Hazardous Waste Generator Identification Number:		
-	Facility Location: 125 E. Granda Blud Street Address:		
	City: Ormond Bch County: volusic	Zip Code: 32176	
· .	Facility Identification Number (DEP Use ONLY - do not fill in):	270148-	
	sponsible Official		
	Name and Title of Responsible Official: me: Title:		
_	Description Time Anna & Reach State Well Clean		
	Organization/Firm: Andan's Breachs (de SWIK Clean		
	Organization/Firm: Anton's Beachside Gwik Clean Street Address: 1258 grana da Blud City Draund Bouch County: Volusia	Zip Code: 32/7 6	
	City Ormand Barch County: Volusia Responsible Official Telephone Number:	Zip Code: 32/7 6	
P	Responsible Official Telephone Number: Telephone: () - Fax: (
Rac	Responsible Official Telephone Number: Telephone: () - Fax: (County: Volusia Responsible Official Telephone Number: Telephone: () - Fax: (Name and Title of Facility Contact (For example, plant manager):) -	
Rac	Responsible Official Telephone Number: Telephone: () - Fax: (County: Volusia Responsible Official Telephone Number: Telephone: () - Fax: (Name and Title of Facility Contact (For example, plant manager):) -	
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Caco.	Responsible Official Telephone Number: Telephone: () - Fax: (County: Volusia Responsible Official Telephone Number: Telephone: () - Fax: (Name and Title of Facility Contact (For example, plant manager):) -	

DEP Form No. 62-213.900(2) Effective: 2/24/99 -GPCI - in Compliance; machine not used pince 2006; inspection

Facility Information L(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 Control Device Required* Status Date Control Device Installed From Manufacturer (if already included at time of (circle one) (circle one) purchase, write "SAME") RC/CA/None required Existing/New Existing/New RC/CA/None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber L(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: Control Device Required* Date Control Device Installed Date Initially Purchased Status From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") RC/CA/None required Existing/New Existing/New RC/CA/None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber -machine mot in we 2.(a) How much perchloroethylene (perc) have you used within the last 12 months? [Ø] 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: [____]

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Effective: 2/24/99

New store: New machine

Unopened store [____] (date of expected opening_

3. What is the facility's source classification based on the Indicate with an "N". Select one classification on	
Small Area Source	
Transfer only on-site (used less than 140 gallons of perc per year) used less than 200 gallons of perc per year) used less than 140 gallons of perc per year)
Large Area Source	
Transfer only on-site (used 140 - 2,100 gallons of perc per year) used 200 - 1,800 gallons of perc per year) used 140 - 1,800 gallons of perc per year)
4. What control technology is required on machines put (Indicate with an "X".)	ursuant to section (5) of Part II of this notification form?
Existing machines at small area source (NONE REQUIRED)	New machines at small area source Refrigerated condenser []
Existing machines at large area source Carbon adsorber Refrigerated condenser []	Refrigerated condenser New machines at large area source Refrigerated condenser Refrigerated condenser
5. A facility which contains non-exempt emissions un Rule 62-213.300, F.A.C. Verify that all steam and hot exemption criteria or that no such units exist on-site (s	
All steam and hot water generating units exempt [No such units on-site [ee attached memo for the criteria). OR
How many boilers do you have on-site?	(1) boiler, 3HI
For each boiler, indicate its horsepower (HP) rating: [matural gas
What type of fuel do you use? propane No. 2 fuel o No. 6 fuel o	140. 4 Idel off
6. Equipment Monitoring and Recordkeeping Informat	tion
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 add	dition log $(a)(b)(c)$
(b) Leak detection inspection and repair	dition log $(a), (b), (c), (c), (d)$
(c) Refrigerated condenser temperature monitoring	(E)
(d) Carbon adsorber exhaust perc concentration monitor	oring []
(e) Startup, shutdown, malfunction plan	

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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

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.

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Data

April 8, 2011

DEP Form No. 62-213.900(2) Effective: 2/24/99 Anton's Beachside Qwik Clears 125 E Granada Blvd suite F Ormond Beach, FL 32176

ACKSONPALE PLAN



General Permits Section Bureau of Air Monitoring 2600 Blair Stone Road Tallahasse, FC. 32399.2400

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