## Perchloroethylene Dry Cleaning Facility Notification

## **Facility Name and Location**

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):					
	ROBINSON CLEANERS INC.					
2.	Site Name (For example, plant name or number):					
	209 NE IGTH AUENUR GAINESUILLE FL 32605					
3.	Hazardous Waste Generator Identification Number:					
	CONDITIONALLY EXEMPT SMALL QUANITY GENERATOR					
4.	•					
	Street Address: 209 NE 16TH AUE. City: GAINESUILLE FL County: ALACHYA Zip Code: 32605					
	OHINESUITER FE COUNTY, NOT COUNTY SEPECIAL SECOND					
5.	Facility Identification Number (DEP Use):					
	0010099					
	in in alter for a state of the control of					
	Responsible Official					
6.	•					
	DAVID C. RUBINSON PRESIDENT					
7.						
	Organization/Firm: ROBINSON CLEANER INC Street Address: 209 NE 16TH AUE					
	City: GAINES VILLE AL County: ALACHUA Zip Code: 32605					
8.	Responsible Official Telephone Number:					
	Telephone: (904) 375 - 6175 Fax: ( ) -					
	Facility Control (IS different from Domestick Official)					
•	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:					
	City: Zip Code:					
11.	Facility Contact Telephone Number:					
	Telephone: ( ) - Fax: ( ) -					

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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.

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									
(1) w/ ref. condenser	#1	16-NUU-91	16-NOV-91		1				
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit		t With Nation	192			÷ ,'.			والمالية عراب
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit	- S - 4		Sage of the sage o	· .			-,	Table 1	
(7) w/ ref. condenser					Ï				
(8) w/ carbon adsorber									
(9) w/ no controls					1				
Reclaimer Unit	.40			3.6			-		FC - 434 -
(10) w/ ref. condenser	1				I				
(11) w/carbon adsorbe	r						†		
(12) w/ no controls	1		Ì					<u> </u>	·
(b) Control devices and No control device  2.(a) What was the total  (b) If less than 12 more Check why it is less	s are requant J gallo	equired to be ity of perchloons ow many? [_	installed [_ oroethylene (	perc)	purchased in				
What is the facility's s (Indicate with an "X".  Existing small a	Selec area so	t one classifi	cation only.) Ne	w sm	all area sour	rce [X	J	Part II?	
Existing large a	rea soi	urce []	Ne	w lar	ge area sour	ce [	J		

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What control technology is required on machines pursuant to section (Indicate with an "X".)	on (5) of Part II of this notification form?							
Existing large area source  Carbon adsorber [] Refrigerated cor	ndenser []							
New small 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	ng Information							
Check all logs which are required to be kept on-site in accordance with	th the requirements of this general permit:							
(a) Purchase receipts and solvent purchases	[X]							
(b) Leak detection inspection and repair	[X]							
(c) Refrigerated condenser temperature monitoring	[ <b>X</b> ]							
(d) Carbon adsorber exhaust perc concentration monitoring								
(e) Instrument calibration								
(f) Start-up, shutdown, malfunction plan	[X]							

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## Surrender of Existing Air Permit(s)

e 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)								
No 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.    Signature   1								

#0010099 Robinson Cleaners p. 14 1. (c) add "X"

3. should be existing small area P.15 4. mark out "X" and initial
5.(c) not required, mark out
"X" and initial