

## Department of Environmental Protection

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

Virginia B. Wetherell Secretary

September 4, 1996

Mr. Robert H. Cothern 60 Minute Cleaners 1111 East Palmetto Avenue Melbourne, Florida 32901

Dear Mr. Cothern:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 6, 1996.

Please note that in November 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 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

cc: Mr. Louis Nichols, Central District

#### Perchloroethylene Dry Cleaning Facility Notification

#### **Facility Name and Location**

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):				
Robert H. COTHERN	RECEIVED			
2. Site Name (For example, plant name or number):				
GO MINUTE CLEANERS	AUG 7 1996 /			
3. Hazardous Waste Generator Identification Number:	Bureau of Air Monitoring			
FLD 9810 26347	& Mobile Sources			
4. Facility Location: Street Address: 1111 E, PALMETTO AUE City: County: BREGARD	Zip Code: 32901			
5. Facility Identification Number (DEP Use): 0090142				
Responsible Official				

(6.)	Name and Title of Responsible Official:		
	0		
	Robert 1. COT	nten	
<b>(7)</b>	Responsible Official Mailing Address:	-	
	Organization/Firm:		
	Responsible Official Mailing Address: Organization/Firm: Street Address: P. O. Box 156		
		County: BREVARD	Zip Code: 32902
	MERBOURNE	PRECARD	32702
8.	Responsible Official Telephone Number:		· · · · · · · · · · · · · · · · · · ·
	Telephone: (407)-724 - 0170	Fax: (407) 724-	017/

#### Facility Contact (If different from Responsible Official)

9.	Name and Title of Facility Contact (For example, plant manager):					
	Robert H.	Cothern	OWNER			
10.	Facility Contact Address:	. , .				
	Street Address: //// E. City: MELBOURNE		IE BREUBRD	Zip Code:	32 901	
11.	Facility Contact Telephone N Telephone: (407) 7 2		Fax: (407)	10- 45	, ا ٦	

## RECEIVED

RECEIVED AUG 6 1995

DEP Form No. 62-213.900(2) 7 Effective: 6-25-96

Bureau of Air Monitoring & Mobile Sources

BUREAU OF AIR REGULATION

#### **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.

		Date	Date		Date	Date	]	Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit	<u> </u>								
(1) w/ ref. condenser	#i	18AcT 94	28 oct 94	42.	30 MAY 95	30 may 95	1		<u>-</u>
(2) w/ carbon adsorber	1	200 71	70 55	"-		,			
(3) w/ no controls									
Washer Unit		<del>-</del>			<u> </u>	•			<u> </u>
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls		1							
Dryer Unit			<del> </del>	<i>i</i> .	1.7		-		+: #
(7) w/ ref. condenser								1	
(8) w/ carbon adsorber		1							
(9) w/ no controls									
Reclaimer Unit			•					12.	
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are  (c) No control devices  2.(a) What was the total of the second of the secon	are re	equired to be ity of perchloons ow many? [_	installed [_ proethylene (	perc)	purchased in				[ <u>X</u> ]
3. What is the facility's so (Indicate with an "X".	Selec ea so	t one classifi	cation only.) Ne	w sm	all area sour	ce [X]	1	Part II?	
Existing large are	a 50l	11.00	ine	w iai	ge area sourc	e []	l		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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

DEP Form No. 62-213.900(2) Effective: 6-25-96

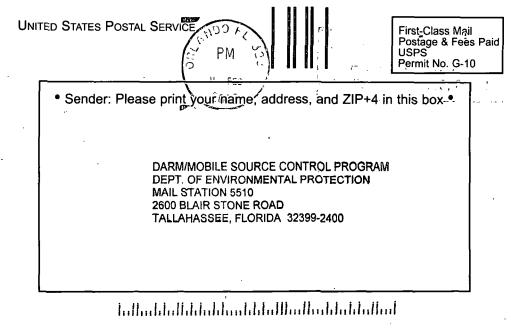
#### Surrender of Existing Air Permit(s)

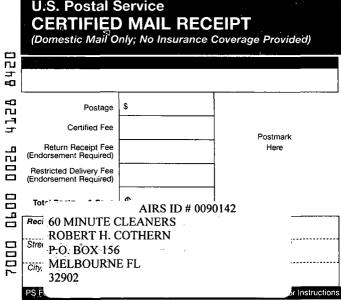
lease indicat	e with an "X" the appropriate selecti	on:	<i>t</i> . •
	I hereby surrender all existing air practical facility indicated in this notification	n form; specifically, permit number(s)	
	No air permits currently exist for t this notification form.	the operation of the facility indicated in	
	Responsible	e Official Certification	
this notifi statement maintain	ication. I hereby certify, based on in ts made in this notification are true, c the air pollutant emissions units and	, as defined in Part II of this form, of the fact formation and belief formed after reasonable accurate and complete. Further, I agree to o air pollution control equipment described a eneral permit as set forth in Part II of this no	e inquiry, that the operate and bove so as to
I will pro	mptly notify the Department of any c	hanges to the information contained in this r	notification.
Signature	apar Marine		6

15903 CENTRAL FLORIDA DRYCLEANING 12-86 PLANT ACCOUNT 63-319/631 41 P.O. BOX 156 MELBOURNE, FL 32902 TOTAL LESS \_\_\_\_ % DISCOUNT TOTAL DEDUCTIONS 1109 E. New Haven Melbourne, Florida 32901 AMOUNT OF CHECK

THIS CHECK IS DELIMATED FOR PAYMENT ON THE FOLLOWING ACCOUNTS	CENTRAL FLORIDA DRYCLEANING 12-86	15904
	PLANT ACCOUNT P.O. BOX 156 MELBOURNE, FL 32902	63-319/631 41 19 96
TOTAL LESS% DISCOUNT	PAY TO THE OF Dept of Enveronmental Perturbing	\$ 5000
LESS TOTAL DEDUCTIONS AMOUNT OF CRECK	Barnell 1109 E. New Haven	DOLLARS
A LLONG SPELA	Bank Melbourne, Florida 32901	Justle

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)  B. Date of Delivery  C. Signature  X  Agent  Addressee  D. Is delivery address different formulation 19  Yes
1. Article Addressed to:  AIRS ID # 0090142  60 MINUTE CLEANERS  ROBERT H. COTHERN  P.O. BOX 156	D. Is delivery address different framities. Pyes If YES, enter delivery and the delivery an
MELBOURNE FL 32902	3. Service Type  Certified Mail  Registered  Insured Mail  C.O.D.  C.O.D.  4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 0600 0026 4/28	8420
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789





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 # 0090142 **60 MINUTE CLEANERS** ROBERT H. COTHERN P.O. BOX 156

**MELBOURNE FL 32902** 

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273

CENTRAL FLORIDA DRYCLEANING TOTLE V AIR GENERAL PERMITS	Check Number: 14010 Check Date: Jan 10, 2000
	Check Amount: \$50.00
Item to be Paid - Description	Discount Taken Amount Paid
VERO #0090142	50.00

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** 

AIRS ID # 0090142

60 MINUTE CLEANERS
ROBERT H. COTHERN
P.O. BOX 156
MELBOURNE FL 32902

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: AT DEFINE 20-2-2035001 Obj.: 002273

TITLE V AIR GENERAL	PERMITS	Check Number: Check Date:	16335 Jan 19, 2001	
		Check Amount:	\$50.00	

50.00

Discount Taken Amount Paid Item to be Paid - Description

CENTRAL EL ORIDA DRYCLEANING, INC.

#0090142 (VERO)

## THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 258407

Please include your AIRS 10# on your check or money order. This number can be found below on your mailing label.

JAH 17 97 TOTAL AMOUNT DUE: \$50.00

#### Do NOT Remove Label

AIRS ID# 0090142
60 MINUTE CLEANERS
ROBERT H. COTHERN
P.O. BOX 156
MELBOURNE FL 32902

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273

#### 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.

#### **TOTAL AMOUNT DUE: \$50.00**

#### Do NOT Remove Label

AIRS ID # 0090142
60\_MINUTE CLEANERS
ROBERT H. COTHERN
P.O. BOX 156
MELBOURNE FL 32902

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273

del 1 of Environmental	Check Date: Dec 26, 1998	
	Check Amount: \$100.00	
Item to be Paid - Description	Discount Taken Amount Paid	
ATRS TD #0090142	50.00	

Chack Number: 12099

50.00

**CENTRAL FLORIDA DRY CLEANING** 

DEPT OF FINITEONMENTAL

AIRS ID #0610067

#### Perchloroethylene Dry Cleaning Facility Notification

#### Facility Name and Location

1.	1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):				
1	Robert H. COTHERN	RECEIVED			
2.	Site Name (For example, plant name or number):				
	GO MINUTE CLEANERS	AUG 7 1996			
3.	Hazardous Waste Generator Identification Number:	Bureau of Air Monitoring			
	FLD 9810 26347	& Mobile Sources			
4.	Facility Location:				
	Street Address: 1111 E, PALMETTO AUE  City: County:  BREUARD	Zip Code: 32901			
5.	Facility Identification Number (DEP Use):				
, 	9502091	0090142			

#### Responsible Official

6.	Name and Title of Responsible Official:		
	Robert W. CoTHERN	1 10WNER	MD9 /1-13-96
7.	Responsible Official Mailing Address:		
	Responsible Official Mailing Address: Organization/Firm: 60 MINUTE LLEANE	les AD 11-13-96	
	Street Address: P. O. Box 156		
	City: MELBOURNE County:	BREVARD	Zip Code: 32 のの上
8.	Responsible Official Telephone Number:		
	Telephone: (407)-724 - 0170	Fax: (407) 724-	017/

#### Facility Contact (If different from Responsible Official)

9.	. Name and Title of Facility Contact (For example, plant manager):				
	Robert H. Coth	ERW	OWNER	•	
10,	Facility Contact Address:				
	Street Address: 1111 E. PALME	tto Ac	/E		
	City: MELBOURNE	County:	BREUBRD	Zip Code:	32901
11.	Facility Contact Telephone Number:	<del></del>			
	Telephone: (407) 774-017	· c	Fax: (407)	724 - 01	7 /



AUS 6 1995

BUREAU OF AIR REGULATION

DEP Form No. 62-213.900(2) Effective: 6-25-96

Page 13 of 16

<ol> <li>What control technology is required on machines (Indicate with an "X".)</li> </ol>	pursuant to section (5) of Pa	art II of this notification form?
Existing large area source Carbon adsorber	Refrigerated condenser	
New small area source Refrigerated condenser		
New large area source Refrigerated condenser		
		·
5. A facility which contains non-exempt emissions to Rule 62-213.300, F.A.C. Verify that all steam and exemption criteria or that no such units exist on-site:	l hot water generating units	
All steam and hot water generating units on-site (1) boiler HP or less), and (2) are fired exclusively by no during which propane or fuel oil containing no more	atural gas except for period	ls of natural gas curtailment
All steam and hot water generating units exempt No such units on-site		
Fauinment Monitoring a	nd Recordkeeping Inforn	nation
Check all logs which are required to be kept on-site in		
(a) Purchase receipts and solvent purchases		[ ✓ ]
(b) Leak detection inspection and repair		
(c) Refrigerated condenser temperature monitoring		<u> </u>
(d) Carbon adsorber exhaust perc concentration mon	itoring	
(e) Instrument calibration		
		MAD 11-13-96
(f) Start-up, shutdown, malfunction plan		No 3 11-13-96

DEP Form No. 62-213.900(2)

Effective: 6-25-96

#### Surrender of Existing Air Permit(s)

Pleas	e indicate	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> </u>	No air permits currently exist for the operation of the facility indicated in this notification form.
		Responsible Official Certification
ti Si n	his notific tatements naintain t	rsigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ation. I hereby certify, based on information and belief formed after reasonable inquiry, that the 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 the hall terms and conditions of this general permit as set forth in Part II of this notification form.
I	will pron	aptly notify the Department of any changes to the information contained in this notification.
=		MM 8/2/96
S	ignature	Date

DEP Form No. 62-213.900(2) Effective: 6-25-96



#### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY	
FACILITY LOCATION:/	Minute CI	rette Ave	. <u>11.80</u>
PART I: NOTIFICATION			
(check appropriate box)			
1. Existing facility notified DARI	M by 9/1/96		
2. New facility notified DARM 3	0 days prior to startup		
3. Facility failed to notify DARM	to use general permit		
PART II: CLASSIFICATION			······
Facility indicated on notification (check appropriate box)	ı form that it is:		
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)	dry tra: bot	New small area source -to-dry only, x<140 gal/yr nsfer only, x<200 gal/yr h types, x<140 gal/yr nstructed on or after 12/9/91)	
3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" ga="" gal="" only,="" td="" transfer="" types,="" y=""><td>gal/yr dry l/yr trai r bot</td><td>New large area source  -to-dry only, 140<x<2, 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" gal="" h="" nsfer="" nstructed="" on="" only,="" or="" td="" types,="" yr=""><td></td></x<2,></td></x<2,>	gal/yr dry l/yr trai r bot	New large area source  -to-dry only, 140 <x<2, 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" gal="" h="" nsfer="" nstructed="" on="" only,="" or="" td="" types,="" yr=""><td></td></x<2,>	
This is a correct facility classifica	ntion	! On	
If no, please check the appropriat	e classification:		
	l for a general permit a above limits and is not	s number above eligible for a general permit	
	oethylene (perc) purcha ~ 100 as2	sed within the preceding 12 months by this	dry cleaning

#### 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? 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? ΠN 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN BN/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 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) KY DN 1. Equipped all machines with the appropriate vent controls? AND NO YE 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the ÍY □N □N/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the ХУ ПИ condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after

verifying that the coolant had been completely charged?

B. Has the responsible official of an existing large or new large area source also:	
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?	מם צם
<ol> <li>Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?</li> </ol>	□У □И
Is the temperature differential equal to or greater than 20° F?	מם צם
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?	OY ON ON/A
Is the perc concentration equal to or less than 100 ppm?	מם צם
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?	אם צם
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/À
PART V: RECORDKEEPING REQUIREMENTS	
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)	
Has the responsible official:	Мо уж
Has the responsible official: (check appropriate boxes)	MO AM
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?	MA ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?	\
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:	MA ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days	M ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	DA ON DA ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? for direct reading instruments only)	DY ON ON A
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?	MY ON  OY ON  OY ON  OY ON  OY ON  OY ON  OY ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?	MO YES ON EST ON EST ON EST ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?	NO YEAR ON SET O
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?  Problem corrected?	NO YEAR ON OY ON

1. Does the responsible official conduct a weekly leak detection and repair inspection?

2.	2. Which method of detection is used by the responsible official?					
	Visual examination (condensed solv	ent on	exterior s	urfaces)	X	
	Physical detection (airflow felt through	igh ga	skets)		A	
	Odor (noticeable perc odor)				Ā	
	Use of direct-reading instrumentation	n (FII	D/PID/calo	rimetric tubes)		
	If using direct-reading instrument	ation,	is the equ	ipment:		
	<ul> <li>a. Capable of detecting per</li> </ul>	c vapo	or concenti	rations in a range of 0-500 ppm?	ΩY	□N
	b. Calibrated against a star (PID/FID only)?	ndard ;	gas prior to	o and after each use	ΩY	□И
	c. Inspected for leaks and	obviou	s signs of	wear on a weekly basis?	ΠY	חת
	d. Kept in a clean and secure area when not in use?				ΠY	מם
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?					□и
3.	3. Has the facility maintained a leak log?					
4.	Does the responsible official check the fol	llowing	g areas for	leaks?		
	Hose connections, fittings, couplings, and valves	<b>Ž</b> Y	□N	Muck cookers	X	□N
	Door gaskets and seating	<b>A</b> Y	ΠN	Stills	DAY	□и
	Filter gaskets and seating	<b>A</b> Y	ПN	Exhaust dampers	BY	□и
	Pumps	⊠Y	□N	Diverter valves	<b>E</b> Ý	ПN
	Solvent tanks and containers	X	ΠN	Cartridge filter housing	s 💥	□N
	Water separators	PY.	□N			

Name of Responsible Official	
Shula Schue, der	11/12/96
Inspector's Name (Please Print)	Date of Inspection
Shoila Schneida	11/12/97
Inspector's Signature	Approximate Date of Next Inspection

	• ·	
ION:		
ORMAT		
ADDITIONAL SITE INFORMATION:		
TONAL		
ADDIT		

ŧ

303103 DRY CLEANER AIR QUALITY GENERAL PERMI ANNUAL COMPLIANCE CERTIFICATION FORM AIRS ID#0090142 ROBERT H. COTHERN ROBERT H. COTHERN P.O. BOX 156 **MELBOURNE FL 32902** Do NOT Remove Label \_\_\_\_\_1946 TO Die 31 Annual Reporting Period: Jain Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule ON 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. \( \mathbb{Y} \) YES 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.

\*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	СОМ	PLAINT/DISCOVERY	RE-INSPECTION I
TIME IN: $12.10$ TIME	OUT: 1.00	AIRS ID#:	090142
TYPE OF FACILITY: Dry Clane No	<del>a</del> –		
FACILITY NAME: 60 MIMUS	les Olano		DATE: 1127
FACILITY LOCATION: WILL E. La	linetto Ave	nue. Melbourne	, TL.
RESPONSIBLE OFFICIAL: John F	obes	PHONE NUMBE	R: 723-7131
Based on the results of the compliance compliance with DEP Rule 62-213.300			facility is found to be in
Based on the results of the compliance discrepancies were noted:	requirements evalua	ated during this inspection, the	following compliance
COMPLIANCE REQUIREMENT	/PROBLEM	FOLLOW-UP ACT	TION REQUIRED
	į		
			·
	<u>-</u>		
		_	
	·····	REC	EIVED
		FE	В д 1998
	-	Bureau & M	of Air Monitoring lobile Sources
COMMENTS: 15 trying to Strey under	140 gal /	12 nuth Period. (2 m	achines
The Annual Compliance Certification form has		arled to FDEP fied and submitted to the inspec	tor. YES NO
DATE OF NEXT INSPECTION:			
INSPECTION CONDUCTED BY:	AADIA 6	proximate)	
INSPECTOR'S SIGNATURE:	2	PHONE NUMBE	r: 893-3333
	Page	of	Revised 10/9

#### PERCHLOROETHYLENE DRY CLEANERS

#### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE	OF	INSP	ECT	ION:

ANNUAL

Æ

COMPLAINT/DISCOVERY

40

E-INSPECTION

RE-INSPECTION	JN U
AIRS ID#: 0090 1H 2 DATE: 1/278	TIME IN: 12:10 TIME OUT: 1:00
, , , , , , , , , , , , , , , , , , , ,	E Cleaners
	Imetto Are.
	E.
_	obes PHONE: 723-713)
	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
New facility notified DARM 30 days prior to sta	urtup 🔾
2. Facility failed to notify DARM to use general pe	
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/R E C E I V E both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$ ) FEB $1998$
5. This is a correct facility classification	Y ON OCan not determine Bureau of Air Monitoring & Mobile Sources
	cation: eneral permit as number above mits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) p facility was S gallons.	ourchased within the preceding 12 months by this dry cleaning

#### 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? 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) MY UN 1. Equipped all machines with the appropriate vent controls? XY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DOY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MAY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after

MD YM

verifying that the coolant had been completely charged?

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?	OY ON
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ON/A
Is the temperature differential equal to or greater than 20° F?	OY ON ON/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?	OY ON ON/A
Is the perc concentration equal to or less than 100 ppm?	QY QN QN/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?	OY ON ON/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?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	XY ON
2. Maintained rolling monthly total of perc consumption?	Σσγ □n
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	A'NO NO YE
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 ND YE
4. Maintained calibration data? (for applicable direct reading instruments)	AND NO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	ANDE NO YO
6. Maintained startup/shutdown/malfunction plan?	<b>y</b> ⊒Y □N
7. Maintained deviation reports?	Y ON ON/A
Problem corrected?	OY ON PAVA
8. Maintained compliance plan, if applicable?	OY ON DOWA

P	ART VI: LEAK DETECTION AND F	(EPA	IRS_			<u> </u>		
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
	inspection?						7 (	⊐א
2.	Has the facility maintained a leak log?					)Qr	<i>(</i>	⊐N
3.	Does the responsible official check the	follow	ing a	reas for leal	ks?	,		
	Hose connections, fittings, couplings, and valves	<b>4</b> Y	Ωи	□N/A	Muck cookers		Z ON	□N/A
	Door gaskets and seating	фұ	ΠN	□N/A	Stills	27	Z 🗆N	□N/A
	Filter gaskets and seating	ф	ПN	□N/A	Exhaust dampers	þ	Z □N	□N/A
	Pumps	фх	ПИ	□N/A	Diverter valves	la s	Z □N	□N/A
	Solvent tanks and containers	фч	ΠN	□N/A	Cartridge filter hous	ings by	Z DN	□N/A
	Water separators	ΠY	ПN	□N/A				
4.	Which method of detection is used by the	he resp	onsit	ole official?		4	,	*
	Visual examination (condensed so	olvent	on ex	terior surfa	ices)	X		
	Physical detection (airflow felt the	rough	gaske	ets)		Ŕ		
	Odor (noticeable perc odor)					A		
	Use of direct-reading instrumenta	tion (I	ID/P	ID/calorim	etric tubes)			
	Halogen leak detector				•			
	If using direct-reading instra	ument	ation	, is the equ	iipment:		I/A	
	a. Capable of detecting p	perc va	apor c	concentratio	ons in a range of 0-500 ppr	n? □Y	r □N	
	b. Calibrated against a s (PID/FID only)?	tandar	d gas	prior to an	d after each use	ΩY	N	
	c. Inspected for leaks an	d obvi	ous s	igns of wea	r on a weekly basis?	ΩY	r □n	
	d. Kept in a clean and se	ecure a	area v	vhen not in	use?	ΩY	Z □N	
	e. Verified for accuracy	by use	of du	iplicate san	nples (calorimetric only)?	ΩY	Z □N	
<b>_</b>				<del></del>				
	Inspector's Name (Please Prin			<del></del>	Date of	Inspection		
		•			= = = • • • • • • • • • • • • • • • • •	F 3		
	Inspector's Signature				Approximate Da	te of Next	Inspec	ction

#### ADDITIONAL SITE INFORMATION:

on large area source boarder line explained will have to measure temp condonser once a weak instead. Is trying to stay under the gallyrar.

2 umon (identical)

Containment pan? Yes for waite also

epoxy? yes - on spotting board also

afetyclean > ratardors waste

Incompliance

#### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST THE STATE OF THE S ANNUAL COMPLAIN TYPE OF INSPECTION: **RE-INSPECTION** AIRS ID#: 0090142 DATE: 7-26-99 TIME IN: 10:15 FACILITY NAME: 60 MINUTE Cleaners FACILITY LOCATION: 1111 E. Palmet to Ave. RESPONSIBLE OFFICIAL: John Fobes PHONE: 723 CONTACT NAME: \_\_\_\_\_PHONE: PART I: NOTIFICATION (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)  A.	☐ 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	OY ON OCan not determine
If no, please check the appropriate classification facility qualified for a general facility exceeds above limits.	
B. The total quantity of perchloroethylene (perc) pu facility was 1 gallons.	rchased within the preceding 12 months by this dry cleaning

#### 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 ON DANA DY ON BANA 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? Spin dish DY DN MNA 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DYNA 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? ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the MY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? MY ON ON/A 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the 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?	ΟY	מם	
2.	Measured and recorded the washer exhaust temperature at the condenser		<b></b>	5
ľ	inlet and outlet weekly?	ωY	UN	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ΠN	□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?	$\Box Y$	ΠN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΟY	ПN	□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	ПN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	<b>₽</b> Y	ПΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	DΥ	й	□N/A

PART V: RECORDKEEPING REQUIREMENTS						
Has the responsible official: (check appropriate boxes)						
Maintained receipts for perc purchased?	אם צם					
2. Maintained rolling monthly averages of perc consumption?	фу ом					
3. Maintained leak detection inspection and repair reports for the following:	,					
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON CONA					
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 <b>e</b> k/a					
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN <b>J</b> N/A					
5. Maintained exhaust duct monitoring data on perc concentrations?	DY ON DWIA					
6. Maintained startup/shutdown/malfunction plan?	ON ON					
7. Maintained deviation reports?	OY ON ONA					
Problem corrected?	OY ON MINA					
8. Maintained compliance plan, if applicable?	OY ON DINA					

#### PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? $\square$ N 2. Has the facility maintained a leak log? $\square N$ 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, UN UNIA DN DN/A couplings, and valves Muck cookers DY ON ON/A Door gaskets and seating Stills ON ON/A DY ON ON/A ON ON/A Filter gaskets and seating Exhaust dampers DN DN/A ON ON/A Diverter valves Pumps Solvent tanks and containers Cartridge filter housings 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 If using direct-reading instrumentation, is the equipment: DN/A 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)? c. Inspected for leaks and obvious signs of wear on a weekly basis? DY DN DY DN d. Kept in a clean and secure area when not in use? e. Verified for accuracy by use of duplicate samples (calorimetric only)? UA UN

Inspector's Signature

Date of Inspection

Approximate Date of Next Inspection

Mail Calendar Chas requested)

## TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🔀	COMPLAIN	T/DISCOVERY	RE-INSPECTION
TIME IN: 10:15	TIME OUT: 10;	45	AIRS ID#: 00°	90142
TYPE OF FACILITY: Dry	Cleaner			
FACILITY NAME: 60 mi	Aute Cleaners			DATE: 7-26-99
FACILITY LOCATION: 111	Palmetto Ave.			
mel	bourne, FL			
RESPONSIBLE OFFICIAL:	John Fabes		PHONE NUMBER:	727-7131
LJ	compliance requirements e e 62-213.300, Florida Adm			lity is found to be in
Based on the results of the discrepancies were noted:	compliance requirements e	evaluated dur	ing this inspection, the follo	owing compliance
_ COMPLIANCE REQUI	REMENT/PROBLEN	VI	FOLLOW-UP ACTI	ON REQUIRED
				·····
•		į		
COMMENTS:				······································
	omplian	c-e		
The Annual Compliance Certification	on form has been properly	certified and	submitted to the inspector.	YES NO
DATE OF NEXT INSPECTION:		00		
or tiblic horizoni,	·	(Approxim	ate)	
INSPECTION CONDUCTED BY	: Randall	(Please Pri	ingham	
INSPECTOR'S SIGNATURE:	redall T	2 - Crease FT		407-201843-333

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

Revised 10/96

ATRS ID#: 0090142

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: 60 MINUTES CLEANERS	DATE: 7-26-89
FACILITY LOCATION: MI E Palmetto Ave Melbourne, FL	
Melbourne FL	
·	
Annual Reporting Period: July 1998 TO July	1999
Based on each term or condition of the Title V general air permit, my facility has remained in complian	ce with DEP Rule
62-213,300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	es 🗆 no
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous compliance during the repo	orting period stated above:
Exact period of non-compliance: fromto	
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 repo	orting 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 in made in this notification are true, accurate and complete. Further, my annual consumption of perchloi upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallon combination facilities.  RESPONSIBLE OFFICIAL:  Name (Please Print)  Signature	raethylene solvent, based

Page \_\_\_\_ of \_\_\_\_.

<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

ARMS UPDATED DATE 3-30-00

TYPE OF INSPECTION:

ANNUAL

RE-INSPECTION

COMPLAINT/DISCOVERY

RY 🗆

AIRS ID#: 0090142 DATE: 3-30-00 TIME IN: 12:00 TIME OUT: 12:30 FACILITY NAME: 60 minute FACILITY LOCATION: [[[] RESPONSIBLE OFFICIAL: John Fobes PHONE: 407-723 CONTACT NAME: PHONE:

PART I: NOTIFICATION	
(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 for (check appropriate box)	m that it is:	☐ No notificatio ☐ Drop store/ou	on form t 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)	A	
3. Existing large area source		4. New large area source		

dry-to-dry only,  $140 \le x \le 2{,}100 \text{ gal/yr}$ dry-to-dry only,  $140 \le x \le 2,100$  gal/yr transfer only, 200 < x < 1,800 gal/yrtransfer only,  $200 \le x \le 1,800$  gal/yr both types,  $140 \le x \le 1,800$  gal/yr both types,  $140 \le x \le 1,800$  gal/yr (constructed on or after 12/9/91) (constructed before 12/9/91) 5. This is a correct facility classification

DΝ DCan not determine

eau of Air Monitoring & Mobile Sources

If no, please check the appropriate classification:

facility qualified for a general permit as number \_\_\_\_\_ above

facility exceeds above limits and is not eligible for a general permit 

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 59 gallons.

# 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)

4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	`	** *	,
<ol> <li>Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?</li> <li>Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?</li> <li>Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?</li> <li>Conducted all temperature monitoring after an appropriate cooldown period and after</li> </ol>	1.	Equipped all machines with the appropriate vent controls?	— · —
condenser upon opening the door?  4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?  5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?  6. Conducted all temperature monitoring after an appropriate cooldown period and after	2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	MY DN DN/A
condenser on a weekly/bi-weekly basis?  5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?  6. Conducted all temperature monitoring after an appropriate cooldown period and after	3.		מאס אס אס
6. Conducted all temperature monitoring after an appropriate cooldown period and after	4.		MO NO
	5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	Y ON ON/A
	6.		MY ON

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?	ΠY	ΠN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	DΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ПΥ	DИ	□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?	ΠV	ראי	□N/A
		_		
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПN	□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	ΠN	□Ņ/Ā
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser eoils?	ΠY	ПN	□N/A
6.,	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	UN	□N/A

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes)			
1. Maintained receipts for perc purchased?	אם אא		
2. Maintained rolling monthly averages of perc consumption?	MY ON		
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	ANO NO YO		
<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 <b>GA</b> VA		
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN AWA		
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON DANA		
6. Maintained startup/shutdown/malfunction plan?	OY ON		
7. Maintained deviation reports?	-DY DN <b>PA</b> √IA		
Problem corrected?	AWA NO YO		
8. Maintained compliance plan, if applicable?	OY ON ON/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? $\square N$ 2. Has the facility maintained a leak log? $\square N$ 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, THY DN DN/A couplings, and valves Muck cookers Y ON ON/A DY ON ON/A DY ON ONA Door gaskets and seating Stills DY ON ON/A Filter gaskets and seating Exhaust dampers ÓY ON ON/A AYNO NO YO Diverter valves Pumps DY ON ON/A Solvent tanks and containers DY DN DN/A Cartridge filter housings DY ON ONA Water separators AVAD NO YO 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 ZAWA. If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN b. Calibrated against a standard gas prior to and after each use DY DN (PID/FID only)?

Conningham Inspector's Signature

OY ON

DY DN

DY DN

Approximate Date of Next Inspection

c. Inspected for leaks and obvious signs of wear on a weekly basis?

e. Verified for accuracy by use of duplicate samples (calorimetric only)?

d. Kept in a clean and secure area when not in use?

ADDITIONAL SITE INFORMATION:	

Revised 01/18/00

AIRS ID#: 0090142

Ace

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

		<del></del>	<del></del>
FACILITY NAME: 60 minute (leune	/5	DA	TE: 3-30-00
FACILITY LOCATION: 111 E, Palmett	a Ave,		
melbourne, FL	32901		
		<del></del>	
Annual Reporting Period: March	1999 20TO	March	20 <i>00</i>
Based on each term or condition of the Title V general air permit,	my facility has rem	ained in compliance with	DEP Rule
62-213.300, Florida Administrative Code (F.A.C.), during the per	iod covered by this	statement. YES	□NO
If NO, complete the following:			
#1. Term or condition of the general permit that has not been in c	ontinuous complian	ce during the reporting pe	eriod 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 that has not been in c	ontinuous compliand	ce during the reporting pe	eriod stated above:
Exact period of non-compliance: from	1	to	
Action(s) taken to achieve compliance:			
Method used to demonstrate compliance:			
As the responsible official, I hereby certify, based on information in this notification are true, accurate and complete. Further, my confirmation facilities.  RESPONSIBLE OFFICIAL:  Name (Please Print)	annual consumption	of perchloroethylene solv	ent, based upon

\*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 Z	OMPLAINT/DISCOVERY RE-INSPECTION		
TIME IN: 12'00	TIME OUT:	30 AIRS ID#: 0090142		
TYPE OF FACILITY: 1)	Clean			
FACILITY NAME: 60 mi	nute Cleaners	DATE: 3 -30-00		
FACILITY LOCATION: 1/1	I E. Palmetto Ave	901		
RESPONSIBLE OFFICIAL:	John Fubes	PHONE NUMBER: <u>407-723-7131</u>		
<del>7</del>	he compliance requirements eva ule 62-213.300, Florida Adminis	cluated during this inspection, the facility is found to be in strative Code (F.A.C.).		
Based on the results of the discrepancies were noted	- ·	luated during this inspection, the following compliance		
COMPLIANCE REQU	IREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED		
	·	·		
In Compliance				
The Annual Compliance Certifica	ition form has been properly cer	tified and submitted to the inspector. YES NO		
DATE OF NEXT INSPECTION: 3-200 (Approximate)				
INSPECTION CONDUCTED E		Please Print) (12-2 222		
INSPECTOR'S SIGNATURE:	walk -	PHONE NUMBER: 407-893-3333		
	Page_	$\int_{-\infty}^{\infty} of \int_{-\infty}^{\infty} Revised 10/96$		