

Received in F/A
7/25/11

RECEIVED

AUG 08 2011

PERCHLOROETHYLENE DRY CLEANERS
AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

DIVISION OF AIR
RESOURCE MANAGEMENT

Facility Identification Number - If known (seven digit number)

0112288-004
~~0112437-003~~

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

Construct and operate a proposed new facility.

Operate an existing permitted facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit). If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. (See "Surrender of Existing Air Operation Permit(s)" below.)

Operates an existing facility not currently permitted or using an air general permit.

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

Continue operating the facility after expiration of the current term of air general permit use.

Continue operating the facility after a change of ownership.

Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C.

Any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only, if Applicable

All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

_____ SPRING CLEANERS TOO, INC

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a complete registration must be submitted for each.)

_____ SPRING CLEANERS

Facility Location (Physical location of the facility, not necessarily the mailing address.)

Street Address: _____ 9980 GRIFFIN RD

City: _____ COOPER CITY FL _____ County: _____ Zip Code: _____ BROWARD 33328

Facility Start-Up Date (Estimated start-up date of proposed new facility.) (N/A for existing facility.)

_____ N/A

Facility Information

1.(a) DRY-TO-DRY MACHINES

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 MACHINE INSTALLED	UNIT CLASS (Check one)	CONTROL DEVICE (see key)	DATE CONTROL DEVICE INSTALLED
FEB 1995	<input checked="" type="checkbox"/> New <input type="checkbox"/> Existing	CA	
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		
	<input type="checkbox"/> New <input type="checkbox"/> Existing		

Control Device Key: RC = Refrigerated Condenser CA = Carbon Adsorber NR =None Required

1. (b) Is the facility a co-residential Dry Cleaning facility?

Yes No

For each dry-to-dry machine located at a co-residential facility Dry Cleaning facility, please provide the following information:

DATE MACHINE INSTALLED	UNIT CLASS (Check one)	PERC DRY CLEANING MACHINE	CONTROL DEVICE (see key)	VAPOR BARRIER ENCLOSURE
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> New <input type="checkbox"/> Existing	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO

Control Device Key: RC = Refrigerated Condenser CA = Carbon Adsorber NR =None Required

2. Perchloroethylene Usage

If this is an **initial registration** for a perchloroethylene dry cleaner, provide an estimate of the facility's expected amount of perchloroethylene to be used over the next 12-month period.

If this is a **re-registration** for a perchloroethylene dry cleaner, provide the amount of perchloroethylene used in the most recent 12 months.

60 GALLONS

3. Provide information on all steam and hot water generating units (boiler) on-site or that no such units exist on-site.

No steam and hot water generating units (boiler) onsite

BOILER	HORSEPOWER	FUEL TYPE*
FULTON	10 HP	NATURAL GAS

*Fuel Type – propane, No. 2 fuel oil, No. 4 fuel oil, No. 6 fuel oil, natural gas, electric, or other

Facility Contact

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: — CRAIG DRANG - OWNER

Facility Contact Telephone Numbers

Telephone: — 954.434.4469 Fax: — 954.255.3344
Cell phone: — 954.444.7903
E-mail: — CDRANG@AOL.COM

Facility Contact Mailing Address

Organization/Firm: — 9980 GRIFFIN RD
Mailing Address: — COOPER CITY, FL County: BROWARD Zip Code: 33328
City: —

Other Contact/Representative (to serve as additional Department contact)

Name and Position Title

Print Name and Title: — SHANNON PELLETIER - OWNER

Other Contact/Representative Telephone Numbers

Telephone: — 954.434.4469 Fax: — 954.255.3344
Cell phone: — 954.304.1978
E-mail: — SHANDI206@AOL.COM

Other Contact/Representative Mailing Address

Organization/Firm: — 9980 GRIFFIN RD
Mailing Address: — COOPER CITY, FL County: BROWARD Zip Code: 33328
City: —

Pacione, Michael

From: Pacione, Michael
Sent: Thursday, July 28, 2011 2:29 PM
To: 'cdrang@aol.com'
Cc: Dibble, Dickson
Subject: FW: General Air Permit Registration Application
Attachments: PERCHLOROETHYLENE_DRY%20CLEANERS_EXAMPLE_WORKSHEET[1].docx

Mr. Craig Drang,

Here is the link to the Air General Permit page for Perchloroethylene dry cleaners. I have attached the "Perchloroethylene Dry Cleaner Air General Permit Example Worksheet" in Microsoft Word, but you can also open the worksheet from the third paragraph of our General Air Permit page.

<http://www.dep.state.fl.us/air/emission/drycleaners.htm>

We have received your \$100 application processing fee and I will await your application worksheet to be sent directly to me at:

Attention: Michael Pacione
2600 Blair Stone Rd.
MS #5500
Tallahassee, FL. 32301

Thank you very much and contact me if you have any questions.

Michael P. Pacione
Environmental Specialist II
FDEP-Office of Permitting and Compliance
Minerals and Metals
Phone 850-717-9032
Fax 850-717-9001

Pacione, Michael

From: Pacione, Michael
Sent: Wednesday, July 27, 2011 4:11 PM
To: Brown, Benjamin L.
Cc: Dibble, Dickson
Subject: FW: Facilities Sending Checks without Application

Ben,
Spring Cleaners (0112437) sent a check with no application.
I will let them know to resend check with the application since I am assuming you will be returning the check

Michael P. Pacione
Environmental Specialist II
FDEP-Office of Permitting and Compliance
Minerals and Metals
Phone 850-717-9032
Fax 850-717-9001

From: Brown, Benjamin L.
Sent: Wednesday, July 27, 2011 10:53 AM
To: Pacione, Michael
Subject: RE: Facilities Sending Checks without Application

Thank you

From: Pacione, Michael
Sent: Wednesday, July 27, 2011 10:33 AM
To: Brown, Benjamin L.
Subject: Facilities Sending Checks without Application

Mr. Brown,
I wanted to send you a list of Dry Cleaning facilities that I have applications for with no checks. I have contacted these facilities and asked them to send the processing fee to the finance and accounting address on this link <http://www.dep.state.fl.us/air/emission/drycleaners.htm>. They should be including owner name, facility name, and permit number since they will not be coming with applications. Thank you

Navroz Inc.	Americlean	Abdul Lakhani	1250719
The Cleaners At Hileah, Inc	Shopping Center	Rebeca Gonzalez	0251172
FF Imperial Cleaners	Imperial Quality Cleaners	Farid Kamadia	0250706

Michael P. Pacione

Environmental Specialist II

FDEP-Office of Permitting and Compliance

Minerals and Metals

Phone 850-717-9032

Fax 850-717-9001

****IMPORTANT****
AIR GENERAL PERMIT
RULE CHANGE NOTICE
Effective: June 29, 2011

RECEIVED

JUL 26 2011

DIVISION OF AIR
 RESOURCE MANAGEMENT

After the effective date noted above, pursuant to Rule 62-4.050 and Rule 62-210.310, F.A.C., the following facility types eligible to construct or operate under an Air General Permit (AGP) will be required to **submit a \$100 fee** along with a registration or re-registration for a new or an existing facility every five years.

Note: Recent changes to the air general permit rules have rescinded the \$50 annual emissions fee that was previously required under this air general permit. This air general permit now requires a \$100 registration fee that is good for the life of the air general permit (up to 5 years).

New rule references replacing those in Rule 62-213.300, F.A.C. are noted below:

- **Perchloroethylene Dry Cleaners**-Rule 62-210.310 (5)(f), F.A.C.
- **Ethylene Oxide Sterilizers**-Rule 62-210.310 (5)(g), F.A.C.
- **Halogenated Solvent Degreasers**-Rule 62-210.310 (5)(h), F.A.C.
- **Chromium Electroplaters and Anodizers**-Rule 62-210.310 (5)(i), F.A.C.
- **Asbestos Manufacturers and Fabricators**-Rule 62-210.310 (5)(j), F.A.C.
- **Secondary Aluminum Sweat Furnaces**-Rule 62.210.310 (5)(k), F.A.C.

Please send your AGP Registration and the \$100 fee payable to FDEP:

FDEP Receipts
 PO Box 3070
 Tallahassee, Florida 32315-3070

0112437

For overnight delivery:
 FDEP Receipts
 3800 Commonwealth Blvd. MS 77
 Tallahassee, Florida 32399

Questions regarding the new rule changes should be directed to:

DEP's Air General Permit Section (850) 717-9000

Small Business Environmental Assistance Program 1-800-722-7457

or found on DEP's website at: http://www.dep.state.fl.us/Air/emission/air_gp.htm

SPRING CLEANERS
9920 PINES BLVD.
PEMBROKE PINES, FL 33024

FT LAUDERDALE
FL 333
21 JUL 2011 PM 3 7



JDEP. Receipts
P.O. Box 3070
Tallahassee, Florida.
32315-3070

32315+3070



SPRING CLEANERS
9980 GRIFFIN RD
COOPER CITY FL 33328

FT LAUDERDALE
FL 333
04 AUG 2011 PM 5:7



MICHAEL PACIONE
2600 BLAIR STONE RD.
MS # 5505
TALLAHASSEE, FL. 32301

32999\$6542



3:55 pm 7/27/11 →

↓ → 954-434-4469

~~XXXXXXXXXX~~

★ NO dry cleaning @ 9920
Pines Blvd

Call This # (Sharon Drang's)
Patten

I called @ 3:59 pm
and an employee took message
for Mrs Sharon Drang
and told me she would
call back

sent check but no
application

↓

I need to tell them check
will be sent back to them

↓

need new check and
application

★

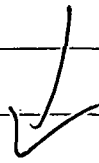
→ CRAIG returned my call
1:40 pm 7/28/11

954-434-4469 - 1:49pm

07/28/11
Craig Spring Cleaners

Returned my call

called 954-444-7903 @ 2:17pm
7/28/11



Informed him to

Craig @ AOL.com

9980 Griffin Rd
Spring Cleaners TAO (check us for
our facility)
Cooper City

I saw
I will
email
him info
on work order
and my
address
2600 Blount Street
MS #5500

Spring Cleaners not in operation

8/01/11

Spoke w/ Craig Orang and he said

2:49pm

He will email Application TO

me

08/02/11

Shannon Orang called 954-252-5452

3:15pm

Asked some questions about Application form and told me she will be sending it to me within a few days

954-430-1601

954-444-7904

954-434-4469

954-444-7903

Air Resource Management System - Facility Related Party						ARMINV16	
AREA	AIRS ID	0112437	STATUS	<input type="checkbox"/>	OFFICE	SEBR SE: BROWARD	
SITE NAME	SPRING CLEANERS			COUNTY	BROWARD		
OWNER/COMP	SPRING CLEANERS INC						
Role *	PRIMARY RESPONSIBLE OFFICIAL (TITL)		Begin Dt *	10/03/2003	End Dt	<input type="text"/>	
Party#	197487	SSN#	<input type="text"/>	FEID#	<input type="text"/>		
Name	SHANNON	<input type="text"/>	DRANG	<input type="text"/>			
	(first)	(middle)	(last)	(sfx)			
Company	SPRING CLEANERS		Title	PRESIDENT	Noncompliant	<input type="checkbox"/>	
Voice	954-430-1601	Ext	<input type="text"/>	Fax	<input type="text"/>	Mobile	954-444-7904
				Email	<input type="text"/>		
Address	9920 PINES BLVD			Address Type	BUSINESS		
	<input type="text"/>			Mailing Address	<input checked="" type="checkbox"/>		
City	PEMBROKE PINES			State	FL	Zip	33024
Country	U.S.A.						

No Dry
Cleaning There

Air Resource Management System - Facility										
AREA		Office * SEBR		SE: BROWARD		County * BROWARD		AIRS ID		ARMIHV01
Owner/Comp *		SPRING CLEANERS IIC				Site		SPRING CLEANERS		
Directions										
Street		9920 Pines Blvd				Zip		33024		Validate Address
City *		PEMBROKE PINES				UTM Zone		East		North
Latitude		Longitude		UTM Zone		East		North		
Status *		INACTIVE				Maj Group SIC *		72 PERSONAL SERVICES		
Reloc		Shtdwn Dt		Strt Dt		Final Shtdwn Dt				
Gov Fac *		0 NOT OWNED OR OPERATED BY A FEDERAL, STATE, OR LOCAL GOVE				HAZ Waste Generator ID: FLD		071092423		
AOR Req *		Ozone SIP Facility *		Type		10 PCE Drycleaning Facilities				
Compliance Tracking		Title V				non-HAP Class		MINOR		HAP Class
MINOR		Public Exempt		AG						
# of EmIs Units		C		A		I		Generator Rating		
MW		drop store 8/06				Comment				

AREA Office * SEBR SE: BROWARD County * BROWARD AIRS ID ARMINV01 0112288

Owner/Comp * SPRING CLEANERS TOO Site SPRING CLEANERS
Directions
Street 9980 Griffin Rd
City * COOPER CITY Zip 33328 3420 Validate Address
UTM Zone 17 East 572.04 North 2882.90 Latitude 26 03 48.0457 Longitude 80 16 47.3263

Status * A ACTIVE Maj Group SIC * 72 PERSONAL SERVICES
Reloc N Shtdwn Dt Strt Dt Final Shtdwn Dt
Gov Fac * 0 NOT OWNED OR OPERATED BY A FEDERAL, STATE, OR LOCAL GOVE HAZ Waste Generator ID: FLD 087359105
AOR Req * N Ozone SIP Facility * N Type 10 PCE Drycleaning Facilities
Compliance Tracking Current Permit Indicator AG
Title V TITLE V non-HAP Class MINOR HAP Class MINOR Public Exempt

of Emis Units C A I Generator Rating MW

Comment 07/25/11-RENEWAL OF EXPIRING PERCHLOROETHYLENE DRY CLEANER AGP REGISTRATION

ARMINV16

AREA AIRS ID 0112288 STATUS A OFFICE SEBR SE: BROWARD
SITE NAME SPRING CLEANERS COUNTY BROWARD
OWNER/COMP SPRING CLEANERS TOO

Role * RESPONSIBLE OFFICIAL (TITLE V) Begin Dt * 06/13/2001 End Dt 12/12/2006

Party# 19525 SSN# FEID#

Name HARRY GREEN
(first) (middle) (last) (sfx)

Company SHELLY ENTERPRISES INC Title PRESIDENT Noncompliant

Voice 954-434-4469 Ext Fax Mobile Email

Address 9980 GRIFFIN ROAD Address Type BUSINESS

Mailing Address Y

City COOPER CITY State FL Zip 33328

Country U.S.A.

