# JUL 08 2011 AIR REGULATION

# 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):
FASHION CLEANERS, INC	<u>.</u> .
2. Site Name (For example, plant name or number):	
FASHION CLEANERS	
3. Hazardous Waste Generator Identification Number:	
FLD 032271686	
4. Facility Location: 2427 W. BROW	ARD BLUD
Street Address: City: FT. LAUDERDALE County: BR	OWARD Zip Code: 33312
FI. LAKIDER DACE	500AKIS 55512
5. Facility Identification Number (DEP Use ONLY - do no	ot fill in):
	0112295-00
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Responsible Official	
6. Name and Title of Responsible Official:	
Name: COVEY H. CANTVILLE	Title: PRESIDENT
7. Responsible Official Mailing Address:	
Organization/Firm: SAME Street Address:	
City: County:	Zip Code:
	•
8. Responsible Official Telephone Number:	n (act) as a sec
Telephone: (954) 583 8225	Fax: (954) 791 - 7775
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Facility Contact (If different from Responsible Official)	
9. Name and Title of Facility Contact (For example, plant	manager):
BRENT CANTVILLE	
10. Facility Contact Address:	
SAME	
Street Address: City: County:	Zip Code:
County.	Zip Code.
11. Facility Contact Telephone Number:	Fav: (0d) 201 2225 8
Telephone: (954) 583- 6044	Fax: (9\$ )791 - 7775 = 00

DEP Form No. 62-213.900(2)

Effective: 2/24/99

-7/25/11-spoke with Brent Cantville, has RC MB

### **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 mach	nine on-site, pleas	e provide the following information	on:
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")
6/2008	Existing/N	w RC/CA/None required	SAME
	Existing/Ne	ew RC/CA/None required	
	Existing/Ne	ew RC/CA/None required	
*CONTROL DEVICE K	EY: RC = r	efrigerated condenser CA =	= carbon adsorber
1.(b) TRANSFER MAC	THINES ONLY		
How many washers do yo	ou have on-site?		
How many dryers/reclain	ners do you have o	on-site?	
unit. If the transfer mach 1993, it is a <b>NEW</b> unit (r permit). For each transf	ine was purchased no units purchased	I from the manufacturer between I after September 22, 1993 are all e, please provide the following in	
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 K	EY: RC = re	efrigerated condenser CA =	carbon adsorber
	roethylene (perc) ns (You must fill	have you used within the last 12 r	months?
(b) If less than 12 mor	nths, how many?	months	5
Check why it is les	ss than 12 months	: New owner: Did not kee	ep records:
		New store: New machin	e [
		Unopened store [] (date of	expected opening
			er e

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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".)	
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  [X] Refrigerated condenser  [X]  Refrigerated condenser	N na
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).	'pt,
All steam and hot water generating units exempt No such units on-site  OR	
How many boilers do you have on-site?	
For each boiler, indicate its horsepower (HP) rating: [60] []	
What type of fuel do you use?  [] propane [] No. 2 fuel oil [] No. 4 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	

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	of Existing DEP Air Permit(s)	
Please indica	te with an "X" the appropriate selection:	
L <b>X</b> ]	I hereby surrender all existing DEP air permits this notification form; the permit number(s) are	authorizing operation of the facility indicated in
	No DEP air permits currently exist for the oper form.	ration of the facility indicated in this notification
Responsible	Official Certification	
this notif statemen maintain comply w		n control equipment described above so as to
		ne information contained in this notification.
	ne of responsible official  aux  Cautalle	ne information contained in this notification. $6\cdot 23\cdot 11$

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