

Department of Environmental Protection

Jeb Bush Governor Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

David B. Struhs Secretary

January 22, 2002

Mr. David Kochman Dry Cleaning Depot, #37 730 West Broward Boulevard Ft. Lauderdale, Florida 33312

Re: Facility No.: 0112313-002

Dear Mr. Kochman:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on December 17, 2001.

Please note that in January 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 is 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/jw

cc: Ms. Daniela Banu, Broward County

"More Protection, Less Process"

Printed on recycled paper.

Oll 2313-002
page 15

1(a) Add Dry to Dry machine information
for each muchine.

Idled and spake to David Rockman and he directed me to call for the Elingston for the information on the chy clear machines. Ms. Ellingston stated the three dry to dry machines have built-in Refugeald condensers as control device, Gwo workings were purchased in October, 1995 and the third was peurchased in October 2000.

Page 17 Responsible officed signs and date for changes made.

DEP ROUTING AND TRANSMITTAL SLIP				
TO: (NAME, OFFICE, LOCATION)	3			
1	4			
2	5			
PLEASE PREPARE REPLY FOR:	COMMENTS:			
SECRETARY'S SIGNATURE				
DIV/DIST DIR SIGNATURE				
MY SIGNATURE				
YOUR SIGNATURE				
DUE DATE				
ACTION/DISPOSITION				
DISCUSS WITH ME				
COMMENTS/ADVISE				
REVIEW AND RETURN				
SET UP MEETING				
FOR YOUR INFORMATION				
HANDLE APPROPRIATELY				
INITIAL AND FORWARD				
SHARE WITH STAFF				
FOR YOUR FILES	·			
FROM:	DATE: PHONE:			

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 completed form to the address listed in the instructions and keep a copy of the form for your files.

racinty Name and Location			
1. Facility Owner/Company Name (Name of corpo	oration, agency, or individual o	wner):	
Colony Acquisition Corp.			
2. Site Name (For example, plant name or number)):		
Lauderhill #37			
3. Hazardous Waste Generator Identification Numb	per:		
FLD 980838650			
4. Facility Location:			
Street Address: 1187 N. State Road City: Lauderhill County:	7 Broward Zip	Code:	33313
5: Facility Identification/Number (DEP Use ONLY			
	** OH2313	- 1	702
THE REPORT OF A PARTICULAR PROPERTY OF THE PRO	AT THE STATE OF TH	tom grande Co.	AND AND A VICTOR OF THE COMMENT OF THE

Responsible Official 6. Name and Title of Responsible Official: Title: Name: David Kochman Vice-President 7. Responsible Official Mailing Address: Organization/Firm: Dry Cleaning Depot Street Address: 730 W. Broward Blvd. City: Ft. Lauderdale Zip Code: Broward 33312 8. Responsible Official Telephone Number: Telephone: (954) 522 - 3660 Fax: (954) 522-6332

Facility Contact (If different from Responsible Official) 9. Name and Title of Facility Contact (For example, plant manager): Debra Wright 10. Facility Contact Address: Street Address: 1187 N, State Road 7 City: Lauderhill County: Zip Code: Broward 33313

11. Facility Contact Telephone Number: Telephone: (954) 583 - 1885 Fax: (954 583 -8665

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility Information 1.(a) DRY-TO-DRY MACHINES ONLY 3 j 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* Date Control Device Installed Status (if already included at time of From Manufacturer (circle one) (circle one) purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required RC/CA/None required Existing/New *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 1.(b) TRANSFER MACHINES ONLY How many washers do you have on-site? 0 1 $\begin{bmatrix} 0 \end{bmatrix}$ 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: 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") Existing/New RC/CA/None required Existing/New RC/CA/None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

(b) If less than 12 months, how many? [___] months

[1200] gallons (You must fill this in)

New store: New machine Unopened store () (date of expected opening)

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Check why it is less than 12 months: New owner: [] Did not keep records: []

3. What is the facility's source classification based of Indicate with an "X". Select one classification of				
Small Area Source				
Dry-to-dry machines only on-site Transfer only on-site Both machine types 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 [X]				
Dry-to-dry machines only on-site Transfer only on-site Both machine types 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 (Indicate with an "X".)	pursuant 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	New machines at large area source Refrigerated condenser []			
	units shall not be eligible to use the general permit pursuant to not water generating units on-site meet the following (see attached memo for the criteria).			
All steam and hot water generating units exempt No such units on-site	OR			
How many boilers do you have on-site? [1_]				
For each boiler, indicate its horsepower (HP) rating:	[_][5][0]			
What type of fuel do you use? [X] propane [No. 2 fue No. 6 fue				
6. Equipment Monitoring and Recordkeeping Inform	nation			
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 [X_]			
(b) Leak detection inspection and repair				
(c) Refrigerated condenser temperature monitoring [X]				
(d) Carbon adsorber exhaust perc concentration mor	nitoring [X_]			
(e) Startup, shutdown, malfunction plan				

DEP Form No. 62-213.900(2) Effective: 2/24/99

7. Surrender d	of Existing DEP Air Permit(s)
Please indicat	e with an "X" the appropriate selection:
(X)	I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are AIRS #01/23/300/AE
	No DEP air permits currently exist for the operation of the facility indicated in this notification form.
Responsible (Official Certification
this notifi statement maintain comply w	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form. In this notification is any changes to the information contained in this notification.
}	e of responsible official
Print nam	e of responsible official
Signature	12/13/07 Date

RECEIVED

JAN 3 1 2002

Bureau of Air Monitoring
& Mobile Sources



December 18, 2001

RE: FACILITY NO.: 0112312-002

ATTN: ALL VENDORS

FACILITY NO.: 0112313-002

FACILITY NO.: 0112311-002 AS OF DECEMBER 27, 2001, COLONY ACQUISITION CORP A/K/A DRY

CLEANING DEPOT WILL BE MOVING OUR CORPORATE OFFICE. ALL

FUTURE BILLING AND CORRESPONDENCE SHOULD BE SENT TO:

1995 EAST OAKLAND PARK BLVD. SUITE 215 FT. LAUDERDALE, FL 33306

> PHONE: 954-568-9666 FAX: 954-563-7646



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

422487 FEB 32803

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

Y

Do NOT Remove Label

AIRS ID#0112313 COLONY AQUISITION - LAUDERHILL #37 DAVID KOCHMAN 1995 EAST OAKLAND PARK BLVD STE 215 FT LAUDERDALE FL 33306 Sureau of Air Monitorino.

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

435855 FEB 22004

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

DAVID KOCHMAN
COLONY AQUISITION - LAUDERHILL #37
1995 EAST OAKLAND PARK PLVD SUTS
215 730 W. BROWARD BLVD
FT LAUDERDALE FL 33306 3 3 3 /2

FEB 6 2004

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



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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

1/22/02

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AIRS ID # 0112313
COLONY AQUISITION - LAUDERHILL #37
ROBERT L DENBERG
730 W BROWARD BLVD
FT LAUDERDALE FL
33312

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1 Fund: 20-2-035001

Obj.: 002273

COLONY ACQUISITION CORP./DRY CLEANING DEPOT

36167

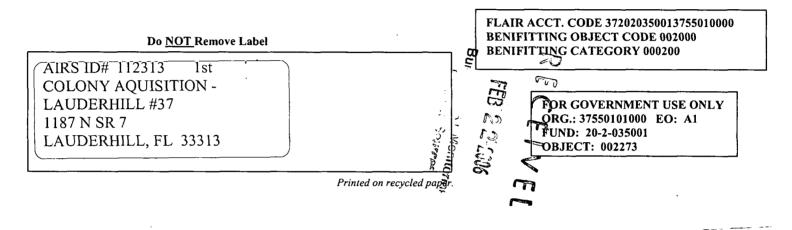
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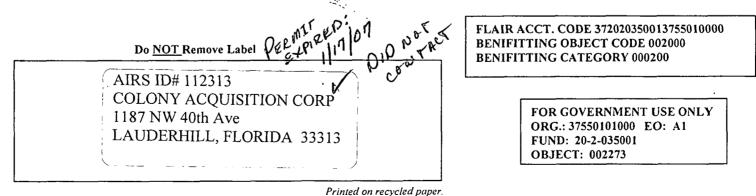
TOTAL AMOUNT DUE: \$50.00



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TOTAL AMOUNT DUE: \$50.00



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TOTAL AMOUNT DUE: \$2

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112311, 112312

AIRS ID# 112313 1stC COLONY AQUISITION - LAUDERHILL #37 1187 N SR 7

LAUDERHILL, FL 33313

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ORG.: 37550101000 EO: A1

FUND: 20-2-035001 OBJECT: 002273

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SENDER: COMPLETE THIS	SECTION	COMPLETE THIS	SECTION ON DEL	IVERY
 Complete items 1, 2, and 3. item 4 if Restricted Delivery Print your name and addresso that we can return the can Attach this card to the back or on the front if space perm 	is desired. s on the reverse and to you. of the mailpiece,	A. Signature X B. Received by (F	· ·	Agent Addressee C. Date of Delivery
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BUR. OF AIR MONITORING & MOBILE SOURCES DEPT. OF ENVIRONMENTAL PROTECTION MAIL STATIO. 1 5510 2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

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B. Michile Sources

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U	AIRS ID# 112313 1stC COLONY AQUISITION - LAUDER	HILL
100	Sent To #37	
12	Street, Apt. N 1187 N SR 7 or PO Box No. LAUDERHILL, FL 33313	
{	City, State, Zi	
	PSF orm 3800, June 2002 See Reverse to	or Instructions

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELI	VERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	B. Received by (Plinted Name)	☐ Agent ☐ Addressee C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item If YES, enter delivery address below	
AIRS ID# 112313 1stC COLONY AQUISITION - LAUDERHILL #37	:	•
LAUDERHILL, FL 33313	3. Service Type Certified Mail Express Mail Registered Return Rece	l ipt for Merchandise
7004 2510 0002 3939 39	12 ricted Delivery? (Extra Fee)	☐ Yes
Article Number (Transfer from service label)		
PS Form 3811, August 2001 Domestic Retu	urn Receipt	102595-02-M-1540

UNITED STATES POSTAL SERVICE



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BUR. OF AIR MONITORING & MOBILE SOURCES NO OF AIR MONITORING & MOBILE SOURCES NO OF AIR MONITORING & MOBILE SOURCES NAIL STATICN 5510

2600 BLAIR STONE ROAD

TALLAHAGSEE, FLORIDA 32399-2400

TO SUPPORT OF THE PROPERTY OF T

3ureau of Air Monitoring & Mobile Sources