

# Department of Environmental Protection

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

Virginia B. Wetherell Secretary

April 23, 1997

Mr. Randy Cole President Executive Cleaners 10667 West Atlantic Boulevard Coral Springs, Florida 33071

Re: Facility No. 0112366

Dear Mr. Cole:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on March 10, 1997.

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: Mr. John Coppola, Broward County

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

	#0112366
	Exclusive Cleaners
P.14	1.(c) mark out "V" and initial 3. should be new small area
	7-11-4
γ.13	4. Should be new small area Source W/refng.con. 5.(f) required
	5.0771.09,007.03

### Perchloroethylene Dry Cleaning Facility Notification

### Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	AREY & DECY INC
2.	Site Name (For example, plant name or number):
	EXCLUSIVE CLEANEN
3.	Hazardous Waste Generator Identification Number:
	FLD 982 139396
4.	Facility Location: /o 667 W. A7COMIC BLUP Street Address:
	City: Come Spring County: Browns Zip Code: 3307/
5:	Facility Identification Number (DEP Use):  0/12366
	Responsible Official
6.	Name and Title of Responsible Official:
	RANDY COLE (PRESIDENT)
7.	Responsible Official Mailing Address:  Organization/Firm:   Exclusive Cleaner
	Street Address: 10667 W. ATLAMIE BLV-
	City: County: Brown Zip Code: 33071
8.	Responsible Official Telephone Number:
	Telephone: (9.14) 345-15166 Fax: (1)
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
10.	Facility Contact Address:
	Street Address:
	City: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: ( ) - Fax: ( ) -

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

RECEIVED

MAR 10 1997

Bureau of Air Monitoring

& Mobile Sources

### **Facility Information**

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

Example #1 03-OCT-93 12-NOV-93 #2 08-DEC-91 #3 02-MAR-92 02  Dry-to-Dry Unit	Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
(1) w/ ref. condenser					#2			#3		02-MAR-9.
(1) w/ ref. condenser	Dry-to-Dry Unit		DAU T.	pur	14, 1	441		ye ji	naga naga naga naga naga naga naga naga	
(2) w/ carbon adsorber   (3) w/ no controls   (4) w/ ref. condenser   (5) w/ carbon adsorber   (6) w/ no controls   (7) w/ ref. condenser   (8) w/ carbon adsorber   (9) w/ no controls   (10) w/ ref. condenser   (11) w/ ref. condenser   (11) w/ carbon adsorber   (12) w/ no controls   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (12) w/ no controls   (15) w/ carbon adsorber   (12) w/ no controls   (15) w/ carbon adsorber   (16) w/ ref. condenser   (17) w/ carbon adsorber   (18) w/ carbon adsorber   (19) w/ no controls   (10) w/ ref. condenser   (11) w/ carbon adsorber   (12) w/ no controls   (13) w/ carbon adsorber   (14) w/ carbon adsorber   (15) w/ carbon adsorber   (16) w/ carbon adsorber   (17) w/ carbon adsorber   (18) w/ carbon adsorber   (19) w/ carbon adsorber   (10) w/ carbon adsorber   (12) w/ no controls   (13) w/ carbon adsorber   (12) w/ carbon adsorber		7	3-25-96	3-25-96	<u> </u>				`	T
Washer Unit  (4) w/ref. condenser (5) w/ carbon adsorber (6) w/ no controls  Dryer Unit  (7) w/ref. condenser (8) w/ carbon adsorber (9) w/ no controls  Reclaimer Unit  (10) w/ref. condenser (11) w/carbon adsorber (12) w/ no controls  (b) Control devices are required, but not yet installed  (c) No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [										
(4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls    Control devices are required, but not yet installed	(3) w/ no controls									
(4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls    Control devices are required, but not yet installed	Washer Unit		Teat Signal Control	And the Control	1.1.	Taria Taria	1 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
G() w/ no controls   Dryer Unit   (7) w/ ref. condenser   (8) w/ carbon adsorber   (9) w/ no controls   (10) w/ ref. condenser   (11) w/carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (12) w/ no controls   (13) w/ ref. condenser   (12) w/ no controls   (13) w/ carbon adsorber   (14) w/ carbon adsorber   (15) w/ carbon adsorber   (16) w/ carbon adsorber   (17) w/ carbon adsorber   (18) w/ carbon adsorber   (19) w/ carbon adsorber   (19) w/ carbon adsorber   (19) w/ carbon adsorber   (10) w/ carbon adsorber   (11) w/ carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (14) w/ carbon adsorber   (15) w/ carbon adsorber   (16) w/ carbon adsorber   (17) w/ carbon adsorber   (18) w/ carbon adsorber   (19) w/ carbon adsorber   (10) w/ carbon adsorber   (11) w/ carbon adsorber   (12) w/	(4) w/ ref. condenser				l .	1		T		1
G() w/ no controls   Dryer Unit   (7) w/ ref. condenser   (8) w/ carbon adsorber   (9) w/ no controls   (10) w/ ref. condenser   (11) w/carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (12) w/ no controls   (13) w/ ref. condenser   (12) w/ no controls   (13) w/ carbon adsorber   (14) w/ carbon adsorber   (15) w/ carbon adsorber   (16) w/ carbon adsorber   (17) w/ carbon adsorber   (18) w/ carbon adsorber   (19) w/ carbon adsorber   (19) w/ carbon adsorber   (19) w/ carbon adsorber   (10) w/ carbon adsorber   (11) w/ carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (14) w/ carbon adsorber   (15) w/ carbon adsorber   (16) w/ carbon adsorber   (17) w/ carbon adsorber   (18) w/ carbon adsorber   (19) w/ carbon adsorber   (10) w/ carbon adsorber   (11) w/ carbon adsorber   (12) w/	(5) w/ carbon adsorber									
(7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls  Reclaimer Unit (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls  (b) Control devices are required, but not yet installed (c) No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  (b) If less than 12 months, how many? months  Check why it is less than 12 months: New owner: New store: Did not keep records:  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.)					_					
(7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls  Reclaimer Unit (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls  (b) Control devices are required, but not yet installed (c) No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  (b) If less than 12 months, how many? months  Check why it is less than 12 months: New owner: New store: Did not keep records:  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.)	Dryer Unit	a rai		The state of the	. de	The said	Digerral to a	2004 - 20	Gertinas (25.66)	lety (Arvisi)
(8) w/ carbon adsorber   (9) w/ no controls   (10) w/ ref. condenser   (11) w/carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ carbon adsorber   (12) w/ no control devices are required, but not yet installed   (14) w/ carbon adsorber   (12) w/ no control devices are required to be installed   (15) w/ carbon adsorber   (12) w/ no control devices are required to be installed   (15) w/ carbon adsorber   (15) w/ carbon					T -			<u> </u>	1	1
(9) w/ no controls   (10) w/ ref. condenser   (11) w/carbon adsorber   (12) w/ no controls   (12) w/ no controls   (13) w/ control devices are required, but not yet installed   (2) No control devices are required to be installed   (2) No control devices are required to be installed   (3) w/ no control devices are required to be installed   (4) No control devices are required to be installed   (5) No control devices are required to be installed   (6) No control devices are required to be installed   (7) No control devices are required to be installed   (8) No control devices are required to be installed   (12) No control devices are required to be installed   (13) No control devices are required, but not yet installed   (13) No control devices are required, but not yet installed   (13) No control devices are required to be installed   (14) No control devices are required to be installed   (15) No control devices are required to be installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required, but not yet installed   (15) No control devices are required to be installed   (15) No control devices are required, but not yet installed   (15) No control devices are required to be installed   (15) No control devices are required to be installed   (15) No control devices are required to be installed   (15) No control devices are required to be installed   (15) No control devices are required to be installed   (15) No control devices are required to be installed   (15) No control devic	` '		-							
Reclaimer Unit  (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls  (b) Control devices are required, but not yet installed (c) No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [							-			
(10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls  (b) Control devices are required, but not yet installed (c) No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [		41,					garage and		III. The second second second second second	
(b) Control devices are required, but not yet installed  No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [					i i		1	Ė		1
(b) Control devices are required, but not yet installed  No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [	` '	$\vdash$	<del>                                     </del>				<del>                                     </del>			
(b) Control devices are required, but not yet installed  No control devices are required to be installed  2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [						1				1
(Indicate with an "X". Select one classification only.)	No control devices  2.(a) What was the total q  [	are re quanti gallo	equired to be ity of perchlons ow many? [_	installed [_ oroethylene (] months	perc)	purchased in				
Existing large area source New large area source	(Indicate with an "X". S  Existing small are	Selec ea so	et one classifi	cation only.) Ne	ew sm	nall area sour	rce [	3) of ]	Part II?	

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

What control technology is required on machines pursuant to section (5) of Part (Indicate with an "X".)	II of this notification form?
Existing large area source  Carbon adsorber  Refrigerated condenser	1
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall not be eligible to us to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units or exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total heat input of 10 m boiler HP or less), and (2) are fired exclusively by natural gas except for periods of during which propane or fuel oil containing no more than one percent sulfur is fired.	of natural gas curtailment
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 the require	ements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(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)

	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notif statemen	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and the the other in the pollutant emissions units and air pollution control equipment described above so as to
comply v	with all terms and conditions of this general permit as set forth in Part II of this notification form.
	with all terms and conditions of this general permit as set forth in Part II of this notification form.  Comptly notify the Department of any changes to the information contained in this notification.

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

### Perchloroethylene Dry Cleaning Facility Notification

3955 2273

### Facility Name and Location

			1 1	
1.		, agency, or individ	lual owner):	
	AREY + DECY INC			
2.	Site Name (For example, plant name or number):			
	EXCLUSIVE CLEANEN	•		
3.	Hazardous Waste Generator Identification Number:			
	FLD 982 139396			_ :
4.	Facility Location: /0667 W. A7CON Street Address:	ALL BLUI		
	City: Corne some County: Ba	ميسو و ليا ه	Zip Code: 3307	/
5.	Facility Identification Number (DEP Use):			
			-0112	31 <i>e</i> 6
	Responsible C	Official		
6.	Name and Title of Responsible Official:		· ·	
0.	RANDY COLE (PAESIDE	·~~)		
7.	Responsible Official Mailing Address:	<del></del>		
	Organization/Firm: Exclusive Cle.	wend		
	Street Address: 10667 W. ATLANTIC	E BLV	7: 0 1	
	City: County: County:	Broweno	Zip Code: ع	3071
8.	Responsible Official Telephone Number:		-	
	Telephone: (9.44) 345-5766	Fax: (		
	Facility Contact (If different fro	om Responsible O	fficial)	
( )				
9.	Name and Title of Facility Contact (For example, plant	manager):		
10	T 77 0 1 1 1 1 1			三三三字
10.	Facility Contact Address:			
	Street Address:			ROTE OF
	City: County:		Zip Code:	97 930
11.	Facility Contact Telephone Number:			
	Telephone: ( ) -	Fax: ( : )		
		<u> </u>	<del></del>	

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

RECEIVED

Bureau of Air Monitoring & Mobile Sources

TYPE OF INSPECTION: ANNUAL COM	IPLAINT/DISCOVERY	RE-INSPECTION
TIME IN: 2:00 pm TIME OUT: 3:00  TYPE OF FACILITY: Dry C/eo~c1	AIRS ID#: 011	2366
FACILITY NAME: Exclusive Cleaners FACILITY LOCATION: 10667 West Atlant		ATE: 3-/0·98
Coral Springs RESPONSIBLE OFFICIAL: Rundy Cole	PHONE NUMBER: (9	54) 345-5166
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administra		is found to be in
Based on the results of the compliance requirements evaluated discrepancies were noted:	•	
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION	N REQUIRED
		P
	Qures &	TO CE
	Modific	of his Northering
		arce's
-	-	
COMMENTS:		
The Annual Compliance Certification form has been properly certification.  DATE OF NEXT INSPECTION:  (Ap. 199	Ted and submitted to the inspector.	YESP NO
INSPECTION CONDUCTED BY: B Thomas	pproximate)	
INSPECTION CONDUCTED BY: B Thomas  (PI INSPECTOR'S SIGNATURE: B Thry	ease Print) PHONE NUMBER:	519.1459
	of	Revised 10/96

Revised 10/96

### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL	
RE-INSPECTION RE	ON 1-4 B
AIRS ID#: 0// 2366 DATE: 3-10-	
FACILITY NAME: Exclusive Clesa	ers Quality
FACILITY LOCATION: 10667 West	Atlantic Blud
	s F) 33071
RESPONSIBLE OFFICIAL: Rundy Co	he PHONE: (954) 345-5166
CONTACT NAME: Randy Co	phone: (954) 345-5166  phone: (954) 345-5166
<u> </u>	
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	artup $\Box$
2. Facility failed to notify DARM to use general po	ermit
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)  A.	☐ No notification form☐ Drop store/out of business/petrolcum
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	□Y □N □Can not determine
If no, please check the appropriate classifing facility qualified for a go	•

### Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? AY ON ON/A Y ON ON/A 2. Examining the containers for leakage? Y QN 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at Y ON ON/A 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? DY DN EN/A 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). Curbon 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) SY ON 1. Equipped all machines with the appropriate vent controls? SY 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 condenser upon opening the door? BY ON ON/A 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? ■Y □N 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? EY ON ON/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? Y DN

PART III: GENERAL CONTROL REQUIREMENTS

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?	ΟY	ПN	
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	□и	□N/A
Is the temperature differential equal to or greater than 20° F?	ПY	ПN	□N/A
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?	ΩY	ПN	□N/A
Is the perc concentration equal to or less than 100 ppm?	ΩΥ	ПN	□N/A
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	ПИ	□N/A
Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПΝ	□N/A
Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПИ	□N/A
	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?  Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20° F?  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?  Is the perc concentration equal to or less than 100 ppm?  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?  Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	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?  Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20° F?  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?  Is the perc concentration equal to or less than 100 ppm?  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?  Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	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?  Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20° F?  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?  Is the perc concentration equal to or less than 100 ppm?  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?  Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	<b>∍</b> Y □N
2. Maintained rolling monthly total of perc consumption?	MA ∪N
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	∍y □n □n/a
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	■Y □N □N/A
4. Maintained calibration data? (for applicable direct reading instruments)	THEY DN DN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	■Y □N □N/A
6. Maintained startup/shutdown/malfunction plan?	■Y □N
7. Maintained deviation reports?	TY ON ON/A
Problem corrected?	■Y □N □N/A
8. Maintained compliance plan, if applicable?	ÐY □N □N/A

PART VI: LEAK DETECTION AND F	REPAIRS		
1. Does the responsible official conduct a	weekly (for small source	s, bi-weekly) leak detection ar	nd repair
inspection?	er en	•	<b>T</b> Y □N
2. Has the facility maintained a leak log?			N□ Y
3. Does the responsible official check the	following areas for leaks	?	
Hose connections, fittings, couplings, and valves	TY ON ON/A	Muck cookers	TY ON ON/A
Door gaskets and seating	■Y □N □N/A	Stills	■Y □N □N/A
Filter gaskets and seating	TY ON ON/A	Exhaust dampers	N/A N/□ N/A
Pumps	TY ON ON/A	Diverter valves	TY ON ON/A
Solvent tanks and containers	■Y □N □N/A	Cartridge filter housings	TY ON ON/A
Water separators	■Y □N □N/A		
4. Which method of detection is used by t	he responsible official?		
Visual examination (condensed so	olvent on exterior surface	es)	
Physical detection (airflow felt th	rough gaskets)		
Odor (noticeable perc odor)			
Use of direct-reading instrumenta	ition (FID/PID/calorimet	ric tubes)	
Halogen leak detector			*
If using direct-reading instr	umentation, is the equip	oment:	■N/A
a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?	DY DH
b. Calibrated against a s (PID/FID only)?	standard gas prior to and	after each usc	OY ON
c. Inspected for leaks ar	nd obvious signs of wear	on a weekly basis?	DY DN
d. Kept in a clean and s	ecure area when not in u	se?	DY DN
e. Verified for accuracy	by use of duplicate samp	oles (calorimetric only)?	OY ON
D 1		/	
Thomas		3-10-98	
/ Inspector's Name (Please Pri	nt)	Date of Inspe	ection
6 Jams		March 1999	i
Inspector's Signature		Approximate Date of	Next Inspection

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

$0 - 10^{-10}$	NUAL C	OMPLIANCE	E CERTIFICAT	TON FORM	
FACILITY NAME: Exclusi	ive C	ledners			DATE 3310-93
FACILITY LOCATION: 1666	7 Wes	+ Atlantic	Blod.		No. P. Co.
Coro	1 Spr	ings FL	33071	· 	Sources To
Annual Reporting Period:	Perch		19 <u>97</u> то	March	19 <b>98</b>
Based on each term or condition of t 62-213.300, Florida Administrative					
If NO, complete the following:					
#1. Term or condition of the genera	l permit tha	at has not been in	continuous complia	nce during the report	ing period stated above:
Exact period of non-compliance: from	om			_ to	
Action(s) taken to achieve compliance	ce:	<del>-</del>			·
Method used to demonstrate complia	ınce:	·	<u> </u>		
#2. Term or condition of the genera	I permit tha	at has not been in	continuous complia	nce during the report	ing period stated above:
Exact period of non-compliance: from	om	·	·	to	
Action(s) taken to achieve compliance	ce:				
Method used to demonstrate complia	ance:				· · · · · · · · · · · · · · · · · · ·
As the responsible official, I hereby made in this notification are true, as upon purchase receipts, does not excombination facilities.	ccurate and ceed 2,100	complete. Furthe	er, my annual consu	imption of perchloroe	thylene solvent, based
RESPONSIBLE OFFICIAL:		(Please Print)		Signature	Date
<del></del>				<del></del>	

<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

	RE-INSPECTION		COMPLAIN I/DISCOVERY	
AIRS ID#: 0112306			v: 2:00 timedut:	2:30
FACILITY NAME: $- \exists x$	CLUSIVE CLEAN	JERS_	- FC P WAY	<u> </u>
FACILITY LOCATION:	10667 W. AT	LAUTIC	BLUB CORR SFR	MORITORII Sources
RESPONSIBLE OFFICIAL	: RANDY COL	Ē	\(\sigma^2\)	
CONTACT NAME:			PHONE:	
PART I: NOTIFICATION				
(check appropriate box)				
1. New facility notified DARN	1/30 days prior to startup			
2. Facility failed to notify DAI	RM to use general permit		e 🐔	
PART II: CLASSIFICATIO				
TART II. CLASSIFICATIO	<u>N</u>			
Facility indicated on notifical (check appropriate box)		<u>_</u>	☐ No notification form ☐ Drop store/out of business/p	petroleum
Facility indicated on notifical	tion form that it is:  arce	sfer only, $x < t$ types, $x < 1$	□ Drop store/out of business/prea source  x < 140 gal/yr < 200 gal/yr	petroleum
Facility indicated on notifical (check appropriate box)  A.  1. Existing small area sou dry-to-dry only, x < 140 gal transfer only, x < 200 gal/y both types, x < 140 gal/yr	tion form that it is:  Tree	to-dry only, sfer only, x < types, x < 1 structed on of the large as to-dry only, sfer only, 20 types, 140 <	Drop store/out of business/prea source  x < 140 gal/yr < 200 gal/yr 40 gal/yr or after 12/9/91)	petroleum
Facility indicated on notificate (check appropriate box)  A.  1. Existing small area sound dry-to-dry only, x < 140 gally transfer only, x < 200 gally both types, x < 140 gallyr (constructed before 12/9/91  3. Existing large area sound dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,80 both types, 140 ≤ x ≤ 1,800	tion form that it is:  arce	to-dry only, sfer only, x < types, x < 1 structed on of the large as to-dry only, sfer only, 20 types, 140 <	Drop store/out of business/prea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $40 \text{ gal/yr}$ or after $12/9/91$ )  rea source $140 \le x \le 2,100 \text{ gal/yr}$ $0 \le x \le 1,800 \text{ gal/yr}$ $\le x \le 1,800 \text{ gal/yr}$	petroleum
Facility indicated on notificate (check appropriate box)  A.  1. Existing small area sound dry-to-dry only, x < 140 gally transfer only, x < 200 gally both types, x < 140 gallyr (constructed before 12/9/91  3. Existing large area sound dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,800 (constructed before 12/9/91  5. This is a correct facility of the fac	tion form that it is:  arce	to-dry only, sfer only, x < types, x < 1 structed on one will be to-dry only, sfer only, 20 types, 140 structed on one will be tructed on one will be the types.	Drop store/out of business/prea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $40 \text{ gal/yr}$ or after $12/9/91$ )  rea source $140 \le x \le 2,100 \text{ gal/yr}$ $0 \le x \le 1,800 \text{ gal/yr}$ or after $12/9/91$ )  Can not determine  mber above	petroleum

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?	☑Y □N □N/A
2. Examining the containers for leakage?	<b>Ľ</b> Y □N □N/A
3. Closing and securing machine doors except during loading/unloading?	ody □n
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	e dy □n □n/a
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	ØÝ □N □N/A

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 refrig (complete A and B below).	gerated condenser					
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?	<b>M</b> Y □N					
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	MY ON ON/A					
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	MY ON ON/A					
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	<b>⊠</b> Ý □N					
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	WY ON ON/A					
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	DY 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?	ΩY	□Ν	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	QY	ПΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ПY	ПΝ	□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?	ΟY	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ПY	ΩN	□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	∕ ''⊔N	 □N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ПΝ	□N/A

PART V: RECORDKEEPING REQUIREMENTS						
Has the responsible official: (check appropriate boxes)						
1. Maintained receipts for perc purchased?	QY ON					
2. Maintained rolling monthly total of perc consumption?	ØY □N					
3. Maintained leak detection inspection and repair reports for the following:	a stage					
a. documentation of leaks repaired w/in 24 hrs? or;	¹Y □N □N/A					
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ory on on/a					
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON OTNA					
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DYN/A					
6. Maintained startup/shutdown/malfunction plan?	ąл пи					
7. Maintained deviation reports?	OY ON ON/A					
Problem corrected?	OY ON ON/A					
8. Maintained compliance plan, if applicable?	OY ON WN/A					

FART VI. LEAR DETECTION AND REPAIRS								
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
	insp	ection?		•	ØY □N			
2.	Has	the facility maintained a leak log?			ON DO			
3.	Does							
		Hose connections, fittings, couplings, and valves	ØY □N □N/A	Muck cookers	OY ON ON/A			
		Door gaskets and seating	MY ON ON/A	Stills	OTY ON ON/A			
		Filter gaskets and seating	OY ON ON/A	Exhaust dampers	DY ON ON/A			
		Pumps	Y ON ON/A	Diverter valves	ØY ON ON/A			
	**.	Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	CY ON ON/A			
	, .	Water separators	ety on on/a					
4.	Whi	ch method of detection is used by th	e responsible official?					
		Visual examination (condensed so	lvent on exterior surfaces)		<b>ज</b>			
		Physical detection (airflow felt three	ough gaskets)					
		Odor (noticeable perc odor)		• ,	<b>a</b>			
		Use of direct-reading instrumentat	ion (FID/PID/calorimetric	tubes)	0			
		Halogen leak detector						
		If using direct-reading instru	mentation, is the equipm	ent:	ØN/A			
		a. Capable of detecting p	erc vapor concentrations in	a range of 0-500 ppm?	OY ON			
			andard gas prior to and aft	er each use				
		(PID/FID only)?			OY ON			
	* *		l obvious signs of wear on					
		-	cure area when not in use?					
		e. Verified for accuracy t	by use of duplicate samples	(calorimetric only)?	□Y □N			
		•	• •					
		ART PENDETTO		11 MR 59				
_		Inspector's Name (Please Prin	t)	Date of Inspe	ction			
		$\bigcap \Omega_I$						
		Let Vatt		MARCH 2000				
		Inspector's Signature		Approximate Date of 1	Next Inspection			

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

PASILITY NAME: EXCLUSIVE	CLEANERS	·		~	_DATE:	3-11-99
FACILITY LOCATION: 10667	N. ATLAUTIC	BLVD	CORAL	SPRINGS	<u> </u>	
	<del></del>					
Annual Reporting Period: MAR	10	_19 <u>98</u>	то	MAR	11	1999
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F.		-		$\overline{}$		P Rule
If NO, complete the following:						
≠1." Term or condition of the general permit	that has not been in co	ontinuous c	ompliance du	ring the repor	ting perio	d stated above:
Exact period of non-compliance: from		·	to	· · · · · · · · · · · · · · · · · · ·		<u> </u>
Action(s) taken to achieve compliance:				<u> </u>	·	· · · · · · · · · · · · · · · · · · ·
Method used to demonstrate compliance:			<del></del>			
#2. Term or condition of the general permit	that has not been in co	ontinuous c	ompliance du	nng the report	ung peno	d stated above:
Exact period of non-compliance: from .			to	-		
Action(s) taken to achieve compliance:	qri		· ·	and the second		
Method used to demonstrate compliance:		· · ·				
As the responsible official. I hereby certify, be made in this notification are true, accurate a upon purchase receipts, does not exceed 2,10 combination facilities.	nd complete. Further	, <i>т</i> у аппиа	l consumption	of perchloro	ethylene s	olvent, based
RESPONSIBLE OFFICIAL: KANDY	COLE	1	M	(		3-11-89
Nan	ne (Please Print)		Sig	nature		Date

\*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.

Page of

### PERCHLOROETHYLENE DRY CLEANERS

### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	<b>4</b>	COMPLAINT/DIS	COVERY	
	RE-INSPECTION				
AIRS ID#: <u>01123/06</u> D				ME OUT: _/	(:00_
FACILITY NAME: <u>Ex</u>			_	, mark	
FACILITY LOCATION:(	D667 W. AT	LANTIC	BLVO C	DOAL SP	RWGS
				33	07 <u>i</u>
RESPONSIBLE OFFICIAL:	RANDY COL	<u>=</u>	PHONE: <u>(954</u> )	345-5	516
CONTACT NAME:	SAME	<u>·                                    </u>	PHONE:		<del></del> .
The state of the s					
PART I: NOTIFICATION			Bur	)	
(check appropriate box)			N TO TO	7	
1. New facility notified DARM 3	0 days prior to startup		Mobile Mobile	l	
2. Facility failed to notify DARM	1 to use general permit		Not Not Not	M	
			tor	( )	
	·····				
PART II: CLASSIFICATION			But Drive		
Facility indicated on notification	n form that it is:		☐ No notification f		oleum
Facility indicated on notification (check appropriate box) A.			☐ No notification f☐ Drop store/out o		oleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source	e 🗆 2. N	lew small are	☐ No notification f☐ Drop store/out of		oleum
Facility indicated on notification (check appropriate box) A.	e 🗆 2. N r dry-t		☐ No notification f ☐ Drop store/out of ca source < 140 gal/yr		oleum
Facility indicated on notification (check appropriate box)  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	e 🗆 2. N r dry-t trans both	few small are to-dry only, x sfer only, x < types, x < 14	No notification f □ Drop store/out of ea source < 140 gal/yr 200 gal/yr 0 gal/yr		oleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	e 🗆 2. N r dry-t trans both	few small are to-dry only, x sfer only, x < types, x < 14	□ No notification f □ Drop store/out of ea source < 140 gal/yr 200 gal/yr		oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source	e 2. Nor dry-transboth (con	few small are to-dry only, x sfer only, x < types, x < 14 structed on or	No notification for the property of the prope	f business/petr	oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,14	e	few small are co-dry only, x sfer only, x < types, x < 14 structed on or few large are co-dry only, 1	No notification for the property of the prope	f business/petr	oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800	e	few small are to-dry only, x sfer only, x < types, x < 14 structed on or few large are to-dry only, 1 sfer only, 200	No notification for Drop store/out of Drop store/out of 2 source  < 140 gal/yr 200 gal/yr 0 gal/yr r after 12/9/91)  2a source  40 ≤ x ≤ 2,100 gal/yr ≤ x ≤ 1,800 gal/yr	f business/petr	oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,14	e	few small are to-dry only, x sfer only, x < 14 structed on or to-dry only, 1 fer only, 200 types, 140 ≤	No notification for Drop store/out of the Source < 140 gal/yr 200 gal/yr of gal/yr after 12/9/91)  ca source 40 ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr	f business/petr	oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 gar (constructed before 12/9/91)	e	few small are to-dry only, x sfer only, x < 14 structed on or few large are to-dry only, 1 sfer only, 200 types, 140 < structed on or or few large are to-dry only, 200 types, 140 < structed on or or few large are to-dry only, 200 types, 140 < structed on or or few structed on or few larges.	No notification for the property of the source of the sou	f business/petr	oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility classes.	e	few small are to-dry only, x sfer only, x < 14 structed on or few large are to-dry only, 1 sfer only, 200 types, 140 < structed on or or few large are to-dry only, 200 types, 140 < structed on or or few large are to-dry only, 200 types, 140 < structed on or	No notification for Drop store/out of the Source < 140 gal/yr 200 gal/yr of gal/yr after 12/9/91)  ca source 40 ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr	f business/petr	oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility class of the property of the prop	e 2. Nor dry-frans both (con e 4. No ogal/yr dry-fal/yr both (con ssification	few small are to-dry only, x sfer only, x < types, x < 14 structed on or few large are to-dry only, 1 sfer only, 200 types, 140 ≤ structed on or □N	No notification for Drop store/out of Drop store/out of Casource < 140 gal/yr 200 gal/yr 200 gal/yr after 12/9/91)  casource 40 ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr x ≤ 1,800 gal/yr after 12/9/91)  □Can not determine	f business/petr	oleum
Facility indicated on notification (check appropriate box)  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)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility classification, please check the application of the property of	e	few small are to-dry only, x sfer only, x < 14 structed on or few large are to-dry only, 1 sfer only, 200 types, 140 ≤ structed on or □N	Do notification for Drop store/out of Drop store/out of Page 200 gal/yr 200 gal/yr after 12/9/91)  Sea source 40 ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr after 12/9/91)  □Can not determinableabor	f business/petr	oleum

### Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY ON ON/A 2. Examining the containers for leakage? DOY □N 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DIV ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN ØN/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) DV DN 1. Equipped all machines with the appropriate vent controls? MY 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 DÝ ON ONA condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated ra√ □N condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

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	□N	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	$\Box$ Y	ПN	□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?	ΟY	□N	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ПY	□N	□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	ПN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	□N	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ΠN	□N/A
=				

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	ery on
2. Maintained rolling monthly total of perc consumption?	ory on
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	ØÝ □N □N/A
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	GY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON PANA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON DAN/A
6. Maintained startup/shutdown/malfunction plan?	DY ON
7. Maintained deviation reports?	OY ON MYA
Problem corrected?	OY ON ON/A
8. Maintained compliance plan, if applicable?	OY ON ØN/A

P	PART VI: LEAK DETECTION AND REPAIRS						
1.	Does the responsible official conduct a	weekly	(for small s	ources, bi-weekly) leak detection an	ıd repair		
	inspection?				ory on		
2.	Has the facility maintained a leak log?				ØY ON		
3.	Does the responsible official check the	follow	ing areas for	leaks?			
	Hose connections, fittings, couplings, and valves	œÝ	ON ON/A	Muck cookers	OY ON ON/A		
	Door gaskets and seating	<b>Y</b>	□N □N/A	Stills	OTY ON ON/A		
	Filter gaskets and seating	YE	□N □N/A	Exhaust dampers	MY ON ON/A		
	Pumps	₫Y	□N □N/A	Diverter valves	MY ON ON/A		
	Solvent tanks and containers		□N □N/A		ØY ON ON/A		
	Water separators	ďY	□N □N/A				
4.	Which method of detection is used by	he resp	onsible offic	ial?			
	Visual examination (condensed s	olvent	on exterior s	urfaces)			
	Physical detection (airflow felt th	rough	gaskets)				
	Odor (noticeable perc odor)						
	Use of direct-reading instruments	ation (I	FID/PID/calo	rimetric tubes)			
	Halogen leak detector						
	If using direct-reading instr	ument	ation, is the	equipment:	⊠N/A		
	a. Capable of detecting	perc va	por concentr	ations in a range of 0-500 ppm?	OY ON		
	b. Calibrated against a (PlD/FID only)?	standar	d gas prior to	and after each use	OY ON		
	c. Inspected for leaks ar	nd obvi	ous signs of v	wear on a weekly basis?	□Y □N		
	d. Kept in a clean and s	ecure a	rea when no	t in use?	□Y □N		
	e. Verified for accuracy	by use	of duplicate	samples (calorimetric only)?	OY ON		
•	-						
	1-P			ء دامان			
	Inspector's Name (Please Pri	nt)		$\frac{2 5 200}{\text{Date of Inspec}}$	<del>_</del>		
	Anspector 5 Frame (Flease III	,		Date of Hisper			
	//x/ith			Feb 20	r") (		
_	Inspector's Signature			Approximate Date of N	<u> </u>		

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: EXCLUSIVE CLERNERS	DATE: 2/15/2000
FACILITY LOCATION: 10667 W. ATLANTIC BLUD CORAL S	PRW65
	33071
Annual Reporting Period: 3/11 97 TO 2 15	2000
Based on each term or condition of the Title V general air permit, my facility has remained in compliance 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	
If NO, complete the following:  #1. Term or condition of the general permit that has not been in continuous compliance during the reporti	ng 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 reporti	ng 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 inqui in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year combination facilities.  RESPONSIBLE OFFICIAL:	e solvent, based upon
RESPONSIBLE OFFICIAL:  Name (Please Print)  Signature	Date

<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.

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

EXCLUSIVE CLEANERS

AIRS ID#0112366

RANDY COLE 10667 W ATLANTIC BLVD CORAL SPRINGS FL 33071 Do NOT Remove Label Annual Reporting Period: Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. 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: Bureau of Air Monitoring & Mobile Sources 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.

Signature

<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.

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)  RANDY COLE  C. Signature  Agent  Addressee
1. Article Addressed to:  10 AIRS ID # 0112366001AG	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
RANDY COLE EXCLUSIVE CLEANERS 10667 W ATLANTIC BLVD CORAL SPRINGS FL 33071	3. Service Type  Certified Mail
1000 2010 000010274022	4. Restricted Delivery? (Extra Fee) ☐ Yes

	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insuran		
4022	OFFICIA		
7507	Postage \$ Certified Fee	- 100 5	
0000	Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	Postry drik	
00 2870	Total   10 AIRS ID # 011  Sent 7 RANDY COLE EXCLUSIVE CLEANERS  Street, 10667 W ATLANTIC BLVD CORAL SPRINGS FL 33071	12366001AG	
2	City, St. PS Form 3800, May 2000	See Reverse for Instructions	



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

412933 JAN11 2002



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 # 0112366

EXCLUSIVE CLEANERS RANDY COLE 10667 W ATLANTIC BLVD CORAL SPRINGS FL 33071

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

### EXCLUSIVE DRIVE THRU CLEANERS 10667 W. ATLANTIC BLVD. CORAL SPRINGS. FL 33071



TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

2021272020

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

402642

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 # 0112366

EXCLUSIVE CLEANERS RANDY COLE 10667 W ATLANTIC BLVD CORAL SPRINGS FL 33071 MAIL ROOM

JAN 12 01

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1 Fund: 20-2-035001 Obj.: 002273



300984

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 RECEIVED

JAN 27 98

Do NOT Remove Label

AIRS ID#0112366

EXCLUSIVE CLEANERS RANDY COLE 10667 W ATLANTIC BLVD CORAL SPRINGS FL 33071 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273



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

0353863

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

BY DO NOT Remove Label

AIRS ID # 0112366

EXCLUSIVE CLEANERS
RANDY COLE
10667 W ATLANTIC BLVD
CORAL SPRINGS FL 33071

FOR GOVERNMENT USE ONLY
Org.: 375501 (1) 0(9) EO: B1
Fund: 20-2-0350 (2)
Obj.: 002273

. . .

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0389675

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 # 0112366

EXCLUSIVE CLEANERS RANDY COLE 10667 W ATLANTIC BLVD CORAL SPRINGS FL 33071 FOR GOVERNMENT USE ONLO Org.: 37550101000 EO: Rb Fund: 20-2-035001 Obj.: 002273