



Jeb Bush  
Governor

# Department of Environmental Protection

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

David B. Struhs  
Secretary

July 12, 2000

Mr. Toolsie Ramdial  
Sunfresh Cleaners, Inc.  
1890 Pine Island Road  
Plantation, Florida 33322

Re: Facility No.: 0112398-002

Dear Mr. Ramdial:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on July 3, 2000.

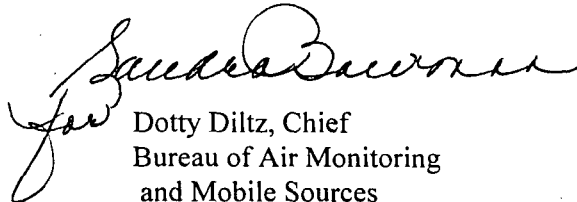
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements 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. Jarrett Mack, Broward County

PERCHLOROETHYLENE DRY CLEANER  
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED  
JUN - 8 2000

Bureau of Air Monitoring  
& Mobile Sources

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): <b>SUNFRESH CLEANERS INC.</b>
2. Site Name (For example, plant name or number): <b>SUNFRESH CLEANERS</b>
3. Hazardous Waste Generator Identification Number:
4. Facility Location: <b>1890 PINE ISL. RD.</b> Street Address: City: <b>PLANTATION</b> County: <b>BROWARD</b> Zip Code: <b>33322</b>
5. Facility Identification Number (DEP Use ONLY - do not fill in): <b>0110398-002</b>

Responsible Official

6. Name and Title of Responsible Official: Name: <b>TOOLSIERAM RAMDIAL</b> Title: <b>OWNER</b>
7. Responsible Official Mailing Address: Organization/Firm: Street Address: <b>1890 PINE ISL. RD.</b> City: <b>PLANTATION</b> County: <b>BROWARD</b> Zip Code: <b>33322</b>
8. Responsible Official Telephone Number: Telephone: <b>(954) 382-4553</b> Fax: ( ) -

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: County: Zip Code:
11. Facility Contact Telephone Number: Telephone: ( ) - Fax: ( ) -

Wrong form !!

### Facility Information

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

	Date Machine Initially Purchased	Date Control Device Installed		Date Machine Initially Purchased	Date Control Device Installed		Date Machine Initially Purchased	Date Control Device Installed
Type of Machine	ID		ID			ID		
<i>AEM TECH</i> <i>410</i>								
<i>Example</i> #1 03-OCT-93 12-NOV-93    #2 08-DEC-91                      #3 02-MAR-92 02-MAR-92								
Dry-to-Dry Unit	<i>(Dry to Dry)</i>							
(1) w/ ref. condenser	<i>(1)</i>	<i>04/11/99</i>	<i>04/11/99</i>					
(2) w/ carbon adsorber								
(3) w/ no controls								
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?

gallons *1999 x 40 GAL 2000 7.7M 167 GAL*

(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:

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.)

Existing small area source

New small area source

Existing large area source

New large area source

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

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

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 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

New machines at large area source  
Refrigerated condenser

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).

All steam and hot water generating units exempt  OR  
No such units on-site

How many boilers do you have on-site?  /

For each boiler, indicate its horsepower (HP) rating:  20  HP

What type of fuel do you use?  propane  natural gas  
 No. 2 fuel oil  No. 4 fuel oil  
 No. 6 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

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are \_\_\_\_\_
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

**Responsible Official Certification**

*I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. 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, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.*

*I will promptly notify the Department of any changes to the information contained in this notification.*

Tootsieram Ramdial                      owner  
Print name of responsible official

Tootsieram Ramdial  
Signature

5/2/2000  
Date

BEST AVAILABLE COPY

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

443736 DEC27 2004

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 112398 10  
SUNFRESH CLEANERS  
1890 Pine Island Road  
PLANTATION, FL 33322

FOR GOVERNMENT USE ONLY  
ORG.: 37550101000 EO: 12812  
FUND: 20-2-035001  
OBJECT: 002273

Bureau of Air Monitoring  
& Mobile Sources

RECEIVED  
DEC 28 2004

Printed on recycled paper.



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

434647 DEC22 2003

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

112398  
TOOLSIERAM RAMDIAL  
SUNFRESH CLEANERS  
1890 PINE ISLAND ROAD  
PLANTATION FL 33322

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

AIRS ID#0112398

SUNFRESH CLEANERS  
 TOOLSIERAM RAMDIAL  
 1890 PINE ISLAND ROAD  
 PLANTATION FL  
 33322

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

421182 DEC30 2002

Bureau of Air Monitoring  
& Mobile Sources

JAN 06 2005

RECEIVED



U.S. Postal Service <b>CERTIFIED MAIL RECEIPT</b> (Domestic Mail Only; No Insurance Coverage Provided)	
[Redacted]	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
To: [Redacted]	Postmark Here  <i>Rec'd 03</i>
Re: 10 AIRS ID # 0112398001AG	
WOOUNG BAE KIM	
SUNFRESH CLEANERS	
1890 PINE ISLAND ROAD	
PLANTATION FL 33322	
PS Form 3800, February 2000	

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

10 AIRS ID # 0112398001AG  
 WOOUNG BAE KIM  
 SUNFRESH CLEANERS  
 1890 PINE ISLAND ROAD  
 PLANTATION FL 33322

2. Article Number

(Transfer from service label)

7000 0520 0020 9373 2507

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

TARA RAMDIAL

B. Date of Delivery

12-3-2

C. Signature

X Tara Ramdial

 Agent

 Addressee

 D. Is delivery address different from item 1?  Yes

 If YES, enter delivery address below:  No

3. Service Type

 Certified Mail  Express Mail

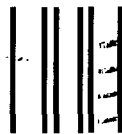
 Registered  Return Receipt for Merchandise

 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G 40

• Sender: Please print your name, address, and ZIP+4 in this box.

DARMMOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 13510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring  
& Mobile Sources

DEC 19 2002

RECEIVED



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

412645 JAN 7 2002 ~~X~~

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 # 0112398  
SUNFRESH CLEANERS  
TOOLSIERAM RAMDIAL  
1890 PINE ISLAND ROAD  
PLANTATION FL  
33322

FOR GOVERNMENT USE ONLY  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273

01

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label. **405089 FEB12 2001**

**TOTAL AMOUNT DUE: \$50.00**

*2/12/01 pl*

Do NOT Remove Label

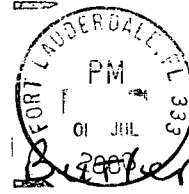
AIRS ID # 0112398  
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TOOLSIERAM RAMDIAL  
1890 PINE ISLAND ROAD  
PLANTATION FL 33322

FOR GOVERNMENT USE ONLY  
Org.: 37550101000 EO: A1  
Fund: 20-2-035001  
Obj.: 002273



# SUNFRESH CLEANERS

1890 Pine Island Road  
Plantation, Florida 33322  
(954) 382-4553



Att'n Rick Butler.

State Five General Permitting Office  
Bureau of Air Monitoring + Mobile Sources  
MS 5510  
Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400

32399+6942

