



# Department of Environmental Protection

Lawton Chiles  
Governor

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

Virginia B. Wetherell  
Secretary

March 25, 1998

Mr. Sal Cataldo  
Lasal Cleaners  
1465 North Park Drive  
Fort Lauderdale, Florida 33326

Re: Facility No.: 0112401

Dear Mr. Cataldo:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on March 9, 1998.

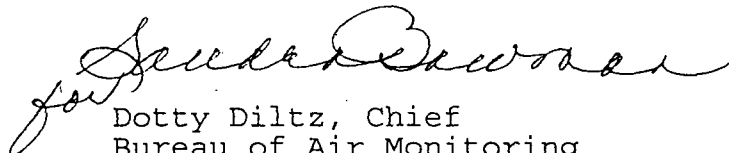
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

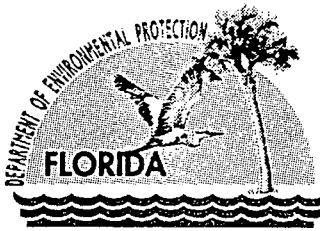
Sincerely,

  
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"



# Department of Environmental Protection

Jeb Bush  
Governor

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

David B. Struhs  
Secretary

April 12, 2001

Mr. Mubin Kassam  
Lasal Cleaners #0112401  
1465 North Park Drive  
Weston, Florida 33326

Dear Mr. Kassam:

The Bureau of Air Monitoring and Mobile Sources recently received your Perchloroethylene Dry Cleaning Notification Form and check (#6191) in the amount of \$100.

We appreciate your submittal. However, your check is being returned to you since it is not due at this time. Fees are due and payable between January 15 and March 1 in the year following each year for which the facility is in operation and subject to the requirements of the general permit. The Department will send you an invoice in time for the next payment cycle.

If you have any questions, please call me at 850/921-9583.

Sincerely,

Sandra Bowman  
Environmental Manager  
Mobile Source Control Section  
Bureau of Air Monitoring  
and Mobile Sources

<b>HOLLYKINS II D/B/A LASAL CLEANERS</b> 1465 N PARK DRIVE FT LAUDERDALE, FL 33326		6191
		63-1485/670
PAY TO THE ORDER OF	<i>Florida Department of Environmental Protection</i>	DATE <i>04/09/2001</i>
<i>One Hundred Dollars only</i>		\$ <i>100.00</i>
		DOLLARS
<b>BRISTOL BANK</b> Coral Gables, FL 33143		<i>Mubin Kassam</i>
FOR	<i>Permit</i>	MP

3755  
2273  
Q311912

BEST AVAILABLE COPY



Department of  
Environmental Protection

Lawton Chiles  
Governor

Mr. [Name]  
[Address]  
Tallahassee, Florida

Re: Facility No. **0112401**

Reference is made to your letter of [Date]

The Department has received the Title V General Permit  
for the day beginning [Date] and you  
should be aware that

The permit is valid for one year. The annual  
general permit annual operation fee is \$10 and is due  
and paid on or before January 15 and March 1 of each year. The  
facility is subject to the requirements of  
the Title V general permit.

If you have or expect to have any changes in the  
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  
Department of Environmental Protection  
2600 Blair Stone Road  
Tallahassee, FL 32399-2400

If there are any changes in facility status, ownership,  
change of operation, or permit compliance, or if you have  
additional questions regarding the Title V General Permit  
Program, please contact the District or local air program  
compliance assistance area.

Sincerely,

[Signature]  
Dorothy [Name]  
Bureau of Air Monitoring  
and Mobile Sources

*Payment  
refunded  
not due*

Enclosure  
County

Bureau of Air Monitoring  
& Mobile Sources  
APR 16 1998  
RECEIVED

RECEIVED  
MAIL ROOM  
APR 10 98

0112401

3/23/98 spoke to Marco Murado  
and he stated that he is the manager  
of the facility. He also stated that  
Sal Cataldo is the owner of the  
facility.

0112401

p13

6. Add title of Responsible Official.

p14

1(c) Should not be marked. mark out and initial.

p15

4. Existing large area source R.C. should not be marked. Mark out and initial. New large area source R.C. should be marked.

(F) Required. Should be marked

p16

Add numbers of permits surrendered  
If none, correct + mark "No air permits"

Responsible official sign and date for changes

# Perchloroethylene Dry Cleaning Facility Notification

## Facility Name and Location

RECEIVED  
MAR 09 1998  
Bureau of Air Monitoring  
& Mobile Sources

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): <i>LA SAL CLEANERS INC.</i>
2. Site Name (For example, plant name or number): <i>LA SAL CLEANERS</i>
3. Hazardous Waste Generator Identification Number: <i>FL 0001046549</i>
4. Facility Location: Street Address: <i>1465 NORTH PARK DRIVE</i> City: <i>FORT LAUDERDALE</i> County: <i>BROWARD</i> Zip Code: <i>33326</i>
5. Facility Identification Number (DEP Use): <i>0112401</i>

## Responsible Official

6. Name and Title of Responsible Official: <i>SAL CATALDO</i>
7. Responsible Official Mailing Address: Organization/Firm: <i>LA SAL CLEANERS INC</i> Street Address: <i>1465 NORTH PARK DRIVE</i> City: <i>FORT LAUDERDALE</i> County: <i>BROWARD</i> Zip Code: <i>33326</i>
8. Responsible Official Telephone Number: Telephone: <i>(954) 389-6434</i> Fax: <i>(954) 389-1874</i>

## Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): <del>_____</del>
10. Facility Contact Address: Street Address: City: _____ County: _____ Zip Code: _____
11. Facility Contact Telephone Number: Telephone: ( ) - - - - - Fax: ( ) - - - - -

**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.

<i>AVANTI FUTURA AC20-TECH 550</i>		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>Example</i>		<i>#1 03-OCT-93</i>	<i>12-NOV-93</i>	<i>#2</i>	<i>08-DEC-91</i>		<i>#3</i>	<i>02-MAR-92</i>	<i>02-MAR-92</i>
Dry-to-Dry Unit		<i>Day 7. Day</i>			<i>Day 7. Day</i>				
(1) w/ ref. condenser		<i>(1) 3/25/95</i>	<i>3/25/95</i>	<i>(2)</i>	<i>3/25/95</i>	<i>3/25/95</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

(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

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?  
(Indicate with an "X".)

Existing large area source

Carbon adsorber

Refrigerated condenser

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 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:

*All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.*

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 requirements 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



**Surrender of Existing Air Permit(s)**

Please indicate with an "X" the appropriate selection:



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**

*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.*

*SAC Cataldo*  
Signature SAC CATALDO

3/6/98  
Date



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0355551 ✓

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  
MAIL ROOM  
DEC 29 98

Do NOT Remove Label

AIRS ID # 0112401

LA SAL CLEANERS  
~~SAL CATALDO~~ MINAZ ALI  
1465 NORTH PARK DRIVE  
FT LAUDERDALE FL 33326

FOR GOVERNMENT USE ONLY  
Org.: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj.: 002273