

Jeb Bush  
Governor

# Department of Environmental Protection

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

David B. Struhs  
Secretary

January 25, 2001

Mr. Barry Muookin, President  
American Dry Cleaners  
8320 West Sunrise Boulevard, Suite 114  
Plantation, Florida 33322

Re: Facility No.: 0112524-001

Dear Mr. Muookin:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on December 14, 2000.

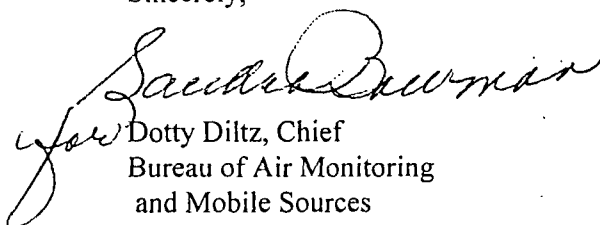
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

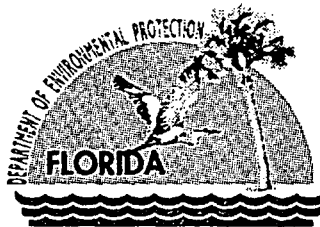
  
Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

DD/jw

cc: Mr. Jarrett Mack, Broward County

"More Protection, Less Process"

Printed on recycled paper.



# Department of Environmental Protection

Jeb Bush  
Governor

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

David B. Struhs  
Secretary

January 16, 2001

Mr. Barry Muookin, President  
American Dry Cleaners  
8320 West Broward Boulevard #114  
Plantation, Florida 33323

Re: Facility No.: 0112524-001

Dear Mr. Muookin:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on December 14, 2000.

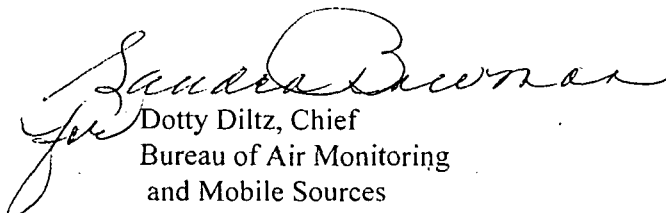
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If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,

  
Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

DD/jw

cc: Mr. Jarrett Mack, Broward County

0112524-001

P15

1(a) Existing should be circled under status. New should be marked out and initialed.

P16

6(e) Required. Should be marked.

P17 Responsible official sign and date for changes made.

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION

## DISTRICT ROUTING SLIP

To: \_\_\_\_\_ DATE: \_\_\_\_\_

CC To:

	<b>PENSACOLA</b>	<b>NORTHWEST DISTRICT</b>	
	Panama City	Northwest District Branch Office	
	Tallahassee	Northwest District Branch Office	
	Sopchoppy	Northwest District Satellite Office	
	<b>TAMPA</b>	<b>SOUTHWEST DISTRICT</b>	
	Punta Gorda	Southwest District Branch Office	
	Bartow	Southwest District Satellite Office	
	<b>ORLANDO</b>	<b>CENTRAL DISTRICT</b>	
	Melbourne	Central District Satellite Office	
	<b>JACKSONVILLE</b>	<b>NORTHEAST DISTRICT</b>	
	Gainesville	Northeast District Branch Office	
	<b>FORT MYERS</b>	<b>SOUTH DISTRICT</b>	
	Marathon	South District Branch Office	
	<b>WEST PALM BEACH</b>	<b>SOUTHEAST DISTRICT</b>	
	Port St. Lucie	Southeast District Branch Office	

Reply Optional  
Date Due: \_\_\_\_\_

Reply Required  
Date Due: \_\_\_\_\_

Info Only

Comments:

From: \_\_\_\_\_

Tel: \_\_\_\_\_

Rec'd  
Dec 14, 2000

PERCHLOROETHYLENE DRY CLEANER  
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):		
F.M.I. Corp		
2. Site Name (For example, plant name or number):		
AMERICAN Dry Cleaners		
3. Hazardous Waste Generator Identification Number:		
FLD 984226159		
4. Facility Location:		
Street Address:	8320 W <del>Broward</del> Blvd #114	Zip Code: 33322
City:	PLANTATION	County: BROWARD
5. Facility Identification Number (DEP Use ONLY - do not fill in):		
012524-001		

Responsible Official

6. Name and Title of Responsible Official:		
Name:	BARRY MURKIN	Title: PRESIDENT
7. Responsible Official Mailing Address:		
Organization/Firm:	Sunrise	
Street Address:	8320 W <del>Broward</del> Blvd #114	
City:	PLANTATION	County: BROWARD
		Zip Code: 33322
8. Responsible Official Telephone Number:		
Telephone:	(954) 424-4537	Fax: (954) 512-9867

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: ( ) -

**Facility Information**

**1.(a) DRY-TO-DRY MACHINES ONLY**

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1990	Existing <input checked="" type="radio"/> New <input type="radio"/>	RC <input checked="" type="radio"/> CA <input type="radio"/> None required <input type="radio"/>	SAME
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

\*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

**1.(b) TRANSFER MACHINES ONLY**

How many washers do you have on-site?

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 From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

\*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

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

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

New store:  New machine

Unopened store  (date of expected opening \_\_\_\_\_)

3. What is the facility's source classification based on the definitions found in section (3) of Part II?  
 Indicate with an "X". Select one classification only.)

Small Area Source

- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
- Transfer only on-site (used less than 200 gallons of perc per year)
- Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
- Transfer only on-site (used 200 - 1,800 gallons of perc per year)
- Both machine types on-site (used 140 - 1,800 gallons of perc per year)

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

Existing machines at small area source  
 (NONE REQUIRED)

New machines at small area source  
 Refrigerated condenser

Existing machines at large area source  
 Carbon adsorber   
 Refrigerated condenser

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?  1

For each boiler, indicate its horsepower (HP) rating:  15  10  10

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.*

Barry Mookin  
Print name of responsible official

Barry Mookin  
Signature

12/08/00  
Date

Bureau of Air Monitoring  
& Mobile Sources  
DEC 14 2000  
RECEIVED



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

446274 FEB14 2005

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# 112524 1st  
AMERICAN DRY CLEANERS  
8320 W Sunrise Blvd #114  
PLANTATION, FL 33323

FOR GOVERNMENT USE ONLY  
ORG.: 37550101000 EO: A1  
FUND: 20-2-035001  
OBJECT: 002273

Printed on recycled paper.

Bureau of Air Monitoring  
& Mobile Sources

FEB 16 2005

RECEIVED

(CUT HERE)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

467670 JAN 26 2007

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# 112524  
E.M.I. CORP AMERICAN CLASSIC CLEANERS, LLC  
8320 W Sunrise Blvd #114  
PLANTATION, FLORIDA 33323

FLAIR ACCT. CODE 372020350013755010000  
BENEFITTING OBJECT CODE 002000  
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY  
ORG.: 37550101000 EO: A1  
FUND: 20-2-035001  
OBJECT: 002273

Printed on recycled paper.

CHANGE OF OWNERSHIP?

PERMIT EXPIRES 1/14/06

JAN 30 2007

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

460235 MAR 27 2006

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

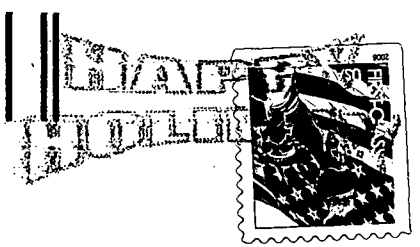
AIRS ID# 112524 1st  
AMERICAN DRY CLEANERS  
8320 W Sunrise Blvd #114  
PLANTATION, FL 33323

FLAIR ACCT. CODE 372020350013755010000  
BENEFITTING OBJECT CODE 002000  
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY  
ORG.: 37550101000 EO: A1  
FUND: 20-2-035001  
OBJECT: 002273

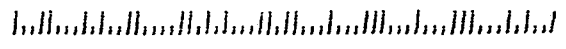
Printed on recycled paper.

FT LAUDERDALE  
FL 333  
24 JAN 2007 PM 2 L



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

323153070 6099



7003 0500 0004 0144 8372

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark  
Here

AIRS ID# 112524 1stC  
 Se AMERICAN DRY CLEANERS  
 St 8320 W Sunrise Blvd #114  
 or PLANTATION, FL 33323  
 Ct

PS Form 3800, June 2002 See Reverse for Instructions

**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:

AIRS ID# 112524 1stC  
 AMERICAN DRY CLEANERS  
 8320 W Sunrise Blvd #114  
 PLANTATION, FL 33323

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature   Agent  
 Addressee

B. Received by (Printed Name) Mark Anthony C. Date of Delivery 2-8-05

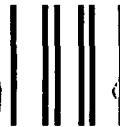
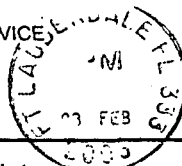
D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from service is) 7003 0500 0004 0144 8372

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

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

DARWIN/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2800 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

FEB 15 2005

RECEIVED



7003 2260 0003 5650 7543

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**OFFICIAL USE**

Postage \$ \_\_\_\_\_  
 Certified Fee \_\_\_\_\_  
 Return Receipt Fee (Endorsement Required) \_\_\_\_\_  
 Restricted Delivery Fee (Endorsement Required) \_\_\_\_\_

Postmark  
 Here

To ID# 112524  
 BARRY MUOOKIN  
 AMERICAN DRY CLEANERS  
 8320 W SUNRISE BLVD #114  
 PLANTATION, FL 33322

PS Form 3800, June 2002

See Reverse for Instructions

**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:

ID# 112524  
 BARRY MUOOKIN  
 AMERICAN DRY CLEANERS  
 8320 W SUNRISE BLVD #114  
 PLANTATION, FL 33322

2. Article Number  
 (Transfer from service label)

7003 2260 0003 5650 7543

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Mary F. Lewis*

Agent  
 Addressee

B. Received by (Printed Name)

MARY F LEWIS

C. Date of Delivery

2/6/04

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-10

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

Bureau of Air Monitoring  
& Mobile Sources

FEB 12 2004

RECEIVED

ARM/MOBILE SOURCE CONTROL PROGRAM  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR STONE ROAD  
TALLAHASSEE, FLORIDA 32399-2400

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

436676 FEB20 2004

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

112524  
BARRY MUOOKIN / Marlon Thompson  
AMERICAN DRY CLEANERS  
8320 W SUNRISE BLVD #114  
PLANTATION FL 33322

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

RECEIVED  
FEB 26 2004  
Bureau of Air Monitoring  
& Mobile Sources

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

424148 FEB28 2003

Do NOT Remove Label

AIRS ID#0112524  
AMERICAN DRY CLEANERS  
BARRY MUOOKIN  
8320 W SUNRISE BLVD #114  
PLANTATION FL  
33322

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

RECEIVED  
MAR 05 2003  
Bureau of Air Monitoring  
& Mobile Sources

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

412657 JAN 7 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 # 0112524  
AMERICAN DRY CLEANERS  
BARRY MUOOKIN  
8320 W SUNRISE BLVD #114  
PLANTATION FL  
33322

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

X

**AMERICAN DRY CLEANERS**

Dept of Environmental Protection  
Bills : air permit

1/2/02

2574

American

\*\*\*\*\*50.00



**U.S. Postal Service**  
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7001 0320 0001 7976 5488

Postage \$ \_\_\_\_\_  
 Certified Fee \_\_\_\_\_  
 Return Receipt Fee  
 (Endorsement Required) \_\_\_\_\_  
 Restricted Delivery Fee  
 (Endorsement Required) \_\_\_\_\_  
 Total Postage & Fees \$ \_\_\_\_\_

Postmark  
 Here

Se  
 AMERICAN DRY CLEANERS  
 Str BARRY MUOOKIN  
 or 8320 W SUNRISE BLVD #114  
 Cit PLANTATION FL  
 33322

AIRS ID#0112524

or Instructions

**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:

AIRS ID#0112524  
 AMERICAN DRY CLEANERS  
 BARRY MUOOKIN  
 8320 W SUNRISE BLVD #114  
 PLANTATION FL  
 33322

2. Article Number (Copy fr

7001 0320 0001 7976 5488

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

KIRK FRANCIS 2-7-3

C. Signature

X

Agent  
 Addressee

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.

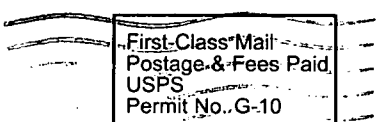
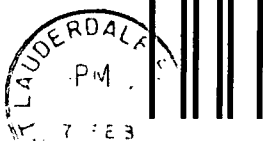
4. Restricted Delivery? (Extra Fee)

Yes

It is  
TANT: 2  
10, Jr

quiry.  
4-10

UNITED STATES POSTAL SERVICE

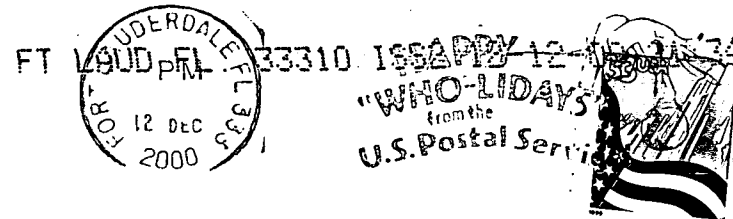


• Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES  
DEPT. OF ENVIRONMENTAL PROTECTION  
MAIL STATION 5510  
2600 BLAIR ST. C.E. ROAD  
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring  
& Mobile Sources  
RECEIVED  
FEB 11 2003

ONE PRICE DRY CLEANING



General Permits Section  
Bureau of Air Monitoring & Mobile Sources  
Dept Environmental Protection  
2600 Blair Stone Rd  
Tallahassee, FL 32399-2400

4513 Pine Island Road • Sunrise, Florida 33351