

# Department of Environmental Protection

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

Colleen M. Castille Secretary

December 21, 2006

Mr. James Edward Greer A-1 One Price Cleaners 1422 South Powerline Road Pompano Beach, Florida 33069

Re: Facility No.: 0112596-002

Dear Mr. Greer:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 17, 2006.

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,

Sandra Veazey, Chief Bureau of Air Monitoring

rudus Bruman

and Mobile Sources

SV/pg

cc: Mr. Clifton Bittle; Broward County

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NO ACTIVITY FOR FACILITY
EMISSION FEE DATES 2012-2005
SOC REPORTS 2
COMP. STATUS-SNC MNC DR 3/31/2006
INS2-Compliance Inspection
Walkthough
INSP-Broward Co-CBiHle

NACTIVE - CHANGE OF DUNCESHIP P. OURING 30 DAY REVIEW PERIOD Acrive - 12/18/04

#### PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

#### Part III. Notification of Intent to Use General Permit

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.

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):  BEEKMAN INVESTMENT (SECOUP)  2. Site Name (For example, plant name or number):  A-1 ONE PRICE CLEANERS				
2. Site Name (For example, plant name or number):  A-1 ONE PRICE CLEANERS				
A-1 ONE PRICE CLEAMERS				
1 - 4				
3. Hazardous Waste Generator Identification Number:				
4. Facility Location: 1422 SOUTH POWERLINE ROAD Street Address:				
City: POMPANO BEACH County: BROWARD Zip Code: 38069				
5. Facility Identification Number (DEP Use ONLY "do not fill in)				
Responsible Official				
6. Name and Title of Responsible Official:				
Name: JAMES EDWARD GREER Title: OWNER				
17 Pernanciale Official Mailing Address:				
Street Address: 4422 South PowerLINE LDAD				
Organization/Firm: Street Address: 1422 South PowerLine RDAD City: Dom Pano Rocach County: Proward Zip Code: 33069				
8. Responsible Official Telephone Number:				
Telephone: (954) 973 6470 Fax: (N/4) -				
Facility Contact (If different from Responsible Official)				
9. Name and Title of Facility Contact (For example, plant manager):				
N/A				
10. Facility Contact Address:				
Street Address:				
City: County: Zip Code:				
11. Facility Contact Telephone Number:				
Telephone: ( ) - Fax: ( ) -				

DEP Form No. 62-213.900(2)

Effective: 2/24/99

	11/17/06-NEED ALL OF PAGE 14				
4.	Facility Location: 1422 South Powelline ROAD Street Address:				
	City: Pompanio Bot County: Brown Ares Zip Code: 33069				
5.	Pacility Identification Number (DEP Use ONLY ado not fill in):				
	sponsible Official				
1	Name and Title of Responsible Official:				
Nai	me: JAMES EDWARD GREEN TIME: OWNER				
7. Responsible Official Mailing Address:					
	Organization/Firm: Street Address: 1422 South Powelling LD				
	City: Dompasio Box County: Boward Zip Code: 33049				
8.	Responsible Official Telephone Number:				
	Telephone: (954) 973 6470 Fax: (N/4)				
Facility Contact (If different from Responsible Official)					
9.					
	VA				
10.	Facility Contact Address:				
	Street Address:				
	City: County: Zip Code:				
11.	Facility Contact Telephone Number:  Telephone: ( ) - Fax: ( ) -				

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

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#### **Facility Information**

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

I.(a) DRI-10-DRI MACHINES ONLI						
How many dry-to-dry mad	chines do you hav	ve on-site?	,			
For each dry-to-dry machine	ine on-site, please	e provide the following informati	on:			
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")			
JUNE ZUOI	Existing/Ne	ew RC/CA/None required				
	Existing/Ne	ew RC/CA/None required	<del></del>			
	Existing/Ne	ew RC/CA/None required				
*CONTROL DEVICE KE	EY: RC = re	efrigerated condenser CA =	= carbon adsorber			
1.(b) TRANSFER MACI	HINES ONLY	2				
How many washers do yo	u have on-site?					
How many dryers/reclaimers do you have on-site?						
How many dryers/reclaim		•				
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (no	ne was purchased o units purchased	from the manufacturer between	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, lowed to operate under this general iformation:			
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (no	ne was purchased o units purchased	I from the manufacturer between I after September 22, 1993 are all	December 9, 1991 and September 22, lowed to operate under this general			
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (n permit). For each transfer Date Initially Purchased	ne was purchased o units purchased er machine on-site Status	i from the manufacturer between after September 22, 1993 are all e, please provide the following in Control Device Required*	December 9, 1991 and September 22, lowed to operate under this general aformation:  Date Control Device Installed (if already included at time of			
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (n permit). For each transfer Date Initially Purchased From Manufacturer	ne was purchased o units purchased er machine on-site Status (circle one)	d from the manufacturer between d after September 22, 1993 are all e, please provide the following in Control Device Required* (circle one)	December 9, 1991 and September 22, lowed to operate under this general aformation:  Date Control Device Installed (if already included at time of			
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (n permit). For each transfer Date Initially Purchased From Manufacturer	ne was purchased o units purchased er machine on-site Status (circle one)	d from the manufacturer between d after September 22, 1993 are all e, please provide the following in Control Device Required* (circle one)	December 9, 1991 and September 22, lowed to operate under this general aformation:  Date Control Device Installed (if already included at time of			
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (n permit). For each transfer Date Initially Purchased From Manufacturer	ne was purchased o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New	d from the manufacturer between d after September 22, 1993 are all e, please provide the following in Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required	December 9, 1991 and September 22, lowed to operate under this general aformation:  Date Control Device Installed (if already included at time of			
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (nepermit). For each transfer Date Initially Purchased From Manufacturer  *CONTROL DEVICE KE	ne was purchased o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New Existing/New	d from the manufacturer between d after September 22, 1993 are all e, please provide the following in Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  RC/CA/None required  CA =	December 9, 1991 and September 22, lowed to operate under this general aformation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  = carbon adsorber			
If the transfer machine was unit. If the transfer machine 1993, it is a NEW unit (nepermit). For each transfer Date Initially Purchased From Manufacturer  *CONTROL DEVICE KE  2.(a) How much perchlor [] gallor	ne was purchased o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New	d from the manufacturer between d after September 22, 1993 are all e, please provide the following in Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  CA = have you used within the last 12 to this in)	December 9, 1991 and September 22, lowed to operate under this general aformation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  = carbon adsorber			
If the transfer machine wa unit. If the transfer machin 1993, it is a NEW unit (nepermit). For each transfer Date Initially Purchased From Manufacturer  *CONTROL DEVICE KE	ne was purchased o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New	d from the manufacturer between d after September 22, 1993 are all e, please provide the following in Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  CA = have you used within the last 12 to this in)	December 9, 1991 and September 22, lowed to operate under this general aformation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  = carbon adsorber			

DEP Form No. 62-213.900(2) Effective: 2/24/99 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 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 No such units on-site	OR					
How many boilers do you have on-site?						
For each boiler, indicate its horsepower (HP) rating:	4					
What type of fuel do you use?  [] propane  [] No. 2 fue  [] No. 6 fue	· · · · · · · · · · · · · · · · · · ·					
6. Equipment Monitoring and Recordkeeping Inform	nation					
Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:						
(a) Purchase receipts and solvent purchases/solvent addition log  (b) Leak detection inspection and repair  (c) Refrigerated condenser temperature monitoring  (d) Carbon adsorber exhaust perc concentration monitoring  (e) Startup, shutdown, malfunction plan						
(b) Leak detection inspection and repair	<u></u>					
(c) Refrigerated condenser temperature monitoring						
(d) Carbon adsorber exhaust perc concentration monitoring						
(e) Startup, shutdown, malfunction plan						

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

7. Surrender o	of Existing DEP Air Permit(s)				
Please indicate with an "X" the appropriate selection:					
宀	I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are    DET SITE II) # 752653-02.				
	No DEP air permits currently exist for the operation of the facility indicated in this notification				
	form.				
Responsible (	Official Certification				
this notifi statement maintain	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 pro	mptly notify the Department of any changes to the information contained in this notification.				
Milli	Vel James Edward Greek				
Print name of responsible official					
Signature	11/13/2006				
<del></del>	<i></i>				

#### Instructions for Completing Part III of Notification Form

The Perchloroethylene Dry Cleaning Facility Notification of Intent to Use General Permit, Part III of this form, shall be completed and submitted to the Division of Air Resources Management at least 30 days prior to beginning operations under the general permit. Please type or print clearly all information. A copy of this notification form shall be kept on-site and made available for review by Department personnel.

The responsible official of the facility, as defined in Part II of this notification form, is responsible for ensuring that the facility complies with all applicable terms and conditions of this general permit, as set forth in Part II of this form.

Mail the signed and completed Part III of this form to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

#### Facility Name and Location

- 1. Facility Owner/Company Name Enter the name of the corporation, agency, or individual that has ownership or control of the dry cleaning facility for which this notification is submitted.
- 2. Site Name Enter the common name, if any, of the facility site; for example, Plant A, Metropolis plant, etc. If more than one facility is owned, a notification form must be completed for each.
- 3. Hazardous Waste Generator Identification Number Enter the hazardous waste generator identification number, if known, assigned by the Department to the facility.
- 4. Facility Location Enter the street address and zip code of the facility and the city and county in which it is located.
- 5. Facility Identification Number (DEP Use ONLY) Please leave this space blank. DEP will enter the facility identification number assigned to you by ARMS.

#### Responsible Official

- 6. Name and Title of Responsible Official Enter the name and title of the designated responsible official for the facility who, by signing this form, is certifying that the facility is eligible for a general permit pursuant to the requirements of Part II of this notification form and Rule 62-213.300, F.A.C.
- 7. Responsible Official Mailing Address Enter the mailing address for the responsible official if different than the address entered in No. 4 above.
- 8. Responsible Official Telephone Number Enter the telephone number and facsimile number, if available, at which the responsible official can be contacted.

#### **Facility Contact**

9. Name and Title of Facility Contact - Enter the name of the facility contact, if other than the responsible official. For example, a plant manager could be designated as the facility contact for Department inspections.

DEP Form No. 62-213.900(2)

Effective: 2/24/99

## **IMPORTANT**

A facility is eligible to operate under a Title V Air General Permit for no more than five (5) years. Your facility is approaching the end of the five (5) year period for which it was entitled to operate under the Title V Air General Permit.

NEW OWNER? If you are a NEW OWNER, please check I this box and return this page with your completed Air General Permit Notification Form.

NEW <u>RESPONSIBLE OFFICIAL?</u> If you are a NEW RO, and/or your existing business has moved to a new location, please check ☑ this box and return this page with your completed Air General Permit Notification Form.

• If you wish to continue your entitlement, please complete the enclosed Air General Permit Notification Form, making certain that it is signed by the Responsible Official (RO), properly dated and mailed to the following address:

Air General Permits Section Bureau of Air Monitoring and Mobile Sources, MS5510 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, Florida 32399-2400

- If you do not wish to continue with your eligibility, please disregard this notice.
- A fee is **NOT** required with the notification form.

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Website: www.dep.state.fl.us/air/
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### Department of Environmental Protection

Jeb Bush Governor Twin Towers 2600 Blair Stone Road M.S. 5510 Tallahassee, Florida 32399-2400 Colleen M. Castille Secretary

To: Users of the Title V Air General Permits

Records in the Division of Air Resource Management indicate that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the Federal Clean Air Act, your facility is entitled to operate for no more than five (5) years with a permit under Section § 403.0872 Florida Statutes (F.S.). Rule 62-213.300, F.A.C., establishes that the duration of the permit is for five (5) years, and no later than thirty (30) days prior to the fifth anniversary of the filing of intent to use this general permit, the responsible official shall submit a new notice of intent which shall contain all current information regarding the facility.

The enclosed notification form is for your convenience if you wish to maintain your eligibility. As the Responsible Official (R/O) for this facility, please complete the form, sign your name, date it, and submit it to the following address:

Air General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

It is important to note that facilities not in compliance with the conditions of their existing Title V Air General Permit may not be eligible to use a new air general permit after the existing authority period expires. Such facilities will be required to make application for an Air Operating Permit as a major source under Title V. It is very important for facilities to assure that they are now in compliance with their air general permit conditions to avoid this costly situation.

More Protection, Less Process
Website: www.dep.state.fl.us/air/
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## Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

February 22, 2007

Mr. James Edward Greer A-1 One Price Cleaners 1422 South Powerline Road Pompano Beach, Florida 33069

Re: Facility No.: 0112596-002

Dear Mr. Greer:

The Bureau of Air Monitoring and Mobile Sources recently received your check (#1465) in the amount of \$50 in payment of your Title V General Permit fee.

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,

Dick Dibble
Air General Permit Program
Bureau of Air Monitoring

Vick Wille

and Mobile Sources

BEEKMAN INVESTMENT GROUP, INC.

D/B/A A1 ONE PRICE CLEAN'RS

1422 S POWERLINE RD
POMPANO BEACH, FL 33069

DATE 2/20/2007

PAY
TO THE ORDER OF ENVIRONMENTAL TO TECTON \$ 50,00

FIRTY ADMAS

Cypress Place #001
701 K. Cypress Creek Rd.
Fit. Lauderdale, Fl 33309

O//2596 - 002



## Department of Environmental Protection

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

December 21, 2006

Colleen M. Castille

Mr. James Edward Greer A-1 One Price Cleaners 1422 South Powerline Road Pompano Beach, Florida 33069

Re: Facility No.: 0112596-002

Dear Mr. Greer:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 17, 2006.

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,

Sandra Veazey, Chief Bureau of Air Monitoring

and Mobile Sources

SV/pg

cc: Mr. Clifton Bittle; Broward County

"More Protection, Less Process"

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AIR GENERAL PERMITS SECTION Bureau of Air MONITORING & MOBILE Succes MS5510 DOEP BLACK STONE ROAD TALL AH ASSOCIATION OF THE PRODUCTION A-1 Cleaners 1422 South Powerline Road FT LAUDERDALE Pompano Beach, FL 33069 FL 333 20 FEB 2007 PWM T DEPARTMENT OF ENVIRONMENTAL PROTECTION 2600 BIAIL STONE ROAD ALLA HASSEE, FL 32399-2400 of TITLE V COENELL PERMITS OFFICE

SOUTH FLORIDA

15 NOV 2006

A-1 One Price Cleaners

1422 South Powerline Road Pompano Beach, FL 33069