

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

July 30 2001

Mr. Paul M. Breehne
Same Day Cleaners
883 Vanderbilt Beach Road
Naples, Florida 34108

Re: Facility No.: 0210061-002

Dear Mr. Breehne:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 20, 2001.


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. Sherrill Culliver, South District

"More Protection, Less Process"

Printed on recycled paper.

Fees Paid
GOC 2

0210061-002

A 1996 dry clean machine is classified as a New machine.

p15
1(a) New should be circled under Status

p16
4. New machine at large area source should be marked.

p17
Responsible official sign and date for changes made.

DEP ROUTING AND TRANSMITTAL SLIP

TO: (NAME, OFFICE, LOCATION)

3. _____

1. _____

4. _____

2. _____

5. _____

PLEASE PREPARE REPLY FOR:

COMMENTS:

____ SECRETARY'S SIGNATURE

____ DIV/DIST DIR SIGNATURE

____ MY SIGNATURE

____ YOUR SIGNATURE

____ DUE DATE _____

ACTION/DISPOSITION

____ DISCUSS WITH ME

____ COMMENTS/ADVISE

____ REVIEW AND RETURN

____ SET UP MEETING

____ FOR YOUR INFORMATION

____ HANDLE APPROPRIATELY

____ INITIAL AND FORWARD

____ SHARE WITH STAFF

____ FOR YOUR FILES

FROM: _____ DATE: _____ PHONE: _____

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): | BREEHNE CORP. |
| 2. Site Name (For example, plant name or number): | SAME DAY CLEANERS |
| 3. Hazardous Waste Generator Identification Number: | |
| 4. Facility Location: DUTCHESB CENTRE Street Address: 9853 N. TAMMIAMI TRAIL (99th ST. + 41) City: NAPLES County: COLLIER Zip Code: 34108 | |
| 5. Facility Identification Number (DEP Use ONLY - do not fill in): | 0210061-002 |

Responsible Official

| | |
|--|--|
| 6. Name and Title of Responsible Official: Name: PAUL M. BREEHNE Title: PRESIDENT | |
| 7. Responsible Official Mailing Address: Organization/Firm: BREEHNE CORP. Street Address: 883 VANDERBILT BEACH RD. City: NAPLES County: COLLIER Zip Code: 34108 | |
| 8. Responsible Official Telephone Number: Telephone: (941) 597 5851 Fax: (941) 597 8363 | |

NOTE:
ALL MAIL TO

Facility Contact (If different from Responsible Official)

| | |
|---|---------------------------------|
| 9. Name and Title of Facility Contact (For example, plant manager): | DON BUNNELL OR THERESA SANDOVAL |
| 10. Facility Contact Address: 9853 N. TAMMIAMI TRAIL Street Address: City: NAPLES County: COLLIER Zip Code: 34108 | |
| 11. Facility Contact Telephone Number: Telephone: (941) 592 5613 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") |
|--|---------------------|---------------------------------------|---|
| 1996 | Existing | RC/CA/None required | 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?

[253] 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?

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

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.

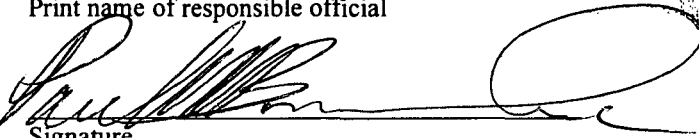
Responsible Official Certification

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.

PAUL M. BREEHNE

Print name of responsible official



Signature

Date

6/16/01

RECEIVED
20
1 JUN 02 2001
Bureau of Air Monitoring
& Mobile Sources

6/20/01
JLB
corrected

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

446122 FEB11 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# 210061 1stC
SAME DAY CLEANERS
99th St and Rt 41
NAPLES, FL 34108

IN CORRECT

FOR GOVERNMENT USE ONLY
ORG.: 3755010100 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.

Bureau of Air Monitoring
& Mobile Sources

RECEIVED
FEB 15 2005

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

| | | |
|--|----|------------------|
| Postage | \$ | Postmark Here |
| Certified Fee | | |
| Return Receipt Fee <small>(Endorsement Required)</small> | | |
| Restricted Delivery Fee <small>(Endorsement Required)</small> | | |
| Total Postage & Fees | \$ | |

Sent To: AIRS ID# 210061 1stC
 SAME DAY CLEANERS
 Street, Apt. No., or PO Box No.: 99th St and Rt 41
 City, State, ZIP+4: NAPLES, FL 34108

PS Form 3800, June

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# 210061 1stC
 SAME DAY CLEANERS
~~99th St and Rt 41~~ 9853 N James Ave # 111
 NAPLES, FL 34108

2. Article Number

(Transfer from service label)

2510 0002 3939 0294

PS Form 3811, August 2001

Domestic Return Receipt

2ACPRI-03-P-4081

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
 Addressee
Diane Lopez
- B. Received by (Printed Name)
- C. Date of Delivery
 2-07-05
- D. Is delivery address different from item 1? Yes
 No

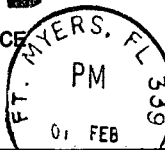
3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

UNITED STATES POSTAL SERVICE



STRAWBER
PLANT

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

MAR 2 MAR 13, 2005

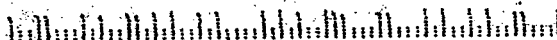
• Sender: Please print your name, address, and ZIP+4 in this box •

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

Bureau of Air Monitoring
& Mobile Sources

FEB 9 2005

RECEIVED





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.

404232 DEC 15 2003

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

210061
PAUL BREEHNE
SAME DAY CLEANERS
883 VANDERBILT BEACH RD
NAPLES FL 34108

FOR GOVERNMENT USE ONLY
Org.: 37550101000
Fund: 20-2-035000
Obj.: 002273

Bureau of Air
& Mobile
Mentoring

DEC 17 2003

RECEIVED



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.

421527 JAN 9 2003

TOTAL AMOUNT DUE: \$50.00

RECEIVED

JAN 15 2003

Bureau of Air Monitoring
& Mobile Sources

Do NOT Remove Label

| | |
|--|-----------------|
| SAME DAY CLEANERS PAUL M BREEHNE 883 VANDERBILT BEACH RD NAPLES FL 34108 | AIRS ID#0210061 |
|--|-----------------|

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

| | | |
|--|------------------|-----------------------------------|
| BREEHNE-DUCHESS CENTER CORP, D/B/A SAME DAY DRY CLEANERS | | 2003 |
| AIRS ID # 0210061 | Envirmental Fees | 50.00 |
| 1/6/03 | 2003 | Dept. of Environmental Protection |
| | | \$50.00 |



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

412012 DEC21 2001

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 # 0210061

SAME DAY CLEANERS
PAUL M BREEHNE
883 VANDERBILT BEACH RD
NAPLES FL
34108

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

PAVILION DRY CLEANING
883 Vanderbilt Beach Rd.
Naples, Florida 34108
Tel (941) 597-5976
Fax (941) 597-8363



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

32315+3070 99

