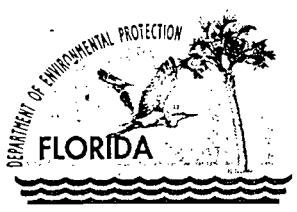


0250701



Department of Environmental Protection

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

September 23, 1996

Mr. Abdulrahim Dhanani
Al's One Hour Cleaner
2184 Northeast 123rd Street
North Miami, Florida 33181

Dear Mr. Dhanani:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 13, 1996.

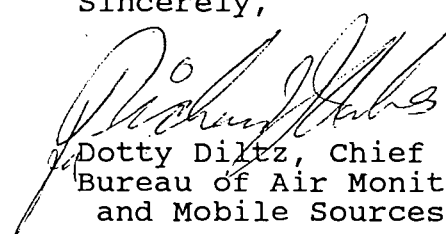
Please note that in November of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

cc: Mr. Ewart Anderson, Dade County

0250701

P. 14

1. (a) fill in blocks when machine is purchased
2. (a) add amount - refer to faxed statement.

P. 15 -

see attached faxed pages

Other storp.
Mr. Qhanani
(305)
757-
4381

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	SINCERE TRADING, INC.,		
2. Site Name (For example, plant name or number):	AL'S ONE HOUR CLEANER		
3. Hazardous Waste Generator Identification Number:	FLD 053 018 677		
4. Facility Location: Street Address:	2184 NE 123 rd Street		
City:	County:	Zip Code:	
North Miami	Dade	33181	
5. Facility Identification Number (DEP Use):	0250701		

Responsible Official

6. Name and Title of Responsible Official:	Abdulahim Dhanani - Owner-Operator		
7. Responsible Official Mailing Address:	Organization/Firm:		
Street Address:	same as 4.		
City:	County:	Zip Code:	
8. Responsible Official Telephone Number:	Telephone: (305) 893-5201 Fax: (305) 944-5678		

Facility Contact (If different from Responsible Official)

same

9. Name and Title of Facility Contact (For example, plant manager):	Operator AL'S ONE HOUR CLEANER - Mgr Abdulahim Dhanani		
10. Facility Contact Address:	Street Address:		
City:	County:	Zip Code:	
11. Facility Contact Telephone Number:	Telephone: () - same Fax: () same		

RECEIVED

AUG 13 1996

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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Example</i>	<i>#1</i>	<i>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									
(1) w/ ref. condenser									
(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									

- Dry to Dry 5th Generation machine being installed Oct. 96. Hopefully.*
- (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: *upgrading* Did not keep records:
- old*

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.



Abdurrahman Manan

Signature

8/11/96

Date

To: Ms Claire Deng, E P A

From: Sincere Trading Co., DBA
Al's One Hour Cleaners
2184 N E 123 Street
North Miami, FL 33181

Re: Clean Air Permit

This is in reference to our telephone conversation regarding the installation of our new plant. The new unit will be of small size with an estimated annual consumption of less than 140 gallons of pero. In other words, it is going to be a "New small area source."

Please be guided accordingly.

Abdulrahim Dhanani

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.

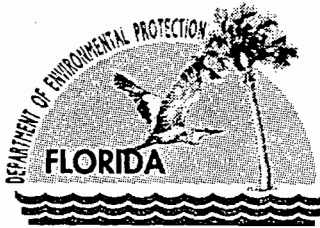
All steam and hot water generating units exempt

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 *will follow later*
- (b) Leak detection inspection and repair *5*
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Instrument calibration
- (f) Start-up, shutdown, malfunction plan *will follow later.*



Department of Environmental Protection

Jeb Bush
Governor

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

David B. Struhs
Secretary

July 2, 2001

Mr. Abdulrahim Dhanani
Al's One Hour Cleaners
2184 Northeast 123 Street
North Miami, Florida 33181

Dear Mr. Dhanani:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on July 2.

In reviewing your submittal, it was noted that Al's One Hour Cleaners elected to surrender its existing Title V air general permit (AIRS ID 0250701). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

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

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 850/921-9583.

Sincerely,

A handwritten signature in cursive script that reads "Sandra Bowman".

Sandra Bowman
Bureau of Air Monitoring
and Mobile Sources

SB/
Enclosure
cc: Ms. Mallika Muthiah, Dade County

"More Protection, Less Process"

Bowman, Sandy

From: Barros, Marcelo (DERM) [BarroM@co.miami-dade.fl.us]
Sent: Thursday, April 19, 2001 2:35 PM
To: Bowman, Sandy
Subject: CORRECTIONS TO ARMS & ASGP DATABASES

Sandy:

As a follow-up to our telephone conversation this morning, please be informed that the following dry cleaners data input found in the ASGP database need corrections.

Table with 4 columns: ID #, Company, Correct Insp. Date, Posted. Contains a list of dry cleaners with their respective IDs, company names, inspection dates, and posting dates.

In addition, please delete from the ASGP database the TBD 3329 C Way Cleaners from Lauderhill as a SEDA facility.

Also, the following dry cleaning facilities were found out of business or converted into a drop-off store and need to be inactivated from ARMS.

- 1) Continental Cleaners ID # 250707 (OOB)
2) Crown Laundry 250715 (OOB)
3) Al's One Hour Cleaners 250701 (OOB)
4) Dry Clean USA 250854 (Drop-Off)



Florida
Department of
Environmental Protection

Jeb Bush
Governor

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

David Struhs
Secretary

F A X T R A N S M I T T A L S H E E T

DATE: 4/29/99

TO: Abdulahim Dhanani or Fatima Dhanani
PHONE: (305) 893-5201 FAX: (305) 944-5678

FROM: Sandy Bowman PHONE: (850) 921-9583
MOBILE SOURCE CONTROL SECTION FAX: 850/922-1362

RE: _____
CC: _____

Total number of pages including cover sheet: _____

(305)
372-6944
CEO
5/4/99
no change
in ship

Message

Per the attached notification form
submittal we received the attached
note states your facility has had a
change in ownership. Our files
do not indicate this. Please
verify.

If there are any problems with this fax transmittal, please call the above phone number.

"Protect, Conserve, and Manage Florida's Environmental and Natural Resources"

Printed on recycled paper

MESSAGE CONFIRMATION

APR-29-'99 THU 07:15

TERM ID:

P-9999

TEL NO:

NO.	DATE	ST. TIME	TOTAL TIME	ID	DEPT CODE	OK	NG
552	04-29	07:13	00°01'30	305 944 5678		02	00

Perchloroethylene Dry Cleaning Facility Notification
Management Division
Air Quality

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
 ABDULRAHIM DHANANI SINCERE TRADING

2. Site Name (For example, plant name or number):
 AL'S ONE HOUR CLEANER

3. Hazardous Waste Generator Identification Number:

4. Facility Location:
 Street Address:
 City: 2184 NE 123 St County: Miami-Dade Zip Code: FL 33181

5. Facility Identification Number (DEP Use):
 0250701

RECEIVED
APR 22 1999

Responsible Official

6. Name and Title of Responsible Official:
 Abdulrahim Dhanani - Fatima Dhanani

7. Responsible Official Mailing Address:
 Organization/Firm:
 Street Address:
 City: Same County: Zip Code:

8. Responsible Official Telephone Number:
 Telephone: 305 893 5201 Fax: 305 944 5678

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):
 Abdul Dhanani; or Fatima Dhanani

10. Facility Contact Address:
 Street Address: 2184 NE 123 St Miami-Dade County: Zip Code: 33181
 City: Miami

11. Facility Contact Telephone Number:
 Telephone: 305 893 5201 Fax: 305 944-5678

CHANGE of OWNERSHIP.
OLD AEMS# 0250701 Sub-Called 5/4/99 No change

RECEIVED

APR 28 1999

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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Supra Haly</i>									
<i>Example</i>	<i>#1</i>	<i>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>YES</i>								
(1) w/ ref. condenser	<i>✓</i>	<i>✓</i>							
(2) w/ carbon adsorber		<i>YES</i>							
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser		<i>YES</i>							
(5) w/ carbon adsorber		<i>YES</i>							
(6) w/ no controls									
Dryer Unit									
(7) w/ ref. condenser		<i>YES</i>							
(8) w/ carbon adsorber		<i>YES</i>							
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser		<i>YES</i>							
(11) w/ carbon adsorber		<i>YES</i>							
(12) w/ no controls									

(b) Control devices are required, but not yet installed

(c) No control devices are required to be installed *built-in*

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: *renovated* 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.



Signature

4-22-98
Date

Memorandum

To: Marcelo Barros, Inspector II *(MB)*

CC:

From: Jaime Nazario *(JN)*

Date: February 3, 1997

Subject: Al's One Hour Cleaner, 2184 N.E. 123 St.

On January 30, 1997 I conducted a Title V General Permit inspection at the subject facility. The inspection revealed that this facility does not have dry cleaning equipment. The manager at the site, Mynira Punjwani, informed me that there has never been equipment at the site and that there are no immediate plans to install dry cleaning equipment.

Therefore, this permitted site is a drop-off facility and the Title V permit should be cancel.

2-3-97
Spoke to the R.O.
of the facility,
Abdulrahim Dhanani,
he will be installing
equipment early next
month. He would
like to remain
permitted.

Clair Perry

2-5-97
Spoke with Marcelo
Barros. *(MB)*

METROPOLITAN DADE COUNTY, FLORIDA



Department of Environmental Resources Management
33 S.W. 2nd Avenue
Miami, FL. 33130-1540

F
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SEND TO:

Name: Marnie Brynes

Company/Department: DEP

Phone Number: (904) 488-6140

Fax Number: 904 922-1362

Message:

FROM:

Name: Maecelo Baeos

Division/Section: Air Quality Mgt. Div.

Phone Number: (305) 372-6925

Fax Number: (305) 372-6954

Date: 2/3/97

Number of Pages (including this one):

2



TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: 2:20 TIME OUT: 2:45 AIRS ID#: 0250701
 TYPE OF FACILITY: PERC DRY CLEANER
 FACILITY NAME: AL'S ONE HOUR CLEANER DATE: 1/31/97
 FACILITY LOCATION: 2184 NE 123 ST
No. MIAMI, FL. 33181
 RESPONSIBLE OFFICIAL: Abdulrahim Dhanani PHONE NUMBER: 893 5201

- Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).
- Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
<p>Facility is a drop off site. No equipment available.</p>	

COMMENTS:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO

DATE OF NEXT INSPECTION: _____ (Approximate)

INSPECTION CONDUCTED BY: JAME NAZARU (Please Print)

INSPECTOR'S SIGNATURE:  PHONE NUMBER: 3726922

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
 RE-INSPECTION

AIRS ID#: 0250701 DATE: 1/31/97 TIME IN: 2:20 TIME OUT: 2:45
 FACILITY NAME: Al's One Hour Cleaner
 FACILITY LOCATION: 2184 NE 123 St
No Miami, FL 33181

PART I: NOTIFICATION

(check appropriate box)

1. Existing facility notified DARM by 9/1/96
 2. New facility notified DARM 30 days prior to startup
 3. Facility failed to notify DARM to use general permit

PART II: CLASSIFICATION

Facility indicated on notification form that it is:
 (check appropriate box)

A. DROP OFF Facility, NO EQUIPMENT.

1. Existing small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed before 12/9/91) <input type="checkbox"/>	2. New small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after 12/9/91) <input type="checkbox"/>
3. Existing large area source dry-to-dry only, $140 < x < 2,100$ gal/yr transfer only, $200 < x < 1,800$ gal/yr both types, $140 < x < 1,800$ gal/yr (constructed before 12/9/91) <input type="checkbox"/>	4. New large area source dry-to-dry only, $140 < x < 2,100$ gal/yr transfer only, $200 < x < 1,800$ gal/yr both types, $140 < x < 1,800$ gal/yr (constructed on or after 12/9/91) <input type="checkbox"/>

This is a correct facility classification Y N

If no, please check the appropriate classification:

facility qualified for a general permit as number _____ above
 facility exceeds above limits and is not eligible for a general permit
NA

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 0 gallons.

Revised 10/28/96
 2/10/97
 2/10/97
 (MB)

PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility:
(check appropriate boxes)

1. Storing perchloroethylene in tightly sealed and impervious containers? Y N
2. Examining the containers for leakage? Y N
3. Closing and securing machine doors except during loading/unloading? Y N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? Y N
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? Y N N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). *Carbon adsorber must have been installed prior to September 22, 1993*

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls? Y N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system? Y N N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? Y N N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? Y N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? Y N
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? Y N

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? Y N
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? Y N
Is the temperature differential equal to or greater than 20° F? Y N
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Y N N/A
Is the perc concentration equal to or less than 100 ppm? Y N
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Y N
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Y N N/A
6. Routed airflow to the carbon adsorber (if used) at all times? Y N N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? Y N
2. Maintained rolling monthly averages of perc consumption? Y N
3. Maintained leak detection inspection and repair reports for the following:
 - a. documentation of leaks repaired w/in 24 hrs? or, Y N
 - b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Y N
4. Maintained calibration data? (for direct reading instruments only) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N
Problem corrected? Y N
8. Maintained compliance plan, if applicable? Y N N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly leak detection and repair inspection? Y N

2. Which method of detection is used by the responsible official?

- Visual examination (condensed solvent on exterior surfaces)
- Physical detection (airflow felt through gaskets)
- Odor (noticeable perc odor)
- Use of direct-reading instrumentation (FID/PID/calorimetric tubes)

If using direct-reading instrumentation, is the equipment:

- a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? Y N
- b. Calibrated against a standard gas prior to and after each use (PID/FID only)? Y N
- c. Inspected for leaks and obvious signs of wear on a weekly basis? Y N
- d. Kept in a clean and secure area when not in use? Y N
- e. Verified for accuracy by use of duplicate samples (calorimetric only)? Y N

3. Has the facility maintained a leak log? Y N

4. Does the responsible official check the following areas for leaks?

- | | | | |
|---|---|---------------------------|---|
| Hose connections, fittings, couplings, and valves | <input type="checkbox"/> Y <input type="checkbox"/> N | Muck cookers | <input type="checkbox"/> Y <input type="checkbox"/> N |
| Door gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N | Stills | <input type="checkbox"/> Y <input type="checkbox"/> N |
| Filter gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N | Exhaust dampers | <input type="checkbox"/> Y <input type="checkbox"/> N |
| Pumps | <input type="checkbox"/> Y <input type="checkbox"/> N | Diverter valves | <input type="checkbox"/> Y <input type="checkbox"/> N |
| Solvent tanks and containers | <input type="checkbox"/> Y <input type="checkbox"/> N | Cartridge filter housings | <input type="checkbox"/> Y <input type="checkbox"/> N |
| Water separators | <input type="checkbox"/> Y <input type="checkbox"/> N | | |

AbdulRAHIM DHANANI

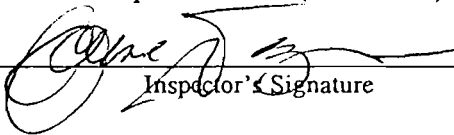
Name of Responsible Official

JAIME NAZARIO

Inspector's Name (Please Print)

1/30/97

Date of Inspection



Inspector's Signature

1/98

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

SEE ATTACH MEMO.



Florida
Department of
Environmental Protection

Jeb Bush
Governor

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

David Struhs
Secretary

F A X T R A N S M I T T A L S H E E T

DATE: 5/5/99
TO: Marcelo Barros
PHONE: _____ FAX: (305) 372-6954
FROM: Sandy Bowman PHONE: (850) 921-9583
MOBILE SOURCE CONTROL SECTION FAX: 850/922-1362

RE: _____

CC: _____

Total number of pages including cover sheet: 3

Message

If there are any problems with this fax transmittal, please call the above phone number.

"Protect, Conserve, and Manage Florida's Environmental and Natural Resources"

Printed on recycled paper

Memorandum

To: Marcelo Barros, Inspector II *(MB)*

CC:

From: Jaime Nazario *JN*

Date: February 3, 1997

Subject: Al's One Hour Cleaner, 2184 N.E. 123 St.

On January 30, 1997 I conducted a Title V General Permit inspection at the subject facility. The inspection revealed that this facility does not have dry cleaning equipment. The manager at the site, Mynira Punjwani, informed me that there has never been equipment at the site and that there are no immediate plans to install dry cleaning equipment.

Therefore, this permitted site is a drop-off facility and the Title V permit should be cancel.

2-3-97
Spoke to the R.O.
of the facility,
Abdulrahim Dhanani,
he will be installing
equipment early next
month. He would
like to remain
permitted.

Clare Perry

2-5-97
Spoke with Marcelo
Barros. *MB*

Memorandum

To: Marcelo Barros, Inspector II *(MB)*

CC:

From: Jaime Nazario *JN*

Date: February 3, 1997

Subject: Al's One Hour Cleaner, 2184 N.E. 123 St.

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 Abdulrahim Dhanani,
 he will be installing
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 like to remain
 permitted.

Clare Perry


2-5-97
 Spoke with Marcelo
 Barros. *MB*

RECEIVED

FEB 20 1997

Bureau of Air Monitoring
& Mobile Sources

Memorandum

To: Marcelo Barros, Inspector II 

CC:

From:

Jaime Nazario 

Date:

February 3, 1997

Subject:

Al's One Hour Cleaner, 2184 N.E. 123 St.

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Department of
Environmental Protection

MB

Lawton Chiles
Governor

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

September 23, 1996

Virginia B. Wetherell

RECEIVED
SEP 26 1996

Air Quality
Management Division

Mr. Abdulrahim Dhanani
Al's One Hour Cleaner
2184 Northeast 123rd Street
North Miami, Florida 33181

Dear Mr. Dhanani:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 13, 1996.

Please note that in November 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

cc: Mr. Ewart Anderson, Dade County

To: Ms Claire Deng, EPA

From: Sincere Trading Co., DBA
Al's One Hour Cleaners
2184 NE 123 Street
North Miami, FL 33181

Re: Clean Air Permit

This is in reference to our telephone conversation regarding the installation of our new plant. The new unit will be of small size with an estimated annual consumption of less than 140 gallons of pero. In other words, it is going to be a "New small area source."

Please be guided accordingly.

Abdulrahim Dhanani

0000101

P. 14

1. (a) fill in blocks when machine is purchased

2. (a) add amount - refer to faxed statement.

P. 15 -

see attached faxed pages

RECEIVED

SEP 25 1996

Air Quality Management Division

1. Facility Owner	SINCER
2. Site Name (For	AL's C
3. Hazardous Was	FLD
4. Facility Location Street Address: City:	North
5. Facility Identifi	

6. Name and Title	Abdulra
7. Responsible Off Organization/Fir Street Address: City:	same as #

8. Responsible Official Telephone Number:	Telephone: (305) 893-5201	Fax: (305) 944-5678
---	---------------------------	---------------------

Facility Contact (If different from Responsible Official)

same

9. Name and Title of Facility Contact (For example, plant manager)	Operator AL's One Hour CLEANER - Mng ^r Abdulrahim Dhanani
10. Facility Contact Address:	Street Address: Other store, Mr. Dhanani City: (305) 757-4381
11. Facility Conta Telephone:	Zip Code: Fax: () same

RECEIVED

AUG 15 1996

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	SINCERE TRADING, INC.		
2. Site Name (For example, plant name or number):	AL'S ONE HOUR CLEANER		
3. Hazardous Waste Generator Identification Number:	FLD 053 018 677		
4. Facility Location:	2184 NE 123 rd Street		
Street Address:			
City:	North Miami	County:	Dade
		Zip Code:	33181
5. Facility Identification Number (DEP Use):	0250701		

Responsible Official

6. Name and Title of Responsible Official:	Abdulahim Dhanani - Owner-Operator		
7. Responsible Official Mailing Address:			
Organization/Firm:			
Street Address:	same as 4.		
City:		County:	
Zip Code:			
8. Responsible Official Telephone Number:			
Telephone:	(305) 893-5201	Fax:	(305) 944-5678

Facility Contact (If different from Responsible Official)

same

9. Name and Title of Facility Contact (For example, plant manager):	AL'S ONE HOUR CLEANER - Mgr. ^{Operator} Abdulahim Dhanani		
10. Facility Contact Address:			
Street Address:	same		
City:		County:	
Zip Code:			
11. Facility Contact Telephone Number:			
Telephone:	()	Fax:	()
	same		same

RECEIVED

AUG 15 1996

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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Example</i>	<i>#1</i>	<i>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									
(1) w/ ref. condenser									
(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									

Dry to Dry 5th generation machine being installed Oct 96. Hopefully.

- (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:
upgrading
old

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

(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:

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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 *will follow later*
- (b) Leak detection inspection and repair *5*
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Instrument calibration
- (f) Start-up, shutdown, malfunction plan *will follow later.*

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.



Abdurrahman Manali

Signature

8/11/96

Date

**DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM**

all
Bureau of Air Monitoring
& Mobile Sources
FEB 2 1998

RECEIVED

AIRS ID#0250701
SINCERE TRADING INC ABDULRAHIM DHANANI 2184 NE 123RD STREET NORTH MIAMI FL 33181

Do **NOT** Remove Label

Annual Reporting Period: January 01, 98 19__ TO December 31 1998

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____

Action(s) taken to achieve compliance: _____

Method used to demonstrate compliance: _____

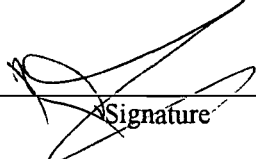
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____

Action(s) taken to achieve compliance: _____

Method used to demonstrate compliance: _____

As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Abdulrahim Dhanani  11/27/98

Name (Please Print) Signature Date

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

✓
acc

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

Cell

Bureau of Air Monitoring
& Mobile Sources

FEB 2 1998

RECEIVED

AIRS ID#0250701
SINCERE TRADING INC
ABDULRAHIM DHANANI
2184 NE 123RD STREET
NORTH MIAMI FL 33181

Do NOT Remove Label

Annual Reporting Period: January 27 1997 TO January 27 1998

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____
Action(s) taken to achieve compliance: _____
Method used to demonstrate compliance: _____

RECEIVED
MAY 21 1998
Bureau of Air Monitoring
& Mobile Sources

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____
Action(s) taken to achieve compliance: _____
Method used to demonstrate compliance: _____

As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Abdulrahim Dhanani [Signature] 11/27/98
Name (Please Print) Signature Date

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

RECEIVED

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
RE-INSPECTION

MAY 19 1999

BAIRS Air Monitoring Bureau & Mobile Sources 701

DATE: 5/5/99 TIME IN: 11:25 AM TIME OUT: 12:00 noon

FACILITY NAME: Als One How Cleanes

FACILITY LOCATION: 2184 NE 123rd St Miami-Dade FL 33181

RESPONSIBLE OFFICIAL: Fat. M. Duman; PHONE: (305) 893-5201

CONTACT NAME: PHONE:

PART I: NOTIFICATION

(check appropriate box)

- 1. New facility notified DARM 30 days prior to startup
- 2. Facility failed to notify DARM to use general permit

PART II: CLASSIFICATION

Facility indicated on notification form that it is:

(check appropriate box)

- No notification form
- Drop store/out of business/petroleum

A.

- | | |
|--|--|
| <p>1. Existing small area source <input type="checkbox"/>
dry-to-dry only, $x < 140$ gal/yr
transfer only, $x < 200$ gal/yr
both types, $x < 140$ gal/yr
(constructed before 12/9/91)</p> | <p>2. New small area source <input checked="" type="checkbox"/>
dry-to-dry only, $x < 140$ gal/yr
transfer only, $x < 200$ gal/yr
both types, $x < 140$ gal/yr
(constructed on or after 12/9/91)</p> |
| <p>3. Existing large area source <input type="checkbox"/>
dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr
transfer only, $200 \leq x \leq 1,800$ gal/yr
both types, $140 \leq x \leq 1,800$ gal/yr
(constructed before 12/9/91)</p> | <p>4. New large area source <input type="checkbox"/>
dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr
transfer only, $200 \leq x \leq 1,800$ gal/yr
both types, $140 \leq x \leq 1,800$ gal/yr
(constructed on or after 12/9/91)</p> |
5. This is a correct facility classification Y N Can not determine

If no, please check the appropriate classification:

- facility qualified for a general permit as number _____ above
- facility exceeds above limits and is not eligible for a general permit

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 20 gallons.

ARMS
AS
MAY 6 1999

AMB
5/7/99

PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility:
(check appropriate boxes)

1. Storing perchloroethylene in tightly sealed and impervious containers?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
2. Examining the containers for leakage?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
3. Closing and securing machine doors except during loading/unloading?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). *Carbon adsorber must have been installed prior to September 22, 1993*

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? Y N
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? Y N N/A
Is the temperature differential equal to or greater than 20° F? Y N N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Y N N/A
Is the perc concentration equal to or less than 100 ppm? Y N N/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Y N N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Y N N/A
6. Routed airflow to the carbon adsorber (if used) at all times? Y N N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? Y N
2. Maintained rolling monthly total of perc consumption? Y N N/A
3. Maintained leak detection inspection and repair reports for the following:
- a. documentation of leaks repaired w/in 24 hrs? or; Y N N/A
 - b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N N/A
Problem corrected? Y N N/A
8. Maintained compliance plan, if applicable? Y N N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? Y N N/A
2. Has the facility maintained a leak log? Y N N/A
3. Does the responsible official check the following areas for leaks?
- | | | | |
|---|---|---------------------------|---|
| Hose connections, fittings, couplings, and valves | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating | <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A | Stills | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | | |
4. Which method of detection is used by the responsible official?
- Visual examination (condensed solvent on exterior surfaces)
- Physical detection (airflow felt through gaskets)
- Odor (noticeable perc odor)
- Use of direct-reading instrumentation (FID/PID/calorimetric tubes)
- Halogen leak detector
- If using direct-reading instrumentation, is the equipment: N/A
- a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? Y N
- b. Calibrated against a standard gas prior to and after each use (PID/FID only)? Y N
- c. Inspected for leaks and obvious signs of wear on a weekly basis? Y N
- d. Kept in a clean and secure area when not in use? Y N
- e. Verified for accuracy by use of duplicate samples (calorimetric only)? Y N

LEO SMART
Inspector's Name (Please Print)

Leo Smart
Inspector's Signature

5/5/99
Date of Inspection

5/2000
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

A large, empty rectangular box with a double-line border, intended for providing additional site information. The box is currently blank.

**TITLE V AIR QUALITY GENERAL PERMIT
INSPECTION SUMMARY REPORT**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: 11²⁵ TIME OUT: 12⁰⁰ noon AIRS ID#: 0250701
 TYPE OF FACILITY: Perc Dry Cleaner
 FACILITY NAME: Als One Hour Dry Cleaner DATE: 5/5/99
 FACILITY LOCATION: 2184 NE 123rd St.
 RESPONSIBLE OFFICIAL: Fatima Dhanani PHONE NUMBER: (305) 893-5201

- Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).
- Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED

COMMENTS: There is a Machine on premises it is not function. R.o. plans to have machine fully operational by August 1999 so far Satisfactory

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO

DATE OF NEXT INSPECTION: 5/2000
(Approximate)

INSPECTION CONDUCTED BY: LEO SMART
(Please Print)

INSPECTOR'S SIGNATURE: [Signature] PHONE NUMBER: (305) 372-6922

Acc

**DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM**

FACILITY NAME: Als One hour DATE: 5/5/99
 FACILITY LOCATION: 2184 NE 123 St Miami-Dade
FL 33181

Annual Reporting Period: May 1998 TO May 1999

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____
 Action(s) taken to achieve compliance: _____
 Method used to demonstrate compliance: _____

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____
 Action(s) taken to achieve compliance: _____
 Method used to demonstrate compliance: _____

As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: FATIMA ABDOUL DHANANI [Signature] May 5/99
 Name (Please Print) Signature Date

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

RECEIVED
MAR 13 2000
Bureau of Air Monitoring
& Mobile Sources

TYPE OF INSPECTION: ANNUAL RE-INSPECTION

COMPLAINT/DISCOVERY

AIRS ID#: 0250701 DATE: 2/15/00 TIME IN: 1045 TIME OUT: 1105
 FACILITY NAME: Al's One Hour Cleaners
 FACILITY LOCATION: 2184 NE 123 St
Miami, FL
 RESPONSIBLE OFFICIAL: Abdulrahim Jhanani PHONE: (305) 893-5201
 CONTACT NAME: _____ PHONE: _____

PART I: NOTIFICATION

(check appropriate box)

1. New facility notified DARM 30 days prior to startup
 2. Facility failed to notify DARM to use general permit

PART II: CLASSIFICATION

Facility indicated on notification form that it is:
 (check appropriate box) No notification form
 Drop store/out of business/petroleum

A.

1. Existing small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed before 12/9/91) <input type="checkbox"/>	2. New small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after 12/9/91) <input type="checkbox"/>
3. Existing large area source dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed before 12/9/91) <input type="checkbox"/>	4. New large area source dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed on or after 12/9/91) <input type="checkbox"/>

5. This is a correct facility classification Y N Can not determine

If no, please check the appropriate classification:
 facility qualified for a general permit as number _____ above
 facility exceeds above limits and is not eligible for a general permit

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was _____ gallons.

ARMS
2/16/00

DFG
2/17/00

PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility:
(check appropriate boxes)

1. Storing perchloroethylene in tightly sealed and impervious containers? Y N N/A
2. Examining the containers for leakage? Y N N/A
3. Closing and securing machine doors except during loading/unloading? Y N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? Y N N/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? Y N N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). *Carbon adsorber must have been installed prior to September 22, 1993*

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls? Y N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system? Y N N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? Y N N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? Y N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? Y N N/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? Y N

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? Y N
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? Y N N/A
Is the temperature differential equal to or greater than 20° F? Y N N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Y N N/A
Is the perc concentration equal to or less than 100 ppm? Y N N/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Y N N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Y N N/A
6. Routed airflow to the carbon adsorber (if used) at all times? Y N N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? Y N
2. Maintained rolling monthly total of perc consumption? Y N
3. Maintained leak detection inspection and repair reports for the following:
a. documentation of leaks repaired w/in 24 hrs? or; Y N N/A
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N N/A
Problem corrected? Y N N/A
8. Maintained compliance plan, if applicable? Y N N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? Y N
2. Has the facility maintained a leak log? Y N
3. Does the responsible official check the following areas for leaks?
- | | | | |
|---|--|---------------------------|--|
| Hose connections, fittings, couplings, and valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | | |
4. Which method of detection is used by the responsible official?
- Visual examination (condensed solvent on exterior surfaces)
- Physical detection (airflow felt through gaskets)
- Odor (noticeable perc odor)
- Use of direct-reading instrumentation (FID/PID/calorimetric tubes)
- Halogen leak detector
- If using direct-reading instrumentation, is the equipment: N/A
- a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? Y N
- b. Calibrated against a standard gas prior to and after each use (PID/FID only)? Y N
- c. Inspected for leaks and obvious signs of wear on a weekly basis? Y N
- d. Kept in a clean and secure area when not in use? Y N
- e. Verified for accuracy by use of duplicate samples (calorimetric only)? Y N

Ivan W Fannin

Inspector's Name (Please Print)

2/15/00

Date of Inspection

Ivan W. Fannin

Inspector's Signature

2/00

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Machine not yet operational.
Facility in compliance.

**TITLE V AIR QUALITY GENERAL PERMIT
INSPECTION SUMMARY REPORT**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: 1045 TIME OUT: 1105 AIRS ID#: 0250700

TYPE OF FACILITY: Perc Dry Cleaner

FACILITY NAME: Al's One Hour Cleaners DATE: 2/15/00

FACILITY LOCATION: 2184 NE 123 st.

Miami, FL

RESPONSIBLE OFFICIAL: ~~Fatima~~ Dhanani; Abdulrahim PHONE NUMBER: 305 - 893 - 5201

- Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).
- Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
/	

COMMENTS: Currently operating as drop-off

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO

DATE OF NEXT INSPECTION: 2/01
(Approximate)

INSPECTION CONDUCTED BY: Levan Fannin
(Please Print)

INSPECTOR'S SIGNATURE: *Levan Fannin* PHONE NUMBER: 305 - 392 - 6905

RECEIVED

file

AIRS ID#: 0250700

MAR 03 2000

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Al's One Hour Cleaner RECEIVED DATE: 3/15/00

FACILITY LOCATION: 2184 NE 123 st. Miami, FL MANAGEMENT Air Quality Division

Annual Reporting Period: Feb 1999 TO Feb 192000

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____

Action(s) taken to achieve compliance: _____

Method used to demonstrate compliance: _____

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Exact period of non-compliance: from _____ to _____

Action(s) taken to achieve compliance: _____

Method used to demonstrate compliance: _____

As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Abdulrahim Dhanani [Signature] 2/25/2000
Name (Please Print) Signature Date

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0390366 ✓

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 # 0250701

AL'S ONE HOUR CLEANER
ABDULRAHIM DHANANI
2184 NE 123RD STREET
NORTH MIAMI FL 33181

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1
Fund: 20-2-035001
Obj.: 002273

RECEIVED
MAIL ROOM
JAN - 4 00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0355888

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 # 0250701

AL'S ONE HOUR CLEANER
ABDULRAHIM DHANANI
2184 NE 123RD STREET
NORTH MIAMI FL 33181

RECEIVED
MAIL ROOM
DEC 31 98

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

MESSAGE CONFIRMATION

MAY-05-'99 WED 14:16

TERM ID:

P-9999

TEL NO:

NO.	DATE	ST. TIME	TOTAL TIME	ID	DEPT CODE	OK	NG
557	05-05	14:14	00°02'02	305 372 6954		03	00



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

401299

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

12-29-00
RECEIVED
MAIL ROOM
DEC 29 00

Do NOT Remove Label

AIRS ID # 0250701

AL'S ONE HOUR CLEANER
ABDULRAHIM DHANANI
2184 NE 123RD STREET
NORTH MIAMI FL 33181

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



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

301195

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
JAN 28 98

Do **NOT** Remove Label

SINCERE TRADING INC
ABDULRAHIM DHANANI
2184 NE 123RD STREET
NORTH MIAMI FL 33181

AIRS ID#0250701

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

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 259068

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

RECEIVED
MAIL ROOM

JAN 27 97

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

SINCERE TRADING INC
ABDULRAHIM DHANANI
2184 NE 123RD STREET
NORTH MIAMI FL 33181

AIRS ID# 0250701

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

Please note:

SINCERE TRADING, INC.
DBA AL'S ONE HOUR CLEANER
2184 N.E. 123rd Street
North Miami - FL 33181

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS

COMPLETE THIS SECTION ON DELIVERY

- 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.

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

PATIMA

6/8/00

C. Signature

X RECEIVED

- Agent
- Addressee

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

JUN 11 2000

Bureau of Air Monitoring
& Mobile Sources

1. Article Addressed to:

10 AIRS ID # 0250701001AG
ABDULRAHIM DHANANI
AL'S ONE HOUR CLEANER
2184 NE 123RD STREET
NORTH MIAMI FL 33181

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 (Copy from service label)

70000600002641303338

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

7000 0600 0026 4130 3338

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

Postmark
Here

10 AIRS ID # 0250701001AG
R: ABDULRAHIM DHANANI
AL'S ONE HOUR CLEANER
St: 2184 NE 123RD STREET
C: NORTH MIAMI FL 33181

PS Form 3800, February 2000

See Reverse for Instructions