

Jeb Bush  
Governor

# Department of Environmental Protection

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

Colleen M. Castille  
Secretary

February 23, 2005

Mr. Ira Whitehead, Jr.  
Continental Cleaners  
798 Northwest 62<sup>nd</sup> Street  
Miami, Florida 33150-4381

Re: Facility No.: 0250707-002

Dear Mr. Whitehead:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on January 13, 2005.

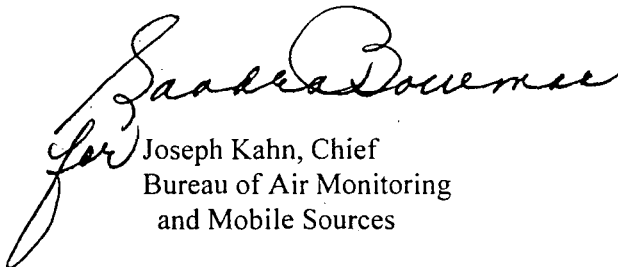
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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



Joseph Kahn, Chief  
Bureau of Air Monitoring  
and Mobile Sources

JK/jw

cc: Ms. Mallika Muthiah, Miami-Dade County

"More Protection, Less Process"

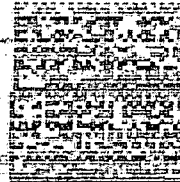
Printed on recycled paper.

EMISSION FEE DATES *196-2000*.....  
NO ACTIVITY FOR FACILITY.....  
SOC REPORTS *5*.....

COMP. STATUS - SNC MNC **(IN)**

~~MOA # 5510 MOA Act # 5527~~

Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400



016H16501645

\$00.390

03/08/2007

Mailed From 32399  
US POSTAGE

*Vacant Facility closed*

AIRS ID#250707  
CONTINENTAL CLEANERS INC  
798 NW 62nd St  
MIAMI, FLORIDA 33150

RECEIVED  
MAR 19 2007

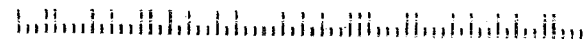
Put on of Air Mail  
& Mobile Source

NIXIE 331 1 07 03/16/07

RETURN TO SENDER  
VACANT  
UNABLE TO FORWARD

EO: 32399240029 \*0909-01506-09-97

20150+4981-30 0000 2400



THE FRONT OF THE DOCUMENT HAS A MICRO-PRINT, AMOUNT BOX AND THERMOCHROMIC. ABSENCE OF THESE FEATURES WILL INDICATE A COPY.

75-1618  
919

TravelersExpress.  
MoneyGram.



INTERNATIONAL  
MONEY ORDER

01/13/05

45566811961

4556681196  
MONEY ORDER

IMPORTANT - SEE BACK BEFORE CASHING

PAY TO THE  
ORDER OF:

D. E. P

\*\*\* 50.00 \*\*\*

FIFTY DOLLARS \*\*  
00 CENTS \*\*\*\*\*

PAY ONLY

THIS AMOUNT

46532446500001  
1627901013133196

*Jan Whitehead*

PURCHASER, SIGNER FOR DRAWER:

PURCHASER, BY SIGNING YOU AGREE TO THE SERVICE CHARGE AND OTHER TERMS ON THE REVERSE SIDE

2600

ADDRESS:

~~776~~ BLAIR STONE Road

ISSUER/DRAWER:

TRAVELERS EXPRESS COMPANY, INC.

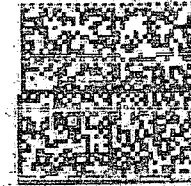
Payable Through  
Citizens State Bank  
of Clara City  
Clara City, MN

FD # 0250707  
Duplicate  
payment  
Refused 3/18

RECEIVED  
FEB 28 2005  
Bureau of Air Monitoring  
& Mobile Sources

MCA # 5510 - MCA Act # 5527

Department of Environmental Protection  
2600 Blair Stone Rd  
Tallahassee FL 32399-2400



Master

016H16501646

\$00.390

03/08/2007

Mailed From 32399

US POSTAGE

*Vacant by closed*

RECEIVED  
MAR 19 2007

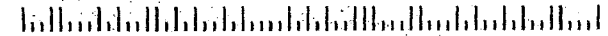
AIRS ID#250707  
CONTINENTAL CLEANERS INC  
798 NW 62nd St  
MIAMI, FLORIDA 33150

NIXIE 331 1 07 03/16/07

RETURN TO SENDER  
VACANT  
UNABLE TO FORWARD

BC: 323999240099 0830-01506-08-37

3239992400



RECEIVED

JAN 18 2005

Bureau of Air Monitoring  
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANING  
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED

JAN 13 2005

Part III. Notification of Intent to Use General Permit **Air Quality Management Division**

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): <b>Continental Cleaners</b>
2. Site Name (For example, plant name or number): <b>SAME ABOVE</b>
3. Hazardous Waste Generator Identification Number: <b>FLD 982130098</b>
4. Facility Location: <b>798 N.W. 62 ST. / Miami</b> Street Address: City: <b>Miami</b> County: <b>Dade</b> Zip Code: <b>33150-4381</b>
5. Facility Identification Number (DEP Use ONLY - do not fill in): <b>0250707-002</b>

Responsible Official

6. Name and Title of Responsible Official: Name: <b>Ira Whitehead Jr.</b> Title: <b>Owner</b>
7. Responsible Official Mailing Address: <b>SAME</b> Organization/Firm: Street Address: City: County: Zip Code:
8. Responsible Official Telephone Number: Telephone: <b>(305) 758-2451</b> Cell Fax: <b>(305) 915 4772</b>

Facility Contact (If different from Responsible Official)

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



**Facility Information**

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

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

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

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
8/9/99	Existing	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

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

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

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

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

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

gallons (You must fill this in)

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

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

New store:  New machine

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



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

Small Area Source

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

Large Area Source

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

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

Existing machines at small area source  
(NONE REQUIRED)

New machines at small area source  
Refrigerated condenser

Existing machines at large area source  
Carbon adsorber   
Refrigerated condenser

New machines at large area source  
Refrigerated condenser

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt  OR  
No such units on-site

How many boilers do you have on-site?  1

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

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.*

T. RA WHITEHEAD JR  
Print name of responsible official

Jan Whitehead Jr  
Signature

1/13/05  
Date

## 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.

**Bowman, Sandy**

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**From:** Gordon, Ray (DERM) [GordoR@miamidade.gov]  
**Sent:** Thursday, March 08, 2007 11:07 AM  
**To:** Bowman, Sandy  
**Subject:** RE: Title V General Permits

Re: AIRS ID # 0250707  
AIRS ID # 0251078  
AIRS ID # 0250922

All three facilities were inspected yesterday and are closed

**Ray A. Gordon**  
Air Compliance Project Manager  
Office:305-372-6925  
gordor@miamidade.gov

"Delivering Excellence Every Day"

-----Original Message-----

**From:** Bowman, Sandy [mailto:Sandy.Bowman@dep.state.fl.us]  
**Sent:** March 07, 2007 12:31 PM  
**To:** Gordon, Ray (DERM)  
**Subject:** RE: Title V General Permits

Ray,

Thank you very much for getting back with me on this. I appreciate it.

*Sandy Bowman*

---

**From:** Gordon, Ray (DERM) [mailto:GordoR@miamidade.gov]  
**Sent:** Wednesday, March 07, 2007 9:48 AM  
**To:** Bowman, Sandy  
**Subject:** RE: Title V General Permits

Sandy

We were in the middle of moving our office and was not able to check out these facilities. We will check them today and let you know

**Ray A. Gordon**  
Air Compliance Project Manager  
Office:305-372-6925  
gordor@miamidade.gov

3/12/2007

"Delivering Excellence Every Day"

-----Original Message-----

**From:** Bowman, Sandy [mailto:Sandy.Bowman@dep.state.fl.us]

**Sent:** February 22, 2007 2:53 PM

**To:** Gordon, Ray (DERM)

**Cc:** Grant, Patricia

**Subject:** RE: Title V General Permits

Ray,

We have been unable to contact the following facilities by phone:

AIRS ID # 0250707

AIRS ID # 0251078

AIRS ID # 0250922

Do you know if these facilities are still operating or if they are inactive? Thanks.

*Sandy Bowman*

*Environmental Administrator*

*Division of Air Resource Management*

*850/921-9583 or sandy.bowman@dep.state.fl.us*



# Department of Environmental Protection

Jeb Bush  
Governor

Division of Air Resource Management  
2600 Blair Stone Road, MS 5510  
Tallahassee, Florida 32399-2400

Colleen M. Castille  
Secretary

**TO: Holder of Title V Air General Permit**

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213,300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

Title V Air General Permits  
Receipts  
Post Office Box 3070  
Tallahassee, FL 32315-3070

(CUT HERE)

-----  
**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

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

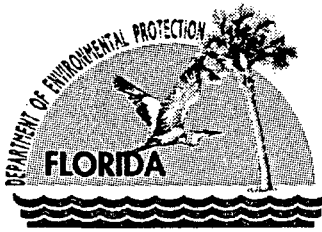
**TOTAL AMOUNT DUE: \$50.00**

Do **NOT** Remove Label

AIRS ID# 250707  
CONTENTINAL CLEANERS INC  
798 NW 62nd St  
MIAMI, FLORIDA 33150

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

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



Jeb Bush  
Governor

# Department of Environmental Protection

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

Colleen M. Castille  
Secretary

December 6, 2006

## NOTICE OF ANNUAL OPERATION FEE

To: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that you operate a source of air pollution and 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, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee as established by the Department in Rule 62-213.205, F.A.C.

Your annual operation fee is \$50 for calendar year **2006**. For your facility to maintain its eligibility for the Title V Air General permit, Rule 62-213.300(3)(b), F.A.C., states "...the owner or operator of the facility must upon written notice from the Department submit payment of an annual operation fee in the amount of \$50.00. This invoice constitutes the Department's written notice as required under the general permit rule.

Any annual operation fee not postmarked by **March 1, 2007**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, please be aware that under Rule 62-213.205(1)(g), F.A.C., failure to timely pay any required annual operation fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Dickson Dibble at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

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

Sandra Veazey, Chief  
Bureau of Air Monitoring  
and Mobile Sources

SV/sb

Enclosure: Invoice Form

"More Protection, Less Process"

Printed on recycled paper.