

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

November 25, 1996

Mr. Richard Roberts Vice President Pamsian Deluxe Cleaners, Inc. 8731 Southwest 136 Street Miami, Florida 33176

Re: Facility I.D. No. 0250743

Dear Mr. Roberts:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 5, 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/jw

cc: Mr. Ewart Anderson, Dade County

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

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
RICHARD ROBERTS / PAMISIAN DELUXE CIGARGY INC
2. Site Name (For example, plant name or number):
PAMSIAN DELIERE CLEANERS
3. Hazardous Waste Generator Identification Number:
Mo 200346320
4. Facility Location: 8731 DW 136 St. Street Address: 8731 DW 136 St.
City: MiAm! County: DADE Zip Code: 33176
5. Facility Identification Number (DEP Use):
0.8507H3
Responsible Official
Acsponsible Official
6. Name and Title of Responsible Official:
RILHARD ROBERTS V.P.
7. Responsible Official Mailing Address: Organization/Firm: PAHSIAM DELUKE CLEANER INC. Street Address: 8731 SW 136 F.
Street Address: 8731 Sw 136 F.
City: MIAME County: DADE Zip Code: 33176
8. Responsible Official Telephone Number:
Telephone: $(305) 73 - 0303$ Fax: () -
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: () -
receptione. ()

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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.

Machine Control Initially Device Initially Initially Installed ID Purchased ID Purchased Initially Device Initially Device Initially Initially Device Initially Init			Date	Date		Date	Date		Date	Date
Type of Machine #1 03-OCT-93 12-NOV-93 #2 08-DEC-91 #3 02-MAR-92 02-MAR Dry-to-Dry Unit 1) w/ ref. condenser 03-Nov/93 03-Nov/93	1		Machine	Control		Machine	Control		Machine	Control
Example #1 03-OCT-93 12-NOV-93 #2 08-DEC-91 #3 02-MAR-92 02-MAR Dry-to-Dry Unit	•		Initially	Device		Initially	Device		Initially	Device
Dry-to-Dry Unit	Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
(1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls (4) w/ ref. condenser (6) w/ no controls (7) w/ ref. condenser (6) w/ no controls (8) w/ carbon adsorber (9) w/ no controls (8) w/ carbon adsorber (9) w/ no controls (11) w/ ref. condenser (12) w/ no controls (12) w/ no controls (13) w/ ref. condenser (11) w/ ref. condenser (11) w/ ref. condenser (12) w/ no controls (12) w/ no controls (13) w/ ref. condenser (11) w/ ref. condenser (12) w/ no controls (13) w/ ref. condenser (11) w/ ref. condenser (12) w/ no controls (13) w/ ref. condenser (13) w/ ref. cond	Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
(1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls (4) w/ ref. condenser (6) w/ no controls (7) w/ ref. condenser (6) w/ no controls (8) w/ carbon adsorber (9) w/ no controls (8) w/ carbon adsorber (9) w/ no controls (11) w/ ref. condenser (12) w/ no controls (12) w/ no controls (13) w/ ref. condenser (11) w/ ref. condenser (11) w/ ref. condenser (12) w/ no controls (12) w/ no controls (13) w/ ref. condenser (11) w/ ref. condenser (12) w/ no controls (13) w/ ref. condenser (11) w/ ref. condenser (12) w/ no controls (13) w/ ref. condenser (13) w/ ref. cond	Dry-to-Dry Unit			Bult	int	junit.	(B) 1:	2 5	96	
(2) w/ carbon adsorber (3) w/ no controls (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls (7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ no controls (14) w/ carbon adsorber (15) w/ no controls (16) w/ ref. condenser (17) w/ ref. condenser (18) w/ carbon adsorber (19) w/ no controls (19) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (15) w/ no controls (16) w/ ref. condenser (17) w/ ref. condenser (18) w/ ref. condenser (19) w/ ref. condenser (10) w/ ref. condenser (10	(1) w/ ref. condenser	_	03-NOV92	03 NOV9	В	<u> </u>	 			
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 (b) Control devices are required, but not yet installed	(2) w/ carbon adsorber		<u> </u>	<u> </u>	_					
(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 (b) Control devices are required, but not yet installed	(3) w/ no controls									
(5) w/ carbon adsorber (6) w/ no controls	Washer Unit									.1.
Color Control Contro	(4) w/ ref. condenser						<u> </u>			1
Dryer Unit (7) w/ ref. condenser	(5) w/ carbon adsorber									
(7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (12) w/ no controls (13) w/ ref. condenser (12) w/ no controls (13) w/ no controls (14) w/carbon adsorber (15) w/ no controls (15) w/ no controls (16) w/carbon adsorber (17) w/ no controls (18) w/carbon adsorber (19) w/carbon adsorber (10) w/carbon adsorber (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/carbon adsorber (12) w/ no controls (13) w/carbon adsorber (14) w/carbon adsorber (15) w/carbon adsorber (16) w/carbon adsorber (17) w/carbon adsorber (18) w/carbon adsorber (19) w/carbon adsorber (11) w/carbon adsorber (11) w/carbon adsorber (12) w/ no controls (12) w/carbon adsorber (13) w/carbon adsorber (14) w/carbon adsorber (15) w/carbon adsorber (16) w/carbon adsorber (17) w/carbon adsorber (18) w/carbon adsorber (19) w/carbon adsorber (19) w/carbon adsorber (19) w/carbon adsorber (11) w/carbon adsorber (12) w/car	(6) w/ no controls									
(8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/carbon adsorber (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (12) w/ no controls (13) w/carbon adsorber (12) w/ no controls (12) w/ no control devices are required, but not yet installed (2) w/no control devices are required to be installed (2) w/no control devices are required to be installed (3) w/no control devices are required to be installed (4) w/no control devices are required to be installed (5) w/no control devices are required to be installed (6) w/no control devices are required to be installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required, but not yet installed (1) w/no control devices are required to be installed (1) w/no control devices are required, but not yet installed (2) w/no control devices are required, but not yet installed (2) w/no control devices are required, but not yet installed (2) w/no control devices are required to be installed (2) w/no control devices are required, but not yet installed (2) w/no control devices are required, but not yet installed (2) w/no control devices are required, but not yet installed (2) w/no control devices are required, but not yet installed (2) w/no control devices are required, but not yet installed (2) w/no control devices are required, but not yet installed (3) w/no control devices are required	Dryer Unit	-			<u> </u>				1	.1
(9) w/no controls	(7) w/ ref. condenser									
Reclaimer Unit (10) w/ ref. condenser	(8) w/ carbon adsorber									
(10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (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? [(9) w/ no controls									
(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? [Reclaimer Unit								-	
(b) Control devices are required, but not yet installed	(10) w/ ref. condenser	_	1 .	1						
(b) Control devices are required, but not yet installed	(11) w/carbon adsorber									
(b) Control devices are required, but not yet installed	(12) w/ no controls									
(Indicate with an "X". Select one classification only.) Existing small area source New small area source	(c) No control devices 2.(a) What was the total of the following of the f	are re quant gallo	equired to be ity of perchlo ons ow many? [_	installed [_ proethylene (] months	perc)	_] purchased i				
EARSONE IGIEU GIUG SUUICU I I INCW IGIEU GUUICU I /N I " "	(Indicate with an "X". Existing small ar	Selec ea so	urce	cation only.)	ew sn	nall area sou	rce [3) of	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines pursuant to section (5) of P (Indicate with an "X".)	art II of this notification form?
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 Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units 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 I boiler HP or less), and (2) are fired exclusively by natural gas except for period during which propane or fuel oil containing no more than one percent sulfur is	ds of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Recordkeeping Inform	nation
Check all logs which are required to be kept on-site in accordance with the requ	
(a) Purchase receipts and solvent purchases	\bowtie
(b) Leak detection inspection and repair	\succeq
(c) Refrigerated condenser temperature monitoring	XIAD Y
(d) Carbon adsorber exhaust perc concentration monitoring	[] 'J _. ,
(e) Instrument calibration	·)

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please ind	licate with an "X" the appropriate selectio	n:
<u></u>	I hereby surrender all existing air per facility indicated in this notification	ermits authorizing operation of the form; specifically, permit number(s)
Organ X	No air permits currently exist for the this notification form.	e operation of the facility indicated in
	Responsible	Official Certification
this n staten maint comp	otification. I hereby certify, based on info ments made in this notification are true, a cain the air pollutant emissions units and c ly with all terms and conditions of this ge	as defined in Part II of this form, of the facility addressed in ormation and belief formed after reasonable inquiry, that the occurate and complete. Further, I agree to operate and air pollution control equipment described above so as to neral permit as set forth in Part II of this notification form.
I will	Bobert	anges to the information contained in this notification. S-30-56 Date
2	Signature	12-5-56 Date.

0250743

P.14 1. (a) add date control device installed

3. new large area Source Should be marked

P.15 4. new large nc. Should be marked

- (c) or (d) should be marked
- (f) should be marked

10-2-96 Richard Reherts has no existing air permits

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Failly Own of Common Name Oleman from antique and individual common Name Oleman from the Common Name Oleman fro
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
RICHAM ROBERTS / PARISIAN DELUXE CICAMON INC
2. Site Name (For example, plant name or number):
PAMSIAN DELIER CLEANERS
3. Hazardous Waste Generator Identification Number:
Plo 000346320
4. Facility Location: 8731 Sw 136 St. Street Address: 8731 Sw 136 St.
City: MiAm! County: DADE Zip Code: 33176
5. Facility Identification Number (DEP Use);
0250443
Responsible Official
<u> </u>
6. Name and Title of Responsible Official:
RICHARD ROBERTS V.P.
7. Responsible Official Mailing Address: Organization/Firm: PAHSIAN DELUSE CLEANERS INC.
Street Address: 8731 SW 136 F.
City: MIAME County: DADE Zip Code: 33/76
8. Responsible Official Telephone Number:
Telephone: (305) 232-0303 Fax: ()
Facility Contact (If different from Responsible Official)
2 domey Communications from 1000 points of 10001)
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: () -
Total ()

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Bureau of Air Monitoring & Mobile Sources

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
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit		e e de la companya d La companya de la companya de					-		tana and a
(1) w/ ref. condenser		03-NOV93							
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit	1.11	of the second		. '				ar i suitkjai	
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		######################################		17.	Para Agen			er die eigen	an da Tirke.
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit			Medical Co	1		- 11. A			
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are(c) No control devices	-		•						
2.(a) What was the total of [/ S o] (b) If less than 12 mont Check why it is less	gallo hs, ho	ons ow many? [_] months						

DEP Form No. 62-213.900(2)

Effective: 6-25-96

 What control technology is required on machines pu (Indicate with an "X".) 	rsuant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber [] R	efrigerated condenser []
New small area source Refrigerated condenser [X]	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions unit to Rule 62-213.300, F.A.C. Verify that all steam and h exemption criteria or that no such units exist on-site:	ts shall not be eligible to use the general permit pursuant ot water generating units on-site meet the following
All steam and hot water generating units on-site (1) har boiler HP or less), and (2) are fired exclusively by natu during which propane or fuel oil containing no more th	ral gas except for periods of natural gas curtailment
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 a	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 monito	ring []
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

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Surrender of Existing Air Permit(s)

lease indica	te with an "X" the appropriate selection:	
ر	I hereby surrender all existing air permits facility indicated in this notification form	
<u></u>	No air permits currently exist for the ope this notification form.	eration of the facility indicated in
	Responsible Offic	ial Certification
this notif statemen maintain	Sication. I hereby certify, based on informat ts made in this notification are true, accura the air pollutant emissions units and air po	fined in Part II of this form, of the facility addressed in ion and belief formed after reasonable inquiry, that the te and complete. Further, I agree to operate and llution control equipment described above so as to permit as set forth in Part II of this notification form.
I will pro	omptly notify the Department of any changes	s to the information contained in this notification.
	Bobert	8.30-86

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REST AVAILABLE COPY

INSPECTION SUMMARY PERCET

INSPECTION SUN	IMARY REPORT
TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 2:45 pm TIME OUT: 3:20 p	om AIRS ID#: 0250743
TYPE OF FACILITY: Mew large area x	
FACILITY NAME: Parisian Neluxe	
FACILITY LOCATION: 8731 SW 134 St.	5.1.5.72.7.76
Miane, H.	
RESPONSIBLE OFFICIAL: Richard Robert	PHONE NUMBER:
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluated discrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
1. Copies of Perc purchased	1. must maintain copies
not Kept on site. Ho perc	of all perc purchased for site. Thut log.
2. no measuring a recording	2. must start e' maintain
records on site for wasteret	an exhaust outlet semper
exhaust temperature.	twe measuring log.
3. no leak detection :	3. must start 5' maintain
repair logs on site.	a log documenting lack detection of equipment repo
4. No measuring ar recording log for condenser exhaust	4. must start & maintain said log.
temperature.	
	•
COMMENTS:	
	- GUNTH.
12.23.96 C.R.B.b.ods.	
The Annual Compliance Certification form has been properly certi-	fied and submitted to the inspector. YES NO
- 0-	
DATE OF NEXT INSPECTION: $/2 \cdot 9 \cdot 97$	pproximate)
INSPECTION CONDUCTED BY: Cosana (P)	VERH
	7
INSPECTOR'S SIGNATURE: Sasana	PHONE NUMBER: 372-4942
Page	<u></u>
rage	<u>,</u> 0

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PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT

	COMPLIANCE I	NSPECTION C	CHECKLIST	JAN	2 1 199/
TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	DN D	COMPLAINT/	DISCOVERU OF	Air Monitorin
AIRS ID#: <u>0250 743</u>	DATE: 12 · 9 · 9	TIME	IN: <u>2:45pm</u>	TIME OUT:	3:20 pm
facility name: <u>Pari</u>	sian Delux	e Cleane	R5		
FACILITY LOCATION:		•			
	Miami, F.				
PART I: NOTIFICATION			•	· · · · · · · · · · · · · · · · · · ·	
(check appropriate box)					
1. Existing facility notified DA	RM by 9/1/96				9
2. New facility notified DARM	30 days prior to sta	rtup			<u> </u>
3. Facility failed to notify DAR	M to use general pe	rmit			ا ت
Facility indicated on notificat (check appropriate box) A. 1. Existing small area sou 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) 3. Existing large area sou	rce 🛘 🗘	transfer only, both types, x<	y, x<140 gal/yr x<200 gal/yr 140 gal/yr n or after 12/9/91		
dry-to-dry only, 140 <x<2, (constructed="" 1="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" approp<="" before="" both="" check="" classi="" correct="" facility="" ga="" if="" is="" no,="" only,="" please="" td="" the="" this="" transfer="" types,=""><td>00 gal/yr gal/yr il/yr) fication</td><td>dry-to-dry only transfer only, both types, 14</td><td>y, 140<x<2, 100="" g<br="">200<x<1,800 <br="" gal="">0<x<1,800 gal="" yr<br="">on or after 12/9/91</x<1,800></x<1,800></x<2,></td><td>gal/yr yr</td><td></td></x<2,>	00 gal/yr gal/yr il/yr) fication	dry-to-dry only transfer only, both types, 14	y, 140 <x<2, 100="" g<br="">200<x<1,800 <br="" gal="">0<x<1,800 gal="" yr<br="">on or after 12/9/91</x<1,800></x<1,800></x<2,>	gal/yr yr	
,,	fied for a general peeds above limits and	-	above r a general permit		

facility was

gallons.

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

NO RECEIPTS OR LOG ON

<u> </u>					
PART III: GENERAL CONTROL REQUIREMENTS					
Is the responsible official of the dry cleaning facility: (check appropriate boxes)					
1Storing perchloroethylene in tightly sealed and impervious containers?	OPÝ ON				
2. Examining the containers for leakage?	DEY ON				
3. Closing and securing machine doors except during loading/unloading?	CAN ON				
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	o√y □n				
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON OXIVA				
PART IV: PROCESS VENT CONTROLS					
In Part II-A:					
If classification 1 has been checked, no controls are required. Proceed to Part V	7.				
If classification 2 has been checked, the machine should be equipped with a refr (complete A below).	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 refu (complete A and B below).	igerated condenser				
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?	מט אם				
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	בא מואם אם אם A				
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	מאום מם אם				
Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	DY DM				
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON CINA				
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY DAN				

B. Has the responsible official of an existing lärge of 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?	oy ⊠n√
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY GW
Is the temperature differential equal to or greater than 20° F?	DY BN
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?	OY ON CHAIA
Is the perc concentration equal to or less than 100 ppm?	ОУ ОИ
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?	OY ON OTNA
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	באלאס אם עם A
6. Routed airflow to the carbon adsorber (if used) at all times?	DY ON DATA
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	DY OM
2. Maintained rolling monthly averages of perc consumption?	DY BY
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	DY BY
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	DY DAY
4. Maintained calibration data? (for direct reading instruments only)	DY ON EN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY BW
6. Maintained startup/shutdown/malfunction plan?	DY ON
7. Maintained deviation reports?	DY DN BNA
Problem corrected?	OY ON
8. Maintained compliance plan, if applicable?	DY ON BANA
PART VI: LEAK DETECTION AND REPAIRS	

2. Wh	ich method of detection is used by th	e respons	sible 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 p	erc vapor	r concentrations in	n a range of 0-500 ppm?	OY O	N
	b. Calibrated against a si (PID/FID only)?	tandard g	as prior to and aft	er each use	ם צם	N
	c. Inspected for leaks an	d obvious	signs of wear on	a weekly basis?	ם צם	N
ļ	d. Kept in a clean and se	cure area	when not in use?	•	DY DN	
	e. Verified for accuracy	by use of	duplicate samples	(calorimetric only)?	DY DN	
3. Has	s the facility maintained a leak log?			•	DY DN	
4. Do	4. Does the responsible official check the following areas for leaks?					
	Hose connections, fittings, couplings, and valves	<u>QY</u>	ОИ	Muck cookers	ex	ΩN
	Door gaskets and seating	CY	□и	Stills	QY	ΩΝ
	Filter gaskets and seating	œγ	DИ	Exhaust dampers	CPY .	ПN
	Pumps	GA	ПИ	Diverter valves	E Y	ΠN
	Solvent tanks and containers	œ∕r	NO	Cartridge filter housings	ďΥ	ΠN
	Water separators	ĊΥÝ	ΠN			
	Ochard Roberts Name of Responsible Officia	al				

Part II. B. No pue receipts nor log Kept on site.

Part II.A. 4,5 & 6 NO TEMPERATURE LOG ON-SITE.

Part I 3. No peux leak measuring denices on site:

6. Dry Cleaning unit operation instruct tion manual on site.

Me Roberts carrected the punit appli-

a copy of the annual Compliance Certification Form was handed out to Mr. Roberts.

302112

all

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

ureau of Air Monitoring AIRS ID#0250743 & Mobile Sources RICHARD ROBERTS RICHARD ROBERTS 8731 SW 136 STREET MIAMI FL 33176 Do NOT Remove Label Annual Reporting Period: 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. 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 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.

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

RESPONSIBLE OFFICIAL:			
	Name (Please Print)	Signature	Date

Exact period of non-compliance: from

Action(s) taken to achieve compliance:

Method used to demonstrate compliance:

^{*}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

TYPE OF INSPECTION:	ANNUAL	×	COMPLAINT/DIS	COVERY	
	RE-INSPECTION			_	70
airs id#: 0250743 facility name: Pa	-1			8	۷ (
AIRS ID#: $0250?43$	DATE: 5/28/90	7_ TIME	IN: <u>// 30 </u>	AE OUT):90 H
facility name: <u>Pa</u>	sisian De	clux-e	(leaners	bile	<u></u>
FACILITY LOCATION:				Sourc	1999 Monitori
	Miami F				3
RESPONSIBLE OFFICIAL :	Richard Re	oberts	_phone(305)	1372-0	934
CONTACT NAME:		· · .	PHONE:		
PART I: NOTIFICATION					
(check appropriate box)			•		
1. New facility notified DARM	1 30 days prior to startu	p			
2. Facility failed to notify DAR	RM to use general permi	it		•	
PART II: CLASSIFICATION	 				
	N	·			
Facility indicated on notificati			☐ No notification for		
Facility indicated on notificati (check appropriate box)			☐ No notification fo☐ Drop store/out of		oleum
Facility indicated on notificati (check appropriate box) A.	ion form that it is:	. New small :	☐ Drop store/out of		oleum
Facility indicated on notificati (check appropriate box)	ion form that it is:	-	☐ Drop store/out of	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/transfer only, x < 200 gal/yr	ion form that it is: rce	ry-to-dry only ansfer only, x	Drop store/out of area source, $x < 140 \text{ gal/yr}$ < 200 gal/yr	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/transfer only, x < 200 gal/yr both types, x < 140 gal/yr	ion form that it is: rce	ry-to-dry only ansfer only, x oth types, $x < x$	□ Drop store/out of area source , x < 140 gal/yr < 200 gal/yr 140 gal/yr	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/transfer only, x < 200 gal/yr	ion form that it is: rce	ry-to-dry only ansfer only, x oth types, $x < x$	Drop store/out of area source, $x < 140 \text{ gal/yr}$ < 200 gal/yr	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	rce 2 /yr d tr	ry-to-dry only ransfer only, x oth types, x < constructed on	☐ Drop store/out of area source , x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area sour	ion form that it is: ree	ry-to-dry only ransfer only, x oth types, x < constructed on . New large a	☐ Drop store/out of area source , x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	business/petro	pleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	ion form that it is: rce	ry-to-dry only ransfer only, x oth types, x < constructed on . New large a ry-to-dry only	Drop store/out of area source , x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 < x < 2, transfer only, 200 < x < 1,80 both types, 140 < x < 1,800 s	ion form that it is: ree	ry-to-dry only ransfer only, x oth types, x < constructed on . New large a ry-to-dry only ransfer only, 2 oth types, 140	Drop store/out of area source, $x < 140 \text{ gal/yr}$ < 200 gal/yr 140 gal/yr or after 12/9/91) area source, $140 \le x \le 2,100 \text{ gal/yr}$ $00 \le x \le 1,800 \text{ gal/yr}$ $\le x \le 1,800 \text{ gal/yr}$	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,80	ion form that it is: ree	ry-to-dry only ransfer only, x oth types, x < constructed on . New large a ry-to-dry only ransfer only, 2 oth types, 140	Drop store/out of area source, $x < 140 \text{ gal/yr}$ < 200 gal/yr 140 gal/yr or after 12/9/91) area source, $140 \le x \le 2,100 \text{ gal/yr}$ of $0 \le x \le 1,800 \text{ gal/yr}$	business/petro	pleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,800 goth types, 140 ≤ x ≤ 1,800 goth types, 14	ion form that it is: rce	ry-to-dry only ransfer only, x oth types, x < constructed on . New large a ry-to-dry only ransfer only, 2 oth types, 140	Drop store/out of area source, $x < 140 \text{ gal/yr}$ < 200 gal/yr 140 gal/yr or after 12/9/91) area source, $140 \le x \le 2,100 \text{ gal/yr}$ $00 \le x \le 1,800 \text{ gal/yr}$ $\le x \le 1,800 \text{ gal/yr}$	business/petro	oleum
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,80 both types, 140 ≤ x ≤ 1,800 (constructed before 12/9/91) 5. This is a correct facility clud on the please check the facility of facility	ion form that it is: rce	ry-to-dry only ransfer only, x oth types, x < constructed on. New large a ry-to-dry only ransfer only, 2 oth types, 140 constructed on. IY □N on:	Drop store/out of area source, $x < 140 \text{ gal/yr}$ < 200 gal/yr 140 gal/yr or after 12/9/91) area source, $140 \le x \le 2,100 \text{ gal/yr}$ or after 12/9/91) Area fource $00 \le x \le 1,800 \text{ gal/yr}$ or after 12/9/91) Can not determine above	business/petro	oleum

Review 101199 DG



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

ΠY	ПΝ	N/A
ΠY	ПΝ	DN/A
$\chi_{\tilde{A}_{\lambda}}$	Пν	
X^{λ}	ΩΝ	□N/A
		. 1

DY DN/AN/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).

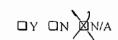
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)

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











В	. 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?	ΟY	□N	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ΠN	□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?	ΟY	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПN	□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?	ΟY	DN	□n/a
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ΩΝ	□N/A

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations? NO YO 6. Maintained startup/shutdown/malfunction plan? DY DN XXVA 7. Maintained deviation reports? Problem corrected? 8. Maintained compliance plan, if applicable?

PART VI: LEAK DETECTION AND REPAIRS					
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
inspection?			XY ON		
2. Has the facility maintained a leak log?	·		OY XN		
3. Does the responsible official check the	e following areas for leak	s?	-		
Hose connections, fittings, couplings, and valves	Y ON ON/A	Muck cookers	DY ON OWA		
Door gaskets and seating	DA ON ONIVA	Stills	Y ON ON/A		
Filter gaskets and seating	XV ON ON/A	Exhaust dampers	AY ON ON/A		
Pump's ·	DAY ON ON/A	Diverter valves	AV ON ON/A		
Solvent tanks and containers	AND NO YA	Cartridge filter housings	MY ON ON/A		
Water separators	AY ON ON/A	:			
4. Which method of detection is used by	the responsible official?		A		
Visual examination (condensed s	solvent on exterior surface	es) ·	×		
Physical detection (airflow felt th	rough gaskets)		X,		
Odor (noticeable perc odor)			×		
Use of direct-reading instrumenta	ation (FID/PID/calorimet	ric tubes)	o`		
Halogen leak detector					
If using direct-reading instr	cumentation, is the equip	pment:	N/A		
a. Capable of detecting	perc vapor concentration	ns in a range of 0-500 ppm?	OY ON		
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
c. Inspected for leaks ar	nd obvious signs of wear	on a weekly basis?	OY ON		
d. Kept in a clean and s	secure area when not in us	se?	OY ON .		
e. Verified for accuracy	y by use of duplicate samp	ples (calorimetric only)?	OY ON		

Inspector's Name (Please Print)
Inspector's Signature

5 28 9 Date of Inspection

5/2000

Approximate Date of Next Inspection

No perc receipts on site. No logs.

FDEP calendar was given to Mr. Roberts. I explaine d how to keep logs in calendar.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TÝPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 11:30 TIME OUT: 12:00 TYPE OF FACILITY: Parisian Delux FACILITY NAME: Perc Dry Clea FACILITY LOCATION: 8731 SW 1310 Mianux FL 33 RESPONSIBLE OFFICIAL: RICHARD Rober	e Cleanors T
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluated discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	ative Code (F.A.C.).
No leak inspection, ref. condenser temp., and 12 month rolling log of perc. purchase logs kept. No perc receipts on site.	Begin keeping logs in FDEP calendar provided. Keep perc receipts on site for a minimum of 5 years.
No monitoring of temp- of oute- side of vef- Condenser on a weekly basis-	t Bagin monitoring temp. during cool-down cycle + record temp. in calendar.
· ·	
COMMENTS:	
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO
INSPECTION CONDUCTED BY:	proximate) Ya (Thirdelease Print) (2 -) - 2 - 4 (22)
INSPECTOR'S SIGNATURE: Page	PHONE NUMBER: (305)372-093(

AIRS 10#: 0250743

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Parisian Deluxe Cleaners DATE: 5/28/99
FACILITY LOCATION: 8731 SW 1310 St
Miani, Fl 33176
Annual Reporting Period: 5 1998TO 5 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:
It 140, complete the following.
#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
- Lac 5/99
Action(s) taken to achieve compliance: Begin keeping logs Method used to demonstrate compliance: FDEP Calculate Method
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Perc receipts not available Exact period of non-compliance: from 5/98 to 5/99 Action(s) taken to achieve compliance: Keep receipts DN 5.16 for MiniMum of 5 Method used to demonstrate compliance: Receipts
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: 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.

ARMS Leli/99 DG

Page of ____.

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	Ø ± ON □	COMPLAINT/DISCOVER	
AIRS ID#: 0250743	DATE: 5/2/60	TIME	N: /000 TIME OU	T: 048
FACILITY NAME:				~
FACILITY LOCATION:				<u>C</u>
	Miam.	, FL	No. r	
RESPONSIBLE OFFICIAL :	Richard	Roberts	PHONE: <u>305 - \$ 20</u>	20 X
CONTACT NAME:			PHONE:	0
PART I: NOTIFICATION		·		
(check appropriate box)				
1. New facility notified DARM	30 days prior to sta	ırtup	•	
2. Facility failed to notify DARI	И to use general pe	ermit		
PART II: CLASSIFICATION				
Facility indicated on notification (check appropriate box) A.	n form that it is:		☐ No notification form ☐ Drop store/out of busines	s/petroleum
1. Existing small area source dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)		2. Evew small a dry-to-dry only, transfer only, x both types, x < (constructed on	, x < 140 gal/yr < 200 gal/yr	
3. Existing large area source dry-to-dry only, $140 \le x \le 2$, transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ g (constructed before 12/9/91)	100 gal/yr) gal/yr	transfer only, 20 both types, 140	rea source: $140 \le x \le 2,100 \text{ gal/yr}$ $00 \le x \le 1,800 \text{ gal/yr}$ $\le x \le 1,800 \text{ gal/yr}$ or after $12/9/91$)	
5. This is a correct facility cla	ssification '	OY ON	Can not determine	İ
	y qualified for a ger	neral permit as nu	mberabove tible for a general permit	
B. The total quantity of perchlor facility was gallons.	oethylene (perc) pu	rchased within th	e preceding 12 months by this	dry cleaning

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? DY DN DNA DY DN DINA 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? ØY □N 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? DY ON ON/A 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN &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? ØY □N 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? ZY ON ONIA 3. Equipped the condenser with a diverter valve so airflow will be directed away from the MY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? DY DN DWA 6. Conducted all temperature monitoring after an appropriate cooldown period and after DY ØN verifying that the coolant had been completely charged?

D	. Has the responsible official of an existing large or new large area source also:		
ľ	. That the responsible official of an existing large of 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?	DY 9	ĺN
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	<u>,</u> \(\text{Q}\) \(\text{Q}\)	IN PIN/A
	Is the temperature differential equal to or greater than 20° F?		N ANIA
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?		N ØN/A
	Is the perc concentration equal to or less than 100 ppm?	DY D	и фила
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?	DY D	N 9N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY O	N JIN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY O	N DINIA

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (chrck appropriate boxes)	
1. Maintained receipts for perc purchased?	□7. □ 4μ
2. Maintained rolling monthly total of perc consumption?	OY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ØN/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?	OY ON ØN/A
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON PAN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	ON ON ONNIA
6. Maintained startup/shutdown/malfunction plan?	QIY DN .
7. Maintained deviation reports?	OY ON DANA
Problem corrected?	OY ON DANA
8. Maintained compliance plan, if applicable?	OY ON Ø N/A

P.	ART VI: LEAK DETECTION AND	REPAIRS			
1.	Does the responsible official conduct	a weekly (for small sourc	es, bi-weekly) leak detection a	and repai	r
	inspection?			ØΥ	ПN
2.	Has the facility maintained a leak log?	•		ΩY	ØN
3.	Does the responsible official check the	e following areas for leak	s?		
	Hose connections, fittings, couplings, and valves	ALA CIN CINIA	Muck cookers	OY C	AN Ö N/A
ľ	Door gaskets and seating	DY ON ONIA	Stills	AA, C	ANN UNIA
	Filter gaskets and seating	DA ON ONY	Exhaust dampers	MY C	N/A
	Pumps	DIY ON ONA	Diverter valves	GY C	N □N/A
	Solvent tanks and containers	AND NO YE	Cartridge filter housings	DAY O	AIN UNIA
	Water separators	DY ON ONIA			
4.	Which method of detection is used by	the responsible official?			
	Visual examination (condensed s	solvent on exterior surface	es)	Þ.	
	Physical detection (airflow felt the	rough gaskets)		7	
	Odor (noticeable perc odor)			⋈	
	Use of direct-reading instrument	ation (FID/PID/calorimetr	ric tubes)		
	Halogen leak detector			7	
	If using direct-reading instr	umentation, is the equip	oment:	Ø N/A	ļ
	a. Capable of detecting	perc vapor concentration.	s in a range of 0-500 ppm?	OY O	IN N
	b. Calibrated against a selection (PID/FID only)?	standard gas prior to and a	after each use	OY O	N
	c. Inspected for leaks as	nd obvious signs of wear	on a weekly basis?	OY O	N
	d. Kept in a clean and s	ecure area when not in us	e?	ם עם	N
	e. Verified for accuracy	by use of duplicate samp	oles (calorimetric only)?	QY O	N
		•	-1.1	/	
	Inspector's Name (Please Prin	nt)	Date of Inspection	<i>o</i>	•
	fran Jan		5/01		
	Inspector's Signature		Approximate Date of N	Vext Insp	ection

ADDITIONAL SITE INFORMATION

- Not maintaining recordsceping - NOV
receipts onsite - NOV

- Provided Jess calender

Decordhepping attempted, being completed

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	<u>⊋</u> сомр	LAINT/DISCOVERY	RE-INSPE	CTION
TIME IN: /000TIME (OUT: <u>/04</u>	o AIRS ID#:_	0350743	
TYPE OF FACILITY: Porc	Dry Clan		·	
FACILITY NAME: Parain	Selexa Cl	cemens	DATE: 5/	100
FACILITY LOCATION: 8731	Sw 136			
Manie	FL			
RESPONSIBLE OFFICIAL: Richard	Roberts	PHONE NUME	ER: 305 - 3	52 0505 73 69 16
Based on the results of the compliance r compliance with DEP Rule 62-213.300,	Florida Administrati	ive Code (F.A.C.).		
Based on the results of the compliance rediscrepancies were noted:	equirements evaluate	ed during this inspection, the	following compliance	e
COMPLIANCE REQUIREMENT/		FOLLOW-UP AC	CTION REQUIR	ED
Not maintaining lask ly semp. by or rolling l	7	Begin second	heeping	
Not mentaining receipt	5 %	Manitain co	poies of re	cerpts
		-		
			· ·	
· ·				
COMMENTS: Machine opa	rating during	, impection -	no odors	
	•			
The Annual Compliance Certification form has b	een properly certifie	d and submitted to the inspe	ctor. YES	ИО
DATE OF NEXT INSPECTION:	(App	roximate)		·
INSPECTION CONDUCTED BY:	ivan Fann	يم ا	·	
	(Plea	se Print)		
INSPECTOR'S SIGNATURE:	Man-	PHONE NUMB	ER: <u>305-37</u>	<u>48 - 693</u> 5
	Page	of		Revised 10/96

ARC

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Pausian	Delux &	Cleaners	DATE: _	5/3/00
FACILITY LOCATION:	8731 3	JU 136	_st		
-	Mani,	FL		· · · · · · · · · · · · · · · · · · ·	
Annual Reporting Period:	May	19 <u> </u>	₹ TO	May	Meson
Based on each term or condition of 62-213.300, Florida Administrativ			_		Rule NO
If NO, complete the following:					
#1. Term or condition of the general Mot mantaining		·	-		
Exact period of non-compliance:	from	May 50)to	May OC)
Action(s) taken to achieve compliant		•		• • • • • • • • • • • • • • • • • • • •	
Method used to demonstrate comp	oliance:	FOFP	alnder		
#2. Term or condition of the general way from the general formula way from	from	to of perso	_purchase 10 Na	y 00	l stated above:
As the responsible official, I here made in this notification are true, upon rolling averages of purchass year for transfer or combination f	accurate and comple receipts, does not e facilities.	lete. Further, my an exceed 2,100 gallons	nual consumption of	of perchloroethylene s dry facilities or 1,80	olvent, based

^{*}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.

METROPOLITAN DADE COUNTY, FLORIDA





NOTICE OF VIOLATION

ENVIRONMENTAL RESOURCES MANAGEMENT 33 S.W. 2nd AVENUE MIAMI, FLORIDA 33130-1540 (305) 372-6789

TO: Richard Roberts.
ADDRESS: f731 Sw 136 st., Mani FL
SOURCE/LOCATION: Pausian Deluy Cleaners
YOU ARE HEREBY NOTIFIED that on the following violation(s) of Chapter 24, Metropolitan Dade County Environmental Protection Ordinance, and/or regulations of the Florida Administrative Code, was observed at the referenced location by an official of this Department.
Operating without an Air Permit Excessive Visible Emissions
Uncontrolled fugitive particulates Improper handling/removal of asbestos
Non-compliance with Non-compliance with CFC regulations. Stage II Vapor Recovery OTHER
Specifically: Not in compliance with Title V hound Air Point Part II
(6)(a)(1) Facility half maintain copies of receipts of perc
suchases muit for a Typan minimim.
In view of the above, and pursuant to the authority granted to me by Sections 24-54 and 24-5(15)a, Metropolitan Dade County Environmental Protection Ordinance, I hereby order you to:
Immediately upon receipt of this NOTICE, initiate corrective measures to eliminate and/or Cease and Desist the above-referenced violation(s). Within days of receipt of this NOTICE, submit to this office in writing the steps which you have taken to ensure that no further violations will occur. Said report may include evidence of equipment repairs, adjustments, or servicing performed to correct the violation. FAX FERC purchase receipt. May 97 4. Within days of receipt of this NOTICE, contact the Air Section of this Department at 372-6925 to discuss air permit requirements.
 Within days of receipt of this NOTICE, contact Plan Review Section at 375-3330 to discuss other Departmental permitting requirements.
Failure to comply with the above or continued operation in violation of Chapter 24 shall subject you to the enforcement and penalty provisions of Sections 24-55 and 24-56, Metropolitan Dade County Code.
For further information regarding the above, please contact the Air Section of this office at 372-6925.
Sinćerely,
John W. Renfrow, P.E. Director
Received by Juan Tannin
Title: Bacs. Signature: Jan
Date: (1-1-00)

METROPOLITAN DADE COUNTY, FLORIDA





NOTICE OF VIOLATION

ENVIRONMENTAL RESOURCES MANAGEMENT 33 S.W. 2nd AVENUE MIAMI, FLORIDA 33130-1540 (305) 372-6789

TO: Richard Rob.	ske
ADDRESS: 8731 SW /36	st., Miami, FL
SOURCE/LOCATION: Pausian Seley.	e Claaners
YOU ARE HEREBY NOTIFIED that on	tion Ordinance, and/or regulations of the Florida
Operating without an Air Permit E	xcessive Visible Emissions
Uncontrolled fugitive particulates In	nproper handling/removal of asbestos
Stage II Vapor Recovery	on-compliance with CFC regulations THER
Specifically: Ald in complement with	1 Title V General Min Parmit Part A
Specifically: (6)(a) 1 (c)(b) Record know, Require Leads los, Lemperature (1), 4 rolling (1), In view of the above, and pursuant to the authority grant Metropolitan Dade County Environmental Protection Ordina	nted to me by Sections 24-54 and 24-5(15)a,
Cease and Desist the above-referenced vices Within 30 days of receipt of this NOTIC you have taken to ensure that no further	initiate corrective measures to eliminate and/or plation(s). E, submit to this office in writing the steps which violations will occur. Said report may include s, or servicing performed to correct the violation.
372-6925 to discuss air permit requirement	CE, contact Plan Review Section at 375-3330 to
Failure to comply with the above or continued operation in enforcement and penalty provisions of Sections 24-55 and	
For further information regarding the above, please contact	the Air Section of this office at 372-6925.
	incerely,
	ohn W. Renfrow, P.E. Virector
Received by B	y. Ivan Fannin
Title: Pres s	ignature: Inou farmi
C >(((0))	1 I D+

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

302112 V

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#0250743

RICHARD ROBERTS RICHARD ROBERTS 8731 SW 136 STREET MIAMI FL 33176 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

on the reverse side?	SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write "Return Receipt Requested" on the mailpiece below the article. The Return Receipt will show to whom the article was delivered and delivered.	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.		
ADDRESS completed	AIRS ID 0250743 RICHARD ROBERTS RICHARD ROBERTS 8731 SW 136 STREET MIAMI FL-33176	4a. Article Ni 2 3 4b. Service Registere Express I Return Rec 7. Date of De	Type ed DA Certified Insured Ceipt for Merchandise COD	you for using
Is your RETURN	5. Received By: (Print Name) VANCESA MACHINEZ 6. Signature: (Addressee or Agent) X Math. Machinez X	8. Addressee's Address (Only if requested and fee is paid)		Thank
	PS Form 3811, December 1994		Domestic Return Receipt	Ţ

Z 333 660 268 US Postal Service Receipt for Certified Mail AIRS ID 0250743 RICHARD ROBERTS RICHARD ROBERTS 8731 SW 136 STREET MIAMI FL 33176 \$ Postage Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address PS Form 3800, TOTAL Postage & Fees Postmark or Date



V 0390754

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 # 0250743 PARISIAN DELUXE CLEANERS INC RICHARD ROBERTS

8731 SW 136 STREET

MIAMI FL 33176

FOR GOVERNMENT USE ***LLY Org.: 37550101000 EO: BI Fund: 20-2-035001 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: \$50.00 RECEIVED MAIL ROOM

FEB 10 97

Do NOT Remove Label

AIRS ID# 0250743

PARISIAN DELUXE CLEANERS RICHARD ROBERTS 8731 SW 136 STREET MIAMI FL 33176

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

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 # 0250743

PARIŚIAN DELUXE CLEANERS INC RICHARD ROBERTS

8731 SW 136 STREET

MIAMI FL 33176

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: Alg Fund: 20-2-035001

Obj.: 002273

SSBLOGY NBOLEN TO THOUGH SHALL OF SALE OF THE SA	C. Signature D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
PARISIAN DELUXE CLEANERS INC 8731 SW 136 STREET MIAMI FL 33176	3. Service Type Certified Mail
2. Article Number (Copy from service label) 70 000 600 000 000 4130 300	%
PS Form 3811, July 1999 Domesti	ic Return Receipt 102595-99-M-1789

	U.S. Postal Service CERTIFIED MAIL RECEIPT (Dömestic Mail Only; No Insurance Coverage Provided)						
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믔	Postage	\$		B			
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AIRS ID # 0250743001AG							
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'-	MIAMI FL 33	176	Floo	tructions			

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THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0356840

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 11 99

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0250743

PARISIAN DELUXE CLEANERS INC RICHARD ROBERTS 8731 SW 136 STREET MIAMI FL 33176

FOR GOVERNMENT USE ONLY

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

Fund: 20-2-035 Obj.: 002273