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APR 09 2007

Bureau of Air Monitoring  
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER  
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED

APR 05 2007

Air Quality  
Management Division

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	MARYNILE INC		
2. Site Name (For example, plant name or number):	MR Alex Dry cleaners		
3. Hazardous Waste Generator Identification Number:	FLD077279040		
4. Facility Location:	9401 SW 56 ST		
Street Address:			
City:	MIAMI	County:	DADE
		Zip Code:	33165
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0250771-002		

Responsible Official

6. Name and Title of Responsible Official:			
Name:	NEURIS RICARDO	Title:	PRESIDENT
7. Responsible Official Mailing Address:			
Organization/Firm:	9401 SW 56 ST		
Street Address:			
City:	MIAMI	County:	DADE
		Zip Code:	33165
8. Responsible Official Telephone Number:			
Telephone:	(305) 570 5928	Fax:	( ) -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):			
10. Facility Contact Address:	SAME		
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?  1

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")
1997	Existing <input checked="" type="radio"/> New <input type="radio"/>	RC <input checked="" type="radio"/> CA <input type="radio"/> None required <input type="radio"/>	SAME
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

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

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

How many washers do you have on-site?

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

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

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

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

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

0 gallons (You must fill this in)

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

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

New store:  New machine

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

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

Small Area Source

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

Large Area Source

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

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

Existing machines at small area source

(NONE REQUIRED)

New machines at small area source

Refrigerated condenser

Existing machines at large area source

Carbon adsorber

Refrigerated condenser

New machines at large area source

Refrigerated condenser

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

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

How many boilers do you have on-site?

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

What type of fuel do you use?  propane  natural gas  
 No. 2 fuel oil  No. 4 fuel oil  
 No. 6 fuel oil  Other (please list) \_\_\_\_\_

#### 6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are \_\_\_\_\_

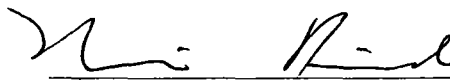
No DEP air permits currently exist for the operation of the facility indicated in this notification form.

**Responsible Official Certification**

*I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.*

*I will promptly notify the Department of any changes to the information contained in this notification.*

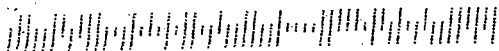
Neuris Ricardo  
Print name of responsible official

  
Signature

4/5/07  
Date

**Environmental Resources Management DE233387**  
**Air Quality Management Division**  
**701 NW 1 Court, Suite 400**  
**Miami, Florida 33136**

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





# PERCHLOROETHYLENE DRY CLEANERS



## COMPLIANCE INSPECTION CHECKLIST

**INSPECTION TYPE:** ANNUAL (INS1, INS2)  COMPLAINT/DISCOVERY (CI)   
 RE-INSPECTION (FUI)  ARMS COMPLAINT NO:

**AIRS ID#:** 0250771 **DATE:** 4/5/07 **ARRIVE:** 11:00 AM **DEPART:** 11:45 AM

**FACILITY NAME:** MR ALEX DRY CLEANERS

**FACILITY LOCATION:** 9401 SW 56th Street  
MIAMI 33165

**RESPONSIBLE OFFICIAL:** NEVRIS RICARDO **PHONE:** (305)595-1832

**CONTACT NAME:** **PHONE:**

**REMITTANCE YEAR:** 2006 **ENTITLEMENT PERIOD:** 10/9/1996 / 10/9/2001  
(effective date) (end date)

**PART I: INSPECTION COMPLIANCE STATUS** (check  only one box)

IN COMPLIANCE  MINOR Non-COMPLIANCE  SIGNIFICANT Non-COMPLIANCE

**PART II: FACILITY CLASSIFICATION - Rule 62-213.300 FAC**  
 (check  only one box in A)

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)

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)

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)

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)

5. **Ineligible for General Permit**   
 drop store/out of business/petroleum  
 facility exceeds above limits

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

SEE LAST PAGE FOR INSPECTOR'S COMMENTS.  
 RE: PERCHLOROETHYLENE USE IN LAST 12 MONTHS.

**PART III: GENERAL CONTROL REQUIREMENTS – Rule 62-213.300 FAC**

(check  only one box for each question)

**Does the responsible official of the dry cleaning facility:**

1. Store perc, and wastes containing perc, in tightly sealed & impervious containers?  Yes  No  N/A
2. Examine the containers for leakage? -----  Yes  No  N/A
3. Close and secure machine doors except during loading/unloading? -----  Yes  No
4. Drain cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? -----  Yes  No  N/A
5. Maintain solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? -----  Yes  No  N/A

**PART IV: PROCESS VENT CONTROLS – Rule 62-213.300 FAC**

(Refer to Part II-A.1.-4. Classification: page 1 of 4, this form)

1. If the facility classification is a **Existing small area source**, no controls are required. **Proceed to Part V.**
2. If the facility classification is a **New small area source**, the machine should be equipped with a refrigerated condenser. **Complete section A. below.**
3. If the facility classification is a **Existing large area source**, the machine should be equipped with either a refrigerated condenser or a carbon adsorber. **Complete both sections A and B below.** *Carbon adsorber must have been installed prior to September 22, 1993*
4. If the facility classification is a **New large area source**, the machine should be equipped with a refrigerated condenser. **Complete both sections A and B below.**

**A. Has the responsible official of all existing large area & new sources:**

(check  only one box for each question)

1. Equipped all machines with the appropriate vent controls? -----  Yes  No
2. Equipped dry-to-dry machines with a closed-loop vapor venting system? -----  Yes  No  N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? -----  Yes  No  N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? -----  Yes  No
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? -----  Yes  No  N/A
6. Conducted all temperature monitoring after an appropriate cool-down period and after verifying that the coolant had been completely charged? -----  Yes  No

**PART IV: PROCESS VENT CONTROLS – Rule 62-213.300 FAC (continued)**

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

(check  only one box for each question)

1. Measure and record the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? -----  Yes  No
2. Measure and record the washer exhaust temperature at the condenser inlet and outlet weekly? -----  Yes  No  N/A
  - a) Is the temperature differential equal to, or greater than 20°F? -----  Yes  No  N/A
3. Measure and record 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 exclusively with a carbon adsorber? -----  Yes  No  N/A
  - a) Is the perc concentration equal to, or less than 100 ppm? -----  Yes  No  N/A
4. Assure 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? -----  Yes  No  N/A
5. Equip transfer machines (dryers, reclaimers, and washers) with individual condenser coils? -----  Yes  No  N/A
6. Route airflow to the carbon adsorber (if used) at all times? -----  Yes  No  N/A

**PART V: RECORDKEEPING REQUIREMENTS – Rule 62-213.300(3) FAC**

**Does the responsible official:**

(check  only one box for each question)

1. Maintain receipts for perc purchased? -----  Yes  No
2. Maintain rolling monthly total of yearly perc consumption? -----  Yes  No
3. Maintain leak detection inspection and repair reports for the following:
  - a) documentation of leaks repaired w/in 24 hrs? or; -----  Yes  No  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? -----  Yes  No  N/A
4. Maintain calibration data? (for applicable direct reading instruments) -----  Yes  No  N/A
5. Maintain exhaust duct monitoring data on perc concentrations? -----  Yes  No  N/A
6. Maintain a startup/shutdown/malfunction plan? -----  Yes  No
7. Maintain deviation reports? -----  Yes  No  N/A
  - a) Problem corrected? -----  Yes  No  N/A
8. Maintain a compliance plan, if applicable? -----  Yes  No  N/A

**PART VI: LEAK DETECTION AND REPAIRS – Rule 62-213.300 FAC**

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak

(check  only one box for each question)



detection and repair inspection? -----  Yes  No

2. Does the facility maintain a leak log? -----  Yes  No

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

a) Hose connections, fittings, couplings, and valves -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	g) Muck cookers -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b) Door gaskets and seating -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	h) Stills -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
c) Filter gaskets and seating -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	i) Exhaust dampers -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
d) Pumps -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	j) Diverter valves -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
e) Solvent tanks and containers--	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	k) Cartridge filter housings	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
f) Water separators -----	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

4. Which method(s) of detection (is/are) used by the responsible official?

a) Visual examination (condensed solvent on exterior surfaces) -----	a) <input type="checkbox"/>
b) Physical detection (airflow felt through gaskets) -----	b) <input type="checkbox"/>
c) Odor (noticeable perc odor) -----	c) <input type="checkbox"/>
d) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) -----	d) <input type="checkbox"/> ** (see below)
e) Halogen leak detector -----	e) <input type="checkbox"/>

**\*\*If using direct-reading instrumentation, is the equipment:** ----- \*\*  N/A

1) Capable of detecting perc vapor concentrations in a range of 0-500 ppm? -----	1) <input type="checkbox"/> Yes <input type="checkbox"/> No
2) Calibrated against a standard gas prior to and after each use (PID/FID only)? -----	2) <input type="checkbox"/> Yes <input type="checkbox"/> No
3) Inspected for leaks and obvious signs of wear on a weekly basis? -----	3) <input type="checkbox"/> Yes <input type="checkbox"/> No
4) Kept in a clean and secure area when not in use? -----	4) <input type="checkbox"/> Yes <input type="checkbox"/> No
5) Verified for accuracy by use of duplicate samples (calorimetric only)? -----	5) <input type="checkbox"/> Yes <input type="checkbox"/> No

TERRENCE ANDERSON

4/5/07

\_\_\_\_\_  
Inspector's Name (Please Print)

\_\_\_\_\_  
Date of Inspection

4/08

\_\_\_\_\_  
Inspector's Signature

\_\_\_\_\_  
Approximate Date of Next Inspection

**COMMENTS:**

ON SITE I MET THE RO NEVRIS RICARDO SHE EXPLAINED THAT THE FACILITY IS USED AS A DROP STORE SINCE JANUARY 06 BECAUSE A FIRE AT THE NEIGHBORING STORE DAMAGED THE ELECTRICAL WIREING AT THE FACILITY AND AS A RESULT THERE IS NO POWER TO OPERATE THE DRY CLEANING MACHINE, ACCORDING TO HER THE MATTER WILL BE RESOLVED IN A FEW MONTHS. APPROX. 10 GALLONS OF PERC IS IN THE MACHINE, THERE WAS NO PERC PURCHASE DURING THAT PERION(APPROX 14 MONTHS). THE TVGP FOR THE FACILITY EXPIRED SINCE 10/9/01, A NEW NOTIFICATION WAS COMPLETED AND SUBMITTED BY THE RO. NO LEAK WAS DETECTED  
A FNOV WAS ISSUED FOR OPERATING WITHOUT A PERMIT.