

Department of Environmental Protection

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

David B. Struhs Secretary

October 22, 2001

Mr. Miguel Gonzalez Dry Clean USA 8633 Northwest 186th Street Miami, Florida 33015

Re: Facility No.: 0250774-002

Dear Mr. Gonzalez:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 21, 2001.

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

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

Title V General Permits Office
Bureau of Air Monitoring and Mobile Sources MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,

Dotty Diltz, Chief

Bureau of Air Monitoring and Mobile Sources

DD/jw

cc: Ms. Mallika Muthiah, Dade County

fees Paid 96-00 SOC 5 Compliance IN January 19, 2007

Ref: AIRS ID# 0250774 OSHMAR INC d.b.a. Dryclean USA

I called Mr. Gonzalez to inquire as to the reason he was surrendering the air general permit for his facility.

He indicated that an inspector from DERM had been in to do an inspection on January 17th and he told him to complete and submit the Notification Form, which the inspector provided. The reason for the form was not indicated, but Mr. Gonzales indicated to me that several months ago he had the PERC machine and all of the PERC related materials removed from his facility, and that he no longer uses Perchloroethylene as his cleaning solvent.

Status of the facility changed to INACTIVE on 01/19/2007.

Dick Dibble
Title V Air General Permits

Lick Willel.

UAN 1 9 2007

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

Bureau of Air Monitor & Mobile Source

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.

Fac	Facility Name and Location		
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):		
	OSHMAR, INC		
2.	Site Name (For example, plant name or number):		
	DRYCLEAN USP		
3.	Hazardous Waste Generator Identification Number:		
4.	Facility Location: 8633 NW 186 ST		
	City: MIAMI County: DADE Zip Code: 33015		
.5.	Facility Identification Number (DEP Use ONL-Y = do not fill in):		
	0250774		
24.23059			
	ponsible Official		
	Name and Title of Responsible Official:		
	ne: MIGUEL GONZALEZ Title: PRESIDENT		
7.	Responsible Official Mailing Address:		
	Organization/Firm: Street Address: 8633 NW 186 ST		
	Responsible Official Mailing Address: Organization/Firm: Street Address: 8633 Nw 186 S/ City: MIAMI Responsible Official Telephone Number: Zip Code:330/5		
	MILMIT DAVE 2015		
8.	/? · · · · · · // · · · · // · · · · · // · · · · · · · · // ·		
	Telephone: (954)559 8014 Fax: (954 435 - 4574		
Fac	ility 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: () -		

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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 Status Control Device Required* Date Control Device Installed From Manufacturer (circle one) (circle one) (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 RC = refrigerated condenser CA = carbon adsorber *CONTROL DEVICE KEY: 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 Status Control Device Required* Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Existing/New RC/CA/None required RC/CA/None required Existing/New RC/CA/None required Existing/New *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

DEP Form No. 62-213.900(2)

Effective: 2/24/99

New store: New machine

Unopened store [___] (date of expected opening _

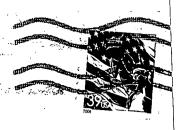
Check why it is less than 12 months: New owner: [___] Did not keep records: [___]

3. What is the facility's source classification based on the definitions found in section (3) of Part II? Indicate with an "X". Select one classification only.)				
Small Area Source	•			
Transfer only on-site (u	sed less than 140 gallons of perc per year) sed less than 200 gallons of perc per year) sed less than 140 gallons of perc per year)			
Large Area Source				
Transfer only on-site (u	sed 140 - 2,100 gallons of perc per year) sed 200 - 1,800 gallons of perc per year) sed 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 No such units on-site	OR			
How many boilers do you have on-site?				
For each boiler, indicate its horsepower (HP) rating: [_				
What type of fuel do you use? [] propane [] No. 2 fuel oi [] No. 6 fuel oi				
6. Equipment Monitoring and Recordkeeping Informati	on			
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/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				

DEP Form No. 62-213.900(2) Effective: 2/24/99

DRYCLEAN USA 2720-G S. Dixie Hwy. Miami, FL 33133 SOUTH FLORIDA PDC

FL 330, 4 L LZ JAN 2007 (PM)



GENERAL PERMITS SECTION

MS 5510

DEP.
2600 BLAIN STONE ROAD

TALLAHASSEE, FL 32399-2400

1002 SAESHEESSE

Indlantantalahdadhadhadalahdadalahdad

0250774-002

1.(ce) Add Date Control Device Installed in space provided.

page 16 5. Add HP for listed boiler.

Page 17

Responsible official sign and date for changes made.

DEP ROUTING AND TRANSMITTAL SLIP		
TO: (NAME, OFFICE, LOCATION)	. 3	
1	4.	
2		
PLEASE PREPARE REPLY FOR:	COMMENTS:	
SECRETARY'S SIGNATURE		
DIV/DIST DIR SIGNATURE		
MY SIGNATURE		
YOUR SIGNATURE		
DUE DATE	A STATE OF THE STATE OF THE STATE OF	
ACTION/DISPOSITION		
DISCUSS WITH ME		
COMMENTS/ADVISE	•	
REVIEW AND RETURN	,	
SET UP MEETING		
FOR YOUR INFORMATION	·	
HANDLE APPROPRIATELY		
INITIAL AND FORWARD		
SHARE WITH STAFF		
FOR YOUR FILES		
FROM:	DATE:PHONE:	

RECEIVED

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

SET - Monit Part III. Notification of Intent to Use General Permit Bureau of Air Monit Sources

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):				
2. Site Name (For example, plant name or number):	OSHMAR INC			
2. Site Name (For example, plant name or number):				
DRYCLEAN USA				
3. Hazardous Waste Generator Identification Number:				
FLD 984 218 073				
4. Facility Location:				
Street Address: 8633 NW 186 ST City: /// 1/2001 County: DAD	E Zip Code: 33015			
City: MIANI County: DAD	Zip code. 330(3			
5. Facility Identification Number (DEP Use ONLY - do not				
	0250174-002			
Responsible Official				
6. Name and Title of Responsible Official:	The second			
Name: Miguel Gonzalez	Title: Scenetary			
7. Responsible Official Mailing Address:	· · · · · · · · · · · · · · · · · · ·			
Organization/Firm:				
Street Address: SAME City: MIAMI County: DADE	Zip Code: 330 K			
Silvery Diff				
8. Responsible Official Telephone Number:				
Telephone: (305)829 - 1901	Fax: (954) 435-4574			
<u> </u>				
Facility Contact (If different from Responsible Official)				
9. Name and Title of Facility Contact (For example, plant m	anager):			
10. Facility Contact Address:	· · · · · · · · · · · · · · · · · · ·			
Const. A 11 and 1				
Street Address: City: County:	Zip Code:			
County.	Zip Code.			
11. Facility Contact Telephone Number:				
Telephone: () -	Fax: ()			

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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 mach	nine 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")			
FCB 1992	ExistingNe	RC/CA/None required				
	Existing/Nev	w RC/CA/None required				
	Existing/Nev	w RC/CA/None required				
*CONTROL DEVICE K	EY: $RC = re$	frigerated condenser $CA = c$	arbon adsorber			
1.(b) TRANSFER MAC. How many washers do yo How many dryers/reclaim	ou have on-site?	n-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				
<u> </u>	Essisation - Altanoa					
	Existing/New	RC/CA/None required				
	Existing/New Existing/New	RC/CA/None required RC/CA/None required				
*CONTROL DEVICE K	Existing/New EY: RC = re	RC/CA/None required frigerated condenser	arbon adsorber			
2.(a) How much perchlor	Existing/New EY: RC = re roethylene (perc) h	RC/CA/None required frigerated condenser $CA = c$ have you used within the last 12 mo				
2.(a) How much perchlor [/20] gallor	Existing/New EY: RC = re roethylene (perc) h ns (You must fill t	RC/CA/None required frigerated condenser				
2.(a) How much perchlor [120] gallor (b) If less than 12 more	Existing/New EY: RC = re roethylene (perc) h ns (You must fill to nths, how many? [RC/CA/None required frigerated condenser	nths?			

DEP Form No. 62-213.900(2) Effective: 2/24/99

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 Transfer only on-site Both machine types on-site	(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)			
Large Area Source				
Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (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 [X]			
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 No such units on-site	X OR			
How many boilers do you have on-site?				
For each boiler, indicate its horsepower (HP) rating:				
What type of fuel do you use? [] propane [] No. 2 fuel [] No. 6 fuel				
6. Equipment Monitoring and Recordkeeping Inform	nation			
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				

DEP Form No. 62-213.900(2) Effective: 2/24/99

7. Surrender of Existing DEP Air Permit(s)				
Please indica	te with an "X" the appropriate selection:			
	I hereby surrender all existing DEP air permits authorizing operation of the facility indicated 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			
this notij statemen maintain comply v I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the atts made in this notification are true, accurate and complete. Further, I agree to operate and a the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form. Somptly notify the Department of any changes to the information contained in this notification. GIL GMALEL The of responsible official Date			

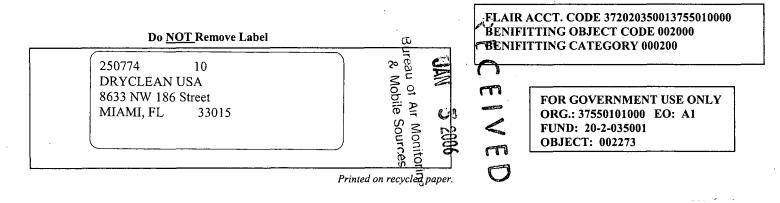
DEP Form No. 62-213.900(2)

Effective: 2/24/99

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

457484 DEC30 2005 Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00



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: Mobile Sources

Label

10

Do NOT Remove Label

AIRS ID# 250774 DRYCLEAN USA 8633 NW 186 Street MIAMI, FL 33015

Printed on recycled paper.

ORG.: 37550101000 EO: A1

FUND: 20-2-035001 **OBJECT: 002273**



(cut nere)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

435089 JAN 92884

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

250774 MIGUEL GONZALEZ DRYCLEAN USA 8633 NW 186TH STREET MIAMI FL 33015

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: AI

Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

421038 DEC23 2002

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#0250774

DRYCLEAN USA MIGUEL GONZALEZ 8633 NW 186TH STREET MIAMI FL 33015

FOR GOVERNMENT SE ONLY Org.: 3755 HOHOO A1 TO Fund: 20-2 13 Sign 1



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING DEC24 2001

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0250774

DRYCLEAN USA MIGUEL GONZALEZ 8633 NW 186TH STREET MIAMI FL 33015

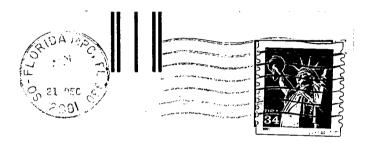
FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273

8633 NW 186 ST Miami, FL 33015



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

3231543070 33