



# Department of Environmental Protection

Lawton Chiles  
Governor

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

Virginia B. Wetherell  
Secretary

February 3, 1997

Mr. Miguel Gonzaler  
Dryclean USA  
2720-G South Dixie Highway  
Miami, Florida 33133

Re: Facility No. 0250775

Dear Mr. Gonzaler:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 20, 1996.

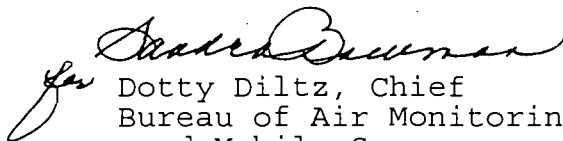
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

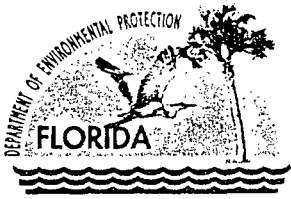
Sincerely,

  
Dotty Diltz, Chief  
Bureau of Air Monitoring  
and Mobile Sources

DD/jw

cc: Mr. Ewart Anderson, Dade County

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



# 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. Qurban Ali  
President  
Pal Cleaners  
17304 Collins Avenue  
North Miami Beach, Florida 33160

Re: Facility I.D. No. 0250775

Dear Mr. Ali:

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"*

#0250775

Dryclean USA

- spoke with business - 10/18/96
- spoke with Miguel Gonzalez

p.13 1. change to corporation name

p.14 3. should be new large area  
source - mark out 2<sup>nd</sup> "X"  
and initial

p.15 4. should be new large area  
source w/ refug. con. - mark out  
2<sup>nd</sup> "X" and initial  
5.(A) required

# Perchloroethylene Dry Cleaning Facility Notification

## Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): OSMAR GONZALEZ
2. Site Name (For example, plant name or number): DRYCLEAN USA
3. Hazardous Waste Generator Identification Number: FLO 000564377
4. Facility Location: Street Address: 2720-G S. DIXIE HWY City: MIAMI County: DADE Zip Code: 33133
5. Facility Identification Number (DEP Use): 0250445

## Responsible Official

6. Name and Title of Responsible Official: MIGUEL GONZALEZ, MANAGER
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 2720-G S. DIXIE HWY City: MIAMI County: DADE Zip Code: 33133
8. Responsible Official Telephone Number: Telephone: (305) 461-3366 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: ( ) -

RECEIVED

SEP 20 1996

### Facility Information

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Example</i>									
	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
<b>Dry-to-Dry Unit</b>									
(1) w/ ref. condenser	#1	JUL-94	JUL-94						
(2) w/ carbon adsorber									
(3) w/ no controls									
<b>Washer Unit</b>									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
<b>Dryer Unit</b>									
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
<b>Reclaimer Unit</b>									
(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?

140 gallons

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

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

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.)

NON  
large  
P.E.

Existing small area source

New small area source

Existing large area source

New large area source

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

Existing large area source

Carbon adsorber

Refrigerated condenser

New small area source

Refrigerated condenser

New large area source

Refrigerated condenser

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

*All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.*

All steam and hot water generating units exempt

No such units on-site

### Equipment Monitoring and Recordkeeping Information

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

(a) Purchase receipts and solvent purchases

(b) Leak detection inspection and repair

(c) Refrigerated condenser temperature monitoring

(d) Carbon adsorber exhaust perc concentration monitoring

(e) Instrument calibration

(f) Start-up, shutdown, malfunction plan

### Surrender of Existing Air Permit(s)

Please indicate with an "X" the appropriate selection:

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

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

### Responsible Official Certification

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

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

*Miguel Boyer*  
\_\_\_\_\_  
Signature

8/30/96  
\_\_\_\_\_  
Date

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT  
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY   
RE-INSPECTION

AIRS ID#: 250775 DATE: 8-18-98 TIME IN: 1400 TIME OUT: 1430  
FACILITY NAME: DRY CLEAN USA  
FACILITY LOCATION: 2720-G S-DIXIE HWY.  
MIAMI, 33133  
RESPONSIBLE OFFICIAL: MIGUEL GONZALEZ PHONE: 305-590-8866  
CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

RECEIVED  
Bureau of Air Monitoring  
SEP 28 1998  
Mobile Sources

PART I: NOTIFICATION

(check appropriate box)

1. New facility notified DARM 30 days prior to startup

2. Facility failed to notify DARM to use general permit

PART II: CLASSIFICATION

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

No notification form  
 Drop store/out of business/petroleum

A.

1. Existing small area source   
dry-to-dry only,  $x < 140$  gal/yr  
transfer only,  $x < 200$  gal/yr  
both types,  $x < 140$  gal/yr  
(constructed before 12/9/91)

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

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

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 80 gallons.

(NB)  
9/18/98  
ARMS

(NB)  
9/29/98



**PART III: GENERAL CONTROL REQUIREMENTS**

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

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

**PART IV: PROCESS VENT CONTROLS**

In Part II-A:

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

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

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

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

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

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

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

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

#### PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:  
(check appropriate boxes)

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

**PART VI: LEAK DETECTION AND REPAIRS**

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

M. ENRIQUE FLORES

Inspector's Name (Please Print)

M. Enrique Flores

Inspector's Signature

8-18-98

Date of Inspection

8/99

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

NO STATE LOG BOOK GIVEN. OWNER USING HIS OWN.

INSPECTION SUMMARY REPORT

BEST AVAILABLE COPY

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION

TIME IN: 1400 TIME OUT: 1430 AIRS ID#: 750  
 TYPE OF FACILITY: PERC DRY CLEANER  
 FACILITY NAME: DRYCLEAN USA DATE: 8-18-98  
 FACILITY LOCATION: 2720-G S. DIXIE HWY.  
MIAMI  
 RESPONSIBLE OFFICIAL: MIGUEL HONZALEZ PHONE NUMBER: 305-461-3366

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

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
FAILURE TO MAINTAIN A BI-WEEKLY LEAK INSPECTION LOG BOOK	START DOCUMENTING ALL LEAK INSPECTIONS DONE.

COMMENTS: EQUIPMENT IN GOOD WORKING ORDER.

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

DATE OF NEXT INSPECTION: 8/99  
 (Approximate)

INSPECTION CONDUCTED BY: M. ENRIQUE FLORES  
 (Please Print)

INSPECTOR'S SIGNATURE: Miguel Flores PHONE NUMBER: 305-372-6925

DRY CLEANER AIR QUALITY GENERAL PERMIT  
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: DRY CLEAN USA DATE: 8-18-98  
FACILITY LOCATION: 2720-G S. DIXIE HWY  
MIAMI, 33133

Annual Reporting Period: 8/97 19 TO 8/98 19

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

If NO, complete the following:

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

DID NOT MAINTAINED A LEAK INSPECTION

Exact period of non-compliance: from 8/97 to 8/98

Action(s) taken to achieve compliance: START RECORDING BI-WEEKLY LEAK INSPECTIONS

Method used to demonstrate compliance: \_\_\_\_\_

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

RECEIVED

Exact period of non-compliance: from \_\_\_\_\_ to \_\_\_\_\_

SEP 28 1998

Action(s) taken to achieve compliance: \_\_\_\_\_

Method used to demonstrate compliance: \_\_\_\_\_ Bureau of Air Monitoring & Mobile Sources

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: Miguel Gonzalez Miguel Gonzalez 8/18/98  
Name (Please Print) Signature Date

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

acc ✓ 301558

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

Bureau of Air Monitoring  
& Mobile Sources

RECEIVED  
FEB 4 1998  
RECEIVED  
MAIL ROOM  
FEB - 2 98

AIRS ID#0250775
OSMAR GONZALES MIGUEL GONZALES 2720-G S DIXIE HWY MIAMI FL 33133

Do NOT Remove Label

Annual Reporting Period: JAN 1 1997 TO DEC 31 1998

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

If NO, complete the following:

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

Exact period of non-compliance: from \_\_\_\_\_ to \_\_\_\_\_

Action(s) taken to achieve compliance: \_\_\_\_\_

Method used to demonstrate compliance: \_\_\_\_\_

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

Exact period of non-compliance: from \_\_\_\_\_ to \_\_\_\_\_

Action(s) taken to achieve compliance: \_\_\_\_\_

Method used to demonstrate compliance: \_\_\_\_\_

*As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.*

RESPONSIBLE OFFICIAL: MIGUEL GONZALES Miguel Gonzalez 1/27/97  
Name (Please Print) Signature Date

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



# PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY   
 RE-INSPECTION

AIRS ID#: 0250775 DATE: 3-6-97 TIME IN: 9:45 am TIME OUT: 10:15 am  
 FACILITY NAME: Dry Clean USA  
 FACILITY LOCATION: 2720 - G South Dixie Hwy.  
Miami, Fl. 33133

### PART I: NOTIFICATION

(check appropriate box)

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

### PART II: CLASSIFICATION

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

A.

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

This is a correct facility classification  Y  N

If no, please check the appropriate classification:

facility qualified for a general permit as number \_\_\_\_\_ above  
 facility exceeds above limits and is not eligible for a general permit

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was \_\_\_\_\_ gallons. no receipts.

MB  
3/14/97



**PART III: GENERAL CONTROL REQUIREMENTS**

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

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

**PART IV: PROCESS VENT CONTROLS**

In Part II-A:

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

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

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

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

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

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

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

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

**PART V: RECORDKEEPING REQUIREMENTS**

Has the responsible official:  
(check appropriate boxes)

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

**PART VI: LEAK DETECTION AND REPAIRS**

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

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

Visual examination (condensed solvent on exterior surfaces)  Y  N

Physical detection (airflow felt through gaskets)  Y  N

Odor (noticeable perc odor)  Y  N

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Y  N

If using direct-reading instrumentation, is the equipment:

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  Y  N

b. Calibrated against a standard gas prior to and after each use (PID/FID only)?  Y  N

c. Inspected for leaks and obvious signs of wear on a weekly basis?  Y  N

d. Kept in a clean and secure area when not in use?  Y  N

e. Verified for accuracy by use of duplicate samples (calorimetric only)?  Y  N

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

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

Hose connections, fittings, couplings, and valves  Y  N

Door gaskets and seating  Y  N

Filter gaskets and seating  Y  N

Pumps  Y  N

Solvent tanks and containers  Y  N

Water separators  Y  N

Muck cookers  Y  N

Stills  Y  N

Exhaust dampers  Y  N

Diverter valves  Y  N

Cartridge filter housings  Y  N

Alonso Langarica

Name of Responsible Official

Rosana RIVERA

Inspector's Name (Please Print)

Rosana R  
Inspector's Signature

3.6.97

Date of Inspection

3.98

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Mr. Alonso Langarica, manager, said that he could not sign <sup>for</sup> the changes that are needed in the notification form. Hence, no changes/corrections were made.

RS ID#: #0250775

acc  
pc

DRY CLEANER AIR QUALITY GENERAL PERMIT  
ANNUAL COMPLIANCE CERTIFICATION FORM

RECEIVED

FACILITY NAME: Dry Clean USA DATE: JUN 11 1997  
 FACILITY LOCATION: 2720 - G South Dixie Hwy. Air Quality  
Miami, FL. 33133

RECEIVED

Annual Reporting Period: JANUARY 1996 TO December 1996  
Air Quality

JUL 24 1997

Management Division

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

If NO, complete the following:

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

Exact period of non-compliance: from \_\_\_\_\_ to \_\_\_\_\_

Action(s) taken to achieve compliance: \_\_\_\_\_

Method used to demonstrate compliance: \_\_\_\_\_

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

RECEIVED

Exact period of non-compliance: from \_\_\_\_\_ to \_\_\_\_\_

AUG 22 1997

Action(s) taken to achieve compliance: \_\_\_\_\_

Method used to demonstrate compliance: \_\_\_\_\_

Bureau of Air Monitoring & Mobile Sources

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: Miguel Gonzalez Miguel Gonzalez 6/9/97  
 Name (Please Print) Signature Date  
Miguel Gonzalez Miguel Gonzalez 8/11/97

\*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.

DEPT. OF ENVIRONMENTAL 248955  
RESOURCES MANAGEMENT (DERM)  
AIR QUALITY MANAGEMENT DIVISION  
33 S.W. SECOND AVENUE, SUITE 900  
MIAMI, FLORIDA 33130-1540



TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION

TIME IN: 9:45 am TIME OUT: 10:30 am AIRS ID#: 0250775  
 TYPE OF FACILITY: Dry Cleaner  
 FACILITY NAME: Dry Clean USA DATE: 3-6-97  
 FACILITY LOCATION: 2720-G S. Dixie Hwy.  
Miami, FL  
 RESPONSIBLE OFFICIAL: Miguel Gonzalez PHONE NUMBER: \_\_\_\_\_

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

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
No pec purchase receipts on site.	Must keep copies of all pec. purchase receipts on site.
No condenser temperature log on-site.	Must measure & record the condenser temperature on a weekly basis.
No pec purchase log on site.	Must record all pec purchases in a rolling log.
No leak detection log on-site.	Must inspect and record leak detections of dry cleaning unit. (Weekly)
No startup/shutdown/mal-function plan on-site.	Must keep said document/plan on-site.

COMMENTS: Mr. Alenso Langarica did not agree in making changes/corrections into the Initial Notification form.

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

DATE OF NEXT INSPECTION: 3-98

(Approximate)

INSPECTION CONDUCTED BY: Rosana Rivera

(Please Print)

INSPECTOR'S SIGNATURE: Rosana Rivera PHONE NUMBER: 372-6942

# PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY   
RE-INSPECTION

6/11/99  
AIRS ID#: 0250775 DATE: ~~11-2-99~~ TIME IN: 12:30 PM TIME OUT: 12:33  
FACILITY NAME: Dry Clean USA  
FACILITY LOCATION: 2720-G Miami, 33133  
RESPONSIBLE OFFICIAL: Miguel Gonzalez PHONE: 461-3366  
CONTACT NAME: Miguel Gonzalez PHONE: \_\_\_\_\_

Area of Air Monitoring & Mobile Sources  
SEP 15 1999  
RECEIVED

### PART I: NOTIFICATION

(check appropriate box)

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

### PART II: CLASSIFICATION

Facility indicated on notification form that it is:

(check appropriate box)

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

A.

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

If no, please check the appropriate classification:

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

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

Review  
6/21/99  
DG

ARMS  
6/16/99

**PART III: GENERAL CONTROL REQUIREMENTS**

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

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

**PART IV: PROCESS VENT CONTROLS**

In Part II-A:

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

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

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

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

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

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



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

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

**PART V: RECORDKEEPING REQUIREMENTS**

Has the responsible official:  
(check appropriate boxes)

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

**PART VI: LEAK DETECTION AND REPAIRS**

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

LEO SMART

Inspector's Name (Please Print)

*[Handwritten Signature]*

Inspector's Signature

11/6/99

Date of Inspection

6/2000

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

I need FDEP Calendar

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

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY  RE-INSPECTION

TIME IN: 12:08 TIME OUT: 12:33 pm AIRS ID#: 0250775  
 TYPE OF FACILITY: Peru Dry Cleaner 10/11/99  
 FACILITY NAME: Dry Clean USA DATE: 11/6/99  
 FACILITY LOCATION: 2720 - Co S Dixie Hwy  
 RESPONSIBLE OFFICIAL: OSMAR Gonzalez PHONE NUMBER: 461 3366

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

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
NO leak log	needs leak log
NO Rec consumption log	needs consumption log
NO Receipts	needs receipt

COMMENTS:

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

DATE OF NEXT INSPECTION: 6/2000  
(Approximate)

INSPECTION CONDUCTED BY: LEO SMART  
(Please Print)

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

ACC

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

FACILITY NAME: Dry Clean USA DATE: 12-11-99  
 FACILITY LOCATION: 2720 - G S - Dixie

Annual Reporting Period: June 1998 TO June 1999

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

If NO, complete the following:

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

no leak log, receipt + Per Consumption log

Exact period of non-compliance: from June 98 to June 99

Action(s) taken to achieve compliance: keep records

Method used to demonstrate compliance: FDEP Calendar

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

Exact period of non-compliance: from \_\_\_\_\_ to \_\_\_\_\_

Action(s) taken to achieve compliance: \_\_\_\_\_

Method used to demonstrate compliance: \_\_\_\_\_

*As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.*

RESPONSIBLE OFFICIAL: OSMAR GONZALEZ [Signature] 11/6/99  
 Name (Please Print) Signature Date  
011/99

\*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/DISCOVERY   
RE-INSPECTION

AIRS ID#: 0250775 DATE: 3/15/00 TIME IN: 1330 TIME OUT: 1400  
FACILITY NAME: Dry Clean USA  
FACILITY LOCATION: 2720-G South Dixie  
Miami, FL 33133  
RESPONSIBLE OFFICIAL: Miguel Gonzalez PHONE: 305-461-3366  
CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

### PART I: NOTIFICATION

(check appropriate box)

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

Bureau of Air  
& Mobile  
Source  
Inspection

RECEIVED  
MAR - 15 2000

### PART II: CLASSIFICATION

Facility indicated on notification form that it is:

(check appropriate box)

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

A.

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

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

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

If no, please check the appropriate classification:

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

\*see note on last page.

- B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 210 gallons.

AMS  
3/27/00  
DG

4/18/00  
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?  Y  N  N/A
- 2. Examining the containers for leakage?  Y  N  N/A
- 3. Closing and securing machine doors except during loading/unloading?  Y  N
- 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?  Y  N  N/A
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?  Y  N  N/A

**PART IV: PROCESS VENT CONTROLS**

In Part II-A:

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

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

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

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

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

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

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

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

**PART V: RECORDKEEPING REQUIREMENTS**

**Has the responsible official:**

(check appropriate boxes)

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



**PART VI: LEAK DETECTION AND REPAIRS**

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

Ivan Fanni  
Inspector's Name (Please Print)

3/15/00  
Date of Inspection

Ivan Fanni  
Inspector's Signature

3/01  
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Not maintaining rolling log

Not recording temperature

Not maintaining receipts of  
pete purchases

(Machine not in use at time of inspection)

P.O. faxed receipts on 3/20/00.

200 gallons 3/99 - 3/00.

Number is high b/c '98 #'s could not  
be ~~deducted~~ deducted.

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

TYPE OF INSPECTION: ANNUAL  COMPLAINT/DISCOVERY  RE-INSPECTION

TIME IN: 1330 TIME OUT: 1400 AIRS ID#: 0250775  
 TYPE OF FACILITY: Perc Dry Cleaner  
 FACILITY NAME: Dry Clean USA DATE: 3/15/00  
 FACILITY LOCATION: 2720-G South Dixie  
Miami, FL  
 RESPONSIBLE OFFICIAL: Miguel Gonzalez PHONE NUMBER: 305-461-3366

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

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
<i>Not recording temperature</i>	<i>Record temperature in FDEP calendar</i>
<i>Not properly maintaining rolling log of perc purchases</i>	<i>Maintain log of perc purchases</i>
<i>Not maintaining receipts of perc purchases</i>	<i>Maintain receipts of all perc purchases for 5 year minimum</i>

COMMENTS:

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

DATE OF NEXT INSPECTION: 3/01  
(Approximate)

INSPECTION CONDUCTED BY: Ivan Fannin  
(Please Print)

INSPECTOR'S SIGNATURE: *Ivan Fannin* PHONE NUMBER: 305-372-6922

*acc*

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

**RECEIVED**  
DATE: 3/15/00  
**APR 05 2000**

FACILITY NAME: Dry Clean USA

FACILITY LOCATION: 2720-G South Dixie  
Miami, FL

Air Quality  
Management Division

Annual Reporting Period: March 1999 TO March 192000

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

If NO, complete the following:

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

Not properly maintaining temperature log or rolling log of perc  
Exact period of non-compliance: from March 99 to March 00

Action(s) taken to achieve compliance: Begin record keeping properly

Method used to demonstrate compliance: FDEP calendar

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

Not maintaining rolling log of perc purchases  
Exact period of non-compliance: from March 99 to March 00

Action(s) taken to achieve compliance: Maintain log properly

Method used to demonstrate compliance: FDEP calendar

*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: Miguel Gonzalez Miguel Gonzalez 4/2/00  
Name (Please Print) Signature Date

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

ACC

METROPOLITAN DADE COUNTY, FLORIDA



NOTICE OF VIOLATION

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

TO: Miguel Gonzalez

ADDRESS: 2700-G South Dixie, Miami, FL

SOURCE/LOCATION: Dry Clean USA

YOU ARE HEREBY NOTIFIED that on 3/15/00 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 Stage II Vapor Recovery
- Non-compliance with CFC regulations
- OTHER

Specifically: Not complying with Title V General Air Permit Rule 62-213.300(6)(a) Recordkeeping Requirements. Facility is required to properly maintain temperature log, leak log, and rolling log of pore purchases.

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 30 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. Begin proper recordkeeping.
- 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.

Sincerely,  
John W. Renfrow, P.E.  
Director

Received by: Freddy Foster  
Title: front DESK  
Date: 3/15/00

By: Ivan Fannin  
Signature: Ivan Fannin  
Section: Air FACILITIES

METROPOLITAN DADE COUNTY, FLORIDA



NOTICE OF VIOLATION

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

TO: Miguel Gonzalez

ADDRESS: 2700-G South Dixie, Miami, FL

SOURCE/LOCATION: Dry Clean USA

YOU ARE HEREBY NOTIFIED that on 3/15/00 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 Stage II Vapor Recovery
- Non-compliance with CFC regulations
- OTHER

Specifically: Not in compliance with Rule 62-213.300(4)(a) Title V General Air Permit Record Keeping Requirements. Facility must maintain receipts of perc purchases available at time of inspection.

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 7 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 1999 and 2000 receipts for perc purchases.
- 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.

Sincerely,

John W. Renfrow, P.E.  
Director

By: Ivan Fannin

Signature: [Signature]

Section: Air FACILITIES

Received by: Ruth Foster

Title: FRONT DESK

Date: 3/15/00

METROPOLITAN DADE COUNTY, FLORIDA



**NOTICE OF VIOLATION**

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

TO: Miguel Gonzalez  
ADDRESS: 2720-G South Dixie, Miami, FL  
SOURCE/LOCATION: Dry Clean USA

YOU ARE HEREBY NOTIFIED that on 3/15/00 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
- Uncontrolled fugitive particulates
- Non-compliance with Stage II Vapor Recovery
- Excessive Visible Emissions
- Improper handling/removal of asbestos
- Non-compliance with CFC regulations
- OTHER

Specifically: Not in compliance with Rule 62-213.300(6)(a) Title V General Air Permit Record Keeping Requirements. Facility must maintain receipts of parc purchases available at time of inspection.

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 7 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 1999 and 2000 receipts for parc purchases.
- 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.

Sincerely,

372-6954

John W. Renfrow, P.E.  
Director

By: Ivan Ferrin

Signature: [Signature]

Section: Air Facilities

Received by: Ruth Jos for

Title: FRONT DESK

Date: 3/15/00

BEST AVAILABLE COPY

Industrial Equipment and Supplies  
 2055 NW 7th Avenue  
 Miami, Florida 33127  
 (305) 324-0410  
 1-800-969-4766 (Florida Only)

09/21/99 10:27 AM

INVOICE NUMBER: 171460

ORDER DATE: 09/21/99

SOLD TO: DRY CLEAN USA  
 DR272 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP VIA OUR TRUCK      FOB MANNY      P.O. #      TERMS Net 30 days      SM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT	PRC	EXTENSIO
1)	✓ 2.00	2.00	0.00		Case	FURITANLARGE	Furitan Ige Format Carbon	✓	74.60	149.2
2)	✓ 10.00	10.00	0.00	**	Gal	PERK	Perchloroethylene Tetrachlorethylene, 6.1, UN1897, PqIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751	✓	9.50	95.0
3)	✓ 3.00	3.00	0.00		Roll	DRYCLEAN40	Dry Clean USA Poly 40"	✓	24.60	73.8
4)	✓ 2.00	2.00	0.00		Roll	DRYCLEAN72	Dry Clean USA Poly 72"	✓	24.60	49.2
5)	✓ 3.00	3.00	0.00		BOX	ULTIMATEW500	18" ULTIMATE WHITE SHIRT H	✓	19.90	59.7
6)	✓ 5.00	5.00	0.00		Box	STRUT	Strut Hangers	✓	15.90	79.5

FOR YOUR CONVENIENCE WE NOW ACCEPT VISA, MASTERCARD AND AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALESPERSON FOR MONTHLY SPECIALS.

*Ernesto Fabian*  
 Signature \_\_\_\_\_ Date: \_\_\_\_\_

NET TOTAL \$ 506.40      FREIGHT SALES TAX PERC TAX ENVKN TAX ADF TAX REASON TOTAL  
 0 0      0.00 32.92 0.59 50.00 0.00 0.00 589.91

24 HOUR RECEIVED TIME MAR.20. 2:04PM

PRINT TIME MAR.20. 2:13PM



BEST AVAILABLE COPY

Industrial Equipment and Supplies  
 2055 NW 7th Avenue  
 Miami, Florida 33127  
 (305) 324-0410  
 1-800-969-4766 (Florida Only)

10/26/99 02:39 pm

INVOICE NUMBER: 173630

ORDER DATE: 10/26/99

SOLED TO: DRY CLEAN USA  
 DR272 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP VIA OUR TRUCK      FOB PAM      P.O. #      TERMS Net 30 days      SM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

QTY ORDERED	QTY SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT PRICE	EXTENSION
1)	4.00	4.00	0.00	Roll	DRYCLEANMO	Dry Clean USA Poly 40"	24.60	98.40
2)	1.00	1.00	0.00	Gal	PICRIN	Picrin Volatile Dry Spotter Trichloroethylene, Class 6.1, UN1710, Pg III Emergency number 1-800-228-5635 Ext.036	31.95	31.95
3)	1.00	1.00	0.00	Gal	PYPATEX	Pyratex Lipstick Paint Oil Flammable Liquid, N.O.S. Class 3.3, UN 1993, Pg. III Emergency Phone # 800-228-5635 Ext. 036	26.85	26.85
4)	1.00	1.00	0.00	Bott	RUSTGO	Rust Go 14 oz. Single Shi Hydrofluoric Acid Solution Subsidiary Risk 6.1 UN-1790, PG II Emergency Phone # 800-424-9300 Corrosive Class 8	12.85	12.85
5)	4.00	4.00	0.00	Bott	STREPRO	Streepro Protein Spotter	3.75	15.00
6)	1.00	1.00	0.00	Gal	SODIUMPERBO	Sodium Perborate Granular	10.95	10.95
7)	4.00	4.00	0.00	Box	DRYCLEANHANG	14 1/2 Dry Clean U.S.A. Ha	33.90	135.60
8)	8.00	8.00	0.00	BOX	ULTIMATE500	18" ULTIMATE WHITE SHIRT H	19.90	159.20
9)	8.00	8.00	0.00	Box	STRUT	Strut Hangers	15.90	127.20
10)	19.50	19.50	0.00	Gal	PERK	Perchloroethylene Tetrachloroethylene, 6.1, UN1897, PgIII, RD, Marine Pollutant. EMERGENCY # (316) 524-5751	7.50	146.25
11)	1.00	1.00	0.00	Each	MISC	SPOTTING BOTTLES	0.00	0.00

*Returned PERC*

FOR YOUR CONVENIENCE WE NOW ACCEPT VISA, MASTERCARD AND AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALESPERSON FOR MONTHLY SPECIALS.

*Eudym Fabian 12/1/99*  
 Signature \_\_\_\_\_ Date: \_\_\_\_\_

SUBTOTAL	764.25	0.00	0.00	FREIGHT	0.00	SALES TAX	49.68	PERC TAX	1.15	ENVRN TAX	97.50	ADF TAX	0.00	REGCOM	0.00	TOTAL	912.58
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24 HOUR RECEIVED TIME MAR.20. 2:04PM      PRINT TIME MAR.20. 2:13PM

BEST AVAILABLE COPY

Industrial Equipment and Supplies  
2055 NW 7th Avenue  
Miami, Florida 33127  
(305) 324-0410  
1-800-969-4766 (Florida Only)

05/04/99 02:32 pm  
ORDER NUMBER: 163101  
ORDER DATE: 05/04/99

SOLD TO: DRY CLEAN USA  
DR272 OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP VIA OUR TRUCK FOB MANNY P.O. # TERMS Not 30 days SM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON  
TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT PRC	EXTENSION
1)	5.00	5.00	0.00		Roll	DRYCLEAN40	Dry Clean USA Poly 40" ✓	24.60	123.00
2)	1.00	1.00	0.00		Roll	DRYCLEAN54	Dry Clean USA Poly 54" ✓	24.60	24.60
3)	1.00	1.00	0.00		Roll	BLUEPOLY72	Blue Poly 72" ✓	25.50	25.50
4)	3.00	3.00	0.00		Box	DRYCLEANHANG	14 1/2 Dry Clean U.S.A. Ha ✓	33.90	101.70
5)	4.00	4.00	0.00		BOX	ULTIMATEW500	18" ULTIMATE WHITE SHIRT H ✓	19.90	79.60
6)	6.00	6.00	0.00		Box	STRUT	Strut Hangers ✓	15.90	95.40
7)	19.50	19.50	0.00	**	Gal	PERK	Perchloroethylene ✓	7.50	146.25
							Tetrachloroethylene, 6.1, UN1897, P&III, RQ, Marine Pollutant. EMERGENCY# (316) 524-5751 ✓		

FOR YOUR CONVENIENCE, WE NOW ACCEPT VISA, MASTERCARD,  
AND AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALES  
REPRESENTATIVE FOR OUR MONTHLY SPECIALS!!!!

*Evelyn Fabian 5/6/99*  
Signature Date:

SUBTOTAL 596.05 0 0 FREIGHT SALES TAX 0.00 38.74 PERS TAX 1.15 ENVRN TAX 97.50 ADF TAX 0.00 REGCOM 0.00 TOTAL 733.44

24 HOUR RECEIVED TIME MAR.20. 2:04PM PRINT TIME MAR.20. 2:13PM

Industrial Equipment and Supplies  
2055 NW 7th Avenue  
Miami, Florida 33127  
(305) 324-0410  
1-800-969-4766 (Florida Only)

08/26/99 11:40 am

ORDER NUMBER: 170023

ORDER DATE: 08/26/99

SOLD TO: DRY CLEAN USA  
DR272 OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP VIA  
OUR TRUCK

FOB  
MANNY

P.O. #

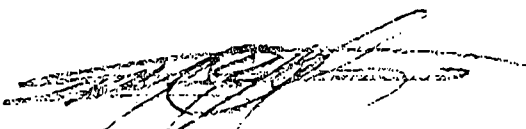
TERMS  
Net 30 days

SM  
07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON  
TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT	PRC	EXTENSION
1)	39.00	39.00	0.00	**	Gal	PERK	Perchloroethylene Tetrachlorethylene, 6.1, UN1897, PgIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751	7.50		292.50

FOR YOUR CONVENIENCE WE NOW ACCEPT VISA, MASTERCARD AND  
AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALESPERSON FOR  
MONTHLY SPECIALS.

  
-----  
Signature Date:

SUBTOTAL	292.50	0	0	FREIGHT	0.00	SALES TAX	19.01	PERC TAX	2.30	ENVRN TAX	195.00	ADF TAX	0.00	REGCOM	0.00	TOTAL	508.81
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24 HOUR EMERGENCY NUMBER

RECEIVED TIME MAR.20. 2:04PM

PRINT TIME MAR.20. 2:13PM

BEST AVAILABLE COPY

Industrial Equipment and Supplies  
2055 NW 7th Avenue  
Miami, Florida 33127  
(305) 324-0410  
1-800-989-4766 (Florida Only)

03/24/99 11:31 am  
ORDER NUMBER: 160489  
ORDER DATE: 03/24/99

SELL TO: DRY CLEAN USA  
DR272 OSMAR GONZALEZ  
2720/G.S. DIXIE HWY  
MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
OSMAR GONZALEZ  
2720/G.S. DIXIE HWY  
MIAMI FL 33133

SHIP VIA OUR TRUCK      FOB MANNY      P.O. #      TERMS Net 30 days      SM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT PRC	EXTENSION
1)	19.50	13.50	0.00	**	Gal	FEFK	Perchloroethylene Tetrachloroethylene, 6.1, UN1897, PqIII, RD Marine Pollutant. EMERGENCY # (310) 324-5761	7.50	

PLEASE NOTE: WE WILL BE CLOSED ON FRIDAY, APRIL 2 GOOD FRIDAY. HAVE A HAPPY EASTER!!!!!!!

*Osmar Gonzalez* 3/25/99  
Signature Date:

TOTAL 6.25    % 0    % 0    FREIGHT 0.00    SALES TAX 9.51    PERM TAX 1.15    EMVSN TAX 97.50    ADF TAX 0.00    TOTAL 254.41

24 HOUR SERVICE RECEIVED TIME MAR.20. 2:04PM

PRINT TIME MAR.20. 2:12PM

BEST AVAILABLE COPY

Industrial Equipment and Supplies  
2055 NW 7th Avenue  
Miami, Florida 33127  
(305) 324-0410  
1-800-969-4766 (Florida Only)

01/14/99 12:05 pm

ORDER NUMBER: 158109

ORDER DATE: 01/14/99

SELL TO: DRY CLEAN USA  
DR272 OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP VIA OUR TRUCK      FOB MANNY      P.O. #      TERMS Net 30 days      EM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LINE	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT PRICE	EXTENSION
1)	1.00	1.00	0.00		Roll	BLUEPOLY72	Blue Poly 72"	25.50	25.50
2)	4.00	4.00	0.00		Roll	DRYCLEAN40	Dry Clean USA Poly 40"	24.60	98.40
3)	1.00	1.00	0.00		Roll	DRYCLEAN54	Dry Clean USA Poly 54" ✓	24.60	24.60
4)	6.00	6.00	0.00		Box	DRYCLEANMAN15	14 1/2 Dry Clean U.S.A. ✓	33.90	203.40
5)	8.00	8.00	0.00		Box	STRUT	Strut Hangers ✓	15.90	127.20
6)	8.00	8.00	0.00		BOX	ULTIMATE500	18" ULTIMATE WHITE SHIRT H ✓	19.90	119.40
7)	19.50	19.50	0.00		Gel	FEFK	Perchloroethylene Tetrachloroethylene, 6.1. UN1897, PgIII, RC ✓ Marine Pollutant. EMERGENCY # (316) 524-5751	7.50	146.25

WE A HAPPY & PROSPEROUS NEW YEAR!!!!  
SEE ALL OF YOUR FRIENDS AT INDUSTRIAL.

*Eugenio Fabian*  
Signature \_\_\_\_\_ Date: \_\_\_\_\_

SUBTOTAL	80.75	FREIGHT	0.00	SALES TAX	48.41	PORT TAX	1.15	EMMAN TAX	97.50	ADF TAX	0.00	TOTAL	831.81
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24 HOUR RECEIVED TIME MAR.20. 2:04PM      PRINT TIME MAR.20. 2:12PM

BEST AVAILABLE COPY

Industrial Equipment and Supplies  
2055 NW 7th Avenue  
Miami, Florida 33127  
(305) 324-0410  
1-800-969-4766 (Florida Only)

07/30/99 02:58 pm

ORDER NUMBER: 168491

ORDER DATE: 07/30/99

SOLD TO: DRY CLEAN USA  
DR272 OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
OSMAR GONZALEZ  
2720/G S. DIXIE HWY  
MIAMI FL 33133

SHIP VIA  
OUR TRUCK

FOB

P.O. #

TERMS  
Net 30 days

SM  
07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON  
TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT PRG	EXTENSION
1)	19.50	19.50	0.00	**	Gal	PERK	Perchloroethylene Tetrachlorethylene, 6.1, UN1897, PgIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751	7.50	146.25
2)	✓ 1.00	1.00	0.00		Box	SSV SORRYTAGS #16	SSV Sorry But Tags	12.80	12.80
3)	✓ 2.00	2.00	0.00		Case	PURITANLARGE	Puritan Ige Format Carbon	74.60	149.20

FOR YOUR CONVENIENCE WE NOW ACCEPT VISA, MASTERCARD AND  
AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALESPERSON FOR  
MONTHLY SPECIALS.

*Miguel Gonzalez* 8-5/99  
Signature Date:

SUBTOTAL	%	FREIGHT	SALES TAX	PERC TAX	ENVRN TAX	ADF TAX	REGCOM	TOTAL
308.25	0 0	0.00	20.04	1.15	97.50	0.00	0.00	426.94

24 HOUR RECEIVED TIME: MAR.20. 2:04PM

PRINT TIME: MAR.20. 2:12PM

BEST AVAILABLE COPY

Industrial Equipment and Supplies  
 2055 NW 7th Avenue  
 Miami, Florida 33127  
 (305) 324-0410  
 1-800-969-4766 (Florida Only)

10/22/99 10:27 am

INVOICE NUMBER: 173396

ORDER DATE: 10/22/99

SOLD TO: DRY CLEAN USA  
 DR272 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133


SHIP TO: DRY CLEAN USA  
 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP VIA FOB P.O. # TERMS SM  
 OUR TRUCK RICKY Net 30 days 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON  
 TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT	PRC	EXTENSIO
1)	39.00	39.00	0.00	**	Gal	PERK	Perchloroethylene Tetrachlorethylene, 6.1, UN1897, PgIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751	7.50		292.5
2)	1.00	1.00	0.00		Each	DENNISONGUN	Fine Fabric Grip Gun	27.55		27.5

FOR YOUR CONVENIENCE WE NOW ACCEPT VISA, MASTERCARD AND  
 AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALESPERSON FOR  
 MONTHLY SPECIALS.

  
 Signature Date:

SUBTOTAL \$ \$ FREIGHT SALES TAX PERC TAX ENVRN TAX ADF TAX REECON TOTAL  
 320.05 0 0 0.00 20.80 2.30 195.00 0.00 0.00 538.15

24 HOUR RECEIVED TIMEBIMAR.20. 2:04PM PRINT TIME MAR.20. 2:12PM

BEST AVAILABLE COPY

Industrial Equipment and Supplies  
 2055 NW 7th Avenue  
 Miami, Florida 33127  
 (305) 324-0410  
 1-800-969-4766 (FLORIDA ONLY)

01/20/00 01:59 PM

INVOICE NUMBER: 179171

ORDER DATE: 01/20/00

SOLD TO: DRY CLEAN USA  
 DR272 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP VIA OUR TRUCK      FOB FRANK      P.O. #      TERMS Net 30 days      SM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT	PRC	EXTENSION
1)	4.00	4.00	0.00		Roll	DRYCLEAN40	Dry Clean USA Poly 40"		27.30	109.20
2)	5.00	5.00	0.00		Box	DRYCLEANHANG	14 1/2 Dry Clean U.S.A. Ha		33.90	203.40
3)	5.00	5.00	0.00		BOX	ULTIMATEW500	18" ULTIMATE WHITE SHIRT H		19.90	119.40
4)	8.00	8.00	0.00		Box	STKUT	Strut Hangers		15.90	127.20
5)	1.00	1.00	0.00	**	Gal	PYRATEx	Pyratex Lipstick Paint Oil Flammable Liquid, N.O.S. Class 3.3, UN 1993, Pg. III Emergency Phone # 800-228-5635 Ext. 036		27.85	27.85
6)	1.00	1.00	0.00		Gal	STREETEX	Streetex-Non Fla. Spray Sp		18.95	18.95
7)	1.00	1.00	0.00	**	Bott	RUSTGO	Rust Go 14 oz. Single Shi Hydroflouric Acid Solution Subsidiary Risk 6.1 UN-1790, PG II Emergency Phone # 800-424-9300 Corrosive Class 8		12.85	12.85
8)	19.50	19.50	0.00	**	Gal	PERK	Perchloroethylene Tetrachlorethylene, 6.1, UN1897, PgIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751		7.50	146.25
9)	1.00	1.00	0.00		Each	PURITANCC	Puritan Carbon Core		23.05	23.05

FOR YOUR CONVENIENCE, WE ACCEPT VISA, MASTERCARD, AND AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALES REPRESENTATIVE FOR MONTHLY SPECIALS!!!!!!!!!!

*Miguel Gonzalez*  
 Signature \_\_\_\_\_ Date: 1-21-00

SUBTOTAL \$ 788.15    FREIGHT 0.00    SALES TAX 51.23    PERC TAX 1.15    ENVRN TAX 97.50    ADF TAX 0.00    REGCOM 0.00    TOTAL 938.03

RECEIVED TIME MAR.20. 2:04PM      PRINT TIME MAR.20. 2:12PM



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Industrial Equipment and Supplies  
 2055 NW 7th Avenue  
 Miami, Florida 33127  
 (305) 324-0410  
 1-800-969-4766 (FLORIDA ONLY)

02/10/00 04:31 pm

INVOICE NUMBER: 180634

ORDER DATE: 02/10/00

SOLD TO: DRY CLEAN USA  
 DR272 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP VIA OUR TRUCK      FOB RICKY      P.O. #      TERMS Net 30 days      SM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT	PRC	EXTENSION
1)	4.00	4.00	0.00		Box	DRYCLEANHANG	14 1/2 Dry Clean U.S.A. Ha	33.90		135.6
2)	6.00	6.00	0.00		Box	STRUT	Strut Hangers	15.90		95.4
3)	6.00	6.00	0.00		BOX	ULTIMATEW500	18" ULTIMATE WHITE SHIRT H	20.90		125.4
4)	5.00	5.00	0.00		Roll	DRYCLEAN40	Dry Clean USA Poly 40"	27.30		136.5
5)	1.00	1.00	0.00	**	Gal	PYRATEX	Pyratex Lipstick Paint Oil	27.85		27.85
							Flammable Liquid, N.O.S. Class 3.3, UN 1993, Pg. III			
							Emergency Phone # 800-228-5635 Ext. 036			
6)	1.00	1.00	0.00	**	Gal	PICRIN	Picrin Volatile Dry Spotte	32.45		32.45
							Trichloroethylene, Class 6.1, UN1710, Pg III			
							Emergency number 1-800-228-5635 Ext.036			
7)	1.00	1.00	0.00	**	Quar	YELLOWGOOS/S	Yellow Go Quart Single Shi	26.95		26.95
							Titanium Sulfate Solution / Ammonium Hydrogen Floride			
							Solution, Corrosive Liquid N.O.S.			
							8, Subsidiary Risk 6.1 UN-1760, PG II			
							Emergency Phone # 800-424-9300			

FOR YOUR CONVENIENCE, WE ACCEPT VISA, MASTERCARD, AND AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALES REPRESENTATIVE FOR MONTHLY SPECIALS!!!!!!!!!!!!

*Evelyn Fabian* 2-11-00

Signature

Date:

SUBTOTAL % %      FREIGHT SALES TAX      PERC TAX      ENVRN TAX      ADF TAX      REGCOM      TOTAL  
 580.15 0 0      0.00      37.71      0.00      0.00      0.00      0.00      617.86

24 HOUR RECEIVED TIME JMB MAR.20. 2:04PM

PRINT TIME MAR.20. 2:12PM

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Industrial Equipment and Supplies  
 2055 NW 7th Avenue  
 Miami, Florida 33127  
 (305) 324-0410  
 1-800-969-4766 (FLORIDA ONLY)

02/29/00 02:17 pm

INVOICE NUMBER: 101016

ORDER DATE: 02/29/00

SOLD TO: DRY CLEAN USA  
 DR272 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP TO: DRY CLEAN USA  
 OSMAR GONZALEZ  
 2720/G S. DIXIE HWY  
 MIAMI FL 33133

SHIP VIA OUR TRUCK      FOB DINA      P.O. #      TERMS Net 30 days      SM 07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

LN#	ORDERED	SHIPPED	BACKORD	H/M	UNIT	PRODUCT #	DESCRIPTION	UNIT	PRC	EXTENSION
1)	5.00	5.00	0.00		Box	DRYCLEANFANG	14 1/2 Dry Clean U.S.A. Ha	33.90		169.50
2)	5.00	5.00	0.00		BOX	ULTIMATE500	18" ULTIMATE WHITE SHIRT H	19.90		99.50
3)	6.00	6.00	0.00		Box	STAUT	Strut Hangers	15.90		95.40
4)	3.00	3.00	0.00		Roll	DRYCLEAN40	Dry Clean USA Poly 40"	27.30		81.90
5)	1.00	1.00	0.00	**	Bott	RUSTGO	Rust Go 14 oz. Single Shi	12.85		12.85
							Hydrofluoric Acid Solution Subsidiary Risk 6.1 UN-1790, PG II Emergency Phone # 800-424-9300 Corrosive Class 8			
6)	1.00	1.00	0.00	**	Gal	PYRATEX	Fyratex Lipstick Paint Oil	27.85		27.85
							Flammable Liquid, N.O.S. Class 3.3, UN 1993, Pg. III Emergency Phone # 800-228-5635 Ext. 036			
7)	1.00	1.00	0.00		Gal	STREETEX	Streetex-Non Fla. Spray Sp	18.95		18.95
8)	19.50	19.50	0.00	**	Gal	PERK	Perchloroethylene	7.50		146.25
							Tetrachlorethylene, 6.1, UN1897, Pg III, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751			
9)	8.00	8.00	0.00		Each	FURITANOC	Puritan Carbon Core	20.80		166.40
10)	2.00	2.00	0.00		Case	PURITANLARGE	Puritan Lge Format Carbon	76.16		152.32

FOR YOUR CONVENIENCE, WE ACCEPT VISA, MASTERCARD, AND AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALES REPRESENTATIVE FOR MONTHLY SPECIALS!!!!!!!!!!!!

*Escobar Fabian* 3/1/00  
 Signature Date:

SUBTOTAL	970.92	0	0	FREIGHT	0.00	SALES TAX	63.11	PERC TAX	1.15	ENVRN TAX	97.50	ADF TAX	0.00	REGCOM	0.00	TOTAL	1132.68
RECEIVED TIME	MAR.20. 2:04PM		PRINT TIME	MAR.20. 2:12PM		24 HOUR EMERGENCY NUMBER											

Fold at line over top

**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 can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: AIRS ID # 0250775

DRYCLEAN USA  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

4a. Article Number  
2 333 660 477

4b. Service Type

Registered  Certified  
 Express Mail  Insured  
 Return Receipt for Merchandise  COD

7. Date of Delivery  
2/13/95

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
X *Kathy Foster*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-97-B-0179 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 333 660 477 1999

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

Sent to

AIRS ID # 0250775

DRYCLEAN USA  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

Certified fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly) _____ B. Date of Delivery <u>8-20-01</u>
1. Article Addressed to:  10 AIRS ID # 0250775001AG MIGUEL GONZALES DRYCLEAN USA 2720-G S DIXIE HWY MIAMI FL 33133	C. Signature <input checked="" type="checkbox"/> <u>Pedro Bayona</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No  <u>PEDRO BAYONA</u>
2. Article Number (Copy from service label) <u>700 006 00 002641303031</u>	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789	

U.S. Postal Service <b>CERTIFIED MAIL RECEIPT</b> (Domestic Mail Only; No Insurance Coverage Provided)																
7000 0600 0026 4130 3031	<table border="1"> <tr> <td>Postage \$</td> <td></td> <td rowspan="4" style="text-align: center; vertical-align: middle;">Postmark Here</td> </tr> <tr> <td>Certified Fee</td> <td></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td colspan="2">           10 AIRS ID # 0250775001AG            MIGUEL GONZALES            DRYCLEAN USA            2720-G S DIXIE HWY            MIAMI FL 33133         </td> <td style="text-align: center; vertical-align: middle;"> <i>ke... [Signature]</i> </td> </tr> <tr> <td colspan="2"></td> <td style="text-align: center;">See for Instructions</td> </tr> </table>	Postage \$		Postmark Here	Certified Fee		Return Receipt Fee (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)		10 AIRS ID # 0250775001AG MIGUEL GONZALES DRYCLEAN USA 2720-G S DIXIE HWY MIAMI FL 33133		<i>ke... [Signature]</i>			See for Instructions
Postage \$		Postmark Here														
Certified Fee																
Return Receipt Fee (Endorsement Required)																
Restricted Delivery Fee (Endorsement Required)																
10 AIRS ID # 0250775001AG MIGUEL GONZALES DRYCLEAN USA 2720-G S DIXIE HWY MIAMI FL 33133		<i>ke... [Signature]</i>														
		See for Instructions														

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

400571

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 # 0250775

DRYCLEAN USA  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

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

RECEIVED  
MAIL ROOM  
DEC 20 00

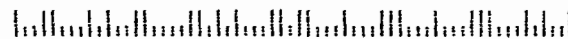
8633 NW 186 ST  
Miami, FL 33015

2000



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

32315X3070



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0390359

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

DRYCLEAN USA  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

AIRS ID # 0250775

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

JAN-4 00

RECEIVED  
MAIL ROOM

Fold at line over top of envelope to  
the right of the address

**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 can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

AIRS ID # 0250775

DRYCLEAN USA  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

4a. Article Number  
**P174052677**

4b. Service Type

Registered  Certified  
 Express Mail  Insured  
 Return Receipt for Merchandise  COD

7. Date of Delivery  
**2-11-99**

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
**X** *[Signature]*

8. Addressee's Address (Only if requested and fee is paid)

Is your RETURN ADDRESS completed on the reverse side?

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 174 052 677

1999

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

Sent to

AIRS ID # 0250775

DRYCLEAN USA  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995



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

301558 ✓

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

OSMAR GONZALES  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

AIRS ID#0250775

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



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0361952

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

✓  
RECEIVED  
MAIL ROOM

**TOTAL AMOUNT DUE: \$50.00**

FEB 25 99

**Do NOT Remove Label**

AIRS ID # 0250775

DRYCLEAN USA  
MIGUEL GONZALES  
2720-G S DIXIE HWY  
MIAMI FL 33133

**FOR GOVERNMENT USE ONLY**

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