

Department of Environmental Protection

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

David B. Struhs Secretary

April 1, 2002

Mr. Milton Goris Best Cleaners 18712 Northwest 67 Avenue Miami, Florida 33015

Re: Facility No.: 0251114-001

Dear Mr. Goris:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 22, 2002.

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,

Joe Kahn, Acting Chief Bureau of Air Monitoring

and Mobile Sources

JK/jw

cc: Ms. Mallika Muthiah, Dade County



Department of Environmental Protection

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

David B. Struhs Secretary

April 24, 2002

Mr. Milton Goris Best Cleaners 18712 Northwest 67 Avenue Miami, Florida 33015

Dear Mr. Goris:

The Bureau of Air Monitoring and Mobile Sources recently received your Perchloroethylene Dry Cleaning Notification Form and check (#1020) in the amount of \$50.

We appreciate your submittal. However, your check is being returned to you since it is not due at this time. Fees are due and payable between January 15 and March 1 in the year following each year for which the facility is in operation and subject to the requirements of the general permit. The Department will send you an invoice in time for the next payment cycle.

If you have any questions, please call me at 850/921-9583.

Sincerely,

Sandra Bowman

Environmental Manager

Mobile Source Control Section

LUCKY MEGA CORPORATION

DBA BEST CLEANERS 18712 N.W. 67TH AVE. MIAMI, FL 33015 PH. (305) 624-4474 .WASHINGTON MUTUAL BANK, FA
MIAMI/COUNTRY CLUB FINANCIAL CENTER 1751
MIAMI, FL 33015
63-8413-2670

4/20/00

PAY TO THE ORDER OF

Separtment of Environmental Proteccion 50. (Tifty dollars Od/ww)

DOLLARS

MEMO

Re: Facility # 025/114-001 Fille V General Permit





Department of Environmental Protection

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

David B. Struhs
Secretary

April 1, 2002

Mr. Milton Goris Best Cleaners 18712 Northwest 67 Avenue Miami, Florida 33015

Re: Facility No.: 0251114-001

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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,

Joe Kahn, Acting Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Ms. Mallika Muthiah, Dade County

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

Printed on recycled paper.

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FEB 2 2 200?

Facility Name and Location

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

FEB 1 4 2002

Air Quality

Bureau of Air Monitoring eau of Air Weau of Air Quality & Mobile Sources Part III. Notification of Intent to Use General Pennagement Division

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

1. Facility Owner/Company Name (wante of corporation, agency, or individual owner):
LUCKY MEGA CORP.
2. Site Name (For example, plant name or number):
BEST CEANERS
3. Hazardous Waste Generator Identification Number:
4. Facility Location: 18712 NW 67 ave
Street Address:
, ,
15. Facility Identification Number (DEP Use ONLY : doinot-fill in):
0251114=001
Responsible Official
6. Name and Title of Responsible Official:
Name: MILTON GORIS Title: PRESIDENT
7 December 11-1- Official Mailing Address.
Organization/Firm: Lucky MEGA CORT.
Street Address: 18712 W667 ave
Organization/Firm: Lucky MEGA CORP. Street Address: 18712 Nubb 67 ave City: MIAM County: PADE FC Zip Code: 330/5
8. Responsible Official Telephone Number:
8. Responsible Official Telephone Number: Telephone: (305) 624 - 4474 Fax: (305) 829 - 9048
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
N/A
10. Facility Contact Address:
Street Address:
City: County: Zip Code:
11. Facility Contact Telephone Number:
Telephone: () - Fax: () -

DEP Form No. 62-213.900(2)

Effective: 2/24/99

TBD 06000

Facility Information -

1.(a) DRY-TO-DRY MACHINES ONLY How many dry-to-dry machines do you have on-site? For each dry-to-dry machine on-site, please provide the following information: Control Device Required* Date Control Device Installed Date Initially Purchased Status From Manufacturer (circle one) (circle one) (if already included at time of ... purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 1.(b) TRANSFER MACHINES ONLY How many washers do you have on-site? How many dryers/reclaimers do you have on-site? If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an EXISTING unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a NEW unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information: Date Initially Purchased Control Device Required* Date Control Device Installed Status From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Existing/New RC/CA/None required RC/CA/None required Existing/New Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 2.(a) How much perchloroethylene (perc) have you used within the last 12 months? [80] gallons (You must fill this in) (b) If less than 12 months, how many? [____] months Check why it is less than 12 months: New owner: [\(\sum_{\text{\tilitet{\texi}\text{\text{\text{\texitex{\texi{\texi}\text{\texi}\text{\text{\text{\text{\texi}\text{\ New store: [___] New machine [___] Unopened store [____] (date of expected opening

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

3. What is the facility's source classification based on the Indicate with an "X". Select one classification only.	definitions found in section (3) of Part II?
Small Area Source	
Transfer only on-site (use	ed less than 140 gallons of perc per year) and less than 200 gallons of perc per year) and less than 140 gallons of perc per year)
Large Area Source []	.
Transfer only on-site (use	d 140 - 2,100 gallons of perc per year) d 200 - 1,800 gallons of perc per year) d 140 - 1,800 gallons of perc per year)
4. What control technology is required on machines pursu (Indicate with an "X".)	nant to section (5) of Part II of this notification form?
Existing machines at small area source (NONE REQUIRED)	New machines at small area source Refrigerated condenser [X]
Existing machines at large area source Carbon adsorber [] Refrigerated condenser []	New machines at large area source Refrigerated condenser []
5. A facility which contains non-exempt emissions units Rule 62-213.300, F.A.C. Verify that all steam and hot we exemption criteria or that no such units exist on-site (see	ater generating units on-site meet the following
All steam and hot water generating units exempt No such units on-site	_] OR _]
How many boilers do you have on-site?	NE ATHIS TIME
For each boiler, indicate its horsepower (HP) rating: [_] []
What type of fuel do you use? [] propane [] No. 2 fuel oil [] No. 6 fuel oil	[] natural gas [] No. 4 fuel oil [] Other (please list)
6. Equipment Monitoring and Recordkeeping Informatio	n
Check all logs which are required to be kept on-site in ac	cordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases/solvent addit	ion log [X]
(b) Leak detection inspection and repair	[X]
(c) Refrigerated condenser temperature monitoring	[上]
(d) Carbon adsorber exhaust perc concentration monitori	ng [<u>×</u>]
(e) Startup, shutdown, malfunction plan	<u>(</u>

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

7. Surrender of Existing DEP Air Permit(s) Please indicate with an "X" the appropriate selection: [_____] I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are No DEP air permits currently exist for the operation of the facility indicated in this notification form. Responsible Official Certification I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification. I will promptly notify the Department of any changes to the information contained in this notification. Print name of responsible official

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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APR 2 5 2002

Bureau of Air Monitoring AIR GENERAL PERMIT NOTIFICATION FORM

& Mobile Sources



APR 1 9 2002

Air Quality

Part III. Notification of Intent to Use General Permittanagement Division

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

Facility Name and Location	
1. Facility Owner/Company Name (Name of co	orporation, agency, or individual owner):
Lucky Mega Cor	paration
2. Site Name (For example, plant name or number	der):
Best cleaners	(DBA)
3. Hazardous Waste Generator Identification Nu	imber:
4. Facility Location: 18712 NW	67 AVE
City: MIAMI Coul	ry: DADE Zip Code: 33015
5 Pacific detains and Sound of the Cit	LY - ato accirit (ig)
A comment of the comm	0251111
Responsible Official	0251114
6. Name and Title of Responsible Official: Name:	Tiele
Milton F. GOR	is President
7. Responsible Official Mailing Address:	
Organization/Firm: Street Address: 18712 NW	62 Ave
City: County:	Zin Code: 53-
City: Miani DAD	PC Zip Code: 33 8/5
8. Responsible Official Telephone Number:	
Telephone: (305 624-44)	4 Fax: (305) 829-9048
Facility Contact (If different from Responsible 9. Name and Title of Facility Contact (Ros good	Official)
9. Name and Title of Facility Contact (For exam	pie, plant manager):
10.5	ple, plant manager):
10. Facility Contact Address:	
Street Address	
City: County:	Zip Code:
11 Facility Contact Telephone Number:	
Telephone: () 4	Pax: () -
DED 1: No. 72 212 00072	

(a) የነፃነር ይደ ልዩም እነተለ ብር መጀመር የነፃነር መጀመር የ

Effective: 2/24/99

RECEIVED TIME APR.19. 11:30AM

PRINT TIME APR.19. 11:33AM

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BEST AVAILABLE COPY

•		F 7 m	•
Facility Information			
1.(a) DRY-TO-DRY M	ACHINES ONLY		
How many dry-to-dry made			
		provide the following informati	ion:
Date Initially Purchased	Status	Control Device Required*	Date Control Device Installed
From Manufacturer	(circle one)	(circle one)	(if already included at time of
0/1/01			purchase, write "SAME")
0/6/71	Existing/New	RC/CA/None required	
,	Existing/New	RE/CA/None required	
	Existingitiew	& CONTONE LEGITIES	
	Existing/New	RC/CA/None required	
*CONTROL DEVICE KE	X: RC = refr	igera ed condenser CA:	= carbon adsorber
			-
1.(b) TRANSFER MACE			
How many washers do you	have on-site?		
How many dryers/reclaime	ers do you have on-	site?	_
Date Initially Purchased	Status	please provide the following in Contro Device Required circle one)	Date Control Device Installed (If already included at time of purchase, write "SAMB")
			pulctuse, write SAIVIS)
	Existi:.5/New F	RC/CA/None required	
· ·	Existing/New F	RC/CA/None required	
	•		
	Existing/New F	RC/CA None required	
*CONTROL DEVICE KE	EY: $RC = refr$	rigerated condenser CA =	= carbon adsorber
		and a sight of the form 17.	
_		ve you used within the last 12	months :
[] gallon	s (You niust fill th	nis in)	•
(b) If less than 12 mon	ths, how many? [_	2 months	•
Check why it is less			
\	s than 12 months: I	New owner: [X] Did not ke	ep records: []
		New owner: [X] Did not ke New store: [] New machin	
	. 1	New store: [] New machin	
	. 1	New store: [] New machin	ne []

	<u> </u>		
3. What is the facility's source classif Indicate with an "X". Select one			3) of Part II?
Small Area Source	LX		
Dry-to-dry machine Transfer only on-sin Both machine types	te (use	ed less than 140 gallons of pen ed less than 200 gallons of pen ed less than 140 gallons of pen	c per year)
Large Area Source	()		
Dry-to-dry machine Transfer only on-si Both machine types	te (use	ed 140 - 2,100 gallons of perc ed 200 - 1,800 gallons of perc ed 140 - 1,800 gallons of perc	per year)
4. What control technology is require (Indicate with an "X".)	d on machines purs	uant to section (5) of Part II of	f this notification form?
Existing machines at small a (NONE REQUIRED)	area source	New machines at small a Refrigerated condenser	rea source
Existing machines at large a Carbon adsorber [Refrigerated condenser [rea source	New machines at large a Refrigerated condenser	rea source
5. A facility which contains non-exe Rule 62-213.300, F.A.C. Verify that exemption criteria or that no such un	all steam and hot w	ater generating units on-site n	neet the following
All steam and hot water generating u No such units on-site	nits exempt	OR	
How many boilers do you have on-sit	æ? []	11	
For each boiler, indicate its horsepow	ver (HP) rating: [. *16°
What type of fuel do you use?] propane] No. 2 fuel oil] No. 6 fuel oil	[] natural gas [] No. 4 fuel oil [] Other (please list)	, electric
6. Equipment Monitoring and Record	dkeeping Informatio	n.	
Check all logs which are required to	be kept on-site in ac	cordance with the requiremen	ts of this general permit:
(a) Purchase receipts and solvent pur	chases/solvent addit	ion log	
(b) Leak detection inspection and rep	Pàir 💮	山	
(c) Refrigerated condenser temperatu	ire monitoring	[]	
(d) Carbon adsorber exhaust perc cor	ncentration monitori	ng []	·
(e) Startup, shutdown, malfunction p	nBlc	(X)	

DEP Form No. 62-213.900(2)

Effective: 2/24/99

16

PRINT TIME APR.19, 11:33AM

7. Surrender of Existing DEP Air Permit(s)	
Please indicate with an "X" the appropriate selec	ion:

I hereby parrender all existing DIP air permits authorizing operation of the facility indicated in this notification form; the permit humber(s) are

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

Responsible Official Certification

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

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

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RECEIVED TIME



DE248955



MIAMI-DADE COUNTY, FLORIDA ENVIRONMENTAL RESOURCES MANAGEMENT AIR QUALITY MANAGEMENT DIVISION 33 SW 2nd AVENUE SUITE 900 MIAMI FLORIDA 33130-1540 161.01-44 4/02

> Attn: Sandy Bowman FDEP, DARM MS 5500 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

