

## Florida Department of **Environmental Protection**

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400

December 12, 2008

Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

Mr. Harry Birbragher B.K. Cleaners, LLC 120 Southwest 13<sup>th</sup> Street Miami, Florida 33130

Re: Facility No.: 0250812-004

Dear Mr. Birbragher:

The Department has received the General Permit Notification Form for the dry cleaning facility that you submitted on November 10, 2008.

As you know, pursuant to Florida Statutes section 403.814(1), authority to operate under general permits commences thirty (30) days after receipt of the notification form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after five (5) years. Therefore, a new registration form must be received no later than five (5) years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

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:

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.

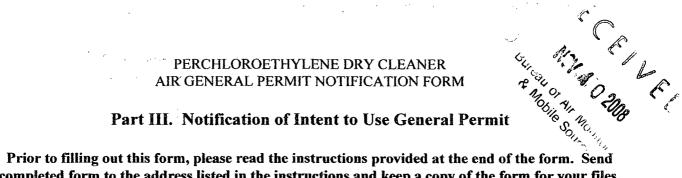
Sandra F. Veazey, Chief Bureau of Air Monitoring

and Mobile Sources

SFV/pg

cc: Ms. Mallika Muthiah, Miami-Dade County

INSP-INSA- Conflance Inspections Wallthrough -12/10/2007 - IN INSP-Manil Dade la Monthian



completed form to the address listed in the instructions and keep a copy of the form for your files.

Fa	cility Name and Location	
1.	Facility Owner/Company Name (Name of corporation, agency, or individual	ual owner):
B	RICKELL CLEANERS 0 8 A BK CLEANERS L.L.C	,
2.	Site Name (For example, plant name or number):	
	SAME	
3.	Hazardous Waste Generator Identification Number:	
	FLR 000038532	
4.	Facility Location: Street Address: 120 SW 1357	
	City: MIRMI County: MIRMI DADE	Zip Code: 33130
5:	Facility Identification Number (DEP Use ONLY - do not fill in):	60010 A
	Facility Identification Number (DEP Use ONLY - do not fill in):	5081/50
Re	sponsible Official	
i	1	
Na	Title: PRE Title:	SIDENT
7.	1 5	
	Organization/Firm: Street Address: 120 SW 13 8 T	
	City: MIRMI DADE	Zip Code: 33130 -4211
		. 32120 - 7 211
8.		
	Telephone: (305 )854 - 3035 Fax: (	) -
	cility Contact (If different from Responsible Official)  Name and Title of Facility Contact (For example, plant manager):	
	THOMAS TAMAYO VICEPRESIDENT	
10.	Facility Contact Address:	
	Street Address: 120 SW 13 ST	
	City: MIRMI County: MIRMI DADE	Zip Code: <b>33130</b>
11.	Facility Contact Telephone Number:	
	Telephone: ( ) - Fax: (	) -

\* SEE ATTACHMENT AS AN ADDENOUM TO THIS APPLICATION - PAGES 14 & 15. FOR COMPLETE INFORMATION.

## **Facility Information**

	ACHINES ONL	Y	
How many dry-to-dry ma	chines do you hav	ve on-site?	
For each dry-to-dry mach	ine on-site, pleas	e provide the following information	n:
Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required*  (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
3-97	Existing	RC/CA/None required	
	Existing/No	ew RC/CA/None required	
	Existing/No	ew RC/CA/None required	
*CONTROL DEVICE K	EY: $RC = r$	refrigerated condenser CA =	carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY		
How many washers do yo	ou have on-site?		
How many dryers/reclaim	ners do you have o	on-site?	
			ecember 9, 1991, it is an <b>EXISTING</b> ecember 9, 1991 and September 22,
unit. If the transfer machi 1993, it is a NEW unit (n permit). For each transfe Date Initially Purchased	ne was purchased o units purchased		ecember 9, 1991 and September 22, wed to operate under this general
unit. If the transfer machi 1993, it is a <b>NEW</b> unit (n	ne was purchased o units purchased er machine on-site Status	from the manufacturer between De after September 22, 1993 are allow, please provide the following info  Control Device Required*	wed to operate under this general rmation:  Date Control Device Installed (if already included at time of
unit. If the transfer machi 1993, it is a NEW unit (n permit). For each transfe Date Initially Purchased	ne was purchased o units purchased er machine on-site Status (circle one)	from the manufacturer between Do after September 22, 1993 are allow e, please provide the following info Control Device Required* (circle one)	wed to operate under this general rmation:  Date Control Device Installed (if already included at time of
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unit. If the transfer machi 1993, it is a NEW unit (n permit). For each transfe Date Initially Purchased From Manufacturer  *CONTROL DEVICE K 2.(a) How much perchlor	ne was purchased o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New Existing/New	from the manufacturer between Do after September 22, 1993 are allowe, please provide the following info  Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  CA = thave you used within the last 12 metals after the september 22, 1993 are allowed and allowed are allowed as a september 24, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed and allowed are allowed as a september 25, 1993 are allowed and allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed at a september 25, 1993 are allowed as a september 25, 1993 are allowed as a september 25, 1993 are allowed and allowed are allowed as a september 25, 1993 are allowed as a septemb	ecember 9, 1991 and September 22, wed to operate under this general armation:  Date Control Device Installed (if already included at time of purchase, write "SAME")
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unit. If the transfer machi 1993, it is a NEW unit (n permit). For each transfe Date Initially Purchased From Manufacturer  *CONTROL DEVICE K  2.(a) How much perchlor  1953 gallor  (b) If less than 12 mon	ne was purchased o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New	from the manufacturer between Do after September 22, 1993 are allower, please provide the following information Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  CA = the characteristic from the last 12 months in)	ecember 9, 1991 and September 22, wed to operate under this general armation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  carbon adsorber  onths?
unit. If the transfer machi 1993, it is a NEW unit (n permit). For each transfe Date Initially Purchased From Manufacturer  *CONTROL DEVICE K  2.(a) How much perchlor  1953 gallor  (b) If less than 12 mon	ne was purchased o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New Existing/New	from the manufacturer between Do after September 22, 1993 are allowe, please provide the following info  Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  CA = thave you used within the last 12 months	ecember 9, 1991 and September 22, wed to operate under this general simulation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  carbon adsorber  p records: []

3. What is the facility's source classification base Indicate with an "X". Select one classification	d on the definitions found in section (3) of Part II?	
Small Area Source	J. P.	
Dry-to-dry machines only on-si Transfer only on-site Both machine types on-site	(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)	
Large Area Source [	_]	
Dry-to-dry machines only on-si Transfer only on-site Both machine types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)	
4. What control technology is required on machin (Indicate with an "X".)	nes pursuant 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 []	
Existing machines at large area source Carbon adsorber Refrigerated condenser	New machines at large area source Refrigerated condenser []	
	ns units shall not be eligible to use the general permit pursuant to ad hot water generating units on-site meet the following exemption ached memo for the criteria).	
All steam and hot water generating units exempt No such units on-site	OR	
How many boilers do you have on-site?		
For each boiler, indicate its horsepower (HP) ratio	ng: [ <u>20</u> ] []	
	ne	
6. Equipment Monitoring and Recordkeeping Info	ormation	
Check all logs which are required to be kept on-s	ite in accordance with the requirements of this general permit:	
(a) Purchase receipts and solvent purchases/solve	ent addition log	
(b) Leak detection inspection and repair	[ ك	
(c) Refrigerated condenser temperature monitoring		
(d) Carbon adsorber exhaust perc concentration n		
(e) Startup, shutdown, malfunction plan		

7. Surrender o	of Existing DEP Air Permit(s)
Please indicat	te 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 1,003 2004
	No DEP air permits currently exist for the operation of the facility indicated in this notification form
Responsible	Official Certification
this notify statement maintain comply w I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the airs made in this notification are true, accurate and complete. Further, I agree to operate and a the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.  SIRBRAGHER  The of responsible official
Signature	inharman HOV 3/08  Date
	•

Facility Information		host	
1.(a) DRY-TO-DRY M			·
How many dry-to-dry ma		•	
For each dry-to-dry mach	ine on-site, pleas	e provide the following information	on:
Date Initially Purchased From Manufacturer	Status (circle one	Control Device Required* ) (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
3-97	Existing	e RYCA/None required	SAME SAME
100.20-	Existing/No	ew RC/CA/None required	
	Existing/N	ew RC/CA/None required	
*CONTROL DEVICE K		refrigerated condenser CA	≃ carbon adsorber
1.(b) TRANSFER MAC		f 7	
How many washers do yo How many dryers/reclaim			
unit. If the transfer maching 1993, it is a NEW unit (m	ne was purchased o units purchased	from the manufacturer between D	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, owed to operate under this general cornation:
Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	-
`	oethylene (perc) i	nave you used within the last 12 m	earbon adsorber
	s (You must fili	·	
(b) If less than 12 mon			
Check why it is less	than 12 months:	New owner: [ ] Did not kee	
		New store: [] New machin	
		Unopened store [] (date of	expected opening )

3. What is the facility's source classification based on the definitions found in section (3) of Part 11?  Indicate with an "X". Select one classification only.)
NO NO
Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site  (used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)
Large Area Source
Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)  Transfer only on-site (used 200 - 1,800 gallons of perc per year)  Both machine types on-site (used 140 - 1,800 gallons of perc per year)
4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)
Existing machines at small area source (NONE REQUIRED)  [ ] New machines at small area source Refrigerated condenser [ ]
Existing machines at large area source Carbon adsorber  Refrigerated condenser    New machines at large area source   Refrigerated condenser
5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300. F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).
All steam and hot water generating units exempt  No such units on-site  OR
How many boilers do you have on-site? [1]
For each boiler, indicate its horsepower (HP) rating: {20} []
What type of firel do you use?      propanc
6. Equipment Monitoring and Recordkeeping Information
Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases/solvent addition log
(b) Leak detection inspection and repair
(c) Refrigerated condenser temperature monitoring
(d) Carbon adsorber exhaust perc concentration monitoring
(e) Startup, shutdown, malfunction plan

# \* ADDENDUMTO ORIGINAL APPLICATION DATED 11/10/08, PAGES 14 \$ 15.

## Dibble, Dickson

From:

Dibble, Dickson

Sent:

Tuesday, December 02, 2008 11:44 AM

To:

'ttamayojr@gmail.com'

Cc:

Bowman, Sandy

Subject:

AIRS ID# 0250812-004-AG, BK CLEANERS LLC d.b.a. BRICKELL CLEANERS

Attachments: 0250812-004-AG; BKCleanersLLC.pdf

Dear Mr. Thomas Tamayo,

I have attached a copy of the original Perchloroethylene Air General Permit Notification Form that was submitted by the Responsible Official, Mr. Harry Birbragher for the purpose of renewing your Air General permit.

On pps. 14 & 15, I have highlighted the areas of concern where questions were not answered or answered incorrectly based on other information supplied on the form.

Please provide the answers as soon as possible since we are getting very close to the end of the review period and as I mentioned during our conversation I do not want to have to deny the permit. You may do that simply by responding by e-mail and I will attach our correspondence as an addendum to the application for completeness.

Thank you for your immediate attention to this matter.

Have a great day!

Sincerely,

Dickson E. Dibble

## Dickson E. Dibble, ES III

FL Dept of Environmental Protection
Div. of Air Resource Management
Bureau of Air Monitoring & Mobile Sources
Air General Permit Program
Tel. (850) 921-9586
FAX (850) 922-6979
ICG-#345

Dickson.Dibble@dep.state.fl.us



**Please note**: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

FROM: BIRBRAGER

December 4 2.008

To: Dickson E. Dibble, ES III Fl Dep of Environmental Protection Fax 850 9226979

From: Brickell Cleaners Ph 305 8543035

Pages: 4 (13-14-15-16)

## PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

# it Control of the same of the

## Part III. Notification of Intent to Use General Permit

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

Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or indiv	idual owner):
B	DENCKELL CLEANERS   D   B   A BK CLEANEDS L.L.	Σ.
2.	Site Name (For example, plant name or number):	, (197 <b>4)</b> ,
	SAME	
3.	Hazardous Waste Generator Identification Number:	
	EFB 000038233	
4.	Facility Location: Street Address: 120 SW 1357	
	City: HIRMI COUNTY: MIRMI DADE	Zip Code: 33130
5.	Facility Identification Number (DEP Use ONLY - do not fill in):	250812-
Re	esponsible Official	. 100.000
6.	11222	
Na	Title: Pe	Ch301231
7.	Responsible Official Mailing Address: Organization/Firm: Street Address: 120 SW 13 ST	
	City: MIRMIDADE	Zip Code: 33130 - 4211
\$.	Responsible Official Telephone Number: Telephone: (305 )854 - 3035 Fax: (	· -
Ça.	citity Contact (If different from Responsible Official)	
	Name and Title of Facility Contact (For example, plant manager):	
	- 1 1 1 1	
	THOMAS TAMAYO VICEPRESIDENT	
	THOMAS TAMAYO VICEPRESIDENT  Facility Contact Address:	
	. Facility Contact Address:	Zip Code: <b>33130</b>
10.	Facility Contact Address: Street Address: 120 SW 13 57	Zip Code: 33130

DEP Form No. 62-213.900(2)

!3

Facility Information		•	
1.(a) DRY-TO-DRY M	ACHINES ONLY	v 480	
How many dry-to-dry ma	chines do you hav	e on-site?	· ·
For each dry-to-dry mach	ine on-site, please	provide the following information	<b>:</b>
Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if aiready included at time of purchase, write "SAME")
3-97	Existing	RYCA/None required	SAME
****	Existing/No	ew RC/CA/None required	- WATER
	Existing/Ne	ew RC/CA/None required	
*CONTROL DEVICE K	EY: RC = r	efrigerated condenser CA ==	carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY		
How many washers do yo	nu have on-site?		
How many dryers/reclaim	ers do you have o	on-site?	
			cember 9, 1991, it is an EXISTING
1993, it is a NEW unit (no permit). For each transfer	o units purchased er machine on-site	after September 22, 1993 are allow please provide the following infor	mation:
1993, it is a NEW unit (to	o units purchased	after September 22, 1993 are allow	red to operate under this general
1993, it is a NEW unit (permit). For each transfe Date Initially Purchased	o units purchased er machine on-site Status	after September 22, 1993 are allow , please provide the following infor Control Device Required*	red to operate under this general mation:  Date Control Device Installed (if already included at time of
1993, it is a NEW unit (permit). For each transfe Date Initially Purchased	o units purchased er machine on-site Status (circle one)	after September 22, 1993 are allow please provide the following infor Control Device Required* (circle one)	red to operate under this general mation:  Date Control Device Installed (if already included at time of
1993, it is a NEW unit (permit). For each transfe Date Initially Purchased	o units purchased er machine on-site Status (circle one) Existing/New	after September 22, 1993 are allow please provide the following infor Control Device Required* (circle one)  RC/CA/None required	red to operate under this general mation:  Date Control Device Installed (if already included at time of
1993, it is a NEW unit (permit). For each transfe Date Initially Purchased	o units purchased or machine on-site Status (circle one)  Existing/New Existing/New Existing/New	after September 22, 1993 are allow, please provide the following infor Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required	red to operate under this general mation:  Date Control Device Installed (if already included at time of
1993, it is a NEW unit (permit). For each transfe Date Initially Purchased From Manufacturer  *CONTROL DEVICE K. 2.(a) How much perchlor	o units purchased or machine on-site  Status (circle one)  Existing/New  Existing/New  Existing/New  Existing/New  Existing/New	after September 22, 1993 are allow, please provide the following infor  Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  cfrigerated condenser  CA = 6  cave you used within the last 12 mo	red to operate under this general mation:  Date Control Device Installed (if already included at time of purchase, write "SAME")
1993, it is a NEW unit (permit). For each transfe Date Initially Purchased From Manufacturer  *CONTROL DEVICE K. 2.(a) How much perchlor	o units purchased or machine on-site  Status (circle one)  Existing/New  Existing/New  Existing/New  Existing/New	after September 22, 1993 are allow, please provide the following infor  Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  cfrigerated condenser  CA = 6  cave you used within the last 12 mo	red to operate under this general mation:  Date Control Device Installed (if already included at time of purchase, write "SAME")
1993, it is a NEW unit (permit). For each transfer  Date Initially Purchased From Manufacturer  *CONTROL DEVICE K  2.(a) How much perchlor  195   gallor  (b) If less than 12 mon	o units purchased or machine on-site  Status (circle one)  Existing/New	after September 22, 1993 are allow, please provide the following infor Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  after september 22, 1993 are allow, please provide the following infor Control Device Required*  RC/CA/None required  CA = 0  Chis in)  ] months	red to operate under this general mation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  carbon adsorber  onths?
1993, it is a NEW unit (permit). For each transfer  Date Initially Purchased From Manufacturer  *CONTROL DEVICE K  2.(a) How much perchlor  195   gallor  (b) If less than 12 mon	o units purchased or machine on-site  Status (circle one)  Existing/New	after September 22, 1993 are allow, please provide the following infor Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  efrigerated condenser	red to operate under this general mation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  carbon adsorber  orths?
1993, it is a NEW unit (permit). For each transfer  Date Initially Purchased From Manufacturer  *CONTROL DEVICE K  2.(a) How much perchlor  195   gallor  (b) If less than 12 mon	o units purchased or machine on-site  Status (circle one)  Existing/New	after September 22, 1993 are allow, please provide the following infor Control Device Required* (circle one)  RC/CA/None required  RC/CA/None required  RC/CA/None required  after september 22, 1993 are allow, please provide the following infor Control Device Required*  RC/CA/None required  CA = 0  Chis in)  ] months	red to operate under this general mation:  Date Control Device Installed (if already included at time of purchase, write "SAME")  carbon adsorber  orecords: []

<ol><li>What is the facility's source classification bas Indicate with an "X". Select one classificat</li></ol>	ed on the definitions found in section (3) of Part 11?		
Small Area Source	Z NO WO A		
Dry-to-dry machines only on- Transfer only on-site Both machine types on-site	~ no 4/20		
Large Area Source			
Dry-to-dry machines only on- Transfer only on-site Both machine types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)		
<ol> <li>What control technology is required on mach (Indicate with an "X".)</li> </ol>	ines pursuant 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 [ ]		
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 emissic Rule 62-213.300, F.A.C. Verify that all steam a criteria or that no such units exist on-site (see att	ons units shall not be eligible to use the general permit pursuant to nd hot water generating units on-site meet the following exemption ached memo for the criteria).		
All steam and hot water generating units exempt No such units on-site	OR		
How many boilers do you have on-site?	:1		
For each boiler, indicate its horsepower (HP) rat	ing: [ <u>20</u> ][_]		
What type of fuel do you use?  [] No. 2  [] No. 6	anc [ ] natural gas 2 fuel oil [ ] No. 4 fuel oil 5 fuel oil [ ] Other (please list)		
6. Equipment Monitoring and Recordkeeping Ini	formation		
Check all logs which are required to be kept on-s	ite in accordance with the requirements of this general permit:		
(a) Purchase receipts and solvent purchases/solvent	ent addition log [ <u>*</u> ]		
(b) Leak detection inspection and repair	( <del>-\</del> x)		
(c) Refrigerated condenser temperature monitoring	ng (*)		
(d) Carbon adsorber exhaust perc concentration monitoring			
(e) Startup, shutdown, malfunction plan			

## \* ADDENDUMTO DEGINAL APPLICATION DATED 11/10/08, PAGES 14 \$15.

## Dibble, Dickson

From:

Dibble, Dickson

Sent:

Tuesday, December 02, 2008 11:44 AM

To:

'ttamayoir@gmail.com'

Cc:

Bowman, Sandy

Subject:

AIRS ID# 0250812-004-AG, BK CLEANERS LLC d.b.a. BRICKELL CLEANERS

Attachments: 0250812-004-AG; BKCleanersLLC.pdf

Dear Mr. Thomas Tamayo,

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Please provide the answers as soon as possible since we are getting very close to the end of the review period and as I mentioned during our conversation I do not want to have to deny the permit. You may do that simply by responding by e-mail and I will attach our correspondence as an addendum to the application for completeness.

Thank you for your immediate attention to this matter.

Have a great day!

Sincerely,

Dickson E. Dibble

### Dickson E. Dibble, ES III

FL Dept of Environmental Protection Div. of Air Resource Management Bureau of Air Monitoring & Mobile Sources Air General Permit Program Tel. (850) 921-9586 FAX (850) 922-6979 ICG-#345

## Dickson.Dibble@dep.state.fl.us



Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

120 SW 13TH ST MIRMI, FL 33130





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AIR GENERAL PERMIT PROGRAM
BUREAU OF AIR MONITORING AND MOBILE SOURCES, MS 5510

DEPARTMENT OF ENVIRONMENTAL PROTECTION

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