

Department of Environmental Protection

Lawton Chiles Governor Twin Towers Office Building 2600 Blair Stone Road Tallahassee. Florida 32399-2400

Virginia B. Wetherell Secretary

December 16, 1997

Mr. Mark Orlhac 176 Beach Laundry & Dry Cleaners 17612 Collins Avenue North Miami Beach, Florida 33160

Re: Facility No.: 0250895

Dear Mr. Orlhac:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 5, 1997.

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"

Bowman, Sandy

From: Barros, Marcelo (DERM) [BarroM@miamidade.gov]

Sent: Tuesday, October 21, 2003 4:27 PM

To: Bowman, Sandy

Cc: Fernandez, Cynthia (DERM)

Subject: RE: ARMS Database

Hi Sandy:

Please be informed that Cynthia is attending training in Tampa and she will be out of the office until Thursday. I need to discuss some of the cases you mention with her before giving you an answer. After that, I will E-mail you the status of all the pending cases.

As far as I know, the following facilities which are part of your list, need to be inactivated from ARMS and ASGP:

1-	0250966	ARTCRAFT	PETROLEUM
2-	0250907	TONI'S LAUNDRY & CLEANER	OOB
3-	0250895	176 BEACH LAUNDRY	OOB

In addition, the following facilities also need to be inactivated from ARMS and ASGP:

1-	0250700	ONE HOUR VALENTONE	DROP-OFF
2-	0250752	CRANDON CLEANERS	PETROLEUM
3-	0250791	DRYCLEAN USA	DROP-OFF
4-	0250793	DRYCLEAN USA	DROP-OFF
5-	0251061	DRYCLEAN USA	PETROLEUM
6-	0251071	DRYCLEAN USA	OOB
7-	0251118	AMERICAN CHROMING	OOB
8-	0251131	MIAMI'S BEST CLEANERS	PETROLEUM

Thanks for your help.

Marcelo.

----Original Message----

From: Bowman, Sandy [mailto:Sandy.Bowman@dep.state.fl.us]

Sent: Tuesday, October 21, 2003 11:08 AM

To: Barros, Marcelo (DERM) **Subject:** RE: ARMS Database

Good Morning Marcelo!

In looking through the ARMS database, I noticed that the entitlement for the following facilities has expired. The last time we heard from each (when they paid their annual emissions fee) is also identified below. The last year invoiced for the annual emissions fee is 2002 (invoices for 2003 will go out in December of 2003)

I suspect some of these facilities are no longer in operation. However, if they are still operating of course they will need to submit another notification form. If not, then I will need to inactivate them. With this information, I am hoping to make the database as current to the information you have as possible.

0250895 add Permit #'s of permit(s)
surrendered.
(DEP issued permity only)
Responsible Official sign and
date for changes.

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): MONIK BATTER PLASTES, TWC 2. Site Name (For example, plant name or number): 17C BENCH LAUNDRY & DUY CLERATION 3. Hazardous Waste Generator Identification Number: PLD 984 708567 4. Facility Location: 17612 Collins AVE Street Address: City Wallam Bench County: DDE Zip Code: 33/66 5. Facility Identification Number (DEP Use): Responsible Official 6. Name and Title of Responsible Official: MANK ONLHAC, OWNER
17C BEACH LAUNDRY & DUY CLEASTERS 3. Hazardous Waste Generator Identification Number: PLD 984 708587 4. Facility Location: 17612 Collans AVB Street Address: City: No Ham Bragen County: Dadie Zip Code: 33/66 5. Facility: Identification Number (DEP Use): Responsible Official 6. Name and Title of Responsible Official:
17C BEACH LAUNDRY & DUY CLEASTERS 3. Hazardous Waste Generator Identification Number: PLD 984 708587 4. Facility Location: 17612 Collans AVB Street Address: City: No Ham Bragen County: Dadie Zip Code: 33/66 5. Facility Identification Number (DEP Use): Responsible Official 6. Name and Title of Responsible Official:
FLD 984 708567 4. Facility Location: 17612 Collans AVE Street Address: City: No. HiAmi Brach County: DaDE Zip Code: 33/66 5. Facility Identification Number (DEP Use): Responsible Official
FLD 984 708567 4. Facility Location: 17612 Collans AVE Street Address: City: No. HiAmi Brach County: DaDE Zip Code: 33/66 5. Facility Identification Number (DEP Use): Responsible Official
City No. M/Ami Bracu County: DaDE Zip Code: 33/66 5: Facility Identification Number (DEP Use): COUNTY OF THE PROPERTY OF THE
City No. M/Ami Bracu County: DaDE Zip Code: 33/66 5: Facility Identification Number (DEP Use): COUNTY OF THE PROPERTY OF THE
55. Facility Identification Number (DEP Use): Responsible Official 6. Name and Title of Responsible Official:
Responsible Official 6. Name and Title of Responsible Official:
6. Name and Title of Responsible Official:
6. Name and Title of Responsible Official:
•
Mark Opel Mar autilia
7. Responsible Official Mailing Address:
Organization/Firm:
Street Address: SAME AS ABOVE
City: Zip Code: Zip Code:
8. Responsible Official Telephone Number:
Telephone: 305)932 - 3239 Fax: () -
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
MONIGUE ORLHAC
10. Facility Contact Address:
Street Address: City: Zip Code:
City: Zip Code:
11. Facility Contact Telephone Number:
Telephone: () - Fax: () -

RECEIVED

NOV 5 1997

DEP Form No. 62-213.900(2) Effective: 6-25-96

Page 13 of 16

Bureau of Air Monitoring & Mobile Sources

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.

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		lnitially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit								-	
(1) w/ ref. condenser		Aug Bl	6						
(2) w/ carbon adsorber		7 -							
(3) w/ no controls									
Washer Unit		• •							•
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls			1						
Dryer Unit		٠.			•			-	•
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit	٠.	1							
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are (c) No control devices 2.(a) What was the total of the control of the control devices (b) If less than 12 mont Check why it is less	are r quant gallo	equired to be ity of perchlons ow many? [_	installed [_oroethylene ((perc)	purchased in				لـــا
3. What is the facility's so (Indicate with an "X". Existing small ar	Selec	et one classif	cation only.)	initions found		3) of	Part II?	
Existing large are	ea so	urce []	N	ew la	rge area sour	ce []		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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
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
(d) Carbon adsorber exhaust perc concentration monitoring (e) Instrument calibration (f) Start-up, shutdown, malfunction plan
(f) Start-up, shutdown, malfunction plan

DEP Form No. 62-213.900(2) Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please indicate	te with an "X" the appropriate selection:							
K	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							
this notif statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in faction. I hereby certify, based on information and belief formed after reasonable inquiry, that the ts made in this notification are true, accurate and complete. Further, I agree to operate and 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.							
I will pro	omptly notify the Department of any changes to the information contained in this notification.							
Duc	20 Olles. x 9/17/97							

Acc

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

ACILITY NAME: 176 BEA	ACH LAUNDY AND	DRY CLEANERS		DATE: 9-2	19-98
FACILITY LOCATION: 174					
	11A.BCH. 33				
Annual Reporting Period:	SIPT. 97	_19	TO SEPT.	98	19
Based on each term or condition of 52-213,300, Florida Administrati	-	•	•	$\dot{\sim}$	ílc NO
If NO, complete the following:					
#1. Term or condition of the ger	neral permit that has r	not been in continuo	15 compliance during	the reporting period sta	ated above:
NO RECORDS OF PERC PURCHASE	3,		AND LEAK INSPE	ECTIONS KEPT ON S	TITE
Exact period of non-compliance:	from	SEPT. 97	to	SEDT. 98	
Action(s) taken to achieve comp	liance: RECORY, p	UILL BE KEPT AND VESS HOURS	MADE AVAILABL	E FOR INSPECTION	J BURING
Method used to demonstrate con	- 0				
#2. Term or condition of the ge	neral permit that has	not been in continue	us compliance during	the reporting period-st	tated above:
Exact period of non-compliance	: from		to	RECEIV	E D
Action(s) taken to achieve comp	oliance:			OCT 2 7 1998	<u>. </u>
Method used to demonstrate con	mpliance:		·	Bureau of Air Monit & Mobile Source	oring
As the responsible official, I he made in this notification are trapon rolling averages of purch year for transfer or combination RESPONSIBLE OFFICIAL:	ue, accurate and compase receipts, does not	plete. Further, my o	nnual consumption o	perchloroethylene sol dry facilities or 1,800	vent, based

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

^{*}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.

all

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID 0250895 MONIK ENTERPRISES INC MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160

Do NOT Remove Label

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.

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

Action(s) taken to achieve 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

Lact period of non-compliance: from

to

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.

^{*}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 RECEIVED

COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL		COMPLAINT/	DIDGTV 28.8 199	ð 🗀
	RE-INSPECTION	O	Ві	ureau of Air Mon & Mobile Source	
AIRS ID#: 250895	DATE: 9-29-98	TIME	N: 1145	TIME OUT:/	215
facility name:	BEACH LAUNDA	CY ! DRY	CLEANERS		
facility location: <u></u>	7612 COLLINS	AVE.			
	1. MIA. BCH. 3	3160			
RESPONSIBLE OFFICIAL:	MARK ORLHAD	<u>c</u>	PHONE: <u>30</u>	5 - 932 - 323	39
CONTACT NAME:	QUE DRLHAC		PHONE:	*/	
PART 1: NOTIFICATION					
(check appropriate box)				- 4	
1. New facility notified DARM	l 30 days prior to startu _l	р			
2. Facility failed to notify DAF	RM to use general permi	it			
				10-10-10-10-10-10-10-10-10-10-10-10-10-1	
PART II: CLASSIFICATIO	N	-			
Facility indicated on notificat	ion form that it is:		☐ No notifica	tion form	
(check appropriate box) A.	/		☐ Drop store/	out of business/pe	troleum
1. Existing small area soudry-to-dry only, x < 140 gatransfer only, x < 200 gally both types, x < 140 gallyr (constructed before 12/9/91	// <i>yr</i>	transfer only, x both types, x <	v, x < 140 gal/yr : < 200 gal/yr)	
3. Existing large area soudry-to-dry only, $140 \le x \le 1,800$ transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ (constructed before $12/9/97$)	2,100 gal/yr	transfer only, 1 both types, 14	area source y, $140 \le x \le 2,10$ $200 \le x \le 1,800$ § $0 \le x \le 1,800$ gal n or after $12/9/9$	gal/yr /yr	
5. This is a correct facility	classification	NO AO	ŒCan not de	termine	
☐ fac	e appropriate classificat ility qualified for a gene ility exceeds above limi	eral permit as i			
B. The total quantity of perch facility was WKK - gallor		chased within	the preceding 12	months by this dr	y cleaning

BEST AVAILABLE COPY

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?	OY ON ONIA
2. Examining the containers for leakage?	DY DN DN/A
3. Closing and securing machine doors except during loading/unloading?	DY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	MY ON ONIA
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON OTHIA
PART IV: PROCESS VENT CONTROLS	
In Part Il-A:	
If classification 1 has been checked, no controls are required. Proceed to Part V	<i>'</i> .
If classification 2 has been checked, the machine should be equipped with a refr (complete A below).	igerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber maprior to September 22, 1993	~
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	rigerated condenser
A. Has the responsible official of all new sources and existing large area source (check appropriate boxes)	25:
Equipped all machines with the appropriate vent controls?	CTY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	DY ON ONA
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	DY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY D 'N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON DINA
6. Conducted all temperature monitoring after an appropriate cooldown period and after	OY G N

В.	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?	ШΥ	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ПΥ	ПΝ	
	Is the temperature differential equal to or greater than 20° F?	ΠY	ПΝ	
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?	ΩY	ОΝ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ПΥ	ИO	□N/V
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?	ΟY	ПN	□N/∧
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ПN	
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПΝ	□N/A

🙀 e la companya di salah sala

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official:	
(check appropriate boxes)	,
1. Maintained receipts for perc purchased?	DY N
2. Maintained rolling monthly total of perc consumption?	DY DEN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON MONA
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days	
and parts installed w/in 5 days of receipt?	DY DN MONY
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN DN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN QNIA
6. Maintained startup/shutdown/malfunction plan?	DY CN
7. Maintained deviation reports?	OY ON QNIV
Problem corrected?	OY ON WYNN
8. Maintained compliance plan, if applicable?	OY ON ON/A

BEST AVAILABLE COPY

PART VI: LEAK DETECTION AND I							
	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
inspection?			QA ON				
2. Has the facility maintained a leak log?			DY Ø N				
3. Does the responsible official check the	following areas for leaks	5?					
Hose connections, fittings, couplings, and valves	Y ON ON/A	Muck cookers	DY ON ON/A				
Door gaskets and seating	DAY ON ON/A	Stills	MY ON ON/A				
Filter gaskets and seating	DY ON ON/A	Exhaust dampers	QA ON ONIV				
Pumps	MY ON ON/A	Diverter valves	DY ON ON/A				
Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	DY ON ONIA				
Water separators	DY ON ON/A						
4. Which method of detection is used by	the responsible official?		/				
Visual examination (condensed	Ø						
Physical detection (airflow felt t							
Odor (noticeable perc odor)							
Use of direct-reading instrument							
Halogen leak detector	٥						
If using direct-reading inst	MN/A						
a. Capable of detecting	perc vapor concentratio	ons in a range of 0-500 ppm?	אם עם				
b. Calibrated against a (PID/FID only)?	standard gas prior to and	d after each use	OY ON				
c. Inspected for leaks	and obvious signs of wea	ir on a weekly basis?	אט אם				
d. Kept in a clean and	secure area when not in	use?	OY ON				
e. Verified for accurac	y by use of duplicate sar	mples (calorimetric only)?	OY ON				
	•						
<u> </u>							
M FXIDIOUE FLOORS		SEDT 29	1060				

M. ENRIQUE FLORES	SEPT. 29 1998
Inspector's Name (Please Print)	Date of Inspection
Memique flores	SEPT. 1999
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

- * STATE'S INSPECTION CALENDAR ALONG WITH INSTRUCTIONS ON HOW

 TO PROPERLY FILL IT OUT WERE GIVEN TO MS. ORLHAC. DERM'S

 POLLUTION PREVENTION FOR DRY CLEANERS BOOKLET WAS MSO GIVEN TO

 MS. ORLHAC.
 - "NO RECORDS OF ANY TYPE KEPT ON SITE. MRS. ORLHAC STATED THAT
 MR. ORLHAC WHO WAS AT A DENTIST'S APPOINTMENT AT THE TIME
 OF THIS INSPECTION IS THE ONE WHO HANDLES ALL RECORDS PERTAINING
 TO THEIR PERC MACHINE. SHE WAS ASKED TO HAVE ALL RECORDS AVAILABLE
 POR INSPECTION DURING BUSINESS HOURS.

NOTE: MR. ORLHAC SHOWED UP ON SITE AS THE INSPECTION WAS ALMOST OVER. SAME INSTRUCTIONS (SEE ABOVE) WERE GIVEN TO HIM.

MACHINE (DRY TO DRY) WAS REPAIRED ON 5-24-98 AND 6-11-98
TO REPLACE FAULTY VALVES (NO PERC LEAKS).

BEST AVAILABLE COPY

TYPE OF INSPECTION:	VHUNY D	APLAINT/DISCOVERY	RE-INSPECTION
TIME IN: 1145	TIME OUT: 1717	AIRS ID#: 2	50895
TYPE OF FACILITY: <u>PF P ()</u> FACILITY NAME: <u>176 B</u> F	HCH LUNDRY AND ARY CO	IANCRS	DATE: 9.29.99
FACILITY LOCATION: N .	MIA. BAH. 33160		
	.12 CULLINS AVE.		336 022 2226
RESPONSIBLE OFFICIAL: /))//kK	PHONE NUMBER	325-732-3239
compliance with DEP	of the compliance requirements evalue. Rule 62-213.300, Florida Administ of the compliance requirements evaluated:	rative Code (F.A.C.).	
	QUIREMENTAROBLEM	FOLLOW-UP ACT	
	RCUPSES, TIONS AVEILHOLL FOR	LICORDS WILL BE KEPT AVAILABLE FOR INSPICT	CN SITE AND MADE TON TURING BUSINESS
INISH (TUN.		F100 K 3.	
			
- CHUP IA	RO MACHINE PAPLARED TO V GOOD HOUSEKEEPING DIRT	SLR.	OR INSPECTION AT ALL TIME
· <u>·</u>			
The Annual Compliance Central OF NEXT INSPECT	HOIN:	17. 1999	ctor. YES V NO
NICDECTION CONTRA		Approximate) :NFIUUE TIBLES	
NSPECTION CONDUCT		(Please Print) PHONE NUMB	ER: 305-377-6925
	Page		Revised 10/96

PERCHLOROETHY BEELGORY WEADERS ECEIVED

COMPLIANCE INSPEC

JUN 2 5 1999

TYPE OF INSPECTION:

ANNUAL.

JUN 2 5 1999
5 1999
COMPLAINT/DIS BUNEAU of Air Monitoring Bureau of Air Monitoring

RE-INSPECTION

& Mobile Sources

& Mobile Sources

AIRS ID#: 0250895 DATE: 6/15	199 TIME IN: 12 pm TIME OUT: 130pm	
FACILITY NAME: 176 Beach	Counding + Dry clean	ecs
FACILITY LOCATION: 176 12		
W-Mia	earl 35160	<u> </u>
	O- / HACPHONE: 932-3239	
CONTACT NAME:	PHONE:	
 		
PART I: NOTIFICATION		
(check appropriate box)		
1. New facility notified DARM 30 days prior to sta	ortup 🔘	
2. Facility failed to notify DARM to use general pe	ermit 🔘	
L		
PART II: CLASSIFICATION		
4		
Facility indicated on notification form that it is:	☐ No notification form	
(check appropriate box)	☐ No notification form ☐ Drop store/out of business/pctroleur	m
		m
(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	Drop store/out of business/petroleum. 2. New small area source \Box dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr	m
(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) 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	Drop store/out of business/petroleum. 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) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr	กา
(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) 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)	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) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after 12/9/91) \square	m
(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) 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) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a general source.	Drop store/out of business/petroleum 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) 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) □ Y □ N □ Can not determine Tication: general permit as number above	m
(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) 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) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a general source.	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) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after 12/9/91) $\square Y$ $\square N$ $\square Can$ not determine	m

1 of 5

BEST AVAILABLE COPY

PART III: GENERAL CONTROL REQUIREMENTS		
Is the responsible official of the dry cleaning facility: (check appropriate boxes)		
Storing perchloroethylene in tightly sealed and impervious containers?	מאס אם עם אם אואס אם אם	
2. Examining the containers for leakage?	אואס אם עם	
3. Closing and securing machine doors except during loading/unloading?	DY ON	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	MY ON ON/A	
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	AY ON ON/A	
PART IV: PROCESS VENT CONTROLS		
In Part II-A:		
If classification 1 has been checked, no controls are required. Proceed to Part \		
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 condenser or a carbon adsorber (complete A and B below). Carbon adsorber m prior to September 22, 1993		
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	rigerated condenser	
A. Has the responsible official of all new sources and existing large area source (check appropriate boxes)	25:	
1. Equipped all machines with the appropriate vent controls?	OY ON	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A	
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	איאם אם אס	
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	מס אם	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	מא מא מאיט אם	
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON	

	' '	
13.	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?	ÜY 🗆N
2.	Measured and recorded the washer exhaust temperature at the condenser	
	inlet and outlet weekly?	OA ON ONV
	Is the temperature differential equal to or greater than 20° F?	OY ON ON/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?	DY ON DN/A
	Is the perc concentration equal to or less than 100 ppm?	OY ON ONIA
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?	OY ON ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6.	. Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official:	
(check appropriate boxes)	
1) Maintained receipts for perc purchased?	OY ZN
2. Maintained rolling monthly total of perc consumption?	OY N
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	MY ON ON/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?	MY UN UNIA
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN CANIA
5. Maintained exhaust duct monitoring data on perc concentrations?	ON ON SUIV
6. Maintained startup/shutdown/malfunction plan?	ZY ON
7. Maintained deviation reports?	DY DN DNIA
Problem corrected?	DY DN DNIA
8. Maintained compliance plan, if applicable?	OY ON ZN/A

BEST AVAILABLE COPY

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? 2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating Y DN DN/A Stills Y DN DN/A Filter gaskets and seating Y DN DN/A Exhaust dampers Y DN DN/A Pumps Pumps Y DN DN/A Diverter valves Y DN DN/A Water separators Y DN DN/A 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces)					
2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating Pumps Pumps Pumps Py DN DN/A Stills Py DN DN/A Exhaust dampers Py DN DN/A Diverter valves Py DN DN/A Cartridge filter housings Water separators Py DN DN/A 4. Which method of detection is used by the responsible official?	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
3. Does the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating Y DN DN/A Stills Filter gaskets and seating Y DN DN/A Exhaust dampers Y DN DN/A Pumps Y DN DN/A Solvent tanks and containers Y DN DN/A Cartridge filter housings Water separators Y DN DN/A 4. Which method of detection is used by the responsible official?	,				
Hose connections, fittings, couplings, and valves Door gaskets and seating Pumps Pumps Solvent tanks and containers Pumps Water separators Pumps Pum					
couplings, and valves Door gaskets and seating Door gaskets and seat					
Filter gaskets and seating	NA				
Pumps Diverter valves Div	∛A				
Solvent tanks and containers OY ON ON/A Water separators OY ON ON/A 4. Which method of detection is used by the responsible official?	A/A				
Water separators A. Which method of detection is used by the responsible official?	۸/A				
4. Which method of detection is used by the responsible official?	N/A				
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:					
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
c. Inspected for leaks and obvious signs of wear on a weekly basis?					
d. Kept in a clean and secure area when not in use?					
e. Verified for accuracy by use of duplicate samples (calorimetric only)?					

LEO SHART Inspector's Name (Please Print)

Issued FD 22 calendar

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 12'2Pm TIME OUT: 1302	
TYPE OF FACILITY: Perc Dry C	Ceone
FACILITY NAME: 176 Dearl Counc	ly + Dry Clease DATE: 6/15/99
FACILITY LOCATION: 17612 Collins ATE	
RESPONSIBLE OFFICIAL: MARE OF HAC	PHONE NUMBER: 932-3239
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluated discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
Noteek los	need lack cop
No Monthly total Perc	need Monthly total
Consumption	of over consumption
no reciept	need recrept
	
	· · · · · · · · · · · · · · · · · · ·
·	
COMMENTS:	·
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO
C 1-	
	proximate)
INSPECTION CONDUCTED BY: A (Plo	ease Print)
INSPECTOR'S SIGNATURE:	PHONE NUMBER: (305) 372-6922
Page <u>\</u>	_of Revised 10/96

DIE

DRY CLEANER AIR QUALITY GENERAL PERMIT VED ANNUAL COMPLIANCE CERTIFICATION FORMUN 2 5 1990

FACILITY NAME: 176 Beach Laundy + Dry Clean of ADAMORITOR 15/99
FACILITY LOCATION: 17612 Collin Ave.
Annual Reporting Period: 19 98 TO Jame 19 79
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
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 look for + northly total Pec consumption of recient
Exact period of non-compliance: from Tame 98 to Tame 99
Action(s) taken to achieve compliance: Keep records
Method used to demonstrate compliance: For Colembo
#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
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: 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 CLEANER

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST ©

•	COM BATTOR		01150115101 E	II-V-U	
TYPE OF INSPECTION:	ANNUAL	<u>p</u>	COMPLÄ̈́jk tr	DISCOVERY	. 🗖
•	RE-INSPECTIO	_	of Air Mobile	N	
	KE-INGI ECTIO		Air oile		
		1	500		
AIRS ID#: 0250895	DATE: 3/31	OO TIME	IN: 1030 5	TIME OUTEL	
FACILITY NAME:	176 2	seach	Laundry 3	· Dry P	leaner
FACILITY LOCATION:					
· 			ach, FL	·	
PECRANCIDI E APPICIAL.		•			. 77 t a
RESPONSIBLE OFFICIAL:	Mara	Delner	PHUNE:	12-12-	7231
CONTACT NAME:			PHONE:		
· · · · · · · · · · · · · · · · · · ·					
PART I: NOTIFICATION					· · ·
(check appropriate box)					
1. New facility notified DARM	30 days prior to star	rtup			
2. Facility failed to notify DAR	M to use general per	rmit			
NAPONIA OLA COLDICATION	Y				
PART II: CLASSIFICATION	<u> </u>				
Facility indicated on notification	on form that it is:		☐ No notificatio		
(check appropriate box) A.			☐ Drop store/ou	t of business/pe	troleum
1. Existing small area sour	ce 🗷	2. hew small	area source		•
dry-to-dry only, $x < 140 \text{ gal/}$			y, x < 140 gal/yr	_	
transfer only, x < 200 gal/yr	,	transfer only,	x < 200 gal/yr		
both types, $x < 140 \text{ gal/yr}$		both types, x <			
(constructed before 12/9/91)		(constructed o	n or after [2/9/9])	•	
3. Existing large area source	ce 🖸	4 New large	area source		
dry-to-dry only, $140 \le x \le 2$,		~	y, $140 \le x \le 2,100 \text{ g}$	-	
transfer only, $200 \le x \le 1,800$			$200 \le x \le 1,800 \text{ gal/y}$	•	
both types, $140 \le x \le 1,800$ g			$0 \le x \le 1,800 \text{ gal/yr}$	•	
(constructed before 12/9/91)		(constructed o	n or after 12/9/91)		

If no, please check the appropriate classification:

5. This is a correct facility classification

facility qualified for a general permit as number _____ above

ΠY

facility exceeds above limits and is not eligible for a general permit

Tacinty exceeds above mints and is not engine for a general permit

ΠN

€ Can not determine

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

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?	OY 0	N ØN/A
2. Examining the containers for leakage?	OY O	A/MED N
3. Closing and securing machine doors except during loading/unloading?	Ø4Y 🗆	N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ODY D	N □N/A
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 refrig (complete A below).	erated cor	idenser .
If classification 3 has been checked, the machine should be equipped with either a condenser or a carbon adsorber (complete A and B below). Carbon adsorber must prior to September 22, 1993	-	
If classification 4 has been checked, the machine should be equipped with a refrige (complete A and B below).	erated con	idenser
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?	מם עם	И
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?		N ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ום צם	N □N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY O	٧ .
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	ום אם	N DN/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY 01	٧

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?	ΩY	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ĮΩY	מם	□N/A
j	Is the temperature differential equal to or greater than 20° F?	ΠY	Ωм	□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?	ΩY	ΩΝ	□n/a
	Is the perc concentration equal to or less than 100 ppm?	ΩY	ПN	□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?	ωy	□и	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	ПИ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ΠИ	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	OY BAN
2. Maintained rolling monthly total of perc consumption?	ΩΥ Ø N
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	□Y □N ÆN/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?	OY ON DINA
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON AMVA
5. Maintained exhaust duct monitoring data on perc concentrations?	A/MS NO YO
6. Maintained startup/shutdown/malfunction plan?	ØY □N
7. Maintained deviation reports?	OY ON TONA
Problem corrected?	OY ON GN/A
8. Maintained compliance plan, if applicable?	OA ON QNIV

PART VI: LEAK DETECTION AND REPAIRS					
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
inspection?			ØY □N		
2. Has the facility maintained a leak log?			OY QN		
3. Does the responsible official check the	following areas for leaks	s?			
Hose connections, fittings, couplings, and valves	ØY ON ON/A	Muck cookers	OY ON @N/A		
Door gaskets and seating	ØY ON ON/A	Stills	ØY ON ON/A		
Filter gaskets and seating	2Y ON ONA	Exhaust dampers	QY ON ON/A		
Pumps	ØY □N □N/A	Diverter valves	☑Y □N □N/A		
Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	☐Y □N □N/A		
Water separators	OY ON ON/A				
4. Which method of detection is used by	the responsible official?				
Visual examination (condensed s	olvent on exterior surface	es)	2		
Physical detection (airflow felt the	Ā				
Odor (noticeable perc odor)	2				
Use of direct-reading instrument					
Halogen leak detector	Δ .				
If using direct-reading instr	ØN/A				
a. Capable of detecting	DY DN				
b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use	OY ON		
c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	OY ON		
d. Kept in a clean and s	ecure area when not in us	se?	OY ON		
e. Verified for accuracy	אם צם				
		/ /			
Ivan Fanni	`	3/30/0	0		
Inspector's Name (Please Pri	ai.)	Date of Inspection			
	•	3/01			
Inspector's Separture		Approximate Date of I	Next Inspection		

No rolling log leak log

R.O. to for par veceipts
Machine not in operation during
importion

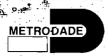
8/00 Zecordheepsing underway - complying

6/00 Pere recapits received in mail.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 1030 TIME OUT:	100 AIRS ID#: 0250895
	egma-s
	4 Dry Cleaner DATE: 3/36/00
FACILITY LOCATION: 17612 Collins	Ave
D. Miami Beach	
1	PHONE NUMBER: 305-932-3239
RESPONSIBLE OFFICIAL: MARK Oille	hove nowbek: 201 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluadiscrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
Not maintaining rolling morthly	Begin maintaining rolling log
total of pera consumption	of pere purchases
Not mantaining leak log	Begin mentaning look log on bi-weekly basis
Not maintaining receipts of	Begin maintaining receipts of
Not mantaining receipts of	perc punchases made for 5 year
·	
. · ·	
COMMENTS: 2.0. to fax ree	eights for 1999 and 2000
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: 3/01	
(Ap	proximate)
	ania
INSPECTOR'S SIGNATURE:	ease Print) PHONE NUMBER: 30T- 373-6522
AND DETOR S SIGNATURE.	THORE HOMBER. SOL : 1) FA - 6 Ad
Page	of Revised 10/96

METROPOLITAN DADE COUNTY, FLORIDA

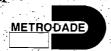




NOTICE OF VIOLATION

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

TO: MARK Orlhac	
ADDRESS: 17612 Collins 1	Ave. D. Maini Beach, FC
SOURCE/LOCATION: 176 Beach Law	udry , By Closes
YOU ARE HEREBY NOTIFIED that on	otection Ordinance, and/or regulations of the Florida
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	Title V Gerard Her Hand Pout IL
Specifically: Not in compliance with (6)(a)(1). Must maintain received. For minimum of 5 years.	iply for pere purchases onsite
For minimum of 5 years.	
In view of the above, and pursuant to the authority of Metropolitan Dade County Environmental Protection Order	granted to me by Sections 24-54 and 24-5(15)a,
Immediately upon receipt of this NOTIC Cease and Desist the above-referenced	CE, initiate corrective measures to eliminate and/or diviolation(s).
you have taken to ensure that no fur	TICE, submit to this office in writing the steps which ther violations will occur. Said report may include ents, or servicing performed to correct the violation.
□ Within days of receipt of this NC 372-6925 to discuss air permit requirem	OTICE, contact the Air Section of this Department at nents.
□ Within days of receipt of this No discuss other Departmental permitting r	OTICE, contact Plan Review Section at 375-3330 to equirements.
Failure to comply with the above or continued operation enforcement and penalty provisions of Sections 24-55 a	
For further information regarding the above, please cont	act the Air Section of this office at 372-6925.
	Sincerely,
	John W. Renfrow, P.E.
	Director
Received by (1)	By: Ivan Fannin
Title:	Signature: Jan Jan
Date: 3/3/100	Section: Air Feal, tier





NOTICE OF VIOLATION

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

	a l	~ 13						
TO:		Orlha		<u></u>				-
ADDRESS:	17612 (,	,			<i>-</i>	h, F	$L_{}$
SOURCE/LOCA	ATION: 17612	Beach	<u>n Lau</u>	udry +	Din	Cle	anne	<u> </u>
Chapter 24, Met	EBY NOTIFIED that o ropolitan Dade County I Code, was observed at	Environment	al Protec	tion Ordina	ınce, and	/or regul	lations o	olation(s) of f the Florida
Operati	ing without an Air Perm	iit <u></u>	E	xcessive V	isible Em	issions		
Uncont	rolled fugitive particula	les _	Ir	nproper ha	ndling/rei	moval of	asbesto)S
Non-co	mpliance with	_		lon-complia	nce with	CFC req	gulations	3
Stage I	I Vapor Recovery		٧ ر	THER				
Specifically:	Modin composed (7)(a) R	linie u	M	Telle V	Genera	1 An	Pormi	I Part II
(6)(b) an	d (7)(a) R.	endken	point	Ragun	-	\$,	No.A	maintaini
rolling le	a of perc cas	un steri	ama	l lank	Log			
In view of the	above, and pursuant ade County Environmer	to the author	ority gra	nted to me	by Sec	tions 24	-54 and	I 24-5(15)a,
Ø	Immediately upon rec Cease and Desist the				rective m	neasures	to elim	inate and/or
f	Within days of you have taken to e evidence of equipmer		o furthe	r violations	will occi	ur. Said	report r	may include
	Within days o				t the Air S	Section c	of this De	epartment at
	Within days o				t Plan Re	eview Se	ection at	375-3330 to
	ply with the above or c nd penalty provisions of							
For further info	mation regarding the a	bove, please	contact	the Air Sec	ction of th	is office	at 372-6	6925.
			S	Sincerely,				
				ohn W. Rei Director	nfrow, P.I	E.		
Received by: _	Messe Off	ALOO ~	- 1. 4 1 1 1 1 1 1	By:	Lva-	F.	<u> </u>	
Title:	~, 1		<u> </u>	Signature:	Dea	~/	7a	
Date:	3/3/00			Section:	An	F	alet	iù

VAIRS 10#: 0250895

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: 176 Beach Landy + Dry Cleaners DATE: 3/3/00
FACILITY LOCATION: 17612 Collins Ave.
N. Mian, Beach F-L
Annual Reporting Period:
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
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 maintaining receipts of pero perchases and rolling log of consemption
Exact period of non-compliance: from March 99 to March 00
Action(s) taken to achieve compliance: Ragin mantaining logs and racoupts
Method used to demonstrate compliance: FDEP Calendar penided
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
Not maintaining lack log of inspections
Exact period of non-compliance: from March 99 to March 00
Action(s) taken to achieve compliance: Begin maintaining lack lase
Method used to demonstrate compliance: FDEP Calculate
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: Name (Please Print) Signature Date

Page	of
1 agc	01

^{*}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.



Department of Environmental Protection

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

David B. Struhs Secretary

TO: Holder of Title V Air General Permit

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

Title V Air General Permits
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070



(cut here)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

on your mailing label

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

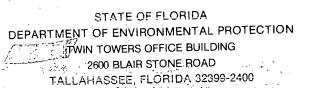
TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID#0250895 176 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160

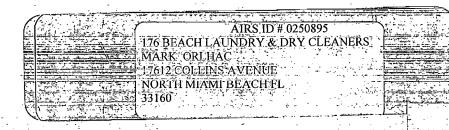
FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273





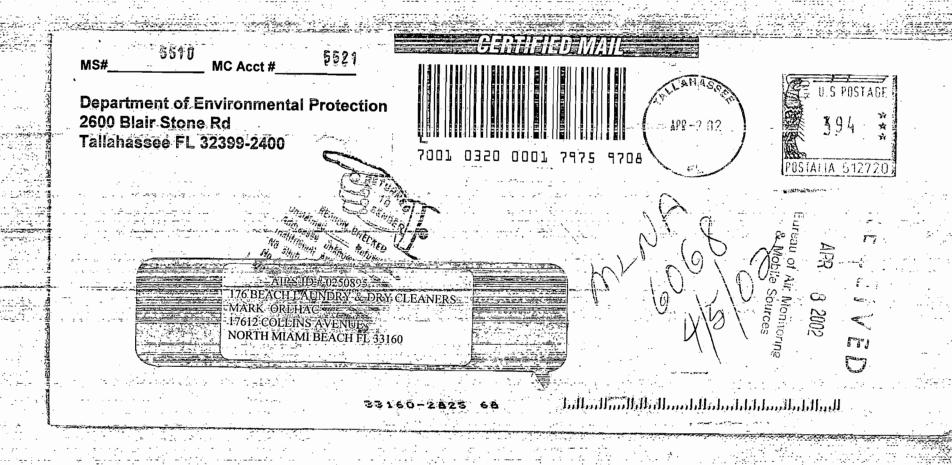
ETURN TO SENDER JUNGBLER TION FOR WAR 10269

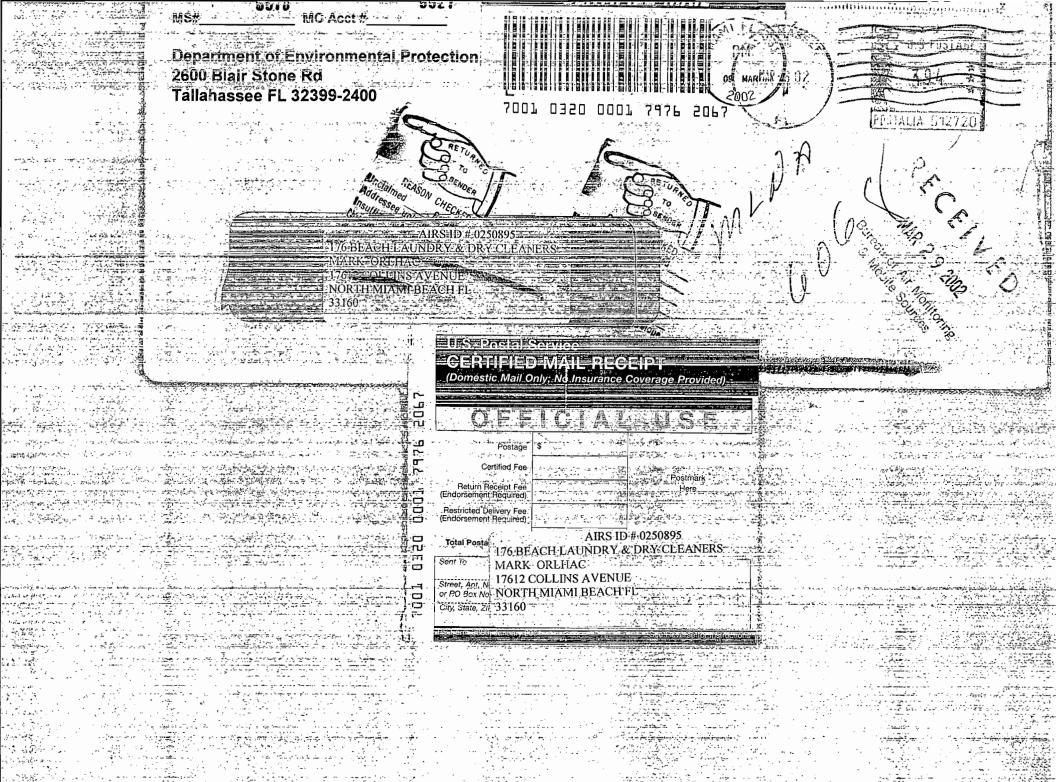


DEC 2 6 2001:
Bureau of Air Monitoring
& Mobile Sources

ing ngangangan nakétan na pinan pangungan pelinggan hagipan nga nggan pangan banasa nganga ito ng 1700 n Pangangan pengangan pangan na taon di pangangan ngangan			The second of th
BEST AVAILABLE COPY	1	L. PLACE STICKER ARTOR 10 BOOL 10 WAR CO.	THE THIC CECTION ON DELIVERY
		SENDER COMPLETE HIS SECTION	
The state of the s			Delivery of Delivery
The state of the s		E Complete items 1, 2 and 3. Also complete item;4 if Restricted Delivery is desired.	-A. Received by (Please Print Clearly) B. Date of Delivery
	1	irem:4 if Restricted Delivery is desired.	
		- ■ Print-your name and address on the reverse	C Signature
	j	so that we can return the card to you.	C. Signature.
	1	so that we can return the card to you.	☐ Agent
	3	Attach this card to the back of the mailpiece,	X Addressee
	1	or on the front if space permits.	
the configuration of the contract of the contr	Taran and the same of the same	The table of the section of the sect	D. Is delivery address different from ton
and the first the property of the control of the co	A STATE OF THE STA	1. Article Addressed to:	If YES, enter delivery address below: \(\sigma\) No
			,
一大有数据的 大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大		AIRS ID#0250895	Programme and the second secon
	60	176 EEACH LAUNDRY & DRY CLEANERS	
	Commence on the second	MARK ORLHAC	
and the second of the second o	A CONTRACTOR OF THE PARTY OF TH	17612 COLLINS AVENUE	
	1	MINION TO STATE OF THE STATE OF	
		NORTH MIAMI BEACH FL	A port of annual to the property of the state of the stat
	指在4000000000000000000000000000000000000	ភី^ក3316 0 ក្រុងប្រឹក្សា ដែល មាន	3, Service Type - Vil. Gerrified:Mail - III (Express Mail-
	destar 🚯		
الرائي في المراقب المراقب التي المراقب المنظمة المراقب المراقب المراقب المراقب المراقب المراقب المراقب المراقب المراقب المراقب المراقب المراقب المراقب المنظمة المراقب المراقب المراقب المراقب المراقب المراقب المراقب المراقب	#- 14.5	A STATE OF THE STA	Registered - E Return Receipt for Merchandise
केरेको करें कि राजेर विकास के सकरें केरेको स्वास का का निर्देश के कि से कि केरेको करें कि राजेर विकास के सकरें केरेको स्वास का कि कि कि कि से क	The second secon	The state of the second of the	
The first control of the control of	ran A	বিলেন্ত্রি সাহার্ক্সারীরীবিল্লার নির্মান সংস্কৃতি বিশ্বর নি নির্মান	# ☐ Insured Mall = 1 ☐ GOD
ી ફોલીફોર્ડ કરવી ફોલીફોર્ડ જેલા અને તે તે વિવેશ કે પિક્ટ કરીકે કરો કરો હોય કરી હતા. જે આ કોઇ કરા કરા કરો કરો ક તાલું જે કર્યું કે પ્રતિ એક્સિક્ટ એક કરી પણ પણ કરો કરો કરો કરો હોય જેલા માર્ગ કરો છે. જે તે કરો કરો કરો કરો કે		21/	4. Restricted Delivery? (Extra Fee)
		MARIER 1000000 10275369-	4. Restricted Delivery! (Extra 1 co)
아마 아마이 아들은 범인 경우 아름다면 한다고 있다면 하는데 하는데 하는데 하는데 아니는 아니는데 살 때문에 다른데 살 때문에 되었다.	15	All the state of t	المرابع والمرابع والمنابع والمنابع المستهداء والمستهدي والمنابع والمنابع والمنابع والمنابع والمنابع
		2. Article Number	
A STATE OF THE PROPERTY OF THE	ार्वकर्तिके के स्थापना निर्माण के स्थापना है । । के पुरुष के स्थापना के स्थापना के स्थापना है । ।	(Transfer from service label).	and the second s
	- #	The state of the s	Hiro Pacaint - 102595-01-M-1424
ing the second of the second o	1	PS Form 381.1, March 2001 Domestic Re	turn Heceipt
သည်။ သည် ရှိ အရှေ့သို့ ကို ကို ကို ကို ပိုင်းရှိ ရှိနေရှိကြောင်းသည့် ရက်သူမှုနှိုင်းသည်။ ကို သည် အသည် ရှ		A TO THE RESERVE OF THE STREET	
(1)) (2) (2) (2) (3) (3) (3) (4) $(4$	<u> </u>	The second secon	The state of the second
		The second of th	Supplied the supplied of the s
*		U.S. Postal Service	
- Program 製造されたは「関 行 される」がは、Proced in Action in Actio	1,1,1	GERNIELEDEMAILEREGEIRI	
	ATTENDED		The second secon
The second secon	ۼۯٷۼڿڔۻڮڂڮڰڰڰڰڰ	(Domestic Mail Only, No Insura	Mode Conversion and Modern Production
			A CARLO CONTRACTOR OF THE PROPERTY OF THE PROP
ार । विक्रिक्त हो विक्रिक्त के विक्रिक्त की किए हैं। कि विक्रिक्त की किए की क्षिप्त की किए के किए का का का की			
and the control of	¥.	Yes and the man agreement of the contract of the fact of	The second of th
The state of the s	* * * * * * * * * * * * * * * * * * * *	- AN OFFICIA	
and the second of the second o	عديد		ENAME AND ADDRESS OF THE PARTY
်စ္၊ မါဗ် ကိုမ် ကရိုမှုလည်း အခြင့်သည်။ မောင်း ကမာလုပ်လိုကို မွေးမြေသင်းလိုက် မည်မှုလည်းစည်းက မြောင်းသည်။ မြော်လို		19 1 - 1996 編修は50 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	**	Postage \$	and the state of the same of the state of th
ा । तथ्य विक्रिक्तिकृष्टिकृष्टिकृष्टिक्षा अस्य अस्य अस्य अस्य क्षेत्रकृष्टिक्य व्यक्षित्र व्यक्षित्र व्यक्षित्	- X		TO MINISTRATION OF THE PROPERTY OF THE PROPERT
ින්ට පතුයක් පත් විශේඛය විශේඛයේ විරාද වන විද්යාව කරන විද්යාව වෙනවා. මෙන සම්බන්ධය සම්බන්ධය සම්බන්ධයේ වර්ග වෙනවා. සම්බන්ධය සම්බන්ධය විද්යාව වෙනවා. එම එම එම සම්බන්ධය වීම සම්බන්ධය සම		Contillad See	
	4	Certified Fee	
		Return Receipt Fee	Posymaph
ري المعالي الله المنظم		(Endorsement Required)	Here
	g.g., v		Herre
	44. 4 	(Endorsement Required)	Here
		Restricted Delivery Fee (Endorsement Required)	
		Restricted Delivery Fee (Endorsement Required)	AIRS ID#0250895
		Restricted Delivery Fee (Endorsement Required)	AIRS ID#0250895
		Total Postag	AIRS ID#0250895
		For Sent To MARK ORLHAC	AIRS ID#0250895 & DRY CLEANERS
		Total Postag Total Postag 176.BEACH LAUNDRY FD Sent Te MARK ORLHAC 17612 COLLINS AVENU	AIRS ID#0250895 & DRY CLEANERS
		Restricted Delivery Fee (Endorsement Reculred) Total Postag 176-BEACH LAUNDRY FO Sent To MARK ORLHAC 17612 COLLINS AVENU Street, Apt. N. 17612 COLLINS AVENU	AIRS ID#0250895 & DRY CLEANERS
		Fig. Sent To MARK ORLHAC Street, Apt. N. NORTH MIAMI BEACH	AIRS ID#0250895 & DRY CLEANERS
		Restricted Delivery Fee (Endorsement Required) Total Postag 176.BEACH LAUNDRY FO Sent To MARK ORLHAC 17612 COLLINS AVENU NORTH MIAMI BEACH	AIRS ID#0250895 & DRY CLEANERS
		Restricted Delivery Fee (Endorsement Required) Total Postag 176.BEACH LAUNDRY FO Sent To MARK ORLHAC 17612 COLLINS AVENU NORTH MIAMI BEACH	AIRS ID#0250895 & DRY CLEANERS
		Restricted Delivery Fee (Endorsement Required) Total Postag 176.BEACH LAUNDRY MARK ORLHAC 17612 COLLINS AVENU Street, Ant. N. NORTH MIAMI BEACH Gity, State, Zii 33160	AIRS ID#0250895 & DRY CLEANERS JE I FL
		Restricted Delivery Fee (Endorsement Required) Total Postag 176.BEACH LAUNDRY FO Sent To MARK ORLHAC 17612 COLLINS AVENU NORTH MIAMI BEACH	AIRS ID#0250895 & DRY CLEANERS
		Restricted Delivery Fee (Endorsement Required) Total Postag 176.BEACH LAUNDRY MARK ORLHAC 17612 COLLINS AVENU Street, Ant. N. NORTH MIAMI BEACH Gity, State, Zii 33160	AIRS ID#0250895 & DRY CLEANERS JE I FL

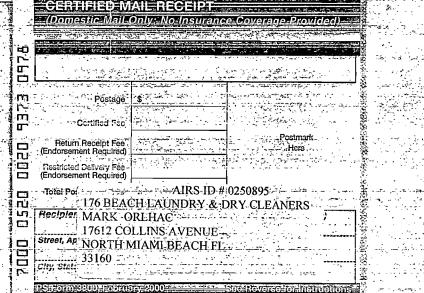
	BEST AVAILABLE COPY			
		POPPEDEINS		
MS# MC Acct #_ Department of Environment 2600 Blair Stone Rd		EERTIFIED MAIL	лей 5 03	GS US POSTAGE
Tallahassee PLB 239 - 240 FEB 1 7 &	2000 z	870-0000 7027 53 <u>5</u> 932-3239)		COSTALIA 5 11912
Bureau of All & Mobile Sc	AIRS III	IGUE OV MASS	ANEMPTED NOT ANEMY OF THE PROPERTY OF THE PROP	No such st #
	MARK CREHAC 17612-GÖLLINS AVENUE NORTH MEMBER CHILL 33160		BITOLEF! NO FORWARD IT IND OR	DER EN PED
		Tallardia		laddelddi





السارية والمستعلقة فتعرفها والمتعارض والمتعارض	and the second of the second	and the state of t	emat e je spesemenjaja se reja	چېنلافان <u>شرخت د د د د د د د د د د د د د د د د د د د</u>
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
4	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Received by (Please Print Clearly) B. Date of Deliver	y	./
	■ Print your name and address on the reverse so that we can return the card to you. . L. E. Attach this card to the back of the mailpiece,	C: Signature Agent Addresse		
100 100 100 100 100 100 100 100 100 100	or on the front if space permits. 1. Article Addressed to:	D-lis delivery address different from item 1?		
	AIRS ID # 0250895	و مقوو د و		*****
	HARK ORLHAC MENUE AVENUE			
	NORTH MIAMI BEACH FL 33160	3. Sérvice Type A Certified Mail	ie	
		☐ Insured Mail . ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes		en e
	7001 0320 0001 7976 2067	in the state of th		
	PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-99-M-178	9	
	de Calde de la Production de la Calde de			اده از این استان است از این از ای

SENDER: COMPLETE THIS SECTION	GOMBLETE THIS SECTION ON DELIVERY
☐ Complete items 1, -2, and 3; Also complete item 4, if Restricted Delivery is desired. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: AIRS ID # 0250895 176 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC 17612 COLLINS AVENUE NORTH: MIAMI BEACH FL 33160	C. Signature Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below: 3.: Service Type Accertified Mail: Registered Return Receipt for Merchandise Insured Mail
	4. Restricted Delivery? (Exita Fee) ☐ Yes
2. Article Number (Copy from service label) 93730	985
PS Form 38.11, July 1999 Domestic Re	ttirin Receipt 102595-99-M-1789
- GERHIELE-MAII-REGEI	PI



Department of Environmental Protection
2600 Blair Stone Rd
Tallahassee FL 32399-2400

C RETUS

TODOL 0520 0020 9373 0978

US POSTARE

TODOL 0520 0020 9373 0978

US POSTARE

TODOL 0520 0020 9373 0978

TODOL 0520 0020 9373 0978

TODOL 0520 0020 9373 0978

and the septiment of the second	r and confidence	SENDER COMPLETE THIS SECTION—		COMPLETE THIS SECTION ON DEL	11//= 11/2
			A TOTAL TOTAL AND A STATE OF THE PARTY OF TH	and the program of the region	the days of Allen abstract and the second
	Francisco de la constitución de	-E. Complete items 1, 2, and 3-Also comple	te	-ASignature	The second secon
ا آن	n in de la company de la compa	Item 4 ir Restricted Delivery is desired. Print your name and address on the reve			☐ Agent
and the state of t	A COLUMN TO THE STREET	so that we can return the card to you.	rse		Addressee
ليستريح المحارق ومنها والمسترات	la circ	Attach this card to the back of the mailoi	iece	B. Received by (Printed Name)	C. Date of Delivery
a talent a series grade in a p		or on the front if space permits.			
		Article Addressed to:		D. Is delivery address different from ite	m 1? 🔲 Yes
	- 1 - 120F 11	i: Article Addressed to:		If YES, enter delivery address belo	w: 🗆 No
4 1 2 2 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1	A SECTION OF THE PERSONS	The second secon	ar year	والمراجع والمنافع وال	· _ · · · · · · · · · · · · · · · · · ·
and the state of t	Landa Serve				
					The second second of
	1 1	AIRS ID#0250		mia. W. Lei	
The state of the second of		例76 BEACH LAUNDRY & DRY CLEANER MARK ORLHAC	S		
		7612 COLLINS AVENUE		3. Service Type	og at the street
	ra maranda a a g Ligadal arail a a	NORTH MIAMI BEACH FL	20.21 . 42	Certified Mail F II. Express Ma	
The section will be the section of t	in and the second second	33160	land.	Hegistered L. Return Bec	elpt for Merchandise : .
्रिके क्षेत्र के प्रश्निक प्रकार के किया है। जिल्ला कर के किया किया किया है कि एक किया किया है कि प्रकार कर की	to the state of			□ Insured Mailz = IZI (C.O.D.	
The state of the s		ر به کید می در در بید در در این این از این		4. Restricted Delivery? (Extra Fee)	☐ Yes
		2. Ar	مع و الرياد الإياد المواد ا		
		7001 0320 0001 99:	76 433		Partition of the second
				12 - 1 - 12 - 12 - 12 - 12 - 12 - 12 -	
		. Of our Soft L. August 2001	rnestic Retu	rn-Receipt	102595-02-M-1035
The state of the s		TO THE LOCATION OF THE LOCATIO	- 10 m	the state of the second	12.7
		CERTIFIED WA	III RE	CEIDI	
47.4		=/Domestic Mail Only No			
		The same and the s	- III OU FAITH		
and the second s	and a second desired the second secon		(ev pp - 4- 2.	The state of the s	
िक्षणिक स्वीतिकालिका । विश्वतिकालिका । विश्वतिकालिका । विश्वतिकालिका । विश्वतिकालिका । विश्वतिकालिका । विश्वतिकालिका । विश्वतिकालिका । विश्वतिकालिका	A Second	IP OFFIC			\$1.00 m
	· 一种	1	F. Backett		
te Taki (Taki) jako na na na sa	interiorista di 1907 di interiorista. La comincia di 1907 di	Postage \$	in in the second second		والزارا المستوعية والمتاكمة
		出たさ、準 Managaran - and laber	To be also have the man		
and the second of the second o	ga agaggi sa kanan dagaga sa kana Sa agaggi sa kanan dagagaga sa kana	Certified Fee	Profession and	The real Postorarkies are real and the real real real real real real real rea	alan yang disebuah d Sebuah disebuah dise
		Rètum Receipt Fee (Endorsement Required)			
and the state of t	Sign of the second	CONTROL OF THE CONTRO			
	a very property of	Restricted Delivery Fee (Endorsement Required)	eran da estado. Caran da estado en e		
	a ja kaj aja kaj kaj kaj kaj kaj kaj - J aja aja kaj kaj kaj kaj kaj kaj kaj kaj 				
		Total Po	7. 17. 17. 17. 17. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	-AIRS ID#0250895#	age of the second of the second of
1	a seed on a few fit filter	Sent To 176 BEACH LAU	NDRY & D	RY CLEANERS	
وخفينا أبارات المالية والمالية	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MARK ORLHAC	بالمسلم التي تبريسات	ند تیجا بیده این وایا میدان تیکنیش کرد بد عیاد مسیدند. می	= بـ عرب بين نش في عاله عد العالم الم
		Street Apt 17612 COLLINS	AVENUE	And the state of t	
		Street. Act. 17612 COLLINS.	BEACH FL		
the state of the s		City, State, 33160			
			- La Francisco	The state of the s	
		CHECKE OF THE PROPERTY OF CHECKER AND CHEC		reaching country and addressed allowers Distriction and Addressed	
والمحالة المراب والمناف المنطقة المتعلق المتعادية	- La description de la company	Andrew Control of the	te territoria anti r		
		والمناب المراجع المنازي والمجارية والمراجع المرازات		enter annual en state la sertificial distante de la confession de la confe	
The Control of the Co			Jan Sanga		
		hayan da a da karan			
	,			and the state of t	

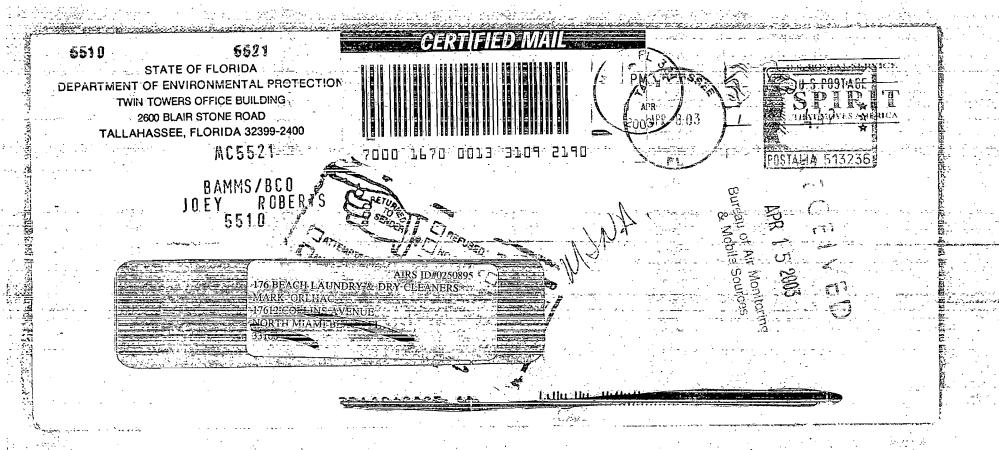
x man contain contain the

talen dan Referensippleschier in der Kritische Leiser in der Steiner in

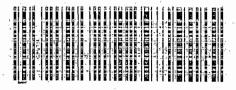


		SENDER: C	
		Experience Company Com	JON ON DELIVERY
		Gomplete items 1, 2, and 3. Alse complete:	A. Received by (Please Print Clearly) B. Date of Delivery
A Company of the Comp		Print your name and address on the reverse	Bate of Delivery
Commence of the state of the st		Soulid we can return the card to	C Simplify
The second section of the s	. The second	the PARKETHING CARD TO THE EXCEPTION OF THE PROPERTY OF THE PR	C. Signature
		or on the front if space permits.	X □ Agent
	· · ·	Article Addressed to:	☐ Addressee ;
	and the second second second	Article Addressed to:	D. Is delivery address different from item 1? Yes
***		and was a significant of the control	- If YES, enter delivery address below: ☐ No
		A IDD ID IOGEOGR	
nd degree was not described a filter	A CONTRACTOR OF THE SECOND	AIRS ID#0250895	
		MARK ORLHAC	A Company of the control of the cont
(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	h	17612 COLLINS AVENUE	The state of the s
		NORTH MIAMI BEACH FL	3r Service Type
And the second s			Certified Mail
A STATE OF THE STA			Registered D Rejum Receipt for Merchanding
The state of the s		· Man North 在Amerika parted a construction of the construction	☐ Régistered ☐ Recum Receipt for Merchandise
And the first of the second of		The state of the s	
And the second of the second o		7	4. Restricted Delivery? (Extra Fee)
		Article Number (Copy from service label)	· · · · · · · · · · · · · · · · · · ·
		90001610001331092190	967 is diversity in the second of the second
The state of the s	a transaction for the second con-	PS Form 3811, July 1999	Company of the second s
AND THE RESERVE AND THE PARTY OF THE PARTY O		AND CANADA TO THE STATE OF THE	102595-99-M-1789
A There was a second			The state of the s
	The last of the state of the state of the	EU-S-Posial-Sawie	
	*	CERTIFIED MA	L RECEIPT
Marine Carlotte Company	والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج	(Domestic Mail Only No	Insurance Coverage Provided)
Service of the servic	The second secon		astrairce Governge r. Gwded)
	The state of the s	C Company	
		il offic	TAL USE I
and the second s	. Significantly to the state of	III W	THE UDED
· · · · · · · · · · · · · · · · · · ·	A CONTRACTOR OF THE STATE OF TH	Postage \$	CONTRACTOR OF REPORTS
Marie of the state	The second secon	AND THE PROPERTY OF THE PARTY O	Contract of the second
		Certified Fee	M. Podmerk
And property of the second of	en guerralista en	Return Receipt Fee (Endorsement Required)	A Here
	A STATE OF THE STA	(Endorsement Required)	
		Restricted Delivery Fee (Endorsement Required)	
西蒙蒙古特尔克尔马克 克克克尔	The second se	(Endorsement Required)	
rage affection and the control of th			-AIRS ID#0250895
			Y & DRY CLEANERS
	100	Sent 176 BEACH LAUNDR MARK, ORLHAC	
the state of the s		Street 17612 COLLINS AVE	NUE - A Tarken Comment of Comment of the Comment of
		NORTH MIAMI BEAC	CH FL
		City, 33160	
	the many of the property of th	The second secon	
properties and the second of t		The state of the s	and Call (Control of the Control of
			the control of the control of the state of t
raprograma de la composición de la com El highest de la composición de la comp			yan digan mengguna kenggunan terdapa di penggunan penggunan digan digan digan digan digan digan digan digan di Kenggunan digan diga Kenggunan digan diga
	gant to the second of the seco		
70.424.			
7		불량히 되기 그는 그리겠다니 같은	
		THE TABLE TO SEE THE PARTY OF THE PARTY.	
	行。[1][Y][[6][[編4][[5][[6]	The state of the s	
	MARKET MELANT SELECT		Der Begriffe de grande de seus de marie de grande de la company de la company de la company de la company de l La company de la company d
			British was Side and Maria Tidam the Care Configuration of
			entral de la companya de la company

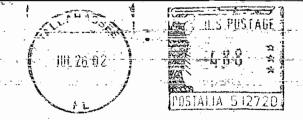
named against the wife against



STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTIONS 5510-37550 304000
2600 BLAIR STONE ROAD
TALLAHASSEE FL 32399-2400



.7000 1670 0013 3095 3584



Carlos Composition of the Control of 10 AIRS ID # 025089500 IAG
MARK ORPHAC TO 176 BEACH L'AUNDRY & DRY CLEANERS
17612 COLLINS AGENUE
NORTH MIAMT BEACH, FL
33160

VOR 1 5 SONS

Bureau of Air Monitoring & Mobile Sources

	The second secon	-5 -55 - 15 - 15 - 15 - 15 - 15 - 15 -	
	U.S. Postal Service CERTIFIED MAIL RECEIPT		
	(Domestic Mail Only: No Insurance Coverage Pro	vided);,	
7584	OFFICIAL US		
3095	Postage \$ Certified Fee	QU V	
0013	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)		
1670	Tote' 10 AIRS ID # 0250895001AG MARK ORLHAC		
7,000	Stree, 176 BEACH LAUNDRY & DRY CLEANER 17612 COLLINS AVENUE NORTH MIAMI-BEACH FL 33160	S	

	Z 333 (US Postal Service Receipt for Cer	tified Mail	<u>a</u>
170	6 BEACH LAUNDRY ARK ORLHAC 512 COLLINS AVENU PRTH MIAMI BEACH	IE.	5 `
	Postage	\$	
	Certified Fee		
	Special Delivery Fee		
10	Restricted Delivery Fee		
1996	Return Receipt Showing to Whom & Date Delivered		
April	Return Receipt Showing to Whom, Date, & Addressee's Address		
800,	TOTAL Postage & Fees	\$	
/ PS Form 3800 , April 1995	Postmark or Date		

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 card to you. Attach this form to the front of the mailpiece, or on the back if spaners. Write 'Return Receipt Requested' on the mailpiece below the article was delivered at this road.	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery
delivered.	4a. Article Number 2 3 3 3 6 6 0 5 7 8
AIRS ID # 0250895 AIRS ID # 0250895 176 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160	Registered Insured Insured Return Receipt for Merchandise COD
5. Received By: (Print Name)	B. Addressee's Address (Only if requested and fee is paid)
5. Received By: (Print Name) 6. Signature: (Addressee or Agent) 8. Form 3811. December 1994	102595-97-B-0179 Domestic Return Receipt

SENDER: COMPLET	DN DEFINERAL POLD SIT LINE OVER TOP
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery 3 2 6 5 C. Signature Agent Addressee
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
AIRS ID # 0250895 76 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC 7612 COLLINS AVENUE	<u> </u>
ORTH MIAMI BEACH FL 33160	3. Service Type Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
Z 210 66 B51	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Copy from service label) PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-99-M-1789

Z 210 661 851

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided

AIRS ID # 0250895

176 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160

Postage \$

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, & Addresse's Address

TOTAL Postage & Fees

Postmark or Date

on the reverse side?	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 card to you. Attach this form to the front of the mailpiece, or on the back if spac permit. Write "Return Receipt Requested" on the mailpiece below the article "The Return Receipt will show to whom the article was delivered and delivered.	e does not e number.		Receipt Service.
ADDRESS completed o	AIRS ID 0250895 MONIK ENTERPRISES INC MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160	4b. Service ☐ Registere ☐ Express	Type ed Mail Insured eceipt for Merchandise □ COD	you for using Return
Is your RETURN	5. Received By: (Print Name) 6. Signature: (Addresses or Ament) X PS Form 3811, December 1994	8. Addresse and fee is	pe's Address (Only if requested s paid) Domestic Return Receipt	Thank

. Z 333 I	613 356
US Postal Service Receipt for Cer	tified Mail
MONIK ENTERPRISES MARK ORLHAC 17612 COLLINS AVEN NORTH MIAMI BEAC	NUE
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address TOTAL Postage & Fees Postmark or Date	

on the reverse side?	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 card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write 'Return Receipt Requested' on the mailpiece below the article. The Return Receipt will show to whom the article was delivered and delivered.	can return this e does not e number.	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.	ceipt Service.
ADDRESS completed	AIRS ID # 0250895 176 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160	4a. Article No. Service Registere Express I Return Rec	Type ad	you for using Return Re
Spour RETURN	5. Received By: (Print Name) 6. Signature: (Addressee O. Agant) Addressee O. Agant)	8. Addressee and fee is	e's Addréss (Only if requested paid)	Thank
(-	PS Form 3811 , December 1994		Domestic Return Receipt	- }

		P 1,74 0	52 020 1644	
}		US Postal Service	(, (,))	
		Receipt for Ce	ertified Mail	
	- 1	76 BEACH LAUNDR 1ARK ORLHAC 7612 COLLINS AVEN ORTH MIAMI BEACH	AIRS ID # 0250895 Y & DRY CLEANERS IUE H FL 33160	
		Postage	1.	
		Certified Fee		
		Special Delivery Fee		
	ťυ	Restricted Delivery Fee		
	April 1995	Return Receipt Showing to Whom & Date Delivered		
	, Apr	Return Receipt Showing to Whom, Date, & Addressee's Address		
	PS Form 3800 ,	TOTAL Postage & Fees	\$	
	E	Postmark or Date		
	Ē			
	8			
_				

AIRS ID # 02508 176 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC	95
NORTH MIAMI BEACH FL 33160	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes

nece	eipt for (Certifie	d Mail	
NI- 1			IRS ID#	0250895
6 BEA	CH LAUNI	DRY & D	RY CLEA	NERS
	ORLHAC			
	DLLINS AV		22160	
OKIHI	MIAMI BE	ACH FL	2,100	
	•			
Postage	•	\$		
Certified	l Fee			
ı				
Special	Delivery Fee			
Restricte	Delivery Fee	3		
Restricte		g to		
Restricte Return F Whom 8	ed Delivery Fee	g to d		

. ..

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

303105

Esase 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

RECEIVED MAIL ROOM FEB 20 00

Do NOT Remove Label

AIRS ID 0250895

MONIK ENTERPRISES INC MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING V

0393333

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 # 0250895

176 BEACH LAUNDRY & DRY CLEANERS MARK ORLHAC 17612 COLLINS AVENUE NORTH MIAMI BEACH FL 33160 FOR GOVERNMENT USE ONLOGIS: 37550101000 EO: BB Fund: 20-2-035001 Obj.: 002273

(cut here)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

400097

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

Do NOT Remove Label

176 BEACH LAUNDRY & DRY CLEANERS 17612 COLLINS AVENUE

NORTH MIAMI BEACH FL 33160

MARK ORLHAC

TOTAL AMOUNT DUE: \$50.00

E Remove Label

AIRS ID # 0250895
INDRY & DRY CLEANERS
C AVENUE
BEACH FL 33160

TOTAL AMOUNT DUE: \$50.00

Mobile Sources
Sources
F C 7

Obj.: 1002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

03.64982

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 # 0250895 176 BEACH LAUNDRY & DRY CLEANERS

MARK ORLHAC 17612 COLLINS AVENUE

NORTH MIAMI BEACH FL 33160

FOR GOVERNMENT USE ONL Org.: 37550101000 EO; B1

Fund: 20-2-035001

Obj.: 002273