

# 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. Frank Vantuyl Deluxe Cleaners 13027 Northwest 7 Avenue North Miami, Florida 33168

Re: Facility No.: 0250899

Dear Mr. Vantuyl:

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

una .......

DD/jw

cc: Mr. Ewart Anderson, Dade County

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



### Department of Environmental Protection

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

David B. Struhs Secretary

August 9, 2001

Mr. Frank Van Tuyl, Sr. My Cleaners 13027 Northwest 7 Avenue Miami, Florida 33168

Dear Mr. Tuyl:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on August 1.

In reviewing your submittal, it was noted that My Cleaners elected to surrender its existing Title V air general permit (AIRS ID 0250899). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 850/921-9583.

Sincerely,

Sandra Bowman

Bureau of Air Monitoring and Mobile Sources

SB/jw

Enclosure

cc: Ms. Mallika Muthiah, Dade County

"More Protection, Less Process"

Printed on recycled paper.

# 0250899 p14 (c) Should be marked P16

#### Perchloroethylene Dry Cleaning Facility Notification

#### **Facility Name and Location**

1.					
	Pt 5 INC.				
2.	Site Name (For example, plant name or number):				
	DELUXE CLEADERS				
3.	Hazardous Waste Generator Identification Number:				
	PL. 3-097-52-6009-9				
4.	Facility Location: 13027 WW 74VE Street Address:				
	PL. 3-097-52-1009-9  Facility Location: 13027 NW 7 2W Street Address: 13027 NW 7 2W Zip Code: 33168				
5.	Facility Identification Number (DEP Use):				
	0250899				
	Responsible Official				
6.	Name and Title of Responsible Official:				
	FRANK VANTUY, OWNER				
7.	Responsible Official Mailing Address:				
	Organization/Firm: Sprove 18. About				
	Street Address:  City: Zip Code: Zip Code:				
	English Englis				
8.	Responsible Official Telephone Number:				
	Telephone: (305)688 - 3211 Fax: (305)688 - 7311				
L					
	Facility Contact (If different from Responsible Official)				
9.	Name and Title of Facility Contact (For example, plant manager):				
10	Facility Contact Address:				
10.	Facility Contact Address: SAME ASONE				
	Street Address:				
	City: County: Zip Code:				
11.	Facility Contact Telephone Number:				
	Telephone: ( ) - Fax: ( ) -				
	RECEIVED				

NOV 5: 1997

Bureau of Air Monitoring & Mobile Sources

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

#### **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.

Example  Dry-to-Dry Unit  (1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls  Washer Unit  (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls  Dryer Unit	ID	Machine Initially Purchased	Control Device Installed	ID	Date Machine Initially Purchased	Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
(1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls  Washer Unit (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
(2) w/ carbon adsorber (3) w/ no controls  Washer Unit (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls		_	-						
(3) w/ no controls  Washer Unit  (4) w/ ref. condenser  (5) w/ carbon adsorber  (6) w/ no controls		12/1990	12/1990			]			
Washer Unit  (4) w/ ref. condenser  (5) w/ carbon adsorber  (6) w/ no controls		7	,,,,,						
(4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls	-	_	_						
(5) w/ carbon adsorber (6) w/ no controls					L	-			
(6) w/ no controls		1							
	_								
Dryer Unit		_							
					_			•	
(7) w/ ref. condenser	_	J		]	1	1			
(8) w/ carbon adsorber	_								
(9) w/ no controls									
Reclaimer Unit			•	1		1		•	1
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
<ul> <li>(b) Control devices are</li> <li>(c) No control devices at</li> <li>2.(a) What was the total q</li> <li>(b) If less than 12 month Check why it is less</li> </ul>	are r quant galle	equired to be ity of perchlo ons ow many? [_	installed [_oroethylene (	(perc)	purchased i				
3. What is the facility's son (Indicate with an "X". S Existing small are Existing large are	Seleo ea so	ource []	cation only.	) ew sr	initions foun nall area sou rge area sou	rce [	(3) of	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is requi (Indicate with an "X".)	red on machines p	oursuant to section (5) of P	art II of this notification form?
Existing large area source Carbon adsorber		Refrigerated condenser	
New small area source Refrigerated condenser			
New large area source Refrigerated condenser			ξ.
5. A facility which contains non-exto Rule 62-213.300, F.A.C. Verify exemption criteria or that no such wall steam and hot water generating boiler HP or less), and (2) are fired during which propane or fuel oil contains and hot water generating No such units on-site	that all steam and inits exist on-site: units on-site (1) if dexclusively by no ontaining no more	I hot water generating unit have a total heat input of l atural gas except for perion	on-site meet the following  0 million BTU/hr or less (298)  ds of natural gas curtailment
Equipm	ent Monitoring a	nd Recordkeeping Inform	nation
Check all logs which are required t	o be kept on-site i	n accordance with the requ	uirements of this general permit:
(a) Purchase receipts and solvent p	urchases		
(b) Leak detection inspection and r	epair		$\swarrow$
(c) Refrigerated condenser tempera	nture monitoring		[×]
(d) Carbon adsorber exhaust perc c	oncentration mon	itoring	
(e) Instrument calibration			
(f) Start-up, shutdown, malfunctio	n plan		<u> </u>

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

#### Surrender of Existing Air Permit(s)

Please indicate	e with an "X" the appropriate selection:		
I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)			
[]	No air permits currently exist for the operation of the facility indicated in this notification form.		
	Responsible Official Certification		
this notifi statement maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in acation. I hereby certify, based on information and belief formed after reasonable inquiry, that the is 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	mptly notify the Department of any changes to the information contained in this notification.		

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

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

TYPE OF INSPECTION: ANNUAL COMP	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 210 TIME OUT: 252	AIRS ID#:
TYPE OF FACILITY:	0430077
FACILITY NAME: FIRE TRY	DATE: 2
FACILITY LOCATION: 44 54 119	VIII CICITO
- Company of the comp	
RESPONSIBLE OFFICIAL:	PHONE NUMBER: 3211
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administration	- · · · · · · · · · · · · · · · · · · ·
Based on the results of the compliance requirements evaluate discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
:	
	MAR Bureau of & Mot
	f998 Monit ource
••	3 0 1998 Air Monitoring ile Sources
<del></del>	
•	
COMMENTS:	<u></u>
FACILITY IS IN COM	Parse.
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: 2 1999	
A Commence of the Commence of	pproximate)
INSPECTION CONDUCTED BY:	lease Print)
INSPECTOR'S SIGNATURE:	PHONE NUMBER: 37/ 6922
19/18/19/19	
Page /	of / . Revised 10/96

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

FACILITY NAME: DELIXE CLEAN	IERS	date: <u>2-10-9</u> 8
FACILITY LOCATION: 1302, NW 7	me	
No MANI		
Annual Reporting Period:	19 <u>97</u> to 2	-10 19 <u>98</u>
Based on each term or condition of the Title V general air permi 62-213.300, Florida Administrative Code (F.A.C.), during the po	•	<i>-</i>
If NO, complete the following:		
#1. Term or condition of the general permit that has not been in	continuous compliance during t	he reporting period stated above:
<u> </u>		
Exact period of non-compliance: from	to	w w
Action(s) taken to achieve compliance:		R 3
Method used to demonstrate compliance:		0 19
		nitori rces
#2. Term or condition of the general permit that has not been in	a continuous compliance during	the reporting period stated above:
Exact period of non-compliance: from	to	<u> </u>
Action(s) taken to achieve compliance:		
Method used to demonstrate compliance:		
As the responsible official, I hereby certify, based on information made in this notification are true, accurate and complete. Furt upon rolling averages of purchase receipts, does not exceed 2, year for transfer or combination facilities.	ther, my annual consumption of p	perchloroethylene solvent, based
RESPONSIBLE OFFICIAL: YFKAWK VANTO Name (Please Print)	IL X JUN AV	(n V 10/2/90
Name (Please Print)	Signatu	ne 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.

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

AAAAA CAAAAA AAAAA	
COMPLIANCE INSPECTION CHECK	KLIST

TYPE C	)F INSP	ECTION
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	<i>P</i> •
PERCHLOROETH	YLENE DRY CLEANERS
TITLE V	CENERAL PERMIT
COMPLIANCE I	COMPLAINT/DISCOVER OF TO 1998
TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVER COMPLAINT/DIS
RE-INSPECTIO	Nobje Air 12
	Solution
airs id#: <u>0250899</u> date: <u>2-10</u> -	90 time in:210 time out: 250
FACILITY NAME: DELUXE	Cleaners
FACILITY LOCATION: 13027 A	(W 79T.
No. Minn	7/
responsible official : FRANK/	ANTUY PHONE: 6883211
CONTACT NAME:	PHONE:
<del></del>	
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	rtup
2. Facility failed to notify DARM to use general pe	rmit 🗆
	·
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box)	☐ Drop store/out of business/petroleum
A. 1. Posiation and House assume	2. New 2002 House 2000 D
1. Existing small area source dry-to-dry only, x < 140 gal/yr	2. New small area source ☐ dry-to-dry only, x < 140 gal/yr
transfer only, x < 200 gal/yr	transfer only, x < 200 gal/yr
both types, x < 140 gal/yr	both types, x < 140 gal/yr
(constructed before 12/9/91)	(constructed on or after 12/9/91)
3. Existing large area source	4. New large area source
dry-to-dry only, $140 \le x \le 2{,}100 \text{ gal/yr}$	dry-to-dry only, $140 \le x \le 2,100$ gal/yr
transfer only, $200 \le x \le 1,800$ gal/yr	transfer only, $200 \le x \le 1,800$ gal/yr
both types, $140 \le x \le 1,800 \text{ gal/yr}$	both types, $140 \le x \le 1,800$ gal/yr
(constructed before 12/9/91)	(constructed on or after 12/9/91)
5. This is a correct facility classification	☑Y □N □Can not determine
If no, please check the appropriate classifi	cation:
☐ facility qualified for a ge	la l
R The total quantity of perchlorosthylana (nove)	purchased within the preceding 12 months by this day cleaning
facility was gallons.	purchased within the preceding 12 months by this dry cleaning
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· ·

TART III. GENERAL CONTROL REQUIREMENTS				
Is the responsible official of the dry cleaning facility: (check appropriate boxes)				
1. Storing perchloroethylene in tightly scaled and impervious containers?	אואש אם עם			
2. Examining the containers for leakage?	אמש מם עם			
3. Closing and securing machine doors except during loading/unloading?	MO AM			
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?	אואם אם עם			
PART IV: PROCESS VENT CONTROLS				
In Part II-A:				
If classification 1 has been checked, no controls are required. Proceed to Part V.				
If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).				
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993				
If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).				
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)				
1. Equipped all machines with the appropriate vent controls?	מם עם			
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?	OY ON ON/A			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	□У □И			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON ON/A			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	מם עם			

B. Has the responsible official of an existing large or new large area source also:	
<ol> <li>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?</li> </ol>	□У СИ
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ON/A
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?  Is the perc concentration equal to or less than 100 ppm?	OY ON ON/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?	OY ON ON/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y □N □N/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A
PART V: RECORDKEEPING REQUIREMENTS	

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	/
1. Maintained receipts for perc purchased?	RY ON
2. Maintained rolling monthly averages of perc consumption?	QA ON
3. Maintained leak detection inspection and repair reports for the following:	,
a. documentation of leaks repaired w/in 24 hrs? or;	DY DN DAVA
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 ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN DYNA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON CYNA
6. Maintained startup/shutdown/malfunction plan?	DAY DN
7. Maintained deviation reports?	AMA NO YO
Problem corrected?	DY DN DYJA
8. Maintained compliance plan, if applicable?	DY ON WIN/A

PART VI:	LEAK DETECTION AND RE	PAIRS				
1. Does the	responsible official conduct a w	eekly (for small sources, b	i-weekly) leak detection an	d repair		
inspection	n?			NO ARD		
2. Has the fa	acility maintained a leak log?	·		$\langle v \rangle$		
3. Does the	responsible official check the fo	llowing areas for leaks?				
	se connections, fittings, ouplings, and valves	MY ON ON/A	Muck cookers	OY UN ON/A		
Doc	or gaskets and seating	מאם אם אם	Stills	DY ON ON/A		
Filt	ter gaskets and seating	DY ON ON/A	Exhaust dampers	OY ON ON/A		
Pur	mps	DY ON ON/A	Diverter valves	DY ON ON/A		
Sol	vent tanks and containers	MY ON ON/A	Cartridge filter housings	DY ON ON/A		
Wa	iter separators	MY ON ON/A				
4. Which m	nethod of detection is used by the	e responsible official?		,		
Vis	sual examination (condensed sol	vent on exterior surfaces)		4		
Phy	ysical detection (airflow felt thro	ough gaskets)		শ্ৰ		
Od	or (noticeable perc odor)			প্র		
Use	e of direct-reading instrumentati	on (FID/PID/calorimetric	tubes)			
Hai	logen 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?

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

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

Inspector's Name (Please Print)

DY DN

DY DN

 $\Box Y \Box N$ 

ADDITIONAL SITE INFORMATION:		
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#### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL. RE-INSPECTION	į (		COMPLÁB	NT/DISCOV	VERY	Ü	
AIRS ID#: <u>0250899</u>	DATE: 5 - 25-	99 T	IME IN:	18 1 pm	TIME	OUT: _	145 Pm	
FACILITY NAME:	Defuxe		24	Clea	me			_
FACILITY NAME:	13027	v-65	7	th s	ve	8		~
RESPONSIBLE OFFICIAL :						(D		ECE
CONTACT NAME:				PHONE: _		Sou	79	
						- res	<del>-</del>	
PART I: NOTIFICATION						ng		O
(check appropriate box)				· · · · · · · · · · · · · · · · · · ·				
1. New facility notified DARM	30 days prior to star	tup				**	0 -	
2. Facility failed to notify DAF	UM to use general per	mit					0	
PART II: CLASSIFICATIO	N							
Facility indicated on notificat (check appropriate box)	ion form that it is:				ification for ore/out of b		etroleun	1
1. Existing small area sou dry-to-dry only, x < 140 ga transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91	l/yc r	dry-to-c transfer both typ	iry only, only, x pes, x <	rea source x < 140 gal < 200 gal/yr 140 gal/yr or after 12/	r			
3. Existing large area soudry-to-dry only, $140 \le x \le 1.8$ transfer only, $200 \le x \le 1.800$ both types, $140 \le x \le 1.800$ (constructed before 12/9/9)	2,100 gal/yr 00 gal/yr ) gal/yr	dry-to- transfer both ty	dry only r only, 20 pes, 140	rea source , $140 \le x \le 1$ , $00 \le x \le 1$ , $00 \le x \le 1$ , $00 \le x \le 1$ ,	gal/yr			
5. This is a correct facility	classification	ar	Ωи	□Can no	ot determine			
	e appropriate classifu ility qualified for a go ility exceeds above li	eneral per						
B The total quantity of perch		urchased	within th	ne preceding	g 12 months	by this d	lry clean	ing

月 まま 1 of S 06/19

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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 BNIA
2. Examining the containers for leakage?	DY DN DNIA
3. Closing and securing machine doors except during loading/unloading?	BY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY ON ONA
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY ON ON/A
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification I has been checked, no controls are required. Proceed to Part V.	
If classification 2 has been checked, the machine should be equipped with a refrigi (complete A below).	erated condenser
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 refrig (complete A and B below).	erated condenser
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)	
Equipped all machines with the appropriate vent controls?	. DY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	DY ON ONIA
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	DY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON ONIA
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:			
١.	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?	ZV.	ΟN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ŪΥ	ON (	anin_
	Is the temperature differential equal to or greater than 20° F?	ΩY	Ои Х	ZN/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,	O.		
	if machines are equipped with a carbon adsorber?	ΩY		ZIN/A
	Is the perc concentration equal to or less than 100 ppm?	ÜΥ	□N Y	ZIN/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	ОΝ	MNV
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПN	DNIA
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	DИ,	DNA

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

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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 N N/A  Filter gaskets and seating  Y N N/A  Stills  Y N N/A  Filter gaskets and seating  Y N N/A  Solvent tanks and containers  Y N N/A  Water separators  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation, is the equipment:  a. Capable of detection is used by the responsible officials in a range of 0-500 ppm?  Officials in a standard gas prior to and after each use  C. Inspected for leaks and obvious signs of wear on a weekly basis?  Other through gaskets in a range of 0-500 ppm?  Other th	1. Does the responsible of	AND REPAIRS			
Hose connections, filtings, couplings, and valves  Door gaskets and seating  Pumps  Filter gaskets and seating  Pumps  Solvent tanks and containers  Water separators  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  La Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  (PID/FID only)?  c. Inspected for leaks and obvious signs of wear on a weekly basis?  e. Verified for accuracy by use of duplicate samples (calorimetric set as a set as a set as a set of a concentration of the samples (calorimetric set as a set as a set as a set of a concentration of the samples (calorimetric set as a set of a concentration of the samples (calorimetric set as a set as	inspanial conficial confic	duct a weath		and a second sec	
Hose connections, filtings, couplings, and valves  Door gaskets and seating  Pumps  Filter gaskets and seating  Pumps  Solvent tanks and containers  Water separators  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  La Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  (PID/FID only)?  c. Inspected for leaks and obvious signs of wear on a weekly basis?  e. Verified for accuracy by use of duplicate samples (calorimetric set as a set as a set as a set of a concentration of the samples (calorimetric set as a set as a set as a set of a concentration of the samples (calorimetric set as a set of a concentration of the samples (calorimetric set as a set as	mspection?	" "Cextly (for small sources, bi-)	Weekland	The state of the s	
Hose connections, filtings, couplings, and valves  Door gaskets and seating  Pumps  Filter gaskets and seating  Pumps  Solvent tanks and containers  Water separators  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  La Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  (PID/FID only)?  c. Inspected for leaks and obvious signs of wear on a weekly basis?  e. Verified for accuracy by use of duplicate samples (calorimetric set as a set as a set as a set of a concentration of the samples (calorimetric set as a set as a set as a set of a concentration of the samples (calorimetric set as a set of a concentration of the samples (calorimetric set as a set as	2. Has the facility maintains	,	reckty) leak de	ection and repa	ir
Door gaskets and seating  Pumps  Filter gaskets and seating  Pumps  Solvent tanks and containers  Water separators  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  (PID/FID only)?  C. Inspected for leaks and obvious signs of wear on a weekly basis?  iv ON ON/A  Muck cookers  A Muck cookers  OY ON ON/A  Stills  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Liverity valves  ON/A  A Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  ON/A  Cartridge filter housings  OY ON ON/A  A Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Odor (noticeable perc odor)  Use of direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  ON/A  Diverter valves  ON/A  ON/A  Cartridge filter housings  ON ON/A  Visual examination (PID/PID/Calorimetric tubes)	3. Does the respective	log?			
Door gaskets and seating  Pumps  Filter gaskets and seating  Pumps  Solvent tanks and containers  Water separators  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  (PID/FID only)?  C. Inspected for leaks and obvious signs of wear on a weekly basis?  iv ON ON/A  Muck cookers  A Muck cookers  OY ON ON/A  Stills  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Liverity valves  ON/A  A Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  ON/A  Cartridge filter housings  OY ON ON/A  A Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Odor (noticeable perc odor)  Use of direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  ON/A  Diverter valves  ON/A  ON/A  Cartridge filter housings  ON ON/A  Visual examination (PID/PID/Calorimetric tubes)	is responsible official check	the follow:			ON
Door gaskets and scating  Pumps  Pump	couplings, and valves			Dγ	Dи
Filter gaskets and seating  Pumps  Solvent tanks and containers  Y ON ON/A  Water separators  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (F1D/P1D/calorimetric tubes)  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  (P1D/F1D 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 each was a standard of the property of th		/ 1710	ck cookers	_	
Pumps    Pumps		UY ON DINIA Still			
Solvent tanks and containers  OY ON ON/A  Water separators  4. Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  OPID/FID only)?  c. Inspected for leaks and obvious signs of wear on a weekly basis?  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON/A  Cartridge filter housings OY ON ON ON/A  Cartri			aust dampers		
Water separators  Or On On/A  Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  OPID/FID only)?  c. Inspected for leaks and obvious signs of wear on a weekly basis?  OR ON/A  Cartridge filter housings  OP ON ON/A  Catridge filter housings  OP ON ON ON/A  ON ON ON ON/A  Catridge filter housings  OP ON	Solvent tanks and containers	Dive			
Which method of detection is used by the responsible official?  Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  (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 call to	Water separate	UY ON DNIA Carry			
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?  (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 and local calorimetric and local calor	. Which method of detection is well a	SIN XINIA		ugs OA OM	DNIV
Use of direct-reading instrumentation (F1D/P1D/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting pere vapor concentrations in a range of 0-500 ppm?  (P1D/F1D 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 cally to the samples (calorimetric cally to the samples)	Physical a	olvent on exterio			•
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?  DN/A  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 call by	Odor (noticeable page 14)	rough gaskets)			
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 call by				8	
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 call by	Halogen leak detector	ion (FID/PID/calorimetric tubes)		· 8	
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 call by	If using direct-reading instru	D		_	
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 call by	a. Capable of detecting pe	to wine			
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 call by	b. Calibrated against a star (PID/FID only)?	ndard gas prior to and a ferr	10-500 ppm?		
e. Verified for accuracy by use of duplicate samples (calorimetric call )?	c. Inspected for leaks and	after each use			
e. Verified for accuracy by use of duplicate samples (calorimetric call )?	d. Kept in a clean and secur	Carea wh	sis?		
Ty ON duplicate samples (calorimetric only)?	e. Verified for accuracy by	use of dual:			
77. 110 00 11	1	or duplicate samples (calorimetric	c only)?	DY ON	

Inspector's Name (Please Print)

Inspector's Signature

Date of Inspection

1 2000

#### ADDITIONAL SITE INFORMATION:

Facility have not used bry Cleaning machine Since loto 97 to Early 98. Hence no gene WAS purchased Since

## TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 18 PM TIME OUT: 45	PM AIRS ID#: 0250899
TYPE OF FACILITY: Perc Dry	cleono
FACILITY NAME: Defuxe	DATE: 5/25/99
FACILITY LOCATION: 13022 No	7th Ave,
RESPONSIBLE OFFICIAL: FRANK United	PHONE NUMBER: 688-32/1
Based on the results of the compliance requirements evalual compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evalual	ative Code (F.A.C.).
discrepancies were noted:	, , , , , , , , , , , , , , , , , , ,
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
-	
· 	
<del></del>	
COMMENTS: PACILITY Fast	Does Caundy only
The Annual Compliance Certification form has been properly certification	ed and submitted to the inspector.
DATE OF NEXT INSPECTION: 5/Low (Ap	proximate)
INSPECTION CONDUCTED BY:	ease Print)
INSPECTOR'S SIGNATURE: # 00 1	PHONE NUMBER: (305) 372~692r
Page	of Revised 10/96

All

AIRS ID#: 0250899

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

FACILITY NAME:	Delur	<u> </u>	. ,		E: 5/25/99
FACILITY LOCATION:	13027	NW 7	ave	<u></u>	
		,			
Annual Reporting Period:	MA	19 <u>_</u> 93	<u> </u>	MAJ	19 <i>99</i>
Based on each term or condition 62-213.300, Florida Administra	=	_		~ ~	DEP Rule
If NO, complete the following:					
#1. Term or condition of the go	eneral permit that has no	t been in continuou	s compliance dur	ing the reporting pe	riod stated above:
Exact period of non-compliance	e: from		to		·
Action(s) taken to achieve comp	pliance:		•		
Method used to demonstrate co	mpliance:				<del>_</del>
#2. Term or condition of the go	eneral permit that has no	t been in continuou	s compliance dur	ing the reporting per	riod stated above:
Exact period of non-compliance	e: from	•	to		
Action(s) taken to achieve comp	pliance:				
Method used to demonstrate co	mpliance:				
As the responsible official, I he made in this notification are true upon rolling averages of purch year for transfer or combination RESPONSIBLE OFFICIAL:	ue, accurate and comple ase receipts, does not ex n facilities.	te. Further, my anr	ual consumption	of perchloroethylen	e solvent, based

Page of ]

<sup>\*</sup>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.

#### **BEST AVAILABLE COPY**

### PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT

COMPLIANCE	INSPECTION CHECKLIST				
TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY				
RE-INSPECTION RE	ON U E				
AIRS ID#: 0250899 DATE: 3/15/	OO TIME IN: 1000 TIME OUT: 1120				
Alto Ibii. Udaavo Cara agree					
FACILITY NAME: <u>Setuxe</u> C	or Clean Som				
AIRS ID#: 0250899 DATE: 3/15/ FACILITY NAME: Delixe D FACILITY LOCATION: 13027	DW 7 Ave. BE				
Mam,	FL				
RESPONSIBLE OFFICIAL: <u>Sonia Vend</u>	PHONE: 302- 688-3211				
	PHONE:				
PART I: NOTIFICATION					
(check appropriate box)					
1. New facility notified DARM 30 days prior to sta	rtup 🗆				
2. Facility failed to notify DARM to use general pe	rmit .				
(					
PART II: CLASSIFICATION					
Facility indicated on notification form that it is:	☐ No notification form				
(check appropriate box)	☐ Drop store/out of business/petroleum				
A.  1. Existing small area source	2. New small area source				
dry-to-dry only, x < 140 gal/yr	dry-to-dry only, x < 140 gal/yr				
transfer only, $x < 200 \text{ gal/yr}$	transfer only, x < 200 gal/yr				
both types, x < 140 gal/yr	both types, x < 140 gal/yr				
(constructed before 12/9/91) (constructed on or after 12/9/91)					
3. Existing large area source	4. New large area source				
dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$	dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$				
transfer only, $200 \le x \le 1,800 \text{ gal/yr}$	transfer only, $200 \le x \le 1,800$ gal/yr				
both types, $140 \le x \le 1,800 \text{ gal/yr}$	both types, $140 \le x \le 1,800 \text{ gal/yr}$				
(constructed before 12/9/91)	(constructed on or after 12/9/91)				
5. This is a correct facility classification	5. This is a correct facility classification SY ON OCan not determine				
•	ation:				
If no, please check the appropriate classific					

facility was \_\_\_O\_ gallons.

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

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

PART III: GENERAL CONTROL REQUIREMENTS

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

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official: (check appropriate boxes)					
1. Maintained receipts for perc purchased?	Øry □N				
2. Maintained rolling monthly total of perc consumption?	ØY ON				
3. Maintained leak detection inspection and repair reports for the following:					
a. documentation of leaks repaired w/in 24 hrs? or;	MAY MAN BENTA				
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	DAY DAY ON/A				
4. Maintained calibration data? (for applicable direct reading instruments)	A/44SQ ND YED				
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON EPN/A				
6. Maintained startup/shutdown/malfunction plan?	ØY □N				
7. Maintained deviation reports?	OY ON QAN/A.				
Problem corrected?	DY DN ETN/A				
8. Maintained compliance plan, if applicable?	OY ON ZEN/A				

P	PART VI: LEAK DETECTION AND REPAIRS						
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
	inspection?					<b>⊠</b> Y	ΠN
2.	Has the facility maintained a leak log?					ΠY	<b>449</b>
3.	Does the responsible official check the	follow	ing ar	eas for leaks?			
	Hose connections, fittings, couplings, and valves	Ø¥	□и	□N/A	Muck cookers	ΠY	□n Eańn/a
	Door gaskets and seating	ÆY	□и	□N/A	Stills	ЮY	□N □N/A
	Filter gaskets and seating	<b>Z</b> Y	□N	□N/A	Exhaust dampers	ØY	□N □N/A
	Pumps	ÆY	□N	□N/A	Diverter valves	бY	□N □N/A
	Solvent tanks and containers	ÆΥ	□N	□N/A	Cartridge filter housings	<b>e</b> Y	□N □N/A
	Water separators	ÐΥ	□N	□N/A			
4.	Which method of detection is used by t	the resp	onsib	le official?			
	Visual examination (condensed s	olvent (	on ext	terior surfaces)			,
	Physical detection (airflow felt th	rough g	gaske	ts)		Ø	
	Odor (noticeable perc odor)				<b>Z</b>		
	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)						
	Halogen leak detector						
	If using direct-reading instrumentation, is the equipment:				□N/.	A	
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?				ΩY	□N ·	
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?			ΩY	□N		
	c. Inspected for leaks ar	nd obvio	ous si	gns of wear on	a weekly basis?	ΠY	□N
	d. Kept in a clean and s	ecure ar	rea w	hen not in use?		ΟΫ́	□N
e. Verified for accuracy by use of duplicate samples (calorimetric only)?				ΩY	□N		
					<del></del>		
					/ . / .		
-	Inspector's Name (Please Prin	nt)			Date of Inspection		
	Inspector's Signature				Approximate Date of 1	Next I	nspection

- 2.0. has not purchased any pere in the part year.
- Stone is currently operating as drop-off according to R.O. Sonia. But employee at site says that they dry clean about a every week at most may be every or week and a half on I weeks.
- Machine does not have containment,
- No recordkeeping of any Kind.
- Do apory paint
- R.O. States that Safety Klain will remove all pose from machine on 3/1760. Showill fox recept.
  - Repair was performed to cooker (welded crack)
  - R.O. states that she is preparing to purchase another machine and which containent a sporcy will be installed.
  - Curent mechnie is a Real Star # 843567 # 843468

3/00 Repair recept & pour recepts received

## TITLE V AIR QUALITY GENERAL PERMIT SPECTION SUMMARY REPORT

TYPE OF INSPECTION: AN	NUAL 🔂 (	COMPLAINT/DISC	COVERY	RE-INSPECTIO	N 🗌
TIME IN: LOOO	_TIME OUT:	כ	_AIRS ID#:	092089	}
TYPE OF FACILITY: Pa	re Dy C	leaner		<u> </u>	
FACILITY NAME:	elexx Dry	Clean		DATE: 2/15/	00
l'	027 00	7 Ave.	·		· .
RESPONSIBLE OFFICIAL: Sov	na Vendey	P	PHONE NUMBER:_	205-688.	3911
Based on the results of the corcompliance with DEP Rule 62	•	- ,		ity is found to be in	• .
Based on the results of the cordiscrepancies were noted:	* •			wing compliance	
COMPLIANCE REQUIRE		FOLI	LOW-UP ACTIO	ON REQUIRED	
Not maintaining	leak	Main	itain lug i	- FACP	
inspection log		c	alender p	rovided	
		r			
	•				
		:	·	· 	
	* .				
_	•				
:	,				
		7			
COMMENTS:	_		· ·	•	
Dy cleani	ing machine cessary a	needs to	have co.	ntainment	
and ne	cessary a	poxy pair	.4.		٠
The Annual Compliance Certification i	orm has been properly c	ertified and submitt	ed to the inspector.	YES NO	
DATE OF NEXT INSPECTION:		(Approximate)			
INSPECTION CONDUCTED BY:_	Iva		~		
INSPECTOR'S SIGNATURE:	June Va		HONE NUMBER:_	305-372-0	6922

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: Soma V	entry
ADDRESS: 13037 N	ow 7 ave. Miam, Flor
SOURCE/LOCATION: Deloye	Bry Clean
YOU ARE HEREBY NOTIFIED that on	the following violation(s) of al Protection Ordinance, and/or regulations of the Florida ed location by an official of this Department.
Operating without an Air Permit	Excessive Visible Emissions
Uncontrolled fugitive particulates	Improper handling/removal of asbestos
Non-compliance with Stage II Vapor Recovery	Non-compliance with CFC regulations  OTHER
Specifically: Wod ,~ complian	as with Title V General Air Per
Rule 62-217.300(6)(a). Recor	colling la of perc purchases and reca
maintain leak los inspections	rolling la of peac purchases and reca
In view of the above, and pursuant to the authorities the Metropolitan Dade County Environmental Protection	onty granted to me by Sections 24-54 and 24-5(15)a,
Immediately upon receipt of this l Cease and Desist the above-refer	NOTICE, initiate corrective measures to eliminate and/or enced violation(s).
you have taken to ensure that n	is NOTICE, submit to this office in writing the steps which to further violations will occur. Said report may include justments, or servicing performed to correct the violation.
□ Within days of receipt of the 372-6925 to discuss air permit rec	nis NOTICE, contact the Air Section of this Department at juirements.
□ Within days of receipt of to discuss other Departmental permi	nis NOTICE, contact Plan Review Section at 375-3330 to tting requirements.
Failure to comply with the above or continued openforcement and penalty provisions of Sections 24	eration in violation of Chapter 24 shall subject you to the -55 and 24-56, Metropolitan Dade County Code.
For further information regarding the above, please	e contact the Air Section of this office at 372-6925.
	Sincerely,
00117	John W. Renfrow, P.E. Director
Received by: Sould lon but	By Ivan Fanni
Title:	Signature: Down Oan
Date:	Section: Ar FACILITES

Revised 10/10/96

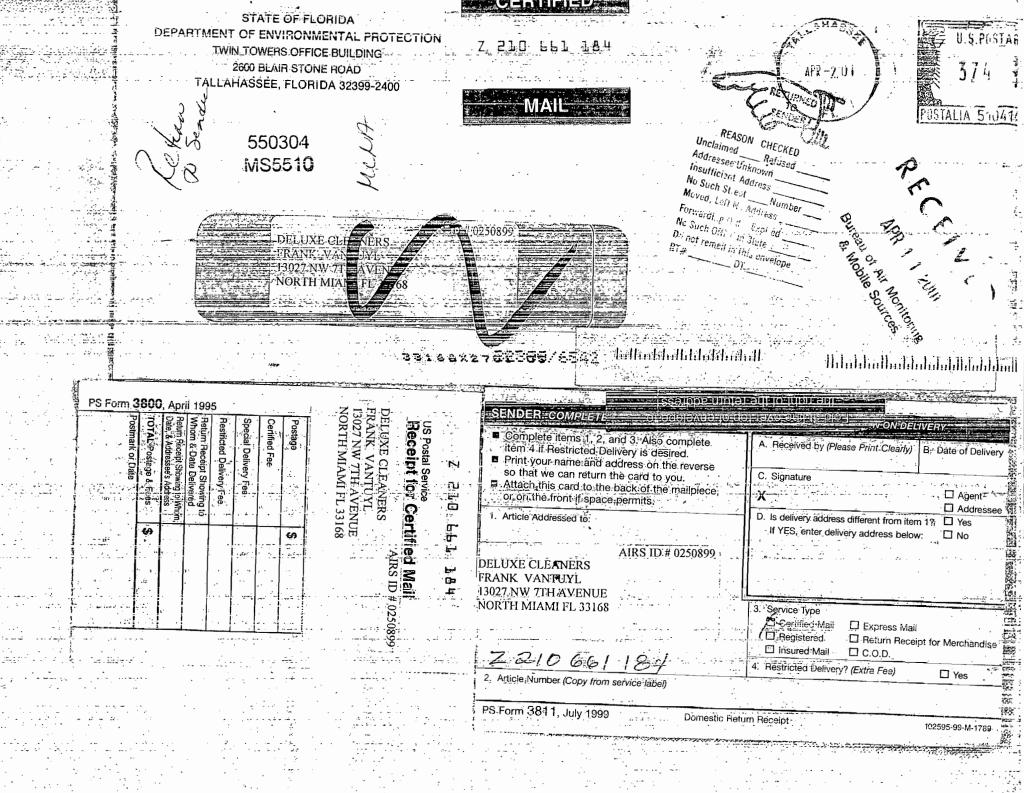
AIRS ID#: 0250899

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

FACILITY NAME: Deloxe by Clean	DATE: 3/15/00
FACILITY LOCATION: 13027 NW 7 Ave.	•
Annual Reporting Period: Nurch 1959 TO Man	
Based on each term or condition of the Title V general air permit, my facility has remained in compliance 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 report	
Exact period of non-compliance: from March 99 to March	00
Action(s) taken to achieve compliance: Maintain lank in pachon by	
Method used to demonstrate compliance: FAEP calonder	
#2. Term or condition of the general permit that has not been in continuous compliance during the report	ting 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 inquestion in this notification are true, accurate and complete. Further, my annual consumption of perchloro upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities year for transfer or combination facilities.  RESPONSIBLE OFFICIAL:  Name (Please Print)  Signature	ethylene solvent, based

Page	of
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<sup>\*</sup>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.

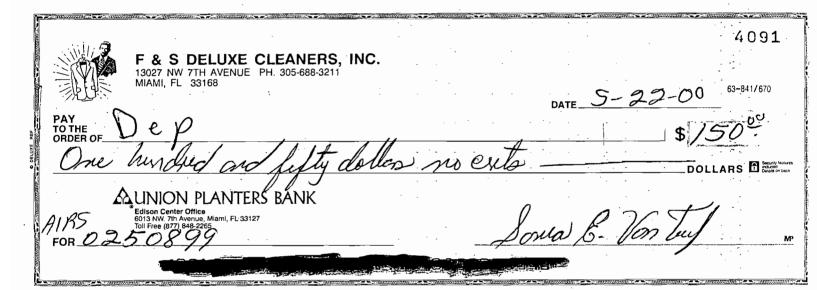


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A breakdown on the fees to be paid to DERM and the DEP are as follows:

MAY 26 OF

\$ 50.00 \$ 25.00 \$ 50.00 \$ 25.00 \$ 150.00	Annual Permit life for year 1998 Assessed 50% Penalty for year 1998 Annual Permit Fee for Year 1999 Assessed 50% Penalty for year 1999
\$ 120,00	TOTAL to be paid to DEP



A breakdown on the fees to be paid to DERM and the DEP are as follows:

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\$ 50.00	Annual Permit France for year 1998
\$ 25,00	Annual Permit Fee for Year 1999 Assessed 50% Permit Fee for Year 1999
_	Assessed 50% Penalty for year 1999 TOTAL to be paid to DEP

Sonia E. Vantuyl Deluxe Clemers 13027 NW JAVE Miani Florida 33160

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U.S. POSTAGE PAID MIAMI.FL 33:68 MAY 23.00 AMOUNT

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RETURN RECEIPT REQUESTED TITLE V AIR GENERAL PERMITS

BECEIPTS

POST OFFICE BOX 3070

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Syour RETUR	5. Received By: (Print Name)  6. Signature: (Addressee or Agent)  1. Addressee of Agent)	8. Addressee and fee is		Thank you
ĺ	PS Form 3811, December 199		Domestic Return Receipt	l

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Special Delivery Fee		
Restricted Delivery Fee		
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Return Receipt Showing to Whom, Date, & Addressee's Address		
TOTAL Postage & Fees	\$	
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Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No			
DELUXE CLEANERS FRANK VANTUYL				
13027 NW 7TH AVENUE NORTH MIAMI FL 33168	3. Service Type Certified Mail Registered Return Receipt for Merchandise CO.D.			
Z 210 663 144	4. Restricted Delivery? (Extra Fee)			
2. Article Number (Copy from service label)				
PS Form 3811, July 1999 Domestic Retu	urn Receipt 3 500 6 102595-99-M-1789			

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	Special Delivery Fee	
	Restricted Delivery Fee	
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April	Return Receipt Showing to Whom, Date, & Addressee's Address	
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PS Form <b>3800</b> , April 1995	Postmark or Date	

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Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No		
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NORTH MIAMI FL 33168	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		
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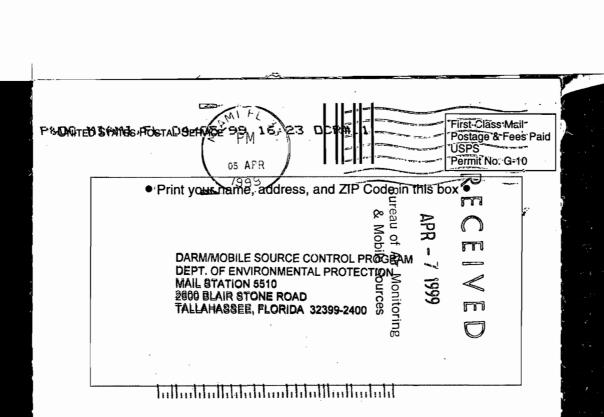
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	PS Form 3800, February	2000	See Reverse for Instructions

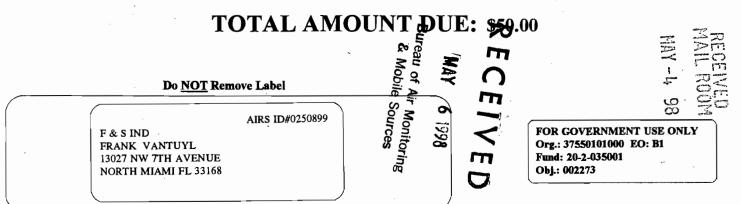
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This portion must be attached to remittance for proper handling 3755

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

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#### Z 210 661 852

### US Postal Service Receipt for Certified Mail

AIRS ID # 0250899

DELUXE CLEANERS FRANK VANTUYL 13027 NW 7TH AVENUE NORTH MIAMI FL 33168

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