

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

November 25, 1997

Mr. Aslam Dalal Majestic Cleaners 12600 Southwest Eighth Street Miami, Florida 33184

Re: Facility No.: 0250932

Dear Mr. Dalal:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 14, 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"

MEGET A IST

Perchloroethylene Dry Cleaning Facility Notification

NOV 0 3 1997

Facility Name and Location

Facility Owner/Company Name (Name of corporation, agency, or individual owner):

Air Quality

<u>Management Di</u>vision

	DALALOF MIAMI	
2.	Site Name (For example, plant name or number):	
	MAJESTIC CLEANERS	
3.	Hazardous Waste Generator Identification Number:	
	FLD 980840086	
4.	Facility Location: Street Address: 126005W BTHST	
	City: Zip Code: Zip Code:	
	MIAMI DANE 23184	
5.	Facility Identification Number (DEP Use):	
	Responsible Official	
6.	Name and Title of Responsible Official:	
	ASLAM. DALAL (SECRETARY)
7.	Responsible Official Mailing Address:	
	Organization/Firm: Street Address: SAME AS ABOUTE Zin Code:	
	City: Zip Code: Zip Code:	
8.	Responsible Official Telephone Number:	
	Telephone: $(305)553 - 4600$ Fax: () -	
	Facility Contact (If different from Responsible Official)	
9.	Name and Title of Facility Contact (For example, plant manager):	
10.	Facility Contact Address:	
	Street Address:	
	City: County: Zip Code:	
11.	Facility Contact Telephone Number:	
	Telephone: () - Fax: () -	
	<u> </u>	

RECEIVED

NOV 1 4 1997

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

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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 Machine Initially	Date Control Device		Date Machine Initially	Date Control Device	•	Date Machine Initially	Date Control Device
Type of Machine Example	# <i>1</i>	Purchased	Installed 12-NOV-93	#2	Purchased 08-DEC-91	Installed	#3	Purchased 02-MAR-92	Installed
Liample		03 001-33	12 1101 75	2	00 DBC 7.		,,,,	02 MM / 2	OL MAIN
Dry-to-Dry Unit									
(1) w/ ref. condenser		01-0CT-92	01-0CT-9Z						
(2) w/ carbon adsorber						·			
(3) w/ no controls									
Washer Unit		1			•	•			
(4) w/ ref. condenser				T					
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		1 14,9.0				•			' .
(7) w/ ref. condenser									
(8) w/ carbon adsorber					٠,		-		1
(9) w/ no controls						. ,-			1
Reclaimer Unit	7		· .						·
(10) w/ ref. condenser									T
(11) w/carbon adsorber				İ					
(12) w/ no controls									
 (b) Control devices are (c) No control devices 2.(a) What was the total of the control devices (b) If less than 12 montrol Check why it is less 	are r quant gallo	equired to be ity of perchlons ow many? [installed [_ oroethylene (perc)) purchased in				
3. What is the facility's so (Indicate with an "X". Existing small an	urce Selec	classification of one classif ource []	n based on th ication only.) No	e def) ew si	initions foun	d in section (3) of	-	
Existing large ar	ea so	urce []	N	ew la	rge area sour	rce [J .		

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4. What control technology is required on machines pursuant to section (5) of Part II of the (Indicate with an "X".)	is notification form?
Existing large area source Carbon adsorber [] Refrigerated condenser []	
New small area source Refrigerated condenser [
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall not be eligible to use the g to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site nexemption 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 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural which propane or fuel oil containing no more than one percent sulfur is fired.	•
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Recordkeeping Information	
Check all logs which are required to be kept on-site in accordance with the requirements	of this general permit:
(a) Purchase receipts and solvent purchases	•
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

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

Surrender of Existing Air Permit(s)

	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
K	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notij statemer maintair	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the sts made in this notification are true, accurate and complete. Further, I agree to operate and a the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.
I will pro	omptly notify the Department of any changes to the information contained in this notification.
Signatur	Slave Delle 11/3/97

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

	DALAL OF MIAMI ASLAM DALAL 12600 SW 8TH STREET MIAMI FL 33184 Do NOT Remove Label AIRS ID 0250932 Remove Label O NOT Remove Label
	Do NOT Remove Label
Annual Reporting Period:	>ARY 1998 TO DEC . 0 1998
	general air permit, my facility has remained in compliance with DEP Rule A.C.), during the period covered by this statement.
If NO, complete the following:	
#1. Term or condition of the general permit th	nat has not been in continuous compliance during the reporting period stated above:
Exact period of non-compliance: from	nat has not been in continuous compliance during the reporting period stated above:
Exact period of non-compliance: from Action(s) taken to achieve compliance:	To To
Method used to demonstrate compliance:	
notification are true, accurate and complete. Furth	on information and belief formed after reasonable inquiry, that the statements made in this her, my annual consumption of perchloroethylene solvent, based upon purchase receipts, ry facilities or 1,800 gallons per year for transfer or combination facilities.

Name (Please Print)

Date

Signature

^{*}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

All

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION	
	V-

ANNUAL

 \Box

COMPLAINT/DISCOVERY

 \cap

RE-INSPECTION

AIRS 1D#: 250932 DATE: 9-16-98 TIME IN:

TIME OUT: 1400

FACILITY NAME:

MAJESTIC CLEANERS

FACILITY LOCATION: 12600 SW 8 ST.

33184 MIAMI

RESPONSIBLE OFFICIAL: ASLAM DALAL

Bureau of Waste Cleanur

PHONE:

-				-
ĺ	PART	۲.	NOTIFICATION	

(check appropriate box)

CONTACT NAME:

1. New facility notified DARM 30 days prior to startup

2. Facility failed to notify DARM to use general permit

SL 25

Hazardous W. Cleanup Section

PART II: CLASSIFICATION

Facility indicated on notification form that it is:

(check appropriate box)

☐ No notification form

☐ Drop store/out of business/petroleum

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

(constructed before 12/9/91)

2. New small area source dry-to-dry only, $x \le 140 \text{ gal/yr}$ transfer only, x < 200 gal/yrboth types, x < 140 gal/yr (constructed on or after 12/9/91)

3. Existing large area source dry-to-dry only, 140 < x < 2,100 gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, 140 < x < 1.800 gal/yr

4. New large area source

dry-to-dry only, 140 < x < 2,100 gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, 140 < x < 1,800 gal/yr (constructed on or after 12/9/91)

 $\square N$ □Can not determine

5. This is a correct facility classification

If no, please check the appropriate classification: facility qualified for a general permit as number above

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

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 40 gallons.

Lof 5

Revised 9/15/97

TART 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?	DY DN GNYA
2. Examining the containers for leakage?	DY DN WN/A
3. Closing and securing machine doors except during loading/unloading?	MY DN
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	מיאם אם אמ
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON DN/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 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	1
If classification 4 has been checked, the machine should be equipped with a refrig (complete A and B below).	gerated condenser
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?	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?	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?	חט אם
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	□Y □N □N/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON

	The state of the s			
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?	ΩY	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	ПΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ПИ	□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?	\Box Y	ПИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	Пи	□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?	ΠY	Ωи	\square N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	מם	□N/A
6	. Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПΝ	□N/A

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

PART VI: LEAK DETECTION AND I	REPAIRS	**	
1. Does the responsible official conduct a	weekly (for small source	s, bi-weekly) leak detection an	id repair
inspection?			N DN
2. Has the facility maintained a leak log?			DY W
3. Does the responsible official check the	following areas for leaks	?	
Hose connections, fittings, couplings, and valves	OY ON ON/A	Muck cookers	Y ON ON/A
Door gaskets and seating	Y ON ON/A	Stills	DY ON ON/A
Filter gaskets and seating	AY ON ON/A	Exhaust dampers	OY ON ON/A
Pumps	DY ON ON/A	Diverter valves	ON ON/A
Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	ØY ON ON/A
Water separators	DY ON ON/A	•	
4. Which method of detection is used by	the responsible official?		/
Visual examination (condensed	solvent on exterior surfac	es)	
Physical detection (airflow felt t	hrough gaskets)		ď
Odor (noticeable perc odor)			۵
Use of direct-reading instrumen	tation (FID/PID/calorimet	tric tubes)	
Halogen leak detector			
If using direct-reading inst	rumentation, is the equi	pment:	DAN/A
a. Capable of detecting	g perc vapor concentration	ns in a range of 0-500 ppm?	OY ON
b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use	OY ON
c. Inspected for leaks	and obvious signs of wear	r on a weekly basis?	OY ON
d. Kept in a clean and	secure area when not in t	use?	OY ON
e. Verified for accurac	cy by use of duplicate san	nples (calorimetric only)?	OY ON

M. ENRIQUE FLORES	9-16-98
Inspector's Name (Please Print)	Date of Inspection
Memigue Florer	9/99
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

- PREVENTION FOR DRY CLEANERS WERE GIVEN TO MR. DALAL
- INSTRUCTIONS ON HOW TO KEEP RECORDS OF CONDENSER TEMP. READINGS
 AND LEAK INSPECTIONS WERE ALSO EXPLAINED TO MR. DALAL

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

CILITY LOCATION: 12600 SW 8 ST. MIAMI, 33184 nual Reporting Period: 9/97 19 TO 9/98	
miami, 33184	
nual Reporting Period: 9/97 19 TO 9/9	
nual Reporting Period: $9/97$	Δ
multi reporting to the second	19
sed on each term or condition of the Title V general air permit, my facility has remained in comp- -213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	~
NO, complete the following:	
. Term or condition of the general permit that has not been in continuous compliance during the	reporting period stated above:
O RECORDING OF LEAK INSPECTIONS AND OR GONDEWSER TEMP. READIN	NGS
tact period of non-compliance: from 9/97 to 9	98
ction(s) taken to achieve compliance: WILL RETORD LEAK INSPECTIONS AND TO	EMP. READINGS.
ethod used to demonstrate compliance:	
2. Term or condition of the general permit that has not been in continuous compliance during the	reporting period stated above:
xact period of non-compliance: from	* Mon Solver
ction(s) taken to achieve compliance:	Mobile Sources Oring
Sethod used to demonstrate compliance:	Co Tito
· · · · · · · · · · · · · · · · · · ·	
s the responsible official, I hereby certify, based on information and belief formed after reasonal ade in this notification are true, accurate and complete. Further, my annual consumption of per pon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry ear for transfer or combination facilities.	rchloroethylene solvent, based
Name (Please Print) Signature	The 1-16

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.

BEST AVAILABLE COPY

TYPE OF INSPECTION:	VNNNV 🔍	COMP	PLAINT/DIS	COVERY		RE-II	NSPECTIC	П ис	
TIME IN: 1330	TIME OUT:	14/00		AIRS I	DII: 2569	32			•
TIME IN:	TIC CLEANERS					DATE: 0	9-16-9	9	
RESPONSIBLE OFFICIAL:	SYAIN DALAV	,		ЪНОИЕ И	IUMBER:	365 - 5	53-46	200	
compliance with DEP Based on the results of discrepancies were not		a Administra nents evalua	tive Code (f	E.A.C.). uis inspectio	on, the follo	wing cor	npliance		
COMPLIANCE REQ					JP ACTIO				-
NO TEMP. RECCRDING, LONDENSER.	- 45 (HECK V	<i>/</i> V	WILL	3/AK1	KLLOKI	01/\/\/		READINGS	` -
NO LEAR INSPECTION	106		WILL	START	RECOR	i) 1N4	LEAK	MSPECTI	ON?
						P	¢ C		
					Q _{UI} e	563	CIL		
· · · · · · · · · · · · · · · · · · ·					7 0	Sile Source	Torionia de la companya de la compan	° O	
		,				-	No.		
		I GOOD C USE KEEVI			DITION.	S.			
The Annual Compliance Certi		properly certi	fied and sub	mitted to th	he-inspector	r. \	YES 🗹	МО	-
ATE OF NEXT INSPECT	ION:	/ / (A	<u>'</u> pproximate	·)					
NSPECTION CONDUCTE	n.S.	M. ENRIG M. (P	lease Print)	NUMBER	30	5.377	. (6925	
NSPECTOR'S SIGNATUR		Page	٥٢	PHONE	NUMBER	C:	, , , ,	Revised 10/96	S

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ANNUAL

TYPE OF INSPECTION:

COMPLAINT/DISCOVERY

RE-INSPECTIO	мс
AIRS ID#: <u>250932</u> DATE: <u>5/13/</u>	199 time in: 2:25 time out: 2:45
FACILITY NAME: Majestic (
FACILITY LOCATION: 12600	/ 5
	FC 33184 8 5 5 1
RESPONSIBLE OFFICIAL: ASlam	
CONTACT NAME:	PHONE: Sources
	is or ng
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to star	ortupi 🗅 ·
2. Facility failed to notify DARM to use general per	rmit .
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box) A.	☐ Drop store/out of business/petroleum
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, $x < 200 \text{ gal/yr}$ both types, $x < 140 \text{ gal/yr}$	transfer only, $x < 200$ 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, $200 \le x \le 1,800 \text{ gal/yr}$
both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$)	both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)
` 	`
5. This is a correct facility classification	Y ON OCan not determine
If no, please check the appropriate classific	cation:
If no, please check the appropriate classific facility qualified for a get	cation: neral permit as number above
If no, please check the appropriate classific facility qualified for a get	cation:

Review + ARMS 5/2499

Revised 9/15/97

PART III: GENERAL CONTROL REQUIREMENTS

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

- 1. Storing perchloroethylene in tightly sealed and impervious containers?
- 2. Examining the containers for leakage?
- 3. Closing and securing machine doors except during loading/unloading?
- 4. Draining cartridge filters in their housing or in sealed containers for at 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?

ŪΥ	ŪΝ	X _{N/A}
		` .

- OY ON MIN/A
- XYY DN
- Y ON ON/A
- DY DN MN/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

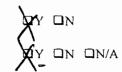
If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

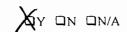
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993

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

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

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







OY ON MAN/A

XDY ON

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?	ΠY	□и	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	□и	□N/A
	ls the temperature differential equal to or greater than 20° F?	ΩY	□и	□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?	ΠY	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	\Box Y	□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?	ΠY	ПN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ПΥ	□и	□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? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; 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 4. Maintained calibration data? (for applicable direct reading instruments) DY UN YOU 5. Maintained exhaust duct monitoring data on perc concentrations? \mathbf{X} Y \square N 6. Maintained startup/shutdown/malfunction plan? DY DN MN/A 7. Maintained deviation reports? Problem corrected? DY DN 8. Maintained compliance plan, if applicable?

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 N N/A Muck cookers AY N N/A Stills Pumps Diverter gaskets and seating Y N N/A Diverter valves Y N N/A Diverter valves Y N N/A Cartridge filter housings Y N N/A Cartridge fi	PA	ART VI: LEAK DETECTION AND	REPAIRS		
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 Muck cookers Y N N/A Stills Filter gaskets and seating Y N N/A Exhaust dampers Y N N/A Diverter valves Y N N/A Cartridge filter housings Y N N/A Cartridge filter ho	١.	Does the responsible official conduct	a weėkly (for small source	es, bi-weekly) leak detection a	nd repair
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 Muck cookers Y N N/A Stills Y N N/A Exhaust dampers Y N N/A Diverter valves Y N N/A Cartridge filter housings Y N N/A Cartridge		inspection?			XY ON
Hose connections, fittings, couplings, and valves Door gaskets and seating Y N N/A Stills Y N N/A Filter gaskets and seating Y N N/A Exhaust dampers Y N N/A Pumps Solvent tanks and containers Y N N/A Cartridge filter housings Y N N/A Water separators W N N/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? 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?	2.	Has the facility maintained a leak log	?		XQY ON
couplings, and valves Y N N/A Muck cookers Y N N/A Door gaskets and seating Y N N/A Filter gaskets and seating Y N N/A Pumps Solvent tanks and containers Y N N/A Water separators W N N/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, 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? DV N/A Muck cookers Y N N N/A Exhaust dampers Y N N N/A Cartridge filter housings Y N N N/A Cartridge filter housings Y N N N/A Exhaust dampers Y N N N/A Cartridge filter housings Y N N N/A To N/A Stills Y N N N/A To N/A To N/A To N/A A text in a clean and secure area when not in use?	3.	Does the responsible official check th	e following areas for leaks	?	
Filter gaskets and seating AY ON ON/A Exhaust dampers AY ON ON/A Diverter valves AY ON ON/A Diverter valves AY ON ON/A Cartridge filter housings AY ON ON/A Water separators AY ON ON/A Water separators AY ON ON/A Water separators AY 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? 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? OY ON ON/A Exhaust dampers AY ON ON/A Cartridge filter housings ON ON/A Cartridge filter housings ON ON/A Cartridge filter housings ON ON/A Exhaust dampers ON ON/A ON ON/A IN ON/A I			Y ON ON/A	Muck cookers	Y ON ON/A
Pumps Solvent tanks and containers Y N N NA Cartridge filter housings Y N NA 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) 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?		Door gaskets and seating	Y ON ON/A	Stills	XY ON ON/A
Solvent tanks and containers 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) 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?		Filter gaskets and seating	YY ON ON/A	Exhaust dampers	XY 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) 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?		Pumps	YY ON ON/A	Diverter valves	Y ON ON/A
4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector If using direct-reading instrumentation, is the equipment: 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?		Solvent tanks and containers	Y ON TIN/A	Cartridge filter housings	DAY ON ON/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? UY ON d. Kept in a clean and secure area when not in use?		Water separators	AV ON ON/A		
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?	4.	Which method of detection is used by	the responsible official?		2 4
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?		Visual examination (condensed	solvent on exterior surface	es)	
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?		Physical detection (airflow felt	through gaskets)	•	X
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?	Odor (noticeable perc odor)				
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?		Use of direct-reading instrumen			
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?	Halogen leak detector				
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?		If using direct-reading inst	∕ N/A		
(PID/FID only)? □Y □N c. Inspected for leaks and obvious signs of wear on a weekly basis? □Y □N d. Kept in a clean and secure area when not in use? □Y □N		a. Capable of detecting	s in a range of 0-500 ppm?	OY ON	
d. Kept in a clean and secure area when not in use?	į	_	after each use	OY ON	
		c. Inspected for leaks	and obvious signs of wear	on a weekly basis?	OY ON
e. Verified for accuracy by use of duplicate samples (calorimetric only)?		d. Kept in a clean and	secure area when not in us	e?	OYON
		e. Verified for accurac	ry by use of duplicate samp	oles (calorimetric only)?	□Y □N

Inspector's Namel(Please Print)

Inspector's Signature

Date of Inspection

Approximate Date of Next Inspection

Advised Mr. Dalal to contact mechanic to verify that the temp gauge on the back of the machine is measuring the outlet stream of the refrigerated condenser. Mr. Dalal will call me with results + fax any receipts for installation (if necessary)

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	IPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 2:35 pm TIME OUT: 2:4 TYPE OF FACILITY: Pere Dry Clear FACILITY NAME: Majestic Clear FACILITY LOCATION: 12600 SW 8 Miami, FL 3:	St. 3184
RESPONSIBLE OFFICIAL: HS/am Dulax	PHONE NUMBER: (305)553-4600
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluated discrepancies were noted:	ative Code (F.A.C.). ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
· .	
	•
COMMENTS:	
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector.
DATE OF NEXT INSPECTION: 5/200	
INSPECTION CONDUCTED BY:	proximate) A (7/10) case Print) (205) 2/7) -/092/
INSPECTOR'S SIGNATURE:	——————————————————————————————————————
Page /	of Revised 10/96

AIRS ID#: 0250932

pre

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Majesti	c Clea	eners	r	DATE: <u>5/13/99</u>
FACILITY LOCATION:	12/000.	SW 8	5+		
	Mame,	F/ 3	3184		
	- wise				·
Annual Reporting Period:		5_1	98 то		5 1999
Based on each term or conditi	on of the Title V gene	eral air permit, my	facility has remaine	d in compliance w	vith DEP Rule
62-213.300, Florida Administ	rative Code (F.A.C.),	during the period	covered by this state	ment. YES	□NO
If NO, complete the following	:			, ,	: -
#1. Term or condition of the	general permit that ha	as not been in conti	nuous compliance d	uring the reportin	g period stated above:
Exact period of non-compliane	ce: from		to		· .
Action(s) taken to achieve con	npliance:				
Method used to demonstrate c	ompliance:		·	· · · · · · · · · · · · · · · · · · ·	
#2. Term or condition of the	general permit that ha	as not been in conti	nuous compliance d	uring the reportin	g period stated above:
Exact period of non-compliant	ce: from		to		<u> </u>
Action(s) taken to achieve con	npliance:		· · · · · · · · · · · · · · · · · · ·		
Method used to demonstrate c	ompliance:				
				· · · · · · · · · · · · · · · · · · ·	·
As the responsible official, I h made in this notification are to upon rolling averages of purc year for transfer or combinati RESPONSIBLE OFFICIAL	rue, accurate and con hase receipts, does no on facilities.	mplete. Further, m ot exceed 2,100 gai	y annual consumptions per year for dr	on of perchloroeth	hylene solvent, based

*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.

ARUS 199

Page ____ of ____.

EM HIIN DEBBIEGRINER JULIV9 1999/ to Verify temp. Sauge
Air Quality
Management Division
ON back of machine 15 outlet stream ref. condenser. (temp not to exceed 450 NEW TEMP. CAUGE INSTALLES MASESTIC CLEANERS 305-553-4600 MIED SENDING NO LOCIL 0250932

BEST AVAILABLE COPY DATE NAME STATE CITY ZIP ORDER NO 50L0 87 CASH C. O. D CHARGE ON ACCT MDSE, RETD. PAID OUT QUAN. DESCRIPTION PRICE AMOUNT 30,00 2 3 4 5 6 7 8 9 10 1.1 12 13 14 15 16 17 18 TAX RECEIVED BY TOTAL

FM 25805 DEV



P.O. BOX 380578 • MIAMI, FLORIDA 33238-0578

DADE: (305) 754-4551 • TOLL FREE: 1-800-333-8883 • FAX: (305) 751-8390

OFFICE AND SHOWROOM 290 N.E. 68th STREET MIAMI, FLORIDA 33138-556:

Best Available Copy

SHIP TO

BILL TO

MAJESTIC CLEANER 12600 SW OTH STREET MAJECITO CLEANER 18600 ON ATH STREET

	FL 33104		MIAMI FL	33184	
INVOICE NO. DATE	ORDER NO. DATE CUSTOMER NO. CO	STOME	R P.O. NO.	TERMS	SALESMAN
	90 031000 00 110 100 1001			ORT ON DELIVE	
STOCK NO.	DESCRIPTION	U/M	QUANTITY	UNIT PRICE	AMOUNT
73 Mt (16)	GOOKIT, MISSIFERS HOOF	EΝ	. 7	57. 539	57.83
FINE REMERK	THE PROPERTY OF SECTION OF SECTIO		``	::େ. ରହନ	36.00
./r GUH	0,73 N TO 1 Y MON 14 P 100 N	rig.		.057.0000	25.00
4,74 95 049	MECON MET CONTRACTOR CONTRACTOR	:777		C. 04	8.64
	Cotyles (1) White the Cotyles (2) White the Cotyles (2)				181,67 7,07 182,58
	30F3 Pd 6		199		
·	, may compress on the				
	PARTSIN		DICE	000 Mai CSI	

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	PE OF INSPECTION	ION	たしょ	11421	OF	YPL	1)
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ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION

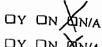
AIRS ID#: 0250932 DATE: 12/22/99 TIME IN:// BOW TIME OUT: 12:05/	W
FACILITY NAME: MAJISTIC CLEANERS	_
FACILITY LOCATION: 12000 SW & St E FT	
Miani FL 33184 8 8 8 8	
0 1 2 0 0 0 0 0 0	ار
RESPONSIBLE OFFICIAL: HS/am / Wax PHONE: (305)555-4000	1
CONTACT NAME: PHONE: PHONE:	
is ori	
PART 1: NOTIFICATION	
	4
(check appropriate box)	
1. New facility notified DARM 30 days prior to startup	
2. Facility failed to notify DARM to use general permit	
	=
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	
(check appropriate box)	
A. 1. Existing small area source 2. New small area source	
1. Existing small area source	
transfer only, $x < 200 \text{ gal/yr}$ transfer only, $x < 200 \text{ gal/yr}$	
both types, $x < 140 \text{ gal/yr}$ both types, $x < 140 \text{ gal/yr}$	
(constructed before 12/9/91) (constructed on or after 12/9/91)	
3. Existing large area source	
3. Existing large area source \Box 4. New large area source \Box dry-to-dry only, $140 \le x \le 2,100$ gallyr \Box dry-to-dry only, $140 \le x \le 2,100$ gallyr	
transfer only, $200 \le x \le 1.800$ gallyr transfer only, $200 \le x \le 1.800$ gallyr	
both types, $140 \le x \le 1,800$ 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	
If no, please check the appropriate classification:	∥
facility qualified for a general permit as number above	
facility exceeds above limits and is not eligible for a general permit	
B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning	
facility was 45 gallons.	\parallel
ARMS	Ш

1 of 5

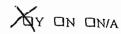
PART III: GENERAL CONTROL REQUIREMENTS

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

- 1. Storing perchloroethylene in tightly sealed and impervious containers?
- 2. Examining the containers for leakage?
- 3. Closing and securing machine doors except during loading/unloading?
- 4. Draining cartridge filters in their housing or in sealed containers for at 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?









PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

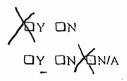
If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

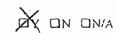
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993

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

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

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







AY ON XN/A



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

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days NO YO and parts installed w/in 5 days of receipt? DY DN 4. Maintained calibration data? (for applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations? DY DN ΠN 6. Maintained startup/shutdown/malfunction plan? DY DN 7. Maintained deviation reports? DY DN Problem corrected? OY ON 8. Maintained compliance plan, if applicable?

PA	ART VI: LEAK DETECTION AND	DREPAIRS			<u> </u>
1.	Does the responsible official conduc	t a weekly (for small source	es, bi-weekly) leak detection	and repair	
	inspection?		·) X	□и
2.	Has the facility maintained a leak log	<u>;</u> ?			□и
3.	Does the responsible official check the	he following areas for leaks	s?	<i>,</i> `	
	Hose connections, fittings, couplings, and valves	MY ON ON/A	Muck cookers	OY ON	DN/A
	Door gaskets and seating	DY ON ON/A	Stills	XY ON	ON/A
	Filter gaskets and seating	AND ND YES	Exhaust dampers	MA DN	□N/A
	Pumps	DAY ON ON/A	Diverter valves	AA ON	□N/A
	Solvent tanks and containers	MY ON CINIA	Cartridge filter housings	MD YX	□N/A
	Water separators	AND ND YE			
4.	Which method of detection is used by	y the responsible official?		,	
	Visual examination (condensed	solvent on exterior surface	es)	×	
	Physical detection (airflow felt	through gaskets)		X	
	Odor (noticeable perc odor)			X	-
	Use of direct-reading instrumen	' a'			
	Halogen leak detector	a			
	If using direct-reading ins	SINA			
	a. Capable of detecting	אם אם			
	b. Calibrated against a (PID/FID only)?	standard gas prior to and a	after each use	OY ON	
	c. Inspected for leaks	and obvious signs of wear	on a weekly basis?	OY ON	
	d. Kept in a clean and	secure area when not in us	e?	OYON	
	e. Verified for accurac	y by use of duplicate samp	les (calorimetric only)?	·□Y □N	

Inspector's Name (Please Print)

Date of Inspection

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Good housekeeping. Veinfied installation of temp gauge. Machine not operating at time of inspection.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL CO	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 1153 am TIME OUT: 12:00 TYPE OF FACILITY: PERC DON CLEAN	5 pm AIRS ID#: 0250932
7 7	DNS DATE: 12/22/99
FACILITY NAME: Mojestics (Jean) FACILITY LOCATION: 12600 SW 8 ST	UNIC. TO JOSEP 1
1/1001 51 3215	Zif
RESPONSIBLE OFFICIAL: ASlam Dalal	PHONE NUMBER: (305) 553-4600
Based on the results of the compliance requirements evaluation compliance with DEP Rule 62-213.300, Florida Administration of the compliance requirements evaluation of the compliance requirement of the compliance requireme	
Based on the results of the compliance requirements evaludiscrepancies were noted:	uated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
<u> </u>	·
COMMENTS: GOOD LANGE DE DINO.	and the cap
Good housekeeping Verified installation	practices o
Verified installation	of temp. you's -
The Annual Compliance Certification form has been properly cert	ified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: 12/200	90
	approximate)
INSPECTION CONDUCTED BY:	Please Print)
INSPECTOR'S SIGNATURE:	PHONE NUMBER: (305)372-6934
Page	/ of / Revised 10/96

AIRS ID#: <u>1) 250 932</u>

Acc

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Majestic	. Cleane.	YS	DATE: 12/22/99
FACILITY LOCATION	DN: 12600	Sw 8 St		
	Miani	F1 331	83	
Annual Reporting Perio	d:	12 199	% то	12-1999
Based on each term or o	condition of the Title V gen	eral air permit, my facil	lity has remained in comp	pliance with DEP Rule
62-213.300, Florida Ad	ministrative Code (F.A.C.),	during the period cove	red by this statement.	ÝYES 🗆 NO
If NO, complete the foll	owing:		, .	1
#1. Term or condition of	of the general permit that ha	as not been in continuo	us compliance during the	reporting period stated above:
Exact period of non-cor	npliance: from		to	
Action(s) taken to achie	ve compliance:			
Method used to demons	trate compliance:	<u> </u>		
#2. Term or condition	of the general permit that h	as not been in continuo	us compliance during the	reporting period stated above:
Exact period of non-cor	npliance: from		to	
Action(s) taken to achie	eve compliance:		<u> </u>	· · ·
Method used to demons	trate compliance:			
made in this notification	n are true, accurate and con of purchase receipts, does n ubination facilities.	mplete. Further, my an	nual consumption of perd	le inquiry, that the statements chloroethylene solvent, based facilities or 1,800 gallons per

^{*}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.

	DA AS 126	US Postal Service Receipt for Cer LAL OF MIAMI LAM DALAL 500 SW 8TH STREET AMI FL 33184	tified Mail AIRS ID 0250932	
		Postage	\$	
		Certified Fee		
 		Special Delivery Fee		
		Restricted Delivery Fee		
	April 1995	Return Receipt Showing to Whom & Date Delivered		
		Return Receipt Showing to Whom Date, & Addressee's Address		<u> </u>
	800,	TOTAL Postage & Fees	\$	
	PS Form 3800 ,	Postmark or Date		

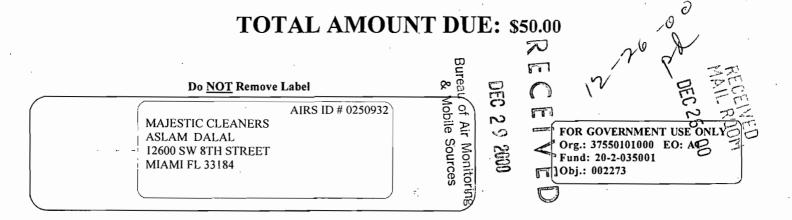
SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write 'Return Receipt Requested' on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to rectifollowing services extra fee): 1. Addresse 2. Restricte Consult postmas	s (for an ee's Address
3. Article Addressed to: AIRS ID 0250932 DALAL-OF MIAMI ASLAM DALAL 12600 SW 8TH STREET MIAMI FL 33184	4a. Article Ni 4b. Service 1 Registere Express I Return Rec 7. Date of De	Type od Mail ceipt for Merchandise	Continuo nov
5. Received By: (Print Name) 5. Received By: (Print Name) 6. Signature (Addressee or Agent) X X	8. Addressee and fee is	o's Address (Only i paid) Domestic Reti	f requested Z

TO THE RIGHT OF BETURN ADDRESS			
PLACE STICKER AT TOP OF ENVELOPE	COMPLETE 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 # 0250932001AG ASLAM DALAL	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature X		
MAJESTIC CLEANERS 12600 SW 8TH STREET	3. Service Type		
MIAMI FL	Certified Mail Express Mail		
33184	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		
	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number (Transfer from service label) 7000 / 670 00/ 33/08 736 4			
PS Form 3811, March 2001 Domestic Retu	urn Receipt 102595-01-M-1424		

		U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)				
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	E	Return Receipt Fee (Endorsement Required)		March 2		
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-	70	To 10 AIRS ID # 0250932001AG Sen ASLAM DALAL MAJESTIC CLEANERS				
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ł	_	Stre 12600 SW 8TH STREET				
	7000	MIAMI FL City 33184		\		
i		PS Form 3800, May 2000	e source of some of	See Reverse for Instructions		

This portion must be attached to remittance for proper handling 20908

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



413009 JAN142902

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

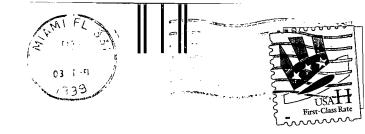
Do NOT Remove Label

AIRS ID # 0250932 MAJESTIC CLEANERS ASLAM DALAL 12600 SW 8TH STREET MIAMI FL. 33184

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

Majestic Gleanars 12600 SW 864 St Miami Fia 39194



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

0359534

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

RECEIVED MAIL ROOM FEB -5 99

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CCLEANERS

MAJESTIC CLEANERS ASLAM DALAL 12600 SW 8TH STREET

MIAMI FL 33184

AIRS ID # 0250932

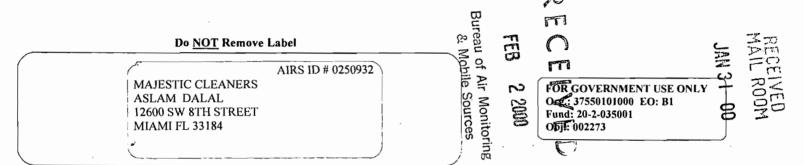
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Fund: 20-2-035001 Obj.: 002273

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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



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#0250932

DALAL OF MIAMI
ASLAM DALAL
12600 SW 8TH STREET
MIAMI FL 33184

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

Obj.: 002273