

# Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

December 1, 1997

Mr. Enrique Alvarez Calusa Cleaners, Inc. 7910 Southwest 104 Street Miami, Florida 33156

Facility No.: 0250935

Dear Mr. Alvarez:

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"

Printed on recycled paper.

Perchloroethylene Dry Cleaning Facility Notification

NOV 0 4 1997

### Facility Name and Location

Air Quality

1	Facility Owner/Company Name (Name of corporation, agency, or individual owner): Management Division
	CA/USA CLENEBIZS INC.  Site Name (For example, plant name or number):
2.	Site Name (For example, plant name or number):
1	Site Name (For example, plant name or number):  CA/USA CLENEARS  Hazardous Waste Generator Identification Number:
3.	Hazardous Waste Generator Identification Number:
	FLD 00035/825
4.	Facility Location:
	Street Address: 7910 SW 104 St. City: Miam; County: Dade Zip Code: 33/56
	City: Miami County: Dade Zip Code: 53/36
<b>*5</b> :	Facility Identification Number (DEP Use):
	12 July 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Total motor	Responsible Official
	<u> </u>
6.	Name and Title of Responsible Official:
	ENRIQUE A)UAREZ PRESIDENT.
7.	Responsible Official Mailing Address:
	Street Address: Supply AS A DOVE
	Organization/Firm: Street Address: 5 ame As Above City: County: Zip Code:
	zap sees.
8.	Responsible Official Telephone Number:
	Telephone: (305) 270-1188 Fax: (~)
	Facility Contact (If different from Responsible Official)
9.	
9.	Facility Contact (If different from Responsible Official)  Name and Title of Facility Contact (For example, plant manager):
	Name and Title of Facility Contact (For example, plant manager):
	Name and Title of Facility Contact (For example, plant manager):  Facility Contact Address:
	Name and Title of Facility Contact (For example, plant manager):  Facility Contact Address:  Street Address:
	Name and Title of Facility Contact (For example, plant manager):  Facility Contact Address:
10.	Name and Title of Facility Contact (For example, plant manager):  Facility Contact Address:  Street Address:

RECEIVED

NOV 1 4 1997

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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	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit									
(1) w/ ref. condenser		01-JUL-94	01-304-94						
(2) w/ carbon adsorber			•						
(3) w/ no controls				,					
Washer Unit				•		-		•	
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		11.			-	-			
(7) w/ ref. condenser						Ţ .			
(8) w/ carbon adsorber			_		`				
(9) w/ no controls									
Reclaimer Unit	2	trafe i	<u> </u>		•				.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</li> <li>2.(a) What was the total of the control of the contr</li></ul>	are r quant gallo	equired to be ity of perchlo ons ow many? [_	installed [_oroethylene (	perc)	purchased i				
3. What is the facility's so (Indicate with an "X".  Existing small ar  Existing large ar	Selectorea so	et one classifi	ication only.)	) ew sn	initions foun nall area sou	rce [	j	Part II?	;
Existing large at	-u 3V		140	•	, p. a.ca 30ai	<u>~</u>	J		

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4. What control technology is required on machines pursuan (Indicate with an "X".)	t to section (5) of Part II of this notification form?
Existing large area source  Carbon adsorber [] Refrig	erated condenser []
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser [X]	
5. A facility which contains non-exempt emissions units she to Rule 62-213.300, F.A.C. Verify that all steam and hot we exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a boiler HP or less), and (2) are fired exclusively by natural g during which propane or fuel oil containing no more than o	as except for periods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	] 
Equipment Monitoring and Rec	ordkeeping Information
Check all logs which are required to be kept on-site in accord	dance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	ГХJ
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	ιXι
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(e) instrument canoration	

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### 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)
ΙX	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in
statemen maintain	Station. I hereby certify, based on information and belief formed after reasonable inquiry, that the its 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.
statemen maintain comply v	ts made in this notification are true, accurate and complete. Further, I agree to operate and the the air pollutant emissions units and air pollution control equipment described above so as to

### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	COMPLIANCE INSPI			
TYPE OF INSPECTION:	ANNUAL	- сомі	PLAINT/DISCOVERY	VED
	DE MARKETINA	<b>'</b>	•	

RE-INSPECTION OCT 27 1998

AIRS ID#: 0250935 DATE: 7/23/	TIME IN: 2:00 prof Mobile Tsources
FACILITY NAME: Calusa Ul	aners
FACILITY LOCATION: 7	910 SW 104 St
·	
RESPONSIBLE OFFICIAL: Enrique	Alvarezhone: 270 -1188
CONTACT NAME: Consulo Va	Alvarezhone: 270 - 1188 Idla phone: 270 - 1188
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to star	rtup ·
2. Facility failed to notify DARM to use general per	mit 🗅
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box)	☐ 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, $x < 140 \text{ gal/yr}$
transfer only, x < 200 gal/yr both types, x < 140 gal/yr	transfer only, $x < 200 \text{ gal/yr}$ both types, $x < 140 \text{ gal/yr}$
(constructed before 12/9/91)	(constructed on or after 12/9/91)
3. Existing large area source	4. New large area source
dry-to-dry only, $140 \le x \le 2,100 \text{ gal/y/r}$	dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$
transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr	transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr
(constructed before $12/9/91$ )	(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 classifie	cation:
	eneral permit as number above
facility exceeds above lin	mits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) p facility was 220gallons.	urchased within the preceding 12 months by this dry cleaning



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 XV/A
2. Examining the containers for leakage?	OY ON XVIA
3. Closing and securing machine doors except during loading/unloading?	XY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	Y ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON XWA
PART IV: PROCESS VENT CONTROLS	
In Part H-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 refrige (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)	
1. Equipped all machines with the appropriate vent controls?	XY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	XY DN DN/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Y ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	XYY DN
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	DY DN XN/A
6. Conducted all temperature monitoring after an appropriate cooldown-period and after verifying that the coolant had been completely charged?	DA DN XVIVA

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?	× □N
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON DOMA
	Is the temperature differential equal to or greater than 20° F?	OY ON DY/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?	OY ON DONA
	Is the perc concentration equal to or less than 100 ppm?	OY ON XVIA
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?	ANA NO YO
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ÖNWA
6.	Routed airflow to the carbon adsorber (if used) at all times?	DY DN XIA

### 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? 4. Maintained calibration data? (for applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations? DY DN 6. Maintained startup/shutdown/malfunction plan? **ATY** ON **A**V/A 7. Maintained deviation reports? Problem corrected? DY DN 8. Maintained compliance plan, if applicable?

### PART VI: LEAK DETECTION AND REPAIRS

1.	Does the responsible official conduct a	weekly (for small source	s, bi-weckly) leak detection a	nd repair
	inspection?			XY DN
2.	Has the facility maintained a leak log?			X√ □N
3.	Does the responsible official check the	following areas for leaks	?	
	Hose connections, fittings,	Ky my my	Markanaka	My my my
	couplings, and valves	AY ON ON/A	Muck cookers	Y DN DN/A
	Door gaskets and seating	XY ON ON/A	Stills	Y ON ON/A
	Filter gaskets and seating	AND NO PI	Exhaust dampers	XY ON ON/A
	Pumps	XY ON ON/A	Diverter valves	XY ON ON/A
	Solvent tanks and containers	XY ON ON/A	Cartridge filter housings	Y ON ON/A
	Water separators	AND ND Y		
4.	Which method of detection is used by	the responsible official?	,	
li I	Visual examination (condensed	solvent on exterior surfac	es)	×
	Physical detection (airflow felt t	hrough gaskets)		×
	Odor (noticeable perc odor)			× ×
	Use of direct-reading instrument	tation (FID/PID/calorimet	ric tubes)	
	Halogen leak detector			
	If using direct-reading inst	rumentation, is the equi	pment:	N/A
	a. Capable of detecting	g perc vapor concentration	as in a range of 0-500 ppm?	DY ON
		standard gas prior to and	after each use	
	(PID/FID only)?			
	c. Inspected for leaks a	and obvious signs of wear	on a weekly basis?	DY DN
	d. Kept in a clean and	secure area when not in u	se?	DY DN
	e. Verified for accurac	y by use of duplicate sam	ples (calorimetric only)?	אם אם
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Inspector's Name (Please Print)

Inspector's Signature

7/23/98
Date of Inspection

m/99

Approximate Date of Next Inspection

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FDEP calendar was provided to facility during uispection.

. ..... YUALLEY GENERAL PERMIT INSPECTION SUMMARY REPORT BEST AVAILABLE COPY TYPE OF INSPECTION: ANNUAL X COMPLAINT/DISCOVERY RE-INSPECTION FACILITY LOCATION: PHONE NUMBER: 270 - 1188RESPONSIBLE OFFICIAL: Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.). Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM FOLLOW-UP ACTION REQUIRED ogs were kept. Please keep all receipts purchase in one place. Also, begin using provided) as means of The Annual Compliance Certification form has been properly certified and submitted to the inspector.

DATE OF NEXT INSPECTION: 7/99

(Approximate)

INSPECTION CONDUCTED BY: Debie Griner

(Please Print)

INSPECTOR'S SIGNATURE: A DOTCH: Turl PHONE NUMBER (3D)

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Revised 10/96

AIŘŜĮŴ#: _,	02	500	935	
4.0				

ACV Revised 10/10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: CASUSA Cleu	eners	NE GO	DATE:	1/23/98
FACILITY LOCATION: 7910 SW	104 St	JUL 2	7 1998	
Mianin	FL 331		Quality	
		ivianagem	ent Division	
Annual Reporting Period:	1997 т	0	7	19 <u>9</u> 8
Based on each term or condition of the Title V general at 62-213.300, Florida Administrative Code (F.A.C.), during		<b>\</b>	. /	P Rulc NO
If NO, complete the following:		•	·	
#1. Term or condition of the general permit that has not	been in continuous con	npliance during the	reporting perio	d stated above:
Exact period of non-compliance: from		to		·
Action(s) taken to achieve compliance:				
Method used to demonstrate compliance:	· ·	· · · · · · · · · · · · · · · · · · ·	·	
#2. Term or condition of the general permit that has no	t been in continuous co	mpliance during the	e reporting perio	d-stated above:
Exact period of non-compliance: from		to		
Action(s) taken to achieve compliance:				
Method used to demonstrate compliance:				
			·	
As the responsible official, I hereby certify, based on in made in this notification are true, accurate and compleupon rolling averages of purchase receipts, does not ex year for transfer or combination facilities.	te. Further, my annual ceed 2,100 gallons per	consumption of per	rchloroethylene	solvent, based
RESPONSIBLE OFFICIAL: ENRIGUE Name (Please 1	9/ <i>V412F7</i>	Signature	<u>/                                    </u>	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

### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

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	ANNUAL	الكار	COMPLAINT/DISCOVERY	
	RE-INSPECTION	, '0		
AIRS ID#: 0250935			N: 10:15 TIME OF	10:30
	lusa Cle		J. K.	<b>n</b>
FACILITY LOCATION: 7	, · · · · · · · · · · · · · · · · · · ·	104	St ga	1
	Mame,+	Thursen	Son Son	m
RESPONSIBLE OFFICIAL :	(answers)	alder )	PHONE: (30) 270	- <b>10</b> 88
CONTACT NAME:			PHONE:	
PART I: NOTIFICATION				
(check appropriate box)				
	20 di un matemato atenato		•	
1. New facility notified DARM		•		
2. Facility failed to notify DARI	M to use general perm	it 		
PART II: CLASSIFICATION				
Facility indicated on notification			☐ No notification form	
Facility indicated on notification (check appropriate box)			☐ No notification form ☐ Drop store/out of business/p	petroleum
Facility indicated on notification (check appropriate box)  A.	on form that it is:	2. New small a	☐ Drop store/out of business/p	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/y	on form that it is:	dry-to-dry only,	☐ Drop store/out of business/prea source☐  x < 140 gal/yr	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	on form that it is:  ce	lry-to-dry only, ransfer only, x	☐ Drop store/out of business/prea source ☐  x < 140 gal/yr < 200 gal/yr	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/y	on form that it is:  ce	fry-to-dry only, ransfer only, $x$ both types, $x < 1$	☐ Drop store/out of business/prea source ☐  x < 140 gal/yr < 200 gal/yr	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	on form that it is:  ce	dry-to-dry only, ransfer only, x both types, x < 1 constructed on	□ Drop store/out of business/prea source □ , x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source	on form that it is:  ce	lry-to-dry only, ransfer only, x ooth types, x < constructed on	Drop store/out of business/prea source  x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)  rea source	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1	on form that it is:  ce	dry-to-dry only, ransfer only, x poth types, x < constructed on the New large and try-to-dry only,	□ Drop store/out of business/prea source  x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)  rea source 140 ≤ x ≤ 2,100 gal/yr	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source	on form that it is:  ce	dry-to-dry only, ransfer only, x poth types, x < constructed on the New large and try-to-dry only, ransfer only, 20	Drop store/out of business/prea source  x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)  rea source	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800	ce	dry-to-dry only, ransfer only, x poth types, x < constructed on the large and try-to-dry only, ransfer only, 20 poth types, 140	Drop store/out of business/prea source $\square$ $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $140 \text{ gal/yr}$ or after $12/9/91$ )  rea source $140 \le x \le 2,100 \text{ gal/yr}$ $140 \le x \le 1,800 \text{ gal/yr}$	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 g both types, 140 ≤ x ≤ 1,800 g	on form that it is:  ce	dry-to-dry only, ransfer only, x poth types, x < constructed on the large and try-to-dry only, ransfer only, 20 poth types, 140	Drop store/out of business/prea source $x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 g (constructed before 12/9/91)	on form that it is:  ce	dry-to-dry only, ransfer only, x poth types, x < constructed on the large and the larg	Prop store/out of business/prea source $x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 140 \text{ gal/yr}$ $x < 12/9/91$ Prea source $x < 140 \le x \le 2,100 \text{ gal/yr}$ $x < 1,800 \text{ gal/yr}$	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 g (constructed before 12/9/91)  5. This is a correct facility class of the second	on form that it is:  ce	iry-to-dry only, ransfer only, x poth types, x < constructed on the large and ty-to-dry only, ransfer only, 20 poth types, 140 constructed on types, 140 constructed on the large and permit as nurtical pe	Prop store/out of business/prea source $x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 300 $	petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 g (constructed before 12/9/91)  5. This is a correct facility class of the second of the	on form that it is:  ce	iry-to-dry only, ransfer only, x poth types, x < constructed on the large and ty-to-dry only, ransfer only, 20 poth types, 140 constructed on types, 140 constructed on the large and permit as nurtical pe	Prop store/out of business/prea source $x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$ $x < 100 \text{ gal/yr}$ $x = 100 \text{ gal/yr}$	petroleum

Lof5

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

#### PART IV: PROCESS VENT CONTROLS

beds according to the manufacturer's specifications?

#### 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).

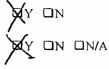
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993

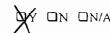
If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

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

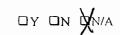
1.	Equipped all machines with the appropriate vent controls?	X I	□N	
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	XY I	ΠИ	□N/A
	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	X 1	□N	□n/a

- 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?











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?	χhγ	ПN
2.	Measured and recorded the washer exhaust temperature at the condenser		~ <i>1</i>
	inlet and outlet weekly?	ΠY	ON DIN/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ON DN/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly		1
	at the end of the final drying cycle while the machine is venting to the adsorber,		1.
	if machines are equipped with a carbon adsorber?	ΠY	□N <b>Ž</b> (N/A
	Is the perc concentration equal to or less than 100 ppm?	ΩY	ON DIN/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	ON DON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ON MINA
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ON BANA

### 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? 4. Maintained calibration data? (for applicable direct reading instruments) DY DN SON/A 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? DY DN **X**N/A 7. Maintained deviation reports? Problem corrected? DY DN **X**N/A 8. Maintained compliance plan, if applicable? DY DN XX

PART VI: LEAK DETECTION AND REPAIRS										
1. 1	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair									
į	inspection?			XY DN						
2. 1	Has the facility maintained a leak log?	?		XY DN						
3. [	Does the responsible official check the	e following areas for leaks	s?	•						
	Hose connections, fittings, couplings, and valves	Y ON ON/A	Muck cookers	DY ON XN/A						
	Door gaskets and seating	DY ON ON/A	Stills	XY ON ON/A						
	Filter gaskets and seating	MY ON ON/A	Exhaust dampers	A/NO NO A/N						
	Pumps	YY ON ON/A	Diverter valves	AVA ON ON/A						
	Solvent tanks and containers	XY ON TINIA	Cartridge filter housings	AND NO SYA						
}	Water separators	YY ON ON/A		•						
4. \	Which method of detection is used by	the responsible official?								
	Visual examination (condensed	solvent on exterior surface	es)	×						
	Physical detection (airflow felt the	hrough gaskets)		X						
	Odor (noticeable perc odor)		·	X.						
	Use of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)	ʻa .						
	Halogen leak detector									
	If using direct-reading inst	rumentation, is the equip	pment:	<b>YX</b> !/A						
	a. Capable of detecting	perc vapor concentration	as in a range of 0-500 ppm?	OY ON						
	b. Calibrated against a (PID/FID only)?	standard gas prior to and a	after each use	OY ON						
	c. Inspected for leaks a	and obvious signs of wear	on a weekly basis?	DY DN						
	d. Kept in a clean and	secure area when not in us	se?	מס "ץם						
	e. Verified for accuracy	y by use of duplicate samp	ples (calorimetric only)?	OY ON						

Inspector's Name (Please Print)

Inspector's Signature

5/28/99 Date of Inspection

Approximate Date of Next Inspection

Good Housekeeping. Machine was operating during inspection, no problems detected.

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 💢	COMPI	LAINT/DISCOVERY	RE-INSPECTION
TIME IN: 10:15	TIME OUT:	10:30		250935
TYPE OF FACILITY: PC	rc Dry C	leane	v	·
FACILITY NAME: CA	lusa (sec	aners		DATE: 5/28/99
FACILITY LOCATION:	7910 SW	104	St	, ,
	Miami, F	-2 3	33156	
RESPONSIBLE OFFICIAL:	rique Alva	ren	PHONE NUMBER:	(305) 770-1188
LYJ	the compliance requirem Rule 62-213.300, Florida		d during this inspection, the facive Code (F.A.C.).	lity is found to be in
Based on the results of t discrepancies were note		ents evaluate	d during this inspection, the follo	owing compliance •
COMPLIANCE REQU	JIREMENT/PROB	LEM	FOLLOW-UP ACTION	ON REQUIRED
<u> </u>			<u> </u>	
			·	
:				
COMMENTS				
COMMENTS: GOOD	Housekeep	ing		
(	,	0		
The Annual Compliance Certific	ation form has been pro-	perly certified	and submitted to the inspector.	YES NO
DATE OF NEXT INSPECTIO	N: ,	5/200	0	7 –
		(Appr	oximate)	
INSPECTION CONDUCTED	BY:\	)ebor	a Griner	
·		(R)leas	se Print) '	(nor) 2 no 1.0 0 1
INSPECTOR'S SIGNATURE:	<u> </u>	6/-	PHONE NUMBER:	(305)372-6936
	/ //	Page 1	of /	Revised 10/9

Rie

AIRS ID#: 0250935

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Calusa Cleanors	DATE: 5/28/99
FACILITY LOCATION: 7910 SW 1DF St	
Miami, FL 33156	
Annual Reporting Period:	51999
Based on each term or condition of the Title V general air permit, my facility has remained in compliant 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	rting period stated above:
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
#2. Term or condition of the general permit that has not been in continuous compliance during the report	rting period stated above:
Exact period of non-compliance: fromto	
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 inquinade in this notification are true, accurate and complete. Further, my annual consumption of perchloroupon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facility year for transfer or combination facilities.  RESPONSIBLE OFFICIAL:  Name (Please Print)  Signature	pethylene 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.



Page \_\_\_\_ of \_\_\_\_

### PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

COMPLIANCE	inst ection checkers
TYPE OF INSPECTION: ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY
·	
AIRS ID#: <u>0350935</u> DATE: 5/2/6	time in: /330 time out: /400
FACILITY NAME: <u>Calusa</u> Clas	mers
	w 104 st.
	FL
	PHONE: (305) 270-1188
CONTACT NAME:	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: (check appropriate box)	<ul><li>□ No notification form</li><li>□ Drop store/out of business/petroleum</li></ul>
A.	Drop store, our of business/petroleum
1. Existing small area source	2. Ixew small area source
dry-to-dry only, $x < 140 \text{ gal/yr}$	dry-to-dry only, x < 140 gal/yr
transfer only, x < 200 gal/yr both types, x < 140 gal/yr	transfer only, $x < 200 \text{ gal/yr}$ both types, $x < 140 \text{ gal/yr}$
(constructed before 12/9/91)	(constructed on or after 12/9/91)
2.5.7.1	- N
3. Existing large area source $\Box$ dry-to-dry only, $140 \le x \le 2,100$ gal/yr	4. New large area source dry-to-dry only, $140 \le x \le 2{,}100 \text{ gal/yr}$
transfer only, $200 \le x \le 1,800$ gal/yr	transfer only, $200 \le x \le 1,800 \text{ gal/yr}$
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 '	☐N □Can not determine
If no, please check the appropriate classific	ation:
☐ facility qualified for a gen	neral permit as number above
☐ facility exceeds above lin	nits 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 160 gallons.

To the state of th			
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?	ΩY	Ωи	MN/A
2. Examining the containers for leakage?	ΩY	Ωи	DAN/A
3. Closing and securing machine doors except during loading/unloading?	DY	Ωи	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DAY	Ωи	□N/A
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	ΩY	ΩΝ	DAN/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 refrige (complete A below).	gerated	cond	enser .
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	-4.		
If classification 4 has been checked, the machine should be equipped with a refrig (complete A and B below).	erated	cond	enser
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?	ÞΥ	ΠN	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	ÆY.	ПN	□N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ØY	ПИ	□N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	<b>X</b> Y	ПN	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the			

6. Conducted all temperature monitoring after an appropriate cooldown period and after

verifying that the coolant had been completely charged?

condenser exceeded 45° F?

AVARO NO YO

DN YE

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?	ØΥ	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	ПΝ	ØN/A
	Is the temperature differential equal to or greater than 20° F?	$\Box$ Y	ПИ	ØN/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	ØN/A
	Is the perc concentration equal to or less than 100 ppm?	$\Box$ Y	ΠN	ØN/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?		ΩΝ	<b>54</b> N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩΥ	ПN	ØN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПN	DAN/A

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

PART VI: LEAI	C DETECTION AND R	EPAIRS					
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
inspection?					XX	Ωи	
2. Has the facility	maintained a leak log?				ØY	ПN	
3. Does the respon	nsible official check the f	ollowing ar	eas for leaks?	•			
	nections, fittings, gs, and valves	ØY □N	□n/a	Muck cookers	ПΥ	□n Øen/a	
Door gasl	kets and seating	ØY □N	□N/A	Stills	ØXY '	□N □N/A	
Filter gas	kets and seating	EEY ON	□N/A	Exhaust dampers	<b>©</b> Y	□n □n/a	
Pumps		QY ON	□N/A	Diverter valves	<del>D</del> Y	□n □n/a	
Solvent ta	inks and containers	'DY ON	□N/A	Cartridge filter housings	#Y	□N □N/A	
Water sep	parators	MY ON	□N/A				
4. Which method	of detection is used by th	e responsib	le official?				
Visual ex	amination (condensed so	lvent on ext	erior surfaces)		Ø		
Physical c	detection (airflow felt thre	ough gasket	s)		12		
Odor (not	iceable perc odor)			-	B.		
Use of dir	ect-reading instrumentati	ion (FID/PII	D <b>/calori</b> metric to	ıbes)		ĺ	
Halogen I	eak detector						
If usir	ng direct-reading instru	mentation,	is the equipmen	nt:	A/M <b>B</b>	\ 	
a	. Capable of detecting p	erc vapor co	oncentrations in	a range of 0-500 ppm?	ΩY (	ואם '	
ь	. Calibrated against a sta (PID/FID only)?	ındard gas p	orior to and after	each use	□Y (	אׄ⊏	
c	. Inspected for leaks and	l obvious sig	gns of wear on a	weekly basis?	OY (	ИС	
d	. Kept in a clean and sec	ure area wh	nen not in use?		ΟY	אב	
c	. Verified for accuracy b	y use of du	plicate samples (	(calorimetric only)?	OY (	אב	
Inspec	Tran Fannin 5/2/00 Inspector's Name (Please Print) Date of Inspection						
5,700		,					
. L	Mark Q:						

Approximate Date of Next Inspection

#### ADDITIONAL SITE INFORMATION:

Machine in operation

- no odors

No rolling log of pere purchases

80+

missing receipts 5/99 -> 12/99

will fax tomorrow

5/3/99 Received missing receipts

01.5

•	TITLE V AIR Q				alles	26
TYPE OF INSPECTION:	ANNUAL D.	COMPLA	INT/DISCO	VERY	RE-INSPEC	CTION _
TIME IN: 1330  TYPE OF FACILITY:	TIME OUT:	1400 Clean		AIRS ID#:	0250935	
FACILITY NAME:	Calua Clean	ens			DATE: 57/	2/00
FACILITY LOCATION:	7910 SW	104	st.			: 
	M. am	FL				· .
RESPONSIBLE OFFICIAL:	Enrique Alvar	e7	PHC	NE NUMBE	R: (305) 270	-1188
	the compliance requireme Rule 62-213.300, Florida A				cility is found to be	in
discrepancies were not			luring this ins	pection, the fo	ollowing compliance	· ~
COMPLIANCE REQ		LEM	FOLLO	W-UP ACT	TION REQUIR	ED
Not maintain of pere	purchases	- :	Begin	mainta g in c	ining roll alender	<sup>2</sup> nij
	· .				_	
			•			
COMMENTS:	-		· .			

Good Househoping

The Annual Compliance Certification form has been properly certified and submitted to the inspector.	YES	ио⊠
DATE OF NEXT INSPECTION: 5/01		
(Approximate)		
INSPECTION CONDUCTED BY: Ivan Famin		
(Please Print)		
INSPECTOR'S SIGNATURE:PHONE NUMBER:	305 37	2-6925
- <del> </del>		

AIRS ID#: 0250935

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: <u>Caluar Cleaners</u> DATE:	5/2/00
FACILITY LOCATION: 7910 Sw 104 st.	<u> </u>
Mami FL	
	-
Annual Reporting Period: 1999 TO May	
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP 162-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.   YES	Rule <b>Z</b> NO
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period s  Not maintaining rolling leg of pare pendans	stated above:
Exact period of non-compliance: from May 99 to May W	
Action(s) taken to achieve compliance: Regin mantaning recordseeping	
Method used to demonstrate compliance: FDEP Oxender	
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period s	stated above:
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene sol upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 year for transfer or combination facilities.  RESPONSIBLE OFFICIAL:	vent, based
Name (Please Print)  S[gnature	Date

\*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the

Page \_\_\_\_ of \_\_\_\_.

discretion of the responsible official to use this form.



# CALUSA CLEANERS INC.

7914 S.W. 104 STREET • MIAMI, FLORIDA 33156 • PHONE (305) 270-1188

ATTU. : Mr. Ivan W. Fannin.

Subject: Reciepts.

# of pag. = 4+1 (FAX Cover).

From: Enrique Alvares.

5/03/2000

## **Best Available Copy**

05/03/2000 09:44 3053240029

INDUST EQUIP&SUPPLIE

PAGE 01

JUL 14 1999

Industrial Equipment and Supplies

2055 NW 7th Avenue Miami, Florida 33127 (305) 324-0410

1~800-969-4766 (Florida Only)

07/12/99 04:23 pm

ORDER NUMBER: 167267

ORDER DATE: 07/12/99

SOID TO: CALUSA CLEANERS #2

CA791

07 ENRIQUE ALVAREZ 7914 S.W. 104 STREET

MIAMI

FL 33186

SHIP TO: CALUSA CLEANERS #2

7914 S.W. 104TH STREET

USES ULTIMAT141/2 CAPED

IMAIM FL

SHIP VIA OUR TRUCK FOB

P.O. #

TERMS

Net 30 days

07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

ORDERED SHIPPED BACKORD H/M UNIT PRODUCT # DESCRIPTION UNIT PRO 19.50 19,50 0.00 \*\* Gal PROK 145. 7.50 Perchloroethylene Tetrachlorethylene, 6.1, UN1897, PgIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751

FOR YOUR CONVENIENCE WE NOW ACCEPT VISA, MASTERCARD AND AMERICAN EXPRESS. PLEASE CHECK WITH YOUR SALESPERSON FOR CONTRLY SPECIALS.

Signature

Date:

4 4 JATOTHUE 146.25 0 0

0.00 9.51

FREIGHT SALES TAX PERC TAX ENVRN TAX 97.50 1.15

ADF TAX 0.00

REGCOM 0.00

**JATOT** 254.41

24 HOUR EMERGENCY NUMBER

05/03/2000 09:44

3053240029

INDUST EQUIPASUPPLIE

PAGE 02

08/02/49 07:03 am

ORDER NUMBER: 168504

ORDER DATE: 08/02/99

Industrial Equipment and Supplies 2055 NW 7th Averse Miami, Florida 33127

(305) 324-0410

1-800-969-4766 (Florida Only)

C:A751

SOLD TO: CALUSA CLEANERS #2 07 ENRIQUE ALVAREZ 7914 S.W. 104 STPEET FL 33186 IMAIM

SHIP TO:

CALUSA CLEANERS #2 7914 S.W. 104TH STREET USES ULTIMAT141/2 CAPED

FL

IMAIM

SHIP VIA OUR TRUCK FOB

P.O. #

TERMS

SM

Net 30 days

07

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS. 

THE ORDERED SHIPPED BACKORD H/M UNIT PRODUCT # DESCRIPTION

19.50 19.50 1)

0.00 \*\* Gal PERK

Perchloraethylene

Tetrachlorethylene, 6.1, UN1897, PgIII, RQ, Marine Pollutant, ENERGENCY # (316) 524-5751

0.00 \*\* Gal PERK

Perchloroethylene

126.

7.50

Tetrachlorethylene, 6.1, UN1897, PgIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751

PLEASE NOTE!!! WE WILL BE CLOSED NOVEMBER 25TH AND 26TH FOR THE THANKSGIVING HOLIDAY. PLEASE PLACE YOUR ORDERS EARLY AND HAPPY THANKSGIVING!!!!

SUBTUTAL & & 146.25 0 0 FREIGHT SALES TAX PERC TAX ENVRN TAX ADF TAX 0.00 9.51

1.15 97.50

0.00

REGCOM 0.00

TOTAL

THE THEFT KARDOMERSON ARBIDED

05/03/2000 09:47 3053240029

INDUST EQUIP&SUPPLIE

PAGE 02

Industrial Equipment and Supplies 2055 NW 7th Avenue Miami, Florida 33127 (305) 324-0410 1-800-969-4766 (Florida Only)

CA791

BOLD TO: CALUSA CLEANFRS #2 07 EVRIQUE ALVAREZ 7314 S.W. 104 STREET

MIAMI

FL 33186

mq **:2001**1790,

INVOICE NUMBER: 172734

ORDER DATE: 10/11/99

SHIP TO: CALUSA CLEANERS #2

7914 S.W. 1041H STREET

USFS ULTIMAT141/2 CAPED

FLIMAIM.

SEIP VIA OUR TRUCK FOR MAG P.O. #

TERMS Net 30 days 07

A SERVICE CHARGE OF 1.5% PFR MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PART DUE ACCOUNTS.

2055 NW 7th Avenue Miemi, Florida 33127 (305) 324-0410 1-800-969-4766 (Florida Only)

CALUSA CLEANERS #2

07 ENRIQUE ALVAREZ

7914 S.W. 104 STREET

**Best Available Copy** 

INVOICE NUMBER: 175776

ORDER DATE: 11/29/99

CALUSA CLEANERS #2 SHIP TO:

7914 S.W. 104TH STREET USFS ULTIMAT141/2 CAPED

IMAIM

FL

SHIP VIA

SOLD TO:

CA791

FOB

P.O. #

TERMS

OUR TRUCK

RICKY

Net 30 days

UNIT PRC

A SERVICE CHARGE OF 1.5% PER MONTH WILL BE MADE ON TOTAL OUTSTANDING BALANCE OF PAST DUE ACCOUNTS.

ORDERED SHIPPED BACKORD H/M UNIT PRODUCT # DESCRIPTION

19.50 1 19.50

11

0.00 \*\* Gal PERK

FL 33186

Perchloroethylene

7.50 146.

Tetrachlorethylene. 6.1, UN1897, PgIII, RQ, Marine Pollutant. EMERGENCY # (316) 524-5751

PLEASE NOTE!!! WE WILL BE CLOSED NOVEMBER 25TH AND 26TH FOR THE THANKSGIVING HOLIDAY. PLEASE PLACE YOUR ORDERS EARLY AND HAPPY THANKSGIVING!!!!

SUBTOTAL & & 146.25 0 0 FREIGHT SALES TAX FERC TAX ENVRN TAX 97.50 0.00 9.51 1.15

ADF TAX 0.00

REGCOM 0.00

TOTAL 254.41

٠.	Z 333 61	4 384
با آ	IS Postal Service Receipt for Cert	ified Mail
E 79	CALUSA CLEANERS IN ENRIQUE ALVAREZ 910 SW 104TH STREEE IIAMI FL 33156	
ļ	Postage	\$
Ī	Certified Fee	
	Special Delivery Fee	
	Restricted Delivery Fee	
1995	Return Receipt Showing to Whom & Date Delivered	
April	Return Receipt Showing to Whom, Date, & Addressee's Address	
800,	TOTAL Postage & Fees	\$
PS Form <b>3800</b> , April 1995	Postmark or Date	

SENDER:  Complete items 1 and/or 2 for additional services.  Complete items 3, 4a, and 4b.  Print your name and address on the reverse of this form so that v card to you.  Attach this form to the front of the mailpiece, or on the back if spapermit.  Write "Return Receipt Requested" on the mailpiece below the article The Return Receipt will show to whom the article was delivered a delivered.	ce does,not song	I also wish to receive the following services (for an extra fee):  1.  Addressee's Ad 2.  Restricted Deliviconsult postmaster for f	dress ery
3. Article Addressed to:  CALUSA CLEANERS INC ENRIQUE ALVAREZ 7910 SW 104TH STREEET MIAMI FL 33156  AIRS ID 0250935	4b. Service  Registere  Express	73 (413 38 √ Type ed Ø Co Mail □ In ceipt for Merchandise □ Co	ertified sured OD
5. Received By: (Print Name)  6. Signature: (Addressee or Agent)  PS Form 3811, December 1994	8. Addresse and fee is	e's Address (Only if requer paid)  Domestic Return Re	

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 # 0250935 CALUSA CLEANERS INC ENRIQUE ALVAREZ 7914 SW 104TH STREEET **MIAMI FL 33156** 

FOR GOVERNMENT USE ON Org.: 37550101000 EO: BJO Fund: 20-2-035001 Obj.: 002273

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## **TOTAL AMOUNT DUE: \$50.00**

AIRS ID 0250935

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CALUSA CLEANERS INC ENRIQUE ALVAREZ 7910 SW 104TH STREEET **MIAMI FL 33156** 

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Оыј.: 002273

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AIRS ID # 0250935 CALUSA CLEANERS INC

ENRIQUE ALVAREZ 7914 SW 104TH STREEET MIAMI FL 33156

FOR GOVERNMENT USE ONE Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

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CALUSA CLEANERS INC. ENRIQUE ALVAREZ 7914 SW 104TH STREEET

MIAMI FL 33156

AIRS ID#0250935

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Fund: 20-2-035001 Obj.: 002273

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0013 3108	Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	
7000 1670	IO AIRS ID # 0250935001AG  SI ENRIQUE ALVAREZ CALUSA CLEANERS INC SI 7914 SW 104TH STREEET MIAMI FL C 33156  PS Form 3800 May 2000	

10 THE BIGHT OF BETTING YODGERSS DIVERTORE TO THE TOTAL TO THE T	<u>-</u>
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CALUSA CLEANERS INC	
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33130	☐ Insured Mail ☐ C.O.D.
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CALUSA CLEANERS INC
ENRIQUE ALVAREZ
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MIAMI FL
33156

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