



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

March 30, 1999

Mr. Tom Chamberlain
Unicorn Cleaners
5830 Miami Gardens Drive
Hialeah, Florida 33015-6023

Re: Facility No.: 0250985

Dear Mr. Chamberlain:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on March 17, 1999.

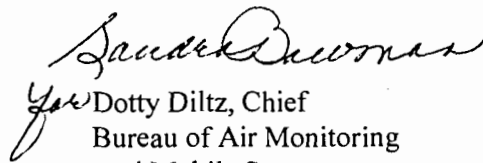
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements 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

0250985

p14 (c) Markout one set of dates.

(c) Should not be marked. Markout & initial

p15

5. Choose one.

p16

Responsible official sign and date
for changes made

3/24/99 Spoke to Alex Fabio and he
is listed as the facility contact.
He stated that the facility has only
one dry cleaning machine. He also
stated that the facility has a
3 HP boiler and it is fueled by
propane.

RECEIVED

MAR 11 1999

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

Air Quality Management Division

| | |
|--|--|
| 1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): | JACARANDA Quality Cleaners |
| 2. Site Name (For example, plant name or number): | Unicorn Cleaners |
| 3. Hazardous Waste Generator Identification Number: | EPA ID FLR0008 State ID # FID984171694 - Location # 000309702 |
| 4. Facility Location: | Street Address: 5830 Miami Gardens DR. City: Hialeah, Fl. County: Dade Zip Code: 33015-6023 |
| 5. Facility Identification Number (DEP Use): | 0250985 |

RECEIVED

MAR 17 1999

Bureau of Air Quality Monitoring & Mobile Sources

Responsible Official

| | |
|--|---|
| 6. Name and Title of Responsible Official: | Tom Chamberlain (Pres.) |
| 7. Responsible Official Mailing Address: | Organization/Firm: UNICORN Cleaners Street Address: 5830 Miami Gardens DR. City: Hialeah, Fl. County: Dade Zip Code: 33015-6023 |
| 8. Responsible Official Telephone Number: | Telephone: (305) 828-3688 Fax: () - |

Facility Contact (If different from Responsible Official)

| | |
|---|---|
| 9. Name and Title of Facility Contact (For example, plant manager): | Alex Tabio |
| 10. Facility Contact Address: | Street Address: - Same - City: County: Zip Code: |
| 11. Facility Contact Telephone Number: | Telephone: () - Same Fax: () - |

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.

| Type of Machine | ID | Date Machine Initially Purchased | Date Control Device Installed | ID | Date Machine Initially Purchased | Date Control Device Installed | ID | Date Machine Initially Purchased | Date Control Device Installed |
|---|----|----------------------------------|-------------------------------|----|----------------------------------|-------------------------------|----|----------------------------------|-------------------------------|
| <i>Example</i> #1 03-OCT-93 12-NOV-93 #2 08-DEC-91 #3 02-MAR-92 02-MAR-92 | | | | | | | | | |
| Dry-to-Dry Unit | #1 | 10/96 | 10/96 | #1 | 10/96 | 10/96 | | | |
| (1) w/ ref. condenser | | | | | | | | | |
| (2) w/ carbon adsorber | | | | | | | | | |
| (3) w/ no controls | | | | | | | | | |
| Washer Unit | | | | | | | | | |
| (4) w/ ref. condenser | | | | | | | | | |
| (5) w/ carbon adsorber | | | | | | | | | |
| (6) w/ no controls | | | | | | | | | |
| Dryer Unit | | | | | | | | | |
| (7) w/ ref. condenser | | | | | | | | | |
| (8) w/ carbon adsorber | | | | | | | | | |
| (9) w/ no controls | | | | | | | | | |
| Reclaimer Unit | | | | | | | | | |
| (10) w/ ref. condenser | | | | | | | | | |
| (11) w/carbon adsorber | | | | | | | | | |
| (12) w/ no controls | | | | | | | | | |

(b) Control devices are required, but not yet installed

(c) No control devices are required to be installed

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?

[240] gallons

(b) If less than 12 months, how many? [] months

Check why it is less than 12 months: New owner: [] New store: [] Did not keep records: []

3. What is the facility's source classification based on the definitions found in section (3) of Part II?

(Indicate with an "X". Select one classification only.)

Existing small area source

New small area source

Existing large area source

New large area source

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?
(Indicate with an "X".) *N/A*

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 general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site:

All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.

All steam and hot water generating units exempt

No such units on-site

Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

(a) Purchase receipts and solvent purchases

(b) Leak detection inspection and repair

(c) Refrigerated condenser temperature monitoring

(d) Carbon adsorber exhaust perc concentration monitoring

(e) Instrument calibration

(f) Start-up, shutdown, malfunction plan

Surrender of Existing Air Permit(s)

Please indicate with an "X" the appropriate selection:

I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s) _____

No air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.


Signature

~~2-25-99~~
Date 3-11-99

RECEIVED

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

MAY 19 1999

TYPE OF INSPECTION: ANNUAL
RE-INSPECTION

COMPLAINT/DISCOVERY
Bureau of Air Monitoring & Mobile Sources

AIRS ID#: 0250985 DATE: Feb. 25th 1999 TIME IN: 1:30^{PM} TIME OUT: 2:50^{PM}

FACILITY NAME: Unicorn Cleaners

FACILITY LOCATION: 5830 NW 185th St
Hialeah, FL 33015

RESPONSIBLE OFFICIAL: Tom Chamberlain PHONE: (305) 828-3688

CONTACT NAME: Alex Tabio PHONE: _____

PART I: NOTIFICATION

(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)

- No notification form
- Drop store/out of business/petroleum

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) <input type="checkbox"/> | 2. New small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after 12/9/91) <input checked="" type="checkbox"/> |
| 3. Existing large area source dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed before 12/9/91) <input type="checkbox"/> | 4. New large area source dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed on or after 12/9/91) <input type="checkbox"/> |
5. This is a correct facility classification Y N Can not determine

If no, please check the appropriate classification:

- facility qualified for a general permit as number 4 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 1519 gallons.

A.S.
ARM
5/10/99

MB
4/7/99

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? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A |
| 2. Examining the containers for leakage? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A |
| 3. Closing and securing machine doors except during loading/unloading? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |
| 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |

PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

If classification 2 has been checked, the machine should be equipped with a 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? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |
| 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |
| 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A |
| 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? Y N
2. Has the facility maintained a leak log? Y N
3. Does the responsible official check the following areas for leaks?

| | | | | | | | |
|---|---------------------------------------|----------------------------|------------------------------|---------------------------|---------------------------------------|----------------------------|---|
| Hose connections, fittings, couplings, and valves | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A | Muck cookers | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input checked="" type="checkbox"/> N/A |
| Door gaskets and seating | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A | Stills | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A | Exhaust dampers | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A |
| Pumps | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A | Diverter valves | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A | Cartridge filter housings | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A |
| Water separators | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> N/A | | | | |
4. Which method of detection is used by the responsible official?

| | |
|--|---|
| Visual examination (condensed solvent on exterior surfaces) | <input checked="" type="checkbox"/> |
| Physical detection (airflow felt through gaskets) | <input checked="" type="checkbox"/> |
| Odor (noticeable perc odor) | <input checked="" type="checkbox"/> |
| Use of direct-reading instrumentation (FID/PID/calorimetric tubes) | <input type="checkbox"/> |
| Halogen leak detector | <input type="checkbox"/> |
| If using direct-reading instrumentation, is the equipment: | <input type="checkbox"/> N/A |
| a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| b. Calibrated against a standard gas prior to and after each use (PID/FID only)? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| c. Inspected for leaks and obvious signs of wear on a weekly basis? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| d. Kept in a clean and secure area when not in use? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| e. Verified for accuracy by use of duplicate samples (calorimetric only)? | <input type="checkbox"/> Y <input type="checkbox"/> N |

LEO SMART
Inspector's Name (Please Print)

Feb. 25th 1999
Date of Inspection

[Signature]
Inspector's Signature

Feb 2000
Approximate Date of Next Inspection

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

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? Y N
2. Maintained rolling monthly total of perc consumption? Y N
3. Maintained leak detection inspection and repair reports for the following:
 - a. documentation of leaks repaired w/in 24 hrs? or; Y N N/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? Y N N/A
4. Maintained calibration data? *(for applicable direct reading instruments)* Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports?
 Problem corrected? Y N N/A
8. Maintained compliance plan, if applicable? Y N N/A

ADDITIONAL SITE INFORMATION:

A large, empty rectangular box with a double-line border, intended for providing additional site information. The box is currently blank.

BEST AVAILABLE COPY

INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION

TIME IN: 1:30 PM TIME OUT: AIRS ID#:

TYPE OF FACILITY: Perc Dry Cleaner

FACILITY NAME: Unicorn Cleaners Inc. DATE:

FACILITY LOCATION: 5830 NW 183rd St

RESPONSIBLE OFFICIAL: PHONE NUMBER:

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 |
|---|---|
| R.O. have not kept Perc receipts + Consumption logs | R.O. needs to keep perc receipts + consumption logs |
| | |
| | |
| | |
| | |
| | |
| | |

COMMENTS:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO

DATE OF NEXT INSPECTION: 2/2000 (Approximate)

INSPECTION CONDUCTED BY: LEO SMART (Please Print)

INSPECTOR'S SIGNATURE: [Signature] PHONE NUMBER: (305) 372-0902

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Unicorn Cleaners DATE: Feb. 25 1999
FACILITY LOCATION: 5830 NW 183rd St

Annual Reporting Period: Feb. 1998 TO Feb. 1999

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES 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 stated above:

No records were kept of Perc consumption
Exact period of non-compliance: from Feb 1998 to Feb 1999
Action(s) taken to achieve compliance: keep records of Perc consumption
Method used to demonstrate compliance: FDCP Calendar

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____
Action(s) taken to achieve compliance: _____
Method used to demonstrate compliance: _____

As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.
RESPONSIBLE OFFICIAL: Alejandro Tabio Alejandro Tabio 3/11/99
Name (Please Print) Signature Date

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

**PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST**

all

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
RE-INSPECTION

AIRS ID#: 0250985 DATE: 5/25/00 TIME IN: 1330 TIME OUT: 1400
 FACILITY NAME: Unicorn Cleaners
 FACILITY LOCATION: 5830 NW 183 st.
Miami, FL
 RESPONSIBLE OFFICIAL: Tom Chamberlain PHONE: 305 828-3688
 CONTACT NAME: _____ PHONE: _____

PART I: NOTIFICATION

(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: No notification form
 Drop store/out of business/petroleum
 (check appropriate box)

A.

| | |
|--|--|
| 1. Existing small area source <input type="checkbox"/> 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) | 2. New small area source <input checked="" type="checkbox"/> dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after 12/9/91) |
| 3. Existing large area source <input type="checkbox"/> dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed before 12/9/91) | 4. New large area source <input type="checkbox"/> dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed on or after 12/9/91) |

5. This is a correct facility classification Y N Can not determine

If no, please check the appropriate 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 _____ gallons.

PART III: GENERAL CONTROL REQUIREMENTS

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

- 1. Storing perchloroethylene in tightly sealed and impervious containers? Y N N/A
- 2. Examining the containers for leakage? Y N N/A
- 3. Closing and securing machine doors except during loading/unloading? Y N
- 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? Y N N/A
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? Y N N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

If classification 2 has been checked, the machine should be equipped with a 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? Y N
- 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? Y N N/A
- 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? Y N N/A
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? Y N
- 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? Y N

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

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? Y N
2. Maintained rolling monthly total of perc consumption? Y N
3. Maintained leak detection inspection and repair reports for the following:
- a. documentation of leaks repaired w/in 24 hrs? or; Y N N/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? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N N/A
- Problem corrected? Y N N/A
8. Maintained compliance plan, if applicable? Y N N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? Y N

2. Has the facility maintained a leak log? Y N

3. Does the responsible official check the following areas for leaks?

- | | | | |
|---|--|---------------------------|--|
| Hose connections, fittings, couplings, and valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/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: N/A
- a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? Y N
 - b. Calibrated against a standard gas prior to and after each use (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
 - e. Verified for accuracy by use of duplicate samples (calorimetric only)? Y N

Ivan Fannin
Inspector's Name (Please Print)

5/25/00
Date of Inspection

[Signature]
Inspector's Signature

N/A
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

4/25/00

Reinspection to verify disposal of
perc/muck waste, completion of
record keeping, and proper
containering of any new waste.

⇒ Everything disposed of properly.
Current waste in proper containers
Recordkeeping has begun.



RECEIVED

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
 RE-INSPECTION

AIRS ID#: 0250985 DATE: 4/21/00 TIME IN: 1200 TIME OUT: 1300
 FACILITY NAME: Unicorn Cleaners
 FACILITY LOCATION: SF 30 W W 183 st.
Miami, FL
 RESPONSIBLE OFFICIAL: Tom Chamberlain PHONE: 305 - 3688
 CONTACT NAME: Steve Fernandes PHONE: _____

RECEIVED
 Bureau of Air Monitoring & Mobile Sources
 AUG - 7 2000

PART I: NOTIFICATION

(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)

No notification form
 Drop store/out of business/petroleum

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) <input type="checkbox"/> | 2. New small area source dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after 12/9/91) <input checked="" type="checkbox"/> |
| 3. Existing large area source dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed before 12/9/91) <input type="checkbox"/> | 4. New large area source dry-to-dry only, $140 \leq x \leq 2,100$ gal/yr transfer only, $200 \leq x \leq 1,800$ gal/yr both types, $140 \leq x \leq 1,800$ gal/yr (constructed on or after 12/9/91) <input type="checkbox"/> |

5. This is a correct facility classification Y N Can not determine

If no, please check the appropriate classification:

facility qualified for a general permit as number 4 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 215 gallons.

MAS 5/21/00 *DF 7/24/00*

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? Y N N/A
- 2. Examining the containers for leakage? Y N N/A
- 3. Closing and securing machine doors except during loading/unloading? Y N
- 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? Y N N/A
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? Y N N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

If classification 2 has been checked, the machine should be equipped with a 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? Y N
- 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? Y N N/A
- 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? Y N N/A
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? Y N
- 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? Y N

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

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? Y N
2. Maintained rolling monthly total of perc consumption? Y N
3. Maintained leak detection inspection and repair reports for the following:
- a. documentation of leaks repaired w/in 24 hrs? or; Y N N/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? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N N/A
Problem corrected? Y N N/A
8. Maintained compliance plan, if applicable? Y N N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? Y N

2. Has the facility maintained a leak log? Y N

3. Does the responsible official check the following areas for leaks?

- | | | | |
|---|---|---------------------------|---|
| Hose connections, fittings, couplings, and valves | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/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: N/A
- a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? Y N
- b. Calibrated against a standard gas prior to and after each use (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
- e. Verified for accuracy by use of duplicate samples (calorimetric only)? Y N

Iran Fanni

Inspector's Name (Please Print)

4/21/00

Date of Inspection

Iran Fanni

Inspector's Signature

4/01

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

- * Storing perc/muck in 4, 5-gallon plastic laundry detergent buckets uncovered
- * No recordkeeping
- * No receipts for perc purchases

5/5/00

Received perc purchase receipts
" disposal manifest for perc muck

AIRS ID#: 0250985

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

RECEIVED

MAY 04 2000

FACILITY NAME: Unicorn Cleaners DATE: 4/21/00
FACILITY LOCATION: 5830 NW 183 Management Division
Maine, FL

Annual Reporting Period: April 1999 TO April 2000

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES 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 stated above:
Not maintaining recordkeeping requirements or receipts of pure purchases
Exact period of non-compliance: from Feb 99 to April 00
Action(s) taken to achieve compliance: Begin recordkeeping + keep receipts onsite
Method used to demonstrate compliance: FDEP Caluda

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
Not storing pers in tightly sealed containers as to prevent emissions
Exact period of non-compliance: from Feb 99 to April 00
Action(s) taken to achieve compliance: Store pers in appropriate containers
Method used to demonstrate compliance:

As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.
RESPONSIBLE OFFICIAL: Tom Chamberlain Tom Chamberlain 5-2-2000
Name (Please Print) Signature Date

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

METROPOLITAN DADE COUNTY, FLORIDA



NOTICE OF VIOLATION

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

TO: Tom Chamberlain

ADDRESS: 5830 NW 183 st., Miami, FL

SOURCE/LOCATION: Unicorn Cleaners

YOU ARE HEREBY NOTIFIED that on 4/21/00 the following violation(s) of Chapter 24, Metropolitan Dade County Environmental Protection Ordinance, and/or regulations of the Florida Administrative Code, was observed at the referenced location by an official of this Department.

- Operating without an Air Permit
- Excessive Visible Emissions
- Uncontrolled fugitive particulates
- Improper handling/removal of asbestos
- Non-compliance with Stage II Vapor Recovery
- Non-compliance with CFC regulations
- OTHER

Specifically: Not in compliance with Title V General Air Permit Part II (5)(a)(1): Perc (mixture) shall be stored in TIGHTLY SEALED and impervious containers as not to cause fugitive emissions

In view of the above, and pursuant to the authority granted to me by Sections 24-54 and 24-5(15)a, Metropolitan Dade County Environmental Protection Ordinance, I hereby order you to:

- Immediately upon receipt of this NOTICE, initiate corrective measures to eliminate and/or Cease and Desist the above-referenced violation(s).
- Within 7 days of receipt of this NOTICE, submit to this office in writing the steps which you have taken to ensure that no further violations will occur. Said report may include evidence of equipment repairs, adjustments, or servicing performed to correct the violation.
- Within _____ days of receipt of this NOTICE, contact the Air Section of this Department at 372-6925 to discuss air permit requirements.
- Within _____ days of receipt of this NOTICE, contact Plan Review Section at 375-3330 to discuss other Departmental permitting requirements.

Failure to comply with the above or continued operation in violation of Chapter 24 shall subject you to the enforcement and penalty provisions of Sections 24-55 and 24-56, Metropolitan Dade County Code.

For further information regarding the above, please contact the Air Section of this office at 372-6925.

Sincerely,
John W. Renfrow, P.E.
Director

Received by: Steve Fernandez
[Signature]

By: Ivan Fannin

Title: Manager

Signature: [Signature]

Date: 4/21/00

Section: Air Facilities

METROPOLITAN DADE COUNTY, FLORIDA



NOTICE OF VIOLATION

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

TO: Tom Chamberlain
ADDRESS: 5830 NW 183 St, Miami, FL
SOURCE/LOCATION: Unicorn Cleaners

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- Operating without an Air Permit
- Uncontrolled fugitive particulates
- Non-compliance with Stage II Vapor Recovery
- Excessive Visible Emissions
- Improper handling/removal of asbestos
- Non-compliance with CFC regulations
- OTHER

Specifically: Not in compliance with Title V General Air Permit Part II (c)(a)(1): Facility shall maintain receipts of perc purchases made for minimum of 5 years.

In view of the above, and pursuant to the authority granted to me by Sections 24-54 and 24-5(15)a, Metropolitan Dade County Environmental Protection Ordinance, I hereby order you to:

- Immediately upon receipt of this NOTICE, initiate corrective measures to eliminate and/or Cease and Desist the above-referenced violation(s).
- Within 7 days of receipt of this NOTICE, submit to this office in writing the steps which you have taken to ensure that no further violations will occur. Said report may include evidence of equipment repairs, adjustments, or servicing performed to correct the violation. FAX perc purchase receipts for 1999 & 2000
- Within _____ days of receipt of this NOTICE, contact the Air Section of this Department at 372-6925 to discuss air permit requirements.
- Within _____ days of receipt of this NOTICE, contact Plan Review Section at 375-3330 to discuss other Departmental permitting requirements.

Failure to comply with the above or continued operation in violation of Chapter 24 shall subject you to the enforcement and penalty provisions of Sections 24-55 and 24-56, Metropolitan Dade County Code.

For further information regarding the above, please contact the Air Section of this office at 372-6925.

Sincerely,

John W. Renfrow, P.E.
Director

Received by: Steve Fernandez
Title: Manager
Date: 4/21/00

By: Ivan Fournier
Signature: [Signature]
Section: Air Facilities



NOTICE OF VIOLATION

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

TO: Tom Chamberlain

ADDRESS: 5830 NW 183 st., Miami FL

SOURCE/LOCATION: Unicorn Cleaners

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- Operating without an Air Permit
- Excessive Visible Emissions
- Uncontrolled fugitive particulates
- Improper handling/removal of asbestos
- Non-compliance with Stage II Vapor Recovery
- Non-compliance with CFC regulations
- OTHER

Specifically: Not in compliance with Title V General Air Permit Part II (6)(a)(b): Recordkeeping Requirements. R.O. shall maintain rolling log of pure purchases, leak inspections, and temperature log.

In view of the above, and pursuant to the authority granted to me by Sections 24-54 and 24-5(15)a, Metropolitan Dade County Environmental Protection Ordinance, I hereby order you to:

- Immediately upon receipt of this NOTICE, initiate corrective measures to eliminate and/or Cease and Desist the above-referenced violation(s).
- Within 30 days of receipt of this NOTICE, submit to this office in writing the steps which you have taken to ensure that no further violations will occur. Said report may include evidence of equipment repairs, adjustments, or servicing performed to correct the violation.
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For further information regarding the above, please contact the Air Section of this office at 372-6925.

Sincerely,

John W. Renfrow, P.E.
Director

Steve Fernandez

Received by: [Signature]

By: Ivan Fannin

Title: Manager

Signature: [Signature]

Date: 4/21/00

Section: Air Facilities

GENERATOR NAME: UNICORN CLEANERS

MANIFEST NO.: 59896 OR SALES SERVICE NO.: 0

CUST#: 0002-0437-31

IN ACCORDANCE WITH 40 CFR 268.7(A), I HEREBY NOTIFY THAT THIS SHIPMENT CONTAINS WASTE RESTRICTED UNDER 40 CFR PART 268 LAND DISPOSAL RESTRICTIONS (LDR).

A. GENERAL WASTE NOTIFICATION

FORM LINE NO.: 1 MANIFEST PAGE/LINE# 01A SK PROFILE NO.: 000000000 0000 SADDOT#: 0012626

WASTE CODES & LDR SUBCATEGORIES (IF ANY):

- 7002
- 7039
- 7040

REACTABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION: 329 TETRACHLOROETHYLENE

FORM LINE NO.: 2 MANIFEST PAGE/LINE# 01B SK PROFILE NO.: 000000000 0000 SADDOT#: 0012627

WASTE CODES & LDR SUBCATEGORIES (IF ANY):

- 7002
- 7007
- 7039
- 7040

REACTABILITY GROUP: NONWASTEWATERS

WASTE CONSTITUENT NOTIFICATION:

- 100 O-CRESOL
- 118 P-DICHLOROBENZENE
- 124 METHYL ETHYL KETONE
- 329 TETRACHLOROETHYLENE
- 337 TRICHLOROETHYLENE
- 350 CADMIUM
- 351 CHROMIUM (TOTAL)
- 355 LEAD
- 357 MERCURY - ALL OTHERS
- 350 SILVER
- 41 CHLOROFORM

NOTES

PLEASE NOTE: THIS LDR EXPIRES ON 12/31/2000.

OPERATOR'S AUTHORIZED SIGNATURE

TOM CHAMBERLAIN NAME & TITLE (PRINTED OR TYPED)

5 / 2 / 00 DATE

EQ#: 0 LOC: 309702

TERR:

REF#:

OSW:

TOP COPY: GENERATOR

MIDDLE COPY: FACILITY

BOTTOM COPY: TRANSFER

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

| | | | | | | |
|--|--|--|--------------------------------|---|---|----------------------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. FLR000025726 | Manifest Document No. 59896 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. | |
| 3. Generator's Name and Mailing Address UNICORN CLEANERS 5830 MIAMI GARDENS DRIVE MIAMI FL 33015 | | | | A. State Manifest Document Number | | |
| 4. Generator's Phone (305) 828-3588 | | | | B. State Generator's ID | | |
| 5. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC | | 6. US EPA ID Number ILD 984908202 | | C. State Transporter's ID | | |
| 7. Transporter 2 Company Name | | 8. US EPA ID Number | | D. Transporter's Phone 305 884 0123 | | |
| 9. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC 8755 NORTHWEST 95TH ST MEDLEY, FL 33178 | | 10. US EPA ID Number FLD 984171694 | | E. State Transporter's ID | | |
| | | | | F. Transporter's Phone | | |
| | | | | G. State Facility's ID | | |
| | | | | H. Facility's Phone 305 884-0123 | | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) | | | | 12. Containers No. | 13. Total Quantity | 14. Unit Wt/Vol |
| a. K WASTE TETRACHLOROETHYLENE, 6.1 UN1897 PGIII (ERG#160) 13#/GAL FILTERS (FOO2, D039, D040) | | | | 6 | DF | 420 |
| b. X WASTE TETRACHLOROETHYLENE, 6.1 UN1897 PGIII RQ(10 LBS) (ERG#160) 13 LBS/GAL (FOO2, D007, D039, D040) | | | | 6 | DF | 1170 |
| c. | | | | | | |
| d. | | | | | | |
| J. Additional Descriptions for Materials Listed Above (A) D040 (B) D039 D040 | | | | K. Handling Codes for Wastes Listed Above | | |
| 15. Special Handling Instructions and Additional Information EMERGENCY RESP 800-468-1760(24 HR). IF UNDELIVERABLE RETURN TO GENERATOR. SKDOT# A: 12626 B: 12627 C: D: | | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | | |
| Printed/Typed Name Tom Chamberlain | | Signature | | Date Month Day Year 5 2 00 | | |
| 17. Transporter 1 Acknowledgement of Receipt of Materials | | Printed/Typed Name JUAN M. FERNANDEZ | | Signature | | Date Month Day Year 5 2 00 |
| 18. Transporter 2 Acknowledgement of Receipt of Materials | | Printed/Typed Name | | Signature | | Date Month Day Year |
| 19. Discrepancy Indication Space | | | | | | |
| 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. | | | | | | |
| Printed/Typed Name | | Signature | | Date Month Day Year | | |

INSTRUCTIONS FOR COMPLETION OF THIS FORM REFER CODE OF FEDERAL REGULATIONS, 40, PART 262.20

2361

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 448 | BB | 0000 | 0 | .0 |
| 449 | BB | 0020 | 0 | .1 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
 HIALEAH, FL 33016
 Phone : (305) 556-5831

SOLD TO: _____

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 2-23-2000

SIGNATURE: _____

9242

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 491 | BB | 0000 | 0 | .0 |
| 492 | BB | 0020 | 0 | .1 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
 HIALEAH, FL 33016
 Phone : (305) 556-5831

SOLD TO: UNION CLEANERS

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 3/15/2000

SIGNATURE: _____

09707

09501

| PREVIOUS SALE NO. | CODE | GALLON READING | START | TO THIS |
|-------------------|------|----------------|-------|---------|
| 643 | GG | 000 | 00 | .0 |
| 644 | GG | 003 | 5 | .0 |

| PREVIOUS SALE NO. | CODE | GALLON READING | START | TO THIS |
|-------------------|------|----------------|-------|---------|
| 687 | GG | 002 | 0 | .1 |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO: UNICORN

SOLD TO: Unicorn

5830 MIAMI GARDENS D.

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por Garland Supply co., en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan Garland Supply Co., tap delivre e tap fe sevis li. Jou dat sa-a.

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por Garland Supply co., en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan Garland Supply Co., tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL-Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | 20.0 | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 1-19-00
SIGNATURE: [Signature]

Date: 2/9/00
SIGNATURE: [Signature]

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 527 | GG | 000 | 0 | 0 |
| 528 | GG | 002 | 5 | 0 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO:

Unicorn

5830 MIAMI GARDENS DR

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por Garland Supply co., en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan Garland Supply Co., tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | 25.0 | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date:

12/1/99

SIGNATURE:

[Signature]

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 582 | GG | 000 | 0 | 0 |
| 583 | GG | 003 | 0 | 0 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO:

UNICORN

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por Garland Supply co., en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan Garland Supply Co., tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date:

12/30/99

SIGNATURE:

[Signature]

2042

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 452 | GG | 0000 | 00 | .0 |
| 453 | GG | 0030 | 00 | .0 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO: Unicorn

* This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.

* Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.

* Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 10/13

SIGNATURE: [Signature]

2256

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 157 | BB | 0000 | 00 | .0 |
| 158 | BB | 0015 | 00 | .0 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO: _____

* This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.

* Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.

* Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 11/9-79

SIGNATURE: [Signature]

2228

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 089 | BB | 0000 | | 0 |
| 090 | BB | 0010 | | 1 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO: UNICORN CLEANERS

* This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.

* Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.

* Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 8/4/99
SIGNATURE: [Signature]

BEST AVAILABLE COPY

2127

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|-----------------------|-------|-------|
| 501 | GG | 0000 | | 0 |
| 502 | GG | 0015 | | 1 |
| YOUR SALE NO. | | GALLON READING FINISH | | |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO: Unicorn

* This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.

* Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.

* Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 9/7-99
SIGNATURE: [Signature]

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|----------------|-------|-------|
| 267 | GG | 0000 | 0 | 0 |
| 268 | GG | 0025 | 1 | |

YOUR SALE NO. GALLON READING FINISH

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO: UNICORN Cleaners
5830 Miami Gardens Dr.

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | 5.1 | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 5/19/99
SIGNATURE: [Signature]

| PREVIOUS SALE NO. | CODE | GALLON READING | START | 10ths |
|-------------------|------|----------------|-------|-------|
| 033 | BB | 0000 | 0 | 0 |
| 034 | BB | 0020 | 1 | |

YOUR SALE NO. GALLON READING FINISH

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
HIALEAH, FL 33016

Phone : (305) 556-5831

SOLD TO: UNICORN CLEANERS

- * This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by **Garland Supply Co.** on this date.
- * Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc), durante la entrega y/o servicios prestados por **Garland Supply co.**, en el dia de hoy.
- * Sa-a rekonet ke anyen pat koule pat soti ou dechanje ou bien oken tetrachloroethylene (perc), kel ke soi kantite ya pat gaye pandan **Garland Supply Co.**, tap delivre e tap fe sevis li. Jou dat sa-a.

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 7/8/99
SIGNATURE: [Signature]

09619

| PREVIOUS SALEN | CODE | GALLON READING | START | FINISH |
|----------------|------|----------------|-------|--------|
| 788 | GG | 0000 | 0 | 0 |
| 789 | GG | 0020 | 0 | 0 |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
 HIALEAH, FL 33016
 Phone: (305) 556-5831

SOLD TO: UNICORP
 5830 MIAMI GARDENS

This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date.

Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc) durante la entrega y/o servicios prestados por Garland Supply Co. en el dia de hoy.

Sa a rekonek ke anyen pat koule pat sotl ou dechanje ou bien oken tetra chloroethylene (perc) kel ke solikantite ya pat gaye pandan Garland Supply Co. tap delivre e tap fe sevis li. Jou dat sa a

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 4-12-00
 SIGNATURE: 

9370

| PREVIOUS SALEN | CODE | GALLON READING | START | FINISH |
|----------------|------|----------------|-------|--------|
| 816 | GG | 0000 | 0 | 0 |
| 817 | GG | 0010 | 0 | 0 |

GARLAND SUPPLY COMPANY

7800 WEST 25th AVENUE
 HIALEAH, FL 33016
 Phone: (305) 556-5831

SOLD TO: UNICORP
 5830 MIAMI GARDENS

This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date.

Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc) durante la entrega y/o servicios prestados por Garland Supply Co. en el dia de hoy.

Sa a rekonek ke anyen pat koule pat sotl ou dechanje ou bien oken tetra chloroethylene (perc) kel ke solikantite ya pat gaye pandan Garland Supply Co. tap delivre e tap fe sevis li. Jou dat sa a

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL Clean-up Fund | | | |
| Pollution Tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 4/26/00
 SIGNATURE: 

| PRODUCT | GALLONS | PRICE | AMOUNT |
|------------------|---------|-------|--------|
| PERC | | | |
| FL clean-up Fund | | | |
| Pollution tax | | | |
| Sales Tax | | | |
| TOTAL | | | |

Date: 3/29/00
 SIGNATURE: 

This acknowledges that no spill, release or discharge of tetrachloroethylene (perc) occurred in any amount during the delivery and/or services provided by Garland Supply Co. on this date.

Por la presente certifico que no se rego, salio o escapo ninguna cantidad de tetrachloroetileno (perc) durante la entrega y/o servicios prestados por Garland Supply Co. en el dia de hoy.

Sa a rekonek ke anyen pat koule pat sotl ou dechanje ou bien oken tetra chloroethylene (perc) kel ke solikantite ya pat gaye pandan Garland Supply Co. tap delivre e tap fe sevis li. Jou dat sa a

SOLD TO:
GARLAND SUPPLY COMPANY
 7800 WEST 25th AVENUE
 HIALEAH, FL 33016
 Phone: (305) 556-5831

| YOUR SALEN | CODE | GALLON READING | START | FINISH |
|------------|------|----------------|-------|--------|
| 510 | BB | 0010 | 0 | 0 |

9240



1920 TAMPA EAST BLVD.
TAMPA, FLORIDA 33619-3024
(813) 623-3553
(800) 282-2924
FAX (813) 623-3558

2050 KINGS RD./BLDG. B
JACKSONVILLE, FL 32209
(904) 634-1002
(800) 553-9040
FAX (904) 634-0213

| INVOICE NO. | INVOICE DATE | PAGE |
|-------------|--------------|------|
| F-048908 | 02/09/99 | 1 |

FOR CHEMICAL EMERGENCY CONTACT:
CHEM • TEL INC. 1-800-255-3924

CUST. NO. **01-89500**

F3 6

SOLD TO **UNICORN DRY CLEANERS**
5830 MIAMI GARDENS DR
MIAMI FL 33046

SHIP TO **UNICORN DRY CLEANERS**
5830 MIAMI GARDENS DR
MIAMI FL 33046

| TERMS | CUSTOMER ORDER NO | SOLD BY | SHIP VIA |
|------------------------|-------------------|-----------|-----------------|
| 1-10 DOM/NET 25 | | 01 | TRUCK 02 |

SPECIAL INSTRUCTIONS

| QUANTITY | UNIT | DESCRIPTION | BACK ORDERED | UNIT PRICE | Y | TOTAL |
|--|------|--|----------------------|------------|---|---------------|
| 25.0 | GL | RQ TETRACHLOROETHYLENE, 6.1, UN-1897, "PG III", PERC *DOWPER* - BULK | *HM* *HM* *HM* | | | |
| 25.0 | GL | PERC *DOWPER* - BULK | | 7.50 | Y | 187.50 |
| <p>ESTIMATED QUANTITY CORRECTED QUANTITY IN ALL SECTIONS IF QUANTITY IS DIFFERENT</p> | | | | | | |
| <p>SUBTOTAL 187.50 SALES TAX 11.25 ENVIRONMENTAL TAX 1.47 ENVIRONMENTAL TAX 125.00 REGCOM 1.00</p> | | | | | | |
| TOTAL | | | | | | 326.23 |

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for Transportation, according to the applicable regulations of the Department of Transportation.



REMIT TO
Phenix Supply Company
P.O. Box 76649
Tampa FL 33675

**THIS IS YOUR INVOICE—PLEASE CHECK CAREFULLY—MAKE CERTAIN ALL ITEMS LISTED ARE RECEIVED
1 1/2% PER MONTH SERVICE CHARGE ON PAST DUE BALANCES. PURCHASER AGREES TO PAY ANY COLLECTION COSTS
INCLUDING REASONABLE ATTORNEY FEES, INCURRED BY THE SELLER ON DELINQUENT BALANCES.**

RECEIVED BY [Signature] TIME: _____

ATLANTA • BIRMINGHAM • COLUMBIA • GREENSBORO • GREENVILLE • JACKSONVILLE • KNOXVILLE • NASHVILLE • TAMPA

GARLAND SUPPLY CO.

7800 W. 25th AVENUE
 HIALEAH, FL 33016
 DADE - 556-5831 BROWARD - 462-3390

INVOICE

UNICORN CLEANERS
 5830 MIAMI GARDENS DR.

DATE 1/01/99

MIAMI, FL 33015

INVOICE NO. 00179746

COPIES DUE AND PAYABLE ON THE 10th OF THE MONTH FOLLOWING DELIVERY. DELINQUENT AFTER 30 DAYS AND SUBJECT TO HIGHEST PREVAILING RATE OF INTEREST

| CUSTOMER NO. | CUSTOMER I.D. | SALES CODE | DATE ORDERED | SHIPPED VIA | F.O.B. POINT | YOUR ORDER NO. | TERMS |
|--------------|---------------|------------|--------------|-------------|--------------|----------------|-------|
| JW5830 | | 57 | 1/08/99 | | | 00179746 | |

| QUANTITY | DESCRIPTION | UNIT OF MEASURE | ITEM CODE | UNIT PRICE | EXTENDED AMOUNT |
|----------|---------------------------|-----------------|-----------|------------|-----------------|
| 15.20 | DIAMOND PERC PUMP IN | GAL | ZPERC | 8.00 | 121.60 |
| 15.20 | FLORIDA PERC CLEANUP FUND | GAL | FUND | 5.00 | 76.00 |
| 15.20 | POLLUTION TAX | GAL | POLL | .10 | 1.52 |

| | | | | | | |
|--|--|--|--|---------|-----------|---------------|
| Title to merchandise remains with Garland Supply Co. until invoice paid in full. Purchaser agrees to pay all cost of collection, including reasonable attorney's fees. | | | | FREIGHT | SALES TAX | INVOICE TOTAL |
| | | | | | 7.91 | 207.03 |

Thank You



1920 TAMPA EAST BLVD.
TAMPA, FLORIDA 33619-3024
(813) 623-3553
(800) 282-2924
FAX (813) 623-3558

2050 KINGS RD./BLDG. B
JACKSONVILLE, FL 32209
(904) 634-1002
(800) 553-9040
FAX (904) 634-0213

| INVOICE NO. | INVOICE DATE | PAGE |
|-------------|--------------|------|
| F-046938 | 01/19/99 | 1 |

FOR CHEMICAL EMERGENCY
CONTACT:
CHEM • TEL • INC. 1-800-255-3924

CUST.
NO. **01-89500**

F3 6

SOLD TO
**UNICORN DRY CLEANERS
5830 MIAMI GARDENS DR
MIAMI FL 33046**

SHIP TO
**UNICORN DRY CLEANERS
5830 MIAMI GARDENS DR
MIAMI FL 33046**

| TERMS | CUSTOMER ORDER NO | SOLD BY | SHIP VIA |
|------------------------|-------------------|-----------|-----------------|
| 1-10 DOM/NET 25 | | 01 | TRUCK 02 |

SPECIAL INSTRUCTIONS

| QUANTITY | UNIT | DESCRIPTION | BACK ORDERED | UNIT PRICE | ✓ | TOTAL |
|-------------------|------|--|----------------------|------------|---|--------|
| 23.5 | GL. | RQ TETRACHLOROETHYLENE, 6.1, UN-1897, "PG III", PERC *DOWPER* - BULK | *HM* *HM* *HM* | | | |
| 23.5 | GL. | PERC *DOWPER* - BULK | | 7.50 | Y | 176.25 |
| SUBTOTAL | | | | | | 176.25 |
| SALES TAX | | | | | | 10.58 |
| ENVIRONMENTAL TAX | | | | | | 1.38 |
| ENVIRONMENTAL TAX | | | | | | 117.50 |
| REGCOM | | | | | | 1.00 |
| TOTAL. | | | | | | 306.72 |

CORRECTED INVOICE

(305) 828-3688

23

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for Transportation, according to the applicable regulations of the Department of Transportation.



**THIS IS YOUR INVOICE—PLEASE CHECK CAREFULLY—MAKE CERTAIN ALL ITEMS LISTED ARE RECEIVED.
1 1/2% PER MONTH SERVICE CHARGE ON PAST DUE BALANCES. PURCHASER AGREES TO PAY ANY COLLECTION COSTS
INCLUDING REASONABLE ATTORNEY FEES, INCURRED BY THE SELLER ON DELINQUENT BALANCES.**

REMIT TO
Phenix Supply Company
P.O. Box 76649
Tampa Fl 33675

RECEIVED BY _____ TIME: _____

ATLANTA • BIRMINGHAM • COLUMBIA • GREENSBORO • GREENVILLE • JACKSONVILLE • KNOXVILLE • NASHVILLE • TAMPA

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0390108

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 # 0250985

UNICORN CLEANERS
 TOM CHAMBERLAIN
 5830 MIAMI GARDENS DRIVE
 HIALEAH FL 33015-6023

FOR GOVERNMENT USE ONLY
 Org.: 37550101000 EO: B1
 Fund: 20-2-035001
 Obj.: 002273

RECEIVED
 MAIL ROOM
 DEC 30 1999
 DEC 8 99
 Bureau of Air Monitoring
 & Mobile Sources

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

404634

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 # 0250985

UNICORN CLEANERS
 TOM CHAMBERLAIN
 5830 MIAMI GARDENS DRIVE
 HIALEAH FL 33015-6023

FOR GOVERNMENT USE ONLY
 Org.: 37550101000 EO: A1
 Fund: 20-2-035001
 Obj.: 002273

RECEIVED
 MAIL ROOM
 FEB 10 2001
 FEB - 2001
 Bureau of Air Monitoring
 & Mobile Sources

2/15/01

| U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) | | |
|---|--------------------------|--------------|
| Postmark Here | | |
| Postage | \$ | |
| Certified Fee | | |
| Return Receipt Fee (Endorsement Required) | | |
| Restricted Delivery Fee (Endorsement Required) | | |
| Total | | |
| AIRS ID # 0250985 | | |
| Recip. | UNICORN CLEANERS | |
| | TOM CHAMBERLAIN | |
| Street | 5830 MIAMI GARDENS DRIVE | |
| City | HIALEAH FL 33015-6023 | |
| PS Form 3811, July 1999 | | Instructions |

7000 0600 0026 7825 6430

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | |
|--|---|--------------------------------------|
| <ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item-4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | A. Received by (Please Print Clearly) | B. Date of Delivery <i>2/9/01</i> |
| | C. Signature <i>[Signature]</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee | |
| 1. Article Addressed to: | D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No | |
| <p style="text-align: right;">AIRS ID # 0250985</p> <p>UNICORN CLEANERS TOM CHAMBERLAIN 5830 MIAMI GARDENS DRIVE HIALEAH FL 33015-6023</p> | 3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. | |
| 2. Article Number (Copy from service label) <i>7000 0600 0026 7825 6430</i> | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes | |
| PS Form 3811, July 1999 | Domestic Return Receipt | 102595-99-M-1789 |