



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

May 23, 2007

Ms. Halain Suarez
Jersey Cleaners, LLC
1432 West Flagler Street
Miami, Florida 33125

Re: Facility No.: 0251036-003

Dear Ms. Suarez:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on April 20, 2007.

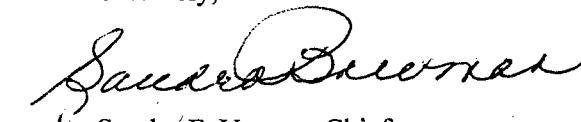
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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


Sandra F. Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SFV/pg

cc: Ms. Mallika Muthiah, Miami-Dade County

NO ACTIVITY FOR FACILITY
EMISSION FEE DATES 2000-2006
SOC REPORTS 2
COMP. STATUS - SNC MNC (IN)

Insp - FU I - Followup Inspection
Insp - Miami - Dade Co - Mmuthiah

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Bureau of Air Management
& Mobile Sources

APR 20 2007

RECEIVED

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): JERSEY CLEANERS, LLC
2. Site Name (For example, plant name or number): JERSEY CLEANERS, LLC
3. Hazardous Waste Generator Identification Number:
4. Facility Location: Street Address: 1432 W FLAGLER ST. City: MIAMI County: DADE Zip Code: 33125
5. Facility Identification Number (DEP Use ONLY - do not fill in): 0251036-003

Responsible Official

6. Name and Title of Responsible Official: Name: HALAIN SUAREZ Title: OFFICER / MANAGING MEMBER
7. Responsible Official Mailing Address: Organization/Firm: 150 SE 25 RD. 9-E # Street Address: 1432 W FLAGLER ST. City: MIAMI County: DADE Zip Code: 33125
8. Responsible Official Telephone Number: Telephone: (305) 643-3144 Fax: () -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): HALAIN SUAREZ, ISRAEL SUAREZ, EDUARDO ZHUPI
10. Facility Contact Address: Street Address: 1432 W. FLAGLER ST. City: MIAMI County: DADE Zip Code: 33125
11. Facility Contact Telephone Number: Telephone: (305) 643-3144 Fax: () -

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site? [1]

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1992	Existing	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site? [2]

How many dryers/reclaimers do you have on-site? [1]

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

[0] gallons (You must fill this in)

(b) If less than 12 months, how many? [0] months

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

New store: [] New machine []

Unopened store [] (date of expected opening 4/12/08)

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.)

- Small Area Source
- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (used 140 - 1,800 gallons of perc per year)

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

- | | |
|---|---|
| <u>Existing machines at small area source</u> | <u>New machines at small area source</u> |
| (NONE REQUIRED) <input type="checkbox"/> | Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u> | <u>New machines at large area source</u> |
| Carbon adsorber <input type="checkbox"/> | Refrigerated condenser <input type="checkbox"/> |
| Refrigerated condenser <input type="checkbox"/> | |

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 (see attached memo for the criteria).

All steam and hot water generating units exempt **OR**
No such units on-site

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating: ?

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. 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/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP 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.

HALAIN SUAREZ
Print name of responsible official

[Signature]
Signature

4/12/07
Date

BEST AVAILABLE COPY

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

RECEIVED
APR 20 2007
BUREAU OF AIR QUALITY
& MOBILE STATIONS

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	JERSEY CLEANERS, LLC		
2. Site Name (For example, plant name or number):	JERSEY CLEANERS, LLC		
3. Hazardous Waste Generator Identification Number:			
4. Facility Location:			
Street Address:	1432 N FLAGLER ST.		
City:	MIAMI	County:	DADE
		Zip Code:	33125
5. Facility Permit Number (DEP Use Only - 8000051111)	0251036-003		

Responsible Official

6. Name and Title of Responsible Official:			
Name:	HALAIN SUAREZ	Title:	MANAGING MEMBER
7. Responsible Official Mailing Address:			
Organization/Firm:	1432 W FLAGLER ST.		
Street Address:	1432 W FLAGLER ST.		
City:	MIAMI	County:	DADE
		Zip Code:	33125
8. Responsible Official Telephone Number:			
Telephone:	305) 643-3144	Fax:	() -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	HALAIN SUAREZ, ISRAEL SUAREZ, EDUARDO CHIP		
10. Facility Contact Address:	1432 W. FLAGLER ST.		
Street Address:	1432 W. FLAGLER ST.		
City:	MIAMI	County:	DADE
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Best Available Copy

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1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site? 2

How many drycleaners do you have on-site? 1

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2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

48 gallons (You must fill this in)

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

New store: New machine

Unopened store (date of expected opening 4/12/08)

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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.)

Small Area Source

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Transfer only on-site (used less than 200 gallons of perc per year)
Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
Transfer only on-site (used 200 - 1,800 gallons of perc per year)
Both machine types on-site (used 140 - 1,800 gallons of perc per year)

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

Existing machines at small area source (NONE REQUIRED)

New machines at small area source Refrigerated condenser

Existing machines at large area source Carbon adsorber Refrigerated condenser

New machines at 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 (see attached memo for the criteria).

All steam and hot water generating units exempt OR No such units on-site

How many boilers do you have on-site? 1

For each boiler, indicate its horsepower (HP) rating: 1 5 ?

What type of fuel do you use? propane natural gas No. 2 fuel oil No. 4 fuel oil No. 6 fuel oil Other (please list)

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(d) Carbon adsorbent exhaust perc concentration monitoring
(e) Startup, shutdown, malfunction plan

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DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

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

HALVIN SUAREZ
Print name of responsible official

[Signature]
Signature

4/12/07
Date

U.S. CUSTOMS AND BORDER PROTECTION

Department of Homeland Security

FACSIMILE TRANSMITTAL

CD 2110-035

Date: **May 9, 2007**

Control Number:

TO	Name:	Mr. D. Dibble
	Organization:	C-TPAT
	Fax Number:	850-921-9586
	Number of Pages (including cover):	5

FROM	Sender:	Halain Suarez
	Originating Location:	C-TPAT/Miami Field Office
	Return FAX Number:	Call First
	Voice Number:	305-871-7950 ext. 2019 / 305-213-9049

REMARKS	<p>Dick,</p> <p>Thanks for your help. Please call me anytime if you have any questions.</p> <p>Best,</p> <p>Halain</p>
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Important: This document may contain confidential and sensitive U.S. Government information. Please deliver it immediately only to the intended recipient(s) listed above. The Bureau of Customs and Border Protection has not approved the documents review, retransmission, dissemination or use by anyone other than the intended recipient(s).

CBP Form 3 (05/03)



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kotthamp
Lt. Governor

Michael W. Sole
Secretary

F A X T R A N S M I T T A L S H E E T

DATE: May 9, 2007

TO: HALAIN SUAREZ

PHONE: (305) 213-9049

FAX: (305) 871-7948

FROM: DICKSON E. DIBBLE

PHONE: (850) 921-9586

Division of Air Resources Management

FAX: 850.922.6979

RE: _____

CC: _____

Total number of pages including cover sheet: 5

305
871
7948

Message

HALAIN,
DOCUMENT IS FORTHCOMING - CALL IF
YOU HAVE ANY QUESTIONS -
Dick Dibble

If there are any problems with this fax transmittal, please call the above phone number.

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

Printed on recycled paper

TRANSMISSION VERIFICATION REPORT

TIME : 05/09/2007 11:48
NAME : FDEP DIVISION OF AIR
FAX : 8509226979
TEL : 8504880114
SER.# : BROG2J568046

DATE, TIME	05/09 11:47
FAX NO./NAME	613058717948
DURATION	00:01:34
PAGE(S)	05
RESULT	OK
MODE	STANDARD ECM



Florida Department of
Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kotthamp
Lt. Governor

Michael W. Sole
Secretary

F A K T R A N S M I T T A L S H E E T

DATE: MAY 7, 2007

TO: HABAZI SUAREZ

PHONE: (305) 213-9049

FAX: (305) 841-7948

FROM: DICKSON E. DIBBLE

PHONE: (850) 921-9586

Division of Air Resources Management

FAX: 850.922.6979

RE: _____

CC: _____

Total number of pages including cover sheet: 5

Message

HOLAIN,
DOCUMENT IS FORTHCOMING - CALL IF
UPON HAVE ANY QUESTIONS -

Dibble, Dickson

From: Dibble, Dickson
Sent: Tuesday, May 08, 2007 5:08 PM
To: McKeough, Stephen
Cc: Bowman, Sandy
Subject: 2007 PERC Dry Cleaner Calendar

Stephen,

Would you be so kind and mail a 2007 PERC Dry Cleaner Calendar to the following facility:

AIRS ID# 0251036
Attn: Halain Suarez
JERSEY CLEANERS LLC
1432 N Flagler St
Miami, Florida 33125

This is a new owner & the previous owner did not leave much information/records behind.

Thank you for your assistance.

Dick

Dickson E. Dibble

FL Dept of Environmental Protection
Div. of Air Resource Management
Bureau of Air Monitoring & Mobile Sources
Air General Permit Program
(850) 921-9586
SunCom 291-9586
ICG-#345

Dickson.Dibble@dep.state.fl.us

Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

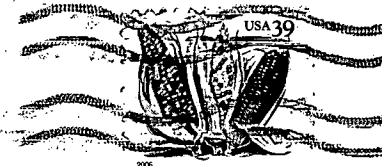
5/8/2007

Environmental Resources Management DE233387
Air Quality Management Division
701 NW 1 Court, Suite 400
Miami, Florida 33136

SOUTH FLORIDA, FD8

FL 330 3 L

17 APR 2007 PM



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

32399+6542

