

## 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-Designee

March 26, 2007

Mr. Roland Bastien Bastien Family Dry Cleaner 59 Northeast 54 Street Miami, Florida 33127

Re: Facility No.: 0251097-002

Dear Mr. Bastien:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 19, 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 Veazey, Chief Bureau of Air Monitoring

and Mobile Sources

SV/pg

cc: Ms. Mallika Muthiah, Miami-Dade County

"More Protection, Less Process"
www.dep.state.fl.us

NO ACTIVITY FOR FACILITY .........
EMISSION FEE DATES 2001-2004.

## PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

## TO 19 Mar

## 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.

Facility Name and Location	
1. Facility Owner/Company Name (Name of corporation, agency, or individ-	lual owner):
BASTIEH DRY CLEGARY	
2. Site Name (For example, plant name or number):	
BASTIEN FAMILIARY CLEANS	L
3. Hazardous Waste Generator Identification Number:	
FR 000076935	
4. Facility Location:	_
4. Facility Location: Street Address: City: SILESUST County: DADE	Zip Code: [3]
5. Facility, Identification Number (DEP Use ONLY - do not fill in):	51097-
Responsible Official	
6. Name and Title of Responsible Official:	2 / 1/
Name: HOLAND BAS/IEN Title:	Regiden
7. Responsible Official Mailing Address:	,
Organization/Firm: 59/1E543/REET	
Shoot radiosity was	Zip Code: 33/2
City: PIAPI County: PIT DE	Zip Code: 570/
8. Responsible Official Telephone Numbers (2)/(1)	
8. Responsible Official Telephone Numbers Telephone: (2/2) 80 5 50 5 Fax: (	) -
70 900 700	
De Die Grand de l'étant Africa Demandial Official	
9. Name and Title of Facility Contact (For example, plant manager):	
7. Ivanie and Title of Facility Contact (For example, plant manager):	
10. Facility Contact Address:	
	ĺ
Street Address:	7:- C-1
City: County:	Zip Code:
11. Facility Contact Telephone Number:	
Telephone: ( ) - Fax: (	) -

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility	Infori	mation
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1.(a) DRY-TO-DRY MACHINES ONLY How many dry-to-dry machines do you have on-site?				
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")	
1988	Existing/Ne	w RC/LA/None required	SAME	
	Existing/Ne	w RC/CA/None required		
	Existing/Ne	w RC/CA/None required		
*CONTROL DEVICE K	EY: RC = r	efrigerated condenser CA =	carbon adsorber	
1.(b) TRANSFER MAC	HINES ONLY	•		
How many washers do yo	ou have on-site?			
unit. If the transfer machi 1993, it is a NEW unit (n	as purchased from ine was purchased to units purchased	the manufacturer prior to or on I from the manufacturer between I	December 9, 1991, it is an <b>EXISTING</b> December 9, 1991 and September 22, owed to operate under this general formation:	
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	· .	
		have you used within the last 12 n	carbon adsorber	
(b) If less than 12 mor		<del></del>		
Check why it is less than 12 months: New owner: [] Did not keep records: []				
		New store: New machine		
• .		Unopened store [] (date of e	expected opening	

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3. What is the facility's source classification base Indicate with an "X". Select one classification	ed on the definitions found in section (3) of Part II? on only.)
Small Area Source	
Dry-to-dry machines only on-s Transfer only on-site Both machine types on-site	(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)
Large Area Source	
Dry-to-dry machines only on-s Transfer only on-site Both machine types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)
4. What control technology is required on machi (Indicate with an "X".)	nes pursuant to section (5) of Part II of this notification form?
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  []
	ons units shall not be eligible to use the general permit pursuant tond hot water generating units on-site meet the following site (see attached memo for the criteria).
All steam and hot water generating units exemption No such units on-site	t [] OR
How many boilers do you have on-site?	
For each boiler, indicate its horsepower (HP) rat	ing: [2]
	fuel oil No. 4 fuel oil Other (please list)
6. Equipment Monitoring and Recordkeeping In	formation
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/solv	ent addition log
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitori	ing
(d) Carbon adsorber exhaust perc concentration	ing monitoring
(e) Startup, shutdown, malfunction plan	

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7. Surrender o	of Existing DEP Air Permit(s)
Please indicat	te 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
this notif statemen maintain comply w I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.  I ATT DESTIPATION DESTIPATION OF THE OFFICE OFF

Addendum to: Perchloroethylene Dr Cleaner AGP Registration Form for:

AIRS ID# 0251097-002 **BASTIEN DRY CLEANERS** d.b.a. BASTIEN FAMILY DRY CLEANERS

02/20/2007 - I called Mr. Bastien to inquire as to why he indicated on Page 15 of the registration form (2/19/07 date stamped) that he used zero (0) gallons of PERC in the last twelve (12) months?

His answer was that his condensing (refrigerant) unit has been broken and that he did not utilize his dry cleaning equipment last year. He expects to have it back up and running in about 3-4 months from now, which would be about May or June.

Dick Dibble \( \)

MIAMI FL 331

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CHERAL SECTION

BUREAU OF ALL MONITORING & MOBILE SOURCES, MS 5510

DEPARTMENT OF ENVIRONMENTAL PROTECTION'

2600 BLAIK STONE KOAD.

TALLAHASSEE, FL. 32399-2400

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