



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

October 17, 2003

Mr. Antonio Aponte
Quality Plating, Inc.
4823 East Tenth Lane
Hialeah, Florida 33013

Re: Facility No.: 0251119-002

Dear Mr. Aponte:

The Department has received the Title V General Permit Notification Form for the chromium electroplating and anodizing facility that you submitted on September 29, 2003.

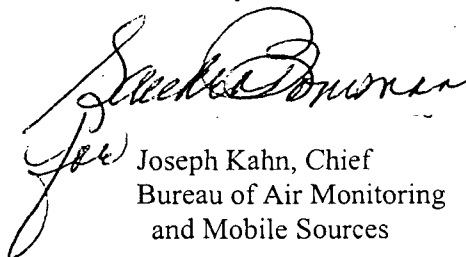
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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



Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Ms. Mallika Muthiah, Dade County

"More Protection, Less Process"

Printed on recycled paper.

Emission Fees - 2002
SO_x Report - 1
Compliance Status - IN
(9/16/2003)

RECEIVED

SEP 29 2003

Bureau of Air Monitoring & Mobile Sources

CHROMIUM ELECTROPLATING AND ANODIZING AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED

SEP 16 2003

Air Quality

Management Division

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 individual owner):	Quality Plating, Inc
2. Site Name (For example, plant name or number):	same as above
3. Hazardous Waste Generator Identification Number:	
4. Facility Location: Street Address: 4823 E 10th Lane City: Hialeah County: Miami-Dade Zip Code: 33013	
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0251119-002

Responsible Official

6. Name and Title of Responsible Official: Name: Antonio Aponte Title: Vice-President
7. Responsible Official Mailing Address: Organization/Firm: Street Address: same as above City: County: Zip Code:
8. Responsible Official Telephone Number: Telephone: (305) 688-4186 Fax: () -

Facility Contact (If different from Responsible Official)

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

Facility Information

1.a. Provide the information below for each hard electroplating machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

HARD CHROMIUM PLATING TANKS

DATE PURCHASED	UNIT CLASS (circle one)	DATE CNTRL DEVICE INSTALLED	CONTROL DEVICE (see key)	APPLICABLE STANDARD (see key)
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			

Key for Control Device Type

PBS = packed-bed scrubber
 CMP = composite mesh pad
 PBS/CMP = packed-bed scrubber and composite mesh pad
 FS = fume suppressant only
 FS/WA = fume suppressant with a wetting agent
 FM = fiber-bed mist eliminator
 WA = wetting agent

Applicable Standard Key

a = 0.03 mg/dscm
 b = 0.015 mg/dscm
 c = alternative standard for multiple tanks under common control

Is the facility's cumulative potential rectifier capacity greater than 60 million ampere-hours per year?

Yes No

1.b. Provide the information below for each decorative electroplating or anodizing machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

DECORATIVE AND ANODIZING TANKS

DATE PURCHASED	UNIT CLASS (circle one)	DATE CNTRL DEVICE INSTALLED	CONTROL DEVICE (see key)	APPLICABLE STANDARD (see key)
15-March-02	New/Existing	3/15/02	WA	Y
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			
	New/Existing			

Key for Control Device Type

PBS = packed-bed scrubber
CMP = composite mesh pad
PBS/CMP = packed-bed scrubber and composite mesh pad
FS = fume suppressant only
FS/WA = fume suppressant with a wetting agent
FM = fiber-bed mist eliminator
WA = wetting agent

Applicable Standard Key

x = 0.01 mg/dscm
y = 45 dynes/cm
z = records of bath components
(trivalent Cr tanks only)
c = alternative standard for multiple tanks
under common control

2. Indicate the date by which the facility must meet the requirements of paragraph (5) of Part II:
(Note: if your facility contains both hard and decorative plating or anodizing units, you must check each applicable date)

January 25, 1996 January 25, 1997

3. Indicate how the facility will fulfill the compliance demonstration:

The facility will conduct an initial performance test
 The facility will use a wetting agent to reduce emissions and will meet the existing surface tension limit in No. 1 above.

4. 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) Equipment maintenance	<input checked="" type="checkbox"/>	(b) Equipment inspection and repair	<input checked="" type="checkbox"/>
(c) Equipment malfunctions	<input checked="" type="checkbox"/>	(d) Operation and maintenance checklist	<input checked="" type="checkbox"/>
(e) Instrument calibration (used during initial performance test)	<input type="checkbox"/>	(f) Start-up, shutdown, malfunction plan	<input checked="" type="checkbox"/>
(g) Performance test results	<input type="checkbox"/>	(h) Equipment monitoring	<input type="checkbox"/>
(i) Excess emissions	<input checked="" type="checkbox"/>	(j) Operating periods	<input checked="" type="checkbox"/>
(k) Rectifier capacity	<input type="checkbox"/>	(l) Fume suppressant records	<input checked="" type="checkbox"/>
(m) Purchase records of wetting agent components	<input checked="" type="checkbox"/>		

5. 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.

Antoine Aroente
Print name of responsible official


Signature

9-16-03
Date

Instructions for Completing Part III of Notification Form

The Chromium Electroplating and Anodizing Facility Notification of Intent to Use General Permit, Part III of this form, shall be completed and submitted to the Division of Air Resources Management **at least 30 days prior to beginning operations under the general permit.** Please type or print clearly all information. A copy of this notification form shall be kept on-site and made available for review by Department personnel.

The responsible official of the facility, as defined in Part II of this notification form, is responsible for ensuring that the facility complies with all applicable terms and conditions of this general permit, as set forth in Part II of this form.

Mail the signed and completed Part III, of this form to:

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

Facility Name and Location

1. **Facility Owner/Company Name** - Enter the name of the corporation, agency, or individual that has ownership or control of the chromium electroplating or anodizing facility for which this notification is submitted.
2. **Site Name** - Enter the common name, if any, of the facility site; for example, Plant A, Metropolis plant, etc. If more than one facility is owned, a notification form must be completed for each.
3. **Hazardous Waste Generator Identification Number** - Enter the hazardous waste generator identification number, if known, assigned by the Department to the facility.
4. **Facility Location** - Enter the street address and zip code of the facility and the city and county in which it is located.
5. **Facility Identification Number (DEP Use ONLY)** - Please leave this space blank. DEP will enter the facility identification number assigned to you by ARMS.

Responsible Official

6. **Name and Title of Responsible Official** - Enter the name and title of the designated responsible official for the facility who, by signing this form, is certifying that the facility is eligible for a general permit pursuant to the requirements of Part II of this notification form and Rule 62-213.300, F.A.C.
7. **Responsible Official Mailing Address** - Enter the mailing address for the responsible official if different than the address entered in No. 4 above.
8. **Responsible Official Telephone Number** - Enter the telephone number and facsimile number, if available, at which the responsible official can be contacted.

Facility Contact

9. **Name and Title of Facility Contact** - Enter the name of the facility contact, if other than the responsible official. For example, a plant manager could be designated as the facility contact for Department inspections.
10. **Facility Contact Address** - Enter the mailing address for the facility contact, if different than the address entered in No. 4 above.

Dibble, Dickson

From: Dibble, Dickson
Sent: Thursday, May 17, 2007 8:40 AM
To: 'Gordon, Ray (DERM)'
Cc: Bowman, Sandy; Grant, Patricia
Subject: RE: 0251119 QUALITY PLATING

Ray,

Thank you for the information regarding the closing of this facility. You will find that I have INACTIVATED the facility in ARMS, per the result of your inspection findings email comments.

Have a great day!

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

From: Gordon, Ray (DERM) [mailto:GordoR@miamidade.gov]
Sent: Wednesday, May 16, 2007 3:12 PM
To: Dibble, Dickson
Subject: 0251119 QUALITY PLATING

The above facility was inspected today and found to be closed (out of business). Please update your records accordingly

Ray A. Gordon

Air Compliance Project Manager

Office:305-372-6925

gordor@miamidade.gov

5/17/2007



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

March 7, 2007

NOTICE OF PAST DUE

2006 ANNUAL EMISSIONS FEE

To: Users of the Title V Air General Permit

Previously, two notices of your obligation to pay the annual emissions fee have been sent to you by first class U.S. mail, including an invoice form with payment instructions. Your annual emissions fee of \$50 for the calendar year **2006** was due and payable on, or postmarked no later than, **March 1, 2007**. **If you have already submitted payment, please disregard this notice.**

This notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), Florida Administrative Code (F.A.C.), as a reminder that any annual emissions fee not paid may be subject to a 50 percent penalty, plus interest computed in accordance with Section 220.807, Florida Statutes (F.S.). In addition, under Rule 62-213(1)(g), F.A.C., failure to timely pay any required annual emissions fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit. According to our records, we have not received your air emissions fee payment. Therefore, you are being assessed a 50 percent penalty plus the invoice amount of \$50.00, for a **total amount of \$75.00**.

Records in the Division of Air Resource Management indicate that during calendar year **2006** you operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Rule 62-213, F.A.C.

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility under Section 403.0872, F.S., is required to pay an annual emissions fee, as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change(s) in facility status.

To submit your **\$75.00 fee payment**, please follow the directions on the enclosed invoice form. If you have any questions, you may call Dick Dibble at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Sandra Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

/SV

Enclosure: Invoice Form

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



Department of Environmental Protection

Jeb Bush
Governor

Division of Air Resource Management
2600 Blair Stone Road, MS 5510
Tallahassee, Florida 32399-2400

Colleen M. Castille
Secretary

TO: Holder of Title V Air General Permit

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213,300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

**Title V Air General Permits
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070**

(CUT HERE)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$75.00

Do NOT Remove Label

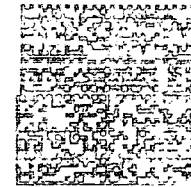
AIRS ID#251119
QUALITY PLATING INC
4823 E 10th Lane
HIALEAH, FLORIDA 33013

**FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200**

**FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273**

MS# 5510 MC Acct# 5527

Department of Environmental Protection
2600 Blair Stone Rd
Tallahassee FL 32399-2400



016H 350164

\$00.39

02/02/2007

Mailed From: 32399

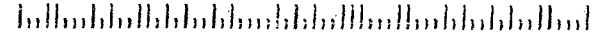
US POSTAGE

AIRS JD#251119
QUALITY PLATING INC
4823 E 10th Lane
HIALEAH, FLORIDA 33013

RECEIVED
FEB 19 2007

330 N1 4 906 0 71 02/19/07
RETURN TO SENDER
QUALITY PLATING
MOVED LEFT NO ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER
BC: 32399240099 *0638-08151-02-40

33013+2127-23 0039
323992400





POSTAGE
REQUIRED

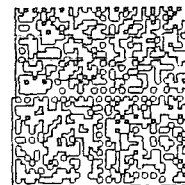
TITLE V - General Permit
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070

MS# 5510 MC Acct # 5527

Department of Environmental Protection
2600 Blair Stone Rd
Tallahassee FL 32399-2400

RECEIVED

MAR 26 2007



Master

016H16501646
\$00.390
03/08/2007
Mailed From 32399
US POSTAGE

*9/03/07
Change In Ownership*

AIRS ID#251119
QUALITY PLATING INC
4823 E 10th Lane
HIALEAH, FLORIDA 33013

NIXIE 330 1 00 03/22/07

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 32399240099 *0838-15453-08-35

33013+2127-23 ~~5527~~ 2400



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

443402 DEC16 2004

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

025 1119

QUALITY PLATING
4823 E 10 LN
Hialeah 33013

Printed on recycled paper.

Bureau of Air Monitoring
& Mobile Sources

RECEIVED
DEC 17 2004

FOR GOVERNMENT USE ONLY
ORG.: 3350101000 EO: A1
FUND: 20-035001
OBJECT: 002273