PERCHLOROETHYLENE DRY CLEANERS RECEIVED AIR GENERAL PERMIT EXAMPLE REGISTRATION WORKSHEET

APR 27 2012

: L REGISTRATION - Notification of intent to: struct and operate a proposed new facility.	
struct and anarata a proposad pary facility	
struct and operate a proposed new facility.	
rate an existing permitted facility not currently using an air gon an air gon an air gon an air general permit). If the facili	
nits, such permit(s) must be surrendered by the owner or oper	
nit. (See "Surrender of Existing Air Operation Permit(s)" belo	
rates an existing facility not currently permitted or using an a	ir general permit.
GISTRATION (for facilities currently using an air general pe	ermit) - Notification of intent to:
tinue operating the facility after expiration of the current term	n of air general permit use.
tinue operating the facility after a change of ownership. e an equipment change requiring re-registration pursuant to F	2.1.1. (2.2.10.2.10/2)/(a) E.A.C. an annu athan
ge not considered an administrative correction under Rule 62	
of Existing Air Operation Permit(s) - For Initial Registra	etions Only if Applicable
g air operation permits for this facility are hereby surrendered cifically permit number(s):	upon the effective date of this air general
conteatly permit number(s).	
acility Information	
vner/Company Name (Name of corporation, agency, or indiv	idual owner who or which owns leases
ontrols or supervises the facility)	
The transfer of the state of th	6444
s pwos TintonEria / Janet	OACELA/Ading Adrim Corp.
(Name, if any, of the facility site; e.g., Plant A, Metropolis P	
egistration must be submitted for each.)	ma
(ar line Tontal)	$\mathcal{L}_{\mathcal{A}} = (\mathcal{L}_{\mathcal{A}})$
LEN PHIN - PHOPEICIA	()
cation (Physical location of the facility, not necessarily the m	nailing address:)
ress: 4222 w 16 ml	Zip Code: 33017 - 7/0 d
Werk County: DADE PL	

Facility Contact	
Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.) Print Name and Title: Adia Grack Llang.	
Facility Contact Telephone Numbers Telephone: 307-557 Fax: Cell phone: 781-277-3693 E-mail: Los procedy Cleaver Extt. U-e t	
Facility Contact Mailing Address Organization/Firm: Address: Address: Y227 w/4 and City: HAUTH County: ORDE FL Zip Code: 33017	71
Other Contact/Representative (to serve as additional Department contact)	IV
Name and Position Title Print Name and Title: Janut + Garan / Owner	_
Other Contact/Representative Telephone Numbers Telephone: 505 JJ7 4505 Fax: Cell phone: E-mail: prosdry cleave att. wet	
Other Contact/Representative Representative Mailing Address Organization/Firm: Street Address: City:	

Facility Information

1.(a) DRY-TO-DRY MACHINES

How many dry-to-dry machines do you have on-site?	[}	
For each dry-to-dry machine on-site, please provide the followir	ng infor	mat	ion:

(Ming	

DATE MACHINE INSTALLED	UNIT CLASS (Gheck one)	CONTROL DEVICE (see key)	DATE CONTROL DEVICE INSTALLED	
1997	New Existing New Existing	LC / CA	S/AMC	-1 V !
	☐ New ☐ Existing			
	☐ New ☐ Existing			}
	☐ New ☐ Existing			

1. (b) Is the facility a co-residential Dry	Cleaning	facility?
1. (b) Is the facility a co-residential Dry Yes	1	No

Control Device Key: RC = Refrigerated Condenser

For each dry-to-dry machine located at a co-residential facility Dry Cleaning facility, please provide the following information:

DATE MACHINE	UNIT CLASS	PERC DRY	CONTROL DEVICE	VAPOR BARRIER
INSTALLED	(Check one)	CLEANING	(see key)	ENCLOSURE
		MACHINE		
	☐ New ☐ Existing	YES NO		YES NO
	☐ New ☐ Existing	YES NO		YES NO
	☐ New ☐ Existing	YES NO		☐ YES ☐ NO
	New Existing	YES NO		YES NO
	☐ New ☐ Existing	YES NO		YES NO

Control Device Key: RC = Refrigerated Condenser

CA = Carbon Adsorber

CA = Carbon Adsorber

NR =None Required

NR =None Required

2. Perchloroethylene Usage

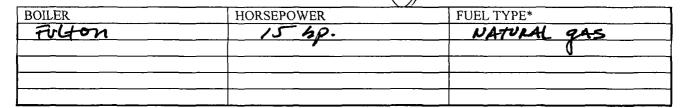
If this is an **initial registration** for a perchloroethylene dry cleaner, provide an estimate of the facility's expected amount of perchloroethylene to be used over the next 12-month period.

20 70 25 6x/1025

If this is a re-registration for a perchloroethylene dry cleaner, provide the amount of perchloroethylene used in the most recent 12 months.

3. Provide information on all steam and hot water generating units (boiler) on-site or that no such units exist on-site.

No steam and hot water generating units (boiler) onsite



^{*}Fuel Type – propane, No. 2 fuel oil, No. 4 fuel oil, No. 6 fuel oil, natural gas, electric, or other

Pacione, Michael

From:

Pacione, Michael

Sent: To: Friday, May 04, 2012 9:40 AM lospinosdrycleaner@att.net'

Subject:

Air General Permit Registration

Hello,

We have received your registration for your Air general permit renewal. I cannot find your facility in our system and was wondering if this is actually the first time you have registered with the Air Quality Division. If so, that is fine and I will create a new record for your facility. I was just a bit confused because you indicated on page 2 of the form that this is a re-registration after expiration of current term of air general permit use.

Please get back to me as soon as possible. Thank you

Michael P. Pacione

Environmental Specialist II

FDEP-Office of Permitting and Compliance

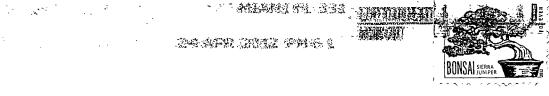
Minerals and Metals

Phone 850-717-9032

Fax 850-717-9001

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Deparement of Environmental frotection Recipts Post Office Box 3070 Tall44455ee FL 32315-3070

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