

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

October 14, 1996

Mr. Gray N. Vick Vice President Vick's Cleaners, Inc., #7 2915 Navy Boulevard Pensacola, Florida 32505

Dear Mr. Vick:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 29, 1996.

Please note that in November 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

cc: Mr. Charlie Norman, Northwest District

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

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
VICK'S CLEANERS INC. 2. Site Name (For example, plant name or number):
2. Site Name (For example, plant name or number):
7
3. Hazardous Waste Generator Identification Number:
FL0 07/ 946 958 4. Facility Location: 2915 NAVY BLVD Street Address: 2915 NAVY BLVD
4. Facility Location: 2915 NAVY OLVO Street Address:
City: County: Zip Code: 32505 S. Facility Identification Number (DEP Use):
5. Facility Identification Number (DEP Use):
Street Address: City: County: Zip Code: Street Address: County: Zip Code: Street Address: County: Zip Code: 32505 Street Address: County: Dept Selection Street Address: C
Responsible Official
6. Name and Title of Responsible Official:
GRAY N. VICK VICE - PRKSIDE~+ 7. Responsible Official Mailing Address:
7. Responsible Official Mailing Address: Organization/Firm: VICK'S CLEANERS (MC.
Street Address: 19, C AMAN ALAN
Street Address: 29:5 NAVY BLAD City: Zip Code:
PENSACOLA ESCAMBIA 32505
8. Responsible Official Telephone Number: Telephone: (904) 431 - 9251 Fax: (904) 476 - 7546
Telephone: (904)432 - 8351 Fax: (904)476 - 7546
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
GRAY N. VICK
10. Facility Contact Address: 2915 NAVY BLVO
Street Address:
City: County: Zip Code:
PRNSACOLA ESCAMBID 32505
11. Facility Contact Telephone Number: Telephone: (904) 432 - 8351 Fax: (904) 436 - 7546
Telephone: (904) 432 - 8351 Fax: (904) 436 - 7546

RECEIVED

AUG 2 9 1996

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

Bureau of Air Monitoring & Mobile Sources

#0330229

· · · · · · · · · · · · · · · · · · ·	Vick's Cleaners #7
P.14	1. (c) mark out "X" and initial 3. Should be new large area source
p./5	3. Should be new large area source 4. Should be new large area source W/refrig. Con.

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
Example	#1		12-NOV-93		08-DEC-91	mounica	#3	02-MAR-92	
Dry-to-Dry Unit	-4,1	en e		1,11					
(1) w/ ref. condenser	7	08-AUG-94	08-AUC-94	12	08-AUC-94	08-AUG-74		· ·	
(2) w/ carbon adsorber		J							
(3) w/ no controls									
Washer Unit		r wig ya.	Agrical and					The second secon	12. 1.14
(4) w/ ref. condenser									
(5) w/ carbon adsorber								1	
(6) w/ no controls					·-				1
Dryer Unit	, (M.)		4. 4		. North Straight				Telephone of
(7) w/ ref. condenser				1					<u> </u>
(8) w/ carbon adsorber					-				
(9) w/ no controls					*				
Reclaimer Unit	est a.	The State of the	Maria Cara	1. 44	· Praisition Lie				
(10) w/ ref. condenser								1	T
(11) w/carbon adsorber									
(12) w/ no controls						-			
(b) Control devices are (c) No control devices 2.(a) What was the total of [1544] (b) If less than 12 mont	are ro	equired to be ity of perchlo	installed [_	(perc)		n the latest 12	! mor	nths?	
Check why it is less (Indicate with an "X". Existing small ar	than urce	12 months: classification et one classifi	New owner: based on the cation only.	[e defi				•	
Existing large are			N	ew la	rge area sour	ce [}		

DEP Form No. 62-213.900(2) Effective: 6-25-96

(4) What control technology is required on machines pursuant to s (Indicate with an "X".)	ection (5) of Part II of this notification form?
Existing large area source Carbon adsorber Refrigerate	d condenser [X]
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall no to Rule 62-213.300, F.A.C. Verify that all steam and hot water g exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total boiler HP or less), and (2) are fired exclusively by natural gas exduring which propane or fuel oil containing no more than one pe	cept for periods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Recordk	eeping Information
Check all logs which are required to be kept on-site in accordance	e with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	(- <u>X</u>)
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	<u> </u>
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	$[\mathcal{X}]$

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please indicat	e 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)
L X I	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifi statement maintain comply w	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.
Signature	And A. Van Bate

Vick's Cleaners, Inc.

TO GENERAL PERMIT COORDINATOR,

FOR YOUR INFORMATION WE HAVE INSTALLED 3 UNION 2000 DRYCLEANING MACHINES BETWEEN TO LOCATIONS. THESE MACHINES MEET ALL REQUIRMENT UNDER GENERAL PERMITING CONDITIONS AND NO OTHER CONTROL DEVICES ARE REQUIRED AT THIS TIME.

AT OUR VOGUE CLEANERS WE HAVE A MULTIMATIC WHICH REQUIRES A CARBON ABSORBER ON THE VENT. WE ARE IN THE PROCESS OF INSTALLING IT NOW, WE ARE WATING ON SOME RECOMMENDATIONS FROM THE MANUFACTURE OF THE DRYING CLEANING MACHINE.

THANK YOU GRAY N. VICK AIRS ID#: <u>0330229</u>

Revised 01/18/00

asop

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: VICK'S CLORNERS #7 DATE: 1/10/0	
FACILITY LOCATION: 2915 NAVY Blud	
Rensocali 32505	<u>.</u>
Annual Reporting Period: -1/20/ 2000 TO 1/10/0/ 200	/
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. 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:	
P	
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
Method used to demonstrate compliance: #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	
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 min this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon 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.	iade
RESPONSIBLE OFFICIAL: GRAY N. VICK Signature Date	<u>_</u>

Page _____ of ____. \(\)

JAN 1 6 2001

^{*}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.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🔯	COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN:	TIME OUT:	- AIRS ID#: 0330229
TYPE OF FACILITY:		
FACILITY NAME:	K's CLEMAURS	#7 DATE: 1/10/01
FACILITY LOCATION: 20	115 NAVy 13 1 VO	d -
<u> </u>	ensacala PL	32505
RESPONSIBLE OFFICIAL:		PHONE NUMBER:
	he compliance requirements e ule 62-213.300, Florida Adm	evaluated during this inspection, the facility is found to be in inistrative Code (F.A.C.).
Based on the results of to		evaluated during this inspection, the following compliance
COMPLIANCE REQU	JIREMENT/PROBLEM	M FOLLOW-UP ACTION REQUIRED
		<u> </u>
COMMENTS:		
		ENTERED 10 Zu01
The Annual Compliance Certifica	ation form has been properly	certified and submitted to the inspector. YESX NO
DATE OF NEXT INSPECTION	N:	·
INSPECTION CONDUCTED	Ω_{\perp}	(Approximate) Norman (Please Print)
INSPECTOR'S SIGNATURE	Jul MI	PHONE NUMBER: 595-8364 X 1222 Paying at 10/96

apyl

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL (INSI, INS2)

RE-INSPECTION (FUI)

COMPLAINT/DISCOVERY (CI) □

AIRS ID#: 033 022 9 DATE: 1/10/0 TIME IN: _____ TIME OUT: ____ FACILITY NAME: Vick's Cleaners. FACILITY LOCATION: RESPONSIBLE OFFICIAL: GRAY N. VICK PHONE: CONTACT NAME: _____ PHONE: PART I: NOTIFICATION (check appropriate box) Facility Compliance Status: 1. New facility notified DARM 30 days prior to startup (ARMS Data) MNC 2. Facility failed to notify DARM to use general permit **SNC** PART II: CLASSIFICATION Facility indicated on notification form that it is: ☐ No notification form (check appropriate box) ☐ Drop store/out of business/petroleum 1. Existing small area source 2. New small area source dry-to-dry only, x < 140 gal/yrdry-to-dry only, x < 140 gal/yrtransfer only, x < 200 gal/yrtransfer only, x < 200 gal/yr both types, x < 140 gal/yrboth types, x < 140 gal/yr(constructed before 12/9/91) (constructed on or after 12/9/91) 3. Existing large area source 4. New large area source dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$ dry-to-dry only, $140 \le x \le 2{,}100 \text{ gal/yr}$ transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$ (constructed before 12/9/91) (constructed on or after 12/9/91) □Can not determine 1 6 2001 5. This is a correct facility classification $\square N$ 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 443 gallons.

(check appropriate boxes) SIN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? AYNE NO YO 2. Examining the containers for leakage? NO YØ 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? 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) NO YO 1. Equipped all machines with the appropriate vent controls? אום אם צע 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the אמש אם אם condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated NO YO' 2°C #2 condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the אמבל אם צם A condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after אם צם verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility:

В.	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?	ŊΥ	□N
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	אאמ אם
	Is the temperature differential equal to or greater than 20° F?	ΠY	AND NO
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? Is the perc concentration equal to or less than 100 ppm?	- ΩΥ ΩΥ	AVÆ NO AVÆ NO
	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?	ПY	אמם אם
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	אומם אם
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	אימים אם

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official:	
(check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם אם
2. Maintained rolling monthly total of perc consumption?	אם אש
3. Maintained leak detection inspection and repair reports for the following:	<u>.</u> .
a. documentation of leaks repaired w/in 24 hrs? or;	A:NE NO YE
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days	211 211
and parts installed w/in 5 days of receipt?	אאפל אם אם
4. Maintained calibration data? (for applicable direct reading instruments)	אאנצ אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	א'אנל אם צם
6. Maintained startup/shutdown/malfunction plan?	NO AE
7. Maintained deviation reports?	אעם אם אם איע
Problem corrected?	A/אפל אם עם
8. Maintained compliance plan, if applicable?	DY DN DN/A

PART VI: LEAK DETECTION AND	REPAIRS		
1. Does the responsible official conduct	a weekly (for small sources	s, bi-weekly) leak detection a	nd repair
inspection?			NO NO
2. Has the facility maintained a leak log	?		NO AB
3. Does the responsible official check th	ne following areas for leaks?	?	*
Hose connections, fittings, couplings, and valves	BY ON ON/A	Muck cookers	OY ON ON/A
Door gaskets and seating	AVO NO VE	Stills	A/NO NO YES
Filter gaskets and seating	OY ON ON/A	Exhaust dampers	ב/אם אם עם
Pumps	DY ON ON/A	Diverter valves	באמש אם עם
Solvent tanks and containers	A/A NO NO YE	Cartridge filter housings	אותם אם עש
Water separators	DY ON ON/A		
4. Which method of detection is used by	y the responsible official?		
Visual examination (condensed	solvent on exterior surface	s)	_ 0
Physical detection (airflow felt	through gaskets)	~	70
Odor (noticeable perc odor)			9
Use of direct-reading instrumer	ntation (FID/PID/calorimetr	ic tubes)	
Halogen leak detector			
If using direct-reading ins	trumentation, is the equip	ment:	□N/A
a. Capable of detectin	g perc vapor concentrations	in a range of 0-500 ppm?	OY ON
b. Calibrated against ((PID/FID only)?	a standard gas prior to and a	fter each use	OY ON *
c. Inspected for leaks	and obvious signs of wear of	on a weekly basis?	OY ON
d. Kept in a clean and	secure area when not in use	e?	OY OX
e. Verified for accura	cy by use of duplicate samp	les (calorimetric only)?	OY ON
	•	•	·
		•	
\bigcirc / \bigcirc /		1:1.	
hadles Norma	No.	1/10/0	

Inspector's Name (Please Print)

Inspector's Signature

One of Inspection

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
•	
	·
	. N
	·
,	
	•
·	

[injectors 10 Dec 96] CORRECTED COPY

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

·
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
VICK'S CLEANERS INC. 2. Site Name (For example, plant name or number):
2. Site Name (For example, plant name or number):
3. Hazardous Waste Generator Identification Number:
_
FLO 07/ 946 958 4. Facility Location: 2915 NAVY BLVD Street Address:
City: County: Zip Code: PEN SA COLA ESCAMBIA 5. Facility Identification Number (DEP Use):
5. Facility Identification Number (DEP Use):
5. Facility Identification Number (DEP Use): 0330227
Responsible Official
6. Name and Title of Responsible Official:
GRAY N. VICK VICE - PRESIDENT 7. Responsible Official Mailing Address:
7. Responsible Official Mailing Address:
Organization/Firm: VICK') CLEANER) INC. Street Address: 20. 7
City: County: Zip Code:
Street Address: 29:5 NAVY BLAD City: County: Zip Code: PENSACOLA ESCANDIA 32505 8. Responsible Official Telephone Number:
8. Responsible Official Telephone Number: Telephone: (904)433 - 9364 Fax: (904)436 - 7546
Telephone: (904)432 - 8351 Fax: (904)476 - 7546
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
GRAY N. VICK
10. Facility Contact Address: 2915 NAVY BLVD
Street Address:
City: County: Zip Code:
PENSACOLA ESCAMBIA 32505
11. Facility Contact Telephone Number: Telephone: (904) 422 - 8251 Fax: (904) 416 - 3511
Telephone: 904)432 - 8351 Fax: (904)436 - 7546
· · · · · · · · · · · · · · · · · · ·
RECEIVE

RECEIVED

AUG 2 9 1996

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

Bureau of Air Monitoring & Mobile Sources

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.

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit									
(1) w/ ref. condenser	7	08-A1X-74	08-AUC-94	2	68-AUC-94	08-AUC-74		Ţ	
(2) w/ carbon adsorber		0 0 1.00 11	9 7 12 4 14	-7					
(3) w/ no controls								i -	
Washer Unit				L					
(4) w/ ref. condenser								_	
(5) w/ carbon adsorber									
(6) w/ no controls				ļ					
Dryer Unit		· · · · · · · · · · · · · · · · · · ·	· -:	<u> </u>	*:. *				
(7) w/ ref. condenser									_
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit	<u>.</u> .						٠.		
(10) w/ ref. condenser									
(11) w/carbon adsorber									_
(12) w/ no controls									
(b) Control devices are (c) No control devices 2.(a) What was the total of the control of the control devices (b) If less than 12 mont Check why it is less	are requant gallo	equired to be ity of perchlo ons ow many? [_	installed [_ oroethylene (perc)	purchased in				
3. What is the facility's so (Indicate with an "X". Existing small ar	Selec ea so	urce	cation only.) Ne	ew sn	nall area sour	ce [Part II?	
Existing large are	ea so	urce [Ne	w Iai	rge area sour	ce 1	, AL	·N', V	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

(Indicate with an "X".)	•
Existing large area source Carbon adsorber Re	efrigerated condenser
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser [\(\sum_{\text{N}} \)] D.n. \(\sum_{\text{V}} \)	
· .	
5. A facility which contains non-exempt emissions unit to Rule 62-213.300, F.A.C. Verify that all steam and he exemption criteria or that no such units exist on-site: All steam and hot water generating units on-site (1) have	
boiler HP or less), and (2) are fired exclusively by natural during which propane or fuel oil containing no more the	
All steam and hot water generating units exempt No such units on-site	<u>X</u> 1
Equipment Monitoring and	Recordkeeping Information
Check all logs which are required to be kept on-site in a	ccordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	<u></u>
(b) Leak detection inspection and repair	7
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitor	ring
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	(X)

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

DEP Form No. 62-213.900(2) Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please indicat	e with an "X" the appropriate selection	on:							
	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)								
À	No air permits currently exist for the this notification form.	he operation of the facility indicated in							
	Responsible Official Certification								
this notifi statement maintain	cation. I hereby certify, based on inf is made in this notification are true, a the air pollutant emissions units and	as defined in Part II of this form, of the facility addressed in formation and belief formed after reasonable inquiry, that the accurate and complete. Further, I agree to operate and air pollution control equipment described above so as to eneral permit as set forth in Part II of this notification form.							
I will pro	Lig N. Ver	hanges to the information contained in this notification. 12-10-96 Date							

Vick's Cleaners, Inc.

TO GENERAL PERMIT COORDINATOR,

FOR YOUR INFORMATION WE HAVE INSTALLED 3 UNION 2000 DRYCLEANING MACHINES BETWEEN TO LOCATIONS. THESE MACHINES MEET ALL REQUIRMENT UNDER GENERAL PERMITING CONDITIONS AND NO OTHER CONTROL DEVICES ARE REQUIRED AT THIS TIME.

AT OUR VOGUE CLEANERS WE HAVE A MULTIMATIC WHICH REQUIRES A CARBON ABSORBER ON THE VENT. WE ARE IN THE PROCESS OF INSTALLING IT NOW, WE ARE WATING ON SOME RECOMMENDATIONS FROM THE MANUFACTURE OF THE DRYING CLEANING MACHINE.

THANK YOU GRAY N. VICK

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🔀	COMPLAINT/DI	ISCOVERY [RE-INSPEC	TION
TIME IN: 1410 TYPE OF FACILITY: D.C.	TIME OUT:	1525	AIRS ID#:_6	330229	,
FACILITY NAME: Vick's		c. #7	·	DATE:/0\	ec. 96
FACILITY LOCATION: 29	0/1 1	,			
Pe	noacala FC	32505			
RESPONSIBLE OFFICIAL: \(\sum_{\text{V}}\)	lick, Gony N	•	_PHONE NUMBER	432-83	51
لجع	he compliance requirements e ule 62-213.300, Florida Admi			ility is found to be	in
Based on the results of t discrepancies were note	he compliance requirements e d:	valuated during th	his inspection, the fol	lowing compliance	
COMPLIANCE REQU	JIREMENT/PROBLEM	A FOI	LLOW-UP ACT	ON REQUIRE	CD
	,				
			<u> </u>		
	_				
	,				
COMMENTS:			. •		
The Annual Compliance Certification	ation form has been properly of	rertified and subm	nitted to the inspector	YES X	NO
DATE OF NEXT INSPECTION	2 67	ceremed and such	inted to the hispector		NO
DATE OF NEXT INSPECTION	N: OKII	(Approximate)			
INSPECTION CONDUCTED	BY: Charles No	(Please Print)			
INSPECTOR'S SIGNATURE:	(Mew EMI	<i>21</i>	PHONE NUMBER:	444-8360	·/
	Pag	ge <u></u> of <u>/</u> .		. / ₁	Revised 10/96



[Aams] (2:1196)

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	X COMPLAINT/DISC	OVERY 🗖
FACILITY NAME: Viclo	is Cle	IN: 1410 TIME OUT: ANOTE, INC 747, AVY BIVD. FL 32505	
PART I: NOTIFICATION			
(check appropriate box)			
Existing facility notified DARM	1 by 9/1/96		2
2. New facility notified DARM 30	days prior to sta	rtup	
3. Facility failed to notify DARM	to use general pe	ermit	0
		and the same of places of the second of the	
PART II: CLASSIFICATION			
Facility indicated on notification (check appropriate box)	form that it is:		
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)		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)	
3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>/yr</td><td>A New large area source dry-to-dry only, 140<x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td>0</td></x<2,></td></x<2,>	/yr	A New large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td>0</td></x<2,>	0
This is a correct facility classificate	tion	DY ZH	
If no, please check the appropriate	e classification:		
facility qualified facility exceeds a	for a general per bove limits and i	rmit as number above is not eligible for a general permit	
B. The total quantity of perchlorofacility was 266 gallons.	ethylene (perc) p	urchased within the preceding 12 month	s by this dry cleaning

Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? NO YO NO YE 2. Examining the containers for leakage? DY DN 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? DIY DN 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? 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) NO YE 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? AVAC NO YER 3. Equipped the condenser with a diverter valve so airflow will be directed away from the TY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? ДУ ОИ 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? NO YO 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? ØY □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? MO YO

•

PART III: GENERAL CONTROL REQUIREMENTS

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?) OY ON
Is the temperature differential equal to or greater than 20° F?	OY ON
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? Is the perc concentration equal to or less than 100 ppm?	OY ON SIN/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?	OY ON Y
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	DY DN DN/A
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
Maintained receipts for perc purchased?	DY ON
2. Maintained rolling monthly averages of perc consumption?	NO YES
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	QY ON
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ОУ ОИ
4. Maintained calibration data? for direct reading instruments only)	DY DN DN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN VZ
6. Maintained startup/shutdown/malfunction plan?	MD AM
7. Maintained deviation reports?	DY DN QUE
Problem corrected?	DY DN
8. Maintained compliance plan, if applicable?	DY ON DIN/A
PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	NO AG
2. Which method of detection is used by the responsible official?	
Visual examination (condensed solvent on exterior surfaces)	_ <u>p</u>
Physical detection (airflow felt through gaskets)	_ _
Odor (noticeable perc odor)	
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)	

If using direct-reading instru	mentation,	, is the equ	ipment:	NFA)		
a. Capable of detectin	NA NA	□N				
b. Calibrated against a (PID/FID only)?	מם עם					
c. Inspected for leaks	and obviou	is signs of	wear on a weekly basis?	□x\	אכ	
d. Kept in a clean and	l secure are	ea when no	t in use?		אכ	
e. Verified for accurac	cy by use o	f duplicate	samples (calorimetric only)?	ZYO	⊃N	
3. Has the facility maintained a leak log	g?			_ D Y	ÌΝ	
4. The following areas should be checked for leaks by the inspector:						
	_ <u>Leak</u>	Detecte d?	_	Leak I	Detected?	
Hose connections, fittings, couplings, and valves	ZIY	□N	Muck cookers	QY	□N	
Door gaskets and seating	∇QY	ΠN	Stills	YE	□N	
Filter gaskets and seating	$\sqrt{Q}\lambda$	□N	Exhaust dampers	ΠY	DN NA	
Pumps	Δ Y	□N	Diverter valves	AA	□N	
Solvent tanks and containers	Y	□N	Cartridge filter housings	BY	□N	
Water separators	ΔIY	□N				

GRAY N. VICIC
Name of Responsible Official
Charles MNORMAN
Inspector's Name (Please Print)
Just Milyonan
Inspector's Signature

Date of Inspection

Dec 97

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:			
	,		
	1 at 1 s		
			·
·			
a a company of the co			,
·			
		ý.	
·			

١,

AIRS ID#: 0330229



DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Vick's Clanners FN	C #7 DATE: 12.10.96
FACILITY LOCATION: 29 15 Nov 31	νd
FACILITY LOCATION: 29 15 NAV y 131	32505
Annual Reporting Period: 8 - 29	1996 to 12-10 1996
Based on each term or condition of the Title V general air permit,	<u> </u>
62-213.300, Florida Administrative Code (F.A.C.), during the peri	iod covered by this statement. XYES INO
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in c	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:	·
#2. Term or condition of the general permit that has not been in c	ontinuous 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 made in this notification are true, accurate and complete. Further upon rolling averages of purchase receipts, does not exceed 2,100 year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name (Please Print)	r, my annual consumption of perchloroethylene solvent, based

^{*}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.

all 1

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

		VICK'S CLEANERS INC GRAY N VICK 2915 NAVY BLVD PENSACOLA FL 32505	AIRS ID#03302	29	Sureau of Air Mobile Sou	IVED 1998 Ionitoring
:		<i>D</i> 0 <u>NO1</u>	Remove Laber			. ces
Annual Reporting Period:		1	19 <u>97</u> то _	12	3 /	19 <i>97</i>
Based on each term or condition 62-213.300, Florida Administration of the graph of	rative Code (F	F.A.C.), during the period	covered by this sta	atement.	YES 🗖	NO
Exact period of non-complianc	e: from	,	to	o		
Action(s) taken to achieve com	pliance:				_	
Method used to demonstrate co	mpliance:				,	
#2. Term or condition of the g	eneral permit	that has not been in con-	tinuous compliance	e during the re	porting period sta	ted above:
Exact period of non-complianc	e: from		to_		_	
Action(s) taken to achieve com	pliance:				•	
Method used to demonstrate co	mpliance:	<u>·</u>				
As the responsible official, I here notification are true, accurate an does not exceed 2,100 gallons per	d complete. F	urther, my annual consum	ption of perchloroe	thylene solvent,	, based upon purch	
RESPONSIBLE OFFICIAL:	Arth. Nan	y Vicle ne (Please Print)		Signature		/6 98 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.

Vick's Cleaners, Inc.

To: Florida Department Environmental Protection 2600 Blair Stone Road

Tallahassee, Fl 32399

Air Division

From: Vicks Cleaners Inc

2915 Navy Blvd

Pensacola, Fl 32505

904-432-8351

This is to notify you that we have installed a 1988 model refrigerated, non vented, 15 pound dry to dry drycleaning machine, this machine will use approximately 100 gallons of perk a year. There will be no change in our classification as a large area source drycleaners.

Sincerely

Jake Vick ores

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	annual 🂢	СОМР	LAINT/DISCOVERY [RE-INSPECTION	
TIME IN: 1120	TIME OUT:	1205	AIRS ID#:	VE ED 229	
TYPE OF FACILITY: DC			MAR 2 4 1	(100	
FACILITY NAME: Vick's	Cleaning #	7	- • •	DATE: 3/23/99	
FACILITY LOCATION: 29	15 Navy 131	Iva	Bureau of Air Mo & Mobile Sou	Pnitoring	
Ken	mail of FC	3250	Some 200	rces	
RESPONSIBLE OFFICIAL:	•			ER: 437-757/6	
Based on the results of the compliance with DEP Ru			ed during this inspection, the	facility is found to be in	
Based on the results of the	e compliance requireme		ed during this inspection, the	following compliance	
discrepancies were noted COMPLIANCE REQU		LEM	FOLLOW-UP AC	TION REQUIRED	
				•	
				····	
	•				
				•	
•					
				· ·	
			•		
COMMENTS: GOOD G	peration;	L			
,					
The Annual Compliance Certificat	tion form has been prope	erly certified	d and submitted to the inspec	or. YESN NO	
The Annual Compliance Certification form has been properly certified and submitted to the inspector. NO DATE OF NEXT INSPECTION: 7110 Zerol					
DATE OF REAL INSPECTION	~	(Appr	roximate)		
INSPECTION CONDUCTED B	Y: 6 HN, ~ /-	sAlor	- M M con-		
/	1/1000	(Plea	se Print)	CR: 595 -8364	
INSPECTOR'S SIGNATURE: Hule Home Number: 595 -8361					

Page of ___.

Revised 10/96

Plant Shit Lower 10/27/198 5 Fert 10/1 2/1/99

PERCHLOROETHYLENE DRY CLEANERS

COMPLIANCE INSPECTION CHECKLESTE CEIVED

TYPE OF INSPECTION:	ANNUAL	COMPLAINTING COXERS		
•	RE-INSPECTION			
		Bureau of Air Monitoring		
77 33-0	3/02/0	& Mobile Sources		
AIRS ID#: ちょうこえみり ID	OATE: 3/ 3 3/ 75	9 time in: <u>// 20</u> time out: <u>//os</u>		
FACILITY NAME: VICK	s Cloanus	, 4 7		
FACILITY LOCATION: 29	is Nous	VC Black		
)	Z 32505		
		PHONE: 437-75-46		
CONTACT NAME:	enie	PHONE:		
		<u> </u>		
PART I: NOTIFICATION		· · · · · · · · · · · · · · · · · · ·		
(check appropriate box)				
1. New facility notified DARM 3	0 days prior to startu	ıp		
2. Facility failed to notify DARN	I to use general perm	nit 🗆		
PART II: CLASSIFICATION				
Facility indicated on notificatio	n form that it is:	☐ No notification form		
(check appropriate box)	n form that it is.	☐ Drop store/out of business/petroleum		
A.	_			
1. Existing small area source dry-to-dry only, x < 140 gal/y		2. New small area source		
transfer only, $x < 200$ gal/yr		dry-to-dry only, $x < 140 \text{ gal/yr}$ transfer only, $x < 200 \text{ gal/yr}$		
both types, x < 140 gal/yr		both types, $x < 140$ gal/yr		
(constructed before 12/9/91)		(constructed on or after 12/9/91)		
3. Existing large area sourc	e 🗀	4. New large area source		
dry-to-dry only, $140 \le x \le 2,1$		dry-to-dry only, $140 \le x \le 2,100$ gal/yr		
transfer only, $200 \le x \le 1,800$) gal/yτ t	transfer only, $200 \le x \le 1,800 \text{ gal/yr}$		
both types, $140 \le x \le 1,800$ g		both types, $140 \le x \le 1,800$ gal/yr		
(constructed before 12/9/91)	((constructed on or after 12/9/91)		
5. This is a correct facility cla	ssification)	Y 🗆 N 🗆 Can not determine		
If no, please check the appropriate classification:				
facility qualified for a general permit as number above				
	y exceeds above limit	ts and is not eligible for a general permit		
	coethylene (perc) pure	chased within the preceding 12 months by this dry cleaning		
facility was 3858 gallons.				

11 Achiet 19-math to led 161.4

124.6

13 yar Cer 100.4 1015

Shirt down 585.8

171-1

Revised 8/11/97

PART III: GENERAL CONTROL REQUIREMENTS				
Is the responsible official of the dry cleaning facility: (check appropriate boxes)				
1. Storing perchloroethylene in tightly scaled and impervious containers?	באמם אם אם			
2. Examining the containers for leakage?	אאם אם אם א			
3. Closing and securing machine doors except during loading/unloading?	EN ON			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	MY ON ON/A			
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY DN ØN/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 re (complete A below).	frigerated condenser			
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 re (complete A and B below).	frigerated condenser			
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?	Ø7. 07.			
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	DY ON ON/A			
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	אומל אם צם			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	ио ус			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	MY ON ON/A			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	אם אם			

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

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם אם
2. Maintained rolling monthly averages of perc consumption?	אם אם
3. Maintained leak detection inspection and repair reports for the following:	``
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ON/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?	AVA NO YO
4. Maintained calibration data? (for applicable direct reading instruments)	AWA NO YES
5. Maintained exhaust duct monitoring data on perc concentrations?	אואק אם צם
6. Maintained startup/shutdown/malfunction plan?	MO AG
7. Maintained deviation reports?	ANÁRÍ NO YO
Problem corrected?	AVA NO YO
8. Maintained compliance plan, if applicable?	אולל אם צם

PART VI: LEAK DETECTION AND REPAIRS						
1. Does	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
inspe	ection?			NO YO		
2. Has t	he facility maintained a leak log	?		GA DN		
3. Does	. Does the responsible official check the following areas for leaks?					
	Hose connections, fittings, couplings, and valves	AVIO NO YO	Muck cookers	אואם אם אם		
	Door gaskets and seating	ÒΥ □Ν □Ν/A	Stills	OY ON ONA.		
	Filter gaskets and seating	AVA NO YO	Exhaust dampers	AWO NO YO		
	Pumps	AVAO NO YO	Diverter valves	AVAC NO YE		
	Solvent tanks and containers	A/NO NO YO	Cartridge filter housings	A/AC NO YO		
	Water separators	A/אם אם צם				
4. Which	ch 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)				Ò		
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?			NO YO			
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
	c. Inspected for leaks	and obvious signs of wear	on a weekly basis?	OY ON		
d. Kept in a clean and secure area when not in use?				OY ON		

Charles Norman	3/23/99
Inspector's Name (Please Print)	Date of Inspection
Gurl Home	mid - 2000
Inspector's Signature	Approximate Date of Next Inspection

e. Verified for accuracy by use of duplicate samples (calorimetric only)?

DY DN

ADDITIONAL SITE INFORMATION:		
·	•	
·		
		· .
•		
		·
· .		



DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

			RECE	
FACILITY NAME: VIERS Cleaner,			DATE	3/23/99
FACILITY LOCATION: 2915 NAVY	Blvd.		MAR 2 4	- •
FACILITY LOCATION: 29/5 NAVY	= 4 3 2505		Bureau of Air & Mobile S	Monitoring ources
Annual Reporting Period: 12/11/9		то 23/111	A-2/99	19
Based on each term or condition of the Title V gener 62-213.300, Florida Administrative Code (F.A.C.), d	-	-	_	EP Rule
If NO, complete the following:				
#1. Term or condition of the general permit that has	not been in continuou	s compliance during	g the reporting peri	od stated above:
Exact period of non-compliance: from		to		
Action(s) taken to achieve compliance:				
Method used to demonstrate compliance:				· ·
#2. Term or condition of the general permit that has	; not been in continuou	us compliance during	g the reporting peri	od 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 or made in this notification are true, accurate and com upon rolling averages of purchase receipts, does not year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name (Plea	plete. Further, my and t exceed 2,100 gallons	nual consumption of	perchloroethylene dry facilities or 1,8	solvent, based
<u> </u>	`			

^{*}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.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🔀	COM	PLAINT/DI	COVERY [RE-INSPECTION
TIME IN: TYPE OF FACILITY: FACILITY NAME: VICK FACILITY LOCATION:	TIMEOUT:	, 29 ,	Burge Spain	AIRS ID#: E	DATE: 15 15 18
RESPONSIBLE OFFICIAL C 122	N. Vick		To To	HONE NUMBER	2:437-7546
Based on the results of the compliance with DEP Ru Based on the results of the discrepancies were noted: COMPLIANCE REQUI	le 62-213.300, Florida A e compliance requiremen	Administra nts evalua	tive Code (F	.A.C.).	
	·			ENTERED EC 2 2 1998	
COMMENTS: Facility Lender & Fellow	sot perating epair up enspe	Ine A.	topino Carls	199.	(IZMI-VASM
The Annual Compliance Certificat	ion form has been prope				r. YES NOD
DATE OF NEXT INSPECTION INSPECTION CONDUCTED B	Curalas N	or m	oroximate)		
INSPECTOR'S SIGNATURE:	Shah M	Ton		PHONE NUMBER	1:595836V

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INSPECTION: ANNUAL	ON D
AIRS 10 230 229 DATE: 12 15 FACILITY NAME: 2915 WAYY	198 TIME IN: TIME OUT: BWD/VICK's Clearn ens
FACILITY LOCATION:	VICIT, PHONE: 43>-7546
	PHONE: 43>-7546 PHONE:
PART I: NOTIFICATION	
(check appropriate box) 1. New facility notified DARM 30 days prior to state 2. Facility failed to notify DARM to use general per	I have sharman warms and a
PART II: CLASSIFICATION Facility indicated on notification form that it is: (check appropriate box)	Reprins (Morusey ☐ No notification form ☐ Drop store/out of business/petroleum
1. Existing small area source dry-to-dry only, x < 140 gal/yr ENTERED transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	2. New small area source
3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$)	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)
5. This is a correct facility classification	□Y □N □Can not determine
	neral permit as number above nits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) per facility was gallons.	urchased within the preceding 12 months by this dry cleaning

PART III: GENERAL CONTROL REQUIREMENTS				
Is the responsible official of the dry cleaning facility: (check appropriate boxes)				
1. Storing perchloroethylene in tightly scaled and impervious containers?	DY DN DN/A			
2. Examining the containers for leakage?	OY ON ON/A			
3. Closing and securing machine doors except during loading/unloading?	אם אם			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY DN DN/A			
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY ON ON/A			
PART IV: PROCESS VENT CONTROLS				
In Part II-A:				
If classification 1 has been checked, no controls are required. Proceed to Part V	v.			
If classification 2 has been checked, the machine should be equipped with a refr (complete A below).	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 refu (complete A and B below).	rigerated condenser			
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?	OY ON			
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	DY DN DN/A			
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON ON/A			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY ON			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON ON/A			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON			

В.	Has the responsible official of an existing large or new large area source also:			
ı	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?	ΩY	ПΝ	
	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ΩΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ПY	ПИ	□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?	ΩY	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ÐΥ	ПN	□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?	ΟY	ΩΝ	□n/a
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ΟN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПИ	□N/A

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? DY DN 2. Maintained rolling monthly averages of perc consumption? UA UN 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; DY DN DN/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? DY DN DN/A 4. Maintained calibration data? (for applicable direct reading instruments) DY DN DN/A 5. Maintained exhaust duct monitoring data on perc concentrations? DY DN DN/A OY ON 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? DY DN DN/A Problem corrected? OY ON ON/A 8. Maintained compliance plan, if applicable? OY ON ON/A

P	PART VI: LEAR DETECTION AND REPAIRS					
1.	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	,		DY DN		
3.	Does the responsible official check the	following areas for lea				
	Hose connections, fittings, couplings, and valves	OY ON ON/A	Muck cookers	□Y □N □N/A		
	Door gaskets and seating	□Y □N □N/A	Stills	□Y □N □N/A		
	Filter gaskets and seating	□Y □N □N/A	Exhaust dampers	□Y □N □N/A		
	Pumps	□Y □N □N/A	Diverter valves	□Y □N □N/A		
	Solvent tanks and containers	OY ON ON/A	Cartridge filter housings	□Y □N □N/A		
	Water separators	□Y □N □N/A				
4.	Which method of detection is used by	the responsible official?	?			
	Visual examination (condensed	solvent on exterior surfa	aces)			
	Physical detection (airflow felt t	hrough gaskets)				
	Odor (noticeable perc odor)	\				
If using direct-reading instrumentation, is the equipment:				□N/A		
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?				DY DN		
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
	c. Inspected for leaks a	nd obvious signs of wea	nr on a weekly basis?	OY ON		
	d. Kept in a clean and	secure area when not in	use?	OY ON		
	e. Verified for accurac	y by use of duplicate sar	nples (calorimetric only)?	□Y □N		
_						
	Inspector's Name (Please Pr	int)	Date of Inspe	ction		
-	Inspector's Signature		Approximate Date of	Next Inspection		

Do Follow-up imp abber repairs are done...

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	PLAINT/DISCOVERY RE-INSPECTION			
TIME IN: 1/15 TIME OUT: 1205 TYPE OF FACILITY: D C FACILITY NAME: Gar In Coin Jamedy FACILITY LOCATION: 8/87 Fairfield	AIRS ID#: 0330 259 199 + Ore Cleaning DATE: 6/16/9749 Dr. Unit I			
RESPONSIBLE OFFICIAL: Roger Maginius	PHONE NUMBER: 456-2132			
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra				
Based on the results of the compliance requirements evaluadiscrepancies were noted:	ted during this inspection, the following compliance			
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED			
ENTERED Jun 1 8 1999				
COMMENTS GOOD Records				
The Annual Compliance Certification form has been properly certification. **Page 1.1.** The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification form has been properly certification. The Annual Compliance Certification for the Annual Certification for	ed and submitted to the inspector.			
(Ap	proximate) Complete & Mail			
INSPECTION CONDUCTED BY	Toman			
INSPECTOR'S SIGNATURE: CITA 21 of No. (Please Print) PHONE NUMBER: 595-8364 X1227				

Page___of___.

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL



RE-INSPECTION

Y CLEANERS

WIT

HECKLIST

COMPLAINT/DISCOVERS/ AIR 1999

	*Urc _{gr}	Oring
AIRS ID#:0330239 DATE: 6/16/9	79 TIME IN: TIME OUT: 12	05
FACILITY NAME Garden Coin Law		
FACILITY LOCATION: 8/87 W. Fa		· .
Bensarala	FL 32506	·. '
RESPONSIBLE OFFICIAL ROGET MC	Gennis PHONE: 456-2132	
CONTACT NAME: SAME	PHONE:	
PART I: NOTIFICATION		
(check appropriate box)		
1. New facility notified DARM 30 days prior to start	up \square	,
2. Facility failed to notify DARM to use general pern	nit ENTERED -	,
	JUN 1 8 1999	
PART II: CLASSIFICATION		
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form ☐ Drop store/out of business/petroleu	ım
dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr	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)	
dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)	
5. This is a correct facility classification	□N □Can not determine	
1	eral permit as number above its and is not eligible for a general permit	ning

Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? מם עם 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: K 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) DY DN 1. Equipped all machines with the appropriate vent controls? □Y □N □N/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated DY DN condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN DN/A condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after DY DN

PART III: GENERAL CONTROL REQUIREMENTS

verifying that the coolant had been completely charged?

В.	Has the responsible official of an existing large or new large area source also.	NA
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser l	ocated
	on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	OY ON
2	Measured and recorded the washer exhaust temperature at the condenser	
.	inlet and outlet weekly?	QY QN QN/A
	Is the temperature differential equal to or greater than 20° F?	DY DN DN/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?	OY ON ON/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?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	DAY ON
2. Maintained rolling monthly total of perc consumption?	MD A CO
3. Maintained leak detection inspection and repair reports for the following:	_
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON ON/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? 	STY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN DN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DN/A
6. Maintained startup/shutdown/malfunction plan?	BLY DN.
7. Maintained deviation reports?	OY ON DINA
Problem corrected?	באמש מם צם
8. Maintained compliance plan, if applicable?	אמע אם אם ארש.

PAR	T VI: LEAK DETECTION AND	REPAIRS			
l. D	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
in	spection?			MD AIR	
2. H	as the facility maintained a leak log	?		Ø1Y □N	
3. D	oes the responsible official check th	ne following areas for leak	s? `		
	Hose connections, fittings, couplings, and valves	BY ON ON/A	Muck cookers	ם או מו אם או	
	Door gaskets and seating	DY ON ON/A	Stills	BY ON ON/A	
	Filter gaskets and seating	BY ON ON/A	Exhaust dampers	אומב אם צם	
	Pumps	BY ON ON/A	Diverter valves	אומם אם אם	
	Solvent tanks and containers	BY ON ON/A	Cartridge filter housings	AND NO YES	
	Water separators	ENY ON ON/A			
4. W	Thich method of detection is used by	the responsible official?			
Visual examination (condensed solvent on exterior surfaces)				B	
Physical detection (airflow felt through gaskets)				Ø	
	Odor (noticeable perc odor)		•	ā	
	Use of direct-reading instrumer	tation (FID/PID/calorime	tric tubes)		
	Halogen leak detector				
	If using direct-reading ins	trumentation, is the equi	pment:	N/A	
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?				
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?				
c. Inspected for leaks and obvious signs of wear on a weekly basis?			DY DN		
	d. Kept in a clean and secure area when not in use?			OY ON	
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?			OY ON	
				٠	

(harles m Nermon	6/16/99
Inspector's Name (Please Print)	Date of Inspection
Charles Millormour	8-12 mos,
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMA	ATION:	-
		
•	• :	•
		•
•		
•		
	·	

TIT V AIR QUALITY GENERAL PER IT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	annual 💢	COMP	PLAINT/DISCOVERY	RE-INSPECTION	
TIME IN: 1120	TIME OUT:	1205	AIRS ID#: O	330229	
TYPE OF FACILITY: DC					
FACILITY NAME: VICIL		7		DATE: 3/23/99	
FACILITY LOCATION:	415 NAVY BI	1 v N	•—		
RESPONSIBLE OFFICIAL:	,	<u>3 A30</u>	PHONE NUMBER:	437-7576	
Based on the results of	the compliance requireme	ents evaluate	ed during this inspection, the facil	ity is found to be in	
compliance with DEP F	Rule 62-213.300, Florida A	Administrat	ive Code (F.A.C.).		
Based on the results of discrepancies were note		ents evaluate	ed during this inspection, the follo	wing compliance	
COMPLIANCE REQU	UIREMENT/PROBI	LEM	FOLLOW-UP ACTION	ON REQUIRED	
·				D .	
			DEC BUTEAU S		
			of Air Monitoring		
_			oring	MAR 2 6 1999	
·.				·	
THE machine broken doesnat plan to bit it. Plansk replace with more modern one.					
The Annual Compliance Certification form has been properly certified and submitted to the inspector.					
DATE OF NEXT INSPECTION: Mid Zero					
NSPECTION CONDUCTED BY: HAVISING (Approximate) (Please Print)					
NSPECTOR'S SIGNATURE: Muly Home NUMBER: 595-8361					

Revised 10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

MAR 26 1999

			<u> </u>	
FACILITY NAME: VICKS Clear	ver, INC.	#7	DAT	E: 3/23/99
FACILITY LOCATION: $29/5^{\circ}$	LANY Blvd.			
FACILITY LOCATION: 29/5 N	11, FL 32	505	EN	TERED
			MAR	26 1999
Annual Reporting Period: 12/	11/96	19 то 2		19
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F.		•	<u> </u>	DEP Rule
If NO, complete the following:				
#1. Term or condition of the general permit	that has not been in cor	itinuous compliance	during the reporting pe	riod stated above:
Exact period of non-compliance: from		to		
Action(s) taken to achieve compliance:		_	_	
Method used to demonstrate compliance:				
#2. Term or condition of the general permit	that has not been in cor	ntinuous compliance	during the reporting pe	riod 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, made in this notification are true, accurate upon rolling averages of purchase receipts, year for transfer or combination facilities. RESPONSIBLE OFFICIAL: 727	and complete. Further,	my annual consump	otion of perchloroethyler	ne solvent, based
· · · · · · · · · · · · · · · · · · ·				

^{*}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.

Plant 5 hm & Lower 10/27/98 5 for 4 cy 2/1/99.

PEL HLOROETHYLENE DRY C' 'ANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY
FACILITY NAME: VICK FACILITY LOCATION: 2 RESPONSIBLE OFFICIAL:	915 Cleanus, 915 Nove anniver FC	TIME IN: 1120 TIME OUT: 1305 #7 Block 32505 CK PHONE: 437-75-46 PHONE:
(check appropriate box) 1. New facility notified DARM 2. Facility failed to notify DAR	•	ENTERED
Facility indicated on notificati (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gal/transfer only, x < 200 gal/yr both types, x < 140 gal/yr	on form that it is: ce \(\sigma \) 2. yr dry train bot	☐ No notification form ☐ Drop store/out of business/petroleum New small area source y-to-dry only, x < 140 gal/yr unsfer only, x < 200 gal/yr th types, x < 140 gal/yr
 (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 ≤ x ≤ 2, transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 (constructed before 12/9/91) 5. This is a correct facility of the structure of the stru	ce ☐ 4. 100 gal/yr dry 10 gal/yr tra: gal/yr bot	New large area source y-to-dry only, $140 \le x \le 2,100$ gal/yr unsfer only, $200 \le x \le 1,800$ gal/yr th types, $140 \le x \le 1,800$ gal/yr onstructed on or after $12/9/91$)
☐ facili☐ facili	appropriate classification ty qualified for a general ty exceeds above limits a	

machine 1/3-math to be 161, cf

"#2"

#3 Jan-Oct 100. 4 1055

Shut Lewr 585.8

Smithet

124

Revised 8/11/97

Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN DN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? A/NE NO YO 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? MO AB 4. Draining cartridge filters in their housing or in sealed containers for at BY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? 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? MO YO 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? AVAD ND YO 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY DN DN/A condenser upon opening the door? . 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? NO YO 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? AVAD ND YB 6. Conducted all temperature monitoring after an appropriate cooldown period and after NO YO verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

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

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) MD AQ 1. Maintained receipts for perc purchased? NO YO 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: A/ND ND YE a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days A'NO NO YÉ and parts installed w/in 5 days of receipt? AVV**A** NO YE 4. Maintained calibration data? (for applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations? AVÁQ NO YO NO YE 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? DY DN DYNA Problem corrected? DY DN ØN/A A/NÆ NO YO 8. Maintained compliance plan, if applicable?

				·
P/	ART VI: LEAK DETECTION AND I	REPAIRS		
l.	Does the responsible official conduct a	weekly (for small source	es, bi-weekly) leak detection	and repair
	inspection?			NO YO
2.	Has the facility maintained a leak log?			DY DN
3.	Does the responsible official check the	following areas for leak	s?	-
	Hose connections, fittings, couplings, and valves	A/אם אם עם	Muck cookers	AY ON ON/A
	Door gaskets and seating	אואם אם צם	Stills	אואם אם אם
	Filter gaskets and seating	DY DN DN/A	Exhaust dampers	DY DN DN/A
	Pumps	DY DN DN/A	Diverter valves	A/NO NO YE
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housing	gs OY ON ON/A
	Water separators	אואם אם אם	,	
4.	Which method of detection is used by t	he responsible official?		_
	Visual examination (condensed s	olvent on exterior surfac	ces)	/ B .
	Physical detection (airflow felt th	rough gaskets)		Z Z
	Odor (noticeable perc odor)	\		ä
i	Use of direct-reading instrumenta	ation (FID/PID/calorime	tric tubes)	
١,	Halogen leak detector			
	If using direct-reading instr	umentation, is the equ	ipment:	□N/A
	a. Capable of detecting	perc vapor concentration	ns in a range of 0-500 ppm?	DY DN
	b. Calibrated against a s	standard gas prior to and	d after each use	

Charles Norman	3/23/99
Inspector's Name (Please Print)	Date of Inspection
Gent Home	mid-Joor
Inspector's Signature	Approximate Date of Next Inspection

c. Inspected for leaks and obvious signs of wear on a weekly basis?

e. Verified for accuracy by use of duplicate samples (calorimetric only)?

d. Kept in a clean and secure area when not in use?

(PID/FID only)?

DY DN

OY ON

NO YO

 \square \square \square

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL X COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 0915 TIME OUT: 0945	AIRS ID#: 0330229
TYPE OF FACILITY: DC	<u> </u>
FACILITY NAME: VICK'S CIENNEDS #	DATE: $\frac{4}{19} \sqrt{60}$
FACILITY LOCATION: 29 15 NAV., BIV d	· · · · · · · · · · · · · · · · · · ·
- Janarah	1175 071/
RESPONSIBLE OFFICIAL: Gray N. VIC	PHONE NUMBER: 437-7546
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evaluate discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	•
	8
	APR & Mot
,	2009 2009 r Monitorii Sources
	orin
APR 2 0 2000	
COMMENTS:	
	,
The Annual Compliance Certification form has been properly certified	ed and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	
(App	proximate)
INSPECTION CONDUCTED BY: Charles Norm	ase Print)
INSPECTOR'S SIGNATURE: Junta Hour	PHONE NUMBER: 595-8364
Page_/	of /. Revised 10/96

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL X COM	PLAINT/DISCOVERY	RE-INSPECTION
TIME IN: CT 15 TYPE OF FACILITY: D	TIME OUT: 7/1/5	AIRS ID#:	30227
FACILITY NAME:	CKIS CIONNERS #17	7	DATE: 4/19/00
FACILITY LOCATION: 5	1915 NAV. Blvd	•	BATE.
7	commenter		
RESPONSIBLE OFFICIAL:_	Grand. Vick	PHONE NUMBER:	437-7546
	of the compliance requirements evaluate Rule 62-213.300, Florida Administra	•	ity is found to be in
Based on the results of discrepancies were no	of the compliance requirements evaluat oted:	ted during this inspection, the follo	wing compliance
COMPLIANCE REC	QUIREMENT/PROBLEM	FOLLOW-UP ACTIO	ON REQUIRED
7			
\$. 		• • • • • • • • • • • • • • • • • • •	ž:
COMMENTS:			
The Annual Compliance Certi	fication form has been properly certifie	ed and submitted to the inspector.	YES NO
DATE OF NEXT INSPECT.		proximate)	.
INSPECTION CONDUCTE	DBY: Charles Norm	n iU	
INSPECTOR'S SIGNATUR	(1) 1-21	ase Print)PHONE NUMBER:_	595-836U ×1222
	Page /	_of/	Revised 10/96

0355153

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

RECEIVED TAIL ROOM DEC 23 98

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

VICK'S CLEANERS #7 GRAY N VICK 2915 NAVY BLVD PENSACOLA FL 32505 AIRS ID # 0330229

FOR GOVERNMEN PUSE ONLY Org.: 37550101000 PO: 61 Fund: 20-2-035001 Obj.: 002273

ALL CA THOM

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# 0330229

VICK'S CLEANERS GRAY N VICK 2915 NAVY BLVD PENSACOLA FL 32505 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

300 632

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#0330229

VICK'S CLEANERS INC GRAY N VICK 2915 NAVY BLVD PENSACOLA FL 32505

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

COMPLAINT/DISCOVERY

ANNUAL

RE-INSPECTION	N D	
AIRS ID#: 0330229 DATE: 4/19/0	70 TIME IN: 0915 TIME OUT:	3954
FACILITY NAME: Vick's Clean	ers #7	
FACILITY LOCATION: 2915 NAV	, B/v d	
Pensacola	32505	· .
RESPONSIBLE OFFICIAL: GLA-1 N. L	PHONE:	<u> </u>
CONTACT NAME:	PHONE:	
PART I: NOTIFICATION		
(check appropriate box)	ENTERED	
1. New facility notified DARM 30 days prior to sta	APR 2 0 2000	
2. Facility failed to notify DARM to use general pe		
<u> </u>	· · · · · · · · · · · · · · · · · · ·	
PART II: CLASSIFICATION		
Facility indicated on notification form that it is:	☐ No notification form ☐	70
	☐ Drop store/out of business/p	etroleum 📆
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source	☐ Drop store/out of business/p	etroleum M
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr	etroleum FT
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr	etroleum C C C C
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr	etroleum FT
Facility indicated on notification form that it is: (check appropriate box) 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	Drop store/out of business/p. 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) 4. New large area source	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr	Drop store/out of business/p. 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr	Drop store/out of business/p. 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 $12/9/91$) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr	Drop store/out of business/p. 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) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr	Drop store/out of business/p $x > 2$. 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 $12/9/91$) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr (constructed before 12/9/91)	Drop store/out of business/p $^{\circ}$ au $^{\circ}$ $^{\circ}$ $^{\circ}$ au $^{\circ}$	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a get	Drop store/out of business/p. 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 $12/9/91$) 4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$) AY $\square N$ \square Can not determine cation: eneral permit as number $_$ above	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a get	Drop store/out of business/p $\stackrel{\text{Ro}}{\text{pos}}$ and $\stackrel{\text{Ro}}{\text{pos}}$	etroleum E C E I V
Facility indicated on notification form that it is: (check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a get	Drop store/out of business/p. 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) 4. New large area source dry-to-dry only, 140 \(\text{ \leq x} \leq 2,100 \) gal/yr transfer only, 200 \(\text{ \leq x} \leq 1,800 \) gal/yr both types, 140 \(\text{ \leq x} \leq 1,800 \) gal/yr (constructed on or after 12/9/91) Y \(\text{DN}\) \(\text{DCan not determine}\) cation: eneral permit as number \(\text{ above}\) mits and is not eligible for a general permit	ECEIVED

#1:195

TYPE OF INSPECTION:

Revised 9/15/97

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN DN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY ON DINA 2. Examining the containers for leakage? NO YO 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DN/A beds according to the manufacturer's specifications? 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) DY DN 1. Equipped all machines with the appropriate vent controls? DY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the A/NO NO YE condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated NO YO condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN DN/A condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after MD AB verifying that the coolant had been completely charged?

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?	YBY	ΠN
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	□N ĎN/Ä
	Is the temperature differential equal to or greater than 20° F?	\Box Y	DN DN/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?	\Box Y	ON DN/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	A/NØ NO
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?	ΠY	ON ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ON ON/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	אומ אם

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official: (check appropriate boxes)					
1. Maintained receipts for perc purchased?	Y⊒Y □N				
2. Maintained rolling monthly total of perc consumption?	אם עפ				
3. Maintained leak detection inspection and repair reports for the following:	•				
a. documentation of leaks repaired w/in 24 hrs? or;	A/AØ NO YO				
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ם ארם אם אם ארם ארם				
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON ØN/A				
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON DIN/A				
6. Maintained startup/shutdown/malfunction plan?	אם עם				
7. Maintained deviation reports?	. OY ON ON/A				
Problem corrected?	OY ON DN/A				
8. Maintained compliance plan, if applicable?	A/אום אם אם אם				

P	PART VI: LEAK DETECTION AND REPAIRS				
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?		_	MO AB	
2.	Has the facility maintained a leak log?	?		MO AB	
3.	Does the responsible official check the	e following areas for leak	s? .		
	Hose connections, fittings, couplings, and valves	√QY □N □N/A	Muck cookers	OY ON DN/A	
	Door gaskets and seating	DY ON ON/A	Stills	DY ON ON/A	
	Filter gaskets and seating	¬QY □N □N/A	Exhaust dampers	DN BIN/A	
	Pumps	DY ON ON/A	Diverter valves	A/אם אם צפ <i>י</i>	
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	MY ON ON/A	
	Water separators	DY ON ON/A			
4.	Which method of detection is used by	the responsible official?			
	Visual examination (condensed	solvent on exterior surfac	es)	9	
	Physical detection (airflow felt t	hrough gaskets)	•	ا ت	
	Odor (noticeable perc odor)			9	
	Use of direct-reading instrumen	tation (FID/PID/calorimet	tric tubes)		
	Halogen leak detector				
	If using direct-reading inst	rumentation, is the equi	pment:	SIN/A	
	a. Capable of detecting	g perc vapor concentration	ns in a range of 0-500 ppm?	אם עם	
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use	אם י עם	
	c. Inspected for leaks a	and obvious signs of wear	on a weekly basis?	מם עם	
	d. Kept in a clean and	secure area when not in u	se?	OY ON	
	e. Verified for accurac	y by use of duplicate sam	ples (calorimetric only)?	DY DN	
_	mspector's Name (Please Pr	int)	Date of Inspection		
_	Inspector's Signature		Approximate Date of	Next Inspection	

ADDITIONAL SITE INFORMATION:	· · · · · · · · · · · · · · · · · · ·			
·				
		•	••	
			•	
		•		
		•		
·				
			,	

AIRS ID#: 0330229

Acc

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: VICK'S Cleaners #7	DATE: 1900
FACILITY LOCATION: 2915 NAVY Blud Pensacola 32505	
Annual Reporting Period: 3-24 19 99 TO 4	-19 <u>19200</u> p
Based on each term or condition of the Title V general air permit, my facility has remained in 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement	<u> </u>
If NO, complete the following:	•
#1. Term or condition of the general permit that has not been in continuous compliance dur	ing the reporting period stated above:
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
#2. Term or condition of the general permit that has not been in continuous compliance dur	ing the reporting period stated above:
Exact period of non-compliance: from ENTERED to	
Action(s) taken to achieve compliance: APR 2 0 2000	
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and belief formed after re made in this notification are true, accurate and complete. Further, my annual consumption upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-year for transfer or combination facilities. RESPONSIBLE OFFICIAL: CRAY N. VICK Name (Please Print)	of perchloroethylene solvent, based
	nature 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.

AIRS ID#: 0330 229

Revised 01/18/00

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: VICK'S CLEANERS, INC #7 DATE: 144/0)
FACILITY LOCATION: 2945 NAVY Blvd.
Sensacola FL 32505
Annual Reporting Period: 1/1/0 20 TO 12/4/0/ 20_
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.
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:
Exact period of non-compliance: from
Action(s) taken to achieve compliance: DEC U 5 2001
Method used to demonstrate compliance:
#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
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 more in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon 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: CRAY N. VICK Signature Date 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.

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; Mobile Street

Do NOT Remove Label

AIRS ID # 0330229

VICK'S CLEANERS #7 **GRAY N VICK** 2915 NAVY BLVD PENSACOLA FL 32505

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

Obj.: 002273

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

1-31-0188

Do NOT Remove Label

AIRS ID # 0330229

VICK'S CLEANERS #7 GRAY N VICK 2915 NAVY BLVD PENSACOLA FL 32505

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1 Fund: 20-2-035001

Obj.: 002273

	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)			
5470	OFF	ICIAL	USE	
7367	Postage Certified Fee	\$	Postmark	
9000	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (E'		Here	
7000 1670	GRAY N VICK S VICK'S CLEANI 2915 NAVY BLV PENSACOLA FL	/D	001AG	

4. A. F.

** . ' ' ' ' ' ' ' ' ' ' '

· ·