

# Department of **Environmental Protection**

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

Virginia B. Wetherell Secretary

January 16, 1997

Mr. Neil Whigham Exclusive Cleaners 3900 North 9th Avenue Pensacola, Florida 32503

Re: Facility I.D. No. 0330235

Dear Mr. Whigham:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on October 6, 1996.

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

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

Title V General Permits Office Bureau of Air Monitoring and Mobile Sources, MS 5510 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, Florida 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/jw

cc: Mr. Charles Norman, Northwest District

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

## Perchloroethylene Dry Cleaning Facility Notification

#### Facility Name and Location

Facility Owner/Company Name (Name of corporation, agency, or individual	al owner):
EXCLUSIVE CLEANERS  2. Site Name (For example, plant name or number):  (A.R.	NASH + H. G. Whigham
2. Site Name (For example, plant name or number):	
EXCLUSIVE CLEANERS  3. Hazardous Waste Generator Identification Number:	
3. Hazardous Waste Generator Identification Number:	
GAD 981269095 FLD CESQ ( 4. Facility Location: 3900 N. 9TH AVE.	<u></u>
4. Facility Location: 3900 N. 9TH AVE.	
Street Address: (SAME) City: PENSACOM, FL County: ESCAMBIA	Zip Code: 32503
5. Facility Identification Number (DEP Use):	35.005
5. Tachny identification remove (DEF OSC).	1321122
Responsible Official	•
Name and Title of Responsible Official:	
7. Responsible Official Mailing Address: 3900 N. 9TH AVE.	
Organization/Firm: EXCLUSIVE CLEANERS & LAC Street Address: 3900 N. 970 AVE.	INDRY
Street Address: 3900 N. 9TN AVE.  City: PENSACOIN, FL. County: ESCAMBIA	Zip Code: 32803
,	
8. Responsible Official Telephone Number: Telephone: (904) 438-899.5 Fax: ( )	- A)/.
100phone. (4pq ) 438 8773	TA
Facility Contact (If different from Responsible Of	ficial)
9. Name and Title of Facility Contact (For example, plant manager):	
10. Facility Contact Address:	
Street Address:	
City: County:	Zip Code:
11. Facility Contact Telephone Number:	
Telephone: ( ) - Fax: ( )	-
	RECEIVED

OCT 4 1995

Bureau of Air Monitoring & Mobile Sources

# #0330235

· .	Exclusive Cleaners
	spoke to business -11/1/96
. ,	
D./3	1. add-Whigham & Nash, Inc. 6. add title-Manager
,	4. add title - Manager
, ,	<i>y</i>
D.14	1.(b) mark out "X", 1.(a)
	Shows Control devices
-	installed, and initial  3. Should be existing large
	3. Should be existing large
•	area Source
,	
ł	
	·

### 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	١.,	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-92
Dry-to-Dry Unit									
(1) w/ ref. condenser		SEPT. 84	OCT-84	T				Į_	
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser						_			
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit							_		
(7) w/ ref. condenser		2			T				
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser		Sept-84	QT-84	Т					
(11) w/carbon adsorber							1		
(12) w/ no controls									
Control devices are  (c) No control devices  2.(a) What was the total (425)	are r	equired to be	e installed [			in the latest 1	2 mo	nths?	
(b) If less than 12 mon Check why it is les	ths, h s thai	now many? [	] month New owner	s : [	] New stor	e: [] Dio	d not	keep records	. []
What is the facility's so (Indicate with an "X".					finitions four	nd in section	(3) of	f Part 11?	
Existing small a	rea so	ource [X]	N	lew s	mall area sou	ırce [	_]		
Existing large ar	ea so	ource []	N	lew l	arge area sou	irce [	_]		

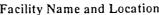
<ol> <li>What control technology is required on machines (Indicate with an "X".)</li> </ol>	pursuant to section (5) of Part II of this notification form?
Existing large area source  Carbon adsorber []	Refrigerated condenser [X]
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
	units shall not be eligible to use the general permit pursuant d hot water generating units on-site meet the following:
	have a total heat input of 10 million BTU/hr or less (298 natural gas except for periods of natural gas curtailment e than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
Fauinment Monitoring	and Recordkeeping Information
	in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	[ ~]
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration mo	nitoring [ MA]
(e) Instrument calibration	[ <u>"/A</u> ]
(f) Start-up, shutdown, malfunction plan	

### 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)
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notif statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.
I will pro	omptly notify the Department of any changes to the information contained in this notification.
<u>Nei</u> Signatur	Whyhu 9/24/96 Date

COLLECTED 12.9.96

## Perchloroethylene Dry Cleaning Facility Notification



Facility Name and Location	Jana C
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	-
EXCLUSIVE CLEANERS INC. (A.R. NASH & 2. Site Name (For example, plant name or number): (NO) (HAIS)	N. G. Whighav
3. Hazardous Waste Generator Identification Number:	<u> </u>
GAD 481269095  4. Facility Location: 3900 N. 9TH AVE.  Street Address: (SAME) City: PENSACOM, FL. County: ESCAMBIA Zip Code: 3.	2503
5. Facility Identification Number (DEP Use): $0.3306$	235
Responsible Official	
6. Name and Title of Responsible Official:	
NEIL WHIGHAM MANAGER  7. Responsible Official Mailing Address: 3900 N. 9TH AVE. Organization/Firm: EXCLUSIVE CLEANERS & LAUNDRY Street Address: 3900 N. 9TH AVE. City: PENSACOIN, FL County: ESCANIBLA Zip Cod	le: 32503
8. Responsible Official Telephone Number: Telephone: (904) 438-8995 Fax: ( ) - NA	
Facility Contact (If different from Responsible Official)	
9. Name and Title of Facility Contact (For example, plant manager):	
10. Facility Contact Address:	
Street Address: City: County: Zip Code:	
11. Facility Contact Telephone Number:  Telephone: ( ) - Fax: ( ) -	
R F (	VI

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.

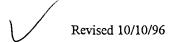
		Date .	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased · ·	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit									
(1) w/ ref. condenser		SEPT-84	OCT-84						
(2) w/ carbon adsorber									
(3) w/ no controls				مــــــــــــــــــــــــــــــــــــــ			<u> </u>		
Washer Unit					• •				
(4) w/ ref. condenser				13.11	112 Filge				
(5) w/ carbon adsorber					,,,,,				
(6) w/ no controls	<u> </u>			1		1			
Dryer Unit			_					,	<del></del>
(7) w/ ref. condenser				Na	12/9/16				
(8) w/ carbon adsorber			<u> </u>	<b>***</b>	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
(9) w/ no controls	1			<b>—</b>			1	<del>-</del>	
Reclaimer Unit	<u> </u>			-					
(10) w/ ref. condenser				(4)1)	ints fir		Ι		_
(11) w/carbon adsorber	<b>—</b>		-	100	17 1116	<u> </u>	<u> </u>		
(12) w/ no controls	<del></del>		·	<del> </del>			<del> </del>		
(b) Control devices are (c) No control devices  2.(a) What was the total	are r	required to be	e installed [		_	in the latest 1	2 mo	nths?	
1.55	50	0113 (11 37 )							
(b) If less than 12 mon Check why it is les					_] New stor	e: [] Did	not	keep records	: []
3. What is the facility's so (Indicate with an "X".	ource Sele	classificatio ct one classif	n based on the	ne def	initions four	nd in section (	(3) of	f Part 11?	
Existing small a	rea s	ource [		lew si	mall area sou	irce [	]		
Existing large an	ea so	ource [X]	Dalakie 1	lew la	arge area sou	rce [	_]		

4. What control technology is required on machines pursuant to section (5) (Indicate with an "X".)	of Part II of this notification form?
Existing large area source  Carbon adsorber  []  Refrigerated condens	ser [X]
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall not be eligible to Rule 62-213.300, F.A.C. Verify that all steam and het water generating exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total heat input boiler HP or less), and (2) are fired exclusively by natural gas except for p during which propane or fuel oil containing no more than one percent sulf	periods of natural gas curtailment
All steam and hot water generating units exempt  No such units on-site	•
•	
Equipment Monitoring and Recordkeeping In	nformation
Check all logs which are required to be kept on-site in accordance with the	e requirements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	[ <del>^</del> / <u>A</u> ]
(e) Instrument calibration	[ N/A]
(f) Start-up, shutdown, malfunction plan	

#### Surrender of Existing Air Permit(s)

Please indicate	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)	
[X] <sup>*</sup>	No air permits currently exist for the operation of the facility indicated in this notification form.	
	Responsible Official Certification	
this notifi statement maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in facilion. 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.	
l will pro	mptly notify the Department of any changes to the information contained in this notification.	•
<u>New</u> Signature	Wheyhan Phil Wheyham 9/24/96 Date	

AIRS ID#: <u>033023</u>5



# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: EXCLUSIOE CLEANERS DATE: 1/23/57
FACILITY LOCATION: 3900 N. 9th AUE.
PENSACOLA, FL 32503
Annual Reporting Period: Oct 4, 1996 TO TAN 28 1997
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.   YES
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 Gct 4, 1996 to Jun 1, 1997
Exact period of non-compliance: from Gct 4, 1996 to Jon 1, 1997  Action(s) taken to achieve compliance: Set up Log System Records.
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 made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of 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:  Name (Please Print)  Name (Please Print)  Name (Please Print)  Name (Please Print)

<sup>\*</sup>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.

· State adjective.

AIRS ID#: 0 330235

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

		<i>P</i>
FACILITY NAME: 51 Clusive	CLOANERS	DATE! 2/21/98
FACILITY LOCATION: 3900 N	, 9m Ave.	E T
Rensocular, FL	32507	30 20 1
Annual Reporting Period:	JAN/98 1998 TO	19 91 19 19 19 19 19 19 19 19 19 19 19 1
Based on each term or condition of the Title V	general air permit, my facility has rema	- · · · · · · · · · · · · · · · · · · ·
62-213.300, Florida Administrative Code (F.A	A.C.), during the period covered by this s	tatement. TYES TNO
If NO, complete the following:		
#1. Term or condition of the general permit the	hat has not been in continuous compliance	ce during the reporting period stated above:
Exact period of non-compliance: from	JAN /98	10 DEC 198
Action(s) taken to achieve compliance:	Cala la mill be	funished for better
_	A A A A	
Method used to demonstrate compliance:	Records of Galling :	tolug.
#2. Term or condition of the general permit the	hat has not been in continuous compliand	ce during the reporting period stated above:
Exact period of non-compliance: from	<b>ENTERED</b> to	<u> </u>
Action(s) taken to achieve compliance:	DEC 2 2 1998	
Method used to demonstrate compliance:	(%)	
As the responsible official, I hereby certify, be made in this notification are true, accurate an	nd complete. Further, my annual consun	nption of perchloroethylene solvent, based
upon rolling averages of purchase receipts, de year for transfer or combination facilities.	oes not exceed 2,100 gallons per year fo	r dry-to dry facilities or 1,800 gallons per Å
RESPONSIBLE OFFICIAL:	who has some	A Call A miles
Name	e (Please Print)	Signature Date

<sup>\*</sup>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.

#### DRY CLEANER AIR QUALIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0330235

EXCLUSIVE CLEANERS NEIL WHIGHAM 3900 N 9TH AVE PENSACOLA FL 32503

Do NOT Remove Label Annual Reporting Period: 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. YES  $\square$ 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: 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 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 made 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: Name (Please Print) Signature Date

<sup>\*</sup>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.

(3 visits to this site)

## PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY
1/28/97-14/20-1540 RE-INSPECTION	ON ON STREET PROPERTY.
1/17/99 1115-1200 to	11/9/96
AIRS ID#: <u>0336235</u> TIME	IN: 1425 TIME OUT: 1619
FACILITY NAME: Exclusive Cz	GANERS
FACILITY LOCATION: 3986 9 H	Ave
Lens acale	FC 32503
THE STREET STREE	
DARTI, NOTIFICATION	
PART I: NOTIFICATION	
(check appropriate box)  1. Existing facility notified DARM by 9/1/96 CO	+4 190:
2. New facility notified DARM 30 days prior to sta	·
3. Facility failed to notify DARM to use general pe	ermit
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)	
Α.	
1. Existing small area source	2. New small area source
dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr	dry-to-dry only, x<140 gal/yr transfer only, x<200 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 source	4. New large area source □
dry-to-dry only, 140 <x<2, 100="" gal="" td="" yr<=""><td>dry-to-dry only, 140<x<2, 100="" gal="" td="" yr<=""></x<2,></td></x<2,>	dry-to-dry only, 140 <x<2, 100="" gal="" td="" yr<=""></x<2,>
transfer only, 200 <x<1,800 gal="" td="" yr<=""><td>transfer only, 200<x<1,800 gal="" td="" yr<=""></x<1,800></td></x<1,800>	transfer only, 200 <x<1,800 gal="" td="" yr<=""></x<1,800>
both types, 140 <x<1,800 (constructed="" 12="" 9="" 91)<="" before="" gal="" td="" yr=""><td>both types, 140<x<1,800 gal="" yr<br="">(constructed on or after 12/9/91)</x<1,800></td></x<1,800>	both types, 140 <x<1,800 gal="" yr<br="">(constructed on or after 12/9/91)</x<1,800>
This is a correct facility classification	DY DN
If no, please check the appropriate classification:	
facility qualified for a general per facility exceeds above limits and	rmit as number above is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) p	ourchased within the preceding 12 months by this dry cleaning
facility was 705 gallons.	
5027 throughwar mices on En	I mande mia the 16 Dec
list 1/ we number of	off roude mia to ke 16 Dec ) Revised 10/14/96  Revised 10/14/96
in a pile the there of any	- NO moles were mit

# 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? 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:

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?

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 condenser upon opening the door? This machine is under the diverter valve of the outlet change for the door that with condenser to the door? This machine is under the door that with condenser on a weekly basis? The machine is the outlet exhaust stream of a refrigerated condenser on a weekly basis? The machine is the exhaust temperature of the condenser exceeded 45°F? Order that the collowing after an appropriate cooldown period and after 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?

 $\Box Y$ 

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY ON
Is the temperature differential equal to or greater than 20° F?	□Y □N
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?	DY ON DIN/A
Is the perc concentration equal to or less than 100 ppm?	□Y· □N
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	, NA
or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	OY ON
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON DN/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON WAYA

#### PART V: RECORDKEEPING REQUIREMENTS ms Cayle Edge has stinted. Der c perchees exc Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: 1415 Physically Led but No Poner world begen a documentation of leaks repaired win 24 hrs? or; form but leader to & Van mulin ey on 1-28.9 b. documentation of parts ordered to repair leak and leak repaired w/in 2 days DY DN and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for direct reading instruments only) DY DN DN/A 5. Maintained exhaust duct monitoring data on perc concentrations? UX UN W) M AE 6. Maintained startup/shutdown/malfunction plan? NON & Lorso 7. Maintained deviation reports? DY DN Problem corrected? DY ON DN/A 8. Maintained compliance plan, if applicable?

PART VI: LEAK DETECTION AND REPAIRS		
1. Does the responsible official conduct a weekly leak detection and repair inspection?	CAY CIN	
2. Which method of detection is used by the responsible official?		
Visual examination (condensed solvent on exterior surfaces)	Ġ	
Physical detection (airflow felt through gaskets)	/ 🗖	
Odor (noticeable perc odor)	\ <u>a</u>	
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)		

	. <u> </u>					_
If using di	rect-reading instru	imentation,	is the equ	ipment:		
a.	Capable of detection	ng perc vapo	or concent	rations in a range of 0-500 ppm?	$\Box$ Y	□N
b.	_	a standard į	gas prior t	o and after each use		
	(PID/FID only)?				ΠY	
C.	Inspected for leaks	and obviou	s signs of	wear on a weekly basis?	ПY	□N
d.	Kept in a clean an	d secure are	a when no	ot in use?	ΠY	□N
e.	Verified for accura	acy by use of	f duplicate	samples (calorimetric only)?	$\Box$ Y	□N
3. Has the facility i	naintained a leak lo	g?			$\Box$ Y	□N
4. The following an	reas should be check	ked for leaks	by the in	s <del>pecto</del> r:		
		Leak-I	Terested?		Leak	Detected?
	ections, fittings, s, and valves	ΘY	□N	Muck cookers	ΠY	□N (V)
Door gask	ets and seating	ΩY	ΠN	Stills	ΠY	ON NO
Filter gask	ets and seating	ΩY	ΠN	Exhaust dampers	YUY	□N
Pumps		ΔY	□N	Diverter valves	YQY	□N
Solvent tar	nks and containers	ΔY	ПN	Cartridge filter housing	y DY	□N
Water sepa	arators	SIY	□N			
making community and common or one in a sugar income graph or some	a contract of the dispersion of the post of the second of	enrete i digita di Programe na	en filmetosti, providencia	Angelieten ist stefene i tillete ogsåntet i som å det mær i stefe ett e vik i tillet	. The real comment of the	rena u entre menticio in entre un escuentre l
<b>.</b>						

Inspector's Signature

/ · 28 · 97 /2 · 9 · 9 6 Date of Inspection

Fer 98
Approximate Date of Next Inspection

or 1/17/97 - Spoke with Mr Gugle Edge & wain office (in person) She trul 12 manth fortal for yelusine clearers. Did not have I for other two sites. I explained how to to 12 month ralling talad & shawedher an example. Also left some examples of forms for Laing leah checkst teny provodings - I had previous (on 300 cassian talked with tenyoray Bordeester about getting this per records.

1.28.97

Me whighin how refingerentian

equips repaired and temps now

reach 450 For below.

We couldn't find any temp log or leak check at time of inspection an 1.28.97 - Lady in

MS DUT HARRISO N was part time bookkeepe I beatty ith antil Ms Eagle

Ms Edge finally got me the pere tental for all three dites:

Peter Pan, Inhersioned and Exclusive I had getten the table from her for Exclusive or 1/17/97 + the remaining sty on 1/24/97

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	COM	IPLAINT/DISCOVERY	RE-INSPECTION	
TIME IN: 1/25TIME OUT:		300 AIRS ID#:	330235	
TYPE OF FACILITY: Exclusive CLIZA	N508	(D.C.)		
FACILITY NAME:			DATE: 12/21/9V	
FACILITY LOCATION: 3900 N. 9 13 1	Tue.		109	
Pensacala F	L 00	730235		
RESPONSIBLE OFFICIAL: Whigh	•	PHONE NUMBER:	438-8995	
Based on the results of the compliance requirem compliance with DEP Rule 62-213.300, Florida			ty is found to be in	
Based on the results of the compliance requirem discrepancies were noted:	nents evalua	ated during this inspection, the follow	wing compliance	
COMPLIANCE REQUIREMENT/PROB		FOLLOW-UP ACTIO		
No Rolling totals of Perc Pun	chares	Use 1999 DGA D.C.	. Calendar to	
7		Keep up.		
ENTERP				
ENTERED		·		
DEC 2 2 1998				
<del></del>				
			· · · · · · · · · · · · · · · · · · ·	
COMMENTS: at times times leas.	haws	50°F - Should W <4	J°F.	
Suggest moning temp Sensor	Closer	to refrig. con den	son outlet.	
Follow-up in early 99 kg				
The Annual Compliance Certification form has been prop	perly certifi		YES NO NO	
DATE OF NEXT INSPECTION:	(Ap	proximate)	turny may.	
INSPECTION CONDUCTED BY: Chaves	1/orm	a A) ease Print)		
INSPECTOR'S SIGNATURE:	There	PHONE NUMBER:	595-8364	
		<u> </u>		

Revised 10/96

### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	<u> </u>	COMPLAINT/DISCO	OVERY	
AIRS 10#: <u>330235</u> 0	* _		n: <u>//25</u> tim	е оит:/ <u>/</u> 3	00
FACILITY NAME: <u>Exc</u>	asire C'za	FRNGAS			
FACILITY LOCATION: 3	(00 N, 9t	1 Ave			
1	enraculal		33		
RESPONSIBLE OFFICIAL:	NeiDh hige	liam	_phone: <u>850 • 9</u>	38-86	995
CONTACT NAME:	V	-	PHONE:		
PART I: NOTIFICATION		EN.	TERED	-	
(check appropriate box)		DEC	22 1998		
1. New facility notified DARM 3	0 days prior to startu	ıp (	AR .		
2. Facility failed to notify DARM	f to use general perm	nit			
PART II: CLASSIFICATION					
Facility indicated on notificatio	n form that it is:		☐ No notification for		
(check appropriate box) A.			☐ Drop store/out of b	ousiness/peu	Oleum
1. Existing small area source		2. New small a	· · · · · · · · · · · · · · · · · · ·		
dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr		dry-to-dry only, transfer only, x			.
both types, x < 140 gal/yr		both types, $x <$			
(constructed before 12/9/91)	(	(constructed on	or after 12/9/91)		
3. Existing large area sourc	e <b>X</b> 4	4. New large a	rea source		
dry-to-dry only, $140 \le x \le 2,1$	00 gal/yτ (	dry-to-dry only,	$140 \le x \le 2,100 \text{ gal/yr}$		
transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ g			$00 \le x \le 1,800 \text{ gal/yr}$		
(constructed before 12/9/91)			$\leq x \leq 1,800 \text{ gal/yr}$ or after 12/9/91)		
5. This is a correct facility cla	ssification	Уч пи	□Can not determine		:
If no, please check the a					
	<ul> <li>qualified for a gene</li> <li>exceeds above limit</li> </ul>		ımber above gible for a general perm		
B. The total quantity of perchlor	octhylene (perc) pur	chased within t	he preceding 12 months	s by this dry	cleaning
facility was 351 gallons.					
L / Vendor Su	sphed totals	· .			

#### Is the responsible official of the dry cleaning facility: (check appropriate boxes) AVE NO YO 1. Storing perchloroethylene in tightly scaled and impervious containers? DY DN BIN/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? NO YO 4. Draining cartridge filters in their housing or in sealed containers for at AVAD ND YE 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) 1. Equipped all machines with the appropriate vent controls? אם אם AYND ND YE 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 AMOD YOU 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? ND YES Suggest moning temp senson to redry cand ailled. 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? DY DN

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?	ΈlΥ	ПИ
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?		ON BINIA
	Is the temperature differential equal to or greater than 20° F?	ΠY	ON BIN/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	DN DN/A
	Is the perc concentration equal to or less than 100 ppm?	ЧY	UN UN/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?	BY	ON ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	ON QNIA
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	A/MED NO

PART V: RECORDKEEPING REQUIREMENTS	<u> </u>
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? (NOT complete though)	ng enip.
1. Maintained receipts for perc purchased? (NOT complete though)	MD AG
2. Maintained rolling monthly averages of perc consumption?	DY XN
3. Maintained leak detection inspection and repair reports for the following:	,
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON 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?	אואם אם אם
4. Maintained calibration data? (for applicable direct reading instruments)	A/NED YO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN MN/A
6. Maintained startup/shutdown/malfunction plan?	MO AM
7. Maintained deviation reports?	אועם אם אם
Problem corrected?	אועם אם אם או
8. Maintained compliance plan, if applicable?	מאמ אם צם

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?    SHAK   SHAK	P.	ART VI: LEAK DETECTION AND REPAIRS	
2. Has the facility maintained a leak log? ( )  3. Does the responsible official check the following areas for leaks?  Hose connections, fittings, couplings, and valves	1.	Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection are	nd repair
3. Does the responsible official check the following areas for leaks?  Hose connections, fittings, couplings, and valves  DY DN DN/A  Door gaskets and seating  DY DN DN/A  Filter gaskets and seating  DY DN DN/A  Filter gaskets and seating  DY DN DN/A  Exhaust dampers  DY DN DN/A  Pumps  DY DN DN/A  Solvent tanks and containers  DY DN DN/A  Water separators  DY DN DN/A  Water separators  DY DN DN/A  4. Which 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)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  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)?		inspection? (SHAK-1 records)	N NE
Hose connections, fittings, couplings, and valves  Door gaskets and seating  DY DN DN/A  Filter gaskets and seating  DY DN DN/A  Filter gaskets and seating  DY DN DN/A  Exhaust dampers  DY DN DN/A  Pumps  DY DN DN/A  Solvent tanks and containers  DY DN DN/A  Cartridge filter housings  DY DN DN/A  Water separators  DY DN DN/A  4. Which 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)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  DN/A  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  DN/A  Calibrated against a standard gas prior to and after each use (PID/FID only)?	2.	Has the facility maintained a leak log?	ABY DN
couplings, and valves  DY DN DN/A  Door gaskets and seating  DY DN DN/A  Filter gaskets and seating  DY DN DN/A  Filter gaskets and seating  DY DN DN/A  Exhaust dampers  DY DN DN/A  Pumps  DY DN DN/A  Solvent tanks and containers  DY DN DN/A  Cartridge filter housings  DY DN DN/A  Water separators  DY DN DN/A  Water separators  DY DN DN/A  4. Which 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)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  DN/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)?	3.	Does the responsible official check the following areas for leaks?	
Filter gaskets and seating			DY DN MN/A
Pumps  OY ON ON/A  Solvent tanks and containers  OY ON ON/A  Cartridge filter housings  OY ON ON/A  Water separators  OY ON ON/A  Which 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)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  DY ON  b. Calibrated against a standard gas prior to and after each use  (PID/FID only)?		Door gaskets and seating \text{\text{OY}} \text{ON} \text{\text{ON}} \text{\text{ON}} \text{\text{Stills}}	AIND NO YES
Solvent tanks and containers  Sy ON ON/A  Water separators  Y ON ON/A  4. Which 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)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  Dy ON  b. Calibrated against a standard gas prior to and after each use  (PID/FID only)?		Filter gaskets and seating	A/NO NO YES
Water separators  AY DN DN/A  4. Which 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)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  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)?		Pumps	אואק אם אם
4. Which 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)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  DN/A  b. Calibrated against a standard gas prior to and after each use  (PID/FID only)?		Solvent tanks and containers DY DN DN/A Cartridge filter housings	DY DN DN/A
Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?  DN/A  b. Calibrated against a standard gas prior to and after each use  (PID/FID only)?		Water separators BY ON ON/A	
Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  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)?	4.	Which method of detection is used by the responsible official?	
Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  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)?		Visual examination (condensed solvent on exterior surfaces)	B
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:  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)?		Physical detection (airflow felt through gaskets)	) D
Halogen leak detector  If using direct-reading instrumentation, is the equipment:  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)?		Odor (noticeable perc odor)	Ø
If using direct-reading instrumentation, is the equipment:  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)?		Use of direct-reading instrumentation (FID/PID/calorimetric tubes)	
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?   DY UN  b. Calibrated against a standard gas prior to and after each use  (PID/FID only)?   UY UN		Halogen leak detector	
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?		If using direct-reading instrumentation, is the equipment:	N/A
(PID/FID only)?		a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?	OY ON
		<b>4</b> ,	OY ON
1 c. inspected for leaks and portous signs of real off a recent pasts:		c. Inspected for leaks and obvious signs of wear on a weekly basis?	DY DŇ
d. Kept in a clean and secure area when not in use?			DY ON
e. Verified for accuracy by use of duplicate samples (calorimetric only)?	  -  -	e. Verified for accuracy by use of duplicate samples (calorimetric only)?	OY ON

CHARLES NORMAN	12/21/98
Inspector's Name (Please Print)	Date of Inspection
Cleve Momun	Jan 99
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
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# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL COMI	PLAINT/DISCOVERY	RE-INSPECTION
TIME IN: 950	TIME OUT: 10/5	AIRS ID#:	7530 Z35
TYPE OF FACILITY: DC			
FACILITY NAME: 5xC	luxine Cleaners		DATE: 2/9/99
FACILITY LOCATION:		3 Ary	
·			
RESPONSIBLE OFFICIAL:	Neil W highor	PHONE NUMBER:	436-8995
	the compliance requirements evaluate. Rule 62-213.300, Florida Administrat		lity is found to be in
Based on the results of discrepancies were note	the compliance requirements evaluated:	ed during this inspection, the follo	owing compliance
COMPLIANCE REQU	UIREMENT/PROBLEM	FOLLOW-UP ACTI	ON REQUIRED
			P
		<del></del>	
		Bulle	
		4 % or	2 4
		O) All All All All All All All All All Al	18 19 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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	•		
,	CHTERRA		,
	FIAIFRED	,	
	FEB 09 1999		*
· · · · · · · · · · · · · · · · · · ·		<u> </u>	
COMMENTS:			
Keep rolling fatu	es as explained/	Lamorens trated a	n calmdar.
The Annual Compliance Certific	ation form has been properly certifie	d and submitted to the inspector.	YES NO
DATE OF NEXT INSPECTIO	N. Tork 2000	•	<b>'</b> \
		roximate)	
INSPECTION CONDUCTED	BY: Chanlos Nenm	n N	
	(Plea	ase Print)	ron An Isla
INSPECTOR'S SIGNATURE	Surly Momon	PHONE NUMBER:	575-8364
	_ 1		P = - i = - d 10/06

## PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	☐ COMPLAINT/DISCOVERY ☐
	RE-INSPECTION	<b>√</b>
		7 TIME IN: <u>0950</u> TIME OUT: <u>1015</u>
FACILITY NAME: Excl	ISIVE CLEA.	NERS (D.C.)
FACILITY LOCATION:	960 W. 9	# Ave
<u>_ (</u>	Kanacola	FL \$32503
RESPONSIBLE OFFICIAL :	Neil Wh;	9ham PHONE: 438-8995
CONTACT NAME:		PHONE:
PART I: NOTIFICATION		C
(check appropriate box)		Charles The Committee of the Committee o
New facility notified DARM	30 days prior to starti	tup \$\frac{1}{2}\cdot \frac{1}{2}  \q
2. Facility failed to notify DAR	M to use general pern	mit OB V S S O D
		Sar Nito
PART II: CLASSIFICATION		3 Ta
Facility indicated on notification (check appropriate box)	on form that it is:	☐ No notification form ☐ Drop store/out of business/petroleum
A.  1. Existing small area sour dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	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 $12/9/91$ )
3. Existing large area sour dry-to-dry only, $140 \le x \le 2$ , transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ (constructed before $12/9/91$ )	100 gal/yr 0 gal/yr 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 cl	assification	□Y □N □Can not determine
	ty qualified for a gene	ation: eral permit as number above its and is not eligible for a general permit
B. The total quantity of perchlo facility was 390 gallons.		rchased within the preceding 12 months by this dry cleaning

ENTERED

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN BN/A 1. Storing perchloroethylene in tightly scaled and impervious containers? DY DN DN/A 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 AVAC NO YOR 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? DY ON DINA 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) MO AB 1. Equipped all machines with the appropriate vent controls? AND NO YES 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 AND YO condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated NO YÉ condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? DY DN DIN/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after

verifying that the coolant had been completely charged?

MD YØ

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?	DΥ	אַמוּט אַם
	Is the temperature differential equal to or greater than 20° F?	$\square Y$	A/NØ 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?	ΠΥ	DN/A
	Is the perc concentration equal to or less than 100 ppm?	ΩY	אומם מם
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	ON ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y	ON DN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	A/NE NO

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 צם			
3. Maintained leak detection inspection and repair reports for the following:				
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם צם			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	OY ON ON/A			
4. Maintained calibration data? (for applicable direct reading instruments)	אועם אם אם			
5. Maintained exhaust duct monitoring data on perc concentrations?	אומם אם אם 🗸			
6. Maintained startup/shutdown/malfunction plan?	MO AG			
7. Maintained deviation reports?	אעם אם אם			
Problem corrected?	אאם אם צם			
8. Maintained compliance plan, if applicable?	אמעל אם צם			

P.	PART VI: LEAK DETECTION AND REPAIRS					
I.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?	DY DN				
2.	Has the facility maintained a leak log?	DA DN				
3.	Does the responsible official check the following areas for leaks?					
	Hose connections, fittings, couplings, and valves	OY ON ON/A				
	Door gaskets and seating	אוחם אם צם				
	Filter gaskets and seating	AND ND YO				
	Pumps DY DN DN/A Diverter valves	אומם מם אם				
	Solvent tanks and containers	אואם אם אוא				
	Water separators DY DN DN/A					
4.	Which method of detection is used by the responsible official?	_				
<u> </u>	Visual examination (condensed solvent on exterior surfaces)	Ø				
0	Þ					
	Odor (noticeable perc odor)					
	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?	OY ON				
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?	OY ON				
	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?	DY DN				
l	e. Verified for accuracy by use of duplicate samples (calorimetric only)?	OY ON				

Inspector's Name (Please Print)

Date of Inspection

Carly 2000

Inspector's Signature Card Josh
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
	••

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🔀	COMPLAINT/D	ISCOVERY	RE-INSPEC	TION [
TIME IN: 1d25	TIME OUT:	1540 M	AIRS ID#:	30235	
TYPE OF FACILITY: DAY	CLUANER				
FACILITY NAME: Fxc/	usive Cleans	ps ,		DATE: 12.	7-96
FACILITY LOCATION: 370	O 91 AVE			1.2	18-97
1-en	SACOLA .FC	3 2503			
RESPONSIBLE OFFICIAL N	id Whighon		_PHONE NUMBER:_	438-8	995
	ne compliance requirements ule 62-213.300, Florida Adn			ty is found to be	in
Based on the results of the discrepancies were noted	ne compliance requirements	evaluated during t	his inspection, the follow	wing compliance	•
COMPLIANCE REQU			LLOW-UP ACTIO	-	
12 month rolling to clicky logs most Shydown what see	Ind, Priper Lany Frankand.	Plak Keep 1	ing toulas 1/1 A	ire sunc	· lucios
Transpiratione of con May gallere to 45 F			Determine	prhlen	4 reproc
	1				-
the down ten victure con han	extract does	rat _ d	looks OIL AS	13.	
J'D Sul rous Know.	1 it must do so	. C	lech Slovan	1.28.9	<i>7</i>
		15		1	. •
		٠	\$	~¥ ,	,
(MS. E	Je proside h	to Os Lora	ill 3 plant	15 on 10	24.97.
COMMENTS: Please _	sort And pro	punchase	- Uthrica Pun	/ promise	mee
ON 1.28 97 Cauldy The Annual Compliance Certifica	I find leak-	logs V tens	s loss in a	Pant you	mest _
The Annual Compliance Certifica	tion forth has been properly	certified and subn	nitted to the inspector.	YES	ио <b>Ж</b>
DATE OF NEXT INSPECTION		(Approximate)		hell w	with R.O.
INSPECTION CONDUCTED B	x: Charles Non,	II N N			
·INSPECTOR'S SIGNATURE:_	Cherle Horne	(riease Print)	_PHONE NUMBER:	444-83	64

Page of .

Revised 10/96

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🔀	COMPLAINT/	DISCOVERY _	RE-INSPECTION	۷ 🔲
TIME IN: 0925	TIME OUT: 103	0	AIRS ID#:_ <	330235	
FACILITY NAME: 62011		25 7 E		DATE: 12/22/	199
FACILITY LOCATION: 390		503			
RESPONSIBLE OFFICIAL:			PHONE NUMBE	438-8995	
<u></u>	ne compliance requirements e nle 62-213.300, Florida Adm	_	•	cility is found to be in	
Based on the results of the discrepancies were noted	e compliance requirements e :		·	Se Logar	ı
COMPLIANCE REQU	IREMENT/PROBLEM	f FC	OLLOW-UP ACT	TOR REQUIRED	<u></u>
LGAKCHEOK LO	OG NOT MAINTHIN	K.	DLLOW-UP ACT	XP Rounces	
12-MONTH Colling Kepy. MONTHLY to but math NOT	tals were lis.		o the ma		
			ENTERED		
			DEC 22 1999		
· · · · · · · · · · · · · · · · · · ·	<u> </u>				
					•
COMMENTS: Need to Vouring Joun the Water mith lun Letter I	Sowed Sys concentrate left with	roper of is in of per jan.	Sposal of S now he bid s	ejona for lex I except le Sepona ter e	ter.
The Annual Compliance Certifica	tion form has been properly	ertified and sul	omitted to the inspecto	or. YES NO	
DATE OF NEXT INSPECTION: 8-12 mos					
INSPECTION CONDUCTED BY: HAN S Nor mm (Please Print)					
INSPECTOR'S SIGNATURE	Manh Miller	m	, <u>Pho</u> ne numbei	1. 595 -83	364
	Pa	geof	elift	1222 Rev	ised 10/96

Revised 10/10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Exclusive	CLEANERS	DATE: 2	2 Dagg
FACILITY LOCATION: 3900 N.	94 Are		
Tens Aco	1 FL 32503		
Annual Reporting Period:	<u>19</u> 19 1	0 22 Dec 99	19
Based on each term or condition of the Title	V general air permit, my facility ha	s remained in compliance with DEP Ru	le
62-213.300, Florida Administrative Code (F.	A.C.), during the period covered by	this statement. QYES	4O
If NO, complete the following:			
#1. Term or condition of the general permit	that has not been in continuous cor	npliance during the reporting period state	ted above:
	<b>A</b> 200		
Exact period of non-compliance: from		Y to Dec. 22,	777
Action(s) taken to achieve compliance:	Will do meth or	n Piec. Puchenes	
Method used to demonstrate compliance:	Mit rolling tolar	le.	<del></del>
#2. Term or condition of the general permit	that has not been in continuous cor	npliance during the reporting period sta	ted above:
	,		· .
Exact period of non-compliance: from	ENTEDED	to	
	DEO O A 4000	REVIEWED	
Action(s) taken to achieve compliance:	UEU 22 1999	DEC 2.2 1999	
Method used to demonstrate compliance:			
As the responsible official, I hereby certify, a made in this notification are true, accurate a upon rolling averages of purchase receipts, year for transfer or combination facilities.	and complete. Further, my annual	consumption of perchloroethylene solve	nt, based
RESPONSIBLE OFFICIAL: Nar	ne (Please Print)	Signature 12/	22/99 Date

<sup>\*</sup>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.

#### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INS	PECTION    COMPLAIN I/DISCOVERY  PECTION
1	2022, 1999 TIME IN: 0925 TIME OUT: 1030
FACILITY NAME: Exclusive	= CijANISAS
FACILITY LOCATION: 3900 N	
	LA FL 32503
RESPONSIBLE OFFICIAL: Nei/	Who ham PHONE: 438-8995
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	ENTERED
1. New facility notified DARM 30 days prid	or to startup DEC 22 1999 $\Box$
2. Facility failed to notify DARM to use gen	
PART II: CLASSIFICATION	
Facility indicated on notification form that (check appropriate box)	t it is: ☐ No notification form ☐ Drop store/out of business/petroleum
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, $140 \le x \le 2,100$ gal/yr	4. New large area source dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$
transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$ )	transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$ (constructed on or after $12/9/91$ )
both types, $140 \le x \le 1,800$ gal/yr	both types, $140 \le x \le 1,800 \text{ gal/yr}$
both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)  5. This is a correct facility classification  If no, please check the appropriate  ☐ facility qualified	both types, $140 \le x \le 1,800 \text{ gal/yr}$ (constructed on or after $12/9/91$ )  Y  O  Can not determine

#### Is the responsible official of the dry cleaning facility: (check appropriate boxes) N/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY DN DY DN MON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? MD AE 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? EDY ON ON/A 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) ND YES 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 condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated AD N DA condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? Door leaking to wop. Prats or lovel DY ON ON/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after $\mathbf{N} \cup \mathbf{N}$ 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 loca on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ated Y ON		
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY OK DIN/A		
Is the temperature differential equal to or greater than 20° F?	אימוש אם אם		
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?	אמ אם אם		
Is the perc concentration equal to or less than 100 ppm?	A/NE NO YO		
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?	אמש אם עם		
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY DN DN/A		
6. Routed airflow to the carbon adsorber (if used) at all times?	או או אם אם אים		

#### PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? NO YE turchases listed by month. 2. Maintained rolling monthly total of perc consumption? Punchases list 3. Maintained leak detection inspection and repair reports for the following: THY ON ON/A 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 MY ON ON/A and parts installed w/in 5 days of receipt? A'NE NO YO 4. Maintained calibration data? (for applicable direct reading instruments) אמם אם צם 5. Maintained exhaust duct monitoring data on perc concentrations? MD AE 6. Maintained startup/shutdown/malfunction plan? DY DN N/A 7. Maintained deviation reports? A/MØ NO YO Problem corrected? A/ND DY DN 8. Maintained compliance plan, if applicable?

PART	VI: LEAK DETECTION AND	REPAIRS		
1. Doe	s the responsible official conduct	a weekly (for small source	es, bi-weekly) leak detection a	nd repair
insp	pection?	•	<	ADY DN
2. Has	the facility maintained a leak log	3?		DY XV
3. Doe	s the responsible official check th	ne following areas for leaks	?	
	Hose connections, fittings, couplings, and valves	BY ON ON/A	Muck cookers	DY DN BON/A
	Door gaskets and seating	DY ON ON/A	Stills	YOY ON ON/A
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	A/N DN DN/A
	Pumps	OY ON ON/A	Diverter valves	DY DN QN/A
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	AND ND YES
	Water separators	BY ON ON/A		
4. Whi	ich method of detection is used by	y the responsible official?	_	
	Visual examination (condensed	solvent on exterior surface	es) \	va ·
	Physical detection (airflow felt	through gaskets)		Ø]
	Odor (noticeable perc odor)			<b>J</b>
	Use of direct-reading instrumer	ntation (FID/PID/calorimetr	ric tubes)	
	Halogen leak detector		_	
	If using direct-reading ins	trumentation, is the equip	oment:	⊠N/A
[	a. Capable of detectin	g perc vapor concentration	s in a range of 0-500 ppm?	OY ON
	b. Calibrated against a (PID/FID only)?	a standard gas prior to and a	after each use	OY ON
	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 us	se?	DY DN
	e. Verified for accura	cy by use of duplicate samp	oles (calorimetric only)?	OY ON
				•
			·	
			•	
	Inspector's Name (Please P	rint)	Date of Inspection	
			<del></del>	
	Inspector's Signature		Approximate Date of	Next Inspection

Separator water in filmhed down touled.

Separator water in filmhed down touled.

Advised Billkellonberger, Itazwake (Ace22)

Alegaduad Bleak in Machin Loor,

Facility said leek land just storted ogain

Leak repair record showed same leak
in October. Ordered repairted while

I was insperting the field.

ASOP

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: EXCLUSIVE CLONNERS DATE: 1/11/01
FACILITY LOCATION: 3900 N. 9 14 AVL
FACILITY LOCATION: 3400 N. 9 19 Ave Pensceela 32503
Annual Reporting Period: 23 Dec 1999 20 TO 11 Jan 2001 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 to to L
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 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 made 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:    Name (Please Print)

<sup>\*</sup>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/DISCOVERY RE-INSPECTION
TIME IN: TIME OUT:	AIRS ID#: 0330235
TYPE OF FACILITY: DC.	
FACILITY NAME: EXCLUSIVE CLEANED	DATE: VUGI
/	
Remacala	, 32503
RESPONSIBLE OFFICIAL: Neil Whigh AM	PHONE NUMBER:
Based on the results of the compliance requirements evaluat compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluat discrepancies were noted:	tive Code (F.A.C.).
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	:
·	
	JAN 16 2001
	MA EDA
	JAN 16 D
	·
·	
COMMENTS:	
	·
The Annual Compliance Certification form has been properly certific	ed and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	<del></del> ·
	proximate)
INSPECTION CONDUCTED BY	m N
	ease Print) 595-8360
1 / / Tool	
INSPECTOR'S SIGNATURE: MINTEL /// // // // //	PHONE NUMBER: X/22
Page	of/ Revised 10/9
1 450	<del></del>

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL X COM	PLAINT/DISCOVERY	RE-INSPECTION
TIME IN:	TIME OUT:	AIRS ID#:	330235
TYPE OF FACILITY: DC			
FACILITY NAME: Excl	USIVE CLEANE	n S	DATE: 1/1/0/
FACILITY LOCATION: 390	1 :		
	Remarka	32503	
RESPONSIBLE OFFICIAL: N		PHONE NUMBER:	
compliance with DEP Ru	le 62-213.300, Florida Administra	atted during this inspection, the facil ative Code (F.A.C.).	
discrepancies were noted:		and daring in a mapped in a first	<b>57</b>
COMPLIANCE REQUI	REMENT/PROBLEM	FOLLOW-UP ACTION	ON REQUIRED
			· · · · · · · · · · · · · · · · · · ·
·			
· · · · · · · · · · · · · · · · · · ·			
	25 M St. 11		
2330237	100	en 1. 3751 5	
	ţ		
	17,100	11 16	1) 4218 1
COMMENTS:			
•			
		•	
The Annual Compliance Certificat	tion form has been properly certif	ied and submitted to the inspector.	YES NO
DATE OF NEXT INSPECTION	(Ap	oproximate)	·
INSPECTION CONDUCTED B	/ /	lease Print)	595-8364
INSPECTOR'S SIGNATURE:	March Millonn	PHONE NUMBER:	XILLDA
	Page_/	<u></u>	Revised 10/96

# ASAR

#### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL (INSI, INS2)

COMPLAINT/DISCOVERY (CI) □

RE-INSPECTION (FUI) □

AIRS ID#: 0330 235 DATE: 1 11 0	TIME IN: TIME OUT:
FACILITY NAME: EXCLUSIVE CL	•
FACILITY LOCATION: 3900 N.	_
_ ·	
Pensecale	•
RESPONSIBLE OFFICIAL: Neil Wig	han PHONE: 438-8995
CONTACT NAME: 500	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	Facility Compliance Status: IN
1. New facility notified DARM 30 days prior to star	tup 🗆 (ARMS Data) MNC 🗅
2. Facility failed to notify DARM to use general per	mit
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box)	
(check appropriate box) A.	☐ Drop store/out of business/petroleum
A.  1. Existing small area source	☐ Drop store/out of business/petroleum  2. New small area source ☐
A.	☐ Drop store/out of business/petroleum
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/petroleum  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
A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	☐ Drop store/out of business/petroleum  2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr
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/petroleum  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
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/petroleum  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
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr</li> </ul>	Drop store/out of business/petroleum  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
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/petroleum  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
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr</li> </ul>	Drop store/out of business/petroleum  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 transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)</li> </ul>	Drop store/out of business/petroleum  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 $12/9/91$ )  An $16$ Constructed on or after $12/9/91$ )
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)</li> <li>5. This is a correct facility classification</li> <li>If no, please check the appropriate classification facility qualified for a general properties.</li> </ul>	Drop store/out of business/petroleum  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 \(\leq x \leq 2,100\) gal/yr transfer only, 200 \(\leq x \leq 1,800\) gal/yr both types, 140 \(\leq x \leq 1,800\) gal/yr (constructed on or after 12/9/91)  All 16 2001  All 16 2001
<ul> <li>A.</li> <li>1. Existing small area source dry-to-dry only, x &lt; 140 gal/yr transfer only, x &lt; 200 gal/yr both types, x &lt; 140 gal/yr (constructed before 12/9/91)</li> <li>3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)</li> <li>5. This is a correct facility classification</li> <li>If no, please check the appropriate classification facility qualified for a general property of the property of</li></ul>	Drop store/out of business/petroleum  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 transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91)  AN □ Can not determine

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? OY ON DIN/A 2. Examining the containers for leakage? NO NE 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at AYYO NOZYO least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DINA 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) $N \square Y \square N$ 1. Equipped all machines with the appropriate vent controls? אותם מם צום 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 condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated SOY □N condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after MD AG verifying that the coolant had been completely charged?

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?	YDY.	ĎИ
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	ON QN/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ON ON/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?	ΠY	
	Is the perc concentration equal to or less than 100 ppm?	ЦY	UN QN/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?	ПΥ	
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	ON DNIA
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ANG NO

#### PART V: RECORDKEEPING REQUIREMENTS

TAKT V. RECORDIZED ING RECORDINE	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	ZIY OX
2. Maintained rolling monthly total of perc consumption?	MY OX
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	אימבל מם עם
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	OY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	איאוב אם אם
5. Maintained exhaust duct monitoring data on perc concentrations?	איאום אם אם אם
6. Maintained startup/shutdown/malfunction plan?	₹D YE
7. Maintained deviation reports?	מאמב אם אם איא
Problem corrected?	אאם אם אס
8. Maintained compliance plan, if applicable?	איינע אם אם אם

PART VI: LEAK DETECTION AND	REPAIRS		,
1. Does the responsible official conduct a	weekly (for small source	s, bi-weekly) leak detection a	nd repair
inspection?	Butantra	P	Y DN
2. Has the facility maintained a leak log?	man & nen	and dung)	QY DN
3. Does the responsible official check the	following areas for leaks	2	,
Hose connections, fittings.			
couplings, and valves	ANIO NO YOU	Muck cookers	AVA NO VE
Door gaskets and seating	אואם אם אוא	Stills	אואם אם אם
Filter gaskets and seating	אומם אם צמ	Exhaust dampers	DY ON ON/A
Pumps	N/A NO N/A	Diverter valves	DY DN ØN/A
Solvent tanks and containers	EIY ON ON/A	Cartridge filter housings	DY ON ON/A
Water separators	MY ON ON/A		
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surface	s) .	۵
Physical detection (airflow felt t	hrough gaskets)		
Odor (noticeable perc odor)			
Use of direct-reading instrument	ation (FID/PID/calorimetr	ic tubes)	
Halogen leak detector			<u> </u>
If using direct-reading inst	rumentation, is the equip	ment:	□N/A
a. Capable of detecting	perc vapor concentrations	in a range of 0-500 ppm?	OY ON
b. Calibrated against a (PID/FID only)?	standard gas prior to and a	fter each use	
	and obvious signs of wear o	on a weekly hasis?	DY DN
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·	y by use of duplicate samp		מע בא
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Inspector's Name (Please Pr	mi,	Date of Inspection	
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Inspector's Signature		Approximate Date of	Next Inspection

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FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001 Obj.:: 002273

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Fund: 20-2-035001 Obj.: 002273



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Fund: 20-2-035001 Obj.: 002273 RECEIVED MAIL ROOM

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**EXCLUSIVE CLEANERS NEIL WHIGHAM** 3900 N 9TH AVE PENSACOLA FL 32503

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SENDER:  Complete items 1 and/or 2 for additional services.  Complete items 3, 4a; and 4b.  Print your name and address on the reverse of this form so t card to you.  Attach this form to the front of the mailpiece, or on the back i permit.  Write *Return Receipt Requested* on the mailpiece below the The Return Receipt will show to whom the article was delivered.	if space does not  1.  Addressee's Address e article number.  2.  Restricted Delivery
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