Department of Environmental Protection

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

March 7, 1997

Ms. Faye A. Hilbert
Sunshine Coin Laundry
and Dry Cleaners
3 West 9 Mile Road
Pensacola, Florida 32514

Re: Facility No. 0330243

Dear Ms. Hilbert:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 17, 1997.

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

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

Title V General Permits Office
Bureau of Air Monitoring and Mobile Sources MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Fl 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the District or local air program compliance inspector in your area.

Sincerely,

for Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Charles Norman, Northwest District

ID # 0330243

SUNSHINE COIN LAUNDRY AND DRY CLEANERS

3 WEST 9 MILE RD
PENSACOLA, FL. 32514
904-477-9438

Charles Norman
Environmental Specialist
160 Governmental Center
Pensacola, Fl. 32501-5794

April 21, 1997

Mr. Norman

Please be advised that Sunshine Coin Laundry and Dry Cleaners have as of February 24, 1997, discontinued doing the dry cleaning in our store. We are sending all dry cleaning out to be done by Woods Cleaners.

Thank you,

Faye Hilbert
Owner
Sunshine Coin Laundry
and Dry Cleaners

TBD000994

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

3d visit

70

TYPE OF INSPECTION: ANNUAL ☒ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☒

TIME IN: 0930 TIME OUT: 1020 AIRS ID#: 0330243

TYPE OF FACILITY: DC

FACILITY NAME: SUNSHINE COIN LAUNDRY + DRY CLEANERS DATE: 2-14-97

FACILITY LOCATION: 3 W. NINE MILE ROAD
PENSACOLA, FL 32514

RESPONSIBLE OFFICIAL: Faye Hilburt PHONE NUMBER: 477-9438

☐ Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).

☒ Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
ROUTINE WEEKLY LEAK CHECKS NOT DONE.	SET UP ROUTINE TO DO LEAK CHECKS AND LOG THE RESULTS
TEMP SENSOR TO RECORD TEMP OF AIR STREAM HAS NOT BEEN INSTALLED.	INSTALL SENSOR AND RECORD TEMP. DURING COOL DOWN ON A WEEKLY BASIS, MUST REACH 45°F or less.
HAS NOT MAINTAINED ROLLING 12-MONTH TOTAL ON PERC PURCHASES. KEEP	SET UP LOG & MAINTAIN ON MONTHLY BASIS. KEEP PERC PURCHASE RECORDS ON SITE.
HAD NOT SUBMITTED PERMIT NOTIFICATION FORM.	COMPLETE ON SITE.
Needs to Repair Refrigeration Unit.	Repair unit

COMMENTS: KEEP ABOVE RECORDS FOR 5 years.

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES ☒ NO ☐

DATE OF NEXT INSPECTION: Feb 98 (Approximate)

INSPECTION CONDUCTED BY: CHARLES M NORMAN (Please Print)

INSPECTOR'S SIGNATURE: [signature] PHONE NUMBER: 444-8364

Revised 10/96

RECEIVED

FEB 17 1997

Bureau of Air Monitoring & Mobile Sources

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
   Faye A. Hilbert
2. Site Name (For example, plant name or number):
   Sunshine Coin Laundry + Dry Cleaners
3. Hazardous Waste Generator Identification Number:
4. Facility Location:
   Street Address: 3 West 9 Mile Rd
   City: Pensacola, FL County: Escambia Zip Code: 32514
5. Facility Identification Number (DEP Use): 0330243

Responsible Official

6. Name and Title of Responsible Official:
   Faye A. Hilbert - Owner
7. Responsible Official Mailing Address:
   Organization/Firm:
   Street Address: 3 West 9 Mile Rd
   City: Pensacola, FL County: Escambia Zip Code: 32514
8. Responsible Official Telephone Number:
   Telephone: (904) 477-9438 Fax: ( ) -

Facility Contact (If different from Responsible Official)

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

Facility Information

1.(a) Provide the information below for each 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 (SPEED QUEEN)	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*	*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	1	1987	1987						
(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									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									

(b) Control devices are required, but not yet installed [____]

(c) No control devices are required to be installed [____]

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?
[260] gallons

(b) If less than 12 months, how many? [____] months
Check why it is less than 12 months: New owner: [____] New store: [____] Did not keep records: [____]

3. What is the facility's source classification based on the definitions found in section (3) of Part II? (Indicate with an "X". Select one classification only.)

Existing small area source [____] New small area source [____]

Existing large area source [X] New large area source [____]

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

Existing large area source			
Carbon adsorber	[ ]	Refrigerated condenser	[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 use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following 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 of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.

All steam and hot water generating units exempt	[X]
No such units on-site	[ ]

Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

(a) Purchase receipts and solvent purchases	[X]
(b) Leak detection inspection and repair	[X]
(c) Refrigerated condenser temperature monitoring	[X]
(d) Carbon adsorber exhaust perc concentration monitoring	[ ]
(e) Instrument calibration	[ ]
(f) Start-up, shutdown, malfunction plan	[X]

Surrender of Existing Air Permit(s)

Please indicate 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] No air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

Faye A Hellert
Signature

2/14/97
Date

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☒

AIRS ID#: 0330243 **DATE:** 2/14/97 **TIME IN:** 1115 **TIME OUT:** 1220

FACILITY NAME: Sunshine Laundry and Dry Cleaners

FACILITY LOCATION: 3 West Nine Mile Road.
Pensacola FL 32514

PART I: NOTIFICATION

(check appropriate box)

1. Existing facility notified DARM by 9/1/96 ☐
2. New facility notified DARM 30 days prior to startup ☐
3. Facility failed to notify DARM to use general permit ☒

PART II: CLASSIFICATION

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)

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<2,100 gal/yr
transfer only, 200<x<1,800 gal/yr
both types, 140<x<1,800 gal/yr
(constructed before 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)

This is a correct facility classification ☐Y ☐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 260 gallons.

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? ☒Y ☐N
2. Examining the containers for leakage? ☒Y ☐N
3. Closing and securing machine doors except during loading/unloading? ☒Y ☐N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? ☒Y ☐N
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? ☐Y ☐N ☒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? ☐Y ☐N
   need to determine if installed refrigeration unit will meet requirements — See Notes on back
2. Equipped dry-to-dry machines with a closed-loop vapor venting system? ☒Y ☐N ☐N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? ☐Y ☐N ☒N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? ☒Y ☐N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? ☐Y ☐N
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? ☐Y ☐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? ☐Y ☒N

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? ☐Y ☐N NA

   Is the temperature differential equal to or greater than 20° F? ☐Y ☐N NA

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? ☐Y ☐N ☒N/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, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? ☐Y ☐N NA

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? ☐Y ☐N ☒N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? HAD obtained this time; I showed her how to set up rolling 12 mth. ☒Y ☐N
2. Maintained rolling monthly averages of perc consumption? ☒Y ☐N
3. Maintained leak detection inspection and repair reports for the following:
   a. documentation of leaks repaired w/in 24 hrs? or; ☐Y ☒N
   b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? ☐Y ☐N
4. Maintained calibration data? *(for direct reading instruments only)* ☐Y ☐N ☒N/A
5. Maintained exhaust duct monitoring data on perc concentrations? ☐Y ☐N NA
6. Maintained startup/shutdown/malfunction plan? ☐Y ☒N
7. Maintained deviation reports? ☐Y ☐N

   Problem corrected? ☐Y ☐N
8. Maintained compliance plan, if applicable? ☐Y ☐N ☒N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☐Y ☒N

2. 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)	☐

If using direct-reading instrumentation, is the equipment:

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?	☐Y	☐N	N/A
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?	☐Y	☐N	
c. Inspected for leaks and obvious signs of wear on a weekly basis?	☐Y	☐N	
d. Kept in a clean and secure area when not in use?	☐Y	☐N	
e. Verified for accuracy by use of duplicate samples (calorimetric only)?	☐Y	☐N	

3. Has the facility maintained a leak log? ☐Y ☒N

4. Does the responsible official check the following areas for leaks?

Hose connections, fittings, couplings, and valves	☐Y	☐N	Muck cookers	☐Y	☐N
Door gaskets and seating	☐Y	☐N	Stills	☐Y	☐N
Filter gaskets and seating	☐Y	☐N	Exhaust dampers	☐Y	☐N
Pumps	☐Y	☐N	Diverter valves	☐Y	☐N
Solvent tanks and containers	☐Y	☐N	Cartridge filter housings	☐Y	☐N
Water separators	☐Y	☐N			

Faye Hilberg
Name of Responsible Official

Charles M Norman
Inspector's Name (Please Print)

2/12/97
Date of Inspection

Charles M Norman
Inspector's Signature

1 week
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Still need to determine if refrigeration unit will meet CO2 specs. The unit on this "old" machine was just designed to cool pure although there is a condenser coil.

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☒ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☐

AIRS ID#: 0330243 **DATE:** 1/14/97 **TIME IN:** 1330 **TIME OUT:** 1455

FACILITY NAME: Sunshine Coin Laundry & Dry Cleaners

FACILITY LOCATION: 3 West Nine Mile Road
Pensacola, FL 32514

PART I: NOTIFICATION

(check appropriate box)

1. Existing facility notified DARM by 9/1/96 ☐
2. New facility notified DARM 30 days prior to startup ☐
3. Facility failed to notify DARM to use general permit ☒

PART II: CLASSIFICATION

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)	**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<2,100 gal/yr transfer only, 200<x<1,800 gal/yr both types, 140<x<1,800 gal/yr (constructed before 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)

This is a correct facility classification ☐Y ☐N

DID NOT HAVE Perc Record on site - Must come back.

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 260 gallons.

ON 1/24/97 Ms Hilbert called me with the perc information

210 gal in 95
260 gal in 96

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?	☐Y	☐N
2.	Examining the containers for leakage?	☐Y	☐N
3.	Closing and securing machine doors except during loading/unloading?	☐Y	☐N
4.	Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☐Y	☐N
5.	Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐Y	☐N ☐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?	☐Y	☐N
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	☐Y	☐N ☐N/A
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	☐Y	☐N ☐N/A
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	☐Y	☐N
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	☐Y	☐N
6.	Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	☐Y	☐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? ☐Y ☐N

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? ☐Y ☐N

   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? ☐Y ☐N ☐N/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, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? ☐Y ☐N

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? ☐Y ☐N ☐N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? NOT ONSITE ☐Y ☒N
2. Maintained rolling monthly averages of perc consumption? ☐Y ☒N
3. Maintained leak detection inspection and repair reports for the following:
   a. documentation of leaks repaired w/in 24 hrs? or; ☐Y ☒N
   b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? ☐Y ☐N
4. Maintained calibration data? *(for direct reading instruments only)* ☐Y ☐N ☐N/A
5. Maintained exhaust duct monitoring data on perc concentrations? ☐Y ☐N
6. Maintained startup/shutdown/malfunction plan? ☐Y ☐N
7. Maintained deviation reports? ☐Y ☐N

   Problem corrected? ☐Y ☐N
8. Maintained compliance plan, if applicable? ☐Y ☐N ☐N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☐Y ☒N

2. 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)	☐

If using direct-reading instrumentation, is the equipment:

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?	☐Y ☐N
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?	☐Y ☐N
c. Inspected for leaks and obvious signs of wear on a weekly basis?	☐Y ☐N
d. Kept in a clean and secure area when not in use?	☐Y ☐N
e. Verified for accuracy by use of duplicate samples (calorimetric only)?	☐Y ☐N

3. Has the facility maintained a leak log? ☐Y ☒N

4. Does the responsible official check the following areas for leaks?

Hose connections, fittings, couplings, and valves	☐Y	☐N	Muck cookers	☐Y	☐N
Door gaskets and seating	☐Y	☐N	Stills	☐Y	☐N
Filter gaskets and seating	☐Y	☐N	Exhaust dampers	☐Y	☐N
Pumps	☐Y	☐N	Diverter valves	☐Y	☐N
Solvent tanks and containers	☐Y	☐N	Cartridge filter housings	☐Y	☐N
Water separators	☐Y	☐N			

Faye Hilbert
Name of Responsible Official

Charles M. Norman
Inspector's Name (Please Print)

1/14/97
Date of Inspection

Charles M Norman
Inspector's Signature

≈ 2 weeks
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

MFR 2-4-97:

Mr Cecil Sawain said Speed Queen's don't condense the gas. They have to be re-fitted. I have a copy of the maintenance manual which shows a condenser box. It's not apparent what it does. There is no temperature sensor on the equipment - As a minimum a temperature sensor must be installed.

As a follow up, on 12 Feb I contacted Jim Ellis @ Raytheon Appliance Commercial Laundry (maker of Speed Queen) to see if the refrigerated unit would meet specifications. He said he thought it would bring temps down to 45°F. However there is no way to measure until temp sensor is installed.

(Jim Ellis 414-748-3121 ext 4201)

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☒

AIRS ID#: 9330243 **DATE:** 2/14/97 **TIME IN:** 0930 **TIME OUT:** 1020

FACILITY NAME: Sunshine Coin Laundry & Dry Cleaners.

FACILITY LOCATION: 3 West Nine Mile Road
Pensacola FL 32514

PART I: NOTIFICATION

(check appropriate box)

1. Existing facility notified DARM by 9/1/96 ☐
2. New facility notified DARM 30 days prior to startup ☐
3. Facility failed to notify DARM to use general permit ☒

PART II: CLASSIFICATION

Facility indicated on notification form that it is:
(check appropriate box)

Completed permit notification and informed her of the need to get Comp Sewer Report.

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<2,100 gal/yr transfer only, 200<x<1,800 gal/yr both types, 140<x<1,800 gal/yr (constructed before 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)

This is a correct facility classification ☐Y ☐N

If no, please check the appropriate classification:

☐ facility qualified for a general permit as number 3 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 260 gallons.

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?	☐Y	☐N	
2. Examining the containers for leakage?	☐Y	☐N	
3. Closing and securing machine doors except during loading/unloading?	☐Y	☐N	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☐Y	☐N	
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐Y	☐N	☐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?	☐Y	☐N	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	☐Y	☐N	☐N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	☐Y	☐N	☐N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	☐Y	☐N	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	☐Y	☐N	
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	☐Y	☐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?	☐Y	☐N	
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	☐Y	☐N	
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?	☐Y	☐N	☐N/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, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	☐Y	☐N	
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?	☐Y	☐N	☐N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased?	☐Y	☐N	
2. Maintained rolling monthly averages of perc consumption?	☐Y	☐N	
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	☐Y	☐N	
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	☐Y	☐N	
4. Maintained calibration data? *(for direct reading instruments only)*	☐Y	☐N	☐N/A
5. Maintained exhaust duct monitoring data on perc concentrations?	☐Y	☐N	
6. Maintained startup/shutdown/malfunction plan?	☐Y	☐N	
7. Maintained deviation reports?	☐Y	☐N	
Problem corrected?	☐Y	☐N	
8. Maintained compliance plan, if applicable?	☐Y	☐N	☐N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☐Y ☐N

2. 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) ☐

   If using direct-reading instrumentation, is the equipment:

   a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? ☐Y ☐N

   b. Calibrated against a standard gas prior to and after each use (PID/FID only)? ☐Y ☐N

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

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

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

3. Has the facility maintained a leak log? ☐Y ☐N

4. Does the responsible official check the following areas for leaks?

Hose connections, fittings, couplings, and valves	☐Y	☐N	Muck cookers	☐Y	☐N
Door gaskets and seating	☐Y	☐N	Stills	☐Y	☐N
Filter gaskets and seating	☐Y	☐N	Exhaust dampers	☐Y	☐N
Pumps	☐Y	☐N	Diverter valves	☐Y	☐N
Solvent tanks and containers	☐Y	☐N	Cartridge filter housings	☐Y	☐N
Water separators	☐Y	☐N			

Faye Hilbert
Name of Responsible Official

Charles Norman
Inspector's Name (Please Print)

2/14/97
Date of Inspection

Charles M Norman
Inspector's Signature

Feb 98
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

This visit was to tie up loose end.

(A) Need to install temp sensor. If the condenser box won't get cold enough then the machine will have to be modified / retro fitted.

(B) Completed permit notice taken.

(C) Completed Annual Compliance form.

(D) Mr Libby said the refrigeration unit is broken and she is looking for one she could buy & use for some parts - She says she may get out of D.C. business (It's not a big part of her business) & sub out what little she has.

(E) I told her it was a violation to run the machine without the refrigeration unit working.

(F) She is to call me if she permanently shuts down the D.C. equipment.

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
   Faye A. Hilbert
2. Site Name (For example, plant name or number):
   Sunshine Coin Laundry + Dry Cleaners
3. Hazardous Waste Generator Identification Number:
4. Facility Location:
   Street Address: 3 West 9 Mile Rd
   City: Pensacola, FL County: Escambia Zip Code: 32514
5. Facility Identification Number (DEP Use): 0330243

Responsible Official

6. Name and Title of Responsible Official:
   Faye A. Hilbert - Owner
7. Responsible Official Mailing Address:
   Organization/Firm:
   Street Address: 3 West 9 Mile Rd
   City: Pensacola, FL County: Escambia Zip Code: 32514
8. Responsible Official Telephone Number:
   Telephone: (904) 477-9438 Fax: ( ) -

Facility Contact (If different from Responsible Official)

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

Facility Information

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

SPEEDQUEEN 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*	*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	1	1987	1987						
(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									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									

(b) Control devices are required, but not yet installed [____]

(c) No control devices are required to be installed [____]

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?
[260] gallons

(b) If less than 12 months, how many? [____] months
Check why it is less than 12 months: New owner: [____] New store: [____] Did not keep records: [____]

3. What is the facility's source classification based on the definitions found in section (3) of Part II? (Indicate with an "X". Select one classification only.)

Existing small area source [____] New small area source [____]

Existing large area source [X] New large area source [____]

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

Existing large area source
Carbon adsorber [ ] Refrigerated condenser [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 use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following 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 of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.

All steam and hot water generating units exempt [X]
No such units on-site [ ]

Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

(a) Purchase receipts and solvent purchases [X]

(b) Leak detection inspection and repair [X]

(c) Refrigerated condenser temperature monitoring [X]

(d) Carbon adsorber exhaust perc concentration monitoring [ ]

(e) Instrument calibration [ ]

(f) Start-up, shutdown, malfunction plan [X]

Surrender of Existing Air Permit(s)

Please indicate 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] No air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

Faye A Hellert
Signature

2/14/97
Date

AIRS ID#: 0330243 ✓ Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Sunshine Coin Laundry + Dry Cleaners **DATE:** 2/14/97

FACILITY LOCATION: 3 West 9 Mile Rd

Pensacola, FL 32514

Annual Reporting Period: 9-1 1996 TO 2-14 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 ☒ 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:

Didn't have Temp Censor installed / had not done leak checks

Exact period of non-compliance: from 9-1-96 to 2-14-97

Action(s) taken to achieve compliance: Talked To Contractor About Installing / Setup / Oss

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 9-1-96 to 2-14-97

Action(s) taken to achieve compliance: Had not submitted permit notification

Method used to demonstrate compliance: Submitted 2/14/97

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: Faye A Hilbert (Name (Please Print)) Faye A Hilbert (Signature) 2/14/97 (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.