

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

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 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, Fl 32399-2400

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

Sincerely,

Dotty Diltz, Chief

Bureau of Air Monitoring

and Mobile Sources

DD/jw

cc: Mr. Charles Norman, Northwest District

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

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 Lillus

Faye Hilbert

Owner

Sunshine Coin Laundry

and Dry Cleaners

RECEIVED

APR 2 8 1997

Northwest Florida DEP

	TB000999
TITLE V AIR QUALIT	Y GENERAL PERMIT
	IPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 0930. TIME OUT: 10 2	AIRS ID#: 0330243
TYPE OF FACILITY: DC	
FACILITY NAME: SUNSHINE CIN LAUNORY	+ DRY CLEANUTS DATE: 2-14-97
FACILITY LOCATION: 3 W. NINE MILE	
PENSATOIA, FL 325	14
RESPONSIBLE OFFICIAL: FAye Hilbert	PHONE NUMBER: 477-9438
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluated discrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
ROUTHING WEEKLY LEAK CHECKS NOT DONG.	
	AND LOG THENESULITS
TEMP SENSON TO NEROND REMP. of	INSMU SENSOR AND RECORD
AIR STREAM HAS NOT BEEN INSTALLED.	Weekly basis, Mus, Reach 45°For less.
HAS NOT MAINTAINED ROLLING 12-MONT TOTAL ON PEAC PORCHASES.	M SET UPILOG & MAINTAIN CN Monthle basis, KEEP PERC PURCHASE RECORDS ON SIZES
TAD NOT SUBMITTED PERMITMOTIFICATION	V Completedonsite.
Veeds to Repair Refrigeration	Repair uniq
Unit.	
COMMENTS: KEEP ABOVE RECORDS FOR	57 / 10 10 5
Commence Act to the second of the	3 gems.
	·
The Annual Compliance Certification form has been properly certification	ed and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: Feb 9.8	<u> </u>
	proximate)
77772	ease Print)
INSPECTOR'S SIGNATURE Juren Mon	PHONE NUMBER: 4/11-8364
Page	

RECEIVED

Perchloroethylene Dry Cleaning Facility Notification

FEB 1 7 1997

Facility Name and Location

Bureau of Air Monitoring & Mobile Sources

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Site Name (For example, plant name or number):
2.	Site Name (For example, plant name or number):
	Surshine Coin Launday + DRY CLEANERS Hazardous Waste Generator Identification Number:
3.	Hazardous Waste Generator Identification Number:
1	Escility Location:
4.	Facility Location: 3 WEST 9 Mile Rd Street Address: 3 WEST 9 Mile Rd
	City: PENSACOIA, 7L County: ESCANDIA Zip Code: 32514
5.	Facility Identification Number (DEP Use):
	0330243
	Responsible Official
6.	Name and Title of Responsible Official:
	7Aye A. Hilbert - OWNER
7.	Responsible Official Mailing Address:
	Organization/Firm: Street Address: 3 WEST 9 Mile Rd
8.	Responsible Official Telephone Number: Telephone: $(9a4) 477 - 942 $ Fax: ()
	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:
11.	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.

Speedquern		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device
Type of Machine	$\overline{\mathbb{D}}$	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	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				1			l		
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit		•							
(10) w/ ref. condenser									
(11) w/carbon adsorber			-		1				
(12) w/ no controls									
(b) Control devices are required, but not yet installed									
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 New large area source]									

DEP Form No. 62-213,900(2) Effective: 6-25-96 Page 14 of 16

4. What control technology is required on machines (Indicate with an "X".)	pursuant to section (5) of F	Part II of this notification form?
Existing large area source Carbon adsorber []	Refrigerated condenser	ι <u>Χ</u> ι
New small area source Refrigerated condenser []		
New large area source Refrigerated condenser []		
,		
5. A facility which contains non-exempt emissions a pursuant to Rule 62-213.300, F.A.C. Verify that all following exemption criteria or that no such units ex	steam and hot water gener	
All steam and hot water generating units on-site (1) boiler HP or less), and (2) are fired exclusively by no during which propane or fuel oil containing no more	atural gas except for perio	ds of natural gas curtailment
All steam and hot water generating units exempt No such units on-site		
The Land Market Andrews	ad Daniella and a Tafana	
Equipment Monitoring a		
Check all logs which are required to be kept on-site in permit:	in accordance with the requ	uirements of this general
(a) Purchase receipts and solvent purchases		区
(b) Leak detection inspection and repair		
(c) Refrigerated condenser temperature monitoring		LX
(d) Carbon adsorber exhaust perc concentration mon	itoring	
(e) Instrument calibration		
(f) Start-up, shutdown, malfunction plan		丛

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)			
区入	No air permits currently exist for the operation of the facility indicated in this notification form.			
	Responsible Official Certification			
this notifi statemeni maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the is 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form.			
I will pro	mptly notify the Department of any changes to the information contained in this notification.			
Signature	Rye a Hellent 14/97 Date			

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	ANNUAL		COMPLAINT/DISCOVERY	
	RE-INSPECTION	ø		
	4			
AIRS 10#: <u>5330243</u> d	ATE: 2/14/97	TIME IN	TIME OUT	:1220
FACILITY NAME: Stud	line Laur	ula an	Dry Cleaner	
FACILITY LOCATION:	3 West	Nine .	Mile Rosa.	
_6	Ervercola	- FL 3	32514	
			·	
PART I: NOTIFICATION		<u></u>		
(check appropriate box)				* ***
1. Existing facility notified DAR	M by 9/1/96			
2. New facility notified DARM 3	0 days prior to startup			
3. Facility failed to notify DARM	l to use general permi	t		B
PART II: CLASSIFICATION				
Facility indicated on notification	n form that it is:			. ,
(check appropriate box)				
A.				
1. Existing small area source		. New small are ry-to-dry only, x		
dry-to-dry only v<140 golfyr	u	ту-ш-шу ошу, х		
dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr		ansfer only, x<2	00 gal/yr	
transfer only, x<200 gal/yr both types, x<140 gal/yr	tr be	cansfer only, x<2 oth types, x<140	gal/yr	
transfer only, x<200 gal/yr	tr be		gal/yr	
transfer only, x<200 gal/yr both types, x<140 gal/yr	tr b (c	oth types, x<140	gal/yr rafter 12/9/91)	
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< td=""><td>tr bo (c e</td><td>oth types, x<140 constructed on or . New large are ry-to-dry only, 1</td><td>gal/yr r after 12/9/91) ea source 40<x<2,100 gal="" td="" yr<=""><td></td></x<2,100></td></x<2,100<>	tr bo (c e	oth types, x<140 constructed on or . New large are ry-to-dry only, 1	gal/yr r after 12/9/91) ea source 40 <x<2,100 gal="" td="" yr<=""><td></td></x<2,100>	
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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 (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" appropria<="" before="" both="" check="" classification,="" correct="" facility="" gal="" is="" only,="" please="" td="" the="" this="" transfer="" types,="" y=""><td>tr be (c) e</td><td>oth types, x<140 constructed on or New large are ry-to-dry only, 1 ransfer only, 200 oth types, 140<x constructed="" on="" or="" td="" y<=""><td>gal/yr r after 12/9/91) ea source 40<x<2,100 12="" 9="" 91)<="" <1,800="" <x<1,800="" after="" gal="" r="" td="" yr=""><td></td></x<2,100></td></x></td></x<2,100>	tr be (c) e	oth types, x<140 constructed on or New large are ry-to-dry only, 1 ransfer only, 200 oth types, 140 <x constructed="" on="" or="" td="" y<=""><td>gal/yr r after 12/9/91) ea source 40<x<2,100 12="" 9="" 91)<="" <1,800="" <x<1,800="" after="" gal="" r="" td="" yr=""><td></td></x<2,100></td></x>	gal/yr r after 12/9/91) ea source 40 <x<2,100 12="" 9="" 91)<="" <1,800="" <x<1,800="" after="" gal="" r="" td="" yr=""><td></td></x<2,100>	

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?	NO YE		
2. Examining the containers for leakage?	מם עם		
3. Closing and securing machine doors except during loading/unloading?	MO VE		
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	NO AG		
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON MIN/A		
PART IV: PROCESS VENT CONTROLS			
In Part II-A:		i	
If classification 1 has been checked, no controls are required. Proceed to Part V	у.		
If classification 2 has been checked, the machine should be equipped with a refu (complete A below).	igerated condenser		
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993			
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	igerated condenser		
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)			
1. Equipped all machines with the appropriate vent controls? Ale e I to Letermine if installed refingeration and well meet 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON refurement, — OY ON ON/A	Sec ort	
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON SIN/A		
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	DY ON		
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON		
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON		

В.	Has the responsible official of an existing large or new large area source also:	
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?	DY DIN
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY DN NA
	Is the temperature differential equal to or greater than 20° F?	DY ON 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?	OY ON MN/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?	OY ON NA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	DY DN SIN/A

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

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? 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? OY ON N N b. Calibrated against a standard gas prior to and after each use (PID/FID only)? $\square Y \square N$ c. Inspected for leaks and obvious signs of wear on a weekly basis? DY DN d. Kept in a clean and secure area when not in use? DY DN $\square Y_{\square} \square N$ e. Verified for accuracy by use of duplicate samples (calorimetric only)? DY MY 3. Has the facility maintained a leak log? 4. Does the responsible official check the following areas for leaks? Hose connections, fittings, $\Box Y$ ŪΝ $\square N$ couplings, and valves Muck cookers $\Box Y$ Door gaskets and seating \Box Y Stills $\Box Y$ Filter gaskets and seating $\square Y$ $\square N$ **Exhaust dampers** $\square Y$ **Pumps** $\Box Y$ $\square N$ Diverter valves $\square Y$ Solvent tanks and containers ΠY ΠN $\square N$ Water separators $\Box Y$

Faye Hilberg	••
Name of Responsible Official	
(Shanles on Nerman)	2/0/97
Inspector's Name (Please Print)	Date of Inspection
(Vluly m Morm	~ / week
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Stiel need to determine if refregeration unit well med Ess specs. The unit on this "Old" machine was just designed to coal perc although there is a conclusive beek.

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY
AIRS ID#: 0330243 DATE: 1/14 FACILITY NAME: Sundain Ca FACILITY LOCATION: 3 Ulary Tensacolor	Mine Mile Nead
PART I: NOTIFICATION	
(check appropriate box)	
1. Existing facility notified DARM by 9/1/96	
2. New facility notified DARM 30 days prior to star	rtup
3. Facility failed to notify DARM to use general per	rmit
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 (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>4. New large area source dry-to-dry only, 140<x<2,100 (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""></x<2,100></td></x<2,100>	4. New large area source dry-to-dry only, 140 <x<2,100 (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""></x<2,100>
This is a correct facility classification	DID NOT HAVE
If no, please check the appropriate classification:	Perc Recent
facility qualified for a general per facility exceeds above limits and i	
facility was <u>260</u> gallons.	urchased within the preceding 12 months by this dry cleaning
ON 1/24/97 Ms Hilbert 210 galin 95 260 galin 96	of 4 Called mi until the perc in formation Revised 10/28/96

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?	מם צם			
2. Examining the containers for leakage?	OY ON			
3. Closing and securing machine doors except during loading/unloading?	מם צם			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	מם צם			
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ON/A			
PART IV: PROCESS VENT CONTROLS				
In Part II-A:				
If classification 1 has been checked, no controls are required. Proceed to Part V.				
If classification 2 has been checked, the machine should be equipped with a refri (complete A below).	gerated condenser			
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993				
If classification 4 has been checked, the machine should be equipped with a 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?	OY ON			
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?	OY ON ON/A			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	OY ON			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON			

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

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? NOT ON SIRE 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: 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 and parts installed w/in 5 days of receipt? OY ON 4. Maintained calibration data? (for direct reading instruments only) DY ON ON/A 5. Maintained exhaust duct monitoring data on perc concentrations? □Y □N 6. Maintained startup/shutdown/malfunction plan? NO YO 7. Maintained deviation reports? DY DN Problem corrected? OY ON DY ON ON/A 8. Maintained compliance plan, if applicable?

P.	ART VI: LEAK DETECTION AND R	EPAIR	S				
1.	Does the responsible official conduct a	weekly (for small	sources, bi-weekly) leak detection ar	nd rep	air	
	inspection?				□Y	ИĠ	
2.	Which method of detection is used by the	ne respo	nsible of	ficial?			
	Visual examination (condensed so	olvent or	n exterior	surfaces)			
	Physical detection (airflow felt thr			,			
	Odor (noticeable perc odor)			•			
	Use of direct-reading instrumentar	tion (FI	D/PID/ca	lorimetric tubes)			*
	If using direct-reading instrume	ntation	, is the e	quipment:			
	a. Capable of detecting p	erc vap	or concer	ntrations in a range of 0-500 ppm?	ПY	□N	
	b. Calibrated against a s (PID/FID only)?	tandard	gas prior	to and after each use	ПY	□N	
	c. Inspected for leaks and	d obviou	ıs signs c	of wear on a weekly basis?	ΠY	□N	
	d. Kept in a clean and se	cure are	ea when i	not in use?	ПY	□N	
e. Verified for accuracy by use of duplicate samples (calorimetric only)?							
3. Has the facility maintained a leak log?					□Y	NE	
4.	Does the responsible official check the i	followin	g areas fo	or leaks?			
	Hose connections, fittings, couplings, and valves	□Y	□N	Muck cookers	ΟY	□N	
	Door gaskets and seating	ПY	□N	Stills	ПY	□N	
	Filter gaskets and seating	ПY	□N	Exhaust dampers	ПY	□N	
	Pumps	ПY	ПN	Diverter valves	ПY	□N	
	Solvent tanks and containers	ПY	ПN	Cartridge filter housings	ПY	□N	
	Water separators	ΠY	□N				
_	Far JE Hilber V Name of Responsible Officia	1 .		. 1 . 1 -			
	Than los M. Norman	1/14/97					
	Inspector's Name (Please Prin	Date of Inspe	ction				

Approximate Date of Next Inspection

Inspector's Signature

ADDITIONAL SITE INFORMATION:

MFR 2-4-97:

Mr Ceail Sevain said Speed Queen's Lan't conduce the pere. They have to be no tro fitted, I have a capy of the maintenance manual which shows a condenser box. It's net appoint what it Loss. There is no temperature sensor on the separature of the experiment. Cos a minimum a temperature sursor must be installed.

as a follow up I contacted Jim Ellis a Raytheon apphane: Commercial Loundry (maker of 5 red Queen) to see if the refraginated and would meet specifications.

115 Said he thought it would bring temp Lawn to temp Senson is meetalled.

Jun Ellis 3 414-748-3121 ext 4201

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	ANNUAL		COMPLAINT/DISCOVERY	U .
	RE-INSPECTION	×		
<u> </u>				
AIRS ID#: 0330243 I	DATE: 2/14/9-	TIME	IN: <u>0930</u> TIME OUT: <u>/</u>	020
FACILITY NAME:	esturi Coin	Laund	y & Dry Cloaners.	
FACILITY LOCATION: 3	West Thene	Mil	1 Rosel	
4) rusaco for	F-6.3	2514	
PART I: NOTIFICATION		,		
(check appropriate box)				
1. Existing facility notified DAR	RM by 9/1/96			
2. New facility notified DARM:	30 days prior to startuj	p		ه ا
3. Facility failed to notify DARM	M to use general permi	it		\ 0
	=			
PART II: CLASSIFICATION		ME TO A STREET OF STREET WAS TO STREET		
Facility indicated on notification			<u> </u>	
(check appropriate box)	Co	mpletal	normal Neil's coutin	
A.	ar	e inform	ied her of meth ne	0 L
1. Existing small area source	ce 🛚 2.	. New small	area source	
	·	rv-to-dry only	v<140 gallor 914 /see.	
dry-to-dry only, x<140 gal/yr	d tr	ry-to-dry only	xx<140 gal/yr Jet Cone	P Seuw
dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr	D	om types, x<	~ .	P Seuv
dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr	D	om types, x<	, x<140 gal/yr Jet Cone <200 gal/yr Perf m 40 gal/yr 1 or after 12/9/91)	p Seux
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) Existing large area source	ce 🗆 4.	constructed or New large	area source	P Seun
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) Existing large area sourcedry-to-dry only, 140 <x<2,100< td=""><td>ce</td><td>constructed or New large ry-to-dry only</td><td>area source</td><td>p Seux</td></x<2,100<>	ce	constructed or New large ry-to-dry only	area source	p Seux
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) Existing large area source dry-to-dry only, 140 <x<2,100 200<x<1,800="" g<="" only,="" td="" transfer=""><td>ce</td><td>constructed or New large ry-to-dry only ransfer only, 2</td><td>area source</td><td>P Seun</td></x<2,100>	ce	constructed or New large ry-to-dry only ransfer only, 2	area source	P Seun
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) Existing large area sourcedry-to-dry only, 140 <x<2,100< td=""><td>ce</td><td>oun types, x constructed or New large ry-to-dry only ransfer only, 2 oth types, 140</td><td>area source</td><td>P Seun</td></x<2,100<>	ce	oun types, x constructed or New large ry-to-dry only ransfer only, 2 oth types, 140	area source	P Seun
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) Existing large area source dry-to-dry only, 140 <x<2,100 140<x<1,800="" 200<x<1,800="" <="" both="" g="" gal="" only,="" td="" transfer="" types,=""><td>ce</td><td>oun types, x constructed or New large ry-to-dry only ransfer only, 2 oth types, 140</td><td>area source</td><td>p Seun</td></x<2,100>	ce	oun types, x constructed or New large ry-to-dry only ransfer only, 2 oth types, 140	area source	p Seun
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) Existing large area source dry-to-dry only, 140 <x<2,100 (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" g="" gal="" only,="" td="" transfer="" types,=""><td>ce</td><td>om types, x constructed or . New large try-to-dry only ransfer only, 2 oth types, 140 constructed or</td><td>area source</td><td>P Seun</td></x<2,100>	ce	om types, x constructed or . New large try-to-dry only ransfer only, 2 oth types, 140 constructed or	area source	P Seun
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) Existing large area source dry-to-dry only, 140 <x<2,100 (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" before="" both="" classified="" correct="" facility="" g="" gal="" is="" only,="" qualified<="" td="" this="" transfer="" types,=""><td>ce</td><td>oun types, x constructed or New large ry-to-dry only ransfer only, 2 oth types, 140 constructed or Y</td><td>area source</td><td>P Seun</td></x<2,100>	ce	oun types, x constructed or New large ry-to-dry only ransfer only, 2 oth types, 140 constructed or Y	area source	P Seun

PART III: GENERAL CONTROL REQUIREMENTS					
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	i				
1. Storing perchloroethylene in tightly sealed and impervious containers?	OY ON				
2. Examining the containers for leakage?	OY ON				
3. Closing and securing machine doors except during loading/unloading?	OY ON				
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	חם אם				
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ON/A				
PART IV: PROCESS VENT CONTROLS					
In Part II-A:					
If classification 1 has been checked, no controls are required. Proceed to Part	v.				
If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).					
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993					
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	rigerated condenser				
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)	·				
1. Equipped all machines with the appropriate vent controls?	OY, ON				
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A				
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON ON/A				
Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	OY ON				
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON				
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON				

В.	Has the responsible official of an existing large or new large area source also:	·
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?	OY ON
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON
	Is the temperature differential equal to or greater than 20° F?	□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?	OY ON ON/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?	OY ON
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y □N □N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS						
Has the responsible official: (check appropriate boxes)	-					
Maintained receipts for perc purchased?	OY ON					
2. Maintained rolling monthly averages of perc consumption?	OY ON					
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?	OY ON					
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?						
7. Maintained deviation reports?	OY ON					
Problem corrected?	OY ON					
8. Maintained compliance plan, if applicable?	□Y □N □N/A					

P	ART VI: LEAK DETECTION AN	D REPAIR	S					
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
	inspection?				ПY	□N		
2.	2. Which method of detection is used by the responsible official?							
	Visual examination (condense							
	Physical detection (airflow fel							
	Odor (noticeable perc odor)							
	Use of direct-reading instrume	entation (FII	D/PID/ca	lorimetric tubes)				
	If using direct-reading instr	umentation,	, is the e	quipment:				
	a. Capable of detecti	ng perc vap	or conce	ntrations in a range of 0-500 ppm?	$\square Y$	□N		
		t a standard	gas prio	r to and after each use		-		
	(PID/FID only)?					□N		
				of wear on a weekly basis?		□N		
	d. Kept in a clean ar					□N		
		•	f duplica	te samples (calorimetric only)?		□N		
3. Has the facility maintained a leak log?					ЦY	□N		
4.	Does the responsible official check	the followin	g areas f	or leaks?				
	Hose connections, fittings, couplings, and valves	ПY	ПN	Muck cookers	ПY	□N		
	Door gaskets and seating	ПY	□N	Stills	ПY	□N		
:	Filter gaskets and seating	ПY	□N	Exhaust dampers	ПY	□N		
	Pumps	ПY	□N	Diverter valves	ПY	□N		
	Solvent tanks and containers	ПY	□N	Cartridge filter housings	ПY	□N		
	Water separators	ПY	□N					
	Forge Hil her V							
	Name of Responsible Of	1						
_(1 malos Norman	2/14/97						
/	Inspector's Name (Please	Date of Inspec	ction					
(Year Monn			Approximate Date of Next Inspection				
	Inspector's Signature	Approximate Date of N	next l	nspection				

ADDITIONAL SITE INFORMATION:

This visit was to tip up love end.

- Dop won't get call enough then the moderner will have to be mothered/ retropetted.
- B Completed servis notification.
- @ Compacted Armual Compliano form,
- D) Mr / Lelher V said the refrageration unit is broken and she is looking for one she caused truey & use for spane for spane for the she has, business (It's not a hig payed her has,
- I told her it was a runlation to nun the machine units and the refragiration unit working,
- Eshis to call mig she permanently showts leaven 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):					
Face 1 Hilbornt					
2. Site Name (For example, plant name or number):					
2. She ivame (a or example, plant name of number).					
3. Hazardous Waste Generator Identification Number:					
3. Hazardous Waste Generator Identification Number:					
4. Facility Location: 3 WEST 9 Mile Rd Street Address: 3 WEST 9 Mile Rd					
City: PENSACOIA 7 L County: ESCANDIA Zip Code: 32514					
15 KGOIN, +L SCOCHABIA - SOM JESTY					
5. Facility Identification Number (DEP Use);					
0330943					
	<u></u>				
Responsible Official					
6. Name and Title of Responsible Official:					
TAYE A. H. Ibert - OWNER					
7. Responsible Official Mailing Address:					
Organization/Firm: Street Address: 3 WEST PM. /4 Rd					
	, ,				
	7				
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.

Speedquern		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control 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	ŀ	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(c) No control devices	-					`			
2.(a) What was the total [26]	quan gall	tity of perchl ons	oroethylene	(perc) purchased i	in the latest 1	12 m	onths?	
(b) If less than 12 mon Check why it is les] New stor	re: [] Did	d not	keep records	s:
3. What is the facility's so (Indicate with an "X".					initions four	nd in section	(3) of	Part II?	
Existing small a	rea s	ource []	N	ew sr	nall area sou	rce [J		
Existing large an	ea so	ource [X]	N	ew la	rge area sou	rce []		

 What control technology is required on machines pursuant to section (5) of Part II of (Indicate with an "X".) 	this notification form?
Existing large area source Carbon adsorber Refrigerated condenser	
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 pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating unit 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 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural guident propane or fuel oil containing no more than one percent sulfur is fired.	
All steam and hot water generating units exempt 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 permit;	of this general
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration (f) Start-up, shutdown, malfunction plan	
(f) Start-up, shutdown, malfunction plan	

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)
广文〕	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notific statements maintain t comply wi	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the 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 the all terms and conditions of this general permit as set forth in Part II of this notification form.
	Type Q Hellent Date Date

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

<u> </u>
FACILITY NAME: SUNSHING COIN LAUNDRY + DRY CLEMASES DATE: 2/14/97
FACILITY LOCATION: 3 WEST 9 Mile Rl
PENSAcola, 71 32514
Annual Reporting Period: 9-1 196 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.
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: DIENT HAVE TEMP CERSOR INSTALLED / had not days leak there's
Didn't have Temp CERSON INSTAlled / had not done leak therks Exact period of non-compliance: from 9-1-96 to Z-14-5°7
Action(s) taken to achieve compliance: FAIKEN TO CONTRACTOR About Installing / SET UP 1095
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 9-1-56 to 2-14-57
Action(s) taken to achieve compliance: Hard Not Submitted PERMIT NOTIFICATION
Method used to demonstrate compliance: 8 Uhu thed 2 (4/37
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) Signature Date

Page _____ of ____

^{*}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.