



0571038

Department of Environmental Protection

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

September 13, 1996

Mr. John R. Garrett
Vice President
Trophy Cleaners, Inc.
Post Office Box 1084
Tyler, Texas 75710

Dear Mr. Garrett:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 19, 1996.

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

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

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

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

Sincerely,

Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

/DD

cc: Ms. Liz Deken, Hillsborough County

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



Department of Environmental Protection

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

Virginia B. Wetherell
Secretary

August 23, 1996

Mr. John R. Garrett
Vice President
Trophy Cleaners, Inc.
3217 South McDill
Tampa, Florida 33629

Dear Mr. Garrett:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 19, 1996.

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

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Sincerely,

Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

/DD

cc: Ms. Liz Deken, Hillsborough County

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

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): Trophy Cleaners, Inc.
2. Site Name (For example, plant name or number): Tampa - McDill
3. Hazardous Waste Generator Identification Number: *
4. Facility Location: 3217 South McDill Street Address: City: Tampa County: Hillsborough Zip Code: 33629
5. Facility Identification Number (DEP Use): 0571038

* Applied for (New Facility) Responsible Official

6. Name and Title of Responsible Official: John R. Garrett, Vice President
7. Responsible Official Mailing Address: P. O. Box 1084 Organization/Firm: Trophy Cleaners, Inc. Street Address: 225 South College City: Tyler, TX County: Smith Zip Code: 75710
8. Responsible Official Telephone Number: Telephone: (903) 592 - 8509 Fax: (903) 592 - 2793

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): Bruce McDaniel (District Manager)
10. Facility Contact Address: Street Address: 3217 South McDill City: Tampa County: Hillsborough Zip Code: 33629
11. Facility Contact Telephone Number: Telephone: (813) 832 - 6181 Fax: (813) 835-0135

RECEIVED

AUG 19 1996

Bureau of Air Monitoring
& Mobile Sources

Estimated Start up Date October 15, 1996

Facility Information

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

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Example</i>									
	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit	#1	15/Oct/96							
(1) w/ ref. condenser	#1	15/Oct/96							
(2) w/ carbon adsorber	#1	15/Oct/96							
(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?

gallons

Estimated for new facility

(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

New large area source

New Store

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

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
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
- (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

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) _____

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.


Signature John R. Garrett, Vice President

8-13-96
Date

TROPHY

DRY CLEANERS

2790 Gulf to Bay Blvd.
Clearwater, Fl. 34619
727-797-5255

Bureau of Air Monitoring
& Mobile Sources

JUN 21 1999

RECEIVED

May 20, 1999

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

To Whom It May Concern:

This letter is a follow up to my letter dated February 4, 1999 in which I informed you of the closing of our Tampa dry cleaning plant at 3217 So. MacDill Ave.

Please be advised that the two dry cleaning machines (Real Star & Renzacci) have been transferred to and are operational at our existing plant at 2790 Gulf to Bay Blvd., Clearwater, Fl. 33759.

The two older Union dry cleaning machines that were being used in Clearwater are no longer in operation at this plant. One of the machines has been sold and moved off sight and the other is for sale and is in our warehouse at our Gulf to Bay location.

Sincerely,



Larry Steed
Regional Manager

cc: Jerry Campbell, Director
Environmental Protection Commission
Of Hillsborough County
Air Management Division

Margaret Hennis
Pinellas County Department of Environmental Mgt.
Air Quality Division

TROPHY DRY CLEANERS

2790 Gulf to Bay Blvd.
Clearwater, Fl. 34619
727-797-5255

RECEIVED

FEB 08 1999

Bureau of Air Monitoring
& Mobile Sources

February 4, 1999

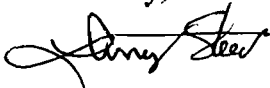
Department of Environmental Protection
Title V General Permitting Office
Bureau of Air Monitoring and Mobile Sources, MS-5510
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

To Whom It May Concern:

This letter is to advise you that as of February 2, 1999 Trophy Cleaners, Inc. has discontinued its dry cleaning plant operations at 3217 South MacDill Ave., Tampa, Florida 33629. A small portion of the building is being used for drop off \ pick up only. The cleaning is performed at our Clearwater plant. Please place our Air Permit # 057-1038 on the inactive list.

The two dry cleaning machines at the MacDill Ave. location may be transferred to our Clearwater plant in order to upgrade our equipment there. If this transfer occurs it will be within 60 to 90 days and I will notify you at that time of the exact circumstances.

Sincerely,



Larry Steed
Regional Manager

cc: Jerry Campbell, Director
Environmental Protection Commission
Of Hillsborough County
Air Management Division

October 22, 1997

General Permit Section
Bureau of Air Monitoring and Mobile Sources, MS-5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

To Whom It May Concern;

Please be advised that Trophy Cleaners, Inc. has added a second dry cleaning machine at its facility located at 3217 S. MacDill Ave., Tampa, Fl. 33629. The Air Permit number for that location is 057-1038.

The additional machine is a Renzacci Dual 35, dry to dry with refrigerated condenser, and was installed October 13, 1997. Our existing machine is a Realstar 75, dry to dry with refrigerated condenser, and was installed in March of 1997.

If you have any questions regarding this addition please contact our Florida Regional Manager, Larry Steed, at 813-832-6184.

Thank You,



John R. Garrett
Vice President, Trophy Cleaners, Inc.

cc: Jim Holton
E.P.C. of Hillsborough Co.
Air Management Division

RECEIVED

OCT 29 1997

Bureau of Air Monitoring
& Mobile Sources

P.O. BOX 1084
TYLER, TX. 75710



General Permit Section, MS-5510
Bureau of Air Monitoring & Mobile Sources
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

32399-6316



BEST AVAILABLE COPY

March 7, 1997

Mr. Bruce M. King
E.P.C. of Hillsborough Co.
Air Management Division
1410 N. 21st Street
Tampa, Florida 33606
Fax# 813-272-5605

Dear Mr. King;

Please be advised that Trophy Cleaners, Inc. will open a new dry-cleaning plant on or around March 17, 1997 at 3217 South MacDill Ave. Tampa, Florida 33629. This new facility will take the place of our plant at 6821 W. Hillsborough Ave. Tampa, Florida 33634. The equipment from the Hillsborough plant will be transferred to our plant at 2700 Gulf To Bay Blvd. Clearwater, Florida 34619 and the Hillsborough location will become a drop store only.

Would you please notify all concerned departments of this change and if you require additional information please contact our Florida Regional Manager, Larry Stead, at 013-032-6184.

Thank You,



John R. Garrett
Vice President
Trophy Cleaners, Inc.

done

Trophy Cleaners

(Name)
Trophy Cleaners

APPROVED SIGNATURES
Approved this _____ day of _____, 19____
BY: _____
TITLE: _____

AIRS ID# 0571038

Best Available Copy

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: TROPHY CLEANERS, INC. DATE: 3-26-97
FACILITY LOCATION: 3217 S. McDILL AVE TAMPA, FL 33629

Annual Reporting Period: 19 TO 19
New Store Compliance Certification March 18, 1997

Based on each term or condition of the Title V general air permit, my facility is in compliance with DEP Rule 62-212.300, 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:

Exact period of non-compliance: from to

Action(s) taken to achieve compliance:

Method used to demonstrate compliance:

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from to

Action(s) taken to achieve compliance:

Method used to demonstrate compliance:

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: John R. Garrett Name (Please Print) V.P. Signature V.P. 3/27/97 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.

March 7, 1997

Mr. Bruce M. King
E.P.C. of Hillsborough Co.
Air Management Division
1410 N. 21st Street
Tampa, Florida 33606
Fax# 813-272-5605

Dear Mr. King;

Please be advised that Trophy Cleaners, Inc. will open a new dry-cleaning plant on or around March 17, 1997 at 3217 South MacDill Ave. Tampa, Florida 33629. This new facility will take the place of our plant at 1821 W. Hillsborough Ave. Tampa, Florida 33634. The equipment from the Hillsborough plant will be transferred to our plant at 2700 Gulf To Bay Blvd. Clearwater, Florida 34619 and the Hillsborough location will become a drop store only.

Would you please notify all concerned departments of this change and if you require additional information please contact our Florida Regional Manager, Larry Steel, at 013-032-6184.

Thank You,



John R. Garrett
Vice President
Trophy Cleaners, Inc.

done

Trophy Cleaners

Trophy Cleaners

Approved this _____ day of _____, 19 _____
BY: _____
TITLE: _____

✓

**TITLE V AIR QUALITY GENERAL PERMIT
INSPECTION SUMMARY REPORT**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: <u>1:40</u>	TIME OUT: <u>3:15</u>	AIRS ID#: <u>0571038</u>
TYPE OF FACILITY: <u>Perc Dry Cleaner</u>		
FACILITY NAME: <u>Trophy Cleaners</u>		DATE: <u>3/25/97</u>
FACILITY LOCATION: <u>3217 Mac Dill</u> <u>TAMPA, FL 33629</u>		
RESPONSIBLE OFFICIAL: <u>John Garrett</u>		PHONE NUMBER: <u>832-6189</u>

- 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

COMMENTS: New Store opened March 18, 1997
all new forms were available to begin record keeping
as required by rule

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

DATE OF NEXT INSPECTION: 1 year
(Approximate)

INSPECTION CONDUCTED BY: Bruce M. King
(Please Print)

INSPECTOR'S SIGNATURE: Bruce M. King PHONE NUMBER: 813-272-5530

✓

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
 RE-INSPECTION

AIRS ID#:	<u>05-71038</u>	DATE:	<u>3/25/97</u>	TIME IN:	<u>1:40</u>	TIME OUT:	<u>3:15</u>
FACILITY NAME:	<u>Trophy Cleaners</u>						
FACILITY LOCATION:	<u>3217 MAC AVE.</u>						
	<u>Tampa, FL 33629</u>						
	<u>ph. 832-6184</u>						

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)

- | | |
|--|---|
| <p>A.</p> <ol style="list-style-type: none">1. Existing small area source <input type="checkbox"/>
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 <input type="checkbox"/>
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) | <ol style="list-style-type: none">2. New small area source <input checked="" type="checkbox"/>
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 <input type="checkbox"/>
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 < 140 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?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
2. Examining the containers for leakage?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
3. Closing and securing machine doors except during loading/unloading?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 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). <i>Carbon adsorber must have been installed prior to September 22, 1993</i>	
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?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> 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?
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 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) ~~Y~~ ~~N~~

Physical detection (airflow felt through gaskets) ~~Y~~ ~~N~~

Odor (noticeable perc odor) ~~Y~~ ~~N~~

Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Y N

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	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Muck cookers	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Door gaskets and seating	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Stills	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Filter gaskets and seating	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Exhaust dampers	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Pumps	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Diverter valves	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Solvent tanks and containers	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Cartridge filter housings	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Water separators	<input type="checkbox"/> Y <input type="checkbox"/> N		

John R. Garrett
Name of Responsible Official

Bruce M. King
Inspector's Name (Please Print)

Bruce M. King
Inspector's Signature

3/25/97
Date of Inspection

1 year
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

New Store

Machine placed in service
3/18/97. Start-up required
250 gal of perc. Annual usage
unknown, however, should be
less than 140 gal/year

all forms were available to begin
record keeping requirements.

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0571038 TROPHY CLEANERS INC JOHN R GARRETT 225 SOUTH COLLEGE TYLER TX 75710

Do NOT Remove Label

RECEIVED FEB 11 1998 Bureau of Air Monitoring & Mobile Sources APR 3 1998

Annual Reporting Period: MARCH 26, 1997 TO JANUARY 1998

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. [X] 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:

Exact period of non-compliance: from ... to ... Action(s) taken to achieve compliance: Method used to demonstrate compliance:

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from ... to ... Action(s) taken to achieve compliance: Method used to demonstrate compliance:

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: John R GARRETT Signature Date 1/15/98

*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**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
 RE-INSPECTION

AIRS ID#:	<u>571038</u>	DATE:	<u>5/14/98</u>	TIME IN:	<u>9:40</u>	TIME OUT:	<u>11:35</u>
FACILITY NAME:	<u>TROPHY CLEANERS</u>						
FACILITY LOCATION:	<u>3217 S. McDILL AVE</u> <u>TAMPA, FL 33629</u>						
RESPONSIBLE OFFICIAL:	<u>JOHN GARRETT</u>	PHONE:	<u>(813) 832-6184</u>				
CONTACT NAME:	<u>LARRY STEED</u>	PHONE:	<u>(813) 832-6184</u>				

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 & Mobile Sources

PART I: NOTIFICATION

(check appropriate box)

1. New facility notified DARM 30 days prior to startup	<input type="checkbox"/>
2. Facility failed to notify DARM to use general permit	<input type="checkbox"/>

N/A

PART II: CLASSIFICATION

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

<input type="checkbox"/> No notification form
<input type="checkbox"/> 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)	<input type="checkbox"/>	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)	<input type="checkbox"/>
3. Existing 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 before 12/9/91)	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>

5. This is a correct facility classification Y N Can not determine

If no, please check the appropriate classification:

<input type="checkbox"/> facility qualified for a general permit as number _____ above
<input type="checkbox"/> 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 502 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 N/A
- 2. Examining the containers for leakage? Y N N/A
- 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 N/A
- 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/bi-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 N/A
- 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 N/A
Is the temperature differential equal to or greater than 20° F? Y N N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Y N N/A
Is the perc concentration equal to or less than 100 ppm? Y N N/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Y N N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Y N N/A
6. Routed airflow to the carbon adsorber (if used) at all times? 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 N/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? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports?
Problem corrected? Y N N/A
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. Has the facility maintained a leak log? Y N
3. Does the responsible official check the following areas for leaks?
- | | | | |
|---|---|---------------------------|---|
| Hose connections, fittings, couplings, and valves | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/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: N/A
- 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

ROGER ZHU

Inspector's Name (Please Print)

5/14/98

Date of Inspection

Roger Zhu

Inspector's Signature

1 YEAR

Approximate Date of Next Inspection

INSPECTION REPORT FORM
 ENVIRONMENTAL PROTECTION COMMISSION OF HILLSBOROUGH COUNTY

FACILITY: Trophy Cleaners PAGE 1 OF 1

FACILITY ADDRESS: 3217 S. McDill Ave. CITY: Tampa
PHONE: (813) 832-6184

MAILING ADDRESS: Same CITY: Tampa FLA ZIP: 33629

INSPECTION DATE: May 14, 1998	TIME IN: 9:40	TIME OUT: 11:35	INSPECTION TYPE: non-CDS	STATUS: In Compliance
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NEDS NUMBER: 571038

SOURCE DESCRIPTION: Perc Dry Cleaner

CONTACT(S): Larry Steed

Today's visit was to conduct the annual inspection.
 This facility has two machines now. There is only one machine listed on the Notification Form which is Realstar RS-640, SN 1-401 (brand new machine). This facility installed an additional used machine (Renzacci Dual 35) later on Oct 13, 1997 (Note: The responsible official, John Garrett, notified the FDEP about the additional installation on Oct 22, 1997).
 The machines were in operation today. No leaks or odors were noticed.
 This is a very clean facility. Both machines are well maintained.
 The contact person for this facility listed on the Notification Form is no longer working there. The new contact person is Mr. Larry Steed.
 The record keeping is in a good shape. The perc purchase receipts and the rolling total indicated that usage of perc within the past 12 months was 502 gallons.

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INSPECTED BY: Roger Zhu DATE: May 14, 1998

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

RECEIVED
FEB 11 1998
Bureau of Air Monitoring
& Mobile Sources

AIRS ID#0571038
TROPHY CLEANERS INC
JOHN R GARRETT
225 SOUTH COLLEGE
TYLER TX 75710

Do NOT Remove Label

Annual Reporting Period: _____ 19____ TO _____ 19____

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:

Exact period of non-compliance: from _____ to _____
Action(s) taken to achieve compliance: _____
Method used to demonstrate compliance: _____

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____
Action(s) taken to achieve compliance: _____
Method used to demonstrate compliance: _____

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: John R GARRETT [Signature] 1/15/98
Name (Please Print) Signature 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.



**TITLE V AIR QUALITY GENERAL PERMIT
INSPECTION SUMMARY REPORT**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: 9:40 TIME OUT: 11:35 AIRS ID#: 571033
 TYPE OF FACILITY: PERC DRY CLEANER
 FACILITY NAME: TROPHY CLEANERS DATE: 5-14-98
 FACILITY LOCATION: 3217 S. McDILL AVE
TAMPA, FL 33629
 RESPONSIBLE OFFICIAL: JOHN GARRETT PHONE NUMBER: (813) 832-6184

- 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

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 Bureau of Air Monitoring
 & Mobile Sources

COMMENTS:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO N/A

DATE OF NEXT INSPECTION: 1 YEAR
 (Approximate)

INSPECTION CONDUCTED BY: ROGER ZHU
 (Please Print)

INSPECTOR'S SIGNATURE: [Signature] PHONE NUMBER: (813) 272-5530

✓

**TITLE V AIR QUALITY GENERAL PERMIT
INSPECTION SUMMARY REPORT**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: <u>9:00</u>	TIME OUT: <u>10:35</u>	AIRS ID#: <u>571038</u>
TYPE OF FACILITY: <u>PERC DRY CLEANER</u>		
FACILITY NAME: <u>TROPHY CLEANERS</u>		DATE: <u>2/10/98</u>
FACILITY LOCATION: <u>3217 S. McDILL AVE</u> <u>TAMPA, FL 33629</u>		
RESPONSIBLE OFFICIAL: <u>JOHN GARRETT</u>		PHONE NUMBER: <u>(813) 832-6184</u>

- 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
	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.2em; font-weight: bold; margin-bottom: 10px;">MAR 19 1999</div> <div style="font-size: 0.8em;">Bureau of Air Monitoring & Mobile Sources</div>

COMMENTS:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO N/A

DATE OF NEXT INSPECTION: N/A

(Approximate)

INSPECTION CONDUCTED BY: ROGER ZHU

(Please Print)

INSPECTOR'S SIGNATURE: Roger Zhu PHONE NUMBER: (813) 272-5530

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
RE-INSPECTION

AIRS ID#:	571038	DATE:	2/10/99	TIME IN:	9:00	TIME OUT:	10:35
FACILITY NAME:	TROPHY CLEANERS						
FACILITY LOCATION:	3217 S. McDILL AVE Tampa, FL 33629						
RESPONSIBLE OFFICIAL:	JOHN GARZETT	PHONE:	(813) 832-6184				
CONTACT NAME:	SAME	PHONE:	SAME				

PART I: NOTIFICATION

(check appropriate box)

1. New facility notified DARM 30 days prior to startup
 2. Facility failed to notify DARM to use general permit
- N/A

PART II: CLASSIFICATION

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

- No notification form
 Drop store/out of business/petroleum

A.

- | | |
|--|--|
| 1. Existing small area source <input type="checkbox"/>
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 <input type="checkbox"/>
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 <input type="checkbox"/>
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 before 12/9/91) | 4. New large area source <input type="checkbox"/>
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) |
5. This is a correct facility classification Y N Can not determine

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 _____ 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 N/A
- 2. Examining the containers for leakage? Y N N/A
- 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 N/A
- 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/bi-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 N/A
- 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 N/A
Is the temperature differential equal to or greater than 20° F? Y N N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Y N N/A
Is the perc concentration equal to or less than 100 ppm? Y N N/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Y N N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Y N N/A
6. Routed airflow to the carbon adsorber (if used) at all times? 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 N/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? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N N/A
Problem corrected? Y N N/A
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. Has the facility maintained a leak log? Y N
3. Does the responsible official check the following areas for leaks?
- | | | | |
|---|--|---------------------------|--|
| Hose connections, fittings, couplings, and valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/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:** N/A
- 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

ROGER ZHU
Inspector's Name (Please Print)

2/10/99
Date of Inspection

Roger Zhu
Inspector's Signature

N/A
Approximate Date of Next Inspection

INSPECTION REPORT FORM
ENVIRONMENTAL PROTECTION COMMISSION OF HILLSBOROUGH COUNTY

FACILITY: Trophy Cleaners | PAGE 1 OF 1

FACILITY ADDRESS: 3217 S. McDill Ave. | CITY: Tampa
PHONE: (813) 832-6184

MAILING ADDRESS: Same | CITY: Tampa | FLA | ZIP: 33629

INSPECTION DATE: Feb 10, 1999	TIME IN: 9:00	TIME OUT: 10:35	INSPECTION TYPE: non-CDS	STATUS:
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NEDS NUMBER: 571038

SOURCE DESCRIPTION: Perc Dry Cleaner

CONTACT(S): Larry Steed

The Trophy Cleaner sent us a letter on 2/4/99 to advise that this facility has discontinued its cleaner operations to be a drop store only.

Today's visit confirmed the information provided, that the facility is in the transition process. The two dry cleaning machines haven't been disconnected yet. However, some other equipment (boiler and press machine) have been moved out already.

Also, I was told by an employee who was the only person there that the both units have been shut down since December, 1998. The new machine (Realstar RS-640) will be moved to Clearwater, FL and put the old one (Renzacci Dual 35) for sale.

INSPECTED BY: Roger Zhu

DATE: Feb 10, 1999

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
 RE-INSPECTION

AIRS ID#:	571038	DATE:	2/10/99	TIME IN:	9:00	TIME OUT:	10:35
FACILITY NAME:	TROPHY CLEANERS						
FACILITY LOCATION:	3217 S. McDILL AVE TAMPA, FL 33629						
RESPONSIBLE OFFICIAL:	JOHN GARRETT	PHONE:	(813) 832-184				
CONTACT NAME:	SAME	PHONE:	SAME				

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 Bureau of Air Monitoring
 Mobile Sources
 FEB 21 1999

PART I: NOTIFICATION

(check appropriate box)

1. New facility notified DARM 30 days prior to startup	<input type="checkbox"/>
2. Facility failed to notify DARM to use general permit	N/A <input type="checkbox"/>

PART II: CLASSIFICATION

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

<p><input type="checkbox"/> No notification form</p> <p><input type="checkbox"/> Drop store/out of business/petroleum</p> <p>A.</p> <table style="width: 100%;"> <tr> <td style="width: 50%;"> <p>1. Existing small area source <input type="checkbox"/></p> <p>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)</p> </td> <td style="width: 50%;"> <p>2. New small area source <input type="checkbox"/></p> <p>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)</p> </td> </tr> <tr> <td> <p>3. Existing large area source <input type="checkbox"/></p> <p>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 before 12/9/91)</p> </td> <td> <p>4. New large area source <input type="checkbox"/></p> <p>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)</p> </td> </tr> </table> <p>5. This is a correct facility classification <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Can not determine</p> <p>If no, please check the appropriate classification:</p> <p><input type="checkbox"/> facility qualified for a general permit as number _____ above</p> <p><input type="checkbox"/> facility exceeds above limits and is not eligible for a general permit</p>	<p>1. Existing small area source <input type="checkbox"/></p> <p>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)</p>	<p>2. New small area source <input type="checkbox"/></p> <p>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)</p>	<p>3. Existing large area source <input type="checkbox"/></p> <p>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 before 12/9/91)</p>	<p>4. New large area source <input type="checkbox"/></p> <p>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)</p>	<p>B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was _____ gallons.</p>
<p>1. Existing small area source <input type="checkbox"/></p> <p>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)</p>	<p>2. New small area source <input type="checkbox"/></p> <p>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)</p>				
<p>3. Existing large area source <input type="checkbox"/></p> <p>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 before 12/9/91)</p>	<p>4. New large area source <input type="checkbox"/></p> <p>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)</p>				

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? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 2. Examining the containers for leakage? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 3. Closing and securing machine doors except during loading/unloading? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> 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? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? | <input type="checkbox"/> Y <input type="checkbox"/> 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 N/A
Is the temperature differential equal to or greater than 20° F? Y N N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Y N N/A
Is the perc concentration equal to or less than 100 ppm? Y N N/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Y N N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Y N N/A
6. Routed airflow to the carbon adsorber (if used) at all times? 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 N/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? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N N/A
Problem corrected? Y N N/A
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. Has the facility maintained a leak log? Y N
3. Does the responsible official check the following areas for leaks?
- | | | | |
|---|--|---------------------------|--|
| Hose connections, fittings, couplings, and valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Muck cookers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Door gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Stills | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Filter gaskets and seating | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Exhaust dampers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Pumps | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Diverter valves | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Solvent tanks and containers | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A | Cartridge filter housings | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| Water separators | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/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:** N/A
- 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

ROGER ZHU

Inspector's Name (Please Print)

2/10/99

Date of Inspection

Roger Zhu

Inspector's Signature

N/A

Approximate Date of Next Inspection

**TITLE V AIR QUALITY GENERAL PERMIT
INSPECTION SUMMARY REPORT**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: 9:00 TIME OUT: 10:35 AIRS ID#: 571038
 TYPE OF FACILITY: PERC DRY CLEANER
 FACILITY NAME: TROPHY CLEANERS DATE: 2/10/98
 FACILITY LOCATION: 3217 S. McDILL AVE
TAMPA, FL 33629
 RESPONSIBLE OFFICIAL: JOHN GARRETT PHONE NUMBER: (813) 832-6184

- 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

COMMENTS:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO N/A

DATE OF NEXT INSPECTION: N/A
(Approximate)

INSPECTION CONDUCTED BY: ROGER ZHU
(Please Print)

INSPECTOR'S SIGNATURE: Roger Zhu PHONE NUMBER: (813) 272-5530

INSPECTION REPORT FORM
 ENVIRONMENTAL PROTECTION COMMISSION OF HILLSBOROUGH COUNTY

FACILITY: Trophy Cleaners PAGE 1 OF 1

FACILITY ADDRESS: 3217 S. McDill Ave. CITY: Tampa
PHONE: (813) 832-6184

MAILING ADDRESS: Same CITY: Tampa FLA ZIP: 33629

INSPECTION DATE: Feb 10, 1999	TIME IN: 9:00	TIME OUT: 10:35	INSPECTION TYPE: non-CDS	STATUS:
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NEDS NUMBER: 571038

SOURCE DESCRIPTION: Perc Dry Cleaner

CONTACT(S): Larry Steed

The Trophy Cleaner sent us a letter on 2/4/99 to advise that this facility has discontinued its cleaner operations to be a drop store only.

Today's visit confirmed the information provided, that the facility is in the transition process. The two dry cleaning machines haven't been disconnected yet. However, some other equipment (boiler and press machine) have been moved out already.

Also, I was told by an employee who was the only person there that the both units have been shut down since December, 1998. The new machine (Realstar RS-640) will be moved to Clearwater, FL and put the old one (Renzacci Dual 35) for sale.

INSPECTED BY: Roger Zhu	DATE: Feb 10, 1999
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INSPECTION REPORT FORM
ENVIRONMENTAL PROTECTION COMMISSION OF HILLSBOROUGH COUNTY

FACILITY: Trophy Cleaners			PAGE 1 OF 1		
FACILITY ADDRESS: 3217 S. McDill Ave.			CITY: Tampa PHONE: (813) 832-6184		
MAILING ADDRESS: Same		CITY: Tampa	FLA	ZIP: 33629	
INSPECTION DATE: Feb 10, 1999	TIME IN: 9:00	TIME OUT: 10:35	INSPECTION TYPE: non-CDS	STATUS:	
NEDS NUMBER: 571038					
SOURCE DESCRIPTION: Perc Dry Cleaner					
CONTACT(S): Larry Steed					

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INSPECTED BY: Roger Zhu	DATE: Feb 10, 1999
-------------------------	--------------------

INVOICE DATE	DESCRIPTION	INVOICE NUMBER	AMOUNT OF INVOICE	DISCOUNT	NET INVOICE
12/01/98	000000001	50.00 AIRS ID #0571038			50.00

CK# 014293

50.00

PLEASE DETACH AND RETAIN FOR YOUR RECORDS

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0356831

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0571038

TROPHY CLEANERS
 JOHN R GARRETT
 225 SOUTH COLLEGE
 TYLER TX 75710

FOR GOVERNMENT USE ONLY
 Org.: 37550101000 EO: 89
 Fund: 20-2-035001
 Obj.: 002273

RECEIVED
 MAIL ROOM
 JAN 1 1999

INVOICE DATE	DESCRIPTION	INVOICE NUMBER	AMOUNT OF INVOICE	DISCOUNT	NET INVOICE
01/28/98	0571038	50.00			50.00
01/28/98	1170061	50.00			50.00
				CK# 013486	100.00

PLEASE DETACH AND RETAIN FOR YOUR RECORDS

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

302136 ✓

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID#0571038
 TROPHY CLEANERS INC
 JOHN R GARRETT
 225 SOUTH COLLEGE
 TYLER TX 75710

FOR GOVERNMENT USE ONLY
 Org.: 37550101000 EO: B1
 Fund: 20-2-035001
 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID# 0571038
 TROPHY CLEANERS INC
 JOHN R GARRETT
 225 SOUTH COLLEGE
 TYLER TX 75710

FOR GOVERNMENT USE ONLY
 Org.: 37550101000 EO: B1
 Fund: 20-2-035001
 Obj.: 002273

Z 333 613 599

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to

AIRS ID 0571038

TROPHY CLEANERS INC
JOHN R. GARRETT
225 SOUTH COLLEGE
TYLER TX 75710

PS Form 3800, April 1995

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

Fold at line over top of envelope to

Is your RETURN ADDRESS completed on the reverse side?

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 that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

TROPHY CLEANERS INC
JOHN R. GARRETT
225 SOUTH COLLEGE
TYLER TX 75710

RECEIVED
DEPARTMENT OF
AIRS ID: 0571038
STORAGE SYSTEMS
DOCUMENT MANAGEMENT
CENTER

4a. Article Number

Z 333 613 599

4b. Service Type

- Registered
- Certified
- Express Mail
- Insured
- Return Receipt for Merchandise
- COD

7. Date of Delivery

2-23-90

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *J. Shardon*

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

COMPLETE THIS SECTION ON DELIVERY

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

10 AIRS ID # 0571038001AG
 JOHN R GARRETT
 TROPHY CLEANERS
 225 SOUTH COLLEGE
 TYLER TX 75710

2. Article Number (Copy from service label)
 700016 700006 73615616

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Received by (Please Print Clearly) B. Date of Delivery
 Sam Davis 6-11-11

C. Signature Agent
 Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total 10 AIRS ID # 0571038001AG

Sent JOHN R GARRETT
 Street TROPHY CLEANERS
 225 SOUTH COLLEGE
 City TYLER TX 75710

PS Form 3800, May 2000 See Reverse for Instructions

P 265 302 172

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

AIRS ID#: 0571038

TROPHY CLEANERS INC
 JOHN R GARRETT
 225 SOUTH COLLEGE
 TYLER TX 75710

Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	2/14/97

PS Form 3800, April 1995