



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

November 8, 2001

Mr. Stephen LeBretton
Kurji, Inc.
3519 Henderson Boulevard
Tampa, Florida 33609

Re: Facility No.: 0571097-002

Dear Mr. LeBretton:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on October 3, 2001.


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

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

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

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

Sincerely,


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

DD/jw

cc: Mr. Thomas Shelton, Hillsborough County

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

Fees Paid 96-00

SOC 4

Compliance IN



RECEIVED

JUL 10 2006

Bureau of Environmental
& Marine Services

July 7, 2006

Title V Air General Permits
Receipts
P.O.Box 3070
Tallahassee, FL. 32315-3070

Attn : Sandra Bowman

Re : Acct # 571097
8777 Temple Terrace Hwy., Temple Terrace, FL. 33637

Per our telephone conversation today, I am sending you this letter to notify you, that we have sold our business at 8777 Temple Terrace Hwy., Temple Terrace, FL. 33637.

Effective July 1, 2006 the new owner is Leonardo Cruz and you can correspond with him at the business address. You can also reach him at Tel. # 813 988-0234.

Thank You,

A handwritten signature in cursive script that reads "Brigitte Hayward".

Brigitte Hayward
Bookkeeper

0571097-002

page 15

1(a) RC should be circled under Control Dev. Req.

2(a) add # of gallons of per purchased in past 12 months (154.1)

Page 16

3. Large area source should be marked.

Page 17

Responsible official sign and date for changes.

10/18/01

Spoke to Stephen LeBreton and the facility has purchased 154.1 gallons of perchloroethylene from Sep. 2000 thru Sep. 2001.

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
OCT - 3 2001
Bureau of Air Monitoring
& Mobile Sources

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	Kurji inc.		
2. Site Name (For example, plant name or number):	Tender Touch Cleaver's		
3. Hazardous Waste Generator Identification Number:	FLD 984170 498		
4. Facility Location:	Street Address:	City:	Zip Code:
	Point Plaza # 8777 Temple Terrace HWY	Tampa Hillsborough	33637
5. Facility Identification Number (DEP Use ONLY - do not fill in):	05M1097-002		

Responsible Official

6. Name and Title of Responsible Official:	Name:	Title:
	Stephen LeBretton	G.M.
7. Responsible Official Mailing Address:	Organization/Firm:	Street Address:
	Kurji inc	3519 Henderson Blvd.
	City:	County:
	Tampa	Hillsborough
		Zip Code:
		33609
8. Responsible Official Telephone Number:	Telephone:	Fax:
	(813) 877-8282	() Same

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	Jack Rodeo		
10. Facility Contact Address:	8777 Temple Terrace HWY		
	Street Address:	City:	Zip Code:
		Tampa	33637
		County:	
		Hillsborough	
11. Facility Contact Telephone Number:	Telephone:	Fax:	
	(813) 988-0234	() N/A	

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
<u>1989</u>	<u>Existing</u> /New	RC/CA/None required	<u>SAME</u>
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening _____)

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.)

Small Area Source

- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
Transfer only on-site (used less than 200 gallons of perc per year)
Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
Transfer only on-site (used 200 - 1,800 gallons of perc per year)
Both machine types on-site (used 140 - 1,800 gallons of perc per year)

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

Existing machines at small area source
(NONE REQUIRED)

New machines at small area source
Refrigerated condenser

Existing machines at large area source
Carbon adsorber
Refrigerated condenser

New machines at 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 (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site? 1

For each boiler, indicate its horsepower (HP) rating: 1 5

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. 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/solvent addition log
(b) Leak detection inspection and repair
(c) Refrigerated condenser temperature monitoring
(d) Carbon adsorber exhaust perc concentration monitoring
(e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP 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.

Stephen LeBretton
Print name of responsible official

Stephen L. Brett
Signature

Sept 27-01
Date

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

571097 10
TENDER TOUCH CLEANERS
8777 Temple Terrace Hwy
TAMPA, FL 33637

**FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200**

**FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273**

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

For delivery information visit our website at www.usps.com®

OFFICIAL USE

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

AIRS ID# 571097 1stC
TENDER TOUCH CLEANERS
8777 Temple Terrace Hwy
TAMPA, FL 33637

PS-Form 3800, June 2002 See Reverse for Instructions

7003 0500 0004 0144 8594

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. <p>1. Article Addressed to:</p> <div style="border: 1px dashed black; padding: 5px; margin-top: 10px;"> <p>AIRS ID# 571097 1stC TENDER TOUCH CLEANERS 8777 Temple Terrace Hwy TAMPA, FL 33637</p> </div> <p>2. Article Number <i>(Transfer from service label)</i> 7003 0500 0004 0144 8594</p>	<p>A. Signature <input checked="" type="checkbox"/> <i>B. Hayward</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (<i>Printed Name</i>) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center; margin-top: 10px;">FEB 17</p> <p>3. Service Type <i>2015</i> <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>

UNITED STATES POSTAL SERVICE

1000
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

DARM/MOBILE SOURCE CONTROL PROGRAM
DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring
& Mobile Sources

FEB 21 2005

RECEIVED



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

571097
~~STEPHEN LESTER TON~~ *NURDIN KURJI*
 TENDER TOUCH CLEANERS
 3519 HENDERSON BLVD
 TAMPA FL 33609

Bureau of Air Monitoring
& Mobile Sources

136436

FEB 20 2007

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FOR GOVERNMENT USE ONLY
 Org.: 87530101000 EO: A1
 Fund: 20-2-035001
 Obj.: 002273

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

7003 2260 0003 5651 2387

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

Postmark
Here

Total ID# 571097

Sent To: STEPHEN LEBRETTON
 TENDER TOUCH CLEANERS
 Street or PO: 3519 HENDERSON BLVD
 City, State, ZIP: TAMPA, FL 33609

PS Form 3800, June 2002

Instructions

SENDER: COMPLETE THIS SECTION

- 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:

ID# 571097
 STEPHEN LEBRETTON
 TENDER TOUCH CLEANERS
 3519 HENDERSON BLVD
 TAMPA, FL 33609

2. Article Number

(Transfer from service label)

7003 2260 0003 5651 2387

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Melissa Valdez Addressee

B. Received by (Printed Name) C. Date of Delivery
 2-8-01

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

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

4. Restricted Delivery? (Extra Fee) Yes

STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES
DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring
& Mobile Sources

FEB 9 2004

RECEIVED



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

446286 FEB142005

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID# 571097 10
TENDER TOUCH CLEANERS
8777 Temple Terrace Hwy
TAMPA, FL 33637

Printed on recycled paper.

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Bureau of Air Monitoring
& Mobile Sources

FEB 19 2005

RECEIVED



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

RECEIVED
FEB 1 5
Bureau of Air & Mobile Services

Do **NOT** Remove Label

AIRS ID#0571097
TENDER TOUCH CLEANERS
STEPHEN LEBRETTON
3519 HENDERSON BLVD
TAMPA FL
33609

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

KURJI, INC.

Department of Environmental Protection

L&P Fees

L&P Fees

L&P Fees

AIRS ID # 0571235

AIRS ID # 0571095

AIRS ID # 0571097

2/11/2003

09268

50.00

50.00

50.00

Bureau of Air Monitoring
& Mobile Sources

FEB 19 2003

RECEIVED

Checking

150.00

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

OFFICIAL USE

7000 2870 0000 7027 5616

Postage	\$	<i>[Handwritten Signature]</i> Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total Post AIRS ID#0571097

Sent To TENDER TOUCH CLEANERS
 STEPHEN LEBRETTON
 3519 HENDERSON BLVD
Street, Apt TAMPA FL
 33609
City, State,

PS Form 3800, May 2000

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION
 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:

AIRS ID#0571097
 TENDER TOUCH CLEANERS
 STEPHEN LEBRETTON
 3519 HENDERSON BLVD
 TAMPA FL
 33609

7000 2870 0000 7027 5616
 2. Article Number (Copy from service label)

THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

2609

C. Signature
 X *[Handwritten Signature]* Agent
 Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES
DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

Bureau of Air Monitoring
& Mobile Sources

FEB 12 2005

RECEIVED





THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

414167 FEB15 2002

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 # 0571097
TENDER TOUCH CLEANERS
STEPHEN LEBRETTON
3519 HENDERSON BLVD
TAMPA FL
33609

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

KURJI, INC.

Department of Environmental Protection

2/11/2002

8047

L&P Fees

Airs ID # 0571097

50.00

L&P Fees

Airs ID # 0571235

50.00

L&P Fees

Airs ID # 0571095

50.00

Checking

Acct # 45190

150.00

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

7000 0600 0026 4128 6457

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

AIRS ID # 0571097

Total Postage: TENDER TOUCH CLEANERS
 Recipient's Name: STEPHEN LEBRETTON
 Street, Apt. No.: 3519 HENDERSON BLVD
 City, State, ZIP+4: TAMPA FL 33609

PS Form 3800, February 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- 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:
 AIRS ID # 0571097
 TENDER TOUCH CLEANERS
 STEPHEN LEBRETTON
 3519 HENDERSON BLVD
 TAMPA FL
 33609

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 2-9-02

C. Signature
 X *Stephen Lebretton* Agent
 Addressee

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

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

70000600002641286457
 2. Article Number (Copy from service label)