

Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

October 28, 2005

Mrs. Mary Scott
Tampa Marriott Waterside
405 Ice Palace Drive
Tampa, Florida 33602

Re: Facility No.: 0571250-002

Dear Mrs. Scott:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 13, 2005.

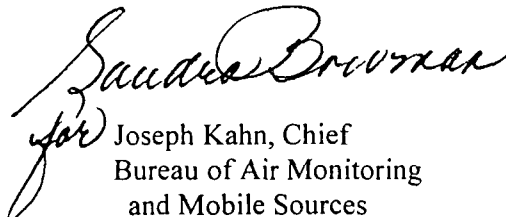
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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


Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Mr. Alain Watson, Hillsborough County

"More Protection, Less Process"

NO ACTIVITY FOR FACILITY
EMISSION FEE DATES 2000-2004
SOC REPORT ..6.....
COMP. STATUS - SNC MNC (IN)

8/18/2005

Hillsborough
Insp - ALW

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
SEP 13 2005
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): HMC Hotel Development LLC
2. Site Name (For example, plant name or number): TAMPA MARRIOTT WATERSIDE
3. Hazardous Waste Generator Identification Number: FLR000067215
4. Facility Location: Street Address: 405 Ice Palace Dr. City: TAMPA County: FE Hillsborough Zip Code: 33602
5. Facility Identification Number (DEP Use ONLY - do not fill in): 0571250-002

Responsible Official

6. Name and Title of Responsible Official: Name: MARY SCOTT Title: General Manager
7. Responsible Official Mailing Address: Organization/Firm: TAMPA MARRIOTT WATERSIDE Street Address: 405 ICE PALACE DR. City: TAMPA County: Hillsborough Zip Code: 33602
8. Responsible Official Telephone Number: Telephone: (813) 204-6301 Fax: (813) 204-6349

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): Cynthia Huddleston - Director of Services
10. Facility Contact Address: Street Address: 405 Ice Palace Dr. City: TAMPA County: Hillsborough Zip Code: 33602
11. Facility Contact Telephone Number: Telephone: (813) 204-6369 Fax: (813) 204-6349

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")
1999	Existing	RC/CA/None required	SAME
	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?

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".)

- | | |
|--|--|
| <u>Existing machines at small area source</u>
(NONE REQUIRED) <input type="checkbox"/> | <u>New machines at small area source</u>
Refrigerated condenser <input checked="" type="checkbox"/> |
| <u>Existing machines at large area source</u>
Carbon adsorber <input type="checkbox"/>
Refrigerated condenser <input type="checkbox"/> | <u>New machines at large area source</u>
Refrigerated condenser <input type="checkbox"/> |

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?

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

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.

MARY SCOTT

Print name of responsible official

Mary Scott
Signature

9/12/05
Date

Richard D. Garrity, Ph.D.
Executive Director
(813)627-2600



2005-2561A

Date Issued: 9/7/2005

S 24 T 29 R 18

Environmental Protection Commission of Hillsborough County

WARNING NOTICE

Responsible Party: Mary Scott/ Tampa Marriott Cleaners

Mailing Address: 405 Ice Palace Drive
Tampa, Fl, 33602

Phone: (813)221-4900

Location of alleged violation: 405 Ice Palace Drive

Day and time of alleged violation: 8/13/2005

Alleged violation pursuant to:

Chapter 84-446 Laws of Florida (Act):

Other: 62-4.030, FAC
62-213.300(1)(a)
1-3.21, Rules of EPC

RECEIVED
SEP 13 2005
Bureau of Air Monitoring
& Mobile Sources

The violations here alleged may not include possible concurrent violations of other applicable environmental laws; local, state or federal including those of the Environmental Protection Commission. Facts believed to constitute alleged violation:

Operating a dry cleaning facility without a valid permit.

By copy of this Notice, the responsible party is informed that Commission staff believes that based upon the information available, a violation may have occurred. If substantiated, appropriate administrative or legal action will occur to assure compliance with the Environmental Protection Act of Hillsborough County and the Rules of the Environmental Protection Commission of Hillsborough County. If you believe that the above does not constitute a violation as alleged, you are encouraged to immediately contact the Investigator named below. If the violation is substantiated, cooperative resolution and correction may avoid enforcement action in this matter.

Note: This case may be transferred for further enforcement action.

Because continuation of violation subsequent to this Notice may be considered to be an intentional violation, it is recommended that you cease the above activity and until this matter is resolved you:

Please respond in writing within 15 days of received of this notice.

Investigator: M. Nozari
Mohammad Nozari
(813) 627-2600

Delivered by: certified
CC:

AIRS ID # 0571250
 No INVOICE SLIP

467089 JAN11 2007

MARRIOTT INTERNATIONAL, INC.

REMITTANCE STATEMENT - DETACH BEFORE DEPOSITING

Marriott Business Services (865) 980-4353

VENDOR NO.	VENDOR NAME		CHECK DATE	CHECK NO.	HANDLING	
0000041891	DEPT OF ENVIRONMENTAL PROTECTION		01/02/2007	04015990	OR	
INVOICE NUMBER	DATE	GROSS AMOUNT	DISC AMOUNT	NET AMOUNT	APBU	APBU DESCRIPTION
INA337U8122706 TITLE V AIR GENERAL PERMIT WATERSIDE	12 27 2006 MARRIOTT	50.00	.00	50.00	337U8	TAMPA WATERSIDE MARR
TOTALS:		50.00	.00	50.00		



33.7U8.44
 Marriott International, Inc
 Marriott Business Services
 1965 Marriott Drive
 Louisville, TN 37777

Accounts Payable Account
 Marriott Business Services
 (865) 980-4353

Citibank Delaware
 A subsidiary of Citicorp
 One Penn's Way
 New Castle, DE 19720

0000041891
 FIFTY AND NO/100 DOLLARS *****

CHECK# 04015990

CHECK DATE
 01/02/2007

EXACTLY *****50.00
 VOID AFTER 6 MONTHS PAST DATE OF ISSUE

PAY TO THE
 ORDER OF

DEPT OF ENVIRONMENTAL PROTECTION
 RECEIPTS SECTION
 PO BOX 3070
 TALLAHASSEE FL 32315

Marriott International, Inc.
 and affiliated companies

Caroly B. Handlon

Authorized Representative

MARRIOTT INTERNATIONAL, INC.

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Marriott Business Services (865) 980-4353

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TOTALS:		50.00	.00	50.00		

5242570

BEST AVAILABLE COPY

Delivery location closed. AM Signature Required/No one to accept. COD Shipment/Payment not ready.

at PM Residence delivery/No secure area to leave package. Incorrect address/zip. Please notify sender to correct address.

Delivery location vacant. Please notify sender to correct address. Other.

Form # 2108/12/05 FCS

1-800-CALL-DHL

1-800-2

www.dhl.com

Delivery information

700 Cambridge

Original Address Confirmed

Form # 2108/12/05 FCS

DO NOT SEND CASH, CASH EQUIVALENT OR
DHL CANNOT DELIVER TO

RT DATE REDELIVER DATE LMTD MSA2 MSA0

All services provided by DHL Express are subject to DHL Terms and Conditions of Carriage as published on www.dhl-usa.com. The DHL liability shall not exceed US \$100.00. Shipper's Protection may be purchased upon request. If the shipment involves an ultimate destination country other than the country of departure, the Convention may be applicable.

*Subject to change without notice.

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PLEASE TYPE OR PRINT
FOR SHIPMENTS WITHIN U.S. ONLY

FROM

7305 730

MARKET CATERING

700 S. FLORIDA AVE

TAMPA FL 33602

IAN B. DIGNITARE 913-221-4907

TO

LEFT OF ENVIRONMENTAL PROT

PO BOX 3470

TALLAHASSEE FL 32315

RECEIPTS SEL.

Payment Origin Waybill Number TPA 54600133346

Bill to: Receiver 3rd Party Paid in Advance

1 800 Call-DHL

Building Reference (will appear on invoice)

of Pkgs 1 Weight(LBS)

Packaging One box must be checked: Express Envelope Express Pack Other Packaging

Special Instructions

SAT HAA LAB

Next Day 10:30

Next Day 12:00

Next Day 3:00

2nd Day

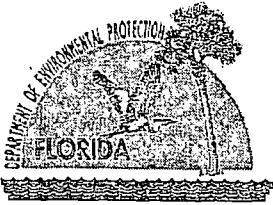
54600 133346

54600 133346

001 1000020 MW-11 8/05 PACKAGE LABEL



TALLAHASSEE FL 32315



Department of Environmental Protection

Division of Air Resource Management
2600 Blair Stone Road, MS 5510
Tallahassee, Florida 32399-2400

Jeb Bush
Governor

459748 MAR 6 2006

RECEIVED
MAR 08 2006
Colleen M. Castille
Secretary

TO: Holder of Title V Air General Permit

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

Title V Air General Permits
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070

(CUT HERE)

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

RECEIVED
MAR 08 2006
Refund pd 12/15/05

Do NOT Remove Label

571250 10
TAMPA MARRIOTT WATERSIDE
405 Ice Palace Drive
TAMPA, FL 33602

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

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.

456962 DEC19 2005

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

571250 10
TAMPA MARRIOTT WATERSIDE
405 Ice Palace Drive
TAMPA, FL 33602

FLAIR A/CCT. CODE 312020350013755010000
BENEFITING OBJECT CODE 002000
BENEFITING CATEGORY 000200

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

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