

# Department of **Environmental Protection**

leb Bush Governor

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

David B. Strubs Secretary

February 17, 2004

Mr. Luis Reyes Dry Cleaning Warehouse, Inc. 1707 West Arch Street Tampa, Florida 33607

Re: Facility No.: 0571299-001

Dear Mr. Reyes:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on January 15, 2004.

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. Thomas Shelton, Hillsborough County

"More Protection, Less Process"

New Facilly No Activity

EMISSION FEE DATES ......
SOC REPORTS.....
COMPLIANCE STATUS .....

TBD07100

# PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

#### 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.

| Fac      | cility Name and Location  |                     |
|----------|---|---------------------|
| 1.       | Facility Owner/Company Name (Name of corporation, agency, or  | individual owner):  |
| 1        | Site Name (For example, plant name or number):  | wing Warchouse Inc  |
| 2.       | Site Name (For example, plant name or number):  | 9                   |
| <u> </u> | NIA   |                     |
| 3.       | Hazardous Waste Generator Identification Number:  |                     |
|          | <u> </u>  |                     |
| 4.       | Facility Location: 1707 W. ARCH St  | reet                |
|          | Facility Location: 1707 W. ARCH St<br>Street Address: 1707 W. ARCH St<br>City: TAMPA County: (+51) Sbarou | ugh Zip Code: 33607 |
| 5.       | Facility Identification Number (DEP Use ONLY - do not fill in)  |                     |
|          | Facility Identification Number (DEP Use ONLY - do not fill in)  | 11244-0             |
|          |   |                     |
|          | sponsible Official  |                     |
|          | Name and Title of Responsible Official:   |                     |
|          | me: Lufs Reyes Title:   | Owner               |
| 7.       | Responsible Official Mailing Address:   |                     |
|          | Organization/Firm: Street Address:  SAME AS ALOVE   | 1                   |
|          | Street Address: JAMC A 17-20 VC City: County:   | Zip Code:           |
| }        | ony.  | •                   |
| 8.       | Responsible Official Telephone Number:  | SAMC                |
|          | Telephone: (813)258 6036 Fax: (   | ( ) SPINC           |
|          |   |                     |
| Fac      | cility Contact (If different from Responsible Official)   |                     |
| 9.       | Name and Title of Facility Contact (For example, plant manager):  |                     |
|          | SAME  |                     |
| 10.      | Facility Contact Address:   |                     |
|          | Street Address:   | ·                   |
|          | City: County:   | Zip Code:           |
| 11.      | Facility Contact Telephone Number:  |                     |
|          | Telephone: ( ) - Fax: (   | ( ) -               |
|          |   |                     |

DEP Form No. 62-213.900(2)

Effective: 2/24/99

#### **Facility Information**

| 1.(a) DRY-TO-DRY M  | ACHINES ONL                        | Y  |  |
|---|------------------------------------|--|--|
| How many dry-to-dry ma  | chines do you hav                  | re on-site?                              |  |
| For each dry-to-dry mach  | ine on-site, please                | provide the following information        | on:  |
| Date Initially Purchased<br>From Manufacturer                   | Status<br>(circle one)             | Control Device Required*<br>(circle one) | Date Control Device Installed (if already included at time of purchase, write "SAME")                                |
| 10/1/07   |                                    |  |  |
| 10/6/01   | Existing/Ne                        | w &C/CA/None required                    | <del></del>  |
|   | Existing/Ne                        | w RC/CA/None required                    |  |
|   | Existing/Ne                        | w RC/CA/None required                    | <del></del>  |
| *CONTROL DEVICE K   | EY: RC = re                        | efrigerated condenser CA =               | carbon adsorber  |
| 1.(b) TRANSFER MAC  | HINES ONLY                         |  |  |
| How many washers do yo  | ou have on-site?                   | [ (1) A ]                                |  |
| How many dryers/reclaim   | ners do you have o                 | on-site?                                 | · · · · · · · · · · · · · · · · · · ·  |
| unit. If the transfer machi<br>1993, it is a <b>NEW</b> unit (n | ne was purchased o units purchased | from the manufacturer between            | December 9, 1991, it is an EXISTING December 9, 1991 and September 22, owed to operate under this general formation: |
| Date Initially Purchased<br>From Manufacturer                   | Status<br>(circle one)             | Control Device Required* (circle one)    | Date Control Device Installed (if already included at time of purchase, write "SAME")                                |
| 10/6/03   | Existing/New                       | RC/CA/None required                      |  |
|   | Existing/New                       | RC/CA/None required                      |  |
|   | Existing/New                       | RC/CA/None required                      |  |
| *CONTROL DEVICE K   | EY: $RC = re$                      | efrigerated condenser CA =               | carbon adsorber  |
| 2.(a) How much perchlor   | roethylene (perc) l                | have you used within the last 12 r       | months?  |
|   | ns (You must fill                  | •  |  |
| (b) If less than 12 mor   | nths, how many? [                  | 3 months                                 |  |
| Check why it is les   | ss than 12 months                  | : New owner: [] Did not kee              | ep records: []   |
|   |                                    | New store: New machin                    | ne []  |
|   |                                    | Unopened store [] (date of               |  |

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|  | 1   |
|--|---|
| 3. What is the facility's source classification based or Indicate with an "X". Select one classification of  |   |
| Small Area Source  |   |
| Dry-to-dry machines only on-site<br>Transfer only on-site<br>Both machine types on-site  | (used less than 140 gallons of perc per year)<br>(used less than 200 gallons of perc per year)<br>(used less than 140 gallons of perc per year) |
| Large Area Source  |   |
| Dry-to-dry machines only on-site<br>Transfer only on-site<br>Both machine types on-site  | (used 140 - 2,100 gallons of perc per year)<br>(used 200 - 1,800 gallons of perc per year)<br>(used 140 - 1,800 gallons of perc per year)       |
| 4. What control technology is required on machines p (Indicate with an "X".)   | pursuant to section (5) of Part II of this notification form?   |
| 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 a Rule 62-213.300, F.A.C. Verify that all steam and h exemption criteria or that no such units exist on-site |   |
| All steam and hot water generating units exempt No such units on-site  | OR  |
| How many boilers do you have on-site?  |   |
| For each boiler, indicate its horsepower (HP) rating:  | <u>\\</u>   |
| What type of fuel do you use? propane No. 2 fuel No. 6 fuel  |   |
| 6. Equipment Monitoring and Recordkeeping Inform   | nation  |
| Check all logs which are required to be kept on-site i   | n accordance with the requirements of this general permit:  |
| (a) Purchase receipts and solvent purchases/solvent a  | ddition log $oldsymbol{ u}$   |
| (b) Leak detection inspection and repair   |   |
| (c) Refrigerated condenser temperature monitoring  | [ u]  |
| (d) Carbon adsorber exhaust perc concentration mon   | itoring [ <u>\begin{cases} \bullet \ext{\rm } \ext{\rm } \ext{\rm } \ext{\rm }</u>  |
| (e) Startup, shutdown, malfunction plan  | <u> </u>  |

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| 2   |  |  |  |  |  |
|---|--|--|--|--|--|
| 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.  Print name of responsible official  Signature  Date |  |  |  |  |  |

DEP Form No. 62-213.900(2) Effective: 2/24/99

Richard D. Garrity, Ph.D. Executive Director (813)272-5960



2003-0457A

Date Issued: 12/2/2003 S 14 T 29 R 18

#### **Environmental Protection Commission of Hillsborough County**

## WARNING NOTICE

Responsible Party: Dry Cleaning Warehouse, Inc., The/Luis Reyes

Mailing Address: 1707 West Arch Street

Tampa, FL, 33607

Phone:

300-5333

Location of alleged violation: 1707 West Arch Street, Tampa

Day and time of alleged violation: 12/2/03

Alleged violation pursuant to: Chapter 84-446 Laws of Florida (Act):

Other: 62-4.030, F.A.C.; 62-213.300(1)(a), F.A.C.; 1-3.21, Rules of the EPC

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 permit.

By copy of this Notice, the responsible party is informed that Commission staff believes that based upon the infomation 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:

Because continutation 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:

Within 10 days of receipt of this notice, submit a perchlorethylene Dry Cleaning Air General Permit Notification Form (62-213.900(2)) to the Florida Department of Enviornmental Protection and a copy to EPC/HC.

Investigator:

Mohammad Nozari

Delivered by: Hand Delivered

CC:

Permit Apphiel For a copy of Certification has been mailed to FDEP & a Copy to EPC

FIRE - # 05/1/299

### Dibble, Dickson

From:

Golden, Jason [goldenj@epchc.org]

Sent:

Tuesday, March 06, 2007 8:40 AM

To:

Dibble, Dickson

Cc:

Robinson, Lynn

Subject: Dry Cleaner

0571299 Dry Cleaning Warehouse will be changing the phone number of the responsible official to 813-850-5980. Thanks.

Jason Golden

Compliance Engineer

**Environmental Protection Commission** 

of Hillsborough County

(813) 627-2600 ext. 1237

Fax: (813) 627-2660 goldenj@epchc.org



# Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

November 1, 2008

To: Users of the Air General Permit

Records in the Division of Air Resource Management indicate that you have claimed eligibility for your facility to operate under an Air General Permit (AGP) pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.) and your entitlement to operate is about to expire.

As a source of air pollution, your facility is entitled to operate for no more than five (5) years with a permit under Section § 403.0872 Florida Statutes (F.S.). Rule 62-213.300, F.A.C., establishes that the duration of the permit is for five (5) years, and no later than thirty (30) days prior to the fifth anniversary of the filing of intent to use this general permit, the responsible official shall submit a new notice of intent which shall contain all current information regarding the facility.

If you wish to maintain your entitlement to operate you may obtain a copy of the appropriate registration form in the following manner(s). You may download a copy of the registration form from the FDEP Air Resource Management webpage below.

FDEP forms Webpage: http://www.floridadep.org/Air/forms/tvgp.htm

or call the general permit contact for the FDEP, Dick Dibble, at 850-921-9586.

As the Owner/Operator or authorized representative for this facility, please complete the form, sign your name, date it, and submit it to the following address:

Air General Permit Program
Bureau of Air Monitoring and Mobile Sources, MS5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400



# **IMPORTANT**

A facility is eligible to operate under a Title V Air General Permit (TV AGP) for no more than five (5) years. Your facility is approaching the end of the current five (5) year period for which it was entitled to operate under the Title V Air General Permit.

| <b>NEW OWNER?</b> If you are a <b>NEW OWNER</b> , please check withis box and return this page with your completed Title V Air General Permit Notification Form. |
|--|
| NEW RESPONSIBLE OFFICIAL? If you are a NEW RO, and/or your existing business has moved to a new location, please check this box and                              |

• If you wish to continue your entitlement, please complete the Air General Permit Notification Form, making certain that it is signed by the Responsible Official (RO), properly dated, and mailed to the following address:

return this page with your completed Air General Permit Notification Form.

Title V Air General Permit Program
Bureau of Air Monitoring and Mobile Sources, MS5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

- If you do not wish to continue with your eligibility, please disregard this notice.
- A fee is **NOT** required with the notification form.

MS# 5510 MC Acct # 5531

Department of Environmental Protection 2600 Blair Stone Rd Tallahassee, FL 32399-2400



016H16501923

\$00.42<u>0</u> 10/29/2008

Mailed From 32399
US POSTAGE

571299
The Dry Cleaning Warehouse
1707 W Arch Street
Tampa, FL 33607

NIXIE

37 (

00 11/03/08

RETURN TO SENDER VACANT

BC: 32399240099 \*0838-07272-29-39

33607**729799268**95

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLE 444484 JAI

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# 571299 THE DRY CLEANER WAREHOUSE 1707 W Arch street **TAMPA, FL 33607** 

Printed on recycled paper.

FOR GOVERNMENT USE ONLY

ORG.: 37550101000 EO: A1

FUND: 20-2-035001 **OBJECT: 002273** 

# THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

463108 JUL 27 2998

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# 571299 1st THE DRY CLEANER WAREHOUSE 1707 W Arch street TAMPA, FL 33607

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

FOR GOVERNMENT USE ONLY

ORG.: 37550101000 EO: A1

FUND: 20-2-035001 **OBJECT: 002273** 

Printed on recycled paper.

Dry Chaning Warehouse 1707 W. arch St. Tampa, Ha. 33607

General Parnits Section
Bureau of an Monitoring and Mobile Source
Popt. of Environmental Protection
3600 Blair Stone Road
Tallahasaee, Hg. 32399-2400