

Department of Environmental Protection

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

David B. Struhs Secretary

July 17, 2001

Mr. Minh T. Nguyen Southside Cleaners 1321 South 14 Street Leesburg, Florida 34748-6600

Re: Facility No.: 0694811-002

Dear Mr. Nguyen:

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

Dotty Diltz, Chief

Bureau of Air Monitoring

and Mobile Sources

DD/jw

cc: Mr. John Turner, Central District

"More Protection, Less Process"

Printed on recycled paper.

6/21 Fees Paid

0694811-002

(a) Existing should be circled under Status.

Those Required should be circled under Control Device Required.

Note Control Device I ustabled is not required for Existing small sources and should be blook.

66 Required. Should be marked

117 Responsible official sign and
date for changes work.

TO: (NAME, OFFICE, LOCATION) 1	
2 5 PLEASE PREPARE REPLY FOR: COMMENTS: SECRETARY'S SIGNATURE DIV/DIST DIR SIGNATURE MY SIGNATURE YOUR SIGNATURE	
PLEASE PREPARE REPLY FOR: COMMENTS: SECRETARY'S SIGNATURE DIV/DIST DIR SIGNATURE MY SIGNATURE YOUR SIGNATURE	
SECRETARY'S SIGNATURE DIV/DIST DIR SIGNATURE MY SIGNATURE YOUR SIGNATURE	
DIV/DIST DIR SIGNATURE MY SIGNATURE YOUR SIGNATURE	
MY SIGNATURE YOUR SIGNATURE	
YOUR SIGNATURE	
I— I	
DUF DATE	
ACTION/DISPOSITION	
DISCUSS WITH ME	
COMMENTS/ADVISE	
REVIEW AND RETURN	
SET UP MEETING	
FOR YOUR INFORMATION	
HANDLE APPROPRIATELY	
INITIAL AND FORWARD	
SHARE WITH STAFF	
FOR YOUR FILES	
FROM: DATE: PHONE:	

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. completed form to the address listed in the instructions and keep a copy of the form for your files.

Fac	rility Name and Location					
1.						
	SOUTHSIDE CLEANEI	RS				
2.	Site Name (For example, plant name or number):					
3.	Hazardous Waste Generator Identification Number:					
ļ <u>.</u>	FLDCESQG F Facility Location: Street Address: 1321 SOVTH 14 th ST	002/0039				
4.	Facility Location: Street Address: 1221 SOUTH 116 ST	,				
	City: County:	LAKE	Zip Code: 34748_6600			
5:	Facility Identification Number (DEP Use ONLY - o	lo not fill in):				
		0694	811-002			
*						
	ponsible Official		<u> </u>			
6.	Name and Title of Responsible Official:		•			
Naı	MINH T NGUYEN	Title:	OWNER			
7.	Responsible Official Mailing Address:					
	Organization/Firm: Street Address: 122 1 CAUT 144 STAGO	.				
	Organization/Firm: Street Address: 132 SOUTH 14 STARR City: City: County: Responsible Official Telephone Number: Telephone: (2009)	1 KF	Zip Code: 34748_660D			
8.	Responsible Official Telephone Number:	<u> </u>				
	Telephone: (352)728 4240	Fax: () -			
Fac	Facility Contact (If different from Responsible Official)					
	Name and Title of Facility Contact (For example, p					
10.	Facility Contact Address:					
	Street Address:					
	City: County:		Zip Code:			
		·				
11.	Facility Contact Telephone Number: Telephone: () -	Fax: (,			
l	reteptione. (Tax. (, -			

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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 Status Control Device Required* Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required 08 DEC 91 08 DEC 91 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 Control Device Required* Date Control Device Installed Status From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required RC/CA/None required Existing/New *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 2.(a) How much perchloroethylene (perc) have you used within the last 12 months? [90] 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

DEP Form No. 62-213.900(2)

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Unopened store [] (date of expected opening

3. What is the facility's source cl. Indicate with an "X". Select		n the definitions found in section (3) of Part II? only.)			
Small Area Source	ιX				
Dry-to-dry machines only on-site Transfer only on-site Both machine types on-site		(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)			
Large Area Source		·			
Dry-to-dry mad Transfer only of Both machine to		(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (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 sm (NONE REQUIRED)	nall area source	New machines at small area source Refrigerated condenser []			
Existing machines at lar Carbon adsorber Refrigerated condenser	rge area source	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 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 generati No such units on-site	ng units exempt	OR X			
How many boilers do you have on-site? []					
For each boiler, indicate its horsepower (HP) rating: [] []					
What type of fuel do you use?	propane No. 2 fue				
6. Equipment Monitoring and Re	ecordkeeping Inform	nation			
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					

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

7. Suffeffice	of Existing DEP All Perint(s)						
Please indica	te 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 A1R5 ID 0694811001AG No DEP air permits currently exist for the operation of the facility indicated in this notification form.						
Responsible	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 pro	I will promptly notify the Department of any changes to the information contained in this notification.						
MIN Print nam	ne of responsible official						
Signatur	UNGUUW 06/11/01 Date						

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South Sine Cleaners 1321 South 14th Street Leesburg, FL 34748-6600 352-728-4240





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

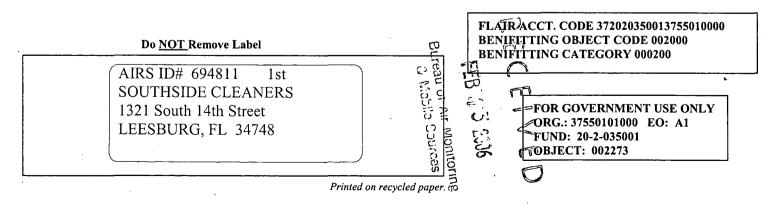
32333-6542 01

Դովհանձանների անհանվական հուների հանձի և

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 458797 FEB 9 2016

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

TOTAL AMOUNT DUE: \$50.00





422052 JAN222883

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#0694811

SOUTHSIDE CLEANERS MINH T NGUYEN 1321 SOUTH 14TH STREET LEESBURG FL 34748-6600

FOR GOVERNMENT USE ONLY Fund: 20-2-035001

Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

413428 JAN23 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 # 0694811 SOUTHSIDE CLEANERS MINH T NGUYEN 1321 SOUTH 14TH STREET LEESBURG FL 34748-6600

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Org.: 37550101040 Fund: 20-2-035007

Obj.: 002273

434074 DEC10 2003 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

694811 MINH NGUYEN SOUTHSIDE CLEANERS 1321 SOUTH 14TH STREET LEESBURG FL 34748,

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

445069 JAN282005

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# 694811 SOUTHSIDE CLEANERS 1321 South 14th Street LEESBURG, FL 34748

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

OBJECT: 002273

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