

Department of Environmental Protection

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

David B. Struhs Secretary

February 26, 2001

Mr. Jerry Wolski Magic Dry Cleaners & Shirt Laundry, Inc. 8750 Gladiolus Drive Ft. Myers, Florida 33908

Re: Facility No.: 0710145-002

Dear Mr. Wolski:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on January 18, 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. Sherrill Culliver, South District

"More Protection, Less Process"

Printed on recycled paper.

IMPORTANT

A facility is eligible to operate under a Title V air general permit for no more than five (5) years. Your facility is approaching the end of the five (5) year period for which it was entitled to operate with an air Title V general permit

• If you wish to **continue** your entitlement, please complete the enclosed notification form and return it to the Department of Environmental Protection at the address included with the notification form. A fee is not required with this notification submittal

If you are a new owner, please check this and return this form with your completed notification form.

☐ If you are a **new RO** (Responsible Official), and/or your existing business has **moved** to a new location, please check this box and return this form with your completed notification form.

• If you do not wish to continue your eligibility, please disregard this notice.

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.

1	TACILY OWNER/Company Name VACIL ORY CLE	•	فسد ا			
2.	Site Name (For example, plant	name or number):				
	MAGIC DRY	CLEANERS				
3.	Hazardous Waste Generator Ide	ntification Number:				
	7LD98421	11331				
	Facility Location: Street Address: City: MAC 8750 GI FT	GIC DRY CLEANERS LADIOLUS DR., UNIT MYERS, FL 33908	13	Zip Code:		
5:	Facility Identification Number (DEP Use ONLY - do not fi	III in):			
	ponsible Official					
	Name and Title of Responsible		Title: PR	⊊ C		
	16GERALD E W			<i>t</i> > .		
7.	7. Responsible Official Mailing Address: MAGIC DRY CLEANERS Organization/Firm: 8750 GLADIOLUS DR., UNIT 13 Street Address: FT MYERS EL 33008					
ļ	City:	FT MYERS, FL County:	33900	Zip Code:		
8.	Responsible Official Telephone Telephone: (이니)니잉 -		Fax: (941) 481 -733 1		
Fac	ility Contact (If different from	Responsible Official)				
	Name and Title of Facility Cont		mager):			
	Gerald Wol	sti				
10.	Facility Contact Address:	MAGIC DRY CL				
	Street Address:	8750 GLADIOLUS I	OR., UNIT 13			
	City:	FT MYERS, FL	. 33 906	Zip Code:		
11.	11. Facility Contact Telephone Number:					
	Telephone: (Samo -		Fax: () -		

DEP Form No. 62-213.900(2)

Facility Name and Location

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 Control Device Required* Date Control Device Installed Status From Manufacturer (if already included at time of (circle one) (circle one) purchase, write "SAME") Existing/New RC/CA/None required RC/CA/None required Existing/New Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 1.(b) TRANSFER MACHINES ONLY San Davidson How many washers do you have on-site? 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 Status Control Device Required* Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of AND VERY SECTION OF THE SECTION OF T purchase, write "SAME") RC/CA/None required Existing/New 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? [/O §] gallons (You must fill this in) (b) If less than 12 months, how many? [6] 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

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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2 What is the facilit	via sauras alessifias	tion bosed on t	tha dafir	nitions found in s	action (2) of Dart	1 C 18tm	5001
3. What is the facility Indicate with an	"X". Select one classifica	assification on	the dem ily.)	muons tound in s	ection (3) of Pail(WIN Z	. sering
Small Area	Source		•		Burea	au of Air S Mobile S	Monitoring Sources
Tra	y-to-dry machines of ansfer only on-site oth machine types or	((used les	s than 200 gallon	s of perc per year s of perc per year s of perc per year))	
Large Area	Source						
Tra	y-to-dry machines of ansfer only on-site oth machine types or	((used 20	0 - 2,100 gallons 0 - 1,800 gallons 0 - 1,800 gallons	of perc per year)		
4. What control tech (Indicate with an		on machines pu	oursuant 1	to section (5) of I	Part II of this notif	ication for	m?
Existing ma (NONE RE	achines at small area QUIRED) X	a source		New machines as Refrigerated con	t small area source denser []	<u>e</u>	
Carbon ads	achines at large area orber [d d condenser [source		New machines at Refrigerated con	t large area source denser []	<u>.</u>	
5. A facility which of Rule 62-213.300, F exemption criteria of	A.C. Verify that all	steam and ho	ot water g	generating units o	on-site meet the fo	_	suant to
All steam and hot we No such units on-site	-	s exempt [OR			
How many boilers de	o you have on-site?	4	_				
For each boiler, indi	cate its horsepower	(HP) rating: [15				
What type of fuel do	you use? X	_] propane _] No. 2 fuel o _] No. 6 fuel o		natural gallering No. 4 fue	l oil		
6. Equipment Monit	oring and Recordke	eping Informa	ation				,
Check all logs which	are required to be	kept on-site in	n accorda	ance with the req	uirements of this g	general per	rmit:
(a) Purchase receipts	and solvent purcha	ses/solvent ad	ddition lo	og			
(b) Leak detection in	nspection and repair						
(c) Refrigerated con-	denser temperature	monitoring					٠
(d) Carbon adsorber	exhaust perc conce	ntration monit	toring				
(e) Startup, shutdow	vn, malfunction plan	n	•				

DEP Form No. 62-213.900(2)

Effective: 2/24/99

7. Surrender o	of Existing DEP Air Permit(s)
Please indicat	e 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
this notifi statement maintain comply w I will pro GERA	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the is made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form. I D E WOLSK; The of responsible official

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PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

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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):
I KANCIC ORUCIEN NERGO CHIATI ALVIDANI TVIC
MAGIC DRYCLEANERS & SHIRT LAUNDRY INC
2. Site Name (For example, plant name or number):
MAGIC DRY CLEANEAS + SHIRTLAUNDRY INC.
3. Hazardous Waste Generator Identification Number:
4. Facility Location:
Street Address: 8750 GLADIOLUS DR.
City: FT. MYERS County: LEE Zip Code: 33908
75 (Eacility Identification Number (DEP Use ONLY Edo not full an)
O'(0)
Responsible Official
6. Name and Title of Responsible Official:
Name: TERRY WOLSK, Title: PRES.
7. Responsible Official Mailing Address:
Organization/Firm: MAGIC DRY CLE/ NEWS + S#IRI LAUNDRY
Street Address: 8750 GLAPIOLUS PR. ZHOLL
7. Responsible Official Mailing Address: Organization/Firm: MAGIC DRY CLEANERS + 5 HIRT LAUNDRY Street Address: 8750 GLAPIOLUS DR City: FORT MYERS Zip Code: 33908
8. Responsible Official Telephone Number:
Telephone: $(941)451-1954$ Fax: (941) -
/84 //31
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
TO DOLL DOLCZ'
1 1111111111111111111111111111111111111
10. Facility Contact Address:
Street Address: 8756 GLADIOLUS DR.
City: Zip Code: 3390 8
FORT MYERS
11. Tuesticy Contains Temperature
Telephone: (941) 466-0106 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 m	achines do you h	ave on-site?	•	
For each dry-to-dry mac	hine on-site, pleas	se provide the following informat	ion:	
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")	
JUHE 1991	Existing	ew RC/CA/None required	JUHE 1991	
·	Existing/N	ew RC/CA/None required	·	
	Existing/N	ew RC/CA/None required		
*CONTROL DEVICE K	EY: RC = 1	refrigerated condenser CA	= carbon adsorber	
1.(b) TRANSFER MAC	CHINES ONLY			
How many washers do y		. [🗘]		
How many dryers/reclair		on-site? []		
1993, it is a NEW unit (r			llowed to operate under this general	
· · · · · · · · · · · · · · · · · · ·			paronass, wire originally	
	Existing/New	RC/CA/None required		
·	Existing/New	RC/CA/None required		
	Existing/New	RC/CA/None required		
.4		·		
*CONTROL DEVICE K	EY: $RC = r$	efrigerated condenser CA	= carbon adsorber	
[/37] gallon (b) If less than 12 mor	ns (You must fill this, how many?	months		
Check why it is les	s than 12 months	: New owner: Did not ke		
		New store: [] New machi Unopened store [] (date of	•	
		Onobened store [] (date of	corported opening	

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

3. What is the facility's source classification based on Indicate with an "X". Select one classification or	
Small Area Source	
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	
Transfer only on-site	(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 p (Indicate with an "X".)	ursuant 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 []
	nits shall not be eligible to use the general permit pursuant to t water generating units on-site meet the following exemption I memo for the criteria).
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: [13
What type of fuel do you use? [] propane [] No. 2 fuel [] No. 6 fuel	
6. Equipment Monitoring and Recordkeeping Informa	ition
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 ad	ldition log
(b) Leak detection inspection and repair	$\sqrt{}$
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monit	oring []
(e) Startup, shutdown, malfunction plan	

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

7. Surrender	of Existing DEP Air Permit(s)
Please indica	ate with an "X" the appropriate selection:
ك	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
this notij statemer maintair comply v	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the last made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.
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	$\mathcal{O}_{\mathcal{O}}}}}}}}}}$
	RRY WOLSKI
Print nar	ne of responsible official
Jar	ne of responsible official /-//-0/
Print nar	ne of responsible official /-//-0/

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 443356 DEC15 2004

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# 710145 10
MAGIC DRY CLEANERS & SHIRT
LAUNDRY
8750 Gladiolus Dr Unit #13
FT MYERS, FL 33908

FORGOVERNMENT USE ONLY ORG.: 3550101000 EO: A1 FUND: 20-2-035001 OBJECT: 002273

Printed on recycled paper.

 $457164\ \ DEC22\ 2005$ 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

710145 10 MAGIC DRY CLEANERS & SHIRT LAUNDRY 8750 Gladiolus Dr Unit #13 FT MYERS, FL 33908 Burea Mobile Sources

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.

This portion must be attached to remittance for proper handling 4816

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

710145 JERRY WOLSKI MAGIC DRY CLEANERS & SHIRT LAUNDRY 8750 GLADIOLUS DRIVE FT MYERS FL 33908 FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A C
Fund: 20-2-0350015
Obj.: 002273

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



412423 DEC31 2001

Do NOT Remove Label

AIRS ID # 0710145
MAGIC DRY CLEANERS & SHIRT LNDRY
JERRY WOLSKI
8750 GLADIOLUS DRIVE
FT MYERS FL
33908

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

421024 DEC23 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#0710145 MAGIC DRY CLEANERS & SHIRT LAUNDRY

JERRY WOLSKI 8750 GLADIOLUS DRIVE FT MYERS FL

33908

Org.: 37550101000 Fund: 20-2-035000 Obj.: 002273