RAUG 1 A 2006

RAUG 1 A 2006

Bureau of All Monitoring

Bureau of All Mobile Sources

Facility Name and Location

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.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):					
1	Classic Cleaners of Dolream landing, Inc.					
<u></u>	William GUVISTER JR.					
2.	Site Name (For example, plant name or number):					
	Classic Cloquers					
3.	Hazardous Waste Generator Identification Number:					
4.	Street Address: 9201 Brookward of #7					
	City: BONITG Springs County: LEE Zip Code: 34135					
5.	Pacility Identification Number (DEP Use ONLY - do not fill in)					

Re	sponsible Official					
6.						
	me: William Gutterrez Jr. Title: President					
7.	Responsible Official Mailing Address: Organization/Firm: C1955tc Cleavers of Petroeu Lending, Inc.					
	Street Address: 9 201 Brookwood of \$7					
ļ						
8.	Responsible Official Telephone Number:					
1	Telephone: (239)992 - 0746 Fax: (239)992 - 0848					
Ц						
Fa	cility Contact (If different from Responsible Official)					
	Name and Title of Facility Contact (For example, plant manager):					
1	Company of the charge of					
10	Same as above.					
10.	Facility Contact Address:					
	Street Address:					
	City: County: Zip Code:					
	The Control of the Co					
11.	Facility Contact Telephone Number:					
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 MACHINES ONLY

How many dry-to-dry m	achines do you ha	ave on-site?		
For each dry-to-dry mac	hine on-site, pleas	se provide the following information	on:	
Date Initially Purchased Status From Manufacturer (circle one		Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")	
FEb/03	Existing/N	lew RC/CA/None required	Sant	
Dec/04	Existing/N	lew RC/CA/None required	Sane	
	Existing/N	ew RC/CA/None required		
*CONTROL DEVICE K	EY: RC = 1	refrigerated condenser CA =	carbon adsorber	
1.(b) TRANSFER MAC	HINES ONLY) ,		
How many washers do ye	ou have on-site?	on-site? [\lambda] \A]		
How many dryers/reclain	ners do you have	on-site? []A]		
1993, it is a NEW unit (r	10 units purchase	d from the manufacturer between I d after September 22, 1993 are allote, please provide the following information (circle one)	December 9, 1991 and September 22, wed to operate under this general formation: 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		
· ·	roethylene (perc)	have you used within the last 12 me this in)	A	
(b) If less than 12 mor	ths, how many?	[] months		
Check why it is les				
	s than 12 months	:: New owner: Did not keep	p records: []	
	s than 12 months	:: New owner: Did not keep New store: New machine		

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3. What is the faci	ility's source classificati an "X". Select one clas	on based on the	he definitions fou ly.)	and in section (3)	of Part II?
Small Are	ea Source				
7	Dry-to-dry machines on Transfer only on-site Both machine types on-	(1	used less than 140 used less than 200 used less than 140	gallons of perc	per year)
Large Are	ea Source				
7	Dry-to-dry machines on Fransfer only on-site Both machine types on-	(1	used 140 - 2,100 g used 200 - 1,800 g used 140 - 1,800 g	gallons of perc pe	er year)
4. What control tec (Indicate with a	chnology is required on man "X".)	machines pu	rsuant to section ((5) of Part II of ti	nis notification form?
Existing n (NONE R	nachines at small area s EQUIRED)	source 	New mach Refrigerat	nines at small are ed condenser	a source
Carbon ad	nachines at large area s Isorber ed condenser	<u>ource</u>		nines at large are ed condenser	a source
Rule 62-213.300, F	contains non-exempt of A.C. Verify that all so or that no such units ex	team and hot	water generating	units on-site mee	eneral permit pursuant to
All steam and hot w No such units on-si	water generating units e	exempt [] OR		
How many boilers of	do you have on-site?				
For each boiler, ind	licate its horsepower (H	(P) rating: $\frac{2}{2}$		J	
What type of fuel de		propane No. 2 fuel oi No. 6 fuel oi	l No.	ural gas . 4 fuel oil er (please list)	
6. Equipment Moni	toring and Recordkeep	ing Informati	on		
Check all logs whic	h are required to be ke	pt on-site in a	ccordance with the	he requirements (of this general permit:
(a) Purchase receipt	s and solvent purchase	s/solvent addi	ition log	لك	
(b) Leak detection i	inspection and repair			ىك	
(c) Refrigerated con	ndenser temperature mo	nitoring			
(d) Carbon adsorber	exhaust perc concentre	ation monitor	ring	ب	
(e) Startup, shutdov	wn, malfunction plan			لك	

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7. Surrender	of Existing DEP Air Permit(s)					
Please indicat	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					
	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.						
1	I will promptly notify the Department of any changes to the information contained in this notification. Print name of responsible official					
Signature	Date Date					

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