

Department of Environmental Protection

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

Colleen M. Castille Secretary

July 5, 2005

Mr. Michael F. Guido Hi Tech Cleaners 4600 Summerlin Road, Suite Al Fort Myers, Florida 33919

Re: Facility No.: 0710166-003

Dear Mr. Guido:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on May 11, 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. Sherrill Culliver - South District

"More Protection, Less Process"

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RECEIVED

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

MAY 1 1 2005

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):				
Suntright Properties also H. Tech Cleaners				
2. Site Name (For example, plant name or number):				
JAME 18 ABOVE				
3. Hazardous Waste Generator Identification Number:				
FLCESQG 4. Facility Location: 4600 Summer Im Red. # A1 F4. Myons, F1, 33919 Street Address:				
4. Facility Location: 4600 Summer In Rd. #A1 Ft. Myons, F1, 33919				
Street Address: City: County: Zip Code:				
City: County: Zip Code:				
5 Facility Identification Number OEP Use ONLY -do not fill in):				
110710166-053				
Responsible Official				
6. Name and Title of Responsible Official:				
Name: MI Charl F. GUIDO Title: Dres Owner 7. Responsible Official Mailing Address: Sunting Chapters Obn H. Tech Cleaners				
7. Responsible Official Mailing Address: Sunting Clapatias Obn H. Teck Clauners				
Organization/Firm: Street Address:				
City: KIMers F1. County: Lee Zip Code: 33919				
8. Responsible Official Telephone Number:				
Telephone: (234) 848 1000 Fax: 534) \$ 985-0669				
Facility Contact (If different from Responsible Official)				
9. Name and Title of Facility Contact (For example, plant manager):				
5ANC				
10. Facility Contact Address:				
Street Address:				
City: County: Zip Code:				
11. Facility Contact Telephone Number: Telephone: () - Fax: () -				
relephone. ()				

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	ve on-site?	J
For each dry-to-dry mach	ine on-site, pleas	e provide the following inform	nation:
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")
1-1-05	Existing/Ne	ew RC/CA/None required	1.
	Existing/Ne	w RC/CA/None required	
	Existing/Ne	w RC/CA/None required	
*CONTROL DEVICE KI		efrigerated condenser C	A = carbon adsorber
How many washers do yo	ou have on-site?	للك	
How many dryers/reclaim	ners do you have o	on-site? []	•
unit. If the transfer machi 1993, it is a NEW unit (n	ne was purchased to units purchased	from the manufacturer betwe	on December 9, 1991, it is an EXISTING en December 9, 1991 and September 22, allowed to operate under this general 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 KI	EY: RC = re	efrigerated condenser C.	A = carbon adsorber
	roethylene (perc)	have you used within the last 1 this in)	2 months?

DEP Form No. 62-213.900(2)

(b) If less than 12 months, how many? [] months

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New store: New machine

Unopened store [____] (date of expected opening _

Check why it is less than 12 months: New owner: [X] Did not keep records: [___]

What is the facility's source classification base Indicate with an "X". Select one classificat	ed on the definitions found in section (3) of Part II? ion only.)				
Small Area Source	ل ا				
Dry-to-dry machines only on-s 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 machines only on- Transfer only on-site Both machine types 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 mach (Indicate with an "X".)	ines 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 [X]				
Existing machines at large area source Carbon adsorber Refrigerated condenser []	New machines at large area source Refrigerated condenser []				
	ions units shall not be eligible to use the general permit pursuant to and hot water generating units on-site meet the following site (see attached memo for the criteria).				
All steam and hot water generating units exemp	ot [] OR				
How many boilers do you have on-site?					
For each boiler, indicate its horsepower (HP) rating:					
	ane [] natural gas 2 fuel oil [] No. 4 fuel oil 6 fuel oil [] Other (please list)				
6. Equipment Monitoring and Recordkeeping In	nformation				
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	vent addition log				
(b) Leak detection inspection and repair	L.X.				
(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 [K]					
(e) Startup, shutdown, malfunction plan					

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

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 45725 POEC 23 2995

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 <u>NOT</u> Remove Label

710166 10
HI TECH CLEANERS
4600 Summerlin Road
FT MYERS, FL 33919

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

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