

Department of Environmental Protection

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

David B. Struhs Secretary

August 17, 2001

Ms. Kay Horton Michael the Cleaner 3900 Clark Road #2B Sarasota, Florida 34233

Re: Facility No.: 0810167-002

Dear Ms. Horton:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on July 16, 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. Bill Proses, Southwest District

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

Division of Air Resource Management 850/921-9583 or sandy.bowman@dep.state.fl.us

----Original Message-----

From: Janis, Neal

Sent: Friday, December 03, 2004 8:37 AM

To: Bowman, Sandy

Subject:

Please note that Micheal the Cleaner #0810167 is now a petroleum shop and no longer using perc.

Also, Quail Meadow Cleaners is now in the SWD and not the Central District. Please make that correction. I also need the screen fixed, so that I can enter the annual perc inspection for the facility. It curently will not allow me to do this.

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.

Facility Name and Location	· · · · · · · · · · · · · · · · · · ·
1. Facility Owner/Company Name (Name of corporation, agency, or individual)	dual (kyner):
BBE INVESTORS, THE &	Part Silve CO
2. Site Name (For example, plant name or number):	105/16 M
1. Facility Name and Location 1. Facility Owner/Company Name (Name of corporation, agency, or individual and the state of	Source
3. Hazardous Waste Generator Identification Number:	•
4. Facility Location: Street Address: 655 26 57 W	
City: Bradenton County: manable	Zip Code: 34207
S: Facility-Identification: Number (DEP Use ONLY ado not fill in):	在建筑地产业的基础
	10167-000
Responsible Official	
6. Name and Title of Responsible Official:	
Name: Kay Horton 7. Responsible Official Mailing Address: Organization/Firm:	G.M.
7. Responsible Official Mailing Address:	
Street Address: # 3900 Clark Road #213	
City: Sarasota County: Sarasota	Zip Code: \$4233
8. Responsible Official Telephone Number:	
Telephone: (941) 365 - 4700 Fax: () -
Facility Contact (If different from Responsible Official)	
9. Name and Title of Facility Contact (For example, plant manager):	
lanardo Blair	
10. Facility Contact Address:	
Street Address: 6055 26 st	
City: Bracenton County: maneto	Zip Code:
11. Facility Contact Telephone Number:	
Telephone: (941) 756-6100 Fax: () -

DEP Form No. 62-213.900(2)

Effective: 2/24/99

08/0/67-002

office of the state of the stat

6(a) > Required for all sources. Should be (e) marked.

8/1/2001 Spoke to Key Vorton and she stated that she is the duly authorized person to operate the facilities listed:

> 0810167-002 0810168-002 1150079-002 1150081-002

> > and the state of the second

Facility Information

1.(a) DRY-TO-DRY MA	ACHINES ONLY	7 . 排除性化等等等的用	
How many dry-to-dry ma	chines do you hav	e on-site?	
For each dry-to-dry mach	ine on-site, please	provide the following information	n:
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")
Purchase prior 124	KAI Existing/New	w RCCA/None required	Same Saul
Purchase prior rela	KI Existing/Ne	w CCCA/None required	Saul.
	Existing/Nev	w RC/CA/None required	
*CONTROL DEVICE KI	EY: RC = re	frigerated condenser CA =	carbon adsorber
1.(b) TRANSFER MACI	HINES ONLY	^ .	
How many washers do yo	u have on-site?		
How many dryers/reclaim	ers do you have o	n-site?	
unit. If the transfer machi 1993, it is a NEW unit (n	ne was purchased to units purchased	from the manufacturer between I	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, weed to operate under this general formation:
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 Existing/New	RC/CA/None required RC/CA/None required	
	-	-	
*CONTROL DEVICE KI	Existing/New Existing/New	RC/CA/None required RC/CA/None required	carbon adsorber
2.(a) How much perchlor	Existing/New Existing/New EY: RC = re roethylene (perc) h	RC/CA/None required RC/CA/None required frigerated condenser	
2.(a) How much perchlor	Existing/New Existing/New EY: RC = re	RC/CA/None required RC/CA/None required frigerated condenser	
2.(a) How much perchlor	Existing/New Existing/New EY: RC = re roethylene (perc) has (You must fill	RC/CA/None required RC/CA/None required frigerated condenser	
2.(a) How much perchlor [[25] gallor (b) If less than 12 mon	Existing/New Existing/New EY: RC = re roethylene (perc) has (You must fill withs, how many? [RC/CA/None required RC/CA/None required frigerated condenser	onths?
2.(a) How much perchlor [[25] gallor (b) If less than 12 mon	Existing/New Existing/New EY: RC = re roethylene (perc) has (You must fill withs, how many? [RC/CA/None required RC/CA/None required frigerated condenser	p records: []

HERERY CONTRACTOR

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

3. What is the facility's source class Indicate with an "X". Select of		n the definitions found in section (3) of Part II? only.)
Small Area Source		
Dry-to-dry mach Transfer only or Both machine ty		(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	(X)	
Dry-to-dry mach Transfer only on Both machine ty		(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 requ (Indicate with an "X".)	uired on machines	pursuant to section (5) of Part II of this notification form?
Existing machines at sma (NONE REQUIRED)	all area source	New machines at small area source Refrigerated condenser []
Existing machines at large Carbon adsorber Refrigerated condenser	ge area source	New machines at large area source Refrigerated condenser []
Rule 62-213.300, F.A.C. Verify t	hat all steam and h	units shall not be eligible to use the general permit pursuant a not water generating units on-site meet the following (see attached memo for the criteria).
All steam and hot water generatin No such units on-site	g units exempt	OR
How many boilers do you have on	-site?	
For each boiler, indicate its horsep	oower (HP) rating:	L16
What type of fuel do you use?] propane [] No. 2 fue [] No. 6 fue	
6. Equipment Monitoring and Rec	ordkeeping 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 p	purchases/solvent	addition log []
(b) Leak detection inspection and	гераіг	$[\mathcal{L}]$
(c) Refrigerated condenser temper	rature monitoring	(*)
(d) Carbon adsorber exhaust perc	concentration mor	nitoring
(e) Startup, shutdown, malfunction	on plan	

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

7. Surrender of	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
this notifi statement maintain comply w	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 ts 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 will pro	omptly notify the Department of any changes to the information contained in this notification.
	ne of responsible official
Signature	$\frac{7!12\cdot01}{\text{Date}}$

IMPORTANT REAL PLANTS OF THE STATE OF THE ST

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.

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 # 0810167 MICHAEL THE CLEANER KAY HUDSON 3500 CLARK ROAD #2B SARASOTA FL 34233

FOR GOVERNMENT USE ONI Org.: 3755010,000 EO: A1 Fund: 20-2-038001; Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

X

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

RECEIVED

TOTAL AMOUNT DUE: \$50.00

JAN 0 9 2003

Do NOT Remove Label

AIRS ID#0810167

MICHAEL THE CLEANER

**AY=HUBSOR

3500 CLARK ROAD #2B

3500 CLARK ROAD #2B SARASOTA FL

34233

Sureau of Air Wondoring & Mobile Sources

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

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~	PS Form 3800, January 2001 See/Reverse/for/Instructions	