

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

August 17, 2001

Ms. Kay Horton
Classic Cleaners
3900 Clark Road #2B
Sarasota, Florida 34233

Re: Facility No.: 0810168-002

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,

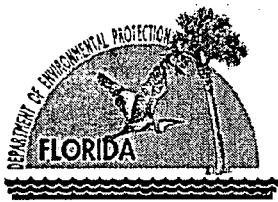

Jae Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Bill Proses, Southwest District

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

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Department of Environmental Protection

Jeb Bush
Governor

Division of Air Resource Management
2600 Blair Stone Road, MS 5510
Tallahassee, Florida 32399-2400

Colleen M. Castille
Secretary

TO: Holder of Title V Air General Permit

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213,300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

**Title V Air General Permits
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070**

(CUT HERE)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

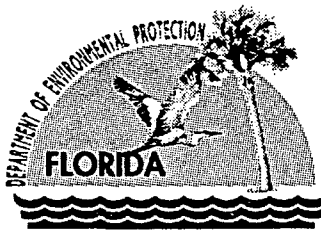
TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 810168
BBC INVESTORS INC
3577 1st St
BRADENTON, FLORIDA 34208

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273



Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

December 6, 2006

NOTICE OF ANNUAL OPERATION FEE

To: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that you operate a source of air pollution and that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee as established by the Department in Rule 62-213.205, F.A.C.

Your annual operation fee is \$50 for calendar year 2006. For your facility to maintain its eligibility for the Title V Air General permit, Rule 62-213.300(3)(b), F.A.C., states "...the owner or operator of the facility must upon written notice from the Department submit payment of an annual operation fee in the amount of \$50.00. This invoice constitutes the Department's written notice as required under the general permit rule.

Any annual operation fee not postmarked by **March 1, 2007**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, please be aware that under Rule 62-213.205(1)(g), F.A.C., failure to timely pay any required annual operation fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Dickson Dibble at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Sandra Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SV/sb

Enclosure: Invoice Form

"More Protection, Less Process"

Printed on recycled paper.

**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 owner):	BCC Investors, INC		
2. Site Name (For example, plant name or number):	CLASSIC CLEANERS		
3. Hazardous Waste Generator Identification Number:			
4. Facility Location: Street Address:	3577 1st St	County:	Manatee
City:	Bradenton	Zip Code:	34208
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0610168 002		

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JUL 16 2001
Bureau of Air Monitoring
& Mobile Sources

Responsible Official

6. Name and Title of Responsible Official: Name:	Kay Horton	Title:	G.M.
7. Responsible Official Mailing Address: Organization/Firm:	3900 Clark Road # 2B	City:	Sarasota
Street Address:		County:	Sarasota
City:		Zip Code:	34232
8. Responsible Official Telephone Number: Telephone:	(941) 85-4700	Fax:	() -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	Bennie Young		
10. Facility Contact Address: Street Address:	3577 1st St.	City:	Bradenton
City:		County:	Manatee
Zip Code:			
11. Facility Contact Telephone Number: Telephone:	(941) 747-7796	Fax:	() -

0810168-002

P16

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

8/1/2001

Spoke to Kay Norton and she stated that she is the duly authorized person to operate the facilities listed:

0810167-002

0810168-002

1150079-002

1150081-002

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 From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
Purchased from 12/9/91	Existing/New	RC/CA/None required	SAME
_____	Existing/New	RC/CA/None required	_____
_____	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 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 KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

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

Unopened store (date of expected opening _____)

3. What is the facility's source classification based on the definitions found in section (3) of Part II? Indicate with an "X". Select one classification only.)

- Small Area Source
- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (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".)

- | | |
|--|---|
| <u>Existing machines at small area source</u> | <u>New machines at small area source</u> |
| (NONE REQUIRED) <input type="checkbox"/> | Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u> | <u>New machines at large area source</u> |
| Carbon adsorber <input type="checkbox"/> | Refrigerated condenser <input type="checkbox"/> |
| Refrigerated condenser <input checked="" type="checkbox"/> | |

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to 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 generating units exempt OR
 No such units on-site

How many boilers do you have on-site? 6

For each boiler, indicate its horsepower (HP) rating: 1 5

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

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

7. Surrender of Existing DEP Air Permit(s)

Please indicate 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.

I will promptly notify the Department of any changes to the information contained in this notification.

KAY HORTON
Print name of responsible official


Signature

7.12.01
Date

#17

IMPORTANT

Bureau of Air Monitoring
& Mobile Sources

JUL 16 2001

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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.

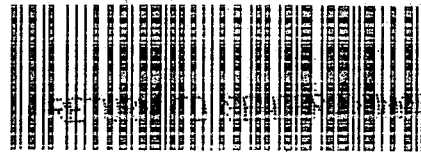
- If you **do not** wish to continue your **eligibility**, please disregard this notice.

5510

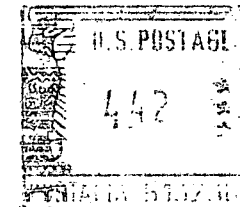
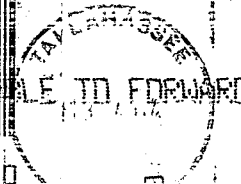
5521

CERTIFIED MAIL

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
TWIN TOWERS OFFICE BUILDING
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400



7003 2260 0003 5650 9660



MC5521

2/26
BAMMS/BCB
JOEY ROBERTS
5510

RE TO FORWARD
Bureau of Air Monitoring
& Mobile Sources
MAR 5 2004

RECEIVED

DO NOT REMOVE LABEL
ID#810168
KAY HUDSON
CLASSIC CLEANERS
3900 CLARK ROAD #213
SARASOTA, FL 34233

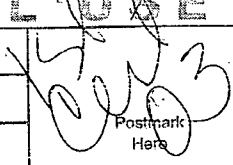
CLASS900 34233923016 1N 10 02/12/04
RETURN TO SENDER

NO FORWARD ORDER ON FILE
DONOR TO FORWARD
NUMBER TO FORWARD

34233+2301 01/2400

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature _____ <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
ID# 810168 KAY HUDSON CLASSIC CLEANERS 3900 CLARK ROAD #213 SARASOTA, FL 34233		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number		3. Service Type	
(Transfer from service label)		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, August 2001		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		7003 2260 0003 5650 9660	
		Domestic Return Receipt 102395-02-M-1540	

7003 2260 0003 5650 9660

U.S. Postal Service	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com®	
OFFICIAL USE	
Postage \$	 Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	ID# 810168
Sent To	KAY HUDSON
Street, Apt. No., or PO Box No.	CLASSIC CLEANERS
City, State, ZIP+	3900 CLARK ROAD #213
	SARASOTA, FL 34233
PS Form 3800, June 2002 See Reverse for Instructions	

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: \$50.00

Bureau of Air Monitoring
& Mobile Sources
DEP 30
15
Do NOT Remove Label

810168 10
CLASSIC CLEANERS
3577 1st St
BRADENTON, FL 34208

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING 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

469226 FEB 16 2007

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

TOTAL AMOUNT DUE: \$50.00

EXPIRED PERMIT: 8/16/2006
LAST SUBMIT: 7/16/2001

Do NOT Remove Label

DID NOT CONTACT

AIRS ID#810168
BBC INVESTORS INC
3577 1st St
BRADENTON, FLORIDA 34208

Printed on recycled paper.

KAY HORTON (941) 365-4700

FLAIR ACCT. CODE 37202035001375500000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

FEB 16 2007
RECEIVED



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

810163 KATH HUSSON CLASSIC CLEANERS 3500 CLARK ROAD #2B 5306 Cortez Row SARASOTA FL 34233 BRADENTON FL 34210
--

RECEIVED

MAR 3 2008

Bureau of Air
& Mobile Services
Monitoring

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: Fund: 20-2-03500 Obj.: 002273
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TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 810168 10
CLASSIC CLEANERS
3577 1st St
BRADENTON, FL 34208

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.



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

4
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TOTAL AMOUNT DUE: \$50.00

JAN 09 2003

Bureau of Air Monitoring
& Mobile Sources

Do NOT Remove Label

CLASSIC CLEANERS
~~KAT HUDSON~~
3500 CLARK ROAD #2B
SARASOTA FL
34233
AIRS ID#0810168

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273

ATTACHED TO REMAIN FOR POSTER HANDLING

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 # 0810168
CLASSIC CLEANERS
KAY HUDSON
3500 CLARK ROAD #2B
SARASOTA FL
34233

FOR GOVERNMENT USE ONLY
Org.: 37550101000
Fund: 20-2-035001
Obj.: 002273

RECEIVED
JAN 25 2002
Bureau of Air Monitoring
& Mobile Sources