

Department of Environmental Protection

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

David B. Struhs Secretary

October 8, 2002

Mr. Stephen Sepe 11352 North Williams Street Dunnellon, Florida 34432

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

NOTICE OF INELIGIBILITY TO USE TITLE V AIR GENERAL PERMIT

Dear Mr. Sepe:

This is to notify you that the Department, pursuant to your submittal received on September 9, 2002, has determined that your facility does not qualify to use the Title V Air General Permit for Perchloroethylene Dry Cleaner.

The requirements that a facility must meet in order to qualify for use of the Title V Air General Permit are set forth in Rule 62-213.300, Florida Administrative Code (F.A.C.). Your submittal indicates your facility is not eligible for the reason(s) listed below:

facility information provided is insufficient
equipment information provided is insufficient
equipment control information is insufficient
emissions indicate facility is not eligible
source category not applicable or incorrect
X certification statement is blank or not signed by Responsible Official (Owner)
other: History of non-compliance.

If you have any questions regarding the Department's determination, please contact Rick Butler or Sandy Bowman at the Bureau of Air Monitoring and Mobile Sources at 850/488-0114. However, if you believe you meet the requirements for a Title V Air General Permit, you may complete the enclosed blank notification form, making the corrections indicated above, and resubmit it to the Department. Any facility which does not qualify for a Title V air general permit may require a standard air pollution control permit from the Department. A notice of your legal rights begins on the following page.

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

The DEP will consider the above-noted action final unless a timely petition for an administrative hearing is filed pursuant to Sections 120.569 and 120.57, Florida Statutes, (F.S.).

A person whose substantial interests are affected by the proposed decision may petition for an administrative hearing in accordance with sections 120.569 and 120.57, F.S. The petition must contain the information set forth below and must be filed (received) by the Agency Clerk in the DEP Office of General Counsel, MS #35, 3900 Commonwealth Boulevard, Tallahassee, FL, 32399-3000 (Telephone: 850/488-9314, Fax: 850/487-4938). Petitions filed by the permit applicant or any of the parties listed below must be filed within 14 (fourteen) days of receipt of this notice. Petitions filed by any other person must be filed within 14 (fourteen) days of receipt of notice of this proposed action. A petitioner must mail a copy of the petition to the applicant at the address indicated above, at the time of filing. The failure of any person to file a petition within the appropriate time period shall constitute a waiver of that person's right to request an administrative determination (hearing) under Sections 120.569 and 120.57, F.S., or to intervene in this proceeding and participate as a party to it. Any subsequent intervention will be only at the approval of the presiding officer upon the filing of a motion in compliance with Rule 28-106.205, F.A.C..

A petition that disputes the material facts on which the permitting authority's action is based must contain the following information:

- (a) The name and address of each agency affected and each agency's file or identification number, if known:
- (b) The name, address, and telephone number of the petitioner; the name, address and telephone number of the petitioner's representative, if any, which shall be the address for service purposes during the course of the proceeding; and an explanation of how the petitioner's substantial interests will be affected by the agency determination;
- (c) A statement of how and when each petitioner received notice of the agency action or proposed action;
- (d) A statement of all disputed issues of material fact. If there are none, the petition must so indicate;
- (e) A concise statement of the ultimate facts alleged, as well as the rules and statutes which entitle the petitioner to relief;
- (f) A statement of the specific rules or statutes the petitioner contends require reversal or modification of the agency's proposed action; and,
- (g) A statement of the relief sought by the petitioner, stating precisely the action petitioner wishes the agency to take with respect to the agency's proposed action.

A petition that does not dispute the material facts upon which the permitting authority's action is based shall state that no such facts are in dispute and otherwise shall contain the same information as set forth above, as required by Rule 28-106.301, F.A.C.

Because the administrative hearing process is designed to formulate final agency action, the filing of a petition means that the permitting authority's final action may be different from the position taken by it in this notice. Persons whose substantial interests will be affected by any such final decision of the permitting authority on the application have the right to petition to become a party to the proceeding, in accordance with the requirements set forth above.

Compleand 3 N SOC 96-01 Mediation will not be available in this proceeding.

In addition to the above, a person subject to regulation has a right to apply to the Department of Environmental Protection for a variance from or waiver of the requirements of particular rules, on certain conditions, under Section 120.542, F.S. The relief provided by this state statute applies only to state rules, not statutes, and not to any federal regulatory requirements. Applying for a variance or waiver does not substitute or extend the time for filing a petition for an administrative hearing or exercising any other right that a person may have in relation to the action proposed in this note.

The application for a variance or waiver is made by filing a petition with the Office of General Counsel of the Department of Environmental Protection, 3900 Commonwealth Boulevard, Mail Station #35, Tallahassee, Florida 32399-3000. The petition must specify the following information:.

- (a) The name, address, and telephone number of the petitioner;
- (b) The name, address, and telephone number of the attorney or qualified representative of the petitioner, if any;
 - (c) Each rule or portion of a rule from which a variance or waiver is requested;
 - (d) The citation to the statute underlying (implemented by) the rule identified in (c) above;
 - (e) The type of action requested;
 - (f) The specific facts that would justify a variance or waiver for the peititioner;
- (g) The reason why the variance or waiver would serve the purposes of the underlying statute (implemented by the rule); and,
- (h) A statement whether the variance or waiver is permanent or temporary and, if temporary, a statement of the dates showing the duration of the variance or wavier requested.

The Department will grant a variance or waiver when the petition demonstrates both that the application of the rule would create a substantial hardship or violate principles of fairness, as each of those terms is defined in Section 120.542(2), F.S., and that the purpose of the underlying statute will be or has been achieved by other means by the petitioner.

Persons subject to regulation pursuant to any federally delegated or approved air program should be aware that Florida is specifically not authorized to issue variances or waivers from any requirements of any such federally delegated or approved program. The requirements of the program remain fully enforceable by the Administrator of the United States Environmental Protection Agency and by any person under the Clean Air Act unless and until the Administrator separately approves any variance or waiver in accordance with the procedures of the federal program.

Any party to this order (permit) has the right to seek judicial review of the permit pursuant to Section 120.68, F.S., by the filing of a Notice of Appeal pursuant to Rule 9.110, Florida Rules of Appellate Procedure, with the Clerk of the permitting authority in the Legal Office; and by filing a copy of the Notice of Appeal accompanied by the applicable filing fees with the appropriate District Court of Appeal. The Notice of Appeal must be filed within 30 (thirty) days from the date this Notice is filed with the Clerk of the permitting authority.

Executed in Tallahassee, Florida, this 9 day of October, 2002.

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

Howard L. Rhodes, Director

Division of Air Resource Management

CERTIFICATE OF SERVICE

FILING AND ACKNOWLEDGMENT FILED, on this date, pursuant to section 120.52(7), Florida Statutes, with the designated agency Clerk, receipt of which is hereby acknowledged.

Martha Jane Wise (Clerk)

(Date)

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. Sendicompleted 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):
STEPHEN SEPE
2. Site Name (For example, plant name or number): PLANGPS
11352 N. WILLIAMS ST
3. Hazardous Waste Generator Identification Number:
0830106
4. Facility Location: 11352 N. WILLIAM 55 Street Address: 11352 N. WILLIAM 55
City: DUMMELLON County: MARIUM Zip Code: 34432
5 Facility Identification Number (DEP Use ONLY do not fill)
11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Responsible Official
6. Name and Title of Responsible Official:
Name: BEN SEPE Title: MAR
7 Responsible Official Mailing Address:
Organization/Firm: Street Address: 11352 Hi WILLIAMS 8 T
Organization/Firm: Street Address: 11352 H: WILLIAMS 8 T City: DUNNELLON County: MARION Zip Code: 3 443 Z
8. Responsible Official Telephone Number:
Telephone: (352) 484 4969 Fax: (NONG
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
BEN SEPE
10. Facility Contact Address: Street Address: City: County: Zip Code:
Street Address: 6 A M = 1770
11. Facility Contact Telephone Number: 4 BWE
11. Facility Contact Telephone Number: Telephone: () & AME AS AFax: () -

DEP Form No. 62-213.900(2)

Effective: 2/24/99



RICK BUTLER ENVIRONMENTAL SPECIALIST BUREAU OF AIR MONITORING AND MOBILE SOURCES

STATE OF FLORIDA DEPT. OF ENVIRONMENTAL PROTECTION 2600 BLAIR STONE ROAD - MS 5510 TALLAHASSEE, FLORIDA 32399-2400 TELEPHONE: (850) 921-9586 SUNCOM: (850) 291-9586 FAX: (850) 922-6979 E MAIL: butler_r@dep.state.fl.us

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Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry ma	chines do you have	on-site?	
For each dry-to-dry mach	ine on-site, please p	provide the following information	n:
Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one) 54ME	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 K	EY: RC = refi	rigerated 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 on-	-site? []	
unit. If the transfer machi 1993, it is a NEW unit (n	ne was purchased f o units purchased a	rom the manufacturer between I	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, owed to operate under this general formation:
Date Initially Purchased From Manufacturer		Control Device Required* (circle one) SAME	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 K	EY: RC = refi	rigerated condenser CA =	carbon adsorber
	roethylene (perc) has (You must fill th	ive you used within the last 12 mais in)	onths?
(b) If less than 12 mon	iths, how many? [_] months	
Check why it is les	s than 12 months:	New owner: Did not kee	p records: []
]	New store: New machine	

DEP Form No. 62-213.900(2)

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Unopened store [____] (date of expected opening _____)

What is the facility's source classification based on Indicate with an "X". Select one classification on			
Small Area Source []			
Dry-to-dry machines only on-site	used less than 140 gallons of perc per year)		
-	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			
• • •	(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)		
Both machine types on-site	used 140 - 1,500 gailons of perc per year)		
4. What control technology is required on machines processes (Indicate with an "X".)	ursuant to section (5) of Part II of this notification form?		
Existing machines at small area source	New machines at small area source		
(NONE REQUIRED) [K]	Refrigerated condenser []		
Existing machines at large area source	New machines at large area source		
Carbon adsorber []	Refrigerated condenser []		
Refrigerated condenser []			
Rule 62-213.300, F.A.C. Verify that all steam and ho exemption criteria or that no such units exist on-site (All steam and hot water generating units exempt No such units on-site			
How many boilers do you have on-site?			
For each boiler, indicate its horsepower (HP) rating: [101		
What type of fuel do you use? [] propane [] No. 2 fuel (] No. 6 fuel (
6. Equipment Monitoring and Recordkeeping Informa	ation		
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	<u>.</u>		
(b) Leak detection inspection and repair	[X]		
(c) Refrigerated condenser temperature monitoring			
(d) Carbon adsorber exhaust perc concentration monitoring			
(e) Startup, shutdown, malfunction plan			

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

SSENDER NO. SEPE 1 STEPHEN SEPE	A. Received by (Please Print Clearly) C. Signature Agent Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
DUNNELLON FLORIDA 34432	3. Service Type L' Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Copy from service label) 7099 3400 0000 1451 2483	
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789

