

Department of Environmental Protection

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

David B. Struhs Secretary

April 10, 2002

Mr. P. H. Sendel, Jr. Royal Dry Cleaners 2383 Southeast Federal Highway Stuart, Florida 34994

Re: Facility No.: 0850123-002

Dear Mr. Sendel:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on March 6, 2002.

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,

Joe Kahn, Acting Chief Bureau of Air Monitoring

and Mobile Sources

JK/jw

cc: Mr. Tom Tittle, Southeast District

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

frestand 97-2000 50C Compliance IN



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 leave a convent to the address listed in the instructions and leave a convent to the address listed in the instructions and leave a convent to the address listed in the instructions and leave a convent to the form for your files. 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):		
Roy 1/ Doy Clemms Sendel Corp 2. Site Name (For example, plant name or number):		
2. Site Name (For example, plant name or number):		
3. Hazardous Waste Generator Identification Number:		
3. Hazardous Waste Generator Identification Number:		
FLD 05	3658317	
4. Facility Location:	•	
Street Address: 2383 9.E. Federal City: Gfurt County: Mari	Huy	
City: Gfv4rf County: Mar;	Light Code: 34994	
5. Facility Identification Number (DEP Use ONLY - do not fill	in):	
	0850123-002	
Responsible Official	· · · · · · · · · · · · · · · · · · ·	
6. Name and Title of Responsible Official:		
	Title:	
Name: P.H. Sendel Jr.	President	
7. Responsible Official Mailing Address:		
Organization/Firm:		
Street Address: 2383 5.E. Federal Hung City: Strust County: Martin	7:- 0-1	
City: 35 ward County: Maryin	Zip Code: 3 4994	
8. Responsible Official Telephone Number:		
1	Fax: () -	
Facility Control (If different from Domestic) Officials		
Facility Contact (If different from Responsible Official) 9. Name and Title of Facility Contact (For example, plant man	ager).	
7. Name and Title of Lacinty Contact (1 of Champic, plant man		
JAME		
10. Facility Contact Address:		
Samuel Address.		
Street Address: City: County:	Zip Code:	
SAM & County.	Lip, Code.	
11. Facility Contact Telephone Number:		
Telephone: () -	Fax: () -	
3 Ame		

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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Facility Information			
1.(a) DRY-TO-DRY M	ACHINES ONL	Y .	
How many dry-to-dry ma	chines do you ha	ve on-site?	•
For each dry-to-dry mach	ine on-site, pleas	e provide the following informa	ation:
Date Initially Purchased From Manufacturer 1995	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/N	ew RCCA/None required	
	Existing/No	ew RC/CA/None required	· ·
	Existing/No	ew RC/CA/None required	
-			
*CONTROL DEVICE K	EY: RC = r	refrigerated condenser CA	A = carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY		
How many washers do yo		. []	
How many dryers/reclaim		on-site?	
unit. If the transfer maching 1993, it is a NEW unit (machine)	ine was purchased to units purchased	d from the manufacturer betwee	n December 9, 1991, it is an EXISTING n 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	<u>.</u>
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
•	roethylene (perc)	have you used within the last 12	A = carbon adsorber 2 months?
(b) If less than 12 mor	ns (You must fill	,	
(U) II ICOS HIAII IZ IIIUI	idis, now many!		

DEP Form No. 62-213.900(2)

Effective: 2/24/99

New store: New machine

Unopened store [____] (date of expected opening _

Check why it is less than 12 months: New owner: Did not keep records: Did not keep records:

3. What is the facility's source classification based on Indicate with an "X". Select one classification on		
Small Area Source		
Transfer only 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 []		
Transfer only 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 machines pro (Indicate with an "X".)	ursuant 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	
Existing machines at large area source Carbon adsorber Refrigerated condenser []	New machines at large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions un Rule 62-213.300, F.A.C. Verify that all steam and ho exemption criteria or that no such units exist on-site (s		
All steam and hot water generating units exempt No such units on-site	OR	
How many boilers do you have on-site?		
For each boiler, indicate its horsepower (HP) rating: [
What type of fuel do you use? [
6. Equipment Monitoring and Recordkeeping Informa	ition	
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	dition log	
(b) Leak detection inspection and repair		
(c) Refrigerated condenser temperature monitoring		
(d) Carbon adsorber exhaust perc concentration monit	oring	
(e) Startup, shutdown, malfunction plan		

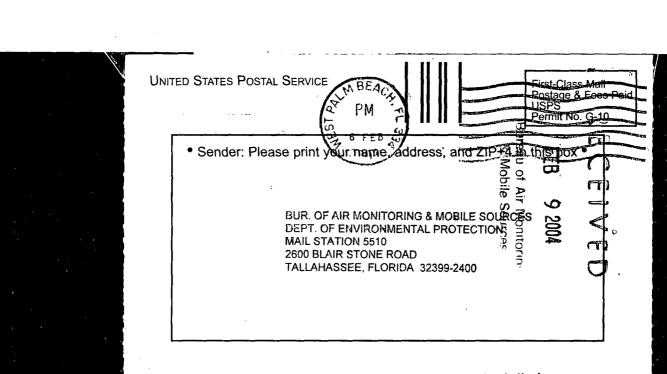
DEP Form No. 62-213.900(2) Effective: 2/24/99

7. Surrender	of Existing DEP Air Permit(s)
Please indicate	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 notif statemen maintain comply w I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its 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. Somptly notify the Department of any changes to the information contained in this notification. The of responsible official Date

0850123,-002 1(a) Place date Initially Purchased in space provided. New should be circled under Status for 1995 machines add date machine control device Installed. Page 16 5. Abd horsepower (HP) for boiler. Responsible official signand date for changes made. 8 pohe to Mr. Sendel and he stated that the 3/22/02 Control device for the dry to dry machine was built into the machine. He also stated the porsepower for the boiler is 20HP.

0932	U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com #For delivery information visit our website at www.usps.com
5651	OFFICIAL USE
E000	Certified Fee Return Reciept Fee (Endorsement Required)
2260	Restricted Delivery Fee (Endorsement Required) Total Pos IND# 850123
7003	PHILIP SENDEL ROYAL CLEANERS Street, Apt 22383 S E FEDERAL HWY or PO Box City, State, STUART, FL 34994
<u> </u>	PS Form 3800. June 2002 See Reverse for Instructions.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, 	A. Signature X	
or on the front if space permits.	D. Is delivery address different from them 10 A Yes	
1. Article Addressed to: ID# 850123 PHILIP SENDEL ROYAL CLEANERS 2383 S FEDERAL HWY	If YES, enter delivery address below: '디앤	
STUART, FL 34994	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
	4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Ar 7003 2260 0003 5651	0732	
PS Form 3811, August 2001 Domestic Retu	urn Receipt: 102595-02-M-1540	





THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

420513 DEC11 2002

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

W

Sureau of Air M & Mobile Sou

Do NOT Remove Label

ROYAL CLEANERS
PHILIP HENRY SENDEL JR
2383 S E FEDERAL HWY
STUART FL
34994

AIRS ID#0850123

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

Obj.: 0022

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

MAN 1 0 :

TOTAL AMOUNT DUE: \$50.00

SED + This failify has

when closed

& Mobile Sources

AIRS ID# 850123 10 ROYAL CLEANERS 2383 S E Federal Hwy STUART, FL 34994

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

436685 FEB202004

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

ID# 850123
PHILIP SENDEL
ROYAL CLEANERS
2383 S E FEDERAL HWY
STUART, FL 34994

FOR GOVERNMENT USE ONLY Org.: 3755010,000; EO 31 Fund: 20-2-035001 Obj.: 002273