

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary -

September 16, 1996

Mr. Young-Ho Na Kims Lockhart Dry Cleaners 7312 Edgewater Drive Orlando, Florida 32810

Dear Mr. Na:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 22, 1996.

Please note that in November 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

Mr. Louis Nichols, Central District cc:

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

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Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

·						
Facility Owner/Company Name (Name of corporation, agency, or individual owner):						
Young - HO NA						
2. Site Name (For example, plant name or number):						
K:M: Lockhary DRY C/EANERS 3 Hazardous Waste Generator Identification Number:						
3. Hazardous Waste Generator Identification Number:						
FLD 984171165						
FLD 984171165 4. Facility Location: 73/2 EDGEWATER DR Street Address:						
City: ORLANDO County: ORANGE Zip Code: 32810						
5.: Facility Identification Number (DEP Use): 0950292						
Responsible Official						
6. Name and Title of Responsible Official:						
YOUNG-HO. NA						
7. Responsible Official Mailing Address: Organization/Firm: フ 3 / ユ						
City: ORLANDO County: ORANGE Zip Code: 328/0						
8. Responsible Official Telephone Number: Telephone: (407) ≥ 98 - 4660 Fax: () -						
Facility Contact (If different from Responsible Official)						
9. Name and Title of Facility Contact (For example, plant manager):						
10. Facility Contact Address:						
Street Address:						
City: County: Zip Code:						
11. Facility Contact Telephone Number:						
Telephone: () - Fax: () -						

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AUG 2 2 1996

DEP Form No. 62-213.900(2) Effective: 6-25-96

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Bureau of Air Monitoring & Mobile Sources

Facility Information

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	lD	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit	 		10 1 N 1 4 N	· · .				· · · · · · · · · · · · · · · · · · ·	1 + 12 1 2 A
(1) w/ ref. condenser	1	22-15C-1	793						1
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit									part of
(4) w/ ref. condenser					F				
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit	75 - 14 1 2 1 1				, girtyen byk			, e la	Hulled 1
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls	_								
Reclaimer Unit		a di jarah	dikay 1 si w			· · · · · · · · · · · · · · · · · · ·		Maigréile aile	
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls		1			İ		l.		
 (b) Control devices are (c) No control devices 2.(a) What was the total quantity of the control of	are ro juanti gallo	equired to be ity of perchloons ow many? [_	installed [_ proethylene (perc)	_] purchased in			ı]
3. What is the facility's son (Indicate with an "X". S Existing small are Existing large are	Selec ea soi	t one classific	cation only.) Ne	w sm	nitions found all area sour ge area sour	ce [<u>X</u>]		Part II?	

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4.	(Indicate with an "X".)	uired on machines	pursuant to section (3) of	Part II of this notification form?
	Existing large area source Carbon adsorber	<u>e</u>	Refrigerated condenser	
	New small area source Refrigerated condenser	LX		
	New large area source Refrigerated condenser			
to	A facility which contains non-e Rule 62-213.300, F.A.C. Verificemption criteria or that no such	y that all steam and	d hot water generating unit	o use the general permit pursuant is on-site meet the following
bo	steam and hot water generating iler HP or less), and (2) are fire ring which propane or fuel oil c	d exclusively by n	atural gas except for perio	ds of natural gas curtailment
	steam and hot water generating such units on-site	g units exempt	<u></u>	
		·		
	Fasian	4 70	and December with a Keeferman	
C1		_	and Recordkeeping Inform	
	· ·	-	in accordance with the requ	uirements of this general permit:
	Purchase receipts and solvent p			<u>(X)</u>
(b)	Leak detection inspection and i	repair		
(c)	Refrigerated condenser tempera	ature monitoring		_ X]
(d)	Carbon adsorber exhaust perc o	concentration mon	itoring	
(e)	Instrument calibration			
(f)	Start-up, shutdown, malfunctio	n plan		

DEP Form No. 62-213.900(2) Effective: 6-25-96

Surrender of Existing Air Permit(s)

lease indicat	te with an "X" the appropriate selection:							
	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)							
[X] No 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 cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the is 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form.							
I will pro	mptly notify the Department of any changes to the information contained in this notification. $y = 19 - 1996$							
Signature	Date							

DEP Form No. 62-213.900(2) Effective: 6-25-96

BEST AVAILABLE COPY

Orange County Environmental Protection Department



TITLE VAIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL T	COMPL	МИНИDISCOVIE	KY []	RE-INSPECTIO	м [_]
TIME IN: 1100	TIME OUT:		AIR	S 11)#: 09	50292	
TYPE OF FACILITY:	Dr	ry Clear	iing		,	
FACILITY HAME:	Dr Kim's Lock havt 7312 Edgewate Ovlando Fl	Dry	Cleaning.		DATE: 2/3/9	7
FACILITY LOCATION:	7312 Edgewate	er Di				
	ovlando FI	J	10 85			
RESPONSIBLE OFFICIAL:	Young Ho			: NUMBER:	298-4660	
	of th <mark>e compliance</mark> requirements P Rule 62-213.300, Florida Adr			ction, the facil	lity is found to be in	
	of the compliance requirements			ction the falle	ovina compliance	
discrepancies were n	•		r cooring, or is maps	conton, the room	wing complimed	
COMPLIANCE RE	QUIREMENT/PROBLE	im	1701,1,034	-UP ACTI	ON REQUIRED	•
						•
-						
		1				
		\				
•						
COMMENTS:						
	Cacility in	00	dov			
/	-activiz					,
The Annual Compliance C	ertification form has been prop	edy certif	ied and submitted	to the inspect	от. У188[""]	NO
DATE OF NEXT INSPE]3	4	·	1	
DVIE OF BEXT HOLD	C, 11()111		proximate)			
INSPECTION CONDUC	TVED BY:		Fletcher			
	1.100	1 11	Parc Print)			
INSPECTOR'S SIGNAT	rure: Dald	JU	101-1111	HEWIN 31M	ER:(407)_8	3.6=9524_
			,			Payled 10/9

Orange County Environmental Protection Department

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	RE-INSPECTION	L2)	COMPLAINT/DISCO	OVERY	
AIRS ID#: <u>095</u> 0292	DATE: 213197	TIME	IN: <u>1100</u> TIMI	E OUT:	
FACILITY NAME: KINI'S	LOCKHART DR	1 OLENN	eks		
FACILITY LOCATION: 73	312 EDGE WATE	R DR			
	oklythodo, Fl	35.81 ()			·
PART I: NOTIFICATION					
(check appropriate box)					~
1. Existing facility notified DA	•				(XI)
2. New facility notified DARM	4 30 days prior to startup)			
3. Facility failed to notify DAI	RM to use general permi	t			
Bereitann .					
PART II: CLASSIFICATIO	N				
Eacility indicated on notifica	tion form that it is:				
(check appropriate box)	•				
A. 1. Existing small area sor dry-to-dry only, x<140 gal/transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/9)	/yr d tr Ն	ry-to-dry onl ransfer only, oth types, x<	area source y, x<140 gal/yr x<200 gal/yr 140 gal/yr n or after 12/9/91)	CSI	
3. Existing large area soudry-to-dry only, 140 <x<2, (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 9<="" before="" both="" g="" only,="" td="" transfer="" types,=""><td>100 gal/yr d 0 gal/yr t gal/yr b</td><td>lry-to-dry onl ransfer only, ooth types, 14</td><td>area source y, 140<x<2, 100="" gal="" yr<br="">200<x<1,800 gal="" yr<br="">0<x<1,800 gal="" yr<br="">on or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td></td><td></td></x<2,>	100 gal/yr d 0 gal/yr t gal/yr b	lry-to-dry onl ransfer only, ooth types, 14	area source y, 140 <x<2, 100="" gal="" yr<br="">200<x<1,800 gal="" yr<br="">0<x<1,800 gal="" yr<br="">on or after 12/9/91)</x<1,800></x<1,800></x<2,>		
This is a correct facility class	sification)	XIY 🗆 N			
If no, please check the appro	priate classification:				
☐ facility qual ☐ facility exce	lified for a general permi ceds above limits and is a	it as number not cligible fo	above or a general permit		
B. The total quantity of perc facility was 35 gallo	hloroethylene (perc) pur ns.	chased within	n the preceding 12 mont	hs by this dry	cleaning

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly scaled and impervious containers? MU YW 2. Examining the containers for leakage? ŮXÝ □N 3. Closing and securing machine doors except during loading/unloading? MD AM 4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal? DIA DIA 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? A/NO NO YEA PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) NO VIĆI 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? A/NO NO YYZ 3. Equipped the condenser with a diverter valve so airflow will be directed away from the OY ON ONA condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated CIY KIN condenser on a weekly basis? (bi-week la 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MD AM condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after MU AIX verifying that the coolant had been completely charged?

B. Has the responsible official of an existing large or new large area source also:	
1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	מט אָם
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	אט עט
Is the temperature differential equal to or greater than 20° F?	OY ON
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	מארם עם ארע
Is the perc concentration equal to or less than 100 ppm?	OY ON
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	מס צט
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	□У □И □И/А
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	AA ON
2. Maintained rolling monthly averages of perc consumption?	XY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	MY ON
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	MAA □N
4. Maintained calibration data? (for direct reading instruments only)	OY ON ON/A
4. Maintained calibration data? <i>(for direct reading instruments only)</i> 5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON ON/A
5. Maintained exhaust duct monitoring data on perc concentrations?	MA ON
5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan?	да пи да пи
5. Maintained exhaust duct monitoring data on perc concentrations?6. Maintained startup/shutdown/malfunction plan?7. Maintained deviation reports?	хіх пи дх пи дх пи
5. Maintained exhaust duct monitoring data on perc concentrations?6. Maintained startup/shutdown/malfunction plan?7. Maintained deviation reports?Problem corrected?	MY ON MY ON MY ON
5. Maintained exhaust duct monitoring data on perc concentrations?6. Maintained startup/shutdown/malfunction plan?7. Maintained deviation reports?Problem corrected?	MY ON MY ON MY ON

2.	. Which method of detection is used by the responsible official?						
	Visual examination (condensed sol	ırfaces)	15 9:				
	Physical detection (airflow felt three	ough gas	kcts)	•	ū		
	Odor (noticeable perc odor)				ÉQ.		
	Use of direct-reading instrumentat	ion (FID	/PID/calo	rimetric tubes)			
	If using direct-reading instrumen	ıtation,	is the equ	ipment:		Ì	
	a. Capable of detecting p	ere vapo	r concent	ations in a range of 0-500 ppm?	DY (ИС	
· ·	b. Calibrated against a st (PID/FID only)?	andard g	gas prior to		CIY (אכ	
	e. Inspected for leaks and	lobviou	s signs of	wear on a weekly basis?	DY DN		
	d. Kept in a clean and se	t in use?	OY ON				
e. Verified for accuracy by use of duplicate samples (calorimetric only)?						JN	
3. Has the facility maintained a leak log?					A(A)	ΠИ	
4.	Does the responsible official check the f	ollowing	g areas for	leaks?			
	Hose connections, fittings, couplings, and valves	ŻΩΥ	ПN	Muck cookers	ŻΥ	ПN	
	Door gaskets and scating	þλιλ	ПN	Stills	MY	ПN	
	Filter gaskets and scating	ÇAY	ПN	Exhaust dampers	ŹΙΥ	ПN	
	Pumps	MY	ПN	Diverter valves	YY	ПИ	
	Solvent tanks and containers	KIY	ПN	Cartridge filter housings	A	ПИ	
	Water separators	ÄΥ	ПИ				

MR. YOUNG	; · · · · · ·
Name of Responsible Official	
Todd Fletcher / MARIE L DRUGGEL	.2/3/97
Inspector's Name (Please Print)	Date of Inspection
Marie L. Drugge	a/3/98
Inspector's Signature	Approximate Date of Next Inspection

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0950292
YOUNG-HO
YOUNG HO
7312 EDGEWATER DRIVE
ORLANDO FL 32810

	Do <u>NOT</u> Remove Label	
Annual Reporting Period:		/J - 3/ 19 9
	V general air permit, my facility has remained A.C.), during the period covered by this statem	
If NO, complete the following:		
#1. Term or condition of the general permit	that has not been in continuous compliance dur	ing the reporting period stated above:
•	RECEIVED	
Exact period of non-compliance: from	to	<u> </u>
Action(s) taken to achieve compliance:	JAN 2 2 1998	A AR
Method used to demonstrate compliance:	Bureau of Air Monitoring & Mobile Sources	20 91 20 91
#2. Term or condition of the general permit t	that has not been in continuous compliance dur	ing the reporting period stated above:
Exact period of non-compliance: from	to	
Action(s) taken to achieve compliance:	· · · · · · · · · · · · · · · · · · ·	
Method used to demonstrate compliance:		
	· 	
notification are true, accurate and complete. Fu	ed on information and belief formed after reasonab urther, my annual consumption of perchloroethyle o dry facilities or 1,800 gallons per year for transfe	ne solvent, based upon purchase receipts,
RESPONSIBLE OFFICIAL: Nam	VG -HO NA Too ne (Please Print) Sign	nature $/-15-9$

11/06/97

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	1PLAINT/DISCOVERY RE-INSPECTION					
TIME IN: 11:00 TIME OUT: 11:30	O AIRS ID#: 0950297					
TYPE OF FACILITY: KIMS Lockhart Dry	/ Cleaning					
FACILITY NAME: 7312 Edgewater DV DATE: 02/11/98						
FACILITY LOCATION: Ovlando F-1 32810						
A CONTROL OF THE PROPERTY OF T	-010					
RESPONSIBLE OFFICIAL: Young Ho	PHONE NUMBER: 407 1955 2980					
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	- · · · · · · · · · · · · · · · · · · ·					
Based on the results of the compliance requirements evaluate	· · · · · · · · · · · · · · · · · · ·					
discrepancies were noted:						
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED					
· · ·	10220 W 01 110 110 11 12 Q 01 12 2					
<u> </u>	·					
ŧ						
<u> </u>	:					
COMMENTS:						
Facility in	Compliance					
The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO						
DATE OF NEXT INSPECTION:	11 (99					
	pproximate)					
INSPECTION CONDUCTED BY: 1000 Fletcher						
(Please Print)						
INSPECTOR'S SIGNATURE: 000 USE PHONE NUMBER: 836-9524						

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	owner
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Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Young - HO. NA
2.	Site Name (For example, plant name or number):
ļ. [K: 711 S LOCKHART DRY C/EANERS Hazardous Waste Generator Identification Number:
3.	Hazardous Waste Generator Identification Number:
	FLD 984171165
4.	FLD 984171165 Facility Location: 73/2 EDGEWATER DR
	City: ORLANDO County: ORANGE Zip Code: 32810
5. †	Facility Identification Number (DEP Use)!
	Responsible Official
6.	Name and Title of Responsible Official:
	YOUNG-HO. NA
7.	Organization/Firm: 73/1 EDGEWATER DR Street Address:
	City: ORLANDO County: ORANGE Zip Code: 32810
8.	Responsible Official Telephone Number: Telephone: (407) 298-460 Fax: () -
-	
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
10.	Facility Contact Address:
	Street Address: City: County: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: () - Fax: () -
_	

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AUG 2 2 1996

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Bureau of Air Monitoring & Mobile Sources

Facility Information

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
Example	#]	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit									٠
(1) w/ ref. condenser	7	22-156-1	993-=2-	DEC	19939				
(2) w/ carbon adsorber	-				, , , , , , , , , , , , , , , , , , ,				
(3) w/ no controls									
Washer Unit		** **							
(4) w/ ref. condenser				ĺ					
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit	1 j. 1 i.	Fig. 3		, A	Transfer Drag	,		The sections	1 January
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls							l	-	
Reclaimer Unit	. P.		e Tilliani in terre				1773	1 a 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1.11.20
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
 (b) Control devices are (c) No control devices 2.(a) What was the total of the control of the contr	are re luanti gallo hs, ho	equired to be ity of perchlons ow many? [_	installed [perc)] purchased ir				
3. What is the facility's son (Indicate with an "X". S	Select	t one classific	cation only.)		nitions found			Part 11?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

	ontrol technology is requate with an "X".)			; , , , , , , , , , , , , , , , , , , ,
	Existing large area source Carbon adsorber		Refrigerated condenser	· [_]
_	New small area source Refrigerated condenser	LX		
	New large area source Refrigerated condenser			
	• •			
to Rule 62		that all steam and	d hot water generating ur	to use the general permit pursuan nits on-site meet the following
boiler HP		d exclusively by n	atural gas except for per	f 10 million BTU/hr or less (298 iods of natural gas curtailment is fired.
All steam No such u	and hot water generating	units exempt		
				•
		·		
		·		
		ent Monitoring a	nd Recordkeeping Info	rmation
Check all	Equipm	_		rmation quirements of this general permit:
	Equipm	o be kept on-site i		
(a) Purcha	Equipm logs which are required t	o be kept on-site i		quirements of this general permit:
(a) Purcha	Equipm logs which are required t se receipts and solvent p	o be kept on-site i urchases epair		quirements of this general permit:
(a) Purcha (b) Leak d (c) Refrige	Equipm logs which are required t se receipts and solvent po- letection inspection and r	o be kept on-site in the control of	in accordance with the re	quirements of this general permit:
(a) Purcha (b) Leak d (c) Refrige (d) Carbon	Equipm logs which are required t se receipts and solvent po- letection inspection and r erated condenser tempera	o be kept on-site in the control of	in accordance with the re	quirements of this general permit:

DEP Form No. 62-213.900(2) Effective: 6-25-96

Surrender of Existing Air Permit(s)

lease indicat	e with an "X" the appropriate selection:
	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
	•,
ĹXJ	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifi statement maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form.
I will pro	mptly notify the Department of any changes to the information contained in this notification.
Signature	Jon 2014 P-19-1996 Date 2-3-1997

PERCHLOROETHYLENE DRY CLEANERS

				1/	A.	J 3la
PERC	HLOROETHYLE TITLE V GENER COMPLIANCE INSPECTION RE-INSPECTION	RAL PERM CTION CII	IT	V Overy ¢ 1	MAR 19 13 Nobile Solution 30	VEC 39
AIRS ID#: OG 50 292 I FACILITY NAME: KI	ms lock has	ct D	vy C'leani		30	Ting.
RESPONSIBLE OFFICIAL :	Young 1-10		PHONE: 407	798 - 4	<u>600</u>	
PART I: NOTIFICATION (check appropriate box) 1. New facility notified DARM	30 days prior to startup					
2. Facility failed to notify DARI PART II: CLASSIFICATION						
☐ facil	ce	sfer only, x < 1 types, to-dry only, sfer only, 20 types, 140 types	$x \le 140 \text{ gal/yr}$ $x \ge 200 \text{ gal/yr}$ $x \ge 300 \text{ gal/yr}$ $x = 300 \text{ gal/yr}$ $x = 300 \text{ gal/yr}$ $x \le 300 \text{ gal/yr}$ $x \le 300 \text{ gal/yr}$ $x \le 300 \text{ gal/yr}$ $x \ge 300$	business/petrol	cum	
B. The total quantity of perchl facility was 35 gallons	oroethylene (perc) purchas				eleaning	

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly scaled and impervious containers? 2. Examining the containers for leakage? אאלט אט צט 3. Closing and securing machine doors except during loading/unloading? ETY LIN 4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal? UN UN/A 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? מאט אט אט PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? UN UN/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the V/ND ND. condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after EN LIN verifying that the coolant had been completely charged?

Has the responsible official of an existing large or new large area source also:			
Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ÜΥ	ИΝ	
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ÜΥ	ПN	ווא/א 🗎
Is the temperature differential equal to or greater than 20° F?	ΠY	ΠN	□N/A
Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	ÜΥ	ИΝ	□N/A
Is the perc concentration equal to or less than 100 ppm?	ÜҮ	ÜN	טא/א
Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ĽΙΥ	ÜN	□N/A
Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ŪΥ	ΩΝ	□n/a
Routed airflow to the carbon adsorber (if used) at all times?	ŪΥ	ŪИ	□N/A
l c	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? Is the temperature differential equal to or greater than 20° F? Measured and recorded the pere concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Is the pere concentration equal to or less than 100 ppm? Assured that the sampling port on the carbon adsorber exhaust for measuring pere concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? Is the temperature differential equal to or greater than 20° F? Measured and recorded the pere concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Is the pere concentration equal to or less than 100 ppm? Assured that the sampling port on the carbon adsorber exhaust for measuring pere concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? Is the temperature differential equal to or greater than 20° F? Measured and recorded the pere concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Is the pere concentration equal to or less than 100 ppm? Assured that the sampling port on the carbon adsorber exhaust for measuring pere concentrations is at least 8 duet diameters downstream of any bend, contraction, or expansion; and downstream from no other inlet? Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official:				
(check appropriate boxes)	/			
1. Maintained receipts for perc purchased?	DY DN			
2. Maintained rolling monthly total of perc consumption?	LAY LIN			
3. Maintained leak detection inspection and repair reports for the following:	,			
a. documentation of leaks repaired w/in 24 hrs? or;	א/מט מט צע			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	מארם אם מאיע			
4. Maintained calibration data? (for applicable direct reading instruments)	בוא בוא קאיע			
5. Maintained exhaust duct monitoring data on perc concentrations?	מאים אם איז			
6. Maintained startup/shutdown/malfunction plan?	EAY CIN			
7. Maintained deviation reports?	מא מא פאוע אינע			
Problem corrected?	ON ON DWY			
8. Maintained compliance plan, if applicable?	מא מא מאיע			

PA	ART VI: LEAK DETECTION AND I	REPAIRS					
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repgir						
	inspection?			UN UN			
2.	Has the facility maintained a leak log?			אנט אנט			
3.	Does the responsible official check the	following areas for leaks					
	Hose connections, fittings, couplings, and valves	מ/אנט אנט צע	Muck cookers	אוט אט אט			
	Door gaskets and scating	DY ON ONA	Stills	מאתו און אמ			
	Filter gaskets and scating	DY ON ON/A	Exhaust dampers	מ/אנט אנט צע			
	Pumps	DY ON ON/A	Diverter valves	DY ON ON/A			
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	QA DN DN/V			
	Water separators	MY ON ON/A					
4.	Which method of detection is used by	the responsible official?					
	Visual examination (condensed s	solvent on exterior surfac	cs)	ය			
	Physical detection (airflow felt th	rough gaskets)					
	Odor (noticeable perc odor)						
	Use of direct-reading instrument	ation (FID/PID/calorime	tric tubes)				
	Halogen leak detector			u /			
	If using direct-reading inst	rumentation, is the equ	ipment:	EM/A			
	a. Capable of detecting	pere vapor concentration	us in a range of 0-500 ppm?	CIY CIN			
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	l after each use	מט צט			
	c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	UY UN			
	d. Kept in a clean and	secure area when not in	use'?	UY UN			
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?						

TODA Fletcher	2/11/98
Inspector's Name (Please Print)	Date of Inspection
toll Trilet	2/11/99
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
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THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

300287

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

4

AIRS ID#0950292

YOUNG-HO YOUNG HO 7312 EDGEWATER DRIVE ORLANDO FL 32810 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273 THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0354302

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 ROOM

Do NOT Remove Label

AIRS ID # 0950292 KIMS LOCKHART DRY CLEANERS

YOUNG HO 7312 EDGEWATER DRIVE ORLANDO FL 32810 DEC 15 99

FOR GOVERNMENT USE ONLYCES
Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

PERCHLOROETHYLENE DRY CLEANERS TITLE Y GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY
AIRS ID#: 0950292 DATE: 1/15/99 FACILITY NAME: Kim'S Lockhart FACILITY LOCATION: 7312 Edgewa Orlando, FL RESPONSIBLE OFFICIAL: Young Ho	Dry Cleaners ter Dr. 32810
CONTACT NAME:	PIIONE:
PART I: NOTIFICATION	
(check appropriate box) 1. New facility notified DARM 30 days prior to startup 2. Facility failed to notify DARM to use general permit	
PART II: CLASSIFICATION	· · · · · · · · · · · · · · · · · · ·
dry-to-dry only, $x < 140$ gal/yr dry-transfer only, $x < 200$ gal/yr trans both types, $x < 140$ gal/yr both	☐ No notification form ☐ Drop store/out of business/petroleum ew small area source o-dry only, x < 140 gal/yr fer only, x < 200 gal/yr types, x < 140 gal/yr structed on or after 12/9/91)
3. Existing large area source \Box 4. N dry-to-dry only, $140 \le x \le 2,100$ gal/yr dry-t transfer only, $200 \le x \le 1,800$ gal/yr trans both types, $140 \le x \le 1,800$ gal/yr both	ew large area source o-dry only, $140 \le x \le 2,100$ gal/yr efer only, $200 \le x \le 1,800$ gal/yr types, $140 \le x \le 1,800$ gal/yr structed on or after $12/9/91$) $\square N \square \square Can not determine$
If no, please check the appropriate classification: facility qualified for a general p	
B. The total quantity of perchloroethylene (perc) purchas facility was [9.5] gallons.	ed within the preceding 12 months by this dry cleaning

PART III GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	·
1. Storing perchloroethylene in tightly scaled and impervious containers?	DEY ON ON/A
2. Examining the containers for leakage?	DAY ON ONIV
3. Closing and securing machine doors except during loading/unloading?	en on
4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal?	EN ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	בוץ בוא באילא
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part V.	
If classification 2 has been checked, the machine should be equipped with a refrig (complete A below).	gerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber must installed prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refri (complete A and B below).	gerated condenser
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)	•
1. Equipped all machines with the appropriate vent controls?	DY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	DY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	DY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	MY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F7	MY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	DY ON

B.	Has the responsible official of an existing large or new large area source also:	
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	OY ON
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ON/A
	Is the temperature differential equal to or greater than 20° F?	OY ON ON/A
3.	Measured and recorded the pere concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	OY ON ON/A
	Is the perc concentration equal to or less than 100 ppm?	OY ON ON/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	OY ON ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	` '
1. Maintained receipts for perc purchased?	יי' ק א בוא
2. Maintained rolling monthly total of perc consumption?	QY ON
3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or;	מאל מא מאיע
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	MY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	אס אם אים
5. Maintained exhaust duct monitoring data on pere concentrations?	חאר שו אם אם אם
6. Maintained startup/shutdown/malfunction plan?	QYY ON
7. Maintained deviation reports?	DY ON MIN/A
Problem corrected?	OY ON DINA
8. Maintained compliance plan, if applicable?	OY ON DIN/A

PART VI: LEAK DETECTION AND REPAIRS			
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair			
inspection?	N _e	• •	MA ON
2. Has the facility maintained a leak log	· ,		MA ON
3. Does the responsible official check the	e following areas for leaks	?	
Hose connections, fittings, couplings, and valves	DY ON ONA	Muck cookers	DY ON ON/A
Door gaskets and seating	MY ON ON/A	Stills	MY ON ON/A
Filter gaskets and seating	QA ON ONVY	Exhaust dampers	AVA NO N/A
Pumps	DY ON ONIA	Diverter valves	MY ON ON/A
Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	MY ON ONA
Water separators	. AA ON ONA		
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surface	es)	Ø
Physical detection (airflow felt t	hrough gaskets)		
Odor (noticeable perc odor)	•		
Use of direct-reading instrumen	tation (FID/PID/calorimet	ric tubes)	
Halogen leak detector			
If using direct-reading ins	trumentation, is the equi	ment:	ΔΝ/Λ
a. Capable of detecting	g pere vapor concentration	s in a range of 0-500 ppm?	OY ON
b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use	OY ON
c. Inspected for leaks :	and obvious signs of wear	on a weekly basis?	OY ON
d. Kept in a clean and	secure area when not in u	sc?	OY ON
e. Verified for accurac	y by use of duplicate samp	oles (calorimetric only)?	OY ON
	.		
		•	
Ilka Bundi		1/15/9	,9
Inspector's Name (Please P	rint)	Date of Insp	ection
Illes Burrdy		1/15/	ZOOO
Inspector's Supplifie		Approximate Date of	INCXL INSDCCIION

DDITIONAL SITE INFORMATION:	
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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL Z COMPI	LAIN I/DISCOVERY RE-INSPECTION
TIME IN: 1430 TIME OUT: 7445	AIRS ID#: 0950292
TYPE OF FACILITY: Dry Cleaner	
FACILITY NAME: Kim's Lockhart Dry C!	leaners DATE: 1/15/99
	···
Orlando FL 32	810
RESPONSIBLE OFFICIAL: Young Ho.	PHONE NUMBER: 407 - 298 - 4600
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evaluated discrepancies were noted:	d during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
COMMENTS:	
Facility in compliance.	
The Annual Compliance Certification form has been properly certified	d and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: $1/15/2000$ (Appr	roximate)
INSPECTION CONDUCTED BY: Ilka Bund	1
INSPECTOR'S SIGNATURE: Mra BIMON (Plea)	se Print)PHONE NUMBER:836 - 9524
Page V	of Revised 10/96

AIRS 10#: 0950292	Environment	ar i rotection	Departmen	Revised (10/10/96
	NER AIR QUALI L COMPLIANCE CE		()	A CA
FACILITY NAME: Kims Location: 7312	ckhart Dry Edgewater	Cleaners Drive	DATE	
Annual Reporting Period:	S-/// 1!	998 то	1/15	19_99
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F			1	P Rule
#1. Term or condition of the general permi	t that has not been in conti	nuous compliance duri	ng the reporting perio	d stated above:
Exact period of non-compliance: from		to		
Action(s) taken to achieve compliance: Method used to demonstrate compliance:				
#2. Term or condition of the general permi	t that has not been in conti	nuous compliance duri		
Exact period of non-compliance: from		to	OEGETY	
Action(s) taken to achieve compliance:			JUN 3 0 199	9 (2)
Method used to demonstrate compliance:	· · · · · · · · · · · · · · · · · · ·		ORANGE COUNTY ENVIRONMENT OF PROTECTION DEPART	DRMENTAL IMENT
As the responsible official, I hereby certify, made in this notification are true, accurate upon rolling averages of purchase receipts, year for transfer or combination facilities.	and complete. Further, m	y annual consumption	of perchloroethylene	solvent, based
RESPONSIBLE OFFICIAL:	UNG FO	NA Jo	ature .	6/29/99 Date

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

BEST AVAILABLE COPY

PERCHLOROETHYLENE DRY CLEANERS

•	COMPLIANCE I	NSPECTION 9		
TYPE OF INSPECTION:	ANNUAL	· 2	COMPLAINT/D <u>I</u> SCOVER	
	RE-INSPECTIO	и 🗅	Bure	
			& N	
AIRS ID#: 0950293 2			IN: 1450 TIME OUT	: <u>1510</u>
FACILITY NAME: Kim'	s Lockhar	t Dry	-1047712 言三 正	5 [7]
FACILITY LOCATION: 7	312 Edg.	<u>e water</u>		
	rlando, 1			
RESPONSIBLE OFFICIAL:	Young Ho)	_PHONE: 407-298	<u>'-4600</u>
CONTACT NAME:			PHONE:	
				
PART I: NOTIFICATION		•		
(check appropriate box)				
1. New facility notified DARM 3	0 days prior to start	iup		۵
2. Facility failed to notify DARN	l to use general per	mit		Q '
PART II: CLASSIFICATION				
Facility indicated on notification	form that it is:		☐ No notification form	
(check appropriate box) A.	t for m that it is.		☐ Drop store/out of business	s/petroleum
1. Existing small area source		2. New small a		
dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr		transfer only, x	, x < 140 gal/yr < 200 gal/yr	
both types, $x < 140 \text{ gal/yr}$		both types, $x <$	140 gal/yr	
(constructed before 12/9/91)		(constructed on	or after 12/9/91)	
3. Existing large area source		4. New large a		•
dry-to-dry only, $140 \le x \le 2,10$			$140 \le x \le 2,100 \text{ gal/yr}$	
transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$				
(constructed before 12/9/91)	•		or after 12/9/91)	
5. This is a correct facility clas	sification	MO N	☐Can not determine	
If no, please check the appropriate classification:				
☐ facility	qualified for a gene		mberabove	
facility	exceeds above limi	ts and is not elig	gible for a general permit	

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning

facility was ____ gallons.

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) IDY DN DN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? ZY ON ON/A 2. Examining the containers for leakage? Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at □N □N/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber ON ON/A beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? MY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the ✓ ✓ □N □N/A condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

B.	Has the responsible official of an existing large or new large area source also:		
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	OY	□N
II .	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	□N □N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	□N □N/A
	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	ΠV	ON ON/A
	Is the perc concentration equal to or less than 100 ppm?		ON ON/A
	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ΟY	ON ON/A
ll .	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	□N □N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ON ON/A

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? dy on on/a 4. Maintained calibration data? (for applicable direct reading instruments) OY ON ON/A 5. Maintained exhaust duct monitoring data on perc concentrations? DY ON 6. Maintained startup/shutdown/malfunction plan? DY DN DN/A 7. Maintained deviation reports? OY ON MN/A Problem corrected? DY ON ON/A 8. Maintained compliance plan, if applicable?

PART VI: LEAK-DETECTION AND REPAIRS				
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
		DAY / DIN		
		ON ON		
following areas for leaks?				
DY ON ON/A	Muck cookers	MY ON ON/A		
DY ON ON/A	Stills	ØY ON ON/A		
MY ON ON/A	Exhaust dampers	MY ON ON/A		
DY ON ON/A	Diverter valves	DY ON ON/A		
MY ON ON/A	Cartridge filter housings	MY ON ON/A		
DY ON ON/A	•			
e responsible official?				
vent on exterior surfaces)				
Physical detection (airflow felt through gaskets)				
Odor (noticeable perc odor)				
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)				
Halogen leak detector				
mentation, is the equipmen	nt:	□N/A		
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?				
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?				
obvious signs of wear on a	weekly basis?	מם צם		
ure area when not in use?	-	מם צם		
	(calorimetric only)?	OY ON		
J	1-20-00)		
<u> </u>	Date of Inspection			
	1-20-0	1		
	Approximate Date of N	Vext Inspection		
	weekly (for small sources, be following areas for leaks? IN ON ON/A IN ON	weekly (for small sources, bi-weekly) leak detection are solved by the leak of leaks?		

7-8-97 19.5	ADDITIONAL SITE INFORMAT	ION:		 · · · · · · · · · · · · · · · · · · ·
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Orange County Environmental Protection Department

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT - ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Kim's Lockhart D	ry Cleaners	DAT	E: / /2. /2.
FACILITY LOCATION: 7312 Edgewater	- Dr.		./ / _
Orlando, FL	32810		
		<u>-</u>	
Annual Reporting Period: JAN . 15	19_99 то _	JAN. 20	\$ 2000
Based on each term or condition of the Title V general air pe		<u>,</u> ,	DEP Rule
If NO, complete the following:			
#1. Term or condition of the general permit that has not bee	n in continuous complian	ce during the reporting po	eriod stated above:
Exact period of non-compliance: from		to	
Action(s) taken to achieve compliance:			
Method used to demonstrate compliance:		· · · · · · · · · · · · · · · · · · ·	
#2. Term or condition of the general permit that has not bee	n in continuous complian	ce during the reporting pe	eriod stated above:
Exact period of non-compliance: from	10		
Action(s) taken to achieve compliance:			
Method used to demonstrate compliance:		_	
·		-	•
As the responsible official, I hereby certify, based on information in this notification are true, accurate and complete. Fupon rolling averages of purchase receipts, does not exceed year for transfer or combination facilities. RESPONSIBLE OFFICIAL: RESPONSIBLE OFFICIAL:	Turther, nıy annual consun 2,100 gallons per year fo	nption of perchloroethyle or dry-to dry facilities or l	ne solvent, based
/	J		

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COMP	LAINT/DISCOVERY RE-INSPECTION
TIME IN: 1450 TIME OUT: 1510	AIRS ID#: 0950293
TYPE OF FACILITY: Dry Cleaner	
FACILITY NAME: Kim's Lockhart Dry Cl	eaners
FACILITY LOCATION: 7312 Edgewater Dr.	
Orlando, FL 3281	
RESPONSIBLE OFFICIAL: Young Ho	PHONE NUMBER: 407-298-4600
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administration	ve Code (F.A.C.).
Based on the results of the compliance requirements evaluate discrepancies were noted:	d during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
•	
	<u> </u>
	7.3.4
	Jan 20
•	
, ;	·
COMMENTS:	
Facility in compliance.	
The Annual Compliance Certification form has been properly certified	d and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: 1-20-	
	roximate) 2
INSPECTION CONDUCTED BY:	se Print)
	PHONE NUMBER: 836-1400
Page	of Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

ARMS -01 #

TYPE OF INSPECTION:	ANNUAL	a	COMPL'ÂȚNT/DÎSC	covery, 🗆
	RE-INSPECTION		E 11 05 11 15 15 15 15 15 15 15 15 15 15 15 15	200 60
AIRS ID#: 0950292				16:00T: 0900
FACILITY NAME: Kim	's Lockhar	+ Dry	Cleaners	
FACILITY LOCATION:	312 Edgewa	nter D		
	Orlando, FL	32810		
RESPONSIBLE OFFICIAL :	Young Ho		PHONE: 407-	<u> 298-4600 </u>
CONTACT NAME:			PHONE:	·
		<u> </u>		
PART I: NOTIFICATION				
(check appropriate box)	51.50,			
1. New facility notified DARM	I 30 days prior to startup)		
2. Facility failed to notify DAR	RM to use general permit	t		Ò
	CALL CARROLL TO SERVICE CONTROL CONTRO	and the state of t	The second of the second of the second	The state of the s
·				
PART II: CLASSIFICATION	N			
PART II: CLASSIFICATION Facility indicated on notificate (check appropriate box)			☐ No notification fo☐ Drop store/out of	1
Facility indicated on notificate (check appropriate box) A.	ion form that it is:		☐ Drop store/out of	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sour	ion form that it is:	. New small a	☐ Drop store/out of	
Facility indicated on notificate (check appropriate box) A. 1. Existing small area soundry-to-dry only, x < 140 gal	ion form that it is: rce	ry-to-dry only,	☐ Drop store/out of rea source x < 140 gal/yr	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sour	ion form that it is: rce		☐ Drop store/out of rea source x < 140 gal/yr < 200 gal/yr	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 galatransfer only, x < 200 gal/yr	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, $x < x$	☐ Drop store/out of rea source x < 140 gal/yr < 200 gal/yr	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area soundry-to-dry only, x < 140 gallyr both types, x < 140 gallyr (constructed before 12/9/91)	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, x < constructed on	☐ Drop store/out of rea source x < 140 gal/yr < 200 gal/yr 40 gal/yr or after 12/9/91)	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gall transfer only, x < 200 gal/yr both types, x < 140 gal/yr	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, x < constructed on . New large a	☐ Drop store/out of rea source x < 140 gal/yr < 200 gal/yr 40 gal/yr or after 12/9/91)	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,80	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, x < constructed on . New large a ry-to-dry only, ansfer only, 20	Drop store/out of rea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $= 140 \text{ gal/yr}$ or after $= 12/9/91$) rea source $= 140 \le x \le 2,100 \text{ gal/yr}$ $= 100 \le x \le 1,800 \text{ gal/yr}$	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area sound dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800	ion form that it is: ree	ry-to-dry only, ansfer only, x oth types, x < constructed on New large a ry-to-dry only, ansfer only, 20 oth types, 140	Drop store/out of rea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $= 140 \text{ gal/yr}$ or after $= 12/9/91$) rea source $= 140 \le x \le 2,100 \text{ gal/yr}$ $= 140 \le x \le 1,800 \text{ gal/yr}$ $= 10 \le x \le 1,800 \text{ gal/yr}$ $= 10 \le x \le 1,800 \text{ gal/yr}$	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,80	ion form that it is: ree	ry-to-dry only, ansfer only, x oth types, x < constructed on New large a ry-to-dry only, ansfer only, 20 oth types, 140	Drop store/out of rea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $= 140 \text{ gal/yr}$ or after $= 12/9/91$) rea source $= 140 \le x \le 2,100 \text{ gal/yr}$ $= 100 \le x \le 1,800 \text{ gal/yr}$	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area sound dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, x < constructed on New large a ry-to-dry only, ansfer only, 20 oth types, 140	Drop store/out of rea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $= 140 \text{ gal/yr}$ or after $= 12/9/91$) rea source $= 140 \le x \le 2,100 \text{ gal/yr}$ $= 140 \le x \le 1,800 \text{ gal/yr}$ $= 10 \le x \le 1,800 \text{ gal/yr}$ $= 10 \le x \le 1,800 \text{ gal/yr}$	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sour dry-to-dry only, x < 140 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area sour dry-to-dry only, 140 \le x \le 2 transfer only, 200 \le x \le 1,800 (constructed before 12/9/91) 5. This is a correct facility c	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, x < constructed on . New large a ry-to-dry only, ansfer only, 20 oth types, 140 constructed on	Drop store/out of rea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $= 40 \text{ gal/yr}$ or after $12/9/91$) rea source $= 140 \le x \le 2,100 \text{ gal/yr}$ $= 50 \le x \le 1,800 \text{ gal/yr}$ $= 50 \le x \le 1,800 \text{ gal/yr}$ or after $12/9/91$)	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area sound dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,80 both types, 140 ≤ x ≤ 1,800 (constructed before 12/9/91) 5. This is a correct facility confidence of the facility of the facilit	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, x < constructed on New large a ry-to-dry only, ansfer only, 20 oth types, 140 constructed on IY	Drop store/out of rea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $< 40 \text{ gal/yr}$ or after $12/9/91$) rea source $140 \le x \le 2,100 \text{ gal/yr}$ $0 \le x \le 1,800 \text{ gal/yr}$ or after $12/9/91$) Can not determine	business/petroleum
Facility indicated on notificate (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area sound dry-to-dry only, 140 ≤ x ≤ 2 transfer only, 200 ≤ x ≤ 1,80 both types, 140 ≤ x ≤ 1,800 (constructed before 12/9/91) 5. This is a correct facility constructed before 12/9/91	ion form that it is: rce	ry-to-dry only, ansfer only, x oth types, x < constructed on New large a ry-to-dry only, ansfer only, 20 oth types, 140 constructed on IY	Drop store/out of rea source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $< 40 \text{ gal/yr}$ or after $12/9/91$) rea source $140 \le x \le 2,100 \text{ gal/yr}$ $0 \le x \le 1,800 \text{ gal/yr}$ or after $12/9/91$) Can not determine	business/petroleum

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? □N □N/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DN/A beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) MY UN 1. Equipped all machines with the appropriate vent controls? DY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated ØY ON condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

В.	Has the responsible official of an existing large or new large area source also:			
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	Y	□N	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	□N	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΩY	ПN	□N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber,			
	if machines are equipped with a carbon adsorber?	ΠY	ΠИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПN	□N/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction,			
	or expansion; and downstream from no other inlet?	ΠY	ПN	□N/A .
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПИ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ПN	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
Maintained receipts for perc purchased?	MY ON
2. Maintained rolling monthly total of perc consumption?	MY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ON/A
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	OY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON ON/A
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON OM/A
6. Maintained startup/shutdown/malfunction plan?	ØÝ ON
7. Maintained deviation reports?	DY ON MIN/A
Problem corrected?	OY ON MA
8. Maintained compliance plan, if applicable?	OY ON ON/A

PART V	PART VI: LEAK DETECTION AND REPAIRS						
1. Does t	the responsible official conduct a w	eekly	(for	small sources, h	ni-weekly) leak detection ar	nd repa	ir
inspec	ction?					бĺУ	□N
2. Has th	ne facility maintained a leak log?					ØY	□N .
3. Does t	the responsible official check the fo	llow	ing a	reas for leaks?	•		
1	Hose connections, fittings, couplings, and valves	ØY.	ПN	□N/A	Muck cookers	Δy (□N □N/A
1	Door gaskets and seating	ŒΥ	ПN	□N/A	Stills	2 Y.(□N □N/A
]	Filter gaskets and seating	ŒΥ	ПN	□N/A	Exhaust dampers	ZY (□N □N/A
]	Pumps	⊡ Y	ПN	□N/A	Diverter valves	ØY (□N □N/A
	Solvent tanks and containers	₫Y /	ПN	□N/A	Cartridge filter housings	ØY (□N □N/A
,	Water separators	ŒΥ	ПN	□N/A			
4. Which	n method of detection is used by the	resp	onsib	ole official?		. ,	
·	Visual examination (condensed sol	vent	on ex	terior surfaces)		Ø	
I	Physical detection (airflow felt thro	ugh	gaske	ts)			
Odor (noticeable perc odor)							
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)							
Halogen leak detector							
If using direct-reading instrumentation, is the equipment:					⊠N/A	A	
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					\Box Y	ПN	
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?			r each use	ΠY	□N	
	c. Inspected for leaks and	obvi	ous s	igns of wear on	a weekly basis?	\square_{Y}	ПN
	d. Kept in a clean and sec	ure a	rea w	hen not in use?		ПY	□N
	e. Verified for accuracy b	y use	of d	uplicate samples	(calorimetric only)?	ΠY	ПN
					10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Ilka Bund-1				1-26-01		
	Inspector's Name (Please Print)	-		Date of Inspection		
	Alla Bunds				1-26-02		
	Inspector's Signature				Approximate Date of	Next In	spection

ADDITIONAL SITE INFORMATION:	
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	2-4-00 19.5
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Revised 01/18/00

ARMS 21-200' //

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

ACILITY NAME: Kim's Lockhart Dry C	leaners DATE: /-26-7 == /
ACILITY LOCATION: 7317 Edgewater	$\mathcal{O}_{\mathcal{C}_{+}}$
ACILITY LOCATION: 7312 Edgewater 2 Orlando, FL 328	10
· · · · · · · · · · · · · · · · · · ·	
annual Reporting Period: January	20 00 TO January 20 01
Based on each term or condition of the Title V general air permit, my	
2-213.300, Florida Administrative Code (F.A.C.), during the period	covered by this statement. YES NO
f NO, complete the following:	
1. Term or condition of the general permit that has not been in con	tinuous compliance during the reporting period stated above:
	DECEIVED.
Exact period of non-compliance; from	to
Action(s) taken to achieve compliance:	11 ,A4 17 1 <u>U</u>
Nethod used to demonstrate compliance:	ORANGE COUNTY ENVIRONMENTAL PROTECTION DIVISION
2. Term or condition of the general permit that has not been in con	tinuous compliance during the reporting period stated above:
exact period of non-compliance: from	to
action(s) taken to achieve compliance:	
Aethod used to demonstrate compliance:	
s the responsible official, I hereby certify, based on information and this notification are true, accurate and complete. Further, my and urchase receipts, does not exceed 2,100 gallons per year for dry-to ombination facilities.	nual consumption of perchloroethylene solvent, based upon dry facilities or 1,800 gallons per year for transfer or
RESPONSIBLE OFFICIAL: Volume (Please Print)	Signature Date
/ Name (Please Print)	Signature Date

Page of .

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL V CON	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 0840 TIME OUT: 0900) AIRS ID#: 0950292
TYPE OF FACILITY: Dry Cleaner	
FACILITY NAME: Kim's Lockhart Dry Cle	Paners DATE: 1-26-01
)r.
Orlando, FL 3281	0
RESPONSIBLE OFFICIAL: Young Ho	PHONE NUMBER: 407-298-4600
Based on the results of the compliance requirements evalue compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evalue.	rative Code (F.A.C.).
discrepancies were noted:	ated during this hispection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
<u> </u>	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	
<u>.</u>	
COMMENTS:	
Facility in compl	iance
The Annual Compliance Certification form has been properly certi	
(A	pproximate)
INSPECTION CONDUCTED BY: 1/6 B	undy "
INSPECTOR'S SIGNATURE: Her Bund	lease Print) ————————————————————————————————————
Page_	<u>f_of_/</u> . Revised 10/96

-+	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)				
196	Article Sent To:				
-	221066	3040 -0	LD		
827	Postage	\$	'		
ū	Certified Fee		Postmark		
1200	Return Receipt Fee (Endorsement Required)		Here		
	Restricted Delivery Fee (Endorsement Required)				
0090	Total Postage & Fees	\$			
=	Name (Please Print Clearl	y) (to be completed by mai	ler)		
{	Vocena	40 - 0950	292001AG		
	Street/Apt. No.; or PO Bo	x No.			
7000	City, State, ZIP+4				
{	PS Form 3800, July 1999		See Reverse for Instructions		

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BEST AVAILABLE COPY

PLACE STICKER	COMPLETE THIS SECTION ON DELIVERY
items 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. rint 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, or on the front if space permits. 1. Article Addressed to: 10 AIRS ID # 0950292001AG YOUNG HO KIMS LOCKHART DRY CLEANERS	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee D. Is delivery address different from item 1? If Yes, enter delivery address below:
7312 EDGEWATER DRIVE ORLANDO FL 32810	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
2. Article Number (Copy from service label)	4. Restricted Delivery? (Extra Fee) Yes
PS Form 3811, July 1999 Domestic Ret	

Z 210 PP3 040 US Postal Service Receipt for Certified Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse) Sent to .10 AIRS ID # 0950292001AG YOUNG HO KIMS LOCKHART DRY CLEANERS 7312 EDGEWATER DRIVE ORLANDO FL 32810 | Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address PS Form **3800**, TOTAL Postage & Fees \$ Postmark or Date

258184

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. RECEIVEU MAIL ROOM

JAN 15 97

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 0950292 KIMS LOCKHART DRY CLEANERS YOUNG HO 7312 EDGEWATER DRIVE ORLANDO FL 32810

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 ОЫ: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0390844

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

KIMS LOCKHART DRY CLEANERS YOUNG HO 7312 EDGEWATER DRIVE ORLANDO FL 32810

Obj.: 002273

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1 Fund: 20-2-035001

cut'ne e,

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

400050

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 Mobile Sources

Remove Label

AIRS ID # 0950292
T DRY CLEANERS

R DRIVE

Do NOT Remove Label

KIMS LOCKHART DRY CLEANERS YOUNG HO

7312 EDGEWATER DRIVE

ORLANDO FL 32810

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273