

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

September 26, 1996

Mr. Young Bok Kim Diamond Cleaners 5600 Pershing Avenue Orlando, Florida 32822

Dear Mr. Kim:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 26, 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

loty Wietz

Bureau of Air Monitoring

and Mobile Sources

/DD

Mr. Louis Nichols, Central District cc:

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

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1.	, and the same of								
	Young	r Bok	KIM						
2.	Site Name (For example, plant name or no	umber):							
	DIAMOND	CLEA	NER S						
3.	Hazardous Waste Generator Identification	Number:			,				
4.	Facility Location:	ocilia	1115		· · · · · · · · · · · · · · · · · · ·				
	Street Address: 5600 Pth City: 0RLANDO	County: ~ ~	000. 1 161		Zip Code: 32822				
000-			CMNYE	2000	7 40 44				
	Facility Identification Number (DEP Use)								
	Control of the same has been as a first to be a suit.	e de	09500	29	8				
		Responsible (Official						
©	Name and Title of Responsible Official:								
	Responsible Official Mailing Address:	ВoК	KIM						
7.	Responsible Official Maining Address.								
	Organization/Firm: DIAMON Street Address: CAO D	U CLE	ANTRS						
	Organization/Firm: Street Address: City: ORLANDO	County:	OR ANG	E	Zip Code: 32822				
8.	Responsible Official Telephone Number:		-100707						
J.	Telephone: (49) 28 i - $9i$	16 1	Fax: ()	-				
		· - •							
	Facility Contact (I	f different fr	om Responsib	ole Of	ficial)				
9.	Name and Title of Facility Contact (For ex	xamnle nlant	manager).						
٠.	rume and Title of Lacinty Collact (101 6)	rampie, plant	. manager j.						
10	Facility Contact Address:				_				
10.	a definy Contact Address.								
	Street Address:	Country			7im Code:				
	City:	County:			Zip Code:				
11.	Facility Contact Telephone Number:		·						
	Telephone: () -		Fax: (•	•				
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Bureau of Air Monitoring & Mobile Sources

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Facility Information

 $\widehat{\mathbb{Q}}(\widehat{a})$ 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	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit				t a					
(1) w/ ref. condenser	1	10-MAR-90							1
(2) w/ carbon adsorber		7 - 7 - 7							
(3) w/ no controls									
Washer Unit		The state of the	. 7.V				٠.		11.
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit	1.142 1 1.142 1	e i e e e e e e e e e e e e e e e e e e	Report of the	ή.	Programme Season				- Hereid
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit	2.14					112.11			Balling APP
(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 control devices (b) If less than 12 mont Check why it is less	are re quant galle	equired to be ity of perchloons	installed [_ oroethylene (] months	X perc)	_] purchased in				
3. What is the facility's so (Indicate with an "X".					nitions found	d in section (3	3) of	Part II?	

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Effective: 6-25-96

(Indicate with an "X".)	pursuant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber	EXISTING SMALL AREA SOURCE Refrigerated condenser [X]
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
	•
	units shall not be eligible to use the general permit pursuand hot water generating units on-site meet the following
	have a total heat input of 10 million BTU/hr or less (298 atural gas except for periods of natural gas curtailment than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring a	nd Recordkeeping Information
Check all logs which are required to be kept on-site i	n accordance with the requirements of this general permit
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	\square
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration mon	itoring []
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

Surrender of Existing Air Permit(s)

Please indicate	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)					
ראַן	No air permits currently exist for the operation of the facility indicated in this notification form.					
	Responsible Official Certification					
I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.						
I will prod	mptly notify the Department of any changes to the information contained in this notification. Jan Bola 1 196					



Department of Environmental Protection

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

David B. Struhs Secretary

June 25, 2001

Mr. Young Bok Kim Diamond Cleaners 5600 Pershing Avenue Orlando, Florida 32822

Dear Mr. Kim:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on June 22.

In reviewing your submittal, it was noted that Diamond Cleaners elected to surrender its existing Title V air general permit (AIRS ID 0950298). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 840/921-9583.

Sincerely,

Sandra Bowman

Bureau of Air Monitoring and Mobile Sources

SB/

Enclosure

cc: Ms. Marie Driscoll, Orange County

"More Protection, Less Process"

Printed on recycled paper.

#0950298

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Diamond Cleaners

-spoke with Yun Kim-9/13/96

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9.	Name and Title of Facility Contact (For	avample plant managar):	-	
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	·			· · · · · · · · · · · · · · · · · · ·
10.	Facility Contact Address:			
	Street Address:			
	City:	County:	Zip Code:	
11.	Facility Contact Telephone Number: Telephone: () -	Fax: ()	-	

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Bureau of Air Monitoring & Mobile Sources

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
YOUNG BOK KIM
2. Site Name (For example, plant name or number):
DIAMOND CLEANERS
3. Hazardous Waste Generator Identification Number:
4. Facility Location: 5/00 DZPSVIOLE MIF
Street Address: 5600 PERSHING AVE. City: ORLANDO County: ORANGE Zip Code: 32822
5. Facility Identification Number (DEP Use):
0950298
Responsible Official
(None and Title of Paragraphic Official)
6. Name and Title of Responsible Official:
YOUNG BOK KIM SIMEN Y,312.
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: OP 1 AND P. County: ORANGE Some Y1314 Sumen Y1314 County: ORANGE Zip Code: 32822
Street Address: 5600 PERSHING AVE.
City: ORLANDO County: ORANGE Zip Code: 32822
8. Responsible Official Telephone Number:
Telephone: (43) 23 $ 976$ $-$ Fax: $()$ -
Facility Contact (If different from Responsible Official)
Facility Contact (11 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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Page 13 of 16

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	Machine Initially Purchased	Date Control Device Installed
Example	#1		12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9.
Dry-to-Dry Unit									-
(1) w/ ref. condenser	1	10-442-90	10-MAN 90-	(B1					
(2) w/ carbon adsorber	/ <u></u>	70 10.11= 10	7,000						
(3) w/ no controls									
Washer Unit					1	1		l	
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit								· · · · · · · · · · · · · · · · · · ·	f
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit		* * * * * * * * * * * * * * * * * * * *		l		l	٠.		
(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 a fixed fixe	are ro	equired to be ity of perchlo ons ow many? [_	installed [_ proethylene (Ϋ́ perc)	purchased in				
 What is the facility's so (Indicate with an "X". Existing small ar Existing large are 	Selec ea so	t one classifi	cation only.)		nitions found		(3) of	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

(Indicate with an "X".)	s pursuant to section (5) of Part II of this notification for	
Existing large area source Carbon adsorber []	Refrigerated condenser (X)	RK
New small area source Refrigerated condenser []		
New large area source Refrigerated condenser []	,	
	units shall not be eligible to use the general permit pure nd hot water generating units on-site meet the following e:	
) have a total heat input of 10 million BTU/hr or less (2 natural gas except for periods of natural gas curtailmer re than one percent sulfur is fired.	
All steam and hot water generating units exempt No such units on-site		
-	and Recordkeeping Information	
Check all logs which are required to be kept on-site	in accordance with the requirements of this general per	rmit:
(a) Purchase receipts and solvent purchases		
(b) Leak detection inspection and repair		
(c) Refrigerated condenser temperature monitoring		
(d) Carbon adsorber exhaust perc concentration mo	nitoring []	
(e) Instrument calibration		
(f) Start-up, shutdown, malfunction plan		

Surrender of Existing Air Permit(s)

I, the unders this notifica statements r maintain the comply with	No air permits currently exist for the operation of the facility indicated in this notification form. Responsible Official Certification resigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ation. I hereby certify, based on information and belief formed after reasonable inquiry, that the 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 thall terms and conditions of this general permit as set forth in Part II of this notification form.
this notifica statements r maintain the comply with	rsigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ation. I hereby certify, based on information and belief formed after reasonable inquiry, that the 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
this notifica statements r maintain the comply with	ation. I hereby certify, based on information and belief formed after reasonable inquiry, that the made in this notification are true, accurate and complete. Further, I agree to operate and be air pollutant emissions units and air pollution control equipment described above so as to
this notifica statements r maintain the comply with	ation. I hereby certify, based on information and belief formed after reasonable inquiry, that the made in this notification are true, accurate and complete. Further, I agree to operate and he air pollutant emissions units and air pollution control equipment described above so as to
I will promp	
	ptly notify the Department of any changes to the information contained in this notification.
Signature	Jan 3/20/96.
M	12/08/96.

Orange County Environmental Protection Department $\ \ \ \ \$



TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10 15 TIME OUT:	AIRS 1011: 0950 298
TYPE OF FACILITY: Dry Cle	aning
FACILITY NAME: Digmond Clear	arks DATE:
FACILITY LOCATION: 5600 Pershing Orlando Fl	Aue
Ovlando Fl	32827
RESPONSIBLE OFFICIAL: Young Bok Kim	PHONE NUMBER:
Based on the results of the compliance requirements evaluate	ted during this inspection, the facility is found to be in
compliance with DEP Rule 62-213.300, Florida Administra	tive Code (F.A.C.).
Based on the results of the compliance requirements evaluated discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
No ring on inprevious	SIX month veruspection
Not all Perc receipts not on site	
No vonning total of perc purchased	vi M
No corrective action	
	,
COMMENTS:	
The Annual Compliance Certification form has been properly cert	
DATE OF NEXT INSPECTION: 06/97	pproximate)
INSPECTION CONDUCTED BY: Todd	Fletcher
INSPECTOR'S SIGNATURE:	(407) 836-9524
Page	of Revised 10/96

300771

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0950298

YOUNG BOK KIM YOUNG BOK KIM 5600 PERSHING AVENUE ORLANDO FL 32822

Do NOT Remove Label

Annual Reporting Period:	Jan.	1998	то	bec- a	31	19 <u>98</u> .
Based on each term or condition of 62-213.300, Florida Administrative						ule NO
If NO, complete the following:					•	
#1. Term or condition of the genera	al permit that has not b	een in continuous c	ompliance of	during the report	ing period sta	ated above:
Exact period of non-compliance: from	om		to_			
Action(s) taken to achieve complian	uce:	,			<u>C</u>	<u> </u>
Method used to demonstrate compli	ance:				23	L RO
#2. Term or condition of the genera	d permit that has not b	een in continuous c	ompliance o	luring the reporti	ing period sta	ated above:
Exact period of non-compliance: from	om <u></u>		to	 		
Action(s) taken to achieve complian				· 	·	
Method used to demonstrate compliant	ance:	· ·				
Method used to demonstrate complications of the responsible official, I hereby centification are true, accurate and condoes not exceed 2,100 gallons per year	rtify, based on informati nplete. Further, my ann	ual consumption of p	perchloroeth	ylene solvent, base	ed upon purch	

^{*}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.

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#0950298
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Diamond Cleaners

— Spoke with Yun Kim -9/13/96

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1.	Faci P./3	6. add titl	'e-Owner		· j	
2.	Site					
3.	P.14	1.(a) add d installed 4. mark ou	ate control	device		
4.	$\frac{1}{\text{Fac}}$ P_1/S_1	Mark out	t "X" and it	hitial		
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7.	Re: Or: Str	α 0/				
	Cit					32822
8.	Re					
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					1	
9.	Name and Title of	f Facility Contact (For ex	(ample, plant manager):		-	
10.	Facility Contact	Address:				
	Street Address: City:		County:	Zip Code:		

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Bureau of Air Monitoring & Mobile Sources

Telephone:

11. Facility Contact Telephone Number:

Fax: (

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Perchlorocthylene Dry Cleaning Facility Notification

Facility Name and Location

,	
	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	YOUNET BOK KIM
2.	Site Name (For example, plant name or number):
	DIAMOND CLEANERS
3.	Hazardous Waste Generator Identification Number:
	·
4.	Facility Location:
	Street Address: 5600 / CRSMING /30C
	Street Address: 5600 PERSHING AVE. City: ORLANDO County: ORANGE Zip Code: 32822
-5,41	Facility Identification Number (DEP Use):
	0950298
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	Responsible Official
,	
6.	Name and Title of Responsible Official:
	YOUNG BOK KIM SIMBY JOIL
7.	Name and Title of Responsible Official: YOUNG BOK KIM SIMEN Y314. Responsible Official Mailing Address: Organization/Firm: PIAMOND CLEANERS Street Address: 5600 PERSHING AVE. City: ORLANDO ORANGE Zip Code: 32822
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	Street Address: Chan proshive AIF
	City: County: OP AJG = Zip Code: 32822
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8.	Responsible Official Telephone Number:
	Telephone: (43) 23 $ 976$ $-$ Fax: $($ $)$ -
	Facility Contact (If different from Responsible Official)
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9.	Name and Title of Facility Contact (For example, plant manager):
	, , , , , , , , , , , , , , , , , , ,
10.	Facility Contact Address:
	Street Address:
	City: Zip Code:
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11.	Facility Contact Telephone Number: Telephone: () - Fax: () -
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DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

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.

		Date	Datc		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
*-		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#]	03- <i>OCT-</i> 93	12-NOV-93	112	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit		<u> </u>		121	۷ ،				
(1) w/ ref. condenser	7	10-4140-90	ic-Mart 90.	1-15-1					T
(2) w/ carbon adsorber		<u> </u>							
(3) w/ no controls									
Washer Unit		<u> </u>	'		· ' · · · · · · · · · · · · · · · · · ·		d	· · · · · · · · · · · · · · · · · · ·	· <u> </u>
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit			·	J	- 				
(7) w/ ref. condenser		T							
(8) w/ carbon adsorber									
(9) w/ no controls				—					
Reclaimer Unit		<u></u>							
(10) w/ ref. condenser							T		
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are (c) No control devices 2.(a) What was the total of a game of the control devices (b) If less than 12 montrol Check why it is less	are r quant galle	equired to be ity of perchlons ow many? [e installed [_oroethylene (·X (perc)) purchased			4	
3. What is the facility's so (Indicate with an "X". Existing small an	Selec ea so	ource [K_]	ication only.) ew sr	nall area soi	ırce [(3) of	Part II?	
Existing large ar	ea so	urce []	N	ew la	rge area sou	rce [J		

(Indicate with an "X".)	oursuant to section (5) of Part II of this notification form?
Existing large area source	Refrigerated condenser (X)
Carbon adsorber []	Refrigerated condenser
New small area source Refrigerated condenser []	1 j
New large area source Refrigerated condenser	
	nits shall not be eligible to use the general permit pursuant hot water generating units on-site meet the following
	have a total heat input of 10 million BTU/hr or less (298 atural gas except for periods of natural gas curtailment than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring a	nd Recordkeeping Information
Check all logs which are required to be kept on-site	n accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	١ لــــــــــــــــــــــــــــــــــــ
	•
(b) Leak detection inspection and repair	
(b) Leak detection inspection and repair(c) Refrigerated condenser temperature monitoring	
•	
(c) Refrigerated condenser temperature monitoring	

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. RECEIVED MAIL ROOM

JAN 27 97 TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 0950298

DIAMOND CLEANERS YOUNG BOK KIM 5600 PERSHING AVENUE ORLANDO FL 32822

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 30077/

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID#0950298

YOUNG BOK KIM YOUNG BOK KIM 5600 PERSHING AVENUE ORLANDO FL 32822 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

Surrender of Existing Air Permit(s)

Please 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)
	· · · ·
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notif statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the 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.
I will pro	omptly notify the Department of any changes to the information contained in this notification.
Signature	Date \\ \ \frac{3/\sigma/96.}{Date}
7/1	12/08/96.

#0950298

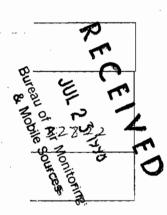
BEST AVAILABLE COPY

Diamond Cleaners

Spoke with Yun Kim-9/13/96

- 1. Faci P.13 6. add title - Owner
 - P.14 1.(a) add date control device installed, if any P.15 4. mark out "X" and initial
- Fac Str





2822

Re Or

Site

City

- 8.
- 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: (

RECEIVED

AUG 26 1996

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

Page 13 of 16

Bureau of Air Monitoring & Mobile Sources

Perchlorocthylene Dry Cleaning Facility Notification

	Facility Name and Location
	Partition of the second of the
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	YOUNG BOK KIM & C
2.	Site Name (For example, plant name or number):
	DIAMOND CLEANERS
3.	Site Name (For example, plant name or number): DIAMOND CLEANERS Hazardous Waste Generator Identification Number:
4.	Facility Location: Street Address: 5600 PERSHING AVE.
	Street Address: 5600 PERSHING AVE. City: OR LANDO County: OR ANGE Zip Code: 32822
5.	Facility Identification Number (DEP Use):
	1.0950298
	Responsible Official
6.	Name and Title of Responsible Official:
£	YOUNG BOK KIM SIMEN Y,RIL.
7.	Name and Title of Responsible Official: YOUNG BOK KIM SUMEN 1314 Responsible Official Mailing Address: Organization/Firm: DIAMOND CLZANTRS Street Address: 5600 PERSHING ANT. City: ORANGE Zip Code: 32822 Responsible Official Telephone Number:
8.	Responsible Official Telephone Number: Telephone: (43) 231 - 906 / 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: () -
	RECEIVED
	RECEIVED AUG 26 1996

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.

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
٠.		Initially	Device		Initially	Device		Initially	Device
Type of Machine	lD	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit				, , ,					
(1) w/ ref. condenser	1	10-400-90	10-Manl 90.	104					
(2) w/ carbon adsorber		110	1						
(3) w/ no controls		NO				-			
Washer Unit						1		1	
(4) w/ ref. condenser			_						
(5) w/ carbon adsorber	-								
(6) w/ no controls	-								_
Dryer Unit		1						1	
(7) w/ ref. condenser			-						
(8) w/ carbon adsorber									
(9) w/ no controls			_					_	
Reclaimer Unit								•	
(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 control devices (b) If less than 12 mont Check why it is less	are ro	equired to be ity of perchloons ow many?.[installed [Ϋ́ perc)	purchased i				
3. What is the facility's so (Indicate with an "X". Existing small are Existing large are	Selec ea so	t one classifi	cation only.) Ne	w sn	initions foun nall area sou	тсе [3) of]]	Part II?	
					. 5 Ju 50 ui				

4. What control technology is required on machines pursuant to se (Indicate with an "X".)	
Existing large area source Carbon adsorber New small area source Refrigerated condenser New large area source	condenser (X) 1/20/88.
Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall not to Rule 62-213.300, F.A.C. Verify that all steam and hot water ge exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total his boiler HP or less), and (2) are fired exclusively by natural gas exc during which propane or fuel oil containing no more than one per	ept for periods of natural gas curtailment cent sulfur is fired
All steam and hot water generating units exempt No such units on-site	15. H.g. (Boiler).
	•
Equipment Monitoring and Recordke	eping Information
Check all logs which are required to be kept on-site in accordance	with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

Surrender of Existing Air Permit(s)

Please indicate	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)
	•.
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notific statements maintain t	ersigned, 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 pron	mptly notify the Department of any changes to the information contained in this notification.
Signature	Man 362 (Date 3/21/96.
1/1	12/08/96.

				,e,	300771
1 				all	· · · · · · · · · · · · · · · · · · ·
D	RY CLEANER A	AIR QUALIT IPLIANCE CE	TY GENERA	L PERMIT	P.C.
		BOK KIM	irs 1D#0950298	Sur Su or	Air Moritorine
Annual Reporting Period:	Y.B.12- 91	Do <u>NOT</u> Remove 13 96	Label TO	Y. R.K. (C)	7/13/97 ₁₉₋₉₈
Based on each term or condition 62-213.300, Florida Administrati	=	-			DEP Rule
If NO, complete the following:					^
#1. Term or condition of the gen	eral permit that has not	been in continuous	compliance during	the reporting pe	ried stated above:
			· .	Bu &	<u>C</u>
Exact period of non-compliance:	from		to	No Co	
Action(s) taken to achieve compl	ance:	•			9 4
Method used to demonstrate com	pliance:	•		outce	% ⊘
				ring	8 55.
#2. Term or condition of the gene	eral permit that has not b	been in continuous	compliance during	the reporting pe	riod stated above:
Exact period of non-compliance:	from		to		
Action(s) taken to achieve compli	ance:	·			
Method used to demonstrate comp	oliance:	.'			
As the responsible official, I hereby notification are true, accurate and closs not exceed 2,100 gallons per ye	omplete. Further, my ani	nual consumption of	perchloroethylene s	olvent, based upor	n purchase receipts,
RESPONSIBLE OFFICIAL:	Name (Please Pri	ok KiM	Signatu	ure	1/15/98 Date - 1/20/99
This form is made available to v	,			tion requirements	s It is at the

discretion of the responsible official to use this form.

	(1) II	300771
DBA CI	EANER AIR QUALITY GENERAL PERMIT	>
	TUAL COMPLIANCE CERTIFICATION FORM	C ^
	YOUNG BOK KIM YOUNG BOK KIM 5600 PERSHING AVENUE ORLANDO FL 32822	No S / S / S / Sources orine
Annual Reporting Period:	Do NOT Remove Label 312- 913196 1948 TO 1960-31	13/97
	EV general air permit, my facility has remained in compliance with D. F.A.C.), during the period covered by this statement. YES	EP Rule
If NO, complete the following:		
#1. Term or condition of the general permit	t that has not been in continuous compliance during the reporting per	ed stated above:
Exact period of non-compliance: from	to So 2	K
Action(s) taken to achieve compliance:	The state of the s	حے
Method used to demonstrate compliance:	Monit Source	*\\\ \(\)
1410diod about to demonstrate compilance.	- Same	S (S)
#2. Term or condition of the general permit	that has not been in continuous compliance during the reporting peri	od 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. F does not exceed 2,100 gallons per year for dry-t	ed on information and belief formed after reasonable inquiry, that the state of the	purchase receipts,
Nar Vov	NG BOK KIM Signature NG BOK KIM NG BOK NG	Date /97
	d in order to meet your annual compliance certification requirements.	It is at the

Orange County Environmental Protection Department

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL. RE-INSPECTION	N U	COMPLAINT/DISCO	OVERY	
AIRS ID#: 0950298 I	Jamond	96 TIMEI Clean Pershin SFI	evs N	E OUT:	
PART I: NOTIFICATION					
(check appropriate box)					
1. Existing facility notified DA	RM by 9/1/96				छ
2. New facility notified DARM	30 days prior to star	tup			
3. Facility failed to notify DAR	M to use general per	mit			
	_				- 1
PART II: CLASSIFICATION					
Facility indicated on notificati (check appropriate box)	on form that it is:				
A. 1. Existing small area sound dry-to-dry only, x<140 gal/y transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)	r	2. New small: dry-to-dry only transfer only, x both types, x<1 (constructed on	, x<140 gal/yr <200 gal/yr		
3. Existing large area soundry-to-dry only, 140 <x<2, (constructed="" 1="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" ga="" only,="" td="" transfer="" types,=""><td>00 gal/yr gal/yr l/yr</td><td>transfer only, 2 both types, 140</td><td>area source , 140<x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td></td><td></td></x<2,>	00 gal/yr gal/yr l/yr	transfer only, 2 both types, 140	area source , 140 <x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,>		
This is a correct facility classif	ication	DY ON			
If no, please check the appropr	riate classification:				
	ied for a general per ds above limits and i				
B. The total quantity of perchl facility was 94 gallons		urchased within	the preceding 12 month	is by this dry	cleaning

(check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 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 scaled containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber 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) UY UN 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? DY 'DN DN/A 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated DY DN condenser on a weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after DY DN verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility:

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?	מם עם	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON	'
	Is the temperature differential equal to or greater than 20° F?	□Y □N	
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?	OY ON ON	//A
	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?	ОУ ОИ	
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	חם אם אם	//A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON	ī/A
\mathbf{P}	ART V: RECORDKEEPING REQUIREMENTS		
_			
	as the responsible official: heck appropriate boxes)	((up	۲
(c	as the responsible official:	DA ON NO.	* Q
(c)	as the responsible official: heck appropriate boxes)	ON S	t Q
(c) 1. 2.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased?	ON S	t Q
(c) 1. 2.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption?	ON ON	t Q
(c) 1. 2.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following:	DY ON	t Q
(c) 1. 2. 3.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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	ON ON ON	t Q
(c) 1. 2. 3.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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?	,	t Q inter IVA /A
(c) 1. 2. 3. 4. 5.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only)	חס אם אם	TQ NA NA
(c) 1. 2. 3. 4. 5. 6.	As the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations?	אס אם אם	TANA NA
(c) 1. 2. 3. 4. 5. 6.	As the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan?	מץ מא מא מץ מא אם מץ מא	t Q
(c) 1. 2. 3. 4. 5. 6. 7.	As the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? *for direct reading instruments only! Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports?		TA QUILA IN/A
(c) 1. 2. 3. 4. 5. 6. 7.	Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected? Maintained compliance plan, if applicable?		TA QUITA
(c) 1. 2. 3. 4. 5. 6. 7.	As the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected?		T Q

2.	2. Which method of detection is used by the responsible official?					
	Visual examination (condensed solvent on exterior surfaces)				G /	
	Physical detection (airflow felt through gaskets)					
	Odor (noticeable perc odor)				of .	
	Use of direct-reading instrumentat	ion (FHD/	PID/calorimetrie t	ubes)	ם	
	If using direct-reading instrumen	ntation, i	s the equipment:			
a. Capable of detecting pere vapor concentrations in a range of 0-500 ppm?					OY ON	
 b. Calibrated against a standard gas prior to and after each use (PID/FID only)? 					ОУ ОЙ	
c. Inspected for leaks and obvious signs of wear on a weekly basis?				weekly basis?	DY DN	
d. Kept in a clean and secure area when not in use?					NO YO	
e. Verified for accuracy by use of duplicate samples (calorimetric only)?					OY ON	
3. Has the facility maintained a leak log?				DY DN		
4. Does the responsible official check the following areas for leaks?						
	Hose connections, fittings, couplings, and valves		ПN	Muck cookers	ΔÝ	□N
	Door gaskets and seating	⊠ Y	ПN	Stills	ΔY	□и
	Filter gaskets and seating	ďΥ	ПИ	Exhaust dampers	ΔY	ПИ
	Pumps	ďУ	ПИ	Diverter valves	ďΥ	□N
	Solvent tanks and containers	DYY/	ПИ	Cartridge filter housings	ďΥ	ПN
	Water separators	□ ⁄γ	N			

Young Bold Kim Name of Responsible Official	;
Todd Fletcher	12/9/96
Inspector's Name (Please Print)	Date of Inspection
obde Tillch	6/9/96
Inspector's Signature	Approximate Date of Next Inspection

Orange County Environmental Protection Department

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL. RE-INSPECTION	COMPLAINT/DISC	OVERY □
	lamond_	<u> </u>	
PART 1: NOTIFICATION			
(check appropriate box)			. /
1. Existing facility notified DAF	RM by 9/1/96	1.	1
2. New facility notified DARM	30 days prior to start	up	۵
3. Facility failed to notify DAR	M to use general peri	nit	
PART II: CLASSIFICATION			
	ce CO gal/yr gal/yr l/yr ication riate classification:	2. New small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" after="" as="" both="" eligible="" for="" gal="" general="" mit="" not="" numberabove="" on="" only,="" or="" permit<="" s="" td="" transfer="" types,="" yr="" □n="" □y=""><td></td></x<2,>	
B. The total quantity of perchl facility was 94 gallons		nrchased within the preceding 12 mon	ths 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? Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY UN EN/A 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) UY UN 1. Equipped all machines with the appropriate vent controls? A/NO NO YO 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 condenser upon opening the door? DY DN DN/A 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? DY DN 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? DY DN 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? UY UN

Measured and recorded the exhaust temperature on the ontlet 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? IY IN			
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 upstream from any bend, contraction, or expansion; is at least 8 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? Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? ARRT V: RECORDREEPING REQUIREMENTS Has the responsible official: check appropriate boxes) Maintained receipts for pere purchased? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired win 24 brs? or; b. documentation of leaks repaired to repair leak and leak repaired win 2 days and parts installed win 5 days of receipt? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on pere concentrations? Maintained deviation reports? Problem corrected?	3. Has the responsible official of an existing large or new large area source also:		
Is the temperature differential equal to or greater than 20° F? Is the temperature differential equal to or greater than 20° F? Is 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? Is the perc concentration equal to or less than 100 ppm? Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duet diameters downstream of any bend, contraction, or expansion; is at least 2 duet 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? Rented airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) Maintained receipts for perc purchased? Maintained receipts for perc purchased? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 brs? or; b. documentation of leaks repaired w/in 24 brs? or; b. documentation of leaks repaired w/in 24 brs? or; b. documentation of leaks repaired w/in 24 brs? or; b. documentation of sarts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained exhaust duct monitoring data on perc concentrations? Maintained exhaust duct monitoring data on perc concentrations? Maintained deviation reports? Problem corrected?		cd	ПА ПИ
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? Is the perc concentration equal to or less than 100 ppm? 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; and downstream from no other inlet? Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: check appropriate boxes) Maintained receipts for perc purchased? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 brs? or; b. documentation of leaks repaired w/in 24 brs? or; b. documentation data? Ger direct reading instruments only) Maintained calibration data? Ger direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected?		! <u>ij</u>	
Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duet diameters downstream of any bend, contraction, or expansion; is at least 2 duet diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? 5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? CART V: RECORDKEEPING REQUIREMENTS Check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained receipts for perc purchased? 2. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 brs? 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? 4. Maintained calibration data? for direct reoding instruments only) 5. Maintained startup/shutdown/malfunction plan? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	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?		OY ON ON/A
condenser coils? ON DN/A	1. 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,		
PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: check appropriate boxes) 1. Maintained receipts for pere purchased? 2. Maintained rolling monthly averages of pere consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 brs? 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? 4. Maintained calibration data? for direct reading instruments only) 5. Maintained exhaust duct monitoring data on pere concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?		OY ON ON/A
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 brs? 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? 4. Maintained calibration data? Gor direct reading instruments only) 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	6. Routed airflow to the carbon adsorber (if used) at all times?		OY ON ON/A
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 brs? 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? 4. Maintained calibration data? Gor direct reading instruments only) 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?			
Check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages 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? 4. Maintained calibration data? **Gor direct reading instruments only)* 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?			
1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages 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? 4. Maintained calibration data? **Gor direct reading instruments only** 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?			/ x
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? 4. Maintained calibration data? (for direct reading instruments only) 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	1. Maintained receipts for perc purchased?	DE ON NO!	
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? 4. Maintained calibration data? Gor direct reading instruments only) 5. Maintained exhaust duct monitoring data on pere concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	2. Maintained rolling monthly averages of perc consumption?		DAY JSTAR
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? for direct reading instruments only) 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	3. Maintained leak detection inspection and repair reports for the following:		/
and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for direct reading instruments only) 5. Maintained exhaust duct monitoring data on pere concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	a. documentation of leaks repaired w/in 24 brs? or;		MC AR
5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?		:	OY ON
6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? Problem corrected?	4. Maintained calibration data? (for direct reading instruments only)	1	OY ON ON/A
7. Maintained deviation reports? Problem corrected?	5. Maintained exhaust duct monitoring data on perc concentrations?		DY/ON MA
Problem corrected?	Maintained startup/shutdown/malfunction plan?		DY ON
	7. Maintained deviation reports?		<u></u>
8. Maintained compliance plan, if applicable?	Problem corrected?		MY ON
	· · · · · · · · · · · · · · · · ·		שאל שאל שאלי
	8. Maintained compliance plan, if applicable?		AWA MILI ILL

אם אַפ

1. Does the responsible official conduct a weekly leak detection and repair inspection?

2.	Which method of detection is used by t	he respons	sible offic	cial?	/		
	Visual examination (condensed s	olvent on o	exterior s	surfaces)			
	Physical detection (airflow felt th	tough gasl	kcts)				
	Odor (noticeable perc odor)			, i	ď		
	Use of direct-reading instruments	ation (FID)	/PID/calc	orimetrie tubes)			
	If using direct-reading instrum	entation, i	is the eq	uipment:			
	a. Capable of detecting	pere vapoi	r concent	rations in a range of 0-500 ppm?	□Y (ИС	
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?c. Inspected for leaks and obvious signs of wear on a weekly basis?			to and after each use	OY ON		
				wear on a weekly basis?	מט עט		
	d. Kept in a clean and secure area when not in use?				OY ON		
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?			OY ON			
3. Has the facility maintained a leak log?				CAX I	ПN		
4.	Does the responsible official check the	: following	, areas fo	r leaks?			
	Hose connections, fittings, couplings, and valves	CV.	υп	Muck cookers	ΔY	ПΝ	
	Door gaskets and scating	€Y	ПИ	Stills	ΔY	ΩИ	
	Filter gaskets and scating	QY	ПN	Exhaust dampers	ØΥ	ПN	
	Pumps	ЩY	ПИ	Diverter valves	ďΥ	ΩИ	
	Solvent tanks and containers	CY	ПN	Cartridge filter housings	ΠY	ПИ	
	Water separators	αÝ	ПИ				
-	Young Bold Kim	cinl		; ,1			
Todd Fletcher			12/9/	96			
				Data of Inspection			

Approximate Date of Next Inspection

Inspector's Signature

Orange County Environmental Protection Department

TITLE VAIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COMI	PLAINTYDISCOVERY RE-INSPECTION
TIME IN: 10.15 TIME OUT:	AIRS ID#: 0950 298
TYPE OF FACILITY: Dry Cle	aning
FACILITY NAME: DIGMOND CLEUR	VEKS DATE:
FACILITY LOCATION: 5600 Perstring Orlando FI	Aue
Ovlando Fl	32827
RESPONSIBLE OFFICIAL: Young Bok Kini	PHONE NUMBER:
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evalual discrepancies were noted:	
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
No vint on inprevious	SIX month veruspection
Not all Perc receipts not on site	" P
No vonning total of perc purchased	BUT BY "
No corrective action	THE SE AND LESS L.
	Ces Online
•	
COMMENTS:	
The Annual Compliance Certification form has been properly cert	ilied and submitted to the inspector. YES NOC
DATE OF NEXT INSPECTION: 6/6/97	approximate)
INSPECTION CONDUCTED BY:	Fletcher
INSPECTORS SIGNATURES	PHONE NUMBER: (407) 836-9524
Page	Revised 10/96

PERCHLORO

COMPLI

OETHYLENE DRY CLEANERS	/
TLE V GENERAL PERMIT	V
ANCE INSPECTION CHECKLIST	

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VNNUVL

COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS ID#: <u>0950298</u> date: <u>7/20/98</u> time in: <u>1230</u> time out: <u>\$/300</u>
FACILITY NAME: DIAMOND CLEANERS
FACILITY LOCATION: 5600 PERSHING AUE. 83
ORLANDO F2 32822 8 3
RESPONSIBLE OFFICIAL: YOUNG- BOK KIM PHONE: 407-281-9761

PART 1: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to startup	
2. Facility failed to notify DARM to use general permit	a

CONTACT NAME: _____ PIIONE: ____

PART II: CLASSIFICATION							
Facility indicated on notification form that it is: (check appropriate box) A.	☐ No notification form ☐ Drop store/out of business/petroleum						
I. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)						
3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$)	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)						
5. This is a correct facility classification	CAY CIN CiCan not determine						
If no, please check the appropriate classification: facility qualified for a general permit as number above facility exceeds above limits and is not eligible for a general permit B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was //O gallons.							

Is the responsible official of the dry cleaning facility: (check appropriate boxes)							
1. Storing perchloroethylene in tightly scaled and impervious containers?	MY DN DN/A						
2. Examining the containers for leakage?	אומם אם, צוש.						
3. Closing and securing machine doors except during loading/unloading?	ZY ON						
4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal?	OY ON ANIA						
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	CIY CIN , ZIN/A						
PART IV: PROCESS VENT CONTROLS							
In Part H-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 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 refri (complete A and B below).	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?	CIY ON						
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A						
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	CIY ON ON/A						
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	מט עט						
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	□Y □N □N/A						
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON						

PART III: GENERAL CONTROL REQUIREMENTS

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?	ΠY	ШN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	DИ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ŪΥ	ÜИ	□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?	ĽΙΥ	ШN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΩY	ΩИ	□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?	ΠV	Пы	□n/a
	or expansion, and downstream from no other inter	uı	ШN	CINA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ПΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ÜΥ	ÜN	□N/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: אמם מם אבו 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 DY ON ONA and parts installed w/in 5 days of receipt? DY DN DM/A 4. Maintained calibration data? (for applicable direct reading instruments) DY DN QM/A 5. Maintained exhaust duct monitoring data on perc concentrations? NO YEL 6. Maintained startup/shutdown/malfunction plan? CIY ON PINA 7. Maintained deviation reports? DY ON MINA Problem corrected? DY DN DN/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 inspection? ŪΝ 2. Has the facility maintained a leak log? \square N 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, DN DN/A couplings, and valves Muck cookers ON DN/A DY ON ON/A AND NO YES Door gaskets and scating Stills A/ACI NO YE DY DN DN/A Filter gaskets and seating Exhaust dampers DY ON ON/A ETY ON ON/A Pumps Diverter valves MY ON ON/A Solvent tanks and containers Cartridge filter housings Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent 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

If using direct-reading instrumentation, is the equipment:

d. Kept in a clean and secure area when not in use?

(PID/FID only)?

ASSEFA HAILEMARTAM Inspector's Name (Please Print)	7/20/9-8 Date of Inspection
Inspector's Signature	7/20/99 Approximate Date of Next Inspection

a. Capable of detecting pere vapor concentrations in a range of 0-500 ppm?

b. Calibrated against a standard gas prior to and after each use

c. Inspected for leaks and obvious signs of wear on a weekly basis?

c. Verified for accuracy by use of duplicate samples (calorimetric only)?

M/V

DY DN

DY DN

DY DN

 $\Box Y \Box M$

UY UN

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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL C	OMPLAINT/DISCOVERY	RE-INSPECTION
TIME IN: 1230	TIME OUT: 1300	ン;AIRS ID#:_	0950298
TYPE OF FACILITY:	I CLEANERS		
FACILITY NAME:	IMOND CL	EANERS	DATE: 7/20/98
FACILITY LOCATION: 56	سال		· · · · · · · · · · · · · · · · · · ·
	WATEDO F	<u>C 32822</u>	
RESPONSIBLE OFFICIAL:	TOUNG BOX	KIM PHONE NUMI	BER: 407-281-9761
المراجعة الم	compliance requirements eva 62-213.300, Florida Admini	lluated during this inspection, the strative Code (F.A.C.).	e facility is found to be in
Based on the results of the discrepancies were noted:	compliance requirements eva	duated during this inspection, th	e following compliance
COMPLIANCE REQUIF	REMENT/PROBLEM	FOLLOW-UP A	CTION REQUIRED
			,
			P
•			
			all K
			300 0 6
			
	·		
COMMENTS:	5/5-ty in	dl der.	م
The Annual Compliance Certification	on form has been properly ce	rtified and submitted to the insp	ector. YES NO
DATE OF NEXT INSPECTION:		7/20/99 Approximate)	
INSPECTION CONDUCTED BY		AT LEM AR IAT (Please Print)	n 836-7401
INSPECTOR'S SIGNATURE:	med Holas	ua aary PHONE NUM	BER: 407 - 281-9761
. 1	Page	: / of / .	Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION		COMPLAINT/DIS	COVERY, D
AIRS 10#: <u>0950298</u>	_		N: 1120 TI	ме оит: 145
FACILITY NAME: Did	amond Cle	Paners_		
FACILITY LOCATION:	5600 Persh	ning Ave		
	Orlando , F	-L 32	822	
RESPONSIBLE OFFICIAL	: Young Bok	Kim	PHONE: 407-	281-9761
t				
PART I: NOTIFICATION				
(check appropriate box)				
New facility notified DARM	A 30 days prior to starti	ир		
2. Facility failed to notify DA		•	<u>.</u>	0
PART II: CLASSIFICATIO)N			
Facility indicated on notifica (check appropriate box)	tion form that it is:		☐ No notification☐ Drop store/out of	form of business/petroleum
A. 1. Existing small area soudry-to-dry only, x < 140 gatransfer only, x < 200 gally both types, x < 140 gallyr (constructed before 12/9/9)	ll/yr vr	2. New small a dry-to-dry only, transfer only, x both types, x < (constructed on	rea source x < 140 gal/yr < 200 gal/yr	
 3. Existing large area soudry-to-dry only, 140 ≤ x ≤ transfer only, 200 ≤ x ≤ 1,800 to types, 140 ≤ x ≤ 1,800 (constructed before 12/9/9) 5. This is a correct facility 	2,100 gal/yr 800 gal/yr 0 gal/yr 1)	transfer only, 20 both types, 140	rea source $140 \le x \le 2,100 \text{ gal}$ $00 \le x \le 1,800 \text{ gal/yr}$ $\le x \le 1,800 \text{ gal/yr}$ or after 12/9/91) □Can not determine	
☐ fac	ne appropriate classifica ility qualified for a gen- ility exceeds above limi nloroethylene (perc) pur is.	eral permit as not eligits and is not eligi	gible for a general pe	

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? MY ON ON/A Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber 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) DY DN 1. Equipped all machines with the appropriate vent controls? DY DN DN/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 DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated DY DN condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN DN/A condenser exceeded 45° F? Conducted all temperature monitoring after an appropriate cooldown period and after $\square Y \square N$ 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?	ΠY	ΩN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ΠN	□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 equipmed with a carbon placehor?	ΟV	CIN	□N/A
	if machines are equipped with a carbon adsorber?			
	Is the perc concentration equal to or less than 100 ppm?	ЦY	ЦΝ	□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?	ΩY	ΩИ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
	condenser coils?	ΠY	ПN	□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)	/		
1. Maintained receipts for perc purchased?	ELY, DN		
2. Maintained rolling monthly total of perc consumption?	ON CIN		
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	MY 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?	CTY ON ON/A		
4. Maintained calibration data? (for applicable direct reading instruments)	DA ON QNIV		
5. Maintained exhaust duct monitoring data on perc concentrations?	אואם אם אם A		
6. Maintained startup/shutdown/malfunction plan?			
7. Maintained deviation reports?			
Problem corrected?	OA ON QUÍV		
8. Maintained compliance plan, if applicable?	OY ON ON/A		

PA	ART VI: LEAK DETECTION AND	REPAIRS		
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
	inspection?			DY ON
2.	Has the facility maintained a leak log?		•	ØY ON
3.	Does the responsible official check the	following areas for leaks	?	
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	OY ON ON/A
	Door gaskets and seating	DY ON ON/A	Stills	DY ON ON/A
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY ON ON/A
	Pumps	DY ON ON/A	Diverter valves	MY ON ON/A
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	MY ON ON/A
	Water separators	DY ON ON/A		
4.	Which method of detection is used by	the responsible official?		
	Visual examination (condensed s	solvent on exterior surfac	cs)	ર્લ
	Physical detection (airflow felt the	hrough gaskets)		
	Odor (noticeable perc odor)			প্র
	Use of direct-reading instrument	ation (FID/PID/calorime	tric tubes)	
	Halogen leak detector			
	If using direct-reading inst	rumentation, is the equi	ipment:	ØN/A
	a. Capable of detecting	DY DN		
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	l after each use	OY ON
	c. Inspected for leaks a	and obvious signs of wear	on a weekly basis?	DY DN
	d. Kept in a clean and	secure area when not in	use?	DY ON
	e. Verified for accurac	y by use of duplicate sam	ples (calorimetric only)?	OY ON
	•			
<u></u>				
	T11 7 1		7/0/00	y Y
_	Ilka Bundy	•	Date of Insp	ection
	Inspector's Name (Please Pr	nnt)	Date of Hisp	CCGOII
	Ilka Bunda	-··	7/9/20	200
_	Inspector's Signature		Approximate Date of	Next Inspection

Orange County Environmental Protection Department

7-19-99

AIRS ID#: 0950298

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Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Diamond Cleaners	DATE: 7-9-99
FACILITY LOCATION: 5600 Pershing Ave	
Orlando FL 32822	
01141100 1 2 32000	
Annual Reporting Period: July 20 1998 to July 9	19_99
Based on each term or condition of the Title V general air permit, my facility has remained in compliance 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous compliance during the report	ting period stated above:
Exact period of non-compliance: fromtoto	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
#2. Term or condition of the general permit that has not been in continuous compliance during the report	ting period stated above:
Exact period of non-compliance: fromtoto	
Action(s) taken to achieve compliance:	·
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and belief formed after reasonable inquimade in this notification are true, accurate and complete. Further, my annual consumption of perchloroupon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name (Please Print)	ethylene solvent, based

^{*}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: 1120 TIME OUT: 1145	AIRS 1D#: 0950298
TYPE OF FACILITY: Dry Cleaner	
FACILITY NAME: Diamond Cleaners	DATE: 7- 9- 99
FACILITY LOCATION: 5600 Pershing Ave Orlando, FL 3282	
RESPONSIBLE OFFICIAL: Young Bok Kim	PHONE NUMBER: 407-281-9761
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administration	
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
	· · · · · · · · · · · · · · · · · · ·
	•
	•
COMMENTS:	
Equility in compliance	
The Annual Compliance Certification form has been properly certifie	d and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: 7/9/	2000 roximate)
INSPECTION CONDUCTED BY: Ika Bu	indy
INSPECTOR'S SIGNATURE: Llka Blimo	se Print)
Page /	of / Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

ARMS 7-14-00 JUS

TITLE V GENERAL PERMIT

COMPL	JANCE INSPECTION CHECKLIST	•
TYPE OF INSPECTION: ANNU	AL COMPLAINT/DISCOVERY	
/ RE-INS	SPECTION	
	<u> </u>	
	7-14-00 time in: 083 ⁵ time out:	0855
	Cleaners	
FACILITY LOCATION: 5600	Pershing Ave.	
	E P	4
RESPONSIBLE OFFICIAL:	ng Bok Kim PHONE: 407-28 19 19 19 19 19 19 19 19 19 19 19 19 19	78/
CONTACT NAME:	PHONE:	O
DART I. NOTIFICATION		
PART I: NOTIFICATION (check appropriate box)		
(check appropriate box)	ior to startum	
1. New facility notified DARM 30 days pr	·-·	
2. Facility failed to notify DARM to use go	eneral permit	<u> </u>
PART II: CLASSIFICATION		
Facility indicated on notification form th	at it is:	
(check appropriate box)	☐ Drop store/out of business/	petroleum
A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)	·
3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$)	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)	·w
5. This is a correct facility classification	MY □N □Can not determine	
	classification: I for a general permit as number above above limits and is not eligible for a general permit	

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

facility was 1

gallons.

PART III: GENERAL CONTROL REQUIREMENTS			
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	,		
1. Storing perchloroethylene in tightly sealed and impervious containers?	MY ON ON/A		
2. Examining the containers for leakage?	DY ON ON/A		
3. Closing and securing machine doors except during loading/unloading?	MY ON		
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY ON ON/A		
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber	DAY DAY MAKA		
beds according to the manufacturer's specifications?	OY ON MANA		
DARWAY DROCKER VENE CONTROL C			
PART IV: PROCESS VENT CONTROLS			
In Part II-A:			
If classification 1 has been checked, no controls are required. Proceed to Part V	7.		
If classification 2 has been checked, the machine should be equipped with a refr (complete A below).	igerated condenser		
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 refr (complete A and B below).	igerated condenser		
A. Has the responsible official of all new sources and existing large area sources (check appropriate boxes)	s:		
1. Equipped all machines with the appropriate vent controls?	OY ON		
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A		
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON ON/A		
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY ON		
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON ON/A		
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	□Y □N		

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?	ΟY	□и	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	□N	□N/A
ŀ	Is the temperature differential equal to or greater than 20° F?	ПY	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,			
İ	if machines are equipped with a carbon adsorber?	ПY	ПN	□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?	ПY	□N	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	□N	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	ПN	□N/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 DY ON ON/A and parts installed w/in 5 days of receipt? DY DN PN/A 4. Maintained calibration data? (for applicable direct reading instruments) DY DN DYN/A 5. Maintained exhaust duct monitoring data on perc concentrations? QY QN 6. Maintained startup/shutdown/malfunction plan? DY DN MN/A 7. Maintained deviation reports? OY ON WN/A Problem corrected? DY DN DN/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						
ii	nspection?				©r Y	ШN
2. H	las the facility maintained a leak log?				D Y	□N
3. D	oes the responsible official check the	followin	g areas for le	eaks?		
	Hose connections, fittings, couplings, and valves	ery (⊃n □n/a	Muck cookers	ery (□n □n/a
	Door gaskets and seating	ØY C	□N □N/A	Stills	ZY I	□n □n/a
	Filter gaskets and seating	NY C	□N □N/A	Exhaust dampers	ely (□N □N/A
	Pumps	ØYC	⊃N □N/A	Diverter valves	edy (□N □N/A
	Solvent tanks and containers	DY C	ON □N/A	Cartridge filter hous	ings D Y	□N/A
	Water separators		⊃N □N/A			
4. W	hich method of detection is used by the	ie respoi	nsible officia	1?		
	Visual examination (condensed so	lvent on	exterior sur	faces)	8	
Physical detection (airflow felt through gaskets)						
	Odor (noticeable perc odor)				Ø	
	Use of direct-reading instrumentat	ion (FII	D/PID/calorir	netric tubes)		
	Halogen leak detector				۵	
	If using direct-reading instrumentation, is the equipment:			™N/A	١.	
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?			n? □Y !	□N		
 b. Calibrated against a standard gas prior to and after each use (PID/FID only)? 			□Y	□N		
	c. Inspected for leaks and obvious signs of wear on a weekly basis?				DИ	
	d. Kept in a clean and secure area when not in use?			□Y□	□N	
e. Verified for accuracy by use of duplicate samples (calorimetric only)?				□N		
	<u>-</u>			_		
	Ilka Bundy			7-14-(
	Inspector's Name (Please Print	:)		Date of Inspection	n	
	Alka Bund			7-14-	-01	
	Inspector's Signature			Approximate Da	te of Next Ins	spection

ADDITIONAL SITE INFORMATION:

RS 1D#: 0950298

Revised 01/18/00

ARMS 7-14-00

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

ICILITY NAME: Diamond Cleaners	DATE: 1/14/2000.
WILLITY LOCATION: 5600 Pershing Ave.	
Orlando, FL 32822	
anual Reporting Period: July 9, 1999 20th TO	July 14 2000
used on each term or condition of the Title V general air permit, my facility has rema	ived in compliance with DEP Pule
!-213.300, Florida Administrative Code (F.A.C.), during the period covered by this s	<u>-</u>
NO, complete the following:	
l. Term or condition of the general permit that has not been in continuous compliance	e during the reporting period stated above:
xact period of non-compliance: from	to
ction(s) taken to achieve compliance:	
lethod used to demonstrate compliance:	·
2. Term or condition of the general permit that has not been in continuous compliance	e during the reporting period stated above:
xact period of non-compliance: fromt	0
ction(s) taken to achieve compliance:	
lethod used to demonstrate compliance:	
s the responsible official, I hereby certify, based on information and belief formed aft this notification are true, accurate and complete. Further, my annual consumption urchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1, ombination facilities.	of perchloroethylene solvent, based upon
ESPONSIBLE OFFICIAL: YOUNG BOKKIN Name (Please Print)	Signature Date

'This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the liscretion of the responsible official to use this form.

Page i of .

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL [CC	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 0835 TIME OUT: 085	55AIRS ID#: 0950298
TYPE OF FACILITY: Dry Cleaner	
FACILITY NAME: Diamond Cleaners	DATE: 7-14-00
FACILITY LOCATION: 5600 Pershing Ave	
Orlando FL 328	
RESPONSIBLE OFFICIAL: Young Bok Kim	PHONE NUMBER: 407-281-9760
Based on the results of the compliance requirements eval	
compliance with DEP Rule 62-213.300, Florida Adminis	
Based on the results of the compliance requirements eval discrepancies were noted:	uated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	· where we have a second of the second of th
	·
200	
•	
COMMENTS:	
	- 10
Facility in complic	AA(P)
The Annual Compliance Certification form has been properly cer	
DATE OF NEXT INSPECTION: 7-14-	
T11/2	Approximate) Bundy
	Please Print)
INSPECTOR'S SIGNATURE: Mea Bu	phone number: 407-836-1400
Page	Of Revised 10/96

-0950298

	Diamond Cleaners
· · · · · · · · · · · · · · · · · · ·	Spoke with Yun Kim-9/13/96
	6. add title-Dwner
1.1	
p./5	1.(a) add date control device installed, if any 4. mark out "X" and initial

	A. Received by (Please Print Clearly) B. Date of Delivery	
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, or on the front if space permits. 1. Article Addressed to: 	A. Received by (Please Print Clearly) B. Date of Delivery Agent Addressee It Is delivery address different from item 1? Yes Yes, enter delivery address below:	
10 AIRS ID # 0950298001AG YOUNG BOK KIM DIAMOND CLEANERS 5600 PERSHING AVENUE		
ORLANDO FL 32822	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.	
	4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Copy from segripe label) 7000 0	600 0021 28276971	
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789	

8E0 E44 015 Z US Postal Service, Receipt for Certified Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse) Sent to 10 AIRS ID # 0950298001AG YOUNG BOK KIM DIAMOND CLEANERS 5600 PERSHING AVENUE ORLANDO FL 32822 Certmed ree 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



(cut nere)

This portion must be attached to remittance for proper handling 404207

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

30-01 pl

Do NOT Remove Label

AIRS ID # 0950297

PERFECTION DRY CLEANERS RONULO GONZALEZ 1216 N MILLS AVENUE ORLANDO FL 32803 FOR GOVERNMENT USE ONLY Org.: 37550101000 FO: A1 O Obj.: 002273

	U.S., Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
7.7	Article Sent To:		
-0	22104	063038	(OLD)
27	Postage	\$	
디	Certified Fee		Postmark
ת	Return Receipt Fee (Endorsement Required)		Here
	Restricted Delivery Fee (Endorsement Required)		
090	Total Postage & Fees	\$	
)	I VOLLA A BAK KIM		
7000			
,	PS Form 3800, July 1999		See Reverse for Instructions

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

TOTAL AMOUNT DUE: \$50.00

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DIAMOND CLEANERS YOUNG BOK KIM 5600 PERSHING AVENUE ORLANDO FL 32822

RECE VED

0EC 10 88

FOR GOVERNMENT USE ONLY Org.: 3755010100 EO: B1 Fund: 20-2-035001

Obj.: 002273

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402961

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TOTAL AMOUNT DUE: \$50.00

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AIRS ID # 0950298

DIAMOND CLEANERS YOUNG BOK KIM 5600 PERSHING AVENUE ORLANDO FL 32822

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

Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0391461

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0950298

DIAMOND CLEANERS YOUNG BOK KIM 5600 PERSHING AVENUE ORLANDO FL 32822 FOR GOVERNMENT USE ON S COrg.: 37550101000 EO:651 Fund: 20-2-035001 Obj.: 002273