

Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

August 3, 2005

Mr. Sangworn Inthisarn
S & P Cleaners
4207 Edgewater Drive
Orlando, Florida 32804

Re: Facility No.: 0951211-003

Dear Mr. Inthisarn:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 20, 2005.

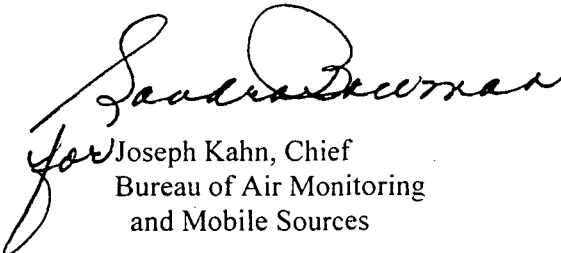
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements of the Title V general permit.

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

Title V General Permits Office
Bureau of Air Monitoring and Mobile Sources MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,


for Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Mr. Hamp Pridgen, Orange County

"More Protection, Less Process"

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EMISSION FEE DATES ¹⁹⁹⁻²⁰⁰⁴.....
NO ACTIVITY FOR FACILITY.....
SOC REPORTS ^A.....
COMP. STATUS - SNC MNC (IN)

5/23/2005

0951211

RECEIVED
JUN 20 2005
Bureau of Air, Water,
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	S&P CLEANERS, INC.		
2. Site Name (For example, plant name or number):	S&P CLEANERS		
3. Hazardous Waste Generator Identification Number:	FLD		
4. Facility Location:	4207 EDGEWATER DRIVE		
Street Address:			
City:	ORLANDO	County:	ORANGE
		Zip Code:	FL-32804
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0951211-003		

Responsible Official

6. Name and Title of Responsible Official:			
Name:	SANGWORN (SAM) INTAISARN	Title:	PRESIDENT
7. Responsible Official Mailing Address:			
Organization/Firm:			
Street Address:	4207 EDGEWATER DR.		
City:	ORLANDO	County:	ORANGE
		Zip Code:	FL-32804
8. Responsible Official Telephone Number:			
Telephone:	(407) 445-3819	Fax:	() N/A

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	N/A		
10. Facility Contact Address:			
Street Address:			
City:		County:	N/A
		Zip Code:	
11. Facility Contact Telephone Number:			
Telephone:	() -	Fax:	() -

Facility Information

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

How many dry-to-dry machines do you have on-site? [1]

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
<u>1995</u>	<u>Existing/New</u>	RC/CA/None required	<u>SAME</u>
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

~~1.(b) TRANSFER MACHINES ONLY~~

How many washers do you have on-site? [2]

How many dryers/reclaimers do you have on-site? [1]

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
_____	<u>Existing/New</u>	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

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

[30] gallons (You must fill this in)

(b) If less than 12 months, how many? [6] months

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

New store: [] New machine []

Unopened store [] (date of expected opening _____)

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

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

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?
 (Indicate with an "X".)

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

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt * [] OR
 No such units on-site []

How many boilers do you have on-site? [1]

For each boiler, indicate its horsepower (HP) rating: [10 HP] [] []

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

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log [X]
- (b) Leak detection inspection and repair [X]
- (c) Refrigerated condenser temperature monitoring [X]
- (d) Carbon adsorber exhaust perc concentration monitoring []
- (e) Startup, shutdown, malfunction plan []

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

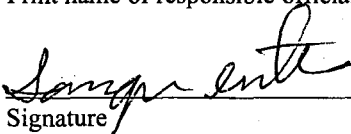
- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- > No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

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

SAM INTHISARN
Print name of responsible official


Signature

6/10/05
Date

Grant, Patricia

From: Bowman, Sandy
Sent: Tuesday, August 16, 2005 2:03 PM
To: 'Ilka.Bundy@ocfl.net'
Cc: John.Parker@ocfl.net; Thomas, Bruce X.; Grant, Patricia
Subject: RE: S & P Cleaners -0951211-003

Hi Ilka,

Thanks for catching this for us. Pat is sending out a letter to Mr. Inthisarn this afternoon referencing the 003 project number.

I also noticed in the history for this facility that you made a change to the database. Was this to change the name of the business? In the future, please notify us of changes that need to be made to the database so that we may update the database and all of our files accordingly.

Thanks.

Sandy Bowman
Environmental Administrator
Division of Air Resource Management
850/921-9583 or sandy.bowman@dep.state.fl.us

-----Original Message-----

From: Bundy, Ilka [mailto:Ilka.Bundy@ocfl.net]
Sent: Tuesday, August 16, 2005 11:28 AM
To: Bowman, Sandy; Thomas, Bruce X.
Cc: Hamp.Pridgen@ocfl.net; John.Parker@ocfl.net
Subject: S & P Cleaners

Hello Sandy and Bruce!

While reviewing the standard letter (dated Aug. 3rd) sent to Mr. Inthisarn for S & P Cleaners, AIRS ID#0951211, I noticed that the project number on the letter has -001. The notification form and ARMS shows that the project number is -003. I do not know if a new letter needs to be sent to the dry cleaners or not, but I wanted you to be aware of the discrepancy. I will change my copy in the files to reflect the -003 project number.
Thanks!

Ilka Bundy
<mailto:Ilka.Bundy@ocfl.net>
Environmental Specialist
Orange County EPD
Phone 407-836-1476
Fax 407-836-1498

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

RECEIVED

468278 FEB 22 2007

FEB 06 2007

TOTAL AMOUNT DUE: \$50.00

Bureau of Air Monitoring
& Mobile Sources
Do NOT Remove Label

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

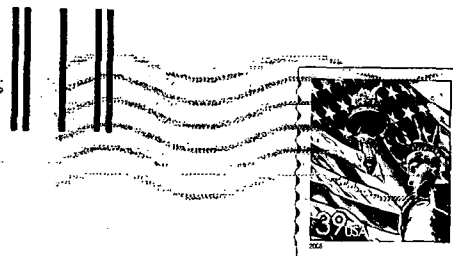
AIRS ID# 951211 ✓
S & P CLEANERS
4207 Edgewater Drive
ORLANDO, FLORIDA 32804

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

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ORLANDO FL 328

31 JAN 07 PM 2 L



TITLE V - General Permit
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070

3231533070 BOSS



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

460598 APR 5 2006

TOTAL AMOUNT DUE: \$75.00

Do **NOT** Remove Label

AIRS ID# 951211 7
TIKAL CLEANERS
4207 Edgewater Drive
ORLANDO, FL 32804

APR 5 2006
Bureau of Air Mail
& Mobile Services
FLAIR ACCT CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

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ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

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