

Department of Environmental Protection

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

Colleen M. Castille Secretary

April 5, 2004

Mr. Anthony J. Forte Love Dry Clean 1125 East Vine Street Kissimmee, Florida 34744

Re: Facility No.: 0970066-002

Dear Mr. Forte:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on March 1, 2004.

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,

Joseph Kahn, Chief

Bureau of Air Monitoring and Mobile Sources

JK/jw

cc: Mr. Tom Mulligan, Central District

"More Protection, Less Process"

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EMISSION FEE DATES 98-2003 SOC REPORTS COMPLIANCE STATUS

Grant, Patricia

From: Thomas, Bruce X.

Sent: Wednesday, October 05, 2005 10:13 AM

To: Grant, Patricia **Cc:** Bowman, Sandy

Pat.

0970066 and 1270146 are both inactive per Bill Rodriguez.

Bruce Thomas, P.E. Division of Air Resource Management (850)-921-7744 or Bruce.X.Thomas@dep.state.fl.us

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. completed form to the address listed in the instructions and keep a copy of the form for your files.

1. Facility Owner/Company Name (Name of corporation,	agency, or individual owner):
2. Site Name (For example, plant name or number):	
2. Site Name (For example, plant name or number): Love Dry Clean	GAD 981 269 095
3. Hazardous Waste Generator Identification Number:	
MeF	NJD054126164
4. Facility Location: Street Address: //25 E. Vine S City: City: County: County: County:	Zip Code: 34744
S. Facility Identification Number (DEP USE ONLY) do not	9970066-pa
Responsible Official	
6. Name and Title of Responsible Official: Name: Authory To Foxte	Title: owner
7. Responsible Official Mailing Address: Organization/Firm: Love Dry Cleans Street Address: //25 E. Vine City: County: 135 Mamele Dseeda	treet Zip Code: 34744
8. Responsible Official Telephone Number: Telephone: (407) 870-277/	Fax: (467) 931 874
Facility Contact (If different from Responsible Official)	
9. Name and Title of Facility Contact (For example, plant m	anager):
10. Facility Contact Address:	
Street Address:	
City: County:	Zip Code:
11. Facility Contact Telephone Number:	
Telephone: () -	Fax: () -

DEP Form No. 62-213.900(2)

Facility Name and Location

Effective: 2/24/99

AIRS ID # 0970066-002

Page 16

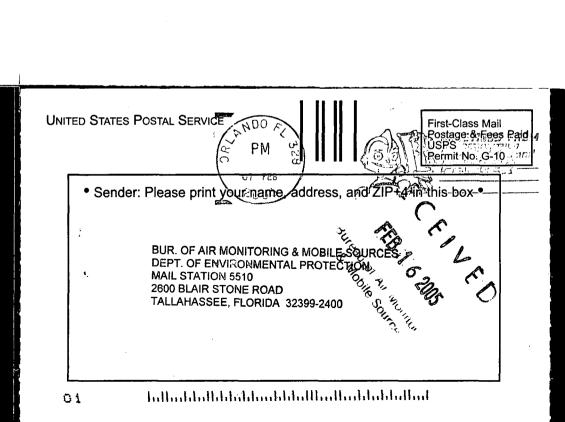
6. (b) Leak detection inspection and repair is required for all sources. Should be marked.

			Emergenc, Contact Telephone	Number		,		
	1	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest 5.2475	2. Page 1 of 1	Information not require		haded areas is teral law.
L	OVE	erator's Name and Malling Address DRY CLEANING	113-0039			lanifest Docum	< .4.	· • : **
		-	OSSIMMEE FL	34743	8. State G	lenerator's ID		
		erator's Phone ((407) 870-2771 sporter 1 Company Name	County: Osceole Te	er. 3WF	1 A. A. A.	* ; ; 	1 1 	
		SYSTEMS ATLANTA, INC.	GAD9812690			ransporter's ID orter's Phone	1776	593-9434
		sporter 2 Company Name	8. US EPA ID Num			ransporter's ID	N. P.	المند مند
		HOLD CARTAGE, INC.	NJD0541261			rter's Phone	(941)	533-4599
		gnated Facility Name and Site Address SYSTEMS ATLANTA, INC.	10. US EPA ID Num		G. State P	eciliy's ID		
D	ecet	Snapfinger Woods Drive ur GA 30035	GAD9812690	<u> </u>	H. Facility	s Phone	(770)	593-8434
11	US E	DOT Description (Including Proper Shipping	Name, Hazard Class, and ID Number)	12. Cont	Type	13. Total Quantity	14. Unit WVVol	(, Wasie No.
a.	X	RQ WASTE TETRACHLORO (Standard Filters	DETHYLENE; 6.1 UN1897; III		D.F		P	F002/ D039
b.	X	RQ WASTE TETRACHLORO (Split Jumb	•		D.M		P	F002/ D039
C.	×	RQ WASTE TETRACHLORO (Still Bottom Liquid:15G			D.M		P	F002/ D039
a.	×	RQ WASTE TETRACHLORO (S.B. Powder/Studge:15	DETHYLENE; 6.1 UN1897; (II) 5Gal, 55Gal)	0(D.M	150	P	F002/ D039
		ional Descriptions for Materials Listed Above 5 #160 PAID			M05	Codes for We 1, M052, T54, T6	M05	3, S01

7153	U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)					
1 1	For delivery inform	ation visit ou		at www.usps.com®		
1710	OFF	i I G I	AL	. USE		
	Postage	\$				
100 100	Certified Fee					
	Return Reciept Fee (Endorsement Required)			Postmark Here		
Ė	Restricted Delivery Fee (Endorsement Required)					
0.5	1 AIRS ID# 970	0066 1stC		•		
m r	Se LOVE DRY	CLEAN				
7003	1125E Vine S	treet				
7	or KISSIMMEE	, FL 34741				
 	Cit					
	DC For- 2000 1	(Secure of Sections	gran v	and the second second second second		
LI	PS Form 3800, June 2002			See Reverse for Instructions		

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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. 	Signature Agent Addressee B. Reseived by (Printed Name) Date of Defivery
Article Addressed to:	D. Is delivery address different from item 1?
AIRS ID# 970066 1stC LOVE DRY CLEAN 1125E Vine Street	
KISSIMMEE, FL 34741	3. Service-Type ☐ Certified Mall ☐ Express Mall ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	l listied Mail L C.C.D.
	4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service label, 7003 05)	



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

446255 FEB142005

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 970066 10 LOVE DRY CLEAN 1125E Vine Street KISSIMMEE, FL 34741

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1

FUND: 20-2-035001 OBJECT: 002273

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