

Department of Environmental Protection

0990362

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

Virginia B. Wetherell Secretary

August 28, 1996

Ms. Lucille M. Matthews President One Price Dry Cleaning 9841 Glades Road Boca Raton, Florida 33428

Dear Ms. Matthews:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 12, 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 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 Dilzz, Chief

Bureau of Air Monitoring

and Mobile Sources

/DD

cc: Mr. Al Grasso, Palm Beach County

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

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	YWINAL K	COMPLA	UNTIDISCOVE	RY 🗌	RE-INSPECTION
TIME IN: 10:50 TYPE OF FACILITY: D	TIMEOUT:	11:30 ning	AIS	2SID#: 09	90362
FACILITY NAME:ONG FACILITY LOCATION: 98	2 Price 4/ Glo OCARATOI	Do;	Rd Rd L3	n 3428	DATE: 3-11-99
RESPONSIBLE OFFICIAL: RO	best Ma	thew.	SPHON	E NUMBER:	451-4855
Based on the results of the compliance with DEP Rule				ction, the facili	ty is found to be in
Based on the results of the discrepancies were noted:	compliance requiremen	ts evaluated	during this inspe	ction, the follow	wing compliance
COMPLIANCE REQUI	REMENT/PROBL	EM	FOLLOW	-UP ACTIO	N REQUIRED
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COMMENTS:				•	A. M.
The Annual Compliance Certificate DATE OF NEXT INSPECTION	111 00	7 2	000	the inspector.	YES NOW
INSPECTION CONDUCTED B	y:	Cho	KShi		
INSPECTOR'S SIGNATURE:	2.V. Ch	ohr	PHON	IE NUMBER:	355-3070 Ext. 1174

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ARMS

TYPE OF INSPECTION:

ANNUAL

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COMPLAINT/DISCOVERY

RE-INSPECTION

	99 TIME IN: 10:50 TIME OUT: 11:30
FACILITY NAME: Che Pri	le Doy Clean
facility location: $984/$	Glades Rd
BOCa	Reton, F-L 33428
RESPONSIBLE OFFICIAL: Robert	M9 Thews HONE: 451-4855
CONTACT NAME:	PHONE:
DADT I. NOTIFICATION	
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	urtup 🖸
2. Facility failed to notify DARM to use general pe	ermit 🚨
PART II: CLASSIFICATION	
A Transilian in diseased on modification form that it is	
Facility indicated on notification form that it is:	☐ No notification form ☐ Drop store/out of hysiness/petroleum
(check appropriate box) A.	☐ Drop store/out of business/petroleum
(check appropriate box)	- · · · · · · · · · · · · · · · · · · ·
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr	☐ Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	☐ Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr	☐ Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr
(check appropriate box) 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)	Drop store/out of business/petroleum 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)
(check appropriate box) 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) 3. Existing large area source	Drop store/out of business/petroleum 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
(check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr	Drop store/out of business/petroleum 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 ≤ 2,100 gal/yr
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(check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr	Drop store/out of business/petroleum 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 ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr
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(check appropriate box) 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification	Drop store/out of business/petroleum 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 ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) □ Can not determine
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Is the responsible official of the dry cleaning facility: (check appropriate boxes) Y ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? ØY ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? DN DN/A 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN DN/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) 1. Equipped all machines with the appropriate vent controls? ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

B.	Has the responsible official of an existing large or new large area source also:	
١.	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?	DV: ON
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY ON ON/A
	Is the temperature differential equal to or greater than 20° F?	MY ON ON/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?	OY ON OMIA
	Is the perc concentration equal to or less than 100 ppm?	AINE NO YO
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?	מאבן אם עם אום
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	אואם אם צם
6.	Routed airflow to the carbon adsorber (if used) at all times?	DY DN PN/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: MY ON ON/A 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 RY ON ON/A and parts installed w/in 5 days of receipt? DY ON MINA 4. Maintained calibration data? (for applicable direct reading instruments) DY DN DN/A 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? MY ON ON/A 7. Maintained deviation reports? AND NO YOU Problem corrected? DY DN ØN/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? DΝ DΝ 2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, MY ON ON/A OY ON DIN/A couplings, and valves Muck cookers MY ON ON/A DY ON ON/A Door gaskets and seating Stills OY ON ØN/A Filter gaskets and seating MY ON ON/A Exhaust dampers Pumps Y ON ON/A Diverter valves DY ON ONA MY ON ON/A Solvent tanks and containers Cartridge filter housings DY ON ON/A DY ON ON/A 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: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN b. Calibrated against a standard gas prior to and after each use (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? DY DN DY DN d. Kept in a clean and secure area when not in use? e. Verified for accuracy by use of duplicate samples (calorimetric only)? OY ON

Official's Name (Please Print)

fficial's Signature

Approximate Date of Next Inspection

Secondary Containment for: Dry Cleaning Machine & Storage area [] [] Waste area [] [] Spotting area Sealed [] [] Disposal of Water from Water Separator using approved evaporator [] [] or contracted Wastewater service [] []	Waste area [] Waste area [] Spotting area Sealed [] Disposal of Water from Water Separator using approved evaporator [] or contracted Wastewater service [] Some Lety Kleen Picks Up The Waste		·	
Waste area [] [] Waste area [] [] Spotting area Sealed [] [] Disposal of Water from Water Separator using approved evaporator [] [] or contracted Wastewater service [] []	Waste area [] Waste area [] Spotting area Sealed [] Disposal of Water from Water Separator using approved evaporator [] or contracted Wastewater service [] Some Lety Kleen Picks Up The Waste	יסנ	DITIONAL SITE INFORMATION:	7
2. Disposal of Water from Water Separator using approved evaporator [] or contracted Wastewater service [] [] So Lety Kleen Picks Up The Waste	2. Disposal of Water from Water Separator using approved evaporator [] or contracted Wastewater service [] [] So Lety Kleen Picks Up The Waste	1.	Secondary Containment for: Dry Cleaning Machine & Storage area [] [] Waste area	
or contracted Wastewater service [1] So tety kleen Picks up the Wast	or contracted Wastewater service [X [] So Lety Kleen Picks up the Waste		Spotting area Sealed 77 [1	
or contracted Wastewater service [1] So tety kleen Picks up the Wast	or contracted Wastewater service [X [] So Lety Kleen Picks up the Waste			
or contracted Wastewater service [1] So tety kleen Picks up the Wast	or contracted Wastewater service [X [] So Lety Kleen Picks up the Waste			
Safety Kleen Picks up the Wast Lots of Dist around day Cleaning Machine - Dist like - elothes, Lint, Machine - Dist like - Asked to key	Safety kleen picks up the Wash Lots & Dist around dry Cleaning Hats & Dist like - elothes, Lint, Machine - Dist like - elothes, Lint, are the clean.	2.		
Lots of Dist assound and Lint, Machine - Dist like - clothes, Lint, Machine - Dist like - Asked to keep and the company of the	Lots of Dist around and, Machine - Dist like - elother, Lint, Machine - Dist like - Asked to keep area to clean.		Society Kleen Picks up The Was	X
Jasolahan Just etc - Asked 10 reg	Warning Last etc - Asked 10 reg		Lots of Dist around out, Lint,	
	are the	l	Contation Just et - Asked 10 Fe	7

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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

MAY 1 2 1997

Revised 10/96

INSPECTION SUN TYPE OF INSPECTION: ANNUAL 🗹 COM	MMARY REPORT E	Bureau of Air Monitoring & MpeilfnSperction
TIME IN: 12:30 TIME OUT: 1:05 TYPE OF FACILITY: DAY Cleaning FACILITY NAME: One Price Do FACILITY LOCATION: 9841 Glade: BOCA Raton	y Cleaning S Road FL 3342	0990362 - DATE: 4-8-97
RESPONSIBLE OFFICIAL: Robert Morthe	W S PHONE NUMBER	<u>: 451-4855</u>
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluated discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	ative Code (F.A.C.).	llowing compliance
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COMMENTS:		
The Annual Compliance Certification form has been properly certification form has been properly certification of the Annual Compliance Certification form has been properly certification for form has been properly certification for form has been properly certification for form for for form for for form for for form f	proximate)	. YES NOC
	PHONE NUMBER:	355-3070

AUG-20 150 700 07:17 (D:

TEL NO:

#235 PG:

Revision

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

	racinty water and Location
T.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	A/1
2.	Site Name (For example, plant name or number):
3	Hazardous Waste Generator Identification Number:
.و	^
	4LD 981030828
4.	Facility Location:
	City on Single Country
İ	BOCA KATON PALM Breed 33428
3.	Street Address. 984/ GLADES RD. City: Boca Rata Parm Brand Zip Code: 33428 Pacility Identification Number (DEP Use):
	0990362
	Responsible Official
6.	Name and Title of Responsible Official:
 -	Responsible Official Mailing Address:
1.	Organization/Pirm:
	Street Address: 9841 GLADES D.
	City: Zip Code:
	Responsible Official Telephone Number:
ο.	Responsible Official Telephone Remote.
	Telephone: (514) 451 4855 Fax: (561) 488 - 2541
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
	Karl MATTHEWS PLANT MANAGER
10	Facility Contact Address.
	Street Address: 9841 GLADES B.

RECEIVED

Zip Code:

AUG 1 2 1996

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

11. Facility Contact Telephone Number:

(514) 451 4855

Telephone:

Page 13 of 16

County:

Fax: (

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ļ	0990362 Revised Form	<u> </u>
p. 15		
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AUG-20-1 WE THE DELECTION

TEL NO:

#236 FB1

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
	1	Machine	Control		Machine	Control		Machine	Control
)		Initially	Device	1	Initially	Device		initially	Device
Type of Machine	ID	Purchased	Installed	1D	Purchased	Installed	ID	Purchased	installed
Example	#]	03- 0CT-9 3	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit									
(1) w/ ref. condenser	4	18- MAN-9	11 May 93						
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit									
(7) w/ ref condenser									
(8) w/ carbon adsorber	1								
(9) w/ no controls		1							
Reclaimer Unit	1								
(10) w/ ref. condenser		1		1					
(11) w/carbon adsorber									
(12) w/ no controls	1			1					
(b) Control devices are (c) No control devices 2.(a) What was the total [10 (b) If less than 12 mon Check why it is less	are r quant] gallo	equired to be tity of perchions	installed [_ proethylene ((perc)	purchased in				لــا
3. What is the facility's so (Indicate with an "X". Existing small a	Sele: rea so	et one classif	Testion only.) ew si	Initions found mail area sour	rce	3) of	Part II?	
Existing large a	168 2C	surce (; •	C 77 10	n de men ten		,		

DEP Form No. 62-213.900(2)

Page 14 of 16

AUG-20 194 THE COURT ID:

TEL 110:

#236 P82

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

Existing large area source Carbon adsorber	·	Refrigerated condenser	كك
New small area source Refrigerated condenser			
New large area source Refrigerated condenser	1/1		

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:

All steam and hor water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.

All steam and hot water generating units exempt		J
No such units on-site	[1

1.13

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) Ceak detection inspection and repair (c) Refrigerated condenser technology.

(I) Start-up, shutdown, malfunction plan

DEP Form No. 62-213,900(2) Effective: 6-25.06

Page 15 or to

AUS-00-196 THE 09:13 1D:

99999999999

TEL MO:

#236 PA3

Surrender of Existing Air Permit(s)

Please indicate 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

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 pollution 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.

Signature

Date

DEP Form No. 62-213 900(2)

Effective: 6-25-96

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Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
MATTCO CLEANERS II WC.
2. Site Name (For example, plant name or number):
ONE PRICE DRY CLEANING
3. Hazardous Waste Generator Identification Number:
FLD 981030828
4. Facility Location: Street Address: 9841 GLADES RD.
Country
BOCA RATON PALM BEACH 33428 5. Facility Identification Number (DEP Use):
5. Facility Identification Number (DEP Use): 0990362
Responsible Official
6. Name and Title of Responsible Official:
LUCILLE M. MATTHEWS - PRESIDENT
7. Responsible Official Mailing Address: Organization/Firm:
Street Address: 9841 GLADES D.
City: D. Zip Code:
8. Responsible Official Telephone Number:
Telephone: (54) 451 4855 Fax: (561) 488 - 2541
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
KASE! MATTHEWS PLANT MANAGER
10. Facility Contact Address:
Street Address: 9841 GLADES B.
City: Boca RATOLI County: PALK BEACH 33428
11. Facility Contact Telephone Number:
Telephone: (516) 451 4855 Fax: () -
DECEIVED

RECEIVED

AUG 1 2 1996

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16

Rurall of Air Monitoring

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 Machine	Date Control Device		Date Machine	Date Control		Date Machine	Date Control Device
Type of Machine	ID	Initially Purchased	Installed	ID	Initially Purchased	Device Installed	ID	Initially Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91	1	#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit								e gran	
(1) w/ ref. condenser	/	01-1/01-93							
(2) w/ carbon adsorber								_	
(3) w/ no controls									
Washer Unit		•							
(4) w/ ref. condenser									
(5) w/ carbon adsorber		_							_
(6) w/ no controls									
Dryer Unit			4		esta de la compansión d		٠.		
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit					No. 18 TO 12	southern the		that plant is	100
(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 q [420] (b) If less than 12 month Check why it is less	uanti gallo	equired to be ity of perchlons ow many? [_	installed [_ proethylene (perc)	purchased in				
3. What is the facility's son (Indicate with an "X". S Existing small are	Selec ea so	t one classifi	cation only.)	ew sn	initions found	rce [3) of	Part II?	

DEP Form No. 62-213.900(2)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)
Existing large area source Carbon adsorber Refrigerated condenser
New small area source Refrigerated condenser []
New large area source Refrigerated condenser []
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:
All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site
\cdot
Tanian and Manidavina and Decoudly aming Information
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
(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

DEP Form No. 62-213.900(2)

Surrender of Existing Air Permit(s)

لک	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifice statements maintain th	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 he air pollutant emissions units and air pollution control equipment described above so as to hall terms and conditions of this general permit as set forth in Part II of this notification form.
1 111	ptly notify the Department of any changes to the information contained in this notification.

DEP Form No. 62-213.900(2)

ARMS

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE	OF	INSPECTIO	N:
1.15	O.C	アイウス アイ・アイク	

ANNUAL



COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS ID#099036	2 DATE: 4-8	-97 TIME IN:	2:30 m	ME OUT: 1:05
facility name: _O	ne Price	e Dry	Clear	ring
FACILITY LOCATION:	9841	Glades	Roa	d v
	Boca	Raton	FL 3	33428
		,		

PART I: NOTIFICATION					
(check appropriate box)					
1. Existing facility notified DARM by 9/1/96					
2. New facility notified DARM 30 days t	prior to star	tup			
3 Facility failed to notify DARM to use	general per	mit .			
PART II: CLASSIFICATION					
Facility indicated on notification form (check appropriate box)	that it is:				
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 gai/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 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" before="" both="" classification.<="" correct="" facility="" gal="" is="" only,="" td="" this="" transfer="" types,="" yr=""><td></td><td>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)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yt=""><td>\$</td><td></td></x<2,></td></x<2,>		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)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yt=""><td>\$</td><td></td></x<2,>	\$		
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 200 gallons.

Is the responsible official of the dry cleaning facility: (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 sealed 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).

(check appropriate boxes)	
1. Equipped all machines with the appropriate vent controls?	X _A dh
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	A ON ON
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON NO

4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? Where to keep Records

A. Has the responsible official of all new sources and existing large area sources:

of a refrigerated

5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?

AY ON

6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

OY IN

B. Has the responsible official of an existing large or new large area source also	
Measured and recorded the exhaust temperature on the outlet side of the condense on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	r located
2. Measured and recorded the washer exhaust temperature at the condenser	_
inlet and outlet weekly?	□Y W
Is the temperature differential equal to or greater than 20° F?	□X A 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 €in/a
Is the perc concentration equal to or less than 100 ppm?	OY ON NA
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?	on,
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	· / / OY ON ON ON A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON MINA
PART V: RECORDKEEPING REQUIREMENTS	
Times 7: Recording to Acquire 115	
Has the responsible official:	
Has the responsible official: (check appropriate boxes)	AY ON
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?	dy on
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:	#YY 0 M
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 hrs? or,	AY ON
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:	/ \
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 hrs? or, b. documentation of parts ordered to repair leak and leak repaired w/in 2 da	ys
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 hrs? or, b. documentation of parts ordered to repair leak and leak repaired w/in 2 da and parts installed w/in 5 days of receipt?	ys \square Y Ψ N
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 hrs? or, b. documentation of parts ordered to repair leak and leak repaired w/in 2 da and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for direct reading instruments only)	ys OY ON AWA
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 hrs? or, b. documentation of parts ordered to repair leak and leak repaired w/in 2 da 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?	ys OY ON DWA OY ON DWA
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 hrs? or, b. documentation of parts ordered to repair leak and leak repaired w/in 2 da 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?	ys OY ON DW/A OY ON DW/A OY ON
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 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 da 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 deviation reports?	ys OY IN OY ON DW/A OY ON DW/A OY ON DY ON
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 hrs? or, b. documentation of parts ordered to repair leak and leak repaired w/in 2 da 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?	ys OY ON DW/A OY ON DW/A OY ON DW/A OY ON DW/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 hrs? or, b. documentation of parts ordered to repair leak and leak repaired w/in 2 da 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?	ys OY ON DW/A OY ON DW/A OY ON DW/A OY ON DW/A

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

Which method of detection is used by						
Visual examination (condensed	24					
Physical detection (airflow felt		,				
,	Odor (noticeable perc odor)					
Use of direct-reading instrumen					<u></u> N/A	
If using direct-reading instru						
•			rations in a range of 0-500 ppm?	ΩY	□NN/A	
b. Calibrated against a (PID/FID only)?	standard	gas prior t	o and after each use	QY	□NN/A	
c. Inspected for leaks	and obviou	s signs of	wear on a weekly basis?	QΥ	□NN/A	
d. Kept in a clean and	secure are	a when no	ot in use?	QΥ	□NN/A	
e. Verified for accurac	ry by use of	f duplicate	samples (calorimetric only)?	OY M	□N_N/A	
. Has the facility maintained a leak log	5 ?			A.	ПN	
. Does the responsible official check th	e followin	g areas for	: leaks?	1		
Hose connections, fittings, couplings, and valves	∯¥	ND	Muck cookers	, 94 <u>r</u>	- □NN	
Door gaskets and seating	_ ∆ A	ИD	Stills	QΥ	□n X n	
Filter gaskets and seating	A.	ПΝ	Exhaust dampers	ŌY	□и∕и	
Pumps	άλ	ПΝ	Diverter valves	YD	ON X	
Solvent tanks and containers	Ż√.	ПN	Cantridge filter housing	s 9/4	□N_N	
Water separators	ΔY	ПИ		<u></u>		
Molling			Robert J. Motthe	2476	861-45	
Name of Responsible Offi	cial (Signa	ature)	Name of Responsible Offici	al (Pri	nt) & Phone	
BV Chatch			4-8-	97	,	
Inspector's Name (Please F	rint)	•	Date of Ins	pection		
2. M. Phsh		_	11-8-	98	b	
Inspector's Signature			Approximate Date o			
ndary Containment for: Dry	Cleanin	g Machi	.ne & Storage area		Yes No [X] []	
			Waste area		[] [] [] [
			Spotting area Seal	ed	[] []	
osal of Water from Water Se	parator	using	approved evaporator		Ki LI	
			Pick s up Water		7 4 . 1	

RECEIVED

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

MATTCO CLEANERS II INC

AIRS ID#0990362

LUCILLE M MATTHEWS 9841 GLADES ROAD **BOCA RATON FL 33428** Bureau of Air Monitoring & Mobile Sources Do NOT Remove Label Annual Reporting Period: Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 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 reporting period stated above: Exact period of non-compliance: from 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 reporting period stated above: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance:

*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.

does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon purchase receipts,

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT ANNUAL COMPLAINT DISCOVERY.

TYPE OF INSPECTION: ANNUAL CON	RE-INSPECTION
TIME IN: 10:20 TIME OUT: 10:5	O AIRS ID#: 5 990362
TYPE OF FACILITY: Doy Cleaning	
FACILITY NAME: Che Price Do	y Clean DATE: 6-19-98
FACILITY LOCATION: 9841 Glade	Rd
BOCA RATON	, FL 33428
RESPONSIBLE OFFICIAL: Robert Mathous	PHONE NUMBER: 451-4655
Based on the results of the compliance requirements evalu	ated during this inspection, the facility is found to be in
compliance with DEP Rule 62-213.300, Florida Administr	
Based on the results of the compliance requirements evalu	
discrepancies were noted:	
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	•
·	;
<u> </u>	
	RECEIVED
	JUL 1 5 1998
COMMENTS:	· Bureau of Air Monitoring
	& Mobile Sources
The Annual Compliance Certification form has been properly certification	fied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	ne 1999
	pproximate)
INSPECTION CONDUCTED BY:	Choksni.
0.100/249	lease Print) PHONE NUMBER: 355-3070
INSPECTOR'S SIGNATURE!	PHONE NUMBER: 335 - 50 /0

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

TVDE	OF	INCOR	CTION:
IYPL	Ur	TIAPLE	CIIUN

ANNUAL

COMPLAINT/DISCOVERY

 \Box

RE-INSPEC

C	I I	U.	[7	`	_

ARS 10#: 099062 DATE: 6-17-	78 TIME IN: 10:20 TIME OUT: 10:50
FACILITY NAME: One Pri	(e Dry Clean
facility location: 9841	Glade Road
BOCA RAT	ON, FL 33428
RESPONSIBLE OFFICIAL: Robe of	Mathewane: 45/-4855
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	rtup 🛚
2. Facility failed to notify DARM to use general pe	rmit 🗆
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form ' ☐ Drop store/out of business/petroleum
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, $140 \le x \le 2,100 \text{ gal/yr}$ transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$ (constructed on or after $12/9/91$)
5. This is a correct facility classification	ON Can not determine
If no, please check the appropriate classifi facility qualified for a ge	

facility was 300 gallons.

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

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? ON ON/A 2. Examining the containers for leakage? ØY ON 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at ØY ON ON/A 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 DN DN/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) מט אמ 1. Equipped all machines with the appropriate vent controls? AND NO YES 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? ØY ON ON/A 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

В.	Has the responsible official of an existing large or new large area source also:	
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	אם אבן
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	אואם אם אַעָּ אואם אם אַעָּ
	Is the temperature differential equal to or greater than 20° F?	אואם אם אים
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?	באמק מם עם באמק מם עם
	Is the perc concentration equal to or less than 100 ppm?	אואלט אם צם
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?	באועם אם אם
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY ON DN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	אואם אם אם

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
Maintained receipts for perc purchased?	NO YO			
2. Maintained rolling monthly averages of perc consumption?	MA ON			
3. Maintained leak detection inspection and repair reports for the following:				
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם צאַ			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אַעם אם אַע			
4. Maintained calibration data? (for applicable direct reading Instruments)	DY ON DIN/A			
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DN/A			
6. Maintained startup/shutdown/malfunction plan?	מס צ'פ			
7. Maintained deviation reports?	אַעם אם אַעַ			
Problem corrected?	AYA ON ON/A			
8. Maintained compliance plan, if applicable?	אואם אם אם			

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair ΠN inspection? ΠN 2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, אואם אם צא DY DN DN/A Muck cookers couplings, and valves AVAC NO YQ MY ON ON/A Stills Door gaskets and seating AYON ON/A DY DN DNA Exhaust dampers Filter gaskets and seating MY ON ONA Y ON ON/A Diverter valves Pumps ØY ON ON/A Cartridge filter housings DY DN DN/A Solvent tanks and containers ØY ON ON/A 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: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY ON: b. Calibrated against a standard gas prior to and after each use DY DN (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? DY DN d. Kept in a clean and secure area when not in use? DY DN e. Verified for accuracy by use of duplicate samples (calorimetric only)? DY DN

Responsible Official's Name
(Please Print)

Responsible Official's Name
(Please Print)

Inspector's Signature

Responsible Official's Signature

Responsible Official's Signature

6-17-98

Date of Inspection

Approximate Date of Next Inspec

ADDITIONAL SITE INFORMATION: Yes NO 1. Secondary Containment for: Dry Cleaning Machine & Storage area [] [] Waste area Spotting area Sealed 2. Disposal of Water from Water Separator using approved evaporator [/] [] or contracted Wastewater service Sett fleen pich up The Waste Once apronth

Little wet in Containment, Stain on Wall, Asked to Keep aren clean around the machine.

Rel

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

	MATTCO CLEANERS II INC	AIRS ID#0990362	RE	CEIVE
	9841 GLADES ROAD BOCA RATON FL 33428			EB 2 1998
	<u>. </u>		Bureau & N	of Air Monitorir Iobile Sources
	Do NOT Rem	nove Label		97
Annual Reporting Period:	19=	TO	ECEMBER	19
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F		•	<u> </u>	P Rule
If NO, complete the following:				
#1. Term or condition of the general permit	that has not been in continue	ous compliance durin	g the reporting period	stated above:
Exact period of non-compliance: from	·	to	M	
Action(s) taken to achieve compliance:		· .	E y	<u></u>
Method used to demonstrate compliance:	,		Charles 1	1
#2. Term or condition of the general permit	that has not been in continuo	ous compliance durin	g the reporting period	stated acove:
Exact period of non-compliance: from		to		
Action(s) taken to achieve compliance:				
Method used to demonstrate compliance:	••		<u> </u>	
As the responsible official, I hereby certify, base notification are true, accurate and complete. Fi does not exceed 2,100 gallons per year for dry-to				
RESPONSIBLE OFFICIAL: Name	M.M. AMPENS ne (Please Print)	A.A. Signan		1/21/18 Date
	Total Section 1			

^{*}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 X	OMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:35 TIME OUT: 10:5	55 AIRS ID#: 0990362
TYPE OF FACILITY: Dey Chawing	
FACILITY NAME: One Peice Dey Clear	DATE: 3/6/00
FACILITY LOCATION: 9841 Glades End	
BULA RATOJ F1 33428	
RESPONSIBLE OFFICIAL: KASEY MATHEUS	PHONE NUMBER: 451 - 4855
Based on the results of the compliance requirements evaluation compliance with DEP Rule 62-213.300, Florida Administration	- · · · · · · · · · · · · · · · · · · ·
Based on the results of the compliance requirements evaludiscrepancies were noted:	nated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	70 E FN
	APR 1
	VEC
COMMENTS:	
The Annual Compliance Certification form has been properly certified	ed and submitted to the inspector. YES NO
DATE OF ITERATION ECTION.	ech 200i
	proximate)
HIGH ECTION COMBOCILED BY:	Dize K ase Print)
INSPECTOR'S SIGNATURE: Que an Dinek	PHONE NUMBER: 355-3070 X7 1139

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

PART III: GÉNERAL CONTROL REQUIREMENTS	· · · · · ·			
Is the responsible official of the dry cleaning facility: (check appropriate boxes)				
1. Storing perchloroethylene in tightly sealed and impervious containers?	XY ON ON/A			
2. Examining the containers for leakage?	MY ON ON/A			
3. Closing and securing machine doors except during loading/unloading?	M A □N			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	XY ON ON/A			
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	בעיל קל אם עם			
PART IV: PROCESS VENT CONTROLS				
In Part II-A:				
If classification 1 has been checked, no controls are required. Proceed to Part V	V.			
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?	X YY □N			
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	AA ON ONVY			
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	אואם אם צאָא 🖂			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	12 1 □ N			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	אַע סא סאר אַער			
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	X Y □N			

I	3. 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?	X (7. c	אכ
2	. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	X Y C	אורם אם
	ls the temperature differential equal to or greater than 20° F?	XYY C	אותם מנ
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?		A/N iX MI
	Is the perc concentration equal to or less than 100 ppm?		A\N X MI
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?		A/N X N
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY O	ANA X N
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY O	A/K K K

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	XY ON			
2. Maintained rolling monthly total of perc consumption?	∑ YY □N			
3. Maintained leak detection inspection and repair reports for the following:	~			
a. documentation of leaks repaired w/in 24 hrs? or;	XY 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? 	XY ON ON/A			
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON X N/A			
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN X N/A			
6. Maintained startup/shutdown/malfunction plan?	XY DN			
7. Maintained deviation reports?	XYY ON ON/A			
Problem corrected?	XY ON ONA			
8. Maintained compliance plan, if applicable?	איני ג/ אם צם			

ADI	ITIONAL SITE INFORMATION:	×	
7	a contribute for Day Clopping Machine & Storage area	Yes	Ο⁄Λ Γ 1
1.	Secondary Containment for: Dry Cleaning Machine & Storage area		[]
	Waste area	[X]	[]
	Spotting area Sealed	[X]	[]
	·		
	•		
2	Disposed of Water from Water Compatent and	[7]	гì
2.	Disposal of Water from Water Separator using approved evaporator or contracted Wastewater service		L J K∠l
	Of Contracted nastewater service	, ,	ĺΧΊ
	(A) SARTY KLEN Picks up the waste sludge. (B) ARRA behind machine in secondary containment is nearly diety.		
	(a) ARRA behind machine in secondary containment		
	is very diety.		

. Does t	ction?				
. Does t				XY.	ПN
	e facility maintained a leak	log?		Y Y	ПИ
t	the responsible official check	the following areas for le	eaks?		
1	Hose connections, fittings, couplings, and valves	7ДҮ □И □И/А	Muck cookers	OY O	A/N X
Ι	Door gaskets and seating	A/A UN UN/A	Stills	ØY. □N	N/A
F	Filter gaskets and seating	MY ON ON/A	Exhaust dampers		A/M P
P	oumps	AND NO YK	Diverter valves	OXY ON	□N/A
S	solvent tanks and containers	AND NO YK	Cartridge filter housings	X ZY ON	□N/A
ν	Vater separators	MY ON ON/A			
Which	method of detection is used	by the responsible officia	?		
v	isual examination (condense	ed solvent on exterior surf	aces) -	×	
P	hysical detection (airflow fe	lt through gaskets)		×	
. 0	dor (noticeable perc odor)			138	
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)			XX VA		
H	alogen leak detector			女とう	
	If using direct-reading in	strumentation, is the eq	uipment:	X N/A	
	a. Capable of detecti	ng perc vapor concentrati	ons in a range of 0-500 ppm?	OY ON	
•	b. Calibrated against (PID/FID only)?	a standard gas prior to an	d after each use	מט עם	
	c. Inspected for leaks	s and obvious signs of we	ar on a weekly basis?	DY DN	
	d. Kept in a clean and	d secure area when not in	use?	OY ON	
	e. Verified for accura	acy by use of duplicate sai	mples (calorimetric only)?	DY DN	

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7000 0600 0021 6527 0239	3. Service TyBureau of Air Monitoring ☐ Certified Ma& MalthreeSouribes ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
221066Z 998	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label)	
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	e over top of envelope t of the return-address			
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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.		C. Signature XOLOUS Addres Addres	ssee	
Article Addressed to:		D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No		
ONE PRICE DRY CLEA LUCILLE M MATTHEW 9841 GLADES ROAD	VS			
BOCA RATON FL 3342	8	3. Service Type Certified Mail	ıdise	
		4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number (Copy from 233 667	service label)			
PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789				
	US Postal Service Receipt for Cel No Insurance Coverage Do not use for Internatio Sent to ONE PRICE DRY CLE LUCILLE M MATTHE 9841 GLADES ROAD BOCA RATON FL 334 Special Delivery Fee Restricted Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom & Date, & Addressee's Address TOTAL Postage & Fees Postmark or Date	AIRS ID # 0990362 ANERS WS		

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ADDRESS completed	3. Article Addressed to: AIRS ID # 0250974 NEW GRANELLO DRY CLEANERS SERGIO RODRIGUEZ 379 GRANELLOW AVENUE CORAL GABLES FL 33146	4a. Article No. 174b. Service The Registere Express Return Record To Date of Decord Technology (Control of the No. 175).	H 052 / 76 Type ed Certified Mail □ Insured ceipt for Merchandise □ COD	you for using Return Rec
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s your	6. Signature: (Addressee or Agent)	}		
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