

## Department of Environmental Protection

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

Virginia B. Wetherell Secretary

September 4, 1996

Mr. Aristidis Legakis Oceanside Cleaners 1006 East Atlantic Avenue Delray Beach, Florida 33483

Dear Mr. Legakis:

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 Diltz, 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"

#### Perchloroethylene Dry Cleaning Facility Notification

#### **Facility Name and Location**

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	OCEANSIDE CLEINEY INC
2.	Site Name (For example, plant name or number):
	OCEANSIDE CLEANERY
3.	Hazardous Waste Generator Identification Number:
	FOD 984258111
4.	Facility Location: 1006 EAST ATCINTIC AVE  Street Address:
	City: DELANY BENELL County: PALM BENCH Zip Code: 33483
5.	Facility Identification Number (DEP Use):
	0990363
	Responsible Official
6)	Name and (Title) of Responsible Official:
• ,	RISTIPIS LEGAKLS
7.	Responsible Official Mailing Address:
	Organization/Firm: Street Address: 1006 F ATLANTIC. AVE.
	Street Address: 1006 E ATLANTIC AND , City: DELRAY BEACH County: L. Zip Code: 33483
8.	
	Telephone: $(561) 243-609/$ Fax: ( ) -
	Facility Contact (If different from Day and the Official)
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
10	Facility Contact Address
10.	Facility Contact Address:
	Street Address:
	City: County: Zip Code:
11	
11.	Facility Contact Telephone Number:  Telephone: ( ) - Fax: ( ) -
	receptione. ( ) -
	-

RECEIVED

AUG 1 2 1996

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Bureau of Air Monitoring & Mobile Sources

## #0990363 Oceanside Cleaners

- spoke with Sopia (owner) - 8/27/96

p.13 6. need title - owner

p.14 1.(a) add ID#L
1.(c) mark out and initial
3. Should be new small area Source
p.15 4. Should be new small area Source
Wreting. con.

#### **Facility Information**

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		Duy 7-	Duy						* - * * * * * * * * * * * * * * * * * *
(1) w/ ref. condenser	_		02-02-73						
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit			Tax .	•		:			
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		Nagrador			Sie Sie Sie				to Newson Consu
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit	. * 3		2						
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls	_								
(b) Control devices are required, but not yet installed   No control devices are required to be installed   2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [									
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.)  Existing small area source New small area source  Existing large area source									

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(Indicate with an "X".)	ection (5) of Part II of this notification form?
Existing large area source Carbon adsorber	l condenser [
New small area source Refrigerated condenser []	
New large area source 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 generating units exist on-site:  All steam and hot water generating units on-site (1) have a total hoiler HP or less), and (2) are fired exclusively by natural gas exclusing which propane or fuel oil containing no more than one per All steam and hot water generating units exempt  No such units on-site	nerating units on-site meet the following  teat input of 10 million BTU/hr or less (298 teept for periods of natural gas curtailment
Equipment Monitoring and Records	eeping 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	LY
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

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#### Surrender of Existing Air Permit(s)

lease indicat	e with an "X" the appropriate selection:			
[] I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)				
	No air permits currently exist for the operation of the facility indicated in this notification form.			
	Responsible Official Certification			
this notifi statement maintain	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 pollution control equipment described above so as to ith all terms and conditions of this general permit as set forth in Part II of this notification form.			
I will pro	mptly notify the Department of any changes to the information contained in this notification.			
Signature An	alt Segats Date  Date			

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## TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL O	OMPLAINT/DI	SCOVERY _	RE-INSP	ECTION _
TIME IN: 11 35	TIME OUT: 12-0		AIRŞ ID#:	0990363	
TYPE OF FACILITY:	D-j Cleanurs	٠,	<u> </u>	_	
FACILITY NAME:	Ocean side cle	e any		DATE:37	4187.
FACILITY LOCATION:	100% e atlata	: Au	Delven	Bearl	33483
RESPONSIBLE OFFICIAL:	Legakis		_РНОМЕ МИМВЕ	:R: 56 ( 243 )	ie04(
	e compliance requirements eva e 62-213.300, Florida Admini		•	acility is found to	be in
Based on the results of the discrepancies were noted:	compliance requirements eva	luated during th	nis inspection, the f	ollowing complian	nce
COMPLIANCE REQUI	REMENT/PROBLEM	FOI	LLOW-UP AC	TION REQUI	RED
·					
		-			
	ੁਸ਼ੀ				
			:		
and the second of the second o					
					:
COMMENTS:					
# ***					
•					
The Annual Compliance Certificati	5/6/98		itted to the inspecto	or. YES	NO
INSPECTION CONDUCTED BY	: h Lieble	Approximate)  Please Print)		7122	<b></b> -
INSPECTOR'S SIGNATURE:	Lebel	<u>~</u> I	PHONE NUMBER	. 56/ 355	50 50



## Department of Environmental Protection

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

e, Florida 32399-2400 Secretary

June 29, 2001

David B. Struhs

Mr. Aristiais Legakis Oceanside Cleaners 1006 East Atlantic Avenue Delray Beach, Florida 33483

Dear Mr. Legakis:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on June 27.

In reviewing your submittal, it was noted that Oceanside Cleaners elected to surrender its existing Title V air general permit (AIRS ID 0990363). 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: Mr. Al Grasso, Palm Beach County

"More Protection, Less Process"

Printed on recycled paper.

ARMS

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## PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	ON D	
AIRS ID#: 0990363	DATE: 5/6/4	7 TIME IN: 1135 TIME OUT: 1220	
FACILITY NAME:		2 Cleamors	
FACILITY LOCATION:	1006	E. Atlantic AU Delnay	_
		Beach 33483	_
	<del></del>	<u></u>	
PART I: NOTIFICATION			
(check appropriate box)			
1. Existing facility notified DA	RM by 9/1/96	ď	
2. New facility notified DARM	30 days prior to sta	artup	
3. Facility failed to notify DAR	M to use general pe	ermit . $\Box$	
	· · · · · · · · · · · · · · · · · · ·		
PART II: CLASSIFICATION			
Facility indicated on notificati (check appropriate box)	on form that it is:		
			- 1
A.  1. Existing small area sour 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)		7. 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)	
dry-to-dry only, x<140 gal/y transfer only, x<200 gal/yr both types, x<140 gal/yr	ce	dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr	
dry-to-dry only, x<140 gal/y transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/9!)  3. Existing large area sour dry-to-dry only, 140 <x<2, 10="" 140<x<1,800="" 200<x<1,800="" both="" gal="" gal<="" only,="" td="" transfer="" types,=""><td>ce 🔲 00 gal/yr gal/yr /yr</td><td>dry-to-dry only, x&lt;140 gal/yr transfer only, x&lt;200 gal/yr both types, x&lt;140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only, 140<x<2, 100="" 140<x<1,800="" 200<x<1,800="" both="" gal="" only,="" td="" transfer="" types,="" yr="" yr<=""><td></td></x<2,></td></x<2,>	ce 🔲 00 gal/yr gal/yr /yr	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="" 140<x<1,800="" 200<x<1,800="" both="" gal="" only,="" td="" transfer="" types,="" yr="" yr<=""><td></td></x<2,>	
dry-to-dry only, x<140 gal/y transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/9!)  3. Existing large area sour dry-to-dry only, 140 <x<2, (constructed="" 10="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 9!)<="" before="" both="" gal="" only,="" td="" transfer="" types,=""><td>ce   00 gal/yr gal/yr /yr cation</td><td>dry-to-dry only, x&lt;140 gal/yr transfer only, x&lt;200 gal/yr both types, x&lt;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)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,></td></x<2,>	ce   00 gal/yr gal/yr /yr cation	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)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,>	
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 sour dry-to-dry only, 140 <x<2, (constructed="" 10="" 12="" 200<x<1,800="" 9="" 91)="" a="" appropriation="" before="" check="" classification,="" correct="" facility="" gal="" is="" of="" only,="" please="" qualifications.<="" td="" the="" this="" transfer=""><td>ce   O gal/yr gal/yr /yr  cation  ate classification: ed for a general per</td><td>dry-to-dry only, x&lt;140 gal/yr transfer only, x&lt;200 gal/yr both types, x&lt;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)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,></td></x<2,>	ce   O gal/yr gal/yr /yr  cation  ate classification: ed for a general per	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)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,>	

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) BY DN 1. Storing perchloroethylene in tightly sealed and impervious containers? ZY ON 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 DY ON ON/A beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) MY ON 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? AMD ND. YO 3. Equipped the condenser with a diverter valve so airflow will be directed away from the ØY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated MY ON condenser on a 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 DY ON verifying that the coolant had been completely charged?

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 condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	dy du
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?	DY DN
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_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?	OY ON_N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	AWD ND YD
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
	קא טא
(check appropriate boxes)	ay on
(check appropriate boxes)  1. Maintained receipts for perc purchased?	dy on
(check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?	
(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:	dy on
(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	OY ON ON/A
(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?	OY OX
<ol> <li>(check appropriate boxes)</li> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instruments only)</li> </ol>	MO YOU MO
<ol> <li>(check appropriate boxes)</li> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instruments only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> </ol>	OY ON
<ol> <li>(check appropriate boxes)</li> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instruments only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> <li>Maintained startup/shutdown/malfunction plan?</li> </ol>	A ON ON ON A ON
<ol> <li>(check appropriate boxes)</li> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instruments only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> <li>Maintained startup/shutdown/malfunction plan?</li> <li>Maintained deviation reports?</li> </ol>	OY ON
<ol> <li>(check appropriate boxes)</li> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instruments only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> <li>Maintained startup/shutdown/malfunction plan?</li> <li>Maintained deviation reports?         <ul> <li>Problem corrected?</li> </ul> </li> <li>Maintained compliance plan, if applicable?</li> </ol>	A ON ON ON A ON
<ol> <li>(check appropriate boxes)</li> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instruments only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> <li>Maintained startup/shutdown/malfunction plan?</li> <li>Maintained deviation reports?         <ul> <li>Problem corrected?</li> </ul> </li> </ol>	A ON ON ON A ON

2. Which method of detection is used by	by the respon	sible offi	cial?			
Visual examination (condense			•	<u>a</u>		
Physical detection (airflow fel-			·,			
Odor (noticeable perc odor)		ŕ	<b>&gt;</b>	<u>d</u>		
Use of direct-reading instrume	entation (FII	)/PID/cal	orimetric tubes)			
If using direct-reading instri	umentation,	is the eq	uipment:			
a. Capable of detecti	ng perc vapo	r concen	trations in a range of 0-500 ppm?	OY ON W/		
b. Calibrated against (PID/FID only)?	t a standard s	gas prior	to and after each use	OY ON W/		
c. Inspected for leaks and obvious signs of wear on a weekly basis?						
d. Kept in a clean ar	id secure are	a when n	ot in use?	OY ON N/		
e. Verified for accur	acy by use of	duplicat	e samples (calorimetric only)?	OY ON W/		
3. Has the facility maintained a leak to	og?			QÝ ON		
4. Does the responsible official check	the following	g areas fo	r leaks?			
Hose connections, fittings, couplings, and valves	ØΥ	Ωи	Muck cookers	_ND YD		
Door gaskets and seating	<b>A</b> Y	ΝD	Stills	OY ON I		
Filter gaskets and seating	ØΥ	ПD	Exhaust dampers	OY ON 1		
Pumps -	QY	ИD	Diverter valves	MY ON I		
Solvent tanks and containers	ΦY	ПN	Cartridge filter housings	DY DN_I		
Water separators	ÞΥ	ПD				
Name of Responsible Of  Michael Manne (Please  Mispector's Name (Please		ature)	Name of Responsible Official  51617  Date of Inspe	ction		
Inspector's Signature	. 01 ! -		••	Yes No		
condary Containment for: Dry	Cleaning	g Mach		[ <b>½</b> ] [ ]		
			Waste area	[][4		
			Spotting area Sealed	1 [][4		
sposal of Water from Water S	eparator	using	approved evaporator	[][]		
. •	r Waste H	andl <b>e</b>	Pick <b>s</b> up Water	[M] []		

300744

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0990363
OCEANSIDE CLEANERS INC
ARISTIAIS LEGAKIS
1006 E ATLANTIC AVE
DELRAY BEACH FL 33483

JAN 2 7 1998

Bureau of Air Monitoring

& Mobile Sources

RECEIVED

					rig	
7		Do <u>NOT</u> R	emove Label		04	
Annual Reporting Period:	TANUARY (	1	97 TO	DECEMBER	3/	19 <b>97</b>
Based on each term or condition of 62-213.300, Florida Administrativ	•		•	, <u>-</u> /	rith DEP Rule	
If NO, complete the following:						
#1. Term or condition of the gene	ral permit that has	not been in conti	nuous complian	nce during the reporting	g period stated	l above:
Exact period of non-compliance:	from			to		
Action(s) taken to achieve complia	ince:			·		
Method used to demonstrate comp	liance:				-	
#2. Term or condition of the gene	ral permit that has 1	not been in conti	nuous complian	ace during the reporting	g period stated	l above:
Exact period of non-compliance: 1	· rom		t	0	*s	
Action(s) taken to achieve complia	nce·	· `	·			
Method used to demonstrate comp	liance:				_	•
As the responsible official, I hereby of notification are true, accurate and codoes not exceed 2,100 gallons per year	mplete. Further, my	annual consump	tion of perchloro	pethylene solvent, based transfer or combination	upon purchase facilities.	receipts,
RESPONSIBLE OFFICIAL:	ANISTIAS  Name (Please	LEGAKIS e Print)	@B	Signature Signature	<u> </u>	1/9 <b>/</b> ate
						74.

<sup>\*</sup>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 CON	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 11:30 TIME OUT: 12:1	0AIRS ID#: 0990363
TYPE OF FACILITY: D8Y Cleaning	
FACILITY NAME: OCEANSICE C	leaners DATE: 4-14-98
FACILITY LOCATION: 1006 E. Atla	ntic the
Del Day Beach,	FL 33483
RESPONSIBLE OFFICIAL: A. Legaki	PHONE NUMBER: 243-6091
Based on the results of the compliance requirements evalu compliance with DEP Rule 62-213.300, Florida Administr	
Based on the results of the compliance requirements evalu discrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
•	
·	_
·	
	P M
	P P P P
	Mos -
· .	8 3 9
	Sources Sources
-	and the second s
COMMENTS:	
	•
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	1999
INSPECTION CONDUCTED BY:	proximate)
INSPECTOR'S SIGNATURE OV- Clock	ease Print) PHONE NUMBER: 355-3070

Revised 10/96

## PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ARMS

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION (

AIRS 10#: 0990363 DATE: 4-14-98 TIME IN: 11:30 TIME OUT: 12:10
FACILITY NAME: Ocean Si de Cleanens
FACILITY LOCATION: 1006 E-Atlantic Ave Delsay Beach, FL 33483
RESPONSIBLE OFFICIAL: PHONE:PHONE:
CONTACT NAME: A Legatis PHONE: 243-609)

	,
PART I: NOTIFICATION	×
(check appropriate box)	<u> </u>
1. New facility notified DARM 30 days prior to startup	۵
2. Facility failed to notify DARM to use general permit	<u> </u>

	·
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, $140 \le x \le 2,100$ 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	MY DN DCan not determine
If no, please check the appropriate classific	
B. The total quantity of perchloroethylene (perc) pure facility was gallons.	urchased within the preceding 12 months by this dry cleaning

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? AYAO NO YO AYO OO YE 2. Examining the containers for leakage? Closing and securing machine doors except during loading/unloading? NO YES 4. Draining cartridge filters in their housing or in sealed containers for at DY ON ONA 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 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) אם צם 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? ON ON/A 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? ON ON/A

6. Conducted all temperature monitoring after an appropriate cooldown period and after

verifying that the coolant had been completely charged?

IY. DN

B.	Has the responsible official of an existing large or new large area source also:		
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	OY ON	
2.	Measured and recorded the washer exhaust temperature at the condenser	_	
	inlet and outlet weekly?	$\Box Y \Box N$	□N/A
	Is the temperature differential equal to or greater than 20° F?	DY DN	□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?	DY DN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	OY ON	□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?	OY ON	□N/A
_	Equipped transfer machines (dryers, reclaimers, and washers) with individual	`	
٦.	condenser coils?	ПА ПИ	∏N/A
		· ·	-IVA
6.	Routed airflow to the carbon adsorber (if used) at all times?	$\square Y \ \square N$	□N/A
-			

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	/ <b>p</b> YY □N
2. Maintained rolling monthly averages of perc consumption?	DY DH
3. Maintained leak detection inspection and repair reports for the following:	\.
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם צק
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אואם אם אוא
4. Maintained calibration data? (for applicable direct reading instruments)	AND NO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	AND NO YO
6. Maintained startup/shutdown/malfunction plan?	AY DH
7. Maintained deviation reports?	AINO NO YE
Problem corrected?	AINO NO YE
8. Maintained compliance plan, if applicable?	אומוסל מם צם

#### PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair $\square N$ inspection? $\square N$ 2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, אואם אם צם Muck cookers DY DN DN/A couplings, and valves DY ON ON/A Stills DY DN DN/A Door gaskets and seating DY ON ON/A Exhaust dampers AYND NO YO Filter gaskets and seating DY DN DN/A Diverter valves ON ON/A Pumps DY ON ONA Solvent tanks and containers Cartridge filter housings DN DN/A DY DN DN/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: DN/A 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 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 (Please Print)

Approximate Date

Inspector's

Signature

of Next Inspection

ADD	DITIONAL SITE INFORMATION:	
1.	Secondary Containment for: Dry Cleaning Machine & Storage area  Waste area  [/]  Spotting area Sealed  [/]	
		٠
2.	Disposal of Water from Water Separator using approved evaporator [ ] or contracted Wastewater service	N []
	MCF picks up Weste	

Every 3 to 5 months.

## TITLE VAIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL X COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 11:20 TIME OUT: 12:0	00 AIRS ID#: 0990363
TYPE OF FACILITY: Doy · Cleaning	<u> </u>
FACILITY NAME: OCEAN SILE C	eaners DATE: 3-8-99
1	ntic Ave
Delvay Bear	ch, FL 33483
RESPONSIBLE OFFICIAL: A . Legatis	PHONE NUMBER: 243-609/
Based on the results of the compliance requirements evalua	ted during this inspection, the facility is found to be in
compliance with DEP Rule 62-213.300, Florida Administra	•
Based on the results of the compliance requirements evalua discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
•	
·	
·	A STATE OF THE STA
·	
<del>-</del>	
-	
COMMENTS:	·
	·
The Annual Compliance Certification form has been properly certi	fied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: March	2000
	pproximate)
INSPECTION CONDUCTED BY:	rleshi
	Please Print)
INSPECTOR'S SIGNATURE O'V. Chom	PHONE NUMBER: 355-3.70

PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL

X

COMPLAINT/DISCOVERY

ARMS

**RE-INSPECTION** 

	99 TIME IN: 11;20 TIME OUT: 12:00			
FACILITY NAME: Ocean side cleaners				
FACILITY LOCATION: 1006 E.	Atlantic Ave			
	Jeach, FL 33483			
RESPONSIBLE OFFICIAL: A. Leg	9 kis PHONE: 243-6091			
CONTACT NAME:	PHONE:			
	:			
PART I: NOTIFICATION				
(check appropriate box)				
1. New facility notified DARM 30 days prior to star	tup 🚨			
2. Facility failed to notify DARM to use general per	mit 🗅			
PART II: CLASSIFICATION				
Facility indicated on notification form that it is:	☐ No notification form			
(check appropriate box)	☐ Drop store/out of business/petroleum			
A				
1. Existing small area source dry-to-dry only, x < 140 gal/yr	2. New small area source ☐  dry-to-dry only, x < 140 gal/yr			
transfer only, x < 200 gal/yr	transfer only, x < 200 gal/yr			
both types, x < 140 gal/yr	both types, x < 140 gal/yr			
(constructed before 12/9/91)	(constructed on or after 12/9/91)			
3. Existing large area source	4. New large area source			
dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$	dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$			
transfer only, $200 \le x \le 1,800 \text{ gal/yr}$	transfer only, $200 \le x \le 1,800 \text{ gal/yr}$			
both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$ )	both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$ )			
5. This is a correct facility classification	□N □Can not determine			
If no, please check the appropriate classific	ation:			
	neral permit as number above			
☐ facility exceeds above lir	nits 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 60 gallons. For 19	38			
	1			

### 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? ZY 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 sealed containers for at DY DN DN/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN MN/A beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? 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? 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 DY 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?

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?	ΟV	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	□и	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΩY	ПN	□N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	ΠY	□и	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΩY	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?	ΩY	ПN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			EDN/A
	condenser coils?	ШŸ	UN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ПИ	□N/A

DIDEN PROOPERTING PROVIDER CONTROL	· · · · · · · · · · · · · · · · · · ·
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם עש
2. Maintained rolling monthly total of perc consumption?	אם צובע
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	AINO NO YE
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אוחם אם צוב
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN PNIA
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DN/A
6. Maintained startup/shutdown/malfunction plan?	SQA ON
7. Maintained deviation reports?	AND NO YA
Problem corrected?	AA ON ON'Y
8. Maintained compliance plan, if applicable?	DY DN DN/A

#### PART VI: LEAK DETECTION AND REPAIRS

1. Does	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
inspe	ection?			DY ON			
2. Has t	he facility maintained a leak log?	,		AY ON			
3. Does	the responsible official check th	e following areas for leaks	s?				
	Hose connections, fittings, couplings, and valves	AND NO YOU	Muck cookers	OY ON DANIA			
	Door gaskets and seating	ON ON/A	Stills	DY ON ON/A			
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	OY ON PANIA			
	Pumps	DY ON ON/A	Diverter valves	A/NO NO YE.			
	Solvent tanks and containers	DÝ ON ON/A	Cartridge filter housings	DY ON ON/A			
	Water separators	DY ON ON/A					
4. Whic	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			O MIT			
	If using direct-reading ins	trumentation, is the equi	pment:	ØN/A			
	a. Capable of detecting	g perc vapor concentration	ns in a range of 0-500 ppm?	OY ON			
	<ul><li>b. Calibrated against (PID/FID only)?</li></ul>	a standard gas prior to and	after each use	OY ON			
:	c. Inspected for leaks	and obvious signs of wear	on a weekly basis?	OY ON			
	d. Kept in a clean and	l secure area when not in t	ise?	□Y □N			
	e. Verified for accura	cy by use of duplicate sam	nples (calorimetric only)?	אם צם			

Responsible Official's Name
(Please Print)

Inspector's Name (Please Print)

Inspector's Signapure

Responsible Official's Signature

Date of Inspection

March 2000

Approximate Date of Next Inspection

# ADDITIONAL SITE INFORMATION: Yes NO 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 MCE PICK The Weste When Called

\*Asked Sophia to Keep Perc Purchase receips on site also keep log of Perc Usage on FDEP Calender \*Also explained leak check and keep log on Calendal. FROM : GDW REALTOPS

83/18/1999 14:36

8136233558

MAR. 11. 1999 9:17AM P 1 PHONE NO. : 5612799688

PHENIX TAMPA

PAGE 01

#### PHENIX SUPPLY COMPANY 1920 TAMPA EAST BLVD. TAMPA, FL. 33619

PHONE: (813) 623-3553 FAX: (813) 623-3558 DATE: 3-10-99 PAGES (INCLUDING THIS COVER PAGE) COMMENTS:

MAR.11.1999 9:18AM P 2 FROM : GDW REALTORS PHONE NO. : 5612788688 03/10/1999 14:26 8136233558 PHENIX TAMPA PAGE 82 03/10/99 (INVOO6) PHENIX SUPPLY CO. - TAMPA PAGE. 1 CUSTOMER PERC SALES REPORT INVOICES DATE TIENS DESCRIPTION RTY UN CUSTA SHIPPING ADDRESS 0402936 OCEANSIDE CLEANERS F028624 07/10/98 1300011 PERC \*DONPER\* 20.0 GL TOTAL CALLONS: 1006 E. ATLANTIC AVE 20.0 2.0 PL F011671 01/30/98 1300013 PERC TODAPERS - 5-GAL DELRAY BEACH FL 33483 F021499 05/01/98 2.0 PL F028813 07/17/98 2.0 PL F040507 11/13/98 2.0 PL F045643 01/08/99 4.0 PL

TOTAL GALLONS:

60.0

ATTN RASIK CHOKSHI

FROM OCCANSIDE CLEANERS

THANK you Sophion

THE 561 243. 6091

## TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL 🔀	COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: /0: 30 TIME OUT: //:	AIRS ID#: 0990363
TYPE OF FACILITY: Dey CRANING	
FACILITY NAME: OCEANSIDE CLEANERS T	$\frac{1}{2} \int \frac{1}{2} \int \frac{1}$
FACILITY LOCATION: 1006 E. Atlantic	
Deleny Beach, Fl	
RESPONSIBLE OFFICIAL: A. Loga Kis	PHONE NUMBER: 243 - 6091
Based on the results of the compliance requirements e compliance with DEP Rule 62-213.300, Florida Admi	valuated during this inspection, the facility is found to be in nistrative Code (F.A.C.).
Based on the results of the compliance requirements e discrepancies were noted:	valuated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	, <u></u>
	_
	Bureau &
	R 1 2 2000 of Air Mon Mobile Sour
	2909 Monitoring Sources
COMMENTS:	
The Annual Compliance Certification form has been properly cer	tified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	nnech 2001 Approximate)
NSPECTION CONDUCTED BY:	Please Print)
NSPECTOR'S SIGNATURE: Juney Diegek	PHONE NUMBER: 355 - 3070 VT 1139

#### PERCHLOROETHYLENE DRY CLEANERS

	NUAL INSPECTION	COMPL	AINT/DISCOVERY	
AIRS ID#: <u>0990363</u> DATE: FACILITY NAME: <u>O@AJS</u> iJ	3/3/00	TIME IN: <u>10: 3</u> 0	TIME OUT:	11: 10
l .				
FACILITY LOCATION: /006				
Dele	ay Beach, F	/ 33483		
RESPONSIBLE OFFICIAL:A,	Lesakis	PHONE:	243 - 6091	
CONTACT NAME:		PHONE:		
PART I: NOTIFICATION				
(check appropriate box)				
New facility notified DARM 30 days				
2. Facility failed to notify DARM to use	general permit			
N. D. C.			<u> </u>	231
PART II: CLASSIFICATION				
Facility indicated on notification form t (check appropriate box)	hat it is:		fication form ore/out of business/petr	oleum
A.		<b>—</b> Drop 30	ore out of business pen	oream
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)	dry-to-dry transfer of both type	mall area source of yonly, $x < 140$ galonly, $x < 200$ gal/yrs, $x < 140$ gal/yrted on or after 12/9	/yr	
			_	
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 $12/9/91$ )	dry-to-dr transfer o both type	arge area source y only, $140 \le x \le 2$ , nly, $200 \le x \le 1,80$ s, $140 \le x \le 1,800$ g led on or after $12/9$	0 gal/yr gal/yr	
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	dry-to-dr transfer o both type (construct	y only, $140 \le x \le 2$ , $140 \le x \le 1$	100 gal/yr 0 gal/yr gal/yr 91)	
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 of the property of the second property o	dry-to-dr transfer o both type (construct	y only, $140 \le x \le 2$ , $140 \le x \le 1,800$ , $140 \le x$	aloo gal/yr o gal/yr gal/yr gal/yr determine	

#### 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? 2. Examining the containers for leakage? DY ON ON/A 3. Closing and securing machine doors except during loading/unloading? **М**П М 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? MY ON ON/A 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN XXIVA 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 alsorber (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? DY DN 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/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? DY DN DN/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? DY DN

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?	ΩY	. DN	1
2	. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	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 equipped with a carbon adsorber?	ΠY	ΠИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПN	□N/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	QY	□N	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	N	□N/A

PART V: RECORDKEEPING REQUIREMENTS		
Has the responsible official: (check appropriate boxes)		
1. Maintained receipts for perc purchased? Net at Facility	MO AM	
2. Maintained rolling monthly total of perc consumption?	XY DN	
3. Maintained leak detection inspection and repair reports for the following:		
a. documentation of leaks repaired w/in 24 hrs? or;	AINO NO Y	
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ANO NO Y	
4. Maintained calibration data? (for applicable direct reading instruments)	A'N <b>X</b> NO YO	
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN <b>Q</b> N/A	
6. Maintained startup/shutdown/malfunction plan?		
7. Maintained deviation reports?	ANAD NO YK	
Problem corrected?	אואם אם צוב אַ	
8. Maintained compliance plan, if applicable?	OY ON XIN/A	

# ADDITIONAL SITE INFORMATION: Yes NO 1. Secondary Containment for: Dry Cleaning Machine & Storage area [X] [] Waste area [X] [] Spotting area Sealed [X] []

POOR.

- 2. Disposal of Water from Water Separator using approved evaporator [ ] [X] or contracted Wastewater service [ ] [X]
  - (A) Wask water being stored in back of store in boiler econ without covers. Advised mr. Legakis: to Piace covers on these containers ASAP.
  - (6) 5 gallow Pail of Peer stored without secondary containment. Advised me. Cosakis to store containments of Hazardous makerials within secondary containment. Me. Usakis within secondary containment. The Usakis stated that he will empty this container into his machine today.
  - (c) Facility is considering buying an evaporator for wastedatel.

Does the responsible official conduct	• . •	,	
inspection?			<b>)</b> \$0, ∨ □ N
2. Has the facility maintained a leak log		· · · ·	MD AM
<ol> <li>Does the responsible official check the Hose connections, fittings,</li> </ol>	ie following areas for lear	(2):	
couplings, and valves	אואם אם צי <b>א</b>	Muck cookers	ANA K NO YO
Door gaskets and seating	XY ON ON/A	Stills	A'NO NO Y
Filter gaskets and seating	A/NO NO YIK	Exhaust dampers	□У □И <b>Ж</b> И\А
Pumps	AND NO YK	Diverter valves	XY ON ON/A
Solvent tanks and containers	אומם מם צ <b>יקל</b>	Cartridge filter housings	A'N DN DN/A
Water separators	ANO NO YA		
. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surfac	es) -	×
Physical detection (airflow felt to	hrough gaskets)		Ø
Odor (noticeable perc odor)			<b>Ż</b> .
Use of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)	M ∨a
Halogen leak detector			X NA
If using direct-reading instr	rumentation, is the equip	oment:	<b>M</b> N/A
a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?	DY DN
b. Calibrated against a (PID/FID only)?	standard gas prior to and a	after each use	אם אם
c. Inspected for leaks an	nd obvious signs of wear	on a weekly basis?	DY DN.
d. Kept in a clean and s	ecure area when not in us	e?	חם אם אם
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	מם עם
			,
Onsible Official's Nam		Responsible Office	ojoste
(Please Print)	<b>e</b>		ciar a Signa
Inspector's Name (Please Pri	·	3/3/oc Date of Inspection	
Inspector's Name (Please Pri	nt)	Date of Inspection	
Quin. Dunek		March 2001	,
Otheneotor's Signature		Approximate Date of N	

INSPECTION SUI	MMARY REPURI
OTTINGDE CTION	MPLAINT/DISCOVERY TO RE-INSPECTION
TIME IN:TIME OUT:	AIRS ID#: 0990363
TYPE OF FACILITY: Die Cleamer	
FACILITY NAME: O Leun 5: le Gennes	MC DATE: 1/3/0/
FACILITY LOCATION: 1006 & At land;	Ave Delra
RESPONSIBLE OFFICIAL: A Le & Ki).	PHONE NUMBER: 343 _ 694/
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administrate	ed during this inspection, the facility is found to be in ive Code (F.A.C.).
Based on the results of the compliance requirements evaluate discrepancies were noted:	ed during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	•
	•
COMMENTS:	
The Annual Compliance Certification form has been properly certified and	i submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	A Submitted to the inspector.
(Approxim	nate)
INSPECTION CONDUCTED BY: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•
INSPECTOR'S SIGNATURE: (Please Pr	PHONE NUMBER: 375 3000
oft (1/13) Page of	Revised 10/5

## PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TALE OF INSTRECTION:	RE-INSPECTION			12COAEKA	
AIRS ID#: 6 9 903C3				TIME OUT:	
FACILITY LOCATION:			<del></del>		
RESPONSIBLE OFFICIAL		<i>C</i> ; <i>y</i>	PHONE:	3 6091	
PART I: NOTIFICATION		,			
(check appropriate box)  1. New facility notified DAR  2. Facility failed to notify DA	_	_	·		<u> </u>
	<u> </u>	· · ·	2- 1-	eres se este este (in e	•••
PART II: CLASSIFICATI	ОИ				
Facility indicated on notific (check appropriate box)  A.  1. Existing small area so dry-to-dry only, x < 140 gallyr (constructed before 12/9/9)  3. Existing large area so dry-to-dry only, 140 ≤ x = transfer only, 200 ≤ x ≤ 1 both types, 140 ≤ x ≤ 1,8	ation form that it is:  ource gal/yr /yr  91)  ource  ≤2,100 gal/yr 1,800 gal/yr 00 gal/yr	transfer only, both types, x (constructed of the large dry-to-dry on transfer only, both types, 14	area source y, x < 140 gal/yr x < 200 gal/yr < 140 gal/yr n or after 12/9/91) area source y, 140 ≤ x ≤ 2,100 gal/yr 200 ≤ x ≤ 1,800 gal/yr 0 ≤ x ≤ 1,800 gal/yr	t of business/pet	
Facility indicated on notific (check appropriate box)  A.  1. Existing small area so dry-to-dry only, x < 140 gal/yr (constructed before 12/9/9/9/9/9/10-dry-to-dry only, 140 < x : transfer only, 200 < x < 1	ation form that it is:  ource gal/yr /yr  91)  ource \( \sigma_1 \) \( \sigma_2 \) \( \sigma_3 \	dry-to-dry onl transfer only, both types, x (constructed of the large dry-to-dry on transfer only, both types, 14	Drop store/out area source y, x < 140 gal/yr x < 200 gal/yr < 140 gal/yr n or after 12/9/91) area source y, 140 $\leq$ x $\leq$ 2,100 gal/yr 200 $\leq$ x $\leq$ 1,800 gal/yr on or after 12/9/91)	t of business/pet	
Facility indicated on notific (check appropriate box)  A.  1. Existing small area so dry-to-dry only, x < 140 g transfer only, x < 200 galve both types, x < 140 gal/yr (constructed before 12/9/s.  3. Existing large area so dry-to-dry only, 140 \le x \le transfer only, 200 \le x \le 1 both types, 140 \le x \le 1,8 (constructed before 12/9/s.  5. This is a correct facility of the please check.	ation form that it is:  ource gal/yr /yr  91)  ource \( \sigma_1 \) \( \sigma_2 \) \( \sigma_3 \	dry-to-dry only transfer only, both types, x (constructed of the large dry-to-dry on transfer only, both types, 14 (constructed of the large dry-to-dry on transfer only, both types, 14 (constructed of the large dry transfer only, both types, 14 (constructed of the large dry transfer only, both types, 14 (constructed of the large dry transfer only, both types, 14 (constructed of the large dry types)	Drop store/out area source y, x < 140 gal/yr x < 200 gal/yr < 140 gal/yr n or after 12/9/91)  area source y, 140 ≤ x ≤ 2,100 gal/yr 200 ≤ x ≤ 1,800 gal/yr on or after 12/9/91)  □Can not deter	t of business/pet	

#### Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON ON/A I. 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 DY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DXIA 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 Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? DY DN 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? DY DN DN/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? DY DN

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?	□?		,
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	DИ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΟY	ПN	□N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	ΟY	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppin?			□N/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction,			
	or expansion; and downstream from no other inlet?	ΠY	ПN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
	condenser coils?	ПĀ	ПN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	אם	□N/A

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

1. Does the responsible official conduct	a weekly (for small sour	ces, bi-weekly) leak detection	on and repair
inspection?	And among point		אם אם
2. Has the facility maintained a leak log	?		BY ON
3. Does the responsible official check th		cs?	
Hose connections, fittings, couplings, and valves	Ay on on/A	Muck cookers	DY ON YWA
Door gaskets and seating	אואם אם אש	Stills	אַרעם אם פֿען,
Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY DN RNA
Pumps .	אואם אם צ'ם	Diverter valves	אוחם אם צום,
Solvent tanks and containers	אוחם אם עם	Cartridge filter housing	gs DY ON ON/A
Water separators	מאם אם צמ		
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed s	solvent on exterior surfac	es)	۵
Physical detection (airflow felt the	rough gaskets)	•	6
Odor (noticeable perc odor)			· മ
Use of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)	The residence of
Halogen leak detector			<del>U</del> nia
If using direct-reading instr	umentation, is the equip	oment:	□N/A
a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?	מי מים אם
b. Calibrated against a s (PID/FID only)?	standard gas prior to and a	after each use	מם עם
c. Inspected for leaks ar	nd obvious signs of wear	on a weekly basis?	מם צם
d. Kept in a clean and so	ecure area when not in us	e?	אם צם
e. Verified for accuracy	by use of duplicate samp	oles (calorimetric only)?	OY ON
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Inspector's Name (Please Prin	מני	Date of Inspection	
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Inspector's Signature	· · · · · · · · · · · · · · · · · · ·	Approximate Date of	F Nevt Inspection

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VDF	)ITIUNAL 51	ITE INFORMATION:		· · · · · · · · · · · · · · · · · · ·	
1.	Secondary	Containment for	· Dry Cleaning	Machine & Storage area	Yes NO
		9-11	_	Waste area	[1]
				Spotting area Sealed	
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2.	Diemea] (	of Water from Wat	or Congrator Ho	sing approved evaporator	A 13
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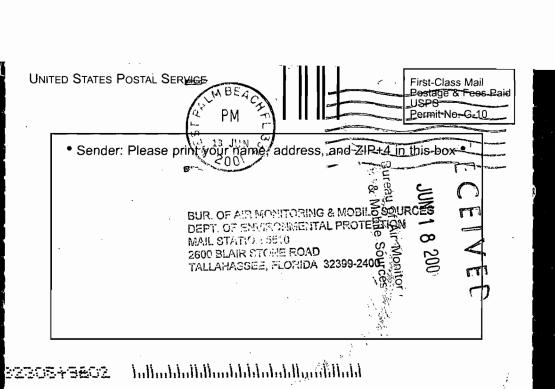
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	PS For		nstructions	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>AIRS ID # 0990363001AG</li> <li>ARISTIAIS LEGAKIS</li> <li>CEANSIDE CLEANERS</li> <li>E ATLANTIC AVE</li> </ul>	A. Beceived by (Please Print Clearly)  B. Date of Delivery  C. Signature  Agent  Addressee  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
AY BEACH FL 33483	3. Service Type  ☐ Certified Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label)  7000 / 670 0006	7361 5685
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9841 GLADES ROAD BOCA RATON FL 33428	3. Service Type Certified Mail
2. Article Number (Copy from service label) 7000 0600 0026 4121	7 3839
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789

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1 1	Street 9841 GLAD	ES ROAD	,
7000	BOCA RATO	ON FL 33428	
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OCEANSIDE CLEANERS
ARISTIAIS LEGAKIS
1006 E ATLANTIC AVE
DELRAY BEACH FL
33483

AIRS ID#0990363

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ONE PRICE DRY CLEANERS LUCILLE M MATTHEWS 9841 GLADES ROAD BOCA RATON FL 33428 RECEIVED MAIL ROOM

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001

Obj.: 002273

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