

## 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. Kim Jong-In Nu-Look 1 Hour Cleaners #2 1313 West Boynton Beach Boulevard Boynton Beach, Florida 33426

Dear Mr. Jong-In:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 16, 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

#### Perchloroethylene Dry Cleaning Facility Notification

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

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):  3K AND HK CORPORATION
2.	1 /1 "
	NU-LOOK IHR CLNRS #2.
3.	Hazardous Waste Generator Identification Number:
	FLD 982 122 871
4.	Facility Location: Street Address: 1313 W. BOYNTON BEACH BLVD
	City: BOXNIGN BEACH County: PALM BEACH Zip Code: 33426
5.	Facility Identification Number (DEP Use):
	0990379
	Responsible Official
6.	Name and Title of Responsible Official: 300G - IN, KIM
7.	Responsible Official Mailing Address:
	Organization/Firm: Street Address: 11211 S. WILITARY TRL #5022
	City: Bo YNTON BEACH County: PALM BEACH Zip Code: 33436
8.	Responsible Official Telephone Number:
	Telephone: (561) 734 - 3737 Fax: ( ) -
	(561) 737 - 7805
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
10.	Facility Contact Address:
	Street Address:
	City: County: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: ( ) - Fax: ( ) -

RECEIVED

AUG 1 6 1996

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Bureau of Air Monitoring & Mobile Sources

# 

	:
8/27	Spoke to Mr. Kim
	- ne is the owner
p. 13	
6.	add title-owner add org/firm name
7.	add org/firm name
·	
p. 15	
4.	should not be marked
-	
	<del>                                     </del>
-	· · · · · · · · · · · · · · · · · · ·

#### **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		Date Machine	Date Control		Date Machine	Date Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed		Purchased	Installed
Type of Wachine	וו	i di chased	mstaned	_ וטו	I di chased	mstaried	110	1 dichased	mstaned
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9.
Dry-to-Dry Unit	4	DAY T.	ony			· .			
(1) w/ ref. condenser	H/	1989						l:	
(2) w/ carbon adsorber	-							Ì	
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit	1.								
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit	t há i	i wa i	1.10						
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are  (c) No control devices  2.(a) What was the total of [2.1.00]  (b) If less than 12 mont Check why it is less	are re quant gallo	equired to be ity of perchlo ons ow many? [_	installed [oroethylene (	perc)	purchased in				
3. What is the facility's so (Indicate with an "X".	urce (	classification	based on the	e defi	nitions found	d in section (3	3) of	Dowt HO	

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4. What control technology is required on machines (Indicate with an "X".)	pursuant to section (5) of Part II of this notification form?
Existing large area source  Carbon adsorber  []	Refrigerated condenser []
New small area source Refrigerated condenser	
New large area source Refrigerated condenser  []	
	units shall not be eligible to use the general permit pursuant d hot water generating units on-site meet the following:
	have a total heat input of 10 million BTU/hr or less (298 atural gas except for periods of natural gas curtailment e than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
	. *
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 mor	nitoring []
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

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

Please 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)
ι <u>Χ</u>	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifi statement maintain comply w	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to ith all terms and conditions of this general permit as set forth in Part II of this notification form.
Signature	Aug 10, 96

Effective: 6-25-96



# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	annual 🔯	СОМ	PLAINT/DISC	COVERY	RE-INSPECTION [	
TIME IN: 1000	TIME OUT:	1100		_AIRS ID#:	0890379	
TYPE OF FACILITY:	27 @ 10 My	CR			•	
FACILITY NAME: NAME:	Look 1	HR E	Day Ok	Awans #	2 DATE: 3/11/97	<del>-</del>
FACILITY LOCATION: /	313 W.	Bogni	1'	i Blad		
3	ign for	33%	20			
RESPONSIBLE OFFICIAL:	Jung-IN	Kin	P	HONE NUMBER:	737 7805	-
Based on the results of the compliance with DEP Ru					ility is found to be in	
Based on the results of the discrepancies were noted		nents evaluat	ed during this	inspection, the foll	owing compliance	
COMPLIANCE REQU		BLEM	FOLL	OW-UP ACTI	ON REQUIRED	
duxussed a	pen 5 9	NS	icket			
used to Ca			- W.			
H20 + 1745	Jupa Sis,	nos g	1			
	and the second of the second o	2.7 0.2 7 7				
COMMENTS:			<u> </u>			
26	:					
The Annual Compliance Certificat	ion form has been proj	perly certified	d and submitted	d to the inspector.	YES NO	
DATE OF NEXT INSPECTION	:_3/98	,				_
INSPECTION CONDUCTED BY	Y: COJ	- G24 /1	roximate)  Se Print)			
INSPECTOR'S SIGNATURE:_	Wall	<i>(</i>	РН	ONE NUMBÉR:_	355-4595	

ARMS Y

#### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	v 🗆	COMPLAINT/DIS	COVERY	<u>.                                    </u>
AIRS ID#: 0990379 DA FACILITY NAME: NU FACILITY LOCATION: 13	Look 1 8	HR Cles Boznton	ances ≠2 Beae4 Blu	•	1100
PART I: NOTIFICATION					
(check appropriate box)			-		
Existing facility notified DAR	ví by 9/1/96				X
2. New facility notified DARM 3	days prior to start	ф	•		a
3. Facility failed to notify DARM	to use general pen	mit .			
The state of the s					
PART II: CLASSIFICATION					
Facility indicated on notification (check appropriate box)					
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)	existing in	2. New small dry-to-dry only transfer only, x both types, x<1 (constructed or	; x<140 gal/yr :<200 gal/yr	а	
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)<="" before="" gaboth="" gal="" only,="" td="" transfer="" types,="" y=""><td>gal/yr Ŀ/yr</td><td>transfer only, 2 both types, 140</td><td>area source ; 140<x<2, 100="" gal="" y:<br="">:00<x<1,800 gal="" yr<br="">:0<x<1,800 gal="" yr<br="">:1 or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td>τ</td><td></td></x<2,>	gal/yr Ŀ/yr	transfer only, 2 both types, 140	area source ; 140 <x<2, 100="" gal="" y:<br="">:00<x<1,800 gal="" yr<br="">:0<x<1,800 gal="" yr<br="">:1 or after 12/9/91)</x<1,800></x<1,800></x<2,>	τ	
This is a correct facility classific	ition	AT ON			
If no, please check the appropria	te classification:				
	d for a general perm above limits and is		a general permit	,	
B. The total quantity of perchlor facility was <u>20</u> gallons.	oethylene (perc) pu	irchased within	the preceding 12 mon	ths by this dr	y 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? MY UN **X**YY ON 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? $\mathbf{Q}Y$ $\square N$ 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 OY ON DNA 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 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) ND YD 1. Equipped all machines with the appropriate vent controls? Equipped dry-to-dry machines with a closed-loop vapor venting system? AND NO. YD 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? CY ON ON/A 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated DY DN condenser on a weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? ND YD 6. Conducted all temperature monitoring after an appropriate cooldown period and after OY ON verifying that the coolant had been completely charged?

B. Has the responsible official of an existing large or new large arga 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?	. ОҮ ОИ
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?	OY ON
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 ONN/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 ONN/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?	OY ON ON/A
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
Has the responsible official: (check appropriate boxes)	<b>14</b>
Has the responsible official: (check appropriate boxes)	<b>¼</b> Y □N <b>¼</b> Y □N
Has the responsible official: (check appropriate boxes)	· ·
Has the responsible official: (check appropriate boxes)	· ·
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenin  2. Maintained rolling monthly averages of perc consumption? You's yearly.  3. Maintained leak detection inspection and repair reports for the following:	X(Y □N
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenin  2. Maintained rolling monthly averages of perc consumption? You's yearly.  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	<b>Д</b> У □И <b>Д</b> У □И
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenin  2. Maintained rolling monthly averages of perc consumption? You yearly.  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?	<b>4</b> □ N □ N <b>4</b> Y □ N □ N
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenin  2. Maintained rolling monthly averages of perc consumption? You yearly.  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)	OY ON ANA  AY ON  AY ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenit  2. Maintained rolling monthly averages of perc consumption? You yearly.  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?	MY ON  MY  MY ON  MY ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenit  2. Maintained rolling monthly averages of perc consumption? You yearly.  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?	MY ON  MY  MY ON  MY ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenin  2. Maintained rolling monthly averages of perc consumption? You yearly.  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?	MY ON  MY  MY ON  MY ON
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenit  2. Maintained rolling monthly averages of perc consumption? Yearly.  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?  Problem corrected?  8. Maintained compliance plan, if applicable?	AY ON ANA ON ON ANA ON ON ANA ON O
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? Phoenin 2. Maintained rolling monthly averages of perc consumption? Yes but fille 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?  Problem corrected?	AY ON ANA ON ON ANA ON ON ANA ON O

Visual examination (condensed)	solvent on	evideine m	aces)	NT.	
Thereign dependent fainting fals of			aces)	文 D	
Physical detection (airflow felt the	mongn gas	skels)		A C	
Odor (noticeable perc odor)		vam, i i		4	Mar (a)
Use of direct-reading instrument				ч	_ <b>K</b> N/A
If using direct-reading instrum		, -			
-	-		ons in a range of 0-500 ppm?	ΠY	DN KN\A
b. Calibrated against a (PID/FID only)?	standard g	gas prior to a	nd after each use	QY	ON KN/A
c. Inspected for leaks a	uoivdo bnı	s signs of we	ar on a weekly basis?	$\Box \Upsilon$	$\square N X N \setminus A$
d. Kept in a clean and	secure are	a when not ir	ı use?	$\Box \Upsilon$	A/NX ND
e. Verified for accurac	y by use of	duplicate sa	mples (calorimetric only)?	QΥ	DN \N/A
3. Has the facility maintained a leak log	?			ПY	ON XN/A
4. Does the responsible official check the	e following	g areas for lea	aks?		
Hose connections, fittings, couplings, and valves	<b>Q</b> ₹	ПN	Muck cookers	ΩY	□n <b>X</b> n
Door gaskets and seating	<b>\$</b> X	ПИ	Stills	dy.	□ии
Filter gaskets and seating	<b>ф</b> 入	ПN	Exhaust dampers	ŪΥ	□n <b>_X</b> n
Pumps	4x	ND	Diverter valves	$\not\!$	□ии
Solvent tanks and containers	<b>□</b>	ΩN	Cartridge filter housings	₫,	□и_и
Water separators	\$	DM MD			
	7				
	A Cian	···	JONG - IN KIM		
\tag{F}	nai (sigra	ature)	Name of Responsible Official	. (Pri	int) & Phone
Name of Responsible Office					
WT GA/16		<del></del>	3/1/97		
	rint)	<del></del>	Date of Inspe		
Inspector's Name (Please P	rint)				
WI GAIL	rint)		Date of Insperators  Approximate Date of		
Inspector's Name (Please P.		g Machine	3/88- Approximate Date of		Inspection
Inspector's Name (Please P.		g Machine	3/88- Approximate Date of  & Storage area		Inspection Yes No [ ] [ ]
Inspector's Name (Please P.		g Machine	3/88- Approximate Date of  & Storage area Waste area	Next ]	Inspection  Yes No  [ ] [X]
Inspector's Name (Please Polycold).  Inspector's Signature  Containment for: Dry	Cleanin		Approximate Date of  Approximate Date of  Storage area  Waste area  Spotting area Seale	Next ]	Inspection Yes No [ ] [ ]
Inspector's Name (Please Polycol)  Inspector's Signature  Condary Containment for: Dry  Sposal of Water from Water Sep	Cleanin	using app	Approximate Date of  Approximate Date of  Storage area  Waste area  Spotting area Sealed  proved evaporator	Next ]	Inspection  Yes No  [ ] [X]
Inspector's Name (Please Poly Containment for: Dry Sposal of Water from Water Sep	Cleanin	using app	Approximate Date of  Approximate Date of  Storage area  Waste area  Spotting area Seale	Next ]	Inspection  Yes No  [ ] [X]  [ ] [X]
Inspector's Name (Please Policy of Manuer Seposal of Water from Water Seposal Containment for Seposal Of Water from Water Seposal Containment from Water Se	Cleanin parator Waste A	using app Handling 1	Approximate Date of  Approximate Date of  & Storage area  Waste area  Spotting area Sealed  proved evaporator  Pick ups Water	Next I	Inspection  Yes No  [ ] [X]  [ ] [X]  [ ] [X]  [ ] [X]

ace

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

JK AND HK CORPORATION

AIRS ID#0990379

	1121	G-IN KIM IS MILITARY T NTON BEACH F			 	& Mobile Sol	2 > 1999 Monit	, KD
	· · · · · · · · · · · · · · · · · · ·	Do <u>N</u> O	OT Remove	Label			Tres oring	ş
Annual Reporting Period:		/ I	_19 <u>G8</u>	TO _	-1			1998
Based on each term or condition of 62-213.300, Florida Administrative	=	=	-					ule NO
If NO, complete the following: #1. Term or condition of the gener	al permit that ha	s not been in c	continuous (	complian	ice during th	ne reporting p	eriod st	ated above:
Exact period of non-compliance: fi	om				to		ي	
Action(s) taken to achieve compliant	nce:					-	123	
Method used to demonstrate compl	iance:						SS	/ED 0014
#2. Term or condition of the gener	al permit that ha	s not been in c	ontinuous	complian	ce during th	e reporting p	eriod st	ated above:
Exact period of non-compliance: fr	om			to	0			
Action(s) taken to achieve complian	nce:		٠					
Method used to demonstrate compli	ance:					<del>-</del>		
As the responsible official, I hereby co notification are true, accurate and con does not exceed 2,100 gallons per year	nplete. Further, i	ny annual cons	umption of	perchloro	ethylene solv	vent, based up	on purch	
RESPONSIBLE OFFICIAL:	ZoN C- Name (Plea	IN .	KIM	•	Signature	M		ng g
	1 (1.100				5.5			

<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	СОМ	PLAINT/	DISCOVERY		RE-INSPE	CTION
TIME IN: 1:35	TIME OUT:	2:0	0	AIRS ID	)#: 09	9037	9
TYPE OF FACILITY:	of Cleanin	9					
FACILITY NAME: NU	LOOK 1.	HR	CLEA	ANER	DA	TE: 3-	20-98
FACILITY LOCATION: 13	13 W. Bo	yton	Be	ach BIV	14		
	<u> </u>	Beac	4,	FL 3	3426	<u></u>	
RESPONSIBLE OFFICIAL: 10	ONG-IN-KIN	1		PHONE NU	MBER: 7	<u> 37-7</u>	805
<b>A.</b>	ne compliance requirement ule 62-213.300, Florida Ad			-	, the facility i	s found to be	e in
Based on the results of the discrepancies were noted	ne compliance requirement	ts evalua	ted during	this inspection,	, the followin	g complianc	е
COMPLIANCE REQU	IREMENT/PROBL	EM	FC	DLLOW-UP	ACTION	REQUIR	ED
. Need Seconda			Will	mgom	FDE	P. Offi	ie
for Doycleaning waste area.	machine and						
			-				ni
					M		TI
						<b>-</b>	Ô
					Mobile	PA 1	M
						3 1998 Non	2
					Sources	1998 Monitor	
			•			n ng	
·	-						
COMMENTS:				•			
***	•						
••	·		•				
The Annual Compliance Certifica	tion form has been properly	ly certifie	d and sub	mitted to the ins	spector.	YES	NOX
DATE OF NEXT INSPECTION	<b>b</b> : 1		199	39	-	<u> </u>	
DATE OF NEXT HOPECTION	- /		roximate)	),			
INSPECTION CONDUCTED B		Cho	KSK	<u> </u>			
•	DU Phanh	(Plea	ise Print)				2070
INSPECTODIS SIGNATIDE ./	WV ELLOWY			DHONE NIIN	ARED.	シン一	3070

Revised 10/96

#### PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL



COMPLAINT/DISCOVER'S

RE-INSPECTION

RE-INSPECTION . U	No.
AIRS ID#: 0990379 DATE: 3-20-98 TIME IN: 1:35 TIME	OUT: 21/10
FACILITY NAME: NU LOOK 1 HR Cleaner	rino
FACILITY LOCATION: 1313 W. Boyton Beau	4 BIVE
Boyton Beach, FL 334	26
RESPONSIBLE OFFICIAL: JONG - IN-KIMPHONE: 737	-7805
CONTACT NAME:PHONE:	
PART I: NOTIFICATION	`
(check appropriate box)	``
1. New facility notified DARM 30 days prior to startup	а
2. Facility failed to notify DARM to use general permit	۵
DADT II. CY ACCIDYCATION	

L	
,	
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 Paristi II	0. N
1. Existing small area source	2. New small area source
dry-to-dry only, x < 140 gal/yr	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, $140 \le x \le 2,100$ gal/yr	dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$
transfer only, $200 \le x \le 1,800$ gal/yr	transfer only, $200 \le x \le 1,800$ gal/yr
both types, $140 \le x \le 1,800 \text{ gal/yr}$	both types, $140 \le x \le 1,800$ gal/yr
(constructed before 12/9/91)	(constructed on or after 12/9/91)
(**************************************	
5. This is a correct facility classification	Y ON OCan not determine
If no, please check the appropriate classific	ation
1	neral permit as number above
	uits and is not eligible for a general permit
	g a sea governa.
B. The total quantity of perchloroethylene (perc) pu	rchased within the preceding 12 months by this dry cleaning
facility was 20 gallons.	
<u> </u>	

Is the responsible official of the dry cleaning facility:  (check appropriate boxes)			
Storing perchloroethylene in tightly sealed and impervious containers?	$A_{Y}$ on on/A		
2. Examining the containers for leakage?	AND NO Y		
3. Closing and securing machine doors except during loading/unloading?	DA DN		
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	אואם אם עם		
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	אווק אם צם		
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 ref (complete A below).	rigerated 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 ref. (complete A and B below).	rigerated condenser		
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?	אם צם		
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	A/ND ND YD		
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ΩΥ ΩΝ ΩΝ/Α		
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	ם אם אם		
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON ON/A		
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OA. OM		

PART III: GENERAL CONTROL REQUIREMENTS

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?	ОУ ОИ
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ON/A
	Is the temperature differential equal to or greater than 20° F?	OY 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 ON/A
	Is the perc concentration equal to or less than 100 ppm?	בארום אם אים
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 ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	QY QN □N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

#### PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? MD AD 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; AND NO YO b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? AYNO NO YE 4. Maintained calibration data? (for applicable direct reading instruments) A'NE NO YO 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? $\mathbf{Z}$ Y $\square$ $\mathbf{N}$ 7. Maintained deviation reports? OA/ON ON/Y Problem corrected? AINO NO YO 8. Maintained compliance plan, if applicable? AIND NO YO

PART VI: LEAK DETECTION AND REPAIRS			
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair			
	inspection?	אם עצ	
2.	2. Has the facility maintained a leak log?	אֹם צוֹצ	
3.	3. Does the responsible official check the following areas for leaks?		
	Hose connections, fittings, couplings, and valves  TY ON ON/A Muck cookers  C	אומק מם עם	
	Door gaskets and seating DY DN DN/A Stills	איןם אם צב	
	Filter gaskets and seating DY ON ON/A Exhaust dampers C	איאם אם צב	
	Pumps DY DN DN/A Diverter valves	ארם אם צב/A	
	Solvent tanks and containers Y ON ON/A Cartridge filter housings	איאם אם אַאָ	
	Water separators Y ON ON/A		
4.	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)	IN 1A	
	Halogen leak detector	2N/A	
	If using direct-reading instrumentation, is the equipment:		
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?	אם צכ	
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?	NO YC	
	c. Inspected for leaks and obvious signs of wear on a weekly basis?	אם עכ	
	d. Kept in a clean and secure area when not in use?	אם צכ	
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?	אם צכ	
	•		

ZING IN,	K	IM
Responsible Official	<b>,</b> 8	Name
(Please Print)	)	

R.V. Chorshi Inspector's Name (Please Print)

Inspector's Signature

Responsible Official's Signature

3-20-98

Date of Inspection

Merch 99
Approximate Date of Next Inspection

·	
ADDITIONAL SITE INFORMATION:	
	Yes NO Dry Cleaning Machine & Storage area [] [/] Waste area [] [/] Spotting area Sealed [] [/]
owner Will 1	in stall Secondary Cont «/Weste are in April (B) ex 1998
2. Disposal of Water from Water	Separator using approved evaporator [ ] [ ] or contracted Wastewater service [ ] [ ]

### BEST AVAILABLE COPY

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

	PLAINT/DISCOVERY RE-INSPECTION
MEIN: 9:45 TIME OUT: 10:2	0AIRS ID#: 0990379
(PEOFFACILITY: Dry Cleaning	
101011111111111111111111111111111111111	LEANER DATE: 2-4-99
CILITY LOCATION: 1313 W. Boynto	n Beach Blud, # 10
· Boynton Beach	h, FL 33426
ESPONSIBLE OFFICIAL: JONG - IN - KIM	PHONE NUMBER: 737-7805
Based on the results of the compliance requirements evalua	ated during this inspection, the facility is found to be in
compliance with DEP Rule 62-213.300, Florida Administra	ative Code (F.A.C.).
Based on the results of the compliance requirements evalua	ated during this inspection, the following complant
discrepancies were noted:	
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION FREQUIRED
	Bureau of Air Monitorin
	& Mobile Sources
	<del>  : </del>
<u> </u>	<u> </u>
-	
OMMENTS:	
The Annual Compliance Certification form has been properly certi	fied and submitted to the inspector. YES NOX
DATE OF NEXT INSPECTION: Feb	2000
	pproximate)
INSPECTION CONDUCTED BY: $\mathbb{Z} V C V$	LOKShi.
$\mathcal{O}_{\mathcal{C}}(A)$	Please Print) PHONE NUMBER: 355-3076
NSPECTOR'S SIGNATURE ( Chow Chow)	PHONE NUMBER: USS - 30 / C

Anns

#### PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY COMPLAINT/DISCOVERY COMPLAINT/DISCOVERY	
AIRS IDH: 0990379 DATE: 2-4-99 TIME IN: 9:45 TIME OUT: 10:20  FACILITY NAME: NU LOOK 1 HR CLEANER  FACILITY LOCATION: 1313 W. Boynton Beach Blvd + Room  Boynton Beach, FL 33426  RESPONSIBLE OFFICIAL: JONG-IN-KIM PHONE: 737-7805  CONTACT NAME: PHONE:	#10
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to startup	
2. Facility failed to notify DARM to use general permit	ie, :
Facility indicated on notification form that it is:    Check appropriate box    A.   Check appropriate box    Check appropriate box    A.   Check appropriate box    Check appropriate box    A.   Check appropriate box    Check appropriate box    Check appropriate box    Check appropriate box    A.   Check appropriate box    Check appropriate of business/petroleum appropriate check the appropriate check the appropriate check the appropriate chassification:   Check appropriate box    Check appropriate box    Check appropriate box    Check appropriate of business/petroleum apply transfer only, x < 140 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,8	

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) ZY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY 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 PM/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 por 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

		_		
ช.	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	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser			
	inlet and outlet weekly?	ΠY	ПΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	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?	ΩY	ПΝ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПΝ	□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	ПЙ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	YO	□N	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	_OY	ПΝ	□N/A

#### PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: 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 MY ON ON/A and parts installed w/in 5 days of receipt? DY DN MN/A 4. Maintained calibration data? (for applicable direct reading instruments) DY ON ZN/A 5. Maintained exhaust duct monitoring data on perc concentrations? JEY ON 6. Maintained startup/shutdown/malfunction plan? AY ON ON/A 7. Maintained deviation reports? XY ON ON/A Problem corrected? DY DN MYA 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? ND 2. Has the facility maintained a leak log? ПN 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, DY ON ON/A DY DN DN/A couplings, and valves Muck cookers MY ON ON/A DY ON ON/A Door gaskets and seating Stills MY ON ON/A DY DN DXIA Filter gaskets and seating Exhaust dampers DY ON ON/A DY ON ON/A Pumps Diverter valves DY ON ON/A Cartridge filter housings DY ON ON/A Solvent tanks and containers 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

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

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

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

Tong IN, Kim
Responsible Official's Name
(Please Print)

In the state of th

(PID/FID only)?

Inspector's Name (Please Print)

Inspector's Signature

Responsible Official's Signature

DY DN

DY DN

OY ON

DY DN

2-4-99

Date of Inspection

Feb 2000

Approximate Date of Next Inspection

		•
ADI	DDITIONAL SITE INFORMATION:	
1.	L. Secondary Containment for: Dry Cleaning Machine & Storage are Waste area Spotting area Sealed	11 11
2.	They installed see Containm around Spotting area. Asked area also exound dry cleane Spotting area.  2. Disposal of Water from Water Separator using approved evaporate	r and
	or contracted Wastewater service	· · · · /
	MCF picks up The Waster Calle	When

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	СОМ	PLAINT/DISCOVERY	RE-I	NSPECTION
TIME IN: 1: 15	1:45	AIRS ID#:_	0990379	
TYPE OF FACILITY: DEY Cleaning				
FACILITY NAME: Nu - Look 1 Ho	il Clean	Jees	DATE:_	2/14/00
FACILITY LOCATION: 13/3 Boy Ntow				
Boynton Beach				· · ·
RESPONSIBLE OFFICIAL: Jong - in - Kim		PHONE NUME	BER: 737	- 780 s
Based on the results of the compliance requirem compliance with DEP Rule 62-213.300, Florida			facility is foun	d to be in
Based on the results of the compliance requirem discrepancies were noted:	nents evaluat	ed during this inspection, the	following com	pliance
COMPLIANCE REQUIREMENT/PROB	BLEM	FOLLOW-UP A	CTION REQ	UIRED
		\ <del>-</del>		
			REC	
		Zireal & all		<del></del>
		Mobile Mobile		, =
		Sources	Monitoring	0
		•		
COMMENTS:	'			
			,	·
	,		·	
The Annual Compliance Certification form has been prop	erly certified	and submitted to the inspec	tor. YES[	□ мо Х
DATE OF NEXT INSPECTION:	Feb 2	200 / oximate)		
INSPECTION CONDUCTED BY:	Jeffroy	e Print)	·	<del></del>
INSPECTOR'S SIGNATURE: Dun	<u>J</u> k	PHONE NUMBE	R: <u>355 - 30</u>	70 XT 1/39

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of

Revised 10/96

#### PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECT	COMPLAINT/DISCOVERY COMPLAINT/DISCOVERY
AIRS ID#: 0990379 DATE: 2 /14	/00 TIME IN: 1:15 TIME OUT: 1:45
FACILITY LOCATION: $13/3 \omega$ .	
	- Kim PHONE: 737 - 7805.
PART I: NOTIFICATION	
(check appropriate box)  1. New facility notified DARM 30 days prior to state of the state of th	
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:  (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)	☐ No notification form ☐ 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)
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 $12/9/91$ )
	ation: neral permit as number above nits and is not eligible for a general permit
8. The total quantity of perchloroethylene (perc) pu facility was 10 gallons. Feb 1999 to	rchased 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) AYY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? Y ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? MO Y 4. Draining cartridge filters in their housing or in sealed containers for at XY 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 XN/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? 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 DY DN verifying that the coolant had been completely charged?

В	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?	אם אם	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	אם אם	□N/A
	Is the temperature differential equal to or greater than 20° F?	ו אם צם	□N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying excle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	ם אם צם	⊃N/A
	Is the perc concentration equal to or loss than 100 ppm?	ם אם צם	⊃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 C	A/NC
5 <b>.</b>	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ם אם כ	DN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ם אם עם	3N/A

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official: (check appropriate boxes)					
1. Maintained receipts for perc purchased?	X√YYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYY				
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;	XY □N □N/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?	AY ON ON/A				
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON ₩N/A				
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON MINA				
6. Maintained startup/shutdown/malfunction plan?	<b>⋊</b> Y □N				
7. Maintained deviation reports?					
Problem corrected?	XY ON ON/A				
8. Maintained compliance plan, if applicable?	DY DN ANIA				

ADDITIONAL	CITT	INTECTO	ATION.
ADDITIONAL	SILE	INFURIN	WINDIA:

1. Secondary Containment for: Dry Cleaning Machine & Storage area

Yes \_NO []

Waste area

 $[\chi]$  [

Spotting area Sealed

(X) []

(A) Spotting ARRA has a secondary contaminate

2. Disposal of Water from Water Separator using approved evaporator [ ]  $[\chi]$  or contracted Wastewater service  $[\chi]$  [ ]

(A) MCF PICKS up the waste and the waste under

inspection?			N	
hispection?		,	XXIY	ПN
2. Has the facility maintained a leak lo	og?		ΣΥΥ	DИ
. Does the responsible official check	the following areas for lead	xs?		
Hose connections, fittings, couplings, and valves	AY ON ON/A	Muck cookers	אם אם	M/N/A
Door gaskets and seating	AA ON ONVA	Stills	XXY ON	□N/A
Filter gaskets and seating	DY ON ON/A	Exhaust dampers		<b>X</b> IN/A
Pumps	XY ON ON/A	Diverter valves	MA ON	□N/A
Solvent tanks and containers	XY ON ON/A	Cartridge filter housings	ØYY □N	□N/A
Water separators	AYY ON ON/A		•	
Which method of detection is used by	by the responsible official?			
Visual examination (condense	d solvent on exterior surfac	es) 🛫	×	
Physical detection (airflow felt	t through gaskets)		Ø	
Odor (noticeable perc odor)	1.		<b>⊠</b>	
Use of direct-reading instrume	ntation (FID/PID/calorimet	ric tubes)	X NA	
Halogen leak detector			XI NA	
If using direct-reading in	strumentation, is the equip	oment:	<b>M</b> N/A	],
a. Capable of detection	ng perc vapor concentration	s in a range of 0-500 ppm?	OY ON	
b. Calibrated against (PID/FID only)?	a standard gas prior to and a	after each use	OY ON	
c. Inspected for leaks	and obvious signs of wear	on a weekly basis?	□Y □N	
d. Kept in a clean and	secure area when not in us	e?	DY DN	
e. Verified for accura	cy by use of duplicate samp	les (calorimetric only)?	OY ON	
			•	.

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	COMPLA	NT/DISCOVERY	RE-INSPECTION
TIME IN: 1: 50	E OUT: 2:20	AIRS ID#: O9	90385
TYPE OF FACILITY: Dey Clara	Ng		
FACILITY NAME: GREEN TRUE	DRY Cleaners	·	DATE: 2/14/00
FACILITY LOCATION: 3517 West		lud.	
Boynton Beac	•		
RESPONSIBLE OFFICIAL: Hamid 8	ha#i .	PHONE NUMBER:_	736 - 2260
Based on the results of the compliance compliance with DEP Rule 62-213.30	00, Florida Administrative C	ode (F.A.C.).	
Based on the results of the complianc discrepancies were noted:	e requirements evaluated du	ring this inspection, the follo	wing compliance
COMPLIANCE REQUIREMENT	T/PROBLEM	FOLLOW-UP ACTIO	ON REQUIRED
	-		7
		Bureau of 8 Mo	
		Air Monitor	
		ring	
COMMENTS:			,
		•	
			·
The Annual Compliance Certification form has	been properly certified and s	submitted to the inspector.	YES NOX
DATE OF NEXT INSPECTION:	Feb 200	,	
<del></del>	(Approxima		
INSPECTION CONDUCTED BY:	Jeffrey Di (Please Prin		
INSPECTOR'S SIGNATURE: Oypus	Duzek	phone number:	355 - 3070 XT 1139

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Revised 10/96

#### PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

|--|--|--|

TYPE OF INSPECTION:

ANNUAL

`₩'

COMPLAINT/DISCOVERY

•. ~	

1. New facility notified DARM 30 days prior to startup  2. Facility failed to notify DARM to use general permit  □  PART II: CLASSIFICATION  Facility indicated on notification form that it is:  (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  both types, 140 ≤ x ≤ 1,800 gal/yr  constructed before 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)  5. This is a correct facility classification  □ facility qualified for a general permit as number above  □ facility exceeds above limits and is not eligible for a general permit  3. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning	RE-INSPECT	NOIT	
FACILITY NAME: Gear Hear (/ names  Boynton Beach F / 33436  RESPONSIBLE OFFICIAL: Mamid Bhatt: PHONE: 736 - 2260  CONTACT NAME: PHONE:  PART I: NOTIFICATION  (check appropriate box)  1. New facility notified DARM 30 days prior to startup  2. Facility failed to notify DARM to use general permit  PART II: CLASSIFICATION  Facility indicated on notification form that it is: No notification form Checked propriate box  A.  1. Existing small area source dry-to-dry only, x < 140 gallyr transfer only, x < 200 gallyr both types, x < 140 gallyr (constructed before 12/991)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gallyr transfer only, 200 ≤ x ≤ 1,800 gallyr t	AIRS ID#: 0990385 DATE: 2/14	Joo TIME IN: 1:50 TIME OUT: 5	2:20
BoyNto J Beach F   33436     RESPONSIBLE OFFICIAL:	, ,	· .	
Boy Sto. J Beack   F   33436  RESPONSIBLE OFFICIAL:   //am.   // 3hnth;   PHONE:   736 - 2260  CONTACT NAME:   PHONE:   PHONE:    PART I: NOTIFICATION     PHONE:    PART II: NOTIFICATION     PHONE:    PART II: CLASSIFICATION   PART II: CLASSIFICATION   PART II: CLASSIFICATION    PART II: CLASSIFICATION   Post of part of par	,		
RESPONSIBLE OFFICIAL:	·		_
CONTACT NAME:			
Check appropriate box	RESPONSIBLE OFFICIAL: THITTE S	hait: 136 - 2260	
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PART II: CLASSIFICATION  Facility indicated on notification form that it is:    Drop store/out of business/petroleum	1. New facility notified DARM 30 days prior to st	artup	
Continue to a propriate box   Constructed before 12/9/91	2. Facility failed to notify DARM to use general pe	ermit	
Continue to a propriate box   Constructed before 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 dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr	PART II: CLASSIFICATION		
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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:     ☐       facility qualified for a general permit as number above       ☐       facility exceeds above limits and is not eligible for a general permit  The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning	** '	* * · · · · · · · · · · · · · · · · · ·	
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transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$ (constructed before $12/9/91$ )  5. This is a correct facility classification  If no, please check the appropriate classification:  If acility qualified for a general permit as number above facility exceeds above limits and is not eligible for a general permit.  The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning		8	
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facility exceeds above limits and is not eligible for a general permit  The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning	•		
facility was 23 callons. Feb 44 to 140 2000	3. The total quantity of perchloroethylene (perc) pu facility was \(\frac{85}{25}\) gallons. Feb 99 to Fe		eaning

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?	XY ON ON/A
2. Examining the containers for leakage?	AND NO VE
3. Closing and securing machine doors except during loading/unloading?	XIY □N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	AND אם צ'אַ
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	ANA NO YO
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part	<b>V.</b>
If classification 2 has been checked, the machine should be equipped with a refu (complete A below).	rigerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber maprior 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 source (check appropriate boxes)	s:
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 condenser upon opening the door?	OY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	חם אם
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	מם עם

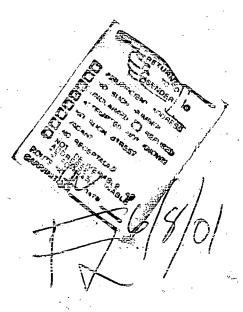
I	3. Has the responsible official of an existing large or new large area source also:	ч.	
]	. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	מם עם	
2	. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	חט מט	□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?	Оу Ои	□n/a
	Is the perc concentration equal to or less than 100 ppm?	ו אם צם	□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?		□n/a
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ח אם אם	⊃N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ם אם עם	⊃N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	XY DN
2. Maintained rolling monthly total of perc consumption?	JENS DN
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
<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>	אומם מם צו <b>ק</b>
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN MIN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN XXIVA
6. Maintained startup/shutdown/malfunction plan?	<b>X</b> A DN
7. Maintained deviation reports?	AND NO PA
Problem corrected?	XY ON ON/A
8. Maintained compliance plan, if applicable?	DY DN XVIA

AD.	DITIONAL SITE, I	NFORMATIO	И:					
							Voc	NY)
1.	Secondary Con	ntainment f	or: Dr	y Cleaning	g Machine & Sto	orage area	yes [X]	(]
					Waste area	_	[X]	[ ]
					Spotting area	a Sealed	[X]	[]
	•			•.				
								:
		4						
	e a marin a marin	*** - ,			,	•	•	
		••						
2.	Disposal of W	later from W			sing approved	_	[X]	[ ]
			or	contracted	d Wastewater s	ervice	<u>(</u> )	[X]
		1			**			
	A	MIE D	ir K.S. L	40 +L	UASTE Slu	.1. a		
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inspection?		weekly (for small sou	•	<b>Σ</b> Υ	ПN
Has the facility mainta	ined a leak load				ΠŅ
<ol> <li>Has the facility mainta</li> <li>Does the responsible of</li> </ol>		following areas for les	aks?	, μα <sub>ι</sub> Υ	
Hose connections		ononing arous for for			
couplings, and v		XY DN DN/A	Muck cookers	OY ON	<b>X</b> N/A
Door gaskets and	seating	XIY ON ON/A	Stills	XIY ON	□N/A
Filter gaskets and	seating	AVO NO VA	Exhaust dampers	OY ON	<b>⋈</b> N/A
Pumps		AVO NO YX	Diverter valves	<b>X</b> Y □N	□N/A
Solvent tanks and	containers	XY ON ON/A	Cartridge filter housings	OY ON	□N/A
Water separators		AVA NO YX			
. Which method of detect	ion is used by the	responsible official?			
Visual examinatio	n (condensed sol	vent on exterior surfa	ces) 🚉	×	
Physical detection (airflow felt through gaskets)			×		
Odor (noticeable perc odor)			×		
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)			¥ NA		
Halogen leak detector			X NA		
If using direct	-reading instrun	nentation, is the equi	ipment:	M/A	
a. Capabl	le of detecting per	rc vapor concentration	ns in a range of 0-500 ppm?	OY ON	
	ated against a star ID only)?	ndard gas prior to and	after each use	OY ON	
c. Inspect	ed for leaks and	obvious signs of wear	on a weekly basis?	OY ON	
d. Kept in	a clean and secu	re area when not in u	se?	OY ON	
e. Verifie	d for accuracy by	use of duplicate sam	ples (calorimetric only)?	DY DN	
			•		

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION MS 5510-37550 304000 2600 BLAIR STONE ROAD TALLAHASSEE FL 32399-2400



Z 210 662 848







ECE JUN 1 2001

Bureau of Air Monitoring

Sources

10 AIRS ID # 0990379001AG
JUNG-IN KIM
NU LOOK HIN CLEANERS #2
11211 S MILL ARY TRAIL #5022
BOYNTON BEACH FL 33436

## Z 570 885 848

US Postal Service

Receipt for Certified Mail

No insurance Coverage Provided.

10 AIRS ID # 0990379001AG
JUNG-IN KIM
NU LOOK 1 HR CLEANERS #2
11211 S MILITARY TRAIL #5022
BOYNTON BEACH FL 33436

ſ	Postage	\$	
Ì	Certified Fee		
00. April 1995	Special Delivery Fee		
	Restricted Delivery Fee		
	Return Receipt Showing to Whom & Date Delivered		
	Return Receipt Showing to Whom Date, & Addressee's Address	,	
	TOTAL Postage & Fees	\$	
Do Form 3800.	Postmark or Date		

SENDER COMPLETE THIS SECTION.		≖¢omplete±ti∳is:si	CTION:ON-DEL	IVERY
Complete items 1, 2, and 3. Also complete items 4 if Restricted Delivery is desired.		A. Received by (Plea	se Print Clearly)	B. Date of Delivery
<ul> <li>Print your name and address on the re so that we can return the card to you.</li> <li>Attach this card to the back of the mai or on the front if space permits.</li> </ul>	J. nailpiece,	C. Signature  X		
1. Article Addressed to:  10 AIRS ID # 0990379001  JUNG-IN KIM		If YES, enter deliv		
NU LOOK 1 HR CLEANERS #2 11211 S MILITARY TRAIL #5022 BOYNTON BEACH FL 33436		3. Service Type Certified Mail Registered Insured Mail	☐ Express Ma	iil eipt for Merchandise
		4. Restricted Deliver	y? (Extra Fee)	☐ Yes ·
2. Article Number (Copy from service label)				
PS Form 3811, July 1999	Domestic Ret	urn Receipt	_	102595-99-M-1789

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

Obj.: 002273

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FOR GOVERNMENT USE ONLY Org.: 37550101000 EO COMP Fund: 20-2-035007

Obj.: 002273

258926

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Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273



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Fund: 20-2-035001 Obj.: 002273

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Do NOT Remove Label

AIRS ID # 0990379

NU LOOK 1 HR CLEANERS #2

JUNG-IN KIM

11211 S MILITARY TRAIL #5022

**BOYNTON BEACH FL 33436** 

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

Obj.: 002273