

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

September 17, 1996

Mr. Stanley S. Schwartz SSS of West Palm Beach, Inc. 6670 Newport Lake Circle Boca Raton, Florida 33496

Dear Mr. Schwartz:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 19, 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 is subject to the requirements of the Title V general permit.

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

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

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

Sincerely,

Dotty Diltz, Chief

Bureau of Air Monitoring

y Suets

and Mobile Sources

/DD

cc: Mr. Al Grasso, Palm Beach County

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

Lawton Chiles

Governor



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

Virginia B. Wetherell Secretary

September 17, 1996

Dryclean USA

Mr. Stanley S. Schwartz SSS of West Palm Beach, Inc. 6670 Newport Lake Circle Boca Raton, Florida 33496

Dear Mr. Schwartz:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 19, 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 is subject to the requirements of the Title V general permit.

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

Title V General Permits Office Bureau of Air Monitoring and Mobile Sources 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,

lotty Suetz

Dotty Diltz, Chief Bureau of Air Monitoring

and Mobile Sources

/DD

Mr. Al Grasso, Palm Beach County cc:

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

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0990382

SSS OF WEST PALM BEACH INC
STANLEY S SCHWARTZ

-6670 NEWPORT LAKE CIR ILES FORUM PL.

-BOCA RATON FL 33496

WE ST PALM BEACH, FL. 33401

Bureau of Air Monitoring & Mobile Sources

FFB 2 A 1998

70

Do NOT Remove Label

Annual Reporting Period:	OVARY!	19 <u>97</u> to	DECEMBER	31 19 <u>97</u>
Based on each term or condition of the 62-213.300, Florida Administrative C	•		<u> </u>	vith DEP Rule
If NO, complete the following:				
#1. Term or condition of the general	permit that has not been in	continuous compli	ance during the reportin	g period stated above:
Exact period of non-compliance: from	m		to	
Action(s) taken to achieve compliance	e: ,	,		
Method used to demonstrate complian	nce:			FEB FEB
#2. Term or condition of the general	permit that has not been in	continuous compli	ance during the reporting	g perfed stated above:
Exact period of non-compliance: from	m		_ to	
Action(s) taken to achieve compliance	e:			
Method used to demonstrate complian	nce:			
As the responsible official, I hereby cert notification are true, accurate and comp does not exceed 2,100 gallons per year f	plete. Further, my annual co	nsumption of perchlo	proethylene solvent, based	upon purchase receipts,
responsible official:	Name (Please Print)	CHWARTS	Karly J. S. Signature	Unary 02-14-98 Date

^{*}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.

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
2. Site Name (For example, plant name or number):
2. Site Name (For example, plant name or number):
DRYCLEAN-U.S.A.
3. Hazardous Waste Generator Identification Number:
FLD 981029069
4. Facility Location:
Street Address: 1695 FORUM PL: City: WEST PALM BCH: County: PALM BEACH Zip Code: 33401
Senson A total Sent Sent Sent Sent Sent Sent Sent Sent
5. Facility Identification Number (DEP Use):
0990382
Responsible Official
Name and Title of Responsible Official:
STANLEY 5. SCHWARTZ
Responsible Official Mailing Address:
Street Address: 6670 NEWPORT CARE CO.
Organization/Firm? Street Address: 6670 NEWPORT CAKE CIR. City: BOCA RATON County: PALM BCH. Zip Code: 33496
8. Responsible Official Telephone Number:
Telephone: (161) 684-924 Fax: () -
(561) 241-0346
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
STANLEY S. SCHWARTZ, OWNER
10. Facility Contact Address: DRycland-U.S.A.
Street Address: 1695 FORUM PL.
Street Address: 1695 FORUM PL. City: WEST PAIN BCH County: PAIN BCH Zip Code: 33401
11. Facility Contact Telephone Number:
Telephone: (561) 684-9269 Fax: () -
RFCFIVFD

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

Page 13 of 16

Bureau of Air Monitoring & Mobile Sources

#0990382

	Dry Clean USA
p./3	le add title-Owner (from line 9.)
	7.add firm
_P.14	1 (a) add date control device installed
	1.(c) mark out "X" and initial
- 16	3. Should be new large area source
<i>p.</i> /3	4. Should be new large area Source
	W/refrig. con. 5.(f) required
	3.()/requires
	
-	

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	_	12-NOV-93					02-MAR-92	
Dry-to-Dry Unit	· p	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			j. 191	say say		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(1) w/ ref. condenser	i	23 10694							
(2) w/ carbon adsorber		71 77							
(3) w/ no controls									
Washer Unit	. ^ .	in the first term	1.412 27 1				: .		1, 1.
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit				- T.	· · · · · · · · · · · · · · · · · · ·				- 4545 p. 1. 1
(7) w/ ref. condenser								1	
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit			with the state of the		really to the	5 18 20 20 11			
(10) w/ ref. condenser	··	1	1	<u> </u>	1			T	
(11) w/carbon adsorber				_					
(12) w/ no controls									
(b) Control devices are required, but not yet installed									
(Indicate with an "X". SEXISTING SMALL AND TO SMALL AND T	Selec	t one classifi	cation only.)		nitions found	_	3) of	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

What control technology is required on machines pursuant to section (5) of Par (Indicate with an "X".)	rt 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 []				
5. A facility which contains non-exempt emissions units shall not be eligible to use to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units exemption criteria or that no such units exist on-site:				
All steam and hot water generating units on-site (1) have a total heat input of 10 boiler HP or less), and (2) are fired exclusively by natural gas except for periods during which propane or fuel oil containing no more than one percent sulfur is fi	of natural gas curtailment			
All steam and hot water generating units exempt No such units on-site				
Equipment Monitoring and Recordkeeping Informa	ation			
Check all logs which are required to be kept on-site in accordance with the require	rements of this general permit:			
(a) Purchase receipts and solvent purchases	\bowtie			
(b) Leak detection inspection and repair				
(c) Refrigerated condenser temperature monitoring	\bowtie			
(d) Carbon adsorber exhaust perc concentration monitoring				
(e) Instrument calibration	[]			
(f) Start-up, shutdown, malfunction plan				

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

Surrender of Existing Air Permit(s)

Please indicate	with an "X" the appropriate selection:
	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notific statements maintain t	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in eation. I hereby certify, based on information and belief formed after reasonable inquiry, that the made in this notification are true, accurate and complete. Further, I agree to operate and he air pollutant emissions units and air pollution control equipment described above so as to the all terms and conditions of this general permit as set forth in Part II of this notification form.
I will pron	aptly notify the Department of any changes to the information contained in this notification.
Signature	Date 14-96

/

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF MISPECTION: ANNOUAL COM	PEANNINGSCOVERY . RE-INSPECTION
TIME IN: 10:45 TIME OUT: 12:0	0 AIRS ID#: 0990382
TYPE OF FACILITY: D&7 Clean ing	
FACILITY NAME: Dry Clean U	SA DATE: 2-28-97
FACILITY LOCATION: 1695 FORW	5000
111PB RI	3401
Cto la Schule	
RESPONSIBLE OFFICIAL: Stanley Schwar	rt2 PHONE NUMBER: 684-926
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluate discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	· And the second se
	
	-
·	
COMMENTS:	
	•
The Annual Compliance Certification form has been properly certified	d and submitted to the inspector. YES NOTY
	90
DATE OF NEXT INSPECTION: $2-28-3$	noximate)
QV Ch	Lkch!
INSPECTOR'S SIGNATURE: Plea	se Print) PHONE NUMBER: 355 73070

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE	OF	INSPE	CTI	ИO	:
------	----	-------	-----	----	---

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS ID#: 0990382 DATE: 2-28-97 TIME IN: 10:45 TIME OUT: 12:00

FACILITY LOCATION:

FORUM PL

PART I: NOTIFICATION

(check appropriate box)

- Existing facility notified DARM by 9/1/96
- 2. New facility notified DARM 30 days prior to startup
- 3. Facility failed to notify DARM to use general permit

PART II: CLASSIFICATION

Facility indicated on notification form that it is: (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 gai/yr (constructed before 12/9/91)
 - 3. Existing large area source dry-to-dry only, 140<x<2, 100 gal/yr transfer only, 200<x<1,800 gal/yr both types, 140<x<1,800 gal/yr (constructed before 12/9/91)

This is a correct facility classification.

- 2. New small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed on or after 12/9/91)
- 4. New large area source dry-to-dry only, 140<x<2, 100 gal/yr transfer only, 200<x<1,800 gal/yr both types, 140<x<1,800 gal/yr (constructed on or after 12/9/91)



 $\square N$

If no, please check the appropriate classification:

- facility qualified for a general permit as number above
- \Box facility exceeds above limits and is not eligible for a general permit
- B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 120 gallons,

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?
- 2. Examining the containers for leakage?
- 3. Closing and securing machine doors except during loading/unloading?
- 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?



avy**x** nd ye

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

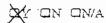
If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

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 basis?
- 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?
- 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?





DY DY



XY ON

Y ON

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?	ΟY	µ ∏i
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ΠN
	Is the temperature differential equal to or greater than 20° F?	ΩY	ND
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	On On/a
	Is the perc concentration equal to or less than 100 ppm?	QΥ	□NN/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?	QΥ	ON_N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	QY	□N □N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	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? 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) DY ON X N/A 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? $\square N$ Problem corrected? OY ON ONNA 8. Maintained compliance plan, if applicable?

· · · · · · · · · · · · · · · · · · ·					
PART VI: LEAK DETECTION AND REPAIRS					
1. Does the responsible official conduct a weekly leak detection and repair inspection?	A ON				

`	2. Which method of detection is used by	the responsible official	?			
	Visual examination (condensed	solvent on exterior sur	faces)	×		
	Physical detection (airflow felt through gaskets)					
	Odor (noticeable perc odor)					
	Use of direct-reading instrumen	tation (FID/PID/calorin	metric tubes)	a P/A		
	If using direct-reading instrum	nentation, is the equip	ment:			
	a. Capable of detecting	g perc vapor concentrat	ions in a range of 0-500 ppm?	UY UN		
	b. Calibrated against a (PID/FID only)?	a standard gas prior to a	and after each use	OY ON		
	c. Inspected for leaks a	and obvious signs of we	ar on a weekly basis?	OY ON		
	d. Kept in a clean and	secure area when not i	n use?	OY ON		
	e. Verified for accurac	y by use of duplicate sa	mples (calorimetric only)?	מם עם		
	3. Has the facility maintained a leak log	?		XY OH		
	4. Does the responsible official check th	e following areas for le	aks?			
	Hose connections, fittings, couplings, and valves	X	Muck cookers	OY ON AMA		
	Door gaskets and seating	Ox On	Stills	XY DN		
	Filter gaskets and seating	Mar - □n	Exhaust dampers	OY ON AN		
	Pumps	QY ON	Diverter valves	DY ON DN/A		
_	Solvent tanks and containers	An On	Has fan Cartridge filter housings	X ON /		
	Water separators	AX DN				
	STANLEY S. SCHU Name of Responsible Office R.V. Chokshi Inspector's Name (Please Properties of the Chokshi) Inspector's Signature	rint)	2-28-5 Date of Insperance 2-28-9 Approximate Date of	ection .		
1. The	hey have Secon	ndary Co hine &	ontainments Weste ale	for both		
2. ,5p	otting area w	ill be	Sealed by	3/8/97		
3 7	ie, have appr om watersepasa	oved evo	rposatel for	- Water		
U	U	4 of 4 .		Revised 10/28/96		

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL CO	MPLAINT/DISCOVERY RE-INSPECTION				
TIME IN: 10:10 TIME OUT: 11:0	0 AIRS ID#: 0990382				
TYPE OF FACILITY: Day Clean FACILITY NAME: Dry Clean US A	DATE: 2-19-98				
FACILITY LOCATION: 1695 FORUM	PL				
n. 1.1 Calla (340/ DHONE NI IMBED: 684-9264				
RESPONSIBLE OFFICIAL: ALAN COHAN	PHONE NUMBER: 6 3 4 - 7264				
Based on the results of the compliance requirements evalued compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evalued.	rative Code (F.A.C.).				
discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED				
	` .				
· · · · · · · · · · · · · · · · · · ·					
The state of the s					
COMMENTS:					
The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NOT					
	oproximate)				
INSPECTION CONDUCTED BY: (PI	ease Print) 375-3070				
INCORPORTORIS CYCNIATION	DYLONE ANIMPED.				

Page of

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ARM S

TYPE OF INSPECTION:

ANNUAL

>

COMPLAINT/DISCOVERY

RE-INSPECTION

·	
AIRS ID#: 0990382 DATE: 2-19-	98 TIME IN: 10:10 TIME OUT: 11:00
FACILITY NAME: Dry Clea	n USA
FACILITY LOCATION: 1695 /	FORUM PL
WPB, F	-L 33401
RESPONSIBLE OFFICIAL: ALAN C	COHAN PHONE: 684-9264
CONTACT NAME:	PHONE:
W. W. W. WOMPON I MYON	
PART I: NOTIFICATION	· · · · · · · · · · · · · · · · · · ·
(check appropriate box)	` _
1. New facility notified DARM 30 days prior to star	•
2. Facility failed to notify DARM to use general per	mit 🗆 🗀
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box) A.	☐ 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	□N □Can not determine
If no, please check the appropriate classific: facility qualified for a gen facility exceeds above lim	ation: neral permit as number above its and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) pu facility was (O O gallons.	rchased within the preceding 12 months by this dry cleaning

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? □N □N/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 □N □N/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN ØN/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) מם צוב 1. Equipped all machines with the appropriate vent controls? AINO NO YO 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? ZY ON ON/A 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the AY ON ONA 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

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

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	DY ON
2. Maintained rolling monthly averages of perc consumption?	NO Y
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	MY ON ON/A
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	AY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON PANA
5. Maintained exhaust duct monitoring data on perc concentrations?	AVA NO YO
6. Maintained startup/shutdown/malfunction plan?	DAY ON
7. Maintained deviation reports?	DY ON ON/A
Problem corrected?	MY ON ON/A
8. Maintained compliance plan, if applicable?	DY DN DNIA

1.	Does the responsible official conduc	t a weekly (for small source	es, bi-weekly) leak detection a	ind repair
	inspection?			DA DN
2.	Has the facility maintained a leak lo	g?		מם צובא,
3.	Does the responsible official check t	he following areas for leaks	?	
	Hose connections, fittings, couplings, and valves	AYON ON/A	Muck cookers	OY ON ØN/A
	Door gaskets and seating	ZY ON ON/A	Stills	MY ON ON/A
	Filter gaskets and seating	AND ND YA	Exhaust dampers	אואס אם אם
	Pumps	אוֹחם אם צוֹאַ	Diverter valves	AY ON ON/A
	Solvent tanks and containers	AND NO YES	Cartridge filter housings	אואם אם איא
	Water separators	ANO NO YO		
4.	Which method of detection is used b	y the responsible official?		
1	Visual examination (condense	d solvent on exterior surface	es)	Z (
	Physical detection (airflow felt	through gaskets)		
	Odor (noticeable perc odor)			
	Use of direct-reading instrume	ntation (FID/PID/calorimet	ric tubes)	× N/A
	Halogen leak detector	*	•	* N/A
	If using direct-reading in	strumentation, is the equi	pment:	X/A
	a. Capable of detection	ng perc vapor concentration	s in a range of 0-500 ppm?	DY DN
	b. Calibrated against (PID/FID only)?	a standard gas prior to and	after each use	ОУ ОИ
	c. Inspected for leaks	and obvious signs of wear	on a weekly basis?	OY ON
	d. Kept in a clean an	d secure area when not in u	se?	OY ON
	e. Verified for accura	acy by use of duplicate sanı	oles (calorimetric only)?	OY ON

Inspector's Name (Please Print)

2-19-98

Date of Inspection

2-19-99

Approximate Date of Next Inspection

1. Secondary Containment for: Dry Cleaning Machine & Storage area Waste area	
Zero Wash	
2. Disposal of Water from Water Separator using approved evaporator \(\subseteq \) or contracted Wastewater service []	[]
Saboty Kleen picksup the Waste	
	·

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 9:45 TIME OUT: 10:20 TYPE OF FACILITY: DOY CLEAN IN 9 FACILITY NAME: DOY CLEAN U FACILITY LOCATION: 1695 FOOUN WPB, FL	SA DATE: 1-12-99
RESPONSIBLE OFFICIAL: Stanley Schwartz	PHONE NUMBER: 684-9264
Based on the results of the compliance requirements evalual compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluated discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	ttive Code (F.A.C.).
· · · · · · · · · · · · · · · · · · ·	
COMMENTS:	•
INSPECTION CONDUCTED BY:	poroximate) hokshi
INSPECTOR'S SIGNATURE: Q.V. Maken	lease Print) PHONE NUMBER: 355 -3070

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

An	M	کے
----	---	----

TYPE OF INSPECTION:

ANNUAL

X

COMPLAINT/DISCOVERY

RE-INSPECTION

	99 TIME IN: 9:45 TIME OUT: 10:20
FACILITY NAME: Dry Clean	1 USA
FACILITY LOCATION: 1695	Forum PL
WPB	FL 33401
RESPONSIBLE OFFICIAL: Stanley	Schwartz PHONE: 684-9264
CONTACT NAME:	PHONE:
for the state of t	
PART I: NOTIFICATION	
(check appropriate box)	,
1. New facility notified DARM 30 days prior to star	rtup
2. Facility failed to notify DARM to use general per	rmit 🗖
the state of the s	
PART II: CLASSIFICATION	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Facility indicated on notification form that it is:	☐ No notification form
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form ☐ Drop store/out of business/petroleum
(check appropriate box) A.	☐ Drop store/out of business/petroleum
(check appropriate box) A. 1. Existing small area source	Drop store/out of business/petroleum 2. New small area source
(check appropriate box) A.	☐ Drop store/out of business/petroleum
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr
(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	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91)
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source 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	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a general source.	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source 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) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a general source.	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source 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) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)

(cl	neck appropriate boxes)	
1.	Equipped all machines with the appropriate vent controls?	DY ON
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	YOY ON ON/A
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	DY ON ON/A
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	MY ON
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	AND NO YEA
6.	Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	MY ON

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	ПN	
)	- •	_••	
2	Measured and recorded the washer exhaust temperature at the condenser			
٦.	inlet and outlet weekly?	Пν	ΠN	□N/A
	milet allo butlet weekly;	J '	— 111	-IN/A
1	Is the temperature differential equal to or greater than 20° F?	\Box Y	ПΝ	□N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly			
1	at the end of the final drying cycle while the machine is venting to the adsorber,			
ł	if machines are equipped with a carbon adsorber?	ПΥ	DΝ	□N/A
	X			
ţ	Is the perc concentration equal to or less than 100 ppm?	\Box Y	ПИ	□N/A
4.	Assured that the sampling port on the carbon adsorder exhaust for measuring			
	perc concentrations is at least 8 duct diameters downstream of any bend, contraction,			
	or expansion; is at least 2 duet diameters upstream from any bend, contraction,			
	or expansion; and downstream from no other inlet?	Y	חא	□N/A
Ħ	or expansion, and as any count from no outer filler.	- 1	-11	
5	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
٦.		Dv	Dy	
	condenser coils?	ЧY	ЦN	□N/A
	그 그 그는 그 그 그 그는 그는 그를 가지 않는 사람이 살아 들어 살았다.	<u>. : - : - : </u>		
6.	Routed airflow to the carbon adsorber (if used) at all times?	ŪΥ	ПΝ	□N/A
<u></u>				

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 ON MINA 4. Maintained calibration data? (for applicable direct reading instruments) DY DN ØN/A 5. Maintained exhaust duct monitoring data on perc concentrations? DY DN 6. Maintained startup/shutdown/malfunction plan? MY ON ON/A 7. Maintained deviation reports? DY ON ON/A Problem corrected? DY DN DNA 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 DΝ inspection? DY 2. Has the facility maintained a leak log? DN 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, MY ON ON/A DY DN DNA couplings, and valves Muck cookers MY ON ON/A DY ON ON/A Door gaskets and seating Stills DY DN DNA DY ON ON/A Filter gaskets and seating Exhaust dampers DY ON ONIA DY ON ON/A **Pumps** Diverter valves Cartridge filter housings Y N N/A Solvent tanks and containers ZY ON ON/A Water separators QY ON ON/A 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN b. Calibrated against a standard gas prior to and after each use (PID/FID only)? DY DN

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

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

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

STANCEY S-SCHWARTZ
Responsible Official's Name
(Please Print)

R. V. Chokshi

Inspector's Name (Please Print)

DY DN

OY ON

DY DN

1-12-99

Date of Inspection

Jan 2000

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION: Yes 1. Secondary Containment for: Dry Cleaning Machine & Storage area Waste area Spotting area Sealed	[]
1. Secondary Containment for: Dry Cleaning Machine & Storage area Waste area	[]
_	
2. Disposal of Water from Water Separator using approved evaporator	[]
or contracted Wastewater service	
Safeti Kleen picks up the west	e
	•
	· .

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT &

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY RE-INSPECTION
7	
TIME IN: 10: 50 TIME OUT: 11: 3	20 AIRS ID# 0990382
TYPE OF FACILITY: Dey Cleaning	
FACILITY NAME: Dey CRAN USA	
FACILITY LOCATION: 1695 Freum Place	<u>a</u>
West Palm Beach, FI	- Commence of the Other
RESPONSIBLE OFFICIAL: STANLEY Schwart	7PHONE NUMBER: 684 - 9264
compliance with DEP Rule 62-213.300, Florida Adm	
Based on the results of the compliance requirements discrepancies were noted:	evaluated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	M FOLLOW-UP ACTION REQUIRED
· · · · · · · · · · · · · · · · · · ·	-
COMMENTS:	
The Annual Compliance Certification form has been properly co	ertified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: Dec 20	OOO (Approximate)
,	Dizak (Please Print)
INSPECTOR'S SIGNATURE: Que Dial?	PHONE NUMBER: 355 - 3070 XT 1139

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECTION	N COMPLAINT/DISCOVERY
AIRS ID#: 0990382 DATE: 12/30/	99 TIME IN: 10:50 TIME OUT: 11:20
FACILITY NAME: Dey CLAW USA	1
FACILITY LOCATION: 1695 FORUM	n Place
	Beach, Fl 33401
RESPONSIBLE OFFICIAL: Stanky Sch	WASTS PHONE: 684 - 9264
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to star	rtup 🔀
2. Facility failed to notify DARM to use general per	rmit
Personal	1000000000000000000000000000000000000
PART II: CLASSIFICATION	
PART II: CLASSIFICATION Facility indicated on notification form that it is: (check appropriate box) A.	☐ No notification form ☐ Drop store/out of business/petroleum
Facility indicated on notification form that it is:	□ No notification form
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	☐ 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
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 \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	O No notification form O Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
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 \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) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a get	O No notification form O Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) YY ON OCan not determine

10:5

Ranicad 0/1

TART III. CENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
1. Storing perchloroethylene in tightly sealed and impervious containers?	MY ON ON/A
2. Examining the containers for leakage?	AND ND YX
3. Closing and securing machine doors except during loading/unloading?	MO NE
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	אואם אם אוא.
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	пу пр райла
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 refrige (complete A below).	rated condenser
If classification 3 has been checked, the machine should be equipped with either a condenser or a carbon adsorber (complete A and B below). Carbon adsorber must prior to September 22, 1993	refrigerated have been installed
If classification 4 has been checked, the machine should be equipped with a refrige (complete A and B below).	rated 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?	MY DN
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	MY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	XY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	₩ Diy
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? 39° F	ANG KO Y M
5. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	ZYY DY

7055

B. Has the responsible official of an existing large or new large area source also:	Committee of the Commit
and the second s	
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?	у∨ Ои
2. Measured and recorded the washer exhaust temperature at the condenser	
inlet and outlet weekly?	DY DN DN/A
Is the temperature differential equal to or greater than 20° E?	DY DN DN/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?	Y ON ON/A
Is the perc concentration equal to or less than 100 ppm?	□Υ □Ν □Ν/Α
4. Assured that the sampling port on the carbon adsorbes 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?	DY DN N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON N/A
	. GI GR WA
6. Routed airflow to the carbon adsorber (if used) at all times?	□Y □N N/A
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official:	· ·
(check appropriate boxes)	
1. Maintained receipts for perc purchased?	MA DN
1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption?	MA DN
1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption?	
1. Maintained receipts for perc purchased?	
 Maintained receipts for perc purchased? Maintained rolling monthly total of perc consumption? Maintained leak detection inspection and repair reports for the following: 	SAX DV
 Maintained receipts for perc purchased? Maintained rolling monthly total of perc consumption? 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 	SPY ON ON/A
 Maintained receipts for perc purchased? Maintained rolling monthly total of perc consumption? 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? Maintained calibration data? Gor applicable direct reading instruments) 	SAY ON ON/A
 Maintained receipts for perc purchased? Maintained rolling monthly total of perc consumption? 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? 	SAY ON ON/A SAY ON ON/A SAY ON ON/A OY ON SAN/A

Problem corrected?

3. Maintained compliance plan, if applicable?

MY ON ONA

ANA RO YO

400	OITIONAL SITE INFORMATION:		
1.	Secondary Containment for: Dry Cleaning Machine & Storage area Waste area Spotting area Sealed	ĺΧΊ	() () ()
	••••••••••••••••••••••••••••••••••••••		ı
2.	Disposal of Water from Water Separator using approved evaporator or contracted Wastewater service	•	[]
	(A) SARety Closed Picks up the Waste		

PART VI: LEAK DETECTION AND	REPAIRS			
1. Does the responsible official conduct a	weekly (for small source	s, bi-weekly) leak detection a	nd repair	
inspection?			ØYY □N	
2. Has the facility maintained a leak log?			אם איא	
3. Does the responsible official check the	following areas for leaks	?		
Hose connections, fittings, couplings, and valves	אוחם מם צא	Muck cookers	OY ON XIN/A	
Door gaskets and seating	MY DN DN/A	Stills	אואם אם צאָ	
Filter gaskets and seating	אואם אם א א	Exhaust dampers	□Y □Y ÆK\Y	
Pumps	AND NO YX	Diverter valves	MY ON ON/A	
Solvent tanks and containers	DY ON ONA	Cartridge filter housings	אַר אוֹם אוֹם צֹאָעָ	· .
Water separators	Y ON ON/A		•	
4. Which method of detection is used by	the responsible official?			
Visual examination (condensed	solvent on exterior surfac	ės)	X	
Physical detection (airflow felt t	hrough gaskets)		5 7	
Odor (noticeable perc odor)		<i>y</i>	×	
Use of direct-reading instrumen	tation (FID/PID/calorime	tric tubes)	M NA	
- Halogen leak detector			×	
If using direct-reading ins	trumentation, is the equi	pment:	Þ N/A	
a. Capable of detecting	g perc vapor concentration	ns in a range of 0-500 ppm?	DY DN	
b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use		
c. Inspected for leaks	and obvious signs of wear	r on a weekly basis?	אם עם	
d. Kept in a clean and	secure area when not in u	ise?	אם עם	
e. Verified for accura	cy by use of duplicate sam	iples (calorimetric only)?	אם אם	
				1
·		6 11.		
STANLEY S. SCHWA	RTZ	Responsible Off	t	
ponsible Official's Na (Please Print)	Line	Responsible Off	ical's Sign	ature
Inspector's Name (Please	Priot)	Date of Inspection		
Gerry Diegel	<u> </u>	Dec 2006 - Approximate Date o		

	SUMMARY REPORT
TYPE OF INSPECTION: ANNUAL (COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN:TIME OUT:	AIRS ID#: 0990 382
TYPE OF FACILITY: Day Clearer	
FACILITY NAME: Pr. Clera USA	DATE: \$122 OF
FACILITY LOCATION: 1695 FORUM PI	West Rehn Beach 33401
	P
RESPONSIBLE OFFICIAL: Stayle, Schwartz	PHONE NUMBER 58 4 92 64
Based on the results of the compliance requirements eva compliance with DEP Rule 62-213.300, Florida Adminis Based on the results of the compliance requirements eval	7 P * - A
discrepancies were noted:	
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
<u> </u>	
•	, :
OMMENTS:	
e Annual Compliance Certification form has been properly certific	ed and submitted to the inspector. YES NO
	roximate)
SPECTION CONDUCTED BY: h Lidler	·
	PHONE NUMBER: 355 3070

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	×	COMPLAINT/DISCOVER	Y 🗀
	RE-INSPECTION			
AIRS ID#: <u>0990 382</u>		o TIME	IN: TIME OUT	`:
FACILITY NAME:	y Clean USA			
FACILITY LOCATION:	1695 FORUM 7	PIACE		
	West Palm B	each,	Fl	
RESPONSIBLE OFFICIAL :	Stanley Schung	212	_PHONE: <u>684 - 92</u> 6	7.
CONTACT NAME:			_ PHONE:	
PART I: NOTIFICATION		-		
(check appropriate box)				
1. New facility notified DARM	30 days prior to startup			
2. Facility failed to notify DARN	M to use general permit			
DADEL OF COLLICATION				
PART II: CLASSIFICATION				
Facility indicated on notificatio	n form that it is:		☐ No notification form	-/petroleum
	n form that it is:		☐ No notification form ☐ Drop store/out of business	s/petroleum
Facility indicated on notificatio (check appropriate box)	re 🖸 2. Norder dry- trans both	to-dry only sfer only, x types, x <	☐ Drop store/out of business area source , x < 140 gal/yr < 200 gal/yr	s/petroleum
Facility indicated on notificatio (check appropriate box) A. 1. Existing small area sourc dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr both types, x < 140 gal/yr	e	to-dry only, x sfer only, x types, x < structed on lew large a to-dry only, afer only, 20 types, 140	☐ Drop store/out of business area source , x < 140 gal/yr < 200 gal/yr 140 gal/yr	s/petroleum
Facility indicated on notificatio (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 ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry only, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry only, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry only, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry only, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry only, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry only, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry only, 140 ≤ x ≤ 1,800 gal/yr (source dry-to-dry-t	e 2. Nor dry-transboth (con a long al/yr transboth (con al/yr dry-gal/yr transboth (con al/yr both (con al/yr both (con al/yr both al/yr both (con al/yr dry-gal/yr both (con al/yr both al/yr both al/yr both (con al/yr both al/yr both al/yr both (con al/yr both al/yr both al/yr both al/yr both (con al/yr both al/yr both al/yr both al/yr both al/yr both (con al/yr both	to-dry only, x sfer only, x types, x < structed on lew large a to-dry only, afer only, 20 types, 140	Drop store/out of business area source $x < 140 \text{ gal/yr}$ $x < 200 \text{ gal/yr}$	s/petroleum
Facility indicated on notificatio (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 ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91) 5. This is a correct facility class If no, please check the applications.	e	to-dry only, sfer only, x types, x < structed on lew large a to-dry only, afer only, 20 types, 140 structed on	□ Drop store/out of business area source , x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91) rea source , 140 ≤ x ≤ 2,100 gal/yr 00 ≤ x ≤ 1,800 gal/yr ≤ x ≤ 1,800 gal/yr or after 12/9/91) □ Can not determine mber above	s/petroleum

Is the responsible official of the dry cleaning facility: (check appropriate boxes) □N □N/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DN DN/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). 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 MY 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? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

B. Has the responsible official of an existing large or new large area source also:	4
I. Measured and recorded the exhaust temperature on the outlet side of the condenser loc on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	cated OY ON
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	□Y □N □N/A
Is the temperature differential equal to or greater than 20° F?	DY DN DN/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?	A/ND NQ YD
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 up tream 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?	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)				
I. Maintained receipts for perc purchased?	Δy On			
2. Maintained rolling monthly averages of perc consumption?	DY ON			
3. Maintained leak detection inspection and repair reports for the following:	,			
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON ON/A			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	DY ON ON/A			
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN WINA			
5. Maintained exhaust duct monitoring data on perc concentrations?	אואלי אם צם			
6. Maintained startup/shutdown/malfunction plan?	MY ON			
7. Maintained deviation reports?	DY ON ON/A			
Problem corrected?	DY ON ON/A			
8. Maintained compliance plan, if applicable?	DY ON SINA			

ADD	ITIONAL SITE INFORMATION:	A.B.
1.	Secondary Containment for: Dry Cleaning Machine & Storage area Waste area Spotting area Sealed	es NO 1 [] 1 [] 1 []
·		
2.	Disposal of Water from Water Separator using approved evaporator V or contracted Wastewater service	1 []
	ANNAM COLOR	
	ANNAMO DE LA COMPANION DE LA C	

PART V	I: LEAK DETECTION AND R	EPA	IRS				
1. Does t	he responsible official conduct a v	weekl	y (for	small sources, l	oi-weekly) leak detection a	nd repa	ir ,
inspec	ction?					Z Y	_ N□
2. Has th	e facility maintained a leak log?					ÇΙΥ	ΠИ
3. Does t	he responsible official check the f	ollow	ing a	reas for leaks?			
I	Hose connections, fittings, couplings, and valves	pγ	ΠИ	□N/A	Muck cookers		אואלי מכ
r	Door gaskets and seating	9Y	ΩИ	□N/A	Stills	ÞΑξι	⊃N □N/A
F	Filter gaskets and seating	ΖΊΥ	ΠИ	□N/A	Exhaust dampers		AND NC
F	² umps	À Y	ΠИ	□N/A	Diverter valves	μΥ C	ON □N/A
s	Solvent tanks and containers	ØΥ	ΩΝ	□N/A	Cartridge filter housings	DX (אומם מכ
. v	Water separators	þΥ	ПΝ	□N/A			
4. Which	method of detection is used by th	e resp	onsib	ole official?			
١ ١	Visual examination (condensed so	lvent	on ex	terior surfaces)		Ø/	
F	Physical detection (airflow felt thro	ough	gaske	ts)		ø,	
(Odor (noticeable perc odor)					ø	
τ	Jse of direct-reading instrumentat	ion (F	FID/P	ID/calorimetric	tubes)	O MO	*
I I	Halogen leak detector					□ ×4	×
	If using direct-reading instru	ment	ation	, is the equipm	ent:	□N/A	•
	a. Capable of detecting pe	erc va	por c	oncentrations in	a range of 0-500 ppm?		ИС
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					אכ		
	c. Inspected for leaks and	l obvi	ous si	gns of wear on	a weekly basis?		מב
	d. Kept in a clean and sec	cure a	irea w	hen not in use?			אכ
	e. Verified for accuracy b	y use	of du	plicate samples	(calorimetric only)?		אכ
					·		
<u></u>	Y Liebler			_	8/22/00		
	Inspector's Name (Please Print	IJ			Date of Inspe	cuon	
	m lill				10/8		
	Inspector's Signature				Approximate Date of 1	Next Ins	spection

259101

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

RECEIVED MAIL ROOM

TOTAL AMOUNT DUE: \$50.00

JAN 27 97

Do NOT Remove Label

AIRS ID# 0990382 SSS OF WEST PALM BEACH INC STANLEY S SCHWARTZ

6870 NEWPORT LAKE CIR 1695 FORUM PL. BOGARATON FL 33496 WEST PALM BC#,

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

3031*3*1

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID#0990382

SSS OF WEST PALM BEACH INC

STANLEY S SCHWARTZ

-6670 NEWPORT LAKE CIR 1695 FORUM PR

FOR GOVERNMENT USE ONLY

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

Оы.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 0358568

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0990382

DRYCLEAN USA STANLEY S SCHWARTZ 1695 FORUM PLACE **WEST PALM BEACH FL 33401** FOR GOVERNMENT USE ONLY

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

Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0990382

DRYCLEAN USA STANLEY S SCHWARTZ 1695 FORUM PLACE WEST PALM BEACH FL 33401

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1

Fund: 20-2-035001

Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

404628

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label. disloips

TOTAL AMOUNT DUE: \$50,00 of Air Monitors NOT Remove Label AIRS ID # 0990382

, . . s.i ..

Do NOT Remove Label

DRYCLEAN USA STANLEY S SCHWARTZ 1695 FORUM PLACE

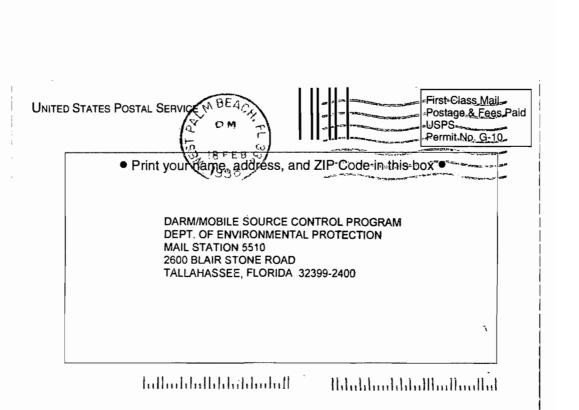
WEST PALM BEACH FL 33401

FOR GOVERNMENT USE-ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

Z 333 619 669 US Postal-Service Receipt for Certified Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse) Sent to AIRS ID 0990382 SSS OF WEST PALM BEACH INC STANLEY S SCHWARTZ 6670 NEWPORT LAKE CIR **BOCA RATON FL 33496** Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address PS Form **3800**. \$ TOTAL Postage & Fees Postmark or Date

RETURN ADDRESS completed on the reverse side?	SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write "Return Receipt Requested" on the mailpiece below the article "The Return Receipt will show to whom the article was delivered and delivered. 3. Article Addressed to: AIRS ID 0990382 SSS OF WEST PALM BEACH INC STANLEY S SCHWARTZ 6670 NEWPORT LAKE CIR BOCA RATON FL 33496 5. Received By: (Print Name)	4a. Article N 2 3 3 4b. Service Registere Express Return Rec 7. Date of De	Type ed Certified Mail Insured ceipt for Merchandise COD ellivery Se's Address (Only if requested	Thank you for using Return Receipt Service.
ls your RE	6. Signature: (Addressee or Agent) X Hawn Schwart PS Form 3811 December 1994	and fee is	Domestic Return Receipt	



	z sro r	۲2	850					
	US Postal Service Receipt for Certified Mail No Insurance Coverage Provided.							
1 S I	990382001AG							
	Certified Fee	-						
	Special Delivery Fee							
	Restricted Delivery Fee							
1995	Return Receipt Showing to Whom & Date Delivered							
April	Return Receipt Showing to Whom, Date, & Addressee's Address							
800,	TOTAL Postage & Fees	\$						
PS Form 3800 , April 1995	Postmark or Date		az w					

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY				
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) C. Signatüre Agent Addressee D. S delivery addless ifferent from item 1? Yes				
1. Article Addressed to: 10 AIRS ID # 0990382001AG STANLEY S SCHWARTZ DRYCLEAN USA	If YES, enter delivery address below: JUN 1 1 200 Bureau of Air Monitoring				
1695 FORUM PLACE WEST PALM BEACH FL 33401	3. Servide Mebile Sources Certified Mail				
4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number (Copy from service label) 2. A comparison of the comparis					
PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789					

United States Postal Service



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

EUR. OF AIR MONITORING & MOBILE SOURCES DEPT. OF EMVIPONMENTAL PROTECTION MAIL STATION 5510 2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

	CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)			
373		<u> </u>		
27	Postage	\$		
4	Certified Fee		Postmark	
담	Return Receipt Fee (Endorsement Required)		Here	
	Restricted Delivery Fee (Endorsement Required)			
0600	Recipient's Na STANL	EAN USA EY S SCHWARTZ	AIRS ID # 0990382	٦
	Street, Apt. No WEST P	RUM PLACE ALM BEACH FL 33	3401	
70	City, State, ZIF			

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY				
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: AIRS ID # 0990382 DRYCLEAN USA STANLEY S SCHWARTZ 1695 FORUM PLACE WEST PALM BEACH FL 33401	A. Received by (Please Print Clearly) C. Signature X Linux Agent Addressee D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.				
	4. Restricted Delivery? (Extra Fee)				
2 Article Number (Copy from service label) 1000 0600 0006 4/27 3730					
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789				

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES DEPT. OF ENVIRONMENTAL PROTECTION MAIL STATION 5510 2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400