

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. Hamid B. Bhatti Greentree Dry Cleaners 3517 West Boynton Beach Boulevard Boynton Beach, Florida 33436

Dear Mr. Bhatti:

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 and Mobile Sources

lotty blietz

/DD

cc: Mr. Al Grasso, Palm Beach County

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

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1.	, , , , , , , , , , , , , , , , , , , ,
	HAMID B. BHATTI
2.	Site Name (For example, plant name or number):
	GREENTREE CLEANERS
3.	Hazardous Waste Generator Identification Number:
	FLD 981-031222
4.	Facility Location: BOYN TON BEACH
	Street Address: 367 - WEST BOYNTON BEACH BINC
	City: BOYNTON BEACH County: PALM BEACH. Zip Code: 33436
5.	Facility Identification Number (DEP Use):
	0990385
	Responsible Official
	- ·· F
<u>(6)</u>	Name and Title of Responsible Official:
	HAMID B BHATE
7	Responsible Official Mailing Address:
	Organization/Firm: GREENTREE DRY CLEANERS
	Street Address: 3517- WEST BOUNTON BEAL BILL
	City: BOYN TON BEEN County: PAIM BEEN COMY Zip Code: 33436
8.	Responsible Official Telephone Number:
	Telephone: (561) 736 - 22460. Fax: () — 6
	Facility Contact (If different from Responsible Official)
	racinty Contact (11 different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
	N/A
10.	Facility Contact Address:
	Street Address:
	City: County: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: () - Fax: () -
	-

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AUG 1 9 1996

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

Bureau of Air Monitoring & Mobile Sources

#0990385

,	41 0 1 10 30 3
	Greentree Cleaners
	spoke with Hamid Bhatti-9/3/96
p./3	6. need title-Owner
,	
D.15	5.(f) required
, .	
-	
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	<u> </u>

03/13/23/9

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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	ID	Purchased	Installed
Type of Machine	110	1 urchased	mstaricu	1.0	1 dichased	Instanca	1.0	1 dichasea	mstanca
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit		DRYT	FO DRY			·			
(1) w/ ref. condenser	#1	10-4-84	10-4-84						
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit		·							
(4) w/ ref. condenser						_			
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit				•	r , gr.,				
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit					•	•		*	1. 1. 1.
(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 the control of the	are requanting gallo	equired to be ity of perchlo ons ow many? [_	installed [_ oroethylene (perc)	purchased in	n the latest 12			<u></u>
3. What is the facility's so (Indicate with an "X". Existing small ar	Selec	t one classifi	cation only.))	nitions found	·	3) of 	Part II?	
Existing small ar Existing large are			Ne	w laı	rge area sour	 ce [

DEP Form No. 62-213.900(2)

Effective: 6-25-96

 What control technology is required on machines pursu (Indicate with an "X".) 	ant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber [] Refi	rigerated condenser []
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser	
5. A facility which contains non-exempt emissions units to Rule 62-213.300, F.A.C. Verify that all steam and hot exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have boiler HP or less), and (2) are fired exclusively by natural during which propane or fuel oil containing no more than	gas except for periods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
·	
	.
Equipment Monitoring and R	
Check all logs which are required to be kept on-site in acc	ordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	\mathcal{L}
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitorin	g []
(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 indica	te 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)
uZ	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notif statemen maintain comply w	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its 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 with all terms and conditions of this general permit as set forth in Part II of this notification form.
	mptly notify the Department of any changes to the information contained in this notification. 8-16-96



Department of Environmental Protection

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

David B. Struhs Secretary

June 25, 2001

Mr. Hamid B. Bhatti Green Tree Dry Cleaners 3517 West Boynton Beach Boynton Beach, Florida 33436

Dear Mr. Bhatti:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on June 25.

In reviewing your submittal, it was noted that Green Tree Dry Cleaners elected to surrender its existing Title V air general permit (AIRS ID 0990385). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 840/921-9583.

Sincerely,

Sandra Bowman

Bureau of Air Monitoring and Mobile Sources

SB/

Enclosure

cc: Mr. Al Grasso, Palm Beach County

"More Protection, Less Process"

BEST AVAILABLE COPY

/RECEIVED

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

MAY 1 2 1997

TYPE OF INSPECTION: ANNUAL	СОМ	PLAINT/DISCOVERY	Bureau of Right	-mareation [J ,
TIME IN: 16 00 TIME OUT:_	11 00	AIRS ID	~~~	0385	
TYPE OF FACILITY: DRY COLAR	ICR.				_
FACILITY NAME: GREEN TREE	2 C.C	PANCES	DATE	:4-1-99	7
FACILITY LOCATION: 3517 Box	mton,	3ch Bla			
Bognfen	33 43	3			
RESPONSIBLE OFFICIAL: yes then is		PHONE NU	IMBER: 2	36- 226	<i>;</i> Ø
Based on the results of the compliance requirem compliance with DEP Rule 62-213.300, Florida		_	, the facility is fo	und to be in	
Based on the results of the compliance required discrepancies were noted:	nents evaluai	ed during this inspection,	, the following co	ompliance	
COMPLIANCE REQUIREMENT/PROP	3LEM	FOLLOW-UP	ACTION RE	QUIRED	
			_		
		-		•	
•					
The state of the s	,	·			
•					
The second secon					
COMMENTS:			_		
				_	
The Annual Compliance Certification form has been prop	perly certifie	d and submitted to the ins	spector. YE	з по[[г	
DATE OF NEXT INSPECTION: 4/98	· د ــــــــــــــــــــــــــــــــــــ				
7	_	roximate)			
INSPECTION CONDUCTED BY:		No.	<u>·</u>		_
INSPECTOR'S SIGNATURE: (a) Mall	/ (Flea	se Print)PHONE NUM	IBER: 350	5 453.	<u></u>

ARMS

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	TYPE OF INSPECTION: ANNUAL RE-INSPECTI	COMPLAINT/DISCO	VERY 🗆
	AIRS ID#: <u>0990385</u> DATE: <u>4/1/</u> FACILITY NAME: <u>GREEN TREE</u> FACILITY LOCATION: <u>3517</u> Bo Boynton	Cleaners.	E OUT: <u>//</u> OO
	PART I: NOTIFICATION		
ĺ	(check appropriate box)		
	1. Existing facility notified DARM by 9/1/96		X
	2. New facility notified DARM 30 days prior to st	artup	۵
ļ	3. Facility failed to notify DARM to use general p	ermit	
j	PART II: CLASSIFICATION		
]	•	mud 1984	
	A. 1. Existing small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)	2. New small area source dry-to-dry only, x<140 gal/yt transfer only, x<200 gal/yt both types, x<140 gal/yt (constructed on or after 12/9/91)	
	3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>4. New large area source dry-to-dry only, 140<x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,></td></x<2,>	4. New large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,>	
	This is a correct facility classification	A A □N	
	If no, please check the appropriate classification:		
	facility qualified for a general portion of facility exceeds above limits and	ermit as number above is not eligible for a general permit	i
	B. The total quantity of perchloroethylene (perc) facility was 20 gallons.	purchased within the preceding 12 months	by this dry cleaning

PART III: GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
1. Storing perchloroethylene in tightly sealed and impervious containers?	≯ □N
2. Examining the containers for leakage?	X ₹ □N
3. Closing and securing machine doors except during loading/unloading?	X . □N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	X ⊼ □и
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON MINIA
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 eithe condenser or a carbon adsorber (complete A and B below). Carbon adsorber minstalled 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?	מט אם אי
Equipped dry-to-dry machines with a closed-loop vapor venting system?	AVAD ND YD
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 basis?	OY □N Y□
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	UY UN

В.	Has the responsible official of an existing large or new large area source also:		
L.	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?	QY	ПN
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΦY	ND
	Is the temperature differential equal to or greater than 20° F?	ΩY	ПN
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?	QΥ	□N □N/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?	ΟY	□NN/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?	Ar □n
2. Maintained rolling monthly averages of perc consumption?	At □N
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	Ø¥ □N
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אָע טא
4. Maintained calibration data? (for direct reading instruments only)	AVA ND
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON NO YO
6. Maintained startup/shutdown/malfunction plan?	. At □μ
7. Maintained deviation reports?	AX □N
Problem corrected?	AX □N
8. Maintained compliance plan, if applicable?	OA ON ANY

PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	Agx □n

	Visual examination (condensed	·	rsible officia		Not.	
	·			Iaces)	\ \	
	Physical detection (airflow felt t	nrough ga	skets)	' 	Ø Ø	
	Odor (noticeable perc odor)			Losos	×	
	Use of direct-reading instrumen	tation (FII	D/PID/calori	metric tubes) dis kelo	學	¾ N/A
Use of direct-reading instrumentation (FID/PID/calorimetric tubes) If using direct-reading instrumentation, is the equipment:						
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					XX C	A\M_NC
	b. Calibrated against a (PID/FID only)?	standard	gas prior to a	and after each use	QY (a\M <mark>\</mark> n/a
	c. Inspected for leaks	and obviou	s signs of w	ear on a weekly basis?	XX C	N/A_NE
	d. Kept in a clean and	secure are	a when not i	n use?		N/ANC
	e. Verified for accurac	y by use of	f duplicate sa	amples (calorimetric only)?	OY (A\N \ NC
3. Ha	as the facility maintained a leak log	? ?			X	מב
4. Do	oes the responsible official check th	e followin	g areas for le	aks?	, ,	
	Hose connections, fittings, couplings, and valves	Ax	ПП	Muck coakers	, QY	□n∑v
	Door gaskets and seating	AX	ND	Stills	YY	□N N
	Filter gaskets and seating	₽ }×	ПΝ	Exhaust dampers	ΩY	_n □n X n
	Pumps	DA.	ΩИ	Diverter valves	$\not \bowtie_{\lambda}$	<u> П</u> и
	Solvent tanks and containers	DA	ПN	Cartridge filter housing	s 🔯	<u> Пи_</u> и
	Water separators	A_{λ}	ИП			
(said Said	hie		Horico A.	Ber	50
	Name of Responsible Office	cial (Signa	ature)	Name of Responsible Offici	al (Prin	t) & Phone
•	11) J Ga16			4/1/47		
	Inspector's Name (Please P	rint)		Date of Ins	pection	
	1 WIN not			41 98		
	Inspector's Signature			Approximate Date of	f Next In	spection
						Yes No
	G					
ndar	ry Containment for: Dry	Cleanin	g Machine	e & Storage area	ļ	Yes No []
ndar	ry Containment for: Dry	Cleanin	g Machine	<pre>% Storage area Waste area</pre>	,	K] []
ondar	ry Containment for: Dry	Cleanin	g Machine		ĺ	
				Waste area Spotting area Seal	ed [X 1 []
	l of Water from Water Se	parator	using ap	Waste area Spotting area Seal	ed [X] []

ace

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0990385

HAMID B BHATTI HAMID B BHATTI 3517 WEST BOYNTON BEACH BLVD BOYNTON BEACH FL 33436

Do NOT Remove Label

Annual Reporting Period:	18 JAN	19 98	то	31 st Dee	19 _98 _
Based on each term or condition of the 7 62-213.300, Florida Administrative Cod	-			<u> </u>	DEP Rule
If NO, complete the following:					
#1. Term or condition of the general per	rmit that has not b	een in continuous c	compliance of	during the reporting per	riod stated above:
Exact period of non-compliance: from	. —	·	to_	· · ·	
Action(s) taken to achieve compliance:	· 		_	· · · · · · · · · · · · · · · · · · ·	
Method used to demonstrate compliance	:		_		
#2. Term or condition of the general per	rmit that has not b	een in continuous c	ompliance o	luring the reporting per	iod stated above:
Exact period of non-compliance: from			to	RECEN	/ED
Action(s) taken to achieve compliance:		-	-	FIAN O	
Method used to demonstrate compliance	: <u></u>	· _	_	Bureau of Alexan	/ y &
		· 		Bureau of Air Mo & Mobile Sou	nitoring rces
As the responsible official, I hereby certify, notification are true, accurate and complete does not exceed 2,100 gallons per year for a	e. Further, my ann	ual consumption of i	perchloroeth	vlene solvent, based unon	nurchase receints
RESPONSIBLE OFFICIAL:	UD B. BH	MITTI L	اسسا	1 /s m	1.11.48
· · · · · · · · · · · · · · · · · · ·	Name (Please Prin	nt) .	S	ignature	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.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	APLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:00 TIME OUT: 11:00 TYPE OF FACILITY: DOY Clean Ing	
FACILITY NAME: Green tree Clear FACILITY LOCATION: 3517 BOYTON. BOYTON BO	Reach BIVd
RESPONSIBLE OFFICIAL: HAMID Bhatt	i PHONE NUMBER: 736-2260
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluated discrepancies were noted:	
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	~
	REO Burea &
	R 7.3
	VED 1998 Monitoring Sources
· · -	
COMMENTS:	
The Annual Compliance Certification form has been properly certification form has been properly certification.	1999
INSPECTION CONDUCTED BY:	chokshi case Print)
INSPECTOR'S SIGNATURE: Q'V. Chok	phone Number: 355-3070

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST	insp.
TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION	AND THE RESTRICTION OF THE PERSON OF THE PER
AIRS ID#: 0990385 DATE: 3-27-98 TIME IN: 10:00 TIME OUT:	TRIDO B
FACILITY NAME: Green to Dry (leaning	Citc. Horn
FACILITY LOCATION: Greentree Cleaners 3517 Boyton Beach Blvd.	Borton Touch
RESPONSIBLE OFFICIAL: HAMID BHATTI PHONE: 736-22	60
same and the same a	
CONTACT NAME:PHONE:	
PART I: NOTIFICATION	
(check appropriate box)	
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 $12/9/91$) 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 transfer only, $200 \le x \le 1,800$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr	etroleum
both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$) both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)	
5. This is a correct facility classification If no, please check the appropriate classification: facility qualified for a general permit as number above facility exceeds above limits and is not eligible for a general permit	
B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this d facility was 70 gallons.	ry cleaning

Is the responsible official of the dry cleaning facility: (check appropriate boxes) AND NO YOU 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? AYON ONA 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 ONA least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN ØN/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 condenser upon opening the door? A/MO MO YO 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? DY ON 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? DY ON ON/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after

PART III: GENERAL CONTROL REQUIREMENTS

verifying that the coolant had been completely charged?

DY DN

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

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	Да́у □м
2. Maintained rolling monthly averages of perc consumption?	MY DN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	AY 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?	אום מם צא
4. Maintained calibration data? (for applicable direct reading instruments)	באלם, אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON ANA
6. Maintained startup/shutdown/inalfunction plan?	AY ON
7. Maintained deviation reports?	AY ON ON/A
Problem corrected?	DY ON ON/A
8. Maintained compliance plan, if applicable?	מואל אם עם בם

PART VI: LEAK DETECTION AND	PART VI: LEAK DETECTION AND REPAIRS				
1. Does the responsible official conduct a	weekly (for small sources	, bi-weekly) leak detection	and repair		
inspection?			AY ON		
2. Has the facility maintained a leak log?			DAY ON		
3. Does the responsible official check the	following areas for leaks?				
Hose connections, fittings, couplings, and valves	Y ON ON/A	Muck cookers	OY ON ØNA		
Door gaskets and seating	DY ON ON/A	Stills	MY ON ON/A		
Filter gaskets and seating	AY ON ON/A	Exhaust dampers	בואס מם צם		
Pumps	AY ON ONA	Diverter valves	DY ON ON/A		
Solvent tanks and containers	אואם אם צבל	Cartridge filter housings	S DY ON ON/A		
Water separators	DY ON ONA		/		
4. Which method of detection is used by the responsible official?					
Visual examination (condensed se	olvent on exterior surfaces)	10		
Physical detection (airflow felt th	rough gaskets)				
Odor (noticeable perc odor)					
Use of direct-reading instrumenta	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)				
Halogen leak detector	``		NA		
If using direct-reading instr	umentation, is the equip	ment:	_DAN/A		
a. Capable of detecting	perc vapor concentrations	in a range of 0-500 ppm?	מם עם		
b. Calibrated against a s (PID/FID only)?	tandard gas prior to and a	fter each use	מם עם		
c. Inspected for leaks and obvious signs of wear on a weekly basis?			DY DN		
d. Kept in a clean and s	ecure area when not in use	e?	OY ON		
e. Verified for accuracy	by use of duplicate sample	es (calorimetric only)?	OY ON		

HAMID B BHATTI
Responsible Official's Name
(Please Print)

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

Responsible Official's Signature

3-2)-1998

Date of Inspection

March 1998

Approximate Date of Next Inspection

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

Spotting area Sealed

2. Disposal of Water from Water Separator using approved evaporator or contracted Wastewater service

MCF PICKS up the Waste

INSPECTION SUM				
YPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION			
IME IN: 10:30 TIME OUT: 11:0 YPE OF FACILITY: Dry Cleaning ACILITY NAME: Green tree Clea	AIRS ID :: 1099993 Known Property Country Coun			
discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED			
	2 CZZC W CZ TZCZ ZCI Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z			
COMMENTS:	•			
	•			
The Annual Compliance Certification form has been properly certified and submitted to the inspector. Peh 2000 [Approximate] INSPECTION CONDUCTED BY:				
INSPECTOR'S SIGNATURE: 2. V. Choky PHONE NUMBER: 355-3070				

PERCHLOROETHYLENE DRY CLEANERS

Anns

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	RE-INSPECTION		COMPLAINT/I	JISCOVERY	
AIRS ID#: <u>0996385</u> D FACILITY NAME: <u>CYC</u> FACILITY LOCATION: <u>3</u> RESPONSIBLE OFFICIAL: CONTACT NAME:	entree 17 Bi Boynto	o Anton	n: 10:30 Pan ex Beach Beach PHONE: 7: PHONE:	Blud LFL	<u> </u>
PART I: NOTIFICATION					
(check appropriate box) 1. New facility notified DARM 3 2. Facility failed to notify DARM					0
PART II: CLASSIFICATION		·	☐ No notificati		· · ·
Facility indicated on notification (check appropriate box)	a form that it is:	-		ut of business/pe	troleum
	e 4. 00 gal/yr dr gal/yr tra al/yr bo ssification	New large y-to-dry only, 20th types, x < onstructed or New large y-to-dry only ansfer only, 20th types, 140 onstructed or New large onstructed or New large with types and types on the new large with types of the new large with	x , $x < 140$ gal/yr $x < 200$ gal/yr $x < 140 \le x \le 2,100$ $x < 1,800$ gal/yr $x < 1,800$ gal/	Vyr rr rmine above	
B. The total quantity of perchlor facility was O gallons.	oethylene (perc) purch				cleaning

TART 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?	DY ON ON/A			
2. Examining the containers for leakage?	DY ON ON/A			
3. Closing and securing machine doors except during loading/unloading?	ZY ON			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY ON ON/A			
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ZNIA			
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 source (check appropriate boxes)	25:			
1. Equipped all machines with the appropriate vent controls?	□Y □N			
2. Equipped dry-to-dry machines with a closed loop vapor venting system?	□Y □N □N/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/oi-weekly basis?	OY ON			
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	□Y □N □N/A			

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

verifying that the coolant had been completely charged?

 \square Y \square N

	to the state of th		_	
B.	Has the responsible official of an existing large or new large area source also:			
L	Measured and recorded the exhaust temperature on the outlet side of the condenser located			
١,,	· ·			
ı	on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	$\Box \lambda$	UN	
1				
2	Measured and recorded the washer exhaust temperature at the condenser			
Ι-:	•		ON	D>***
	inlet and outlet weekly?	ЦY	UN	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠV	ON	□N/A
1	is the temperature differential edual to of greater diam 20 F?	u i	U N	UN/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,			
		OV		
	if machines are equipped with a carbon adsorber?	ЧY	UN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠV	ואכו	DNIA
	Is the perc concentration equal to or less than 100 ppm?	u ı	CIN.	UNA
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,			
į	1 .			
	or expansion; and downstream from no other inlet?	UY	UИ	\square N/A
I				
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
1				
	condenser coils?	UY	UN	□N/A
1				
6.	Routed airflow to the carbon adsorber (if used) at all times?	ПY	·Пи	□N/A
Ι.		· – -		
<u> </u>				

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

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
inspec		(10.00.00	or woodly, road constraint	MD N			
·	facility maintained a leak log?	•		OY ON			
	ne responsible official check the		;?				
	fose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	OY ON DANA			
Ι	Door gaskets and seating	MY ON ON/A	Stills	אום אם אם			
F	ilter gaskets and seating	RY ON ON/A	Exhaust dampers	אואבן אם צם			
F	Pumps -	AND NO YE	Diverter valves	N/A			
s	Solvent tanks and containers	DY ON ON/A	Cartridge filter housin	gs DY ON ON/A			
,	Water separators	MY ON ON/A					
4. Which	4. Which method of detection is used by the responsible official?						
\	Visual examination (condensed solvent on exterior surfaces)						
F	Physical detection (airflow felt through gaskets)						
	Odor (noticeable perc odor)						
τ	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)						
. 1	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?						
· .	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?						
	c. Inspected for leaks and obvious signs of wear on a weekly basis?						
	d. Kept in a clean and	secure area when not in u	se?	NO YO			
	e. Verified for accurac	y by use of duplicate sam	ples (calorimetric only)?	□У □И			

HANILD BHATTI	
Responsible Official's	Name
(Please Print)	
	,

Responsible Official's Signature

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:
1. Secondary Containment for: Dry Cleaning Machine & Storage area [] [] Waste area [] [] Spotting area Sealed []
Owner Says that he wis Considering to sessed Spotting, asoa
2. Disposal of Water from Water Separator using approved evaporator [] or contracted Wastewater service []
MCF Picks up The Waste

		ALITY GENERAL PERMIT- I SUMMARY REPORT BE	EST AVAILABLE GOPY
TYPE OF INSPECTION:	ANNUAL 🗹	COMPLAINT/DISCOVERY	RE-INSPECTION
TIME IN:	TIME OUT:	AIRS ID#:O	990 38
TYPE OF FACILITY:	s Cleanor		
FACILITY NAME:	neen tree Dri CI		DATE: 28 MOU > 3
FACILITY LOCATION: 35	17 W. Boja tous	Beach BI. A Boul	a Beech
<u> </u>		3 343	
RESPONSIBLE OFFICIAL:	tenia Bhati	PHONE NUMBER:	136 2260 ·
compliance with DEP Ru	le 62-213.300, Florida Admi	•	
discrepancies were noted:	-	valuated during this inspection, the follow	ng compliance
COMPLIANCE REQUI	REMENT/PROBLEM	follow-up action	REQUIRED
		DE DE	
		Modille Solde	, 50
•		Ces	
		•	
OMMENTS:			
·	•		
e Annual Compliance Certification	form has been properly certi	fied and submitted to the inspector.	YES NO
ATE OF NEXT INSPECTION:			
SPECTION CONDUCTED BY:_	: h Lieb	pproximate)	
SPECTOR'S SIGNATURE:	han Lu	PHONE NUMBER: 3 5	5 3070

BEST AVAILABLE COPY PERCHLOROETHYLENE DRY CLEANERS

TITLE VIGENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	a a	COMPLAINT/DISC	OVERY
AIRS ID#: 0990 385	DATE: 28 MOS O	O TIME IN	(: TIM	E OUT:
FACILITY NAME:			lleum ers	
FACILITY LOCATION:	3×17 W		y Beach,	13/2
	Bom		33436	1
RESPONSIBLE OFFICIAL	Howid BL	, ++	PHONE: 736	2210
CONTACT NAME:			PHONE:	
PART I: NOTIFICATION				
(check appropriate box)				•
1. New facility notified DAR	vi 30 days prior to startu	p		
2. Facility failed to notify DA	RM to use general perm	it		
	· .		2.7.3201	terror p agation promotion
PART II: CLASSIFICATIO	N	•	n e sent	terat english i jedan english da. Njiharan
Facility indicated on notifica (check appropriate box)			☐ No notification fo	
Facility indicated on notifica	urce	transfer only, x both types, x <	Drop store/out of trea source x < 140 gal/yr	
Facility indicated on notifical (check appropriate box) A. 1. Existing small area so dry-to-dry only, x < 140 grant transfer only, x < 200 gal/y both types, x < 140 gal/yr	urce urce 1) urce 2 2,100 gaVyr 800 gaVyr	dry-to-dry only transfer only, x both types, x < (constructed on 4. New large a dry-to-dry only transfer only, 2 both types, 140	Drop store/out of trea source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	business/petroleum
Facility indicated on notifical (check appropriate box) A. 1. Existing small area sor dry-to-dry only, x < 140 gally transfer only, x < 200 gally both types, x < 140 gallyr (constructed before 12/9/9) 3. Existing large area sor dry-to-dry only, 140 ≤ x ≤ transfer only, 200 ≤ x ≤ 1, both types, 140 ≤ x ≤ 1,30	urce	dry-to-dry only transfer only, x both types, x < (constructed on 4. New large a dry-to-dry only transfer only, 2 both types, 140	Drop store/out of trea source , x < 140 gal/yr <200 gal/yr 140 gal/yr or after 12/9/91) area source , 140 \le x \le 2,100 gal/yr 00 \le x \le 1,800 gal/yr \(\le x \le 1,800 gal/yr \)	business/petroleum
Facility indicated on notifical (check appropriate box) A. 1. Existing small area sort dry-to-dry only, x < 140 gater transfer only, x < 200 galfy both types, x < 140 galfyr (constructed before 12/9/9) 3. Existing large area sort dry-to-dry only, 140 < x < transfer only, 200 < x < 1, both types, 140 < x < 1,80 (constructed before 12/9/9) 5. This is a correct facility. If no, please check to	urce	dry-to-dry only transfer only, x both types, x < (constructed on 4. New large a dry-to-dry only transfer only, 2 both types, 140 (constructed or CAY ON tion: eral permit as not elist and is not elist.	Drop store/out of trea source , x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91) area source 1, 140 ≤ x ≤ 2,100 gal/yr 00 ≤ x ≤ 1,800 gal/yr 1 or after 12/9/91) Can not determine umber	business/petroleum

Is the responsible official of the dry cleaning facility: (check appropriate boxes) ZOY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY ON ON/A 2. Examining the containers for leakage? 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? DY DN D PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) DY DN Equipped all machines with the appropriate vent controls? DY DN DN/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the 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 DY DN DN/A condenser exceeded 45° F? Conducted all temperature monitoring after an appropriate cooldown period and after. verifying that the coolant had been completely charged? DY DN

PART III: GENERAL CONTROL REQUIREMENTS

E	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?	Ολ	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	ΩΝ	□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?	ΠY	ΠИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПŅ	□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	ПN	□n/a
5.	Equipped transfer magnines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ΩΝ	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	Ви	□N/A

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official: (check appropriate boxes)					
1. Maintained receipts for perc purchased?	ZY ON				
2. Maintained rolling monthly total of perc consumption?	ØY 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 SYN/A				
5. Maintained exhaust duct monitoring data on perc concentrations?	אואף אם צם				
6. Maintained startup/shutdown/malfunction plan?	אם עם,				
7. Maintained deviation reports?	ANO NO YE				
Problem corrected?	אוחם אם אם				
8. Maintained compliance plan, if applicable?	DY ON DAMA				

ADI	VNOITIC	LSIT	e infor	:NOITAMS					
									
H		- ,	- •		~ _	· · · · · · · · · · · · · · · · · · ·	1-1-0 C (Claram ama	Yes NO
1.	Second	lary (Contain	ment ior:	: Lity	Cleaning		Storage area	
							Waste area	71-A	
							Spotting an	ea Seateo	JV (1
•						•			
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	and Mr.		••••	•				•	`
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2.) Dispos	gt or	Marer	III mau			sing approved 1 Wastewater	d evaporator service	ויים נים רו גי∕ו
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PART VI: LEAK DETECTION AND	REPAIRS				
1. Does the responsible official conduct	a weekly (for small sour	ces, bi-weekly) leak detection	and repair		
inspection?		•	MY ON		
2. Has the facility maintained a leak log	?		ØY ON		
3. Does the responsible official check the	e following areas for lead	ks?			
Hose connections, fittings, couplings, and valves	אים אם אים	Muck cookers	OY ON DAVA		
Door gaskets and seating	AVO NO YO	Stills	אוחם אם צם		
Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY DN 289/A		
Pumps	AVO NO YÒ	Diverter valves	אואם אם צום		
Solvent tanks and containers	MY ON ON/A	Cartridge filter housings	DY ON ON/A		
Water separators	Y ON ON/A				
4. Which method of detection is used by	the responsible official?				
Visual examination (condensed	solvent on exterior surfac	es)	\(\mathbf{Z}\)		
Physical detection (airflow felt the	hrough gaskets)		Ø/		
Odor (noticeable perc odor)			zí –		
Use of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)	PMA		
Halogen leak detector			P 70		
If using direct-reading instrumentation, is the equipment:					
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
c. Inspected for leaks ar	nd obvious signs of wear	on a weekly basis?	אם צם		
d. Kept in a clean and s	ecure area when not in us	e?	אם צם		
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	OY ON		
•					
Yramo Bon Bh	ul _	\nearrow			
consible Official's Nam (Please Print)	e	Responsible Offic	cial's Signa		
Inspector's Name (Please Prin		Do Nov	00		
mapector a ryame (Please Prin	11)	Date of Inspection			
In Little		MOU	0/		
Inspector's Signature Approximate Date of Ne					

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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GREENTREE CLEANERS HAMID B BHATTI 3517 WEST BOYNTON BEACH BLVD BOYNTON BEACH FL 33436 FOR GOVERNMENT USE CONLY OF Fund: 20-2-035001 Obj.: 002273

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Fund: 20-2-035001 Obj.: 002273 THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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HAMID B BHATTI
3517 WEST BOYNTON BEACH BLVD
BOYNTON BEACH FL 33436

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Obj.: 002273



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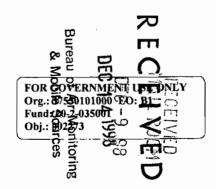
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TOTAL AMOUNT DUE: \$50.00

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AIRS ID # 0990385

GREENTREE CLEANERS HAMID B BHATTI 3517 WEST BOYNTON BEACH BLVD **BOYNTON BEACH FL 33436**

FOR GOVERNMENT USE OF Org.: 37550101000 EQ. A1 Fund: 20-2-035001

Obj.: 002273

US Postal Service Receipt for Certified Mail No Insurance Coverage Provided. 10 AIRS ID # 0990385001AG HAMID B BHATTI GREENTREE CLEANERS 3517 WEST BOYNTON BEACH BLVD BOYNTON BEACH FL 33436 Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addresse's Address TOTAL Postage & Fees Postmark or Date
HAMID B BHATTI GREENTREE CLEANERS 3517 WEST BOYNTON BEACH BLVD BOYNTON BEACH FL 33436 Certified Fee Special Delivery Fee Restricted Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address
Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address
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 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) B. Date of Delivery C. Signature Agent Addressee D. Is belivery address biffeent train term? Yes
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10 AIRS ID # 0990385001AG HAMID B BHATTI GREENTREE CLEANERS 3517 WEST BOYNTON BEACH BLVD BOYNTON BEACH FL 33436	JUN 1 2 2001 Bureau of Air Monitoring 3. Service ToeMobile Sources Contified Mail Express Mail Registered Return Receipt for Merchandise
	4. Restricted belivery? (Extra Fee)
2. Article Number (Copy from service label)	
PS Form 38 V, July 1999 Domestic R	leturn Receipt 102595-99-M-1789

