

## Department of Environmental Protection

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

Virginia B. Wetherell Secretary

September 19, 1996

Mr. Jorge Delgado Crystal Cleaners 1000 Linton Boulevard Delray Beach, Florida 33444

Dear Mr. Delgado:

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

/DD

cc: Mr. Al Grasso, Palm Beach County

## Perchloroethylene Dry Cleaning Facility Notification

## Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	JONGE DELGADO LIBIL C'HYSTRE CLESNENS
2.	Site Name (For example, plant name or number):
	CRYSTAL CLEANERS
3.	Hazardous Waste Generator Identification Number:
	FCO 98425-9283
4.	Facility Location: Street Address:
	City: Occary BEACH County: Pacm BEACH Zip Code: 33444
5.	Facility Identification Number (DEP Use):
	0990386
	Responsible Official
(6)	Name and Title of Responsible Official:
•	JORGE DECGADO
7.	Responsible Official Mailing Address: Organization/Firm: Street Address:
	City: DECANY BENCH County: Den BENCH Zip Code: 33444
8.	
	Telephone: (161) 143-7994 Fax: ( ) -
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
10.	Facility Contact Address:
	Street Address:
	City: County: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: ( ) - Fax: ( ) -

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Bureau of Air Monitoring & Mobile Sources

# #0990386

	Crystal Cleaners
	Spoke with Jorge Delgado - 9/3/96
p./3	6. Add title - Owner
P.14	1.(c) mark out "V" and initial 3. Should be new small area source
p.15	4. Should be new small area source
· · · · · · · · · · · · · · · · · · ·	W/refrig.con.
<u> </u>	
· · · <u> </u>	<del>                                     </del>

deil y .

School of the telephones.

## **Facility Information**

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit		Dry I	Ory						_
(1) w/ ref. condenser			12-179	1					
(2) w/ carbon adsorber						_			
(3) w/ no controls								1	
Washer Unit		'				-		•	4
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls		_							
Dryer Unit			·					<u> </u>	
(7) w/ ref. condenser		-	1						
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit		•	-		-				<u>'</u>
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									†"
(b) Control devices are required, but not yet installed									
(Indicate with an "X".  Existing small ar	Selec ea so	et one classifi	cation only.	) ew sr	nall area sou	rce [	]	Part II?	
Existing large are	ea so	urce [	N	ew la	rge area sour	rce [	J		

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What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)								
Existing large area source  Carbon adsorber  []	Refrigerated condenser	$\bowtie$						
New small area source Refrigerated condenser []								
New large area source Refrigerated condenser []								
	•	e e e						
5. A facility which contains non-exempt emissions to Rule 62-213.300, F.A.C. Verify that all steam and exemption criteria or that no such units exist on-site:	hot water generating unit							
boiler HP or less), and (2) are fired exclusively by no	All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.							
All steam and hot water generating units exempt No such units on-site	$\preceq$							
Equipment Monitoring a	nd Recordkeeping Infori	mation						
Check all logs which are required to be kept on-site	n accordance with the requ	uirements of this general permit:						
(a) Purchase receipts and solvent purchases								
(b) Leak detection inspection and repair								
(c) Refrigerated condenser temperature monitoring								
(d) Carbon adsorber exhaust perc concentration mon	itoring							
(e) Instrument calibration								
(f) Start-up, shutdown, malfunction plan								

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## **BEST AVAILABLE COPY**

# Please indicate with an "X" the appropriate selection: I hereby surrender all existing aipermits authorizing operation of the facility indicated in this notification form: specifically, permit number(s) No air permits currently exist to the operation of the facility indicated in this notification form. Responsible Official Certification I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

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# Department of Environmental Protection

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

David B. Struhs Secretary

October 1, 2001

Mr. Jorge Delgado Crystal Cleaner 1000 Linton Boulevard Bay A1 Delray Beach, Florida 33444

Dear Mr. Delgado:

Thank you for your submittal of the Perchloroethylene Dry Cleaner Air General Permit Notification Form. The Department received your submittal on October 1.

In reviewing your submittal, it was noted that Crystal Cleaner elected to surrender its existing Title V air general permit (AIRS ID 0990386). 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 850/921-9583.

Sincerely,

Sandra Bowman

Bureau of Air Monitoring and Mobile Sources

SB/jw Enclosure

cc: Mr. Al Grasso, Palm Beach County "More Protection, Less Process"

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# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

Bureau of Air Monitoring & Mobile Sources

TYPE OF INSPECTION: ANNUAL COM	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 1040 TIME OUT: 130	AIRS ID#: 0990386
TYPE OF FACILITY: Quy Cleamer	<u> </u>
FACILITY NAME: Ches	DATE: 5-6-97
FACILITY LOCATION: LOSO Linder	Blod Dely Bent 33244
RESPONSIBLE OFFICIAL: J Del godo	PHONE NUMBER: 56/243 77.44
Based on the results of the compliance requirements evalue compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evaludiscrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	-
•	
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The state of the s	
· · · · · · · · · · · · · · · · · · ·	
COMMENTS:	
The Annual Compliance Certification form has been properly certif	
INSPECTION CONDUCTED BY: h Liebler	ease Print)
INSPECTOR'S SIGNATURE: h Luly	PHONE NUMBER: 54(355 454)

ARMS

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## PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	ANNUAL RE-INSPECTION	COMPLAINTM	DISCOVERY	
AIRS ID#: 0990>86 DA			TIME OUT:1/13	>
FACILITY NAME:C	- by tol cla	my		
FACILITY LOCATION:	000 Maton	Blul	Dely kul	
		<u> </u>		, 7
PART I: NOTIFICATION				
(check appropriate box)				
1. Existing facility notified DARM	by 9/1/96.	12 (9		æ.
2. New facility notified DARM 30	days prior to startup			
3. Facility failed to notify DARM to	o use general permit			a
			<del></del>	
PART II: CLASSIFICATION			<u> </u>	
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source		y small area source	4	
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)	transfer both ty	dry only, x<140 gal/yr r only, x<200 gal/yr pes, x<140 gal/yr ucted 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="" g="" gal="" only,="" td="" transfer="" types,="" yr=""><td>al/yτ dry-to-α r transfer both ty</td><td>v large area source dry only, 140<x<2, 100="" ga<br="">r only, 200<x<1,800 gal="" y<br="">pes, 140<x<1,800 gal="" yr<br="">ucted on or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td>•</td><td></td></x<2,>	al/yτ dry-to-α r transfer both ty	v large area source dry only, 140 <x<2, 100="" ga<br="">r only, 200<x<1,800 gal="" y<br="">pes, 140<x<1,800 gal="" yr<br="">ucted on or after 12/9/91)</x<1,800></x<1,800></x<2,>	•	
This is a correct facility classificati	on Ox	Пи		
If no, please check the appropriate	classification:			
II	or a general permit as nu love limits and is not elig	imber above pible for a general permit		
B. The total quantity of perchloroe				

## 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? RY ON BY ON 2. Examining the containers for leakage? PIY ON 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at AY ON 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? OY ON MINA PART IV: PROCESS VENT CONTROLS In Part II-A: If classification I has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been prior to September 22, 1993 installed 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) EY ON 1. Equipped all machines with the appropriate vent controls? DY ON ONA 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 LY 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 basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the NY UN condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

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?	ΩY	ПИ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	QY	ND	
	Is the temperature differential equal to or greater than 20° F?	QΥ	ПΝ	
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	מם עם	I/A
	Is the perc concentration equal to or less than 100 ppm?	QΥ	□NN	V/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	ΟΝN	1/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	QY	ON ON	Ī/A
ó.	Routed airflow to the carbon adsorber (if used) at all times?	'ΟΥ	מם מם	Ī/A
_	,			
	<del></del>			
P.	ART V: RECORDKEEPING REQUIREMENTS			
H	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)			
H (c	as the responsible official:	۵Y	מם	
(c 1.	as the responsible official: heck appropriate boxes)	dy dy	-	
H (c 1.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased?	ØY	И□	
H (c 1.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption?	_	И□	
H (c 1.	as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:	ØY	ON ON	
H (c 1. 2. 3.	as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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	ØY ØY ØY	ои ом ои	.
Et (c 1. 2. 3. 4.	as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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?	ay ay ay	0 1 4 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1	.
H(c) 1. 2. 3. 4. 5.	as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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? (for direct reading instruments only)	4 4 4 4 4 4 4	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	.
H(c) 1. 2. 3. 4. 5. 6.	as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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? (for direct reading instruments only)  Maintained exhaust duct monitoring data on perc concentrations?	4 4 4 4 4 4 4 4 4	0	.
H(c) 1. 2. 3. 4. 5. 6.	as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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? (for direct reading instruments only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/maifunction plan?	QX QX QX QX	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	.
H (c 1. 2. 3. 5. 6. 7.	as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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? (for direct reading instruments only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?  Maintained deviation reports?	QX QX QX QX	0	.
H (c 1. 2. 3. 5. 6. 7.	As the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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? (for direct reading instruments only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?  Maintained deviation reports?  Problem corrected?	QX QX QX QX	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	.
H (c 1. 2. 3. 4. 5. 6. 7. 8.	As the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages 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? (for direct reading instruments only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?  Maintained deviation reports?  Problem corrected?	QX QX QX QX	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	.

2. Which method of detection is used by the	ne respon	nsible offic	rial?		•				
Visual examination (condensed so				d					
Physical detection (airflow felt through gaskets)									
Odor (noticeable perc odor)	<b>-</b>	<b>-</b> ,	*	<u> </u>					
Use of direct-reading instrumenta	tion (FII	D/PID/calo	rimetric tubes)	а	· N/				
If using direct-reading instrume	•								
	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 s				QΥ	$\square N / N /$				
e. Verified for accuracy	by use o	f duplicate	samples (calorimetric only)?	ΟY	ON N				
3. Has the facility maintained a leak log?				QÝ	ПИ				
4. Does the responsible official check the	followin	g areas for	leaks?						
Hose connections, fittings, couplings, and valves	ΩÝ	ПN	Muck cookers	QΥ	□৸				
Door gaskets and seating	<b>A</b> Y	ΠN	Stills	ŒΎ	_N				
Filter gaskets and seating	άχ	ΠN	Exhaust dampers	ΩY	_N				
Pumps	ØY	ПN	Diverter valves	ØY	_N_				
Solvent tanks and containers	ФY	ΠN	Cartridge filter housings	ÞΥ	_N				
Water separators	ŹΥ	ΠN							
A Junge & all	gae	6	Y JORGE E						
Name of Responsible Officia	zi (sign	ature)	Name of Responsible Official	L (Pri	int) & Pho				
h L'ebler	· >		7 lb \ 9 / Date of Inspe	ction					
Inspector's Name (Please Pri	nt)		Date of hispe	CHOIL					
	<b>`</b> .		Approximate Date of	Nevt 1	nenection				
Inspector's Signature			Approximate Date of	i voice i	arspection				
condary Containment for: Dry C	leanin	ng Machi	ne & Storage area		Yes N				
			Waste area		[][				
•	•		Spotting area Sealed	Ē	M [				
sposal of Water from Water Sepa	arator	using a	approved evaporator		r 1 r				
			Picksup Water						

# DRY CLEANER AIR QUALITY GENERAL PERMIT

ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0990386

JORGE DELGADO JORGE DELGADO 1000 LINTON BLVD **DELRAY BEACH FL 33444** 

Do NOT Remove Label

Annual Reporting Period:	1-197	19 TO	12-3	3/ 19_27
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F	•	•		n DEP Rule
If NO, complete the following:				<i>.</i> ·
#1. Term or condition of the general permit	that has not been in con-	tinuous compliance	during the reporting p	period 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 permit	that has not been in cont	inuous compliance	during the reporting p	period stated above:
Exact period of non-compliance: from		to_		
Action(s) taken to achieve compliance:				· .
Method used to demonstrate compliance:				· .
As the responsible official, I hereby certify, base notification are true, accurate and complete. For does not exceed 2,100 gallons per year for dry-to-	urther, my annual consum	ption of perchloroeth	hylene solvent, based up	on purchase receipts,
RESPONSIBLE OFFICIAL:	DE E, DA ADO ne (Please Print)		ge E Julyun Signature	<u> </u>

<sup>\*</sup>This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 9:30 TIME OUT: /	10:10 _AIRS ID#: 0990386
TYPE OF FACILITY: Doy Clear	nénez
	leaners DATE: 5-22-96
FACILITY LOCATION: 1000 Linto	on BIVd
	ach, FL 33444
RESPONSIBLE OFFICIAL: Jorge Delga	10 PHONE NUMBER: 243 - 7994
Based on the results of the compliance requirements compliance with DEP Rule 62-213.300, Florida Adv	s evaluated during this inspection, the facility is found to be in ministrative Code (F.A.C.).
Based on the results of the compliance requirements discrepancies were noted:	s evaluated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLE	M FOLLOW-UP ACTION REQUIRED
· · ·	- P -
	, c C v .
•	w E/V
	Bur 164
	Bureau of Air Monitoring  Bureau of Air Monitoring
	Soundor:
	Aces We
	·
•	
COMMENTS:	
	·
The Annual Compliance Certification form has been properly	certified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: M 37	1999
	(Approximate)
INSPECTION CONDUCTED BY:	ChoKshi.
Del al a	(Please Print) 261 PHONE NIIMBED: 355-3070
INSPECTOR'S SIGNATURE ( \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	PHONE NUMBER: ) > 3 - 3 - 7

## PERCHLOROETHYLENE DRY CLEANERS

PERO	CHLOROETF title v compliance	GENERA	L PER	MIT	RS 🗸	x RMS
TYPE OF INSPECTION:	ANNUAL		$\mathbf{X}$	COMPLAINT/D	ISCOVERY	
	RE-INSPECTIO	, ис		<b>♦</b>	Jun &	\ /,
AIRS 1D#: 0990386	DATE: 5-22	<u>-98</u>	IME I	N: 9;30 10	MYE OUS	10:40
FACILITY NAME:	rystel	Cle	er	ess "	Co Mon	
FACILITY LOCATION:	000	inte	n	Blud	Tres Oring	·
	relsar	Beau	h, 1	FL 33	441	<u> </u>
RESPONSIBLE OFFICIAL	Jorge.	Delg	ado	PHONE: 2	+3 - 9	G G Z T
CONTACT NAME:				PHONE:		177
				·		
PART I: NOTIFICATION		<del></del>				
(check appropriate box)	,					`
1. New facility notified DARM	1 30 days prior to sta	artup				
2. Facility failed to notify DAI	RM to use general pe	ermit ·				
PART II: CLASSIFICATIO	N				· · · · · · · · · · · · · · · · · · ·	
Facility indicated on notificat	tion form that it is:			☐ No notification	n form	
(check appropriate box)				☐ Drop store/out	of business/	petroleum
A.  1. Existing small area sou	rce 🗆	2. New	small a	irea source	rΧ	
dry-to-dry only, x < 140 ga				x < 140 gal/yr	7 \	
transfer only, x < 200 gal/y		-		< 200 gal/yr		li li
both types, x < 140 gal/yr			-	140 gal/yr		ļ.
(constructed before 12/9/91	)	(constru	cted on	or after 12/9/91)		
3. Existing large area sou	irce 🗆	4. New	large a	rea source	. 🗖	·
dry-to-dry only, $140 \le x \le 2$				$140 \le x \le 2,100 \text{ g}$		
transfer only, $200 \le x \le 1.8$	~ .	transfer	only, 2	$00 \le x \le 1,800 \text{ gal/}$		
both types, $140 \le x \le 1,800$ (constructed before 12/9/91				$\leq x \leq 1,800 \text{ gal/yr}$ or after 12/9/91)		
5. This is a correct facility	classification	XY	ПΝ	□Can not determ	nine	

facility qualified for a general permit as number \_\_\_\_

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

If no, please check the appropriate classification:

facility was 65 gallons.

## Is the responsible official of the dry cleaning facility: (check appropriate boxes) ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at ØY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN DXVA PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? 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?	ΠY	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ПП	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΩY	ПИ	□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?	ΩÝ	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?-	ΩY	מם	ĎN/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,	· ·		
ļ	or expansion; and downstream from no other inlet?	ΠY	ΠИ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	□N	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΩY	ΠИ	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם צלי
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;	אואם אם צ'בן
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	97 ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	אואלק אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN ØN/A
6. Maintained startup/shutdown/malfunction plan?	אם צ'עם
7. Maintained deviation reports?	אַעם אם צע
Problem corrected?	אוחם אם צבא
8. Maintained compliance plan, if applicable?	מואל אם צם

## PART VI: LEAK DETECTION AND REPAIRS

_	
1.	Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair
	inspection?
2.	Has the facility maintained a leak log? □N
3.	Does the responsible official check the following areas for leaks?
	Hose connections, fittings, couplings, and valves DY DN DN/A Muck cookers DY DN DN/A
	Door gaskets and seating DY ON ON/A Stills DY ON ON/A
	Filter gaskets and seating DY ON ON/A Exhaust dampers OY ON ON/A
	Pumps DY ON ON/A Diverter valves DY ON ON/A
	Solvent tanks and containers DY DN DN/A Cartridge filter housings DY DN DN/A
	Water separators DY 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?  UY UN
	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 use?
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?

(Please Print)

Inspector's Signature

Responsible Official's Signature

Date of Inspection

ADDITIONAL SITE INFORMATION:	
Yes NO  1. Secondary Containment for: Dry Cleaning Machine & Storage area [/] [  Waste area [/] [  Spotting area Sealed [/] [	
2. Disposal of Water from Water Separator using approved evaporator [ ] or contracted Wastewater service [ ] [	1
Safety Clean pichs lep the Waste Once a monte Gree owner Phanix Joson & FDEP Cale	7
(Kave Owner Phanix Joson & FDEP Cale	nd =
for Record Keeping	

## BEST AVAILABLE COPY

# TITLE VAIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:15 TIME OUT: 11:08	OFCE AIRS 10 =: 0990 386
TYPE OF FACILITY: Doy Cleaning	28 1999
FACILITY NAME: Chrystal Clean	er SJUL 20 Monitoring DATE: 6-11-99
FACILITY LOCATION: 1000 Linton	Blares of Air Monitoring DATE: 6-11-99  8 Mobile Sources
Delvay Beach	1, 14 55444
RESPONSIBLE OFFICIAL: Jorge Delgade	PHONE NUMBER: 243-7994
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra	•
Based on the results of the compliance requirements evaluadiscrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
• •	·
· ·	
COMMENTS:	•
	•
	•
The Annual Compliance Certification form has been properly certification form has been properly certification.	Ted and submitted to the inspector. YES NO
INSPECTION CONDUCTED BY: R.V. Cho	pproximate) KShi'
INSPECTOR'S SIGNATURE: A. V. Chokshi	PHONE NUMBER: 355-3070

## **BEST AVAILABLE COPY**

## PERCHLOROETHYLENE DRY CLEANERS

# TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL



COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS ID#: 0990386 DATE: 6-11-97	TIME IN: 10:15 TIME OUT: 11:00
FACILITY NAME: Chrystel	
FACILITY LOCATION: 1000 Lin	ton Blvd
Delsay E	seach, FL 33444
RESPONSIBLE OFFICIAL: Jorge	Delga HONE: 243-7994
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to starti	up qu
2. Facility failed to notify DARM to use general perm	nit 🚨
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box)	
(check appropriate box)	☐ Drop store/out of business/petroleum
A.	
A.  1. Existing small area source	2. New small area source dry-to-dry only, x < 140 gal/yr
A.  1. Existing small area source  dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr
A.  1. Existing small area source  dry-to-dry only, x < 140 gal/yr	2. New small area source dry-to-dry only, x < 140 gal/yr
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
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	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
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	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
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	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
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	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
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)	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91)  Can not determine
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 gen	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91)  Can not determine  tion: eral permit as number above
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 gen	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)  4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91)  Can not determine

r:

## PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) ZY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? Y ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at ZY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DXIA beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS . In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the ZY 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?

## **BEST AVAILABLE COPY**

B. Has the responsible official of an existing large or new large area source also:	
Measured and recorded the exhaust temperature on the outlet side of the condenser on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	located
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ON/A
Is the temperature differential equal to or greater than 20° F?	DY DN DN/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying sycle while the machine is venting to the adsorber,	DV DV DV
if machines are equipped with a carbon adsorber?	AVA NO YO
Is the perc concentration equal to or less than 100 ppm?	OY ON ON/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,	on,
or expansion; and downstream from no other inlet?	OY ON ON/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY DN DN/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

## PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following DY ON ON/A a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days MY ON ON/A and parts installed w/in 5 days of receipt? DY DN ØN/A 4. Maintained calibration data? (for applicable direct reading instruments) DY ON ZNA 5. Maintained exhaust duct monitoring data on perc concentrations? DY DN 6. Maintained startup/shutdown/malfunction plan? AY ON ONA 7. Maintained deviation reports? Problem corrected? DY DN PANA 3. Maintained compliance plan, if applicable?

PAR	TVI: LEAK DETECTION AND	REPAIRS		
I. D	oes the responsible official conduct	a weekly (for small sourc	es, bi-weekly) leak detectio	on and repair
ir	spection?	•		DY ON
2. H	as the facility maintained a leak log	?		DY ON
3. D	oes the responsible official check the	ne following areas for leak	s?	
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	DY DN DN/A
	Door gaskets and seating	AVO NO YO	Stills	DY ON ON/A
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY DN ON/A
	Pumps	אוחם אם עם	Diverter valves	AVO NO YD
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housing	ngs DY ON ON/A
	Water separators	ANO NO YES	·	
4. V	/hich method of detection is used b	y the responsible official?		<i></i>
	Visual examination (condense	d solvent on exterior surface	ces)	
	Physical detection (airflow felt	through gaskets)		
	· Odor (noticeable perc odor)			
	Use of direct-reading instrume	ntation (FID/PID/calorime	etric tubes)	PIA
	· Halogen leak detector			NA
	If using direct-reading in	strumentation, is the equ	ipment:	DN/A
	a. Capable of detecti	ng perc vapor concentratio	ns in a range of 0-500 ppm	אם צם ?
	b. Calibrated against (PID/FID only)?	a standard gas prior to and	I after each use	ם אם א
	c. Inspected for leak	s and obvious signs of wea	r on a weekly basis?	ПА ПИ
		d secure area when not in t		אם עם
	e. Verified for accur	acy by use of duplicate san	nples (calorimetric only)?	ПА ПИ
	;	•	•	
				20.204

JORGE	É	E DEL	GADO
esponsible	Off	Eicial's	Name
(Plea	se	Print)	

Pa. V. Chokshi'
Inspector's Name (Please Print)

Inspector's Signature

6-11-99 Date of Inspection

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:
Yes NO  1. Secondary Containment for: Dry Cleaning Machine & Storage area [ ] [ ]  Waste area [ ] [ ]  Spotting area Sealed [ ] [ ]
2. Disposal of Water from Water Separator using approved evaporator [ ] or contracted Wastewater service [ ]
Sasety Kleen picks up The Waste Wester Collecto clean
Asked owner to keep area a coound dry cleaning mechine. There is some
cotton dust around, and on madine and spotting board.

:

# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

WEST
(1990)

TYPE OF INSPECTION: ANNUAL X	OMPLAINT/DISCOVERY RE-INSPECTION
TIME IN:TIME OUT:	AIRS ID#: 0990386
TYPE OF FACILITY: Day Cleaning	
ı , , , , , , , , , , , , , , , , , , ,	DATE: 7/21/00
FACILITY LOCATION: 1000 A LINTON BIND	
Deleay Beach, Fl	
RESPONSIBLE OFFICIAL: Joege Deigado	PHONE NUMBER: 243 - 2794
122	
Based on the results of the compliance requirements eval discrepancies were noted:	uated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	P
	- Burgar of L
	Dille Source
Control of the contro	
COMMENTS:	<u> </u>
IME IN: TIME OUT: AIRS ID#: Q 970 386  TYPE OF FACILITY: De. Cleanes S DATE: 7/21/02  ACILITY LOCATION: MOO A Lindon BIJD  TESPONSIBLE OFFICIAL: JORSE Deligado PHONE NUMBER: 243 - 2794  Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213 300, Florida Administrative Code (F.A.C.)  Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:  COMPLIANCE REQUIREMENT/PROBLEM FOLLOW-UP ACTION REQUIRED  DMMENTS:  THE OUT: AIRS ID#: Q 970 386  PHONE NUMBER: 243 - 2794  PHONE NUMBER: 243 - 2794  FOLLOW-UP ACTION REQUIRED  DMMENTS:  TO STATE OF NEXT INSPECTION: YES NO (Approximate)  (Approximate)  (Approximate)  (Please Print)	
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	
Inspection conducted by:	bler
(PI)	ease Print)  Prione Number 305 30 70

Revised 10/96

Page of

## PERCHLOROETHYLENE DRY CLEANERS

both types,  $140 \le x \le 1,800$  gal/yr (constructed before 12/9/91)

facility was 40 gallons.

5. This is a correct facility classification

If no, please check the appropriate classification:

## V GENERAL PERMIT

ALABLE OOI	COMPLIAN	CE-INSPECTION	N CHECKLIST	W	
TYPE OF INSPECTION:	ANNUAL RE-INSPEC	X noit	COMPLAINT	VDISCOVERY	۵
AIRS ID#: <u>0990386</u>	DATE: 71 21	Loo TIME	E IN:	TIME OUT:	
FACILITY NAME:CR	ystal Clann	nes			_
FACILITY LOCATION:					
_	Deleny Ben	L, F1 334	44		
RESPONSIBLE OFFICIAL :	•	•		43 - 7994	'
CONTACT NAME:		_	PHONE:		
. New facility notified DARM  . Facility failed to notify DAR	•	•			_ _
					g(4)
ART II: CLASSIFICATION					
'acility indicated on notification check appropriate box)	on form that it is:	•	☐ No notification ☐ Drop store/ou	on form ut of business/pe	troleum
1. Existing small area sour dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	'yr	transfer only, x both types, x <	y, x < 140 gal/yr x < 200 gal/yr	×	
3. Existing large area source dry-to-dry only, $140 \le x \le 2$ , transfer only, $200 < x < 1.800$	100 gaVyт		area source v, 140 ≤ x ≤ 2,100 g 200 ≤ x ≤ 1,800 gal/		,

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning

 $\Box$ Y

facility qualified for a general permit as number \_\_\_\_\_ above

facility exceeds above limits and is not eligible for a general permit

both types,  $140 \le x \le 1,800$  gal/yr

□Can not determine

(constructed on or after 12/9/91)

ΠN

## PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY ON ON/A 2. Examining the containers for leakage? MD AM 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN XVIVA 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) ZY DN 1. Equipped all machines with the appropriate vent controls? MY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the AYO NO YE condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after DÝ DN verifying that the coolant had been completely charged?

E	3. Has the responsible official of an existing large or new large area source also:	-	
1	. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	□ <i>7.</i> □ <i>N</i>	
2	. Measured and recorded the washer exhaust temperature at the condenser		<b>D</b>
	inlet and outlet weekly?	DY DN	UN/A
	Is the temperature differential equal to or greater than 20° F?	OY ON	□N/A
3.	Measured and recorded the peroconcentration 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	□N/A
	Is the perc concentration equal to or less than 100 ppm?	NO YO	□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?	אם עם נ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ט אם צם	א/א⊏
6.	Routed airflow to the carbon adsorber (if used) at all times?	ט אם צם	⊃N/A

## PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) MAD AM 1. Maintained receipts for perc purchased? מם אַם 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: DY 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 ZY ON ON/A and parts installed w/in 5 days of receipt? ANNA NO YO 4. Maintained calibration data? (for applicable direct reading instruments) DY DN XY/A 5. Maintained exhaust duct monitoring data on perc concentrations? אם צבא 6. Maintained startup/shutdown/malfunction plan? DY ON ON/A 7. Maintained deviation reports? MY ON ON/A Problem corrected? DY DN XXVA 8. Maintained compliance plan, if applicable?

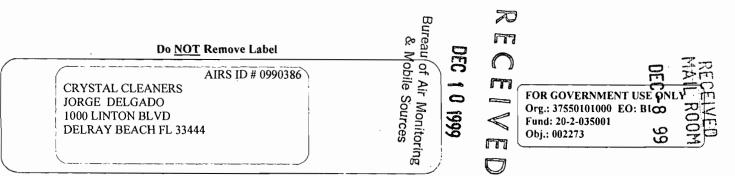
VD1	DITIONALSI	ITE INFORMATION:				
1.	Secondary	Containment for:	Dry Cleaning	g Machine & Storage area Waste area	Yes N	Σ ]
				Spotting area Sealed	[]	]
		•		·		
	11 m 11 m			· ·	ra p	/
2.	Disposal c	of Water from Wate	·	sing approved evaporator	ra r	ر []
	·	<b>\</b>	or contracte	d Wastewater service :	11 .	1
	1					
	`					
				evineers		
	; ·					
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PART VI: LEAK DETECTION AND	REPAIRS			_].
1. Does the responsible official conduct	a weekly (for small sourc	es, bi-weckly) leak detection	and repair	7
inspection?			ØÝ □N	
2. Has the facility maintained a leak log	?	•	BY ON	1
3. Does the responsible official check th	e following areas for leak	s?		
Hose connections, fittings, couplings, and valves	OY ON ON/A	Muck cookers	DY DN MINA	
Door gaskets and seating	DY ON ON/A	Stills	ØY □N □N/A	
Filter gaskets and seating	MY ON ON/A	Exhaust dampers	DY DN MINIA	
Pumps .	GY ON ON/A	Diverter valves	DY ON ON/A	
Solvent tanks and containers	AY ON ON/A	Cartridge filter housings	DY ON ON/A	
Water separators	ANO NO YÒ			
4. Which method of detection is used by	the responsible official?			
Visual examination (condensed s	solvent on exterior surface	s)	<b>2</b>	
Physical detection (airflow felt the	rough gaskets)			
Odor (noticeable perc odor)			Ø	
Use of direct-reading instruments	ation (FID/PID/calorimetr	ic tubes)	Ø vv	
Halogen leak detector			NA	
If using direct-reading instr	umentation, is the equip	ment:	<b>X</b> N/A	
a. Capable of detecting	מם עם			
b. Calibrated against a s (PID/FID only)?	standard gas prior to and a	fter each use	אם עם	
c. Inspected for leaks ar	nd obvious signs of wear o	n a weekly basis?	מם צם	
d. Kept in a clean and se	ecure area when not in use	?	מם עם	
e. Verified for accuracy	by use of duplicate sample	es (calorimetric only)?	OY ON	
·	•	$\mathcal{A}$		
onsible Official's Name		Responsible Office	cial's Signa	a ti
(Please Print)	•		DIGIIC	
Increases a None (Place Pri		7/21/00	·	
Inspector's Name (Please Prin	11)	Date of Inspection		
ha Lind		7/01	<u> </u>	
Inspector's Signature		Approximate Date of N	lext Inspection	

389185

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**TOTAL AMOUNT DUE: \$50.00** 

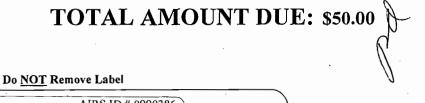




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AIRS ID # 0990386 CRYSTAL CLEANERS JORGE DELGADO 1000 LINTON BLVD DELRAY BEACH FL 33444

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001
Obj.: 002273

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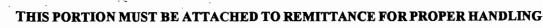
AIRS ID # 0990386

CRYSTAL CLEANERS JORGE DELGADO 1000 LINTON BLVD **DELRAY BEACH FL 33444** 

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273



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JORGE DELGADO JORGE DELGADO 1000 LINTON BLVD **DELRAY BEACH FL 33444**  FOR GOVERNMENT USE ONLY

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

Obj.: 002273

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AIRS ID # 0990389 FAMILY ONE PRICE DRY CLEANING HERBERT SEIGEL 5044 W ATLANTIC AVE DELRAY BEACH FL 33484 50.00

BORGOVERNMENT CONLY

One: 37550101000 EO: B1

Fund: 29-2-035001

Obj:: 002-73

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Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

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	Certified Fee	
	Special Delivery Fee	
10	Restricted Delivery Fee	
1996	Return Receipt Showing to Whom & Date Delivered	
, April 1995	Return Receipt Showing to Whom, Date, & Addressee's Address	
800	TOTAL Postage & Fees	\$
PS Form <b>3800</b>	Postmark or Date	

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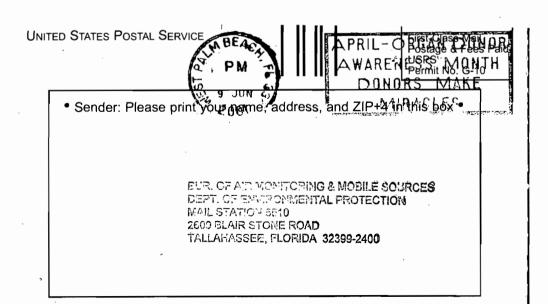
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DARM/MOBILE SOURCE CONTROL PROGRAM DEPT. OF ENVIRONMENTAL PROTECTION MAIL STATION 5510 2500 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

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J( C 1(	10 AIRS ID # 0990386001AG JORGE DELGADO CRYSTAL CLEANERS 1000 LINTON BLVD DELRAY BEACH FL 33444								
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	Special Delivery Fee								
	Restricted Delivery Fee								
1995	Return Receipt Showing to Whom & Date Delivered								
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(	* M
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■ Complete items 1, 2, and 3. Also complete items 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  Addressee
1. Article Addressed to:  10 AIRS ID # 0990386001AG  JORGE DELGADO  CRYSTAL CLEANERS	JUN 1 2 2001
1000 LINTON BLVD DELRAY BEACH FL 33444	3. Service Type    Continue   Co
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label) 2 210 662 854	
PS Form 3811, July 1999 Domestic Retu	urn Receipt 102595-99-M-1789

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orii 199	Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom,	
300, A	Date, & Addressee's Address  TOTAL Postage & Fees	\$
PS Form <b>3800</b> , April 1995	Postmark or Date	
PS	• • •	

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 can return this card to you.  Attach this form to the front of the mailpiece, or on the back if space does not permit.  Write "Return Receipt Requested" on the mailpiece below the article number.  The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive following services extra fee):  1.  Addresse 2.  Restricter Consult postmast	s (for an ee's Address d Delivery
IN ADDRESS completed of	3. Article Addressed to:  AIRS ID # 0990386  CRYSTAL CLEANERS  JORGE DELGADO  1000 LINTON BLVD  DELRAY BEACH FL 33444	4b. Service ☐ Registere ☐ Express I	Type  ad  Mail  ceipt for Merchandise	Certified
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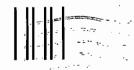
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