

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

December 9, 1996

Mr. Richard Jordan Broadway Cleaners 2785 Broadway Riviera Beach, Florida 33404

Facility I.D. No. 0990448

Dear Mr. Jordan:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 16, 1996.

Please note that in November of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and 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/jw

cc: Mr. Al Grasso, Palm Beach County

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

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1 Facility Owner	-/CNa (Ma	C		(A. al assumant)					
Facility Owner/Company Name (Name of corporation, agency, or individual owner):									
DR. CLEAN III									
2. Site Name (Fo	2. Site Name (For example, plant name or number):								
BROADU	BROADWAY CLEANERS								
3. Hazardous W	aste Generator Identificat	ion Number:							
3 30100	<u>· </u>								
4. Facility Locat	ion:	·							
City: Riu,	Roh.	County: PAL	m Roach	Zip Code: <i>33404</i>					
Ony. 16107	POIN	County. 177	,, Bell-I	21,5 0000. 33 404					
5. Facility Identi	fication Number (DEP_U	se):							
		Attaches	.	0990448					
united H			t de la companya de	THE CALL CALL CALL					
		Responsible O	fficial						
6. Name and Tit	e of Responsible Officia	l:							
RichA	rd Jordan								
	Official Mailing Address:								
	Firm: BROADWA	u cleane	275						
Street Address	: 2185 BROA	DWAY							
City: RIV.	Bch.	County: P	ILM BEAC	h Zip Code: 33404					
8. Responsible C	Official Telephone Numb	er:							
Telephone:	(561)845-05	32	Fax: ()	-					
	Facility Contact	(If different fro	m Responsible (Official)					
9. Name and Tit	le of Facility Contact (Fo	r example, plant	manager):						
		<u>.</u>	- /						
10 Facility Comto	at Addraga:								
10. Facility Conta	CI Address:								
Street Address	::								
City:		County:		Zip Code:					
11 Facility Conta	at Talanhana Namha								
Telephone:	ct Telephone Number:		Fax: ()	-					
p	,		()						
			_						

RECEIVED

SEP 1 6 1996

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

Bureau of Air Monitoring & Mobile Sources

#0990448 #10-14-96 Spoke to Richard Jordan, he is President

P.13 G add title-President P.14 1. (b) should be marked, not (c)

3. existing large area Source should be marked

P.15 (f) should be marked

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.

Type of Machine ID Purchased Installed ID Purchased Installed			Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device		Date Machine Initially	Date Control Device
Dry-to-Dry Unit (1) w/ ref. condenser	Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
(1) w/ ref. condenser X 9-95	Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
(1) w/ref. condenser	Dry-to-Dry Unit	en de esta					production of			
(2) w/ carbon adsorber (3) w/ no controls (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls (7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ carbon adsorber (12) w/ no controls (13) w/ arbon adsorber (12) w/ no controls (13) w/ arbon adsorber (14) w/ carbon adsorber (15) w/ no controls (15) w/ no	(1) w/ ref. condenser	$\overline{\mathbf{x}}$	9-85		·		Ï			
Washer Unit (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls (7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (9) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ carbon adsorber (12) w/ no controls (14) w/ carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ carbon adsorber (18) w/ carbon adsorber (19) w/ carbon adsorber (10) w/ carbon adsorber (11) w/ carbon adsorber (12) w/ carbon a	(2) w/ carbon adsorber									
(4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls	(3) w/ no controls									
(4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls (7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (9) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (11) w/ carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ carbon adsorber (12) w/ no controls (14) w/ carbon adsorber (15) w/ no controls (16) w/ carbon adsorber (17) w/ carbon adsorber (18) w/ carbon adsorber (19) w/ no controls (19) w/ carbon adsorber (19) w/ no controls (19) w/ carbon adsorber (19) w/ carbon	Washer Unit	11 P 11					i ta		10.19.40.4.	. 4 - 44
Column C	(4) w/ ref. condenser									
Dryer Unit (7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ no control devices are required to be installed (15) w/ control devices are required to be installed (16) w/ carbon adsorber (16) w/ control devices are required to be installed (17) w/ carbon adsorber (18) w/ carbon adsorber (19) w/ controls (19) w/ c	(5) w/ carbon adsorber									
(7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ no controls (14) w/carbon adsorber (15) w/ no control devices are required, but not yet installed (15) w/carbon adsorber (16) w/carbon adsorber (17) w/carbon adsorber (18) w/carbon adsorber (19) w/carbon adsorber	(6) w/ no controls									
(8) w/ carbon adsorber (9) w/ no controls Reclaimer Unit (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (b) Control devices are required, but not yet installed [] (c) No control devices are required to be installed [] 2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? [Dryer Unit				1,1	tina di Sila		11 p. 11		10000
(9) w/ no controls	(7) w/ ref. condenser									
Reclaimer Unit (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (b) Control devices are required, but not yet installed (c) No control devices are required to be installed 2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? 2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? (b) If less than 12 months, how many? months Check why it is less than 12 months: New owner: New store: Did not keep records: 3. What is the facility's source classification based on the definitions found in section (3) of Part II? (Indicate with an "X". Select one classification only.)	(8) w/ carbon adsorber									
(10) w/ref. condenser (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (12) w/ no controls (13) w/carbon adsorber (14) w/no controls (15) w/no controls (16) w/no control devices are required, but not yet installed [17] (18) w/no control devices are required to be installed [17] (19) w/no control devices are required to be installed [17] (19) w/no control devices are required to be installed [17] w/no control devices are required to be installed [17] w/no control devices are required to be installed [17] w/no control devices are required, but not yet installed [17] w/no controls (12) w/no controls (13) w/no controls (12) w/no controls (12	(9) w/ no controls									
(10) w/ref. condenser (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (12) w/ no controls (13) w/carbon adsorber (14) w/no controls (15) w/no controls (16) w/no control devices are required, but not yet installed [17] (18) w/no control devices are required to be installed [17] (19) w/no control devices are required to be installed [17] (19) w/no control devices are required to be installed [17] w/no control devices are required to be installed [17] w/no control devices are required to be installed [17] w/no control devices are required, but not yet installed [17] w/no controls (12) w/no controls (13) w/no controls (12) w/no controls (12	Reclaimer Unit	أسيدات		tus ty ear						
(b) Control devices are required, but not yet installed	(10) w/ ref. condenser									
(b) Control devices are required, but not yet installed (c) No control devices are required to be installed 2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? [240] gallons (b) If less than 12 months, how many? [] months Check why it is less than 12 months: New owner: [] New store: [] Did not keep records: [] 3. What is the facility's source classification based on the definitions found in section (3) of Part II? (Indicate with an "X". Select one classification only.)	(11) w/carbon adsorber									
 (c) No control devices are required to be installed	(12) w/ no controls									
(Indicate with an "X". Select one classification only.)	(c) No control devices 2.(a) What was the total of the second of the se	are requanting gallo	equired to be ity of perchlons ons	installed [_ oroethylene (] months	perc)	purchased in				
Existing large area source [] New large area source []	(Indicate with an "X". Existing small ar	Selec	t one classifi urce [X]	cation only.) Ne	ew sn	nall area sour	rce [3) of	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Part II of this nothication form?
(<u>X</u>)
o use the general permit pursuant is on-site meet the following O million BTU/hr or less (298 ds of natural gas curtailment fired.
nation
nirements of this general permit:
(X)
(<u>X</u>)
(X)

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please indicate	e with an "X" the appropriate selection:
	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
ĽΣ	No air permits currently exist for the operation of the facility indicated in this notification form.
·	Responsible Official Certification
this notific statements maintain i	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the smade 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 it it it is all terms and conditions of this general permit as set forth in Part II of this notification form.
I will pro	nptly notify the Department of any changes to the information contained in this notification.
Signature	<u>9-/0-9 6</u> Date

	-	N SUMMARY REPORT	
TYPE OF INSPECTION:	ANNUAL 🗹	COMPLAINT/DISCOVERY .	RE-INSPECTION
TIME IN:	TIME OUT:	AIRS ID#:	0996 448
TYPE OF FACILITY:	· Cleumer		
FACILITY NAME:	oudwa, Clea	emev7	DATE: Lo Ma OU
FACILITY LOCATION:	2785! Browler	ul priere Bent	33 402
		/	<u> </u>
RESPONSIBLE OFFICIAL:	•	PHONE NUMBER:	845 0530
compliance with DEP Ru	le 62-213.300, Florida Adr		
discrepancies were noted:	•	evaluated during this inspection, the follo	owing compliance
COMPLIANCE REQUI	REMENT/PROBLE	M FOLLOW-UP ACTION	ON REQUIRED
		•	
			R
•		of R	CEI
		ir Monitoring e Sources	VED
		, ga	
OMMENTS:			
	•		•
e Annual Compliance Certification	form has been properly cer	tified and submitted to the inspector.	YES NO
TE OF NEXT INSPECTION:	· Nov	o(
SPECTION CONDUCTED BY:_	: ha Lieb	Approximate) (0 /~ Please Print)	
SPECTOR'S SIGNATURE:	- Lu	•	5 3070
· -			Pavised 10/96

Best Available Copy
PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: AMNUAL	COMPLAINT/DISCOVERY -
RE-INSPECTIO	D NO
AIRS ID#: 0 996448 DATE: 16 MES 1	TIME IN: TIME OUT:
FACILITY NAME: Browning	Claimers
FACILITY LOCATION: 2785	Broadwag Riviera Beach
	33400
RESPONSIBLE OFFICIAL: Ker Galle	
CONTACT NAME:	PHONE: 845 073L
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to star	rtup 🖸
2. Facility failed to notify DARM to use general per	rmit 🗆
	the second secon
PART II: CLASSIFICATION	ne en la companya de
PART II: CLASSIFICATION Facility indicated on notification form that it is: (check appropriate box) A.	□ No notification form □ Drop store/out of business/petroleum
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	•
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
Facility indicated on notification form that it is: (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification If no, please check the appropriate classification	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 \(\leq x \leq 2,100\) gal/yr transfer only, 200 \(\leq x \leq 1,800\) gal/yr both types, 140 \(\leq x \leq 1,800\) gal/yr (constructed on or after 12/9/91)

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN DN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY ON ONA 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? עמעם אם צם 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 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 DN DN/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after ØY ON verifying that the coolant had been completely charged?

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

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם צם
2. Maintained rolling monthly total of perc consumption?	DX ON
3. Maintained leak detection inspection and repair reports for the following:	. /
a. documentation of leaks repaired w/in 24 hrs? or;	ANA NO YES
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 BAN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	אואפו אם צם
6. Maintained startup/shutdown/malfunction plan?	' אם צום
7. Maintained deviation reports?	אואם אם צים
Problem corrected?	DY ON ON/A
8. Maintained compliance plan, if applicable?	DY ON DAMA

ADI	ITIONAL SI	TE INFORMATIO)N:	. •			
1.	Secondary	Containment	for: D	ry Cleaning	Machine & S	torage area	Yes NO
				<u>.</u>	Waste area	_	1/1
					Spotting and	ea Sealed	111
•				·			
				·.	•		
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		*					
	and any					•	,
၁	Diemes 1	of Water from	Watan C	'annunkau ma			
2.	. Distribute of	of Water from			ing approved Wastewater		(x, y)
		`	Cu.	Conclucio	:	J. 72.00	Υ,
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	I: LEAK DETECTION AND			-
1. Does t	the responsible official conduc	t a weekly (for small sour	ces, bi-weekly) leak detection	· , · · · ·
inspec	ction?		•	DV ON
2. Has th	e facility maintained a leak log	? `		DY DN
3. Does t	he responsible official check th	ne following areas for leak	ks?	
I	lose connections, fittings, couplings, and valves	AND NO YE	Muck cookers	באלאקט אם צם
I	Door gaskets and seating	אואם אם עם	Stills	DN ON/A
F	ilter gaskets and seating	אואם אם אם	Exhaust dampers	אואפו אם צם
P	dumps .	DY ON ON/A	Diverter valves	ANO NO YES
S	olvent tanks and containers	ØY ON ON/A	Cartridge filter housings	DY ON ON/A
V	Vater separators	AND NO YE		
4. Which	method of detection is used by	the responsible official?		
v	isual examination (condensed	solvent on exterior surface	ės)	4
Pl	hysical detection (airflow felt t	hrough gaskets)		1
. 0	dor (noticeable perc odor)			1
. U	se of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)	et Mn
Н	alogen leak detector		·	Q MA
	If using direct-reading inst	rumentation, is the equip	oment:	NA
		perc vapor concentrations		OY ON
٠	b. Calibrated against a (PID/FID only)?	standard gas prior to and a	after each use	אם צם
	c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	מם עם
	d. Kept in a clean and s	ecure area when not in us	e?	מם צם
·.	e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	אם עם
φ	Then Sell	/ ×		<u>.</u>
	le Official's Nam lease Print)	é	Responsible Offi	cial's Sign
m	Liebler		1 Nov	00
	Inspector's Name (Please Pri	nt)	Date of Inspection	
4	m Lule		Nov	0)
	Inspector's Signature			

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

RECEIVED MAIL ROOM

FEB -4 97

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 0990448

DR. CLEAN III RICHARD JORDAN 2785 BROADWAY

RIVIERA BEACH FL 33404

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Оыј.: 002273

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL CO	MPLAINT/DISCOVERY RE-INSPECTION
	0 AIRS ID#: 0990448
TYPE OF FACILITY: DDY Clening FACILITY NAME: BROADWAY CLE FACILITY LOCATION: 2785 BY	FANERS DATE: 2-21-97
Riviera Bouch, F DESPONSIBIE OFFICIAL Richard Jorda	1 33404 10 05-22
ALSI ONSIBEL OF FIGURE.	nPHONE NUMBER: 845-0532
Based on the results of the compliance requirements evalucompliance with DEP Rule 62-213.300, Florida Administration	rative Code (F.A.C.).
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
	-
and the second s	
COMMENTS:	
· · · · · · · · · · · · · · · · · · ·	
The Annual Compliance Certification form has been properly certification form has been properly certification. DATE OF NEXT INSPECTION: $2-2$	-98
INSPECTION CONDUCTED BY: R-V-CF	oroximate)
	ease Print) PHONE NUMBER: 355-3070

ARMS V

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL

RE-INSPECTION



COMPLAINT/DISCOVERY

YPE OF MOPECTION: ANYOAL

AIRS ID# 0990448DATE: 2-21-97 TIME IN: 1:00 TIME OUT: 1:50

FACILITY LOCATION:

Riv. Beach, FL 33404

PART I: NOTIFICATION

(check appropriate box)

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

PART II: CLASSIFICATION

Facility indicated on notification form that it is: (check appropriate box)

- 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)

This is a correct facility classification.

- 2: New small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed on or after 12/9/91)
- 4. New large area source dry-to-dry only, 140<x<2, 100 gal/yr transfer only, 200<x<1,800 gal/yr both types, 140<x<1,300 gal/yr (constructed on or after 12/9/91)



 \Box N

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 dry cleaning facility was 240 gallons.

Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at

5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

OY ON XN/A

PART IV: PROCESS VENT CONTROLS

least 24 hours prior to disposal?

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)

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

B. Has the responsible official of an existing large or new large area source also:	
Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ot on
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	AY ON
Is the temperature differential equal to or greater than 20° F?	AT ON
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	OY ON XIVA
Is the perc concentration equal to or less than 100 ppm?	OY ON X NIA
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	OY ON A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON XVA
6. Routed airflow to the carbon adsorber (if used) at all times?	DY DN COM/A
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	AT ON
2. Maintained rolling monthly averages 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;	dyy on
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
4. Maintained calibration data? (for direct reading instruments only)	OY ON XNA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON XNA
6. Maintained startup/shutdown/malfunction plan?	AX ON
7. Maintained deviation reports?	pγ □n
Problem corrected?	AL ON
8. Maintained compliance plan, if applicable?	OY ON AVA
PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	ØX □N

177		an in card hard		aib!~				<u>.</u>		
2. Whic	ch method of detecti		-					~		
	Visual examination	•			surfaces)			LΔ\ rb√		
	Physical detection	· ·	ough gas	skets)				X		
	Odor (noticeable pe							PA.		
	Use of direct-reading	ng instrumenta	tion (FID	/PID/ca	lorimetric	tubes)		<u> </u>		
	If using direct-rea	iding instrume	ntation,	is the e	quipment:				,	
	a Capabl	e of detecting p	perc vapo	r concer	itrations in	a range of 0-500 p	pm?	QΥ (DN ZIV	A_{Γ}
		ited against a s ID only)?	tandard g	gas prior	to and afte	er each use		OY (ъ γ мс	A
	c. Inspect	ed for leaks an	d obvious	s signs o	f wear on a	weekly basis?		QY (ν', א _ב	١,
	d. Kept ir	a clean and se	ecure area	a when i	not in use?			QY (NC	<i>†</i>
	e. Verifie	d for accuracy	by use of	duplica	te samples	(calorimetric only)	?	QY (NC X	X
3. Has	the facility maintain	ed a leak log?						QY (DN X	<i>;</i>
4. Does	the responsible offi	cial check the	following	g areas fo	or leaks?				1 4	
	Hose connections, couplings, and va	J ,	φÃ	ZИ		Muck cookers		ΟY	ON X	NA
	Door gaskets and s	eating -	₽ Y	ПΩ		Stills ·	,	de y	ם אם	4.4
	Filter gaskets and	seating	₩¥	ПN		Exhaust dampers		OY.	ON X	AN
	Pumps		ĄΥ	ΠN		Diverter valves	_	ΟY	ON 🌠	NA
	Solvent tanks and	containers	g Y	ПN		Cartridge filter ho	usings	\checkmark	אַם	ا ا
	Sorvent tanks and	COntamicis	7			Cardiage inter no	ruarings	17	- CI, D	NT
	Water separators		d_{λ}	ПN						l
F	Name of Responders Name of Respo	ognsible Officia OK me (Please Prin	nt)	0 J 		Date of Approximate D	\ -	9	-	-
he or the	Doyce	re Si leas re Si	e l'in	- & ++ i	ing	Wast	Le. - S-	a	le a eled	1
The	7 Send	. Wae,	ns.	der	ing	to hista	٦ 11 ع	Ler Revise	25 Person	آوا(او .

DRY CLEANER AIR QUALITY GENERAL PERMIT Bureau of Air Monitoring ANNUAL COMPLIANCE CERTIFICATION FORM AIRS ID#0990448 DR. CLEAN III RICHARD JORDAN 2785 BROADWAY **RIVIERA BEACH FL 33404** Do NOT Remove Label 19 98 Annual Reporting Period: Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. Name (Please Print) 8ignature

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY D
RE-INSPECTION	
AIRS 1D#: 0990448 DATE: 3 -9-	98 TIME IN: 1:30 TIME OUT: \$3 15. Cleaners Beach, FL 33404
FACILITY NAME: Broad way	Cleaners Quy 50
FACILITY LOCATION: 2785	Broad way
Riviera	Beach, FL 33404
RESPONSIBLE OFFICIAL: Richard	Jordon PHONE: 845-0532
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	,
New facility notified DARM 30 days prior to state	1 ·
2. Facility failed to notify DARM to use general pe	ermit O
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form ☐ Drop store/out of business/petroleum
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 both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$)	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)
5. This is a correct facility classification	Can not determine
	cation: eneral permit as number above mits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) p facility was 00 gallons.	since Machize is new since Sept
ergparme gA	1 of 5 Revised 8/11/97

Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? □N □N/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DN DN/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? 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? □N □N/A 3. Equipped the condenser with a diverter valve so airflow will be directed away from the ØY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated 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? □N □N/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

В.	Has the responsible official of an existing large or new large area source also:	
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ОУ ОИ
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ON/A
	Is the temperature differential equal to or greater than 20° F?	OY ON ON/A
3.	Measured and recorded the pers 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?	DÝ ON ON/A
	Is the perc concentration equal to or less than 100 ppm?	DY DN DN/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction,	·
	or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	OY ON ON/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	· .
1. Maintained receipts for perc purchased?	MA ON
2. Maintained rolling monthly averages of perc consumption?	DAY 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?	אומם מם אא
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON DN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DN/A
6. Maintained startup/shutdown/malfunction plan?	AY ON
7. Maintained deviation reports?	DY ON ON/A
Problem corrected?	ZY ON ON/A
8. Maintained compliance plan, if applicable?	DY DN PANA

PART VI: LEAK DETECTION AND REPAIRS

=						
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?			ØY □N		
2.	Has the facility maintained a leak log	?		AY ON		
3.	Does the responsible official check the	e following areas for leaks	5?			
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	OY ON ONIA		
	Door gaskets and seating	DA ON ONIA	Stills	אומם מם צלם		
	Filter gaskets and seating	AND NO YE	Exhaust dampers	DY DN ØN/A		
	Pumps	אומם מם אפן	Diverter valves	אמם מם צלן Ā		
	Solvent tanks and containers	DA ON ON'Y	Cartridge filter housings	אועם אם אא		
	Water separators	da on ona				
4.	Which method of detection is used by	the responsible official?				
	Visual examination (condensed	solvent on exterior surfac	es)			
	Physical detection (airflow felt t	hrough gaskets)		æ į		
	Odor (noticeable perc odor)			A		
	Use of direct-reading instrument	tation (FID/PID/calorimet	tric tubes)	DN/A		
	Halogen leak detector	``		X NA		
	If using direct-reading inst	trumentation, is the equi	pment:	ZN/A		
	a. Capable of detecting	g perc vapor concentration	ns in a range of 0-500 ppm?	OY ON		
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	l after each use	חם אם		
	c. Inspected for leaks a	and obvious signs of wear	on a weekly basis?	DY DN		
	d. Kept in a clean and	secure area when not in u	ıse?	OY ON		
	e. Verified for accurac	y by use of duplicate samp	ples (calorimetric only)?	OY ON		
}						

Responsible Official's Name
(Please Print)

Inspector's Name (Please Print)

Inspector's Signature

Responsible Official's Signature

3-9-98

Date of Inspection

) - 9- 99

Approximate Date of Next Inspection

ADD	DITIONAL SITE INFORMATION:	
1.	Secondary Containment for: Dry Cleaning Machine & Storage area [] [] Waste area [] [] Spotting area Sealed [] []	
	They Will histell Secondery Containment in one month for waste ever	_
2.	Disposal of Water from Water Separator using approved evaporator [] or contracted Wastewater service [] []	•
	MCF picks up the waste.	`

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL	COMPLAIN	T/DISCOVERY] RE-INS	PECTION
TIME IN: 1:30	TIME OUT:	1:15	AIRS ID#:	09900	748
Type of facility: D	87 Cleanin	~ ·	·	· - -	
FACILITY NAME: BROT	+DWAY CC	eaners	5	DATE:	2-48
FACILITY LOCATION:		ad way	h		
Kil	liera Beach	FL	33400	<u> </u>	
RESPONSIBLE OFFICIAL:	Richard Jos	rdan	PHONE NUME	BER: 845-	0532
/_X	he compliance requiremen ule 62-213.300, Florida A			e facility is found t	o be in
Based on the results of the discrepancies were noted	he compliance requiremend:	ts evaluated duri	ng this inspection, the	e following compli	ance
COMPLIANCE REQU	IREMENT/PROBL	EM I	FOLLOW-UP A	CTION REQU	IRED
weed secondar	y Containmen	· Wi	11 inform	FDEP	
or waste asee					
		_			
					70
· ·				Bu	
				Bureau on & Mobile	PR
			,	9 9	7 7 7
				· Offi	Monitor 998
And the second s	and the contract of the contra			·	R Sales
					•
-					
COMMENTS:					

· ·	·				
The Annual Compliance Certifica	ntion form has been proper	ly certified and s	ubmitted to the inspe	ctor. YES] ио[
DATE OF NEXT INSPECTION	V:Ma	sch	1999		
INSPECTION CONDUCTED I	BY: RV	(Approxima Chok	Shi	:	
INSPECTOR'S SIGNATURE	LiV. Cho.	lev Please Prin	nt) PHONE NUMB	er: 355	-3070

Page

of

Revised 10/96

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION
FACILITY LOCATION: 2785 Brook	ners 10#: 0990448 ners 10#: 0990448 ners 10#: 2-17-99 ed was 10 10 10 10 10 10 10 10 10 10 10 10 10
RESPONSIBLE OFFICIAL: Kevin Galler	Y PHONE NUMBER: 845-0532
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluated discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	ative Code (F.A.C.).
•	
•	•
COMMENTS:	
INSPECTION CONDUCTED BY: R. V. Ch.	pproximate) OKShi
INSPECTOR'S SIGNATURE: (2) V. Chordle	Please Print) ———————————————————————————————————

Arms

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION		COMPLAINT/DISCOVERY	۵
AIRS ID#: 0990448 D. FACILITY NAME:	oad way 85 Broa	clear	rens	
PART I: NOTIFICATION		· · · · · · · · · · · · · · · · · · ·		
(check appropriate box)				
1. New facility notified DARM 3	0 days prior to startup			
2. Facility failed to notify DARM	f to use general permit	· .		0
PART II: CLASSIFICATION				
Facility indicated on notification (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 < x < 2,1 transfer only, 200 < x < 1,800 both types, 140 < x < 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility clause of the second s	e 2. r dr tra bo (co	ansfer only, x oth types, x < 2 constructed on New large a ry-to-dry only, ansfer only, 20 to th types, 140 constructed on	$x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ 140 gal/yr or after $12/9/91$) rea source $140 \le x \le 2,100 \text{ gal/yr}$ $00 \le x \le 1,800 \text{ gal/yr}$ $00 \le x \le 1,800 \text{ gal/yr}$ or after $12/9/91$) \square Can not determine	petroleum
	y exceeds above limits oethylene (perc) purch	and is not elig	gible for a general permit	ry cleaning
1	U . 1110		•	

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? 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 least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN ØN/A beds according to the manufacturer's specifications?

PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

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

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

2 of 5

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)

- 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?

1. Equipped all machines with the appropriate vent controls?

- 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?
- 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

- ON ON/A

[~	11 12 12 12 12 12 12 12 12 12 12 12 12 1			
l R.	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?	$\Box \gamma$	ΠM	
	on dry-to-dry, reclaimer, and dryer machines on a weekly basis:	U ,	UN.	
2.	Measured and recorded the washer exhaust temperature at the condenser			
	inlet and outlet weekly?	\Box Y	ПN	□N/A
				_
	Is the temperature differential equal to or greater than 20° F?	\Box Y	$\square N$	\square 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,			
1		Πv		□N/A
	if machines are equipped with a carbon adsorber?	u i	UN	UN/A
	Is the perc concentration equal to or less than 100 ppm?	Пν	ПΝ	ΠN/Δ
	13 die pere concentuation equal to of less than 100 ppin.	٠.		
,				
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,			
Ħ	or expansion; and downstream from no other inlet?	\Box Y	ПN	□N/A
H	or superiority and depth of the control of the cont			
_				
٦.	Equipped transfer machines (dryers, reclaimers, and washers) with individual		_	_
	condenser coils?	\Box Y	$\square N$	\square N/A
			•	
6	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	· DN	□N/A
۱ ×.	Touted antion to an outpoin amorpor (if ased) at an initios.		,	-17//1

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם צע
2. Maintained rolling monthly total 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;	MY ON ON/A
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	DY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	A/ND, NO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DKIA
6. Maintained startup/shutdown/malfunction plan?	PY ON
7. Maintained deviation reports?	AND ND YA
Problem corrected?	אואם אם אוא
8. Maintained compliance plan, if applicable?	DY DN DN/A

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? DN 2. Has the facility maintained a leak log? DИ 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, DY ON ON/A DY ON ØN/A couplings, and valves Muck cookers DY ON ON/A ZY ON ON/A Door gaskets and seating Stills DY ON ON/A Filter gaskets and seating Exhaust dampers DY ON DN/A DY ON ON/A Pumps Diverter valves DY ON ON/A MY ON ON/A Solvent tanks and containers Cartridge filter housings DY ON ON/A MY ON ON/A Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN b. Calibrated against a standard gas prior to and after each use (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? DY DN d. Kept in a clean and secure area when not in use? DY DN e. Verified for accuracy by use of duplicate samples (calorimetric only)? DY DN

Kevin) Gallery	May fally
Responsible Official's Name	Responsible Official
(Please Print)	-
R.V-Chotshi	2-17-99
Inspector's Name (Please Print)	Date of Inspection

Q. V. Olioker

Inspector's Signature

Feb 2000

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
1. Secondary Containment for: I	Yes NO Ory Cleaning Machine & Storage area [/] []
T. Scottany Concessions 2010	Waste area []-[]
	Spotting area Sealed [][]
	· ·
_	
2. Disposal of Water from Water	Separator using approved evaporator []
B	or contracted Wastewater service [] []
and the state of t	
No F Ricks	up the waste when called
	•
:	

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	annual 🔀	COV	APLAINT/DISCOVE	RY 🗌	RE-INSP	ECTION [
TIME IN: 10:25	TIME OUT:	11:00	AIR_	S ID#: <u>09</u> 90	3448	
TYPE OF FACILITY: Dey	(Cleaning					
FACILITY NAME: BEDAC	Juny Cleanels	:	_		ATE: 2/	11/00
	15 BEOADWAY					
Rivieza E						
RESPONSIBLE OFFICIAL: R	chard Jordan		PHONE	NUMBER: 8	45 - 05	32
Based on the results of the compliance with DEP Rule	•		- •	tion, the facility	is found to l	be in
Based on the results of the discrepancies were noted:	compliance requireme	nts evalua	ated during this inspec	tion, the followi	ng complian	ce .
COMPLIANCE REQUIR	EMENT/PROBL	LEM	FOLLOW-	UP ACTION	REQUI	RED
,						
•						
-		-	-			
		_			70	
				Bureau & N		
<u> </u>					()	
				AR - 6 2000 u of Air Monitoring Mobile Sources		
The state of the s		·		2000 Monito ource		
				oring s		
		•		<u>.</u>		
COMMENTS:		•				
•						·
The Annual Compliance Certification	form has been proper	ly certifie	d and submitted to the	inspector.	YES	ио[Х]
DATE OF NEXT INSPECTION:_		Feb	200/			
· · · · · · · · · · · · · · · · · · ·	-		roximate)			
INSPECTION CONDUCTED BY:			y Direk	<u>·</u> .:	·	
INSPECTOR'S SIGNATURE:	Hruy Duzek	(Flea	ase Print)PHONE N	UMBER: 35	5 - 3070	XT 1139

of

Page

Revised 10/96

PERCHLOROETHYLENL DRY CLEANERS TITLE V GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

	RE-INSPECTION			
AIRS ID#: 090448 DA	TE: 2/11/00	TIME IN: _/0 : 2	.5_ TIME OUT	r: //: 00
FACILITY NAME: BREAK	• •			
FACILITY LOCATION: 27	185 Becadun	У		
	Viaza Beach			
RESPONSIBLE OFFICIAL:	Soin Gallery	PHONE:	845 - 053	₹
CONTACT NAME:	·	.'		
Permana Rossillo Carolina Carolina Residente de Carolina				
PART I: NOTIFICATION				
(check appropriate box)				
 New facility notified DARM 30 d 	ays prior to startup			Ο
2. Facility failed to notify DARM to	use general permit			
PART II: CLASSIFICATION				
Facility indicated on notification fo	rm that it is:		ication form	
check appropriate box)		☐ Drop sto	re/out of business/j	petroleum
Existing small area source	□ 2. N	ew small area source	×	
		a day and 140 and/1	r	
dry-to-dry only, x < 140 gal/yr	_	o-dry only, x < 140 gally	•	
transfer only, x < 200 gallyr	transi	fer only, x < 200 gal/yr	•	
	transi both i			
transfer only, x < 200 gallyr both types, x < 140 gallyr (constructed before 12/9/91)	transl both t (cons	fer only, $x < 200 \text{ gaVyr}$ types, $x < 140 \text{ gaVyr}$ tructed on or after 12/9/9	1)	
transfer only, x < 200 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 < x < 2,100 ga	transl both (cons	fer only, $x < 200 \text{ gaVyr}$ types, $x < 140 \text{ gaVyr}$ tructed on or after 12/9/9 ew large area source o-dry only, $140 \le x \le 2,10$	01)	
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/y transfer only, 200 \le x \le 1,800 gal/y	transl both t (cons 4. No allyr dry-to transf	fer only, $x < 200 \text{ gal/yr}$ types, $x < 140 \text{ gal/yr}$ tructed on or after 12/9/9 ery large area source p-dry only, $140 \le x \le 2,10$ fer only, $200 \le x \le 1,800$	01) 00 gal/yr gal/yr	
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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/y transfer only, 200 \le x \le 1,800 gal/y both types, 140 \le x \le 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification, please check the approp	transiboth in (constant) 4. Note that the dry-to dry-to transform transform (constant) ation	fer only, $x < 200 \text{ gal/yr}$ types, $x < 140 \text{ gal/yr}$ structed on or after $12/9/9$ env large area source o-dry only, $140 \le x \le 2,16$ fer only, $200 \le x \le 1,800$ types, $140 \le x \le 1,800$ gatructed on or after $12/9/9$ $\square N$ $\square Can$ not de	01) 00 gal/yr gal/yr l/yr 1) termine above	

Is the responsible official of the dry cleaning facility: (check appropriate boxes) XY DN DN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? XY ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? NO YY 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? DY ON ONA 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? AND YOU 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 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) DN YYD 1. Equipped all machines with the appropriate vent controls? AYMO MO YX 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 AYY ON ONIA condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated NO YY 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? AYM MO YX 6. Conducted all temperature monitoring after an appropriate cooldown period and after MO AM verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

	B. Has the responsible official of an existing large or new large area source also:	<u></u>
) 	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	OY ON
2	. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY ON ON/A
	ls the temperature differential equal to or greater than 20° F?	DY DN DN/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle white the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	
	Is the perc concentration equal to or less than 100 ppm?	אוום אם נם
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?	חואם אם עם
	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	אואם אם עם
5.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	<u> </u>
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	XY DN
2. Maintained rolling monthly total of perc consumption?	MY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	AY ON ONA
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אואם אם צו
4. Maintained calibration data? (for applicable direct reading instruments)	ANA NO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	אאיא אם צם
6. Maintained startup/shutdown/malfunction plan?	אם או
7. Maintained deviation reports?	AYY ON ON/A
Problem corrected?	AND NO YES
8. Maintained compliance plan, if applicable?	DY DN XX

ſ		•••					
		• • •				Yes	NO.
1.	Secondary Co	ontainment for:	Dry Cleaning		torage area		
				Waste area		[X]	[]
				Spotting an	ea Sealed	$[\lambda]$	[]
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				·			
		x				٠	
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	A	MCF Picks	up the was	te Awd we	iste unter.		
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1. Does the responsible official condu	or a mooking (nor official) court	ses, or meeking reak delection	
inspection?			X Y □N
2. Has the facility maintained a leak lo	•		אם אי ק
3. Does the responsible official check to	the following areas for leak	s?	
Hose connections, fittings, couplings, and valves	XY ON ON/A	Muck cookers	אוא 🙀 אם צם
Door gaskets and seating	AND NO AK	Stills	אאם אם אא
Filter gaskets and scating	אואם אם ציע	Exhaust dampers	אואיקל אם צם
Pumps	AINO NO YK	Diverter valves	אואם אם ציאל
Solvent tanks and containers	AA DH DHIYA	Cartridge filter housings	אואם אם ציק :
Water separators	A'NO NO YA		-
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surfaces	s) _: :~	×
Physical detection (airflow felt t	hrough gaskets)		×
Odor (noticeable perc odor)		•	」
Use of direct-reading instrument	ation (FID/PID/calorimetri	c tubes))Xi NA
Halogen leak detector			M WA
If using direct-reading insti	rumentation, is the equipm	nent:	XÍN/A
a. Capable of detecting	perc vapor concentrations i	in a range of 0-500 ppm?	DY DN
b. Calibrated against a s (PID/FID only)?	standard gas prior to and aft	ter each use	מס עם
c. Inspected for leaks ar	nd obvious signs of wear on	a weekly basis?	DY DN
d. Kept in a clean and so	ecure area when not in use?		DY DN
e. Verified for accuracy	by use of duplicate sample	s (calorimetric only)?	אם עם
V (33	TO COOK TO SERVICE THE SERVICE OF TH	97 0	<u></u>
consible Official's Name (Please Print)	- R	fru sy esponsible Offic	cial's Sign
Jeffry Dize K Inspector's Name (Please Prin	1)	2/11/00 Date of Inspection	
Inspector's Name (Please Prin	9	Zuit of Lispositor	

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	Return Receipt Fee (Endorsement Required)			Postmark Here	
510	Restricted Delivery Fee (Endorsement Required)				
7. 5.5	Tr Tr	- nd .	7 05		
7004	AIRS ID#09904 See BROADWAY	1482 nd (CLEANER	Sert 05	_	
7	2785 Broadway	/	33404		
	OF RIVIERA DEA				
	PS Form 3800, June 200	2		See Reverse for Ins	Iructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mallpiece, or on the front if space permits.	A. Signature X
1. Article Addressed to:	D. Is delivery address different from item ✓? ☐ Yes If YES, enter delivery address below: ☐ No
AIRS ID#09904482 nd Cert 05 BROADWAY CLEANERS 2785 Broadway	,
RIVIERA BEACH, FL 33404	3. Service Type Certified Mall Express Mall Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7004 2510 (Transfer from service labor)	JOO4 6986 5753
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE BEAU

First-Class Mail Postage & Fees Paid USRS Parmit No. G-10

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

DARM/MOBILE SOURCE CONTROL PROGRAM
DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

447766 FEB28285

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 990448 1stC BROADWAY CLEANERS 2785 Broadway RIVIERA BEACH, FL 33404

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1

FUND: 20-2-035001 OBJECT: 002273

Printed on recycled paper.

2922	U.S. Postal Service _{TM} CERTIFIED MAIL _{TM} RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)					
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000	_ Certified Fee		Postmark			
11	Return Receipt Fee (Endorsement Required)		Here			
510	Restricted Delivery Fee (Endorsement Required)					
П	T AIRS ID# 990					
7004	Ser BROADWAY	CLEANERS				
<u> </u>	2785 Broadwa					
1-	RIVIERA BEACH, FL 33404					
	City					
	PS Form 3800, June 200	02,	See Reverse for Instructions			

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT NOIL SEC STICKER AT STANDARD LINE NOIL SEC STICKER AT STANDARD LINE	JOMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
Article Addressed to:	D. Is delivery address different from Item 1?
AIRS ID# 990448, 1stC 'BROADWAY CLEANERS	· · · · · · · · · · · · · · · · · · ·
2785 Broadway RIVIERA BEACH, FL 33404	3. Service Type 1. Certified Mail
7004 2510 0002 3939 2922	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label)	
PS Form 3811, August 2001 etic Ret	urn Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE

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BUR. OF AIR MONITORING & MOBILE SOURCES DEPT. OF ENVIRONMENTAL PROTECTION MAIL STATION 5510
2800 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

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(cut here)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

437601 MAR152004

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

TOTAL AMOUNT DUE: \$50.00

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11 TATRS TD # 9904481

RICHARD JORDAN BROADWAY CLEANERS 2785 BROADWAY RIVIERA BEACH, FL 33404

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

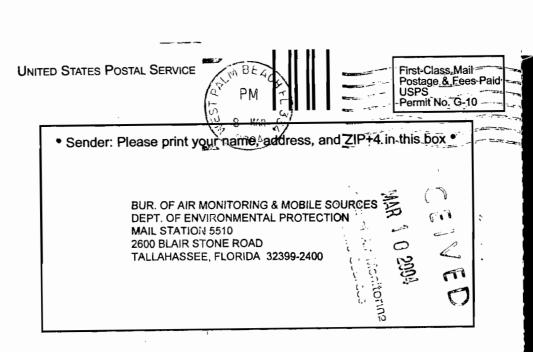
Fund: 20-2-035001

Obj.: 002273

8815	U.S. Postal Service CERTIFIED MAIL (Domestic Mail Only; No Insurance Coverage Provided)			
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0200	Restricted Delivery Fee (Endorsement Required)		2003	
	Total Posta	ARD JORDAN	RS ID # 990443	
7003		ADWAY CLEAN	299	
2	2785	BROADWAY		
•	Street, ADT. N	33404		
	City, State, 2	ERA BEACH, FL		
	PS Form 3800, June 200	2	See Reverse for Instructions	

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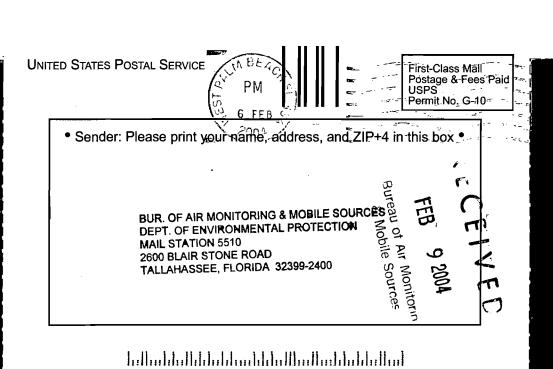
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A Signature Roll Agent Addressee
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Data of Pelivery
1. Article Addressed to:	D. Is delivery address different from item 17
AIRS TO # 990448 RICHARD JORDAN BROADWAY CLEANERS	
2785 BROADWAY RIVIERA BEACH, FL 33404	3. Service Type Lack Certified Mail
No. of the second secon	4. Restricted Delivery? (Extra Fee)
2. Article Number 7 🔲 3 🗓 5 (Transfer from service label)	00 0004 0144 8815
PS Form 3811, August 2001 Domestic Ret	um Receipt 102595-02-M-1540



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For delivery inform	ation visit our website at www.usps.com	B .		
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ги ги тоta [†] ID# 990448	8			
BROADWA	AY CLEANERS			
or PO 2 703 DICOP	or PO 2703 BROAD WAY			
chy, RIVIERA E	City,: RIVIERA BEACH, FL 33404			
PS Form-3800,-Junggzo		structions		

SENDER: COMPLETE THIS	S SECTION	COMPLETE THIS SECTION ON DELIVE	ERY
 Complete items 1, 2, and item 4 if Restricted Deliver Print your name and address that we can return the Attach this card to the bacor on the front if space pe 	ry is desired. ess on the reverse card to you. ck of the mailpiece,	A. Signature X B. Received by (Printed Name) D. Is delivery address different from item.	Agent Addressee Date of Delivery Addressee
Article Addressed to:		If YES, enter delivery address below:	□ No
ID#990448 RICHARD JORDAN BROADWAY CLEAN 2785 BROADWAY RIVIERA BEACH, FL		3. Service Type ■ Certified Mail □ Express Mail □ Registered □ Return Receip	it for Merchandise
		☐ Insured Mail ☐ C.O.D.	it for Merchandise
		4. Restricted Delivery? (Extra Fee)	☐ Yes
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PS Form 3811, August 2001	Domestic Ret	urn Receipt	102595-02-M-1540
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Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

424322 MAR 32993

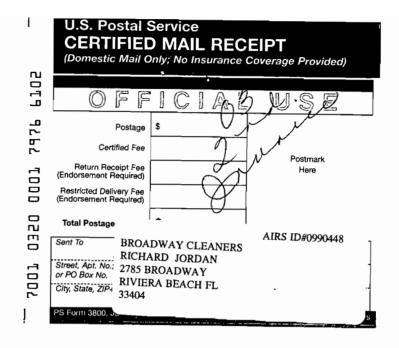
Do NOT Remove Label

AIRS ID#0990448

BROADWAY CLEANERS RICHARD JORDAN 2785 BROADWAY RIVIERA BEACH FL 33404

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001

Obj.: 002273



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Pelivery C. Signature X Agent Addressee D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below:
AIRS ID#0990448 BROADWAY CLEANERS RICHARD JORDAN 2785 BROADWAY RIVIERA BEACH FL	3. Service Type
33404	Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label) 7 0 0 1	0320 0001 7976 6102
PS Form 3811, July 1999 Domestic Re	turn Receipt 102595-00-M-0952

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DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

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ם ב ב	RICHARD JOR	AIRS ID # 0990448 DAN CLEANERS	3001AG	y mallei	16 in
	Si BROADWAT C 2785 BROADW Ci RIVIERA BEAG	'AY		*******	-3
	PS Form 3800, Februa	ary 2000	See Revers	se for Instru	ictions

TO THE RIGHT OF RETURN ADDRESS.	
PLACE STICKER AT TOP OF ENVELOPE	MPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	Addressee
Article Addressed to:	D. Is delivery address different from item 1?
10 AIRS ID # 0990448001AG RICHARD JORDAN BROADWAY CLEANERS	
2785 BROADWAY RIVIERA BEACH FL 33404	3. Service Type Certified Mail Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
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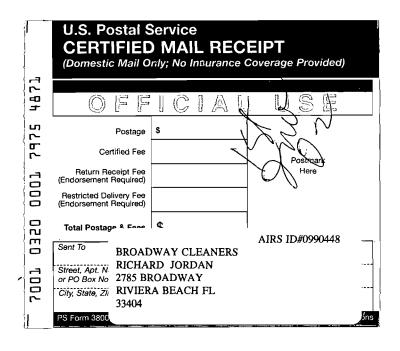
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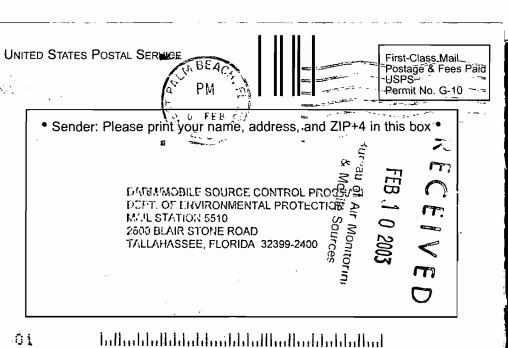
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RICHARD JORDAN
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3. Article Addressed to: AIRS ID # 0990448 BROADWAY CLEANERS RICHARD JORDAN 2785 BROADWAY RIVIERA BEACH FL 33404	4a. Article Number 2 3 3 6 0 5 5 2 4b. Service Type Registered Express Mall	
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