NEW COMPANY NAME (NEW OWNER / NEW R/O

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

OCT 0 5 2006

Part III. Notification of Intent to Use General Permit & Mobile Sources

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location					
1.	Facility Owner/Company Name (Name of corporation, a	gency, or individ	ual owner):		
<u>C</u>	ROWN Dry Clemen Or LA	KE fazk	Marga linderalla Clerge		
CROWN Day Colors OF LAKE Park trope undersola Clerch 2. Site Name (For example, plant name or number):					
(Hazardous Wasie Generator Identification Number:	1 lados	<u> </u>		
3.		0 '	7		
	FLD98/029408				
4.	Facility Location: 1454 10TH Sheet Street Address:				
	City: LAKE PARK County: Palm	. Booch	Zip Code: 33403		
5.	Pacility Identification Number (DHP Use ONLY - do not	加加多			
/ **			DEALL		
	sponsible Official				
	Name and Title of Responsible Official:	Title: Pro	indent .		
Na	ME: CARLOS MONTECHIARI	THIE: \\ \)			
7.	Responsible Official Mailing Address:				
	Organization/Firm:		1		
	Street Address: Some Fis Work City: County:	•	Zip Code:		
8.		East (,		
ļ	Telephone: (561) -8480177	Fax: () -		
Facility Contact (If different from Responsible Official) 9. Name and Title of Facility Contact (For example, plant manager):					
 			1		
<u></u>	SAMO AK ODOLO	<u></u>			
10.	Facility Contact Address:	./0			
	Street Address: Some As ale	シン			
	City: County:		Zip Code:		
11.	Facility Contact Telephone Number:				
	Telephone: (561) 848-0177	Fax: () -		
1					

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility Information 1.(a) DRY-TO-DRY MACHINES ONLY How many dry-to-dry machines do you have on-site? For each dry-to-dry machine on-site, please provide the following information: Date Initially Purchased Status Control Device Required* Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") ROOM/None required None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber1.(b) TRANSFER MACHINES ONLY How many washers do you have on-site? How many dryers/reclaimers do you have on-site? If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an EXISTING unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a NEW unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information: Date Initially Purchased Status Control Device Required* Date Control Device Installed From Manufacturer (circle one) (if already included at time of (circle one) purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 2.(a) How much perchloroethylene (perc) have you used within the last 12 months? 140 | gallons (You must fill this in) (b) If less than 12 months, how many? [] months Check why it is less than 12 months: New owner: [] Did not keep records: []

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New store: New machine

Unopened store [] (date of expected opening

 What is the facility's source classification based Indicate with an "X". Select one classification 	on the definitions found in section (3) of Part II? n only.)
Small Area Source	
Dry-to-dry machines only on-sit Transfer only on-site Both machine types on-site	e (used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)
Large Area Source	J
Dry-to-dry machines only on-sit Transfer only on-site Both machine types on-site	e (used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)
4. What control technology is required on machine (Indicate with an "X".)	es pursuant to section (5) of Part II of this notification form?
Existing machines at small area source (NONE REQUIRED)	New machines at small area source Refrigerated condenser
Existing machines at large area source Carbon adsorber Refrigerated condenser	New machines at large area source Refrigerated condenser []
5. A facility which contains non-exempt emission Rule 62-213.300, F.A.C. Verify that all steam and exemption criteria or that no such units exist on-si	s units shall not be eligible to use the general permit pursuant to hot water generating units on-site meet the following te (see attached memo for the criteria).
All steam and hot water generating units exempt No such units on-site	OR
How many boilers do you have on-site?	1
For each boiler, indicate its horsepower (HP) rating	s: <u>3</u> 0
What type of fuel do you use? [] propane [] No. 2 ft [] No. 6 ft	uel oil No. 4 fuel oil
6. Equipment Monitoring and Recordkeeping Info	rmation
Check all logs which are required to be kept on-situ	e in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases/solvent	t addition log
(b) Leak detection inspection and repair	(X)
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration me	onitoring []
(e) Startup, shutdown, malfunction plan	لكا

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7. Surrender o	of Existing DEP Air Permit(s)				
Please indicate with an "X" the appropriate selection:					
	I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are				
	No DEP air permits currently exist for 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.					
CAI	RLOS MONTECAIARI				
Print nam	ne of responsible official				
Signature	Sep. 29 - 2006 Date				

DEP Form No. 62-213.900(2)

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Department of Environmental Protection

Jeb Bush Governor Twin Towers 2600 Blair Stone Road M.S. 5510 Tallahassee, Florida 32399-2400 Colleen M. Castille Secretary

To: Users of the Title V Air General Permits

Records in the Division of Air Resource Management indicate that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the Federal Clean Air Act, your facility is entitled to operate for no more than five (5) years with a permit under Section § 403.0872 Florida Statutes (F.S.). Rule 62-213.300, F.A.C., establishes that the duration of the permit is for five (5) years, and no later than thirty (30) days prior to the fifth anniversary of the filing of intent to use this general permit, the responsible official shall submit a new notice of intent which shall contain all current information regarding the facility.

The enclosed notification form is for your convenience if you wish to maintain your eligibility. As the Responsible Official (R/O) for this facility, please complete the form, sign your name, date it, and submit it to the following address:

Air General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

It is important to note that facilities not in compliance with the conditions of their existing Title V Air General Permit may not be eligible to use a new air general permit after the existing authority period expires. Such facilities will be required to make application for an Air Operating Permit as a major source under Title V. It is very important for facilities to assure that they are now in compliance with their air general permit conditions to avoid this costly situation.

More Protection, Less Process
Website: www.dep.state.fl.us/air/
Printed on recycled paper.

IMPORTANT

A facility is eligible to operate under a Title V Air General Permit for no more than five (5) years. Your facility is approaching the end of the five (5) year period for which it was entitled to operate under the Title V Air General Permit.

NEW OWNER? If you are a NEW OWNER, please check I this box and return this page with your completed Air General Permit Notification Form.

NEW <u>RESPONSIBLE OFFICIAL</u>? If you are a NEW RO, and/or your existing business has moved to a new location, please check ☑ this box and return this page with your completed Air General Permit Notification Form.

• If you wish to continue your entitlement, please complete the enclosed Air General Permit Notification Form, making certain that it is signed by the Responsible Official (RO), properly dated and mailed to the following address:

Air General Permits Section Bureau of Air Monitoring and Mobile Sources, MS5510 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, Florida 32399-2400

- If you do not wish to continue with your eligibility, please disregard this notice.
- A fee is **NOT** required with the notification form.

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[H54 107 H Street
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Air General Permits Section

Bureau of Air Mondong and Mobile Sources MS 5510

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