

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

October 11, 2001

Mr. Richard Christman
Cinderella Cleaners
1454 Tenth Street
Lake Park, Florida 33403

Re: Facility No.: 0990454-002

Dear Mr. Christman:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 7, 2001.

Please note that in January 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,

for 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"

Fees Paid 96-00
SOC - 2
Compliance FN

0990454-002

page 16

6(e) Required for all sources. Should be marked.

page 17

Responsible official sign and date for changes made.

DEP ROUTING AND TRANSMITTAL SLIP

TO: (NAME, OFFICE, LOCATION) 3. _____
1. _____ 4. _____
2. _____ 5. _____

PLEASE PREPARE REPLY FOR:

- SECRETARY'S SIGNATURE
- DIV/DIST DIR SIGNATURE
- MY SIGNATURE
- YOUR SIGNATURE
- DUE DATE _____

ACTION/DISPOSITION

- DISCUSS WITH ME
- COMMENTS/ADVISE
- REVIEW AND RETURN
- SET UP MEETING
- FOR YOUR INFORMATION
- HANDLE APPROPRIATELY
- INITIAL AND FORWARD
- SHARE WITH STAFF
- FOR YOUR FILES

COMMENTS:

FROM: _____ DATE: _____ PHONE: _____

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
SEP - 7 2000
Bureau of Air Monitoring
& Mobile Sources

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form and 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, agency, or individual owner):	CINDERELLA CLEANERS & LAUNDRY INC 6661
2. Site Name (For example, plant name or number):	CINDERELLA CLEANERS
3. Hazardous Waste Generator Identification Number:	50-73-00814 RW 981 029 408
4. Facility Location: Street Address: City: LAKE PARK County: PALM BEACH Zip Code: 33043	1454 10 ST.
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0990454-002

Responsible Official

6. Name and Title of Responsible Official: Name: RICHARD CHRISTIAN Title: PRES.	
7. Responsible Official Mailing Address: Organization/Firm: CINDERELLA CLEANERS Street Address: 1454 10 ST. City: LAKE PARK FL. County: PALM BEACH Zip Code: 33403	
8. Responsible Official Telephone Number: Telephone: (561) 848-0177 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: () -	

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site? [2]

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1991	Existing <input checked="" type="radio"/> New <input type="radio"/>	<input checked="" type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	SAME
1991	Existing <input checked="" type="radio"/> New <input type="radio"/>	<input checked="" type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	SAME
	Existing <input type="radio"/> New <input type="radio"/>	<input type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

N/A

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 From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing <input type="radio"/> New <input type="radio"/>	<input type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	
	Existing <input type="radio"/> New <input type="radio"/>	<input type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	
	Existing <input type="radio"/> New <input type="radio"/>	<input type="radio"/> RC <input type="radio"/> CA <input type="radio"/> 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?

[300] 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: []

New store: [] New machine []

Unopened store [] (date of expected opening _____)

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.)

- Small Area Source
- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)

- | | |
|--|--|
| <u>Existing machines at small area source</u>
(NONE REQUIRED) <input type="checkbox"/> | <u>New machines at small area source</u>
Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u>
Carbon adsorber <input type="checkbox"/>
Refrigerated condenser <input type="checkbox"/> | <u>New machines at large area source</u>
Refrigerated condenser <input checked="" type="checkbox"/> |

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site? /

For each boiler, indicate its horsepower (HP) rating: 30 140

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender 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.

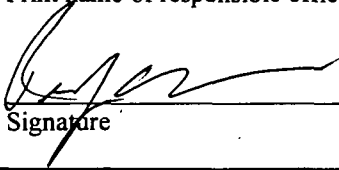
Responsible Official Certification

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.

RICHARD CHRISTIAN

Print name of responsible official


Signature

8/31/01
Date

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

458739 FEB 8 2006

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# 990454 1st
CINDERELLA CLEANERS
1454 10th Street
LAKE PARK, FL 33403

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

444306 JAN 14 2005

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

TOTAL AMOUNT DUE: \$50,000

Do **NOT** Remove Label

AIRS ID# 990454 10
CINDERELLA CLEANERS
1454 10th Street
LAKE PARK, FL 33403

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.

RECEIVED
Bureau of Air Monitoring
& Mobile Sources
JAN 11 2005
Bureau of Air Monitoring
& Mobile Sources



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. 435812 JAN29 2004

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

990454
 RICHARD CHRISTMAN
 CINDERELLA CLEANERS
 1454 10TH STREET
 LAKE PARK FL 33403

FOR GOVERNMENT USE ONLY
 Org.: 37550101000 EO 11981
 Fund: 20-2-035001
 Obj.: 002273

Bureau of Acquisition

FEB 2 2004

RECEIVED



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
JAN 29 2003
Bureau of Air Monitoring
& Mobile Sources

TOTAL AMOUNT DUE: \$50.00

X

Do NOT Remove Label

422180 JAN24 2003

AIRS ID#0990454
CINDERELLA CLEANERS RICHARD CHRISTMAN 1454 10TH STREET LAKE PARK FL 33403

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001 Obj.: 002273
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THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

413187 JAN16 2002

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0990454
CINDERELLA CLEANERS
RICHARD CHRISTMAN
1454 10TH STREET
LAKE PARK FL
33403

FOR GOVERNMENT USE ONLY
Org.: 3755010100 EO: A1
Fund: 20-2-035001
Obj.: 002273

Bureau of Air, Mail
& Mobile Services

JAN 16 2002

RECEIVED