

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

January 27, 1997

Mr. Eddie Rodriguez Dryclean USA 1875 West Commercial Boulevard, Suite 140 Ft. Lauderdale, Florida 33309

Re: Facility I.D. No. 0990473

Dear Mr. Rodriguez:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 8, 1996.

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, Florida 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

"Form Canada Managa Florida's Environment and Natural Resources"

#0990473

	Dryclean USA
P.14	1.(a) add date control device installed 1.(c) mark out "X" and initial 5.(t) required
	1.(c) mark out "X" and initial
D./5	5.(1) required
,	
·	

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

·	
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	
2. Site Name (For example, plant name or number):	
2. Site Name (For example, plant name or number):	
Jilage Commons * 11412 3. Hazardous Waste Generator Identification Number:	
3. Hazardoùs Waste Generator Identification Number:	
FLD 982 100 604	
4. Facility Location: Street Address: Q31 Village a 721Va 8901	
Street Address: 931 Village Blva., *901 City: Zip Code: West Palm Beach Palm Beach 33409 5. Facility Identification Number (DEP Use):	
West talm Beach Yourn Beach 33409	
5. Facility Identification Number (DEP Use):	
0990473	
Responsible Official	
6. Name and Title of Responsible Official:	
Eddie Rodriquez President	
7. Responsible Official Mailing Address:	\neg
Organization/Firm: DNCKan USA Street Address: 1875 W. Commercial Blva., Suite 140	
City: Ft. Lauderdale County: Broward Zip Code: 33300	
8. Responsible Official Telephone Number:	<u> </u>
Telephone: (954) 493 - 67(x) Fax: (954) 493 - 8444	
Facility Contact (If different from Responsible Official)	
9. Name and Title of Facility Contact (For example, plant manager):	
Steve Spiletic District Manager	
10. Facility Contact Address: Dyclean USA	
Street Address: 1875 W. Commercial Blva., Suite 140	
City: Zip Code:	
11. Facility Contact Telephone Number: 33309	-
Telephone: (954)493-6700 Fax: (954)493-8444	

RECEIVED

NOV 8 1996

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Bureau of Air Monitoring & Mobile Sources

Facility Information

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

		Date	Date		Date	Date		Date	Date
	l	Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#/	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit			·						
(1) w/ ref. condenser	à 1	11/6/87							
(2) w/ carbon adsorber		11/0/4							
(3) w/ no controls									
Washer Unit		1				·			
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit							-		
(7) w/ ref. condenser	 								
(8) w/ carbon adsorber									
(9) w/ no controls	_	<u> </u>							
Reclaimer Unit								•	
(10) w/ ref. condenser								i	
(11) w/carbon adsorber									
(12) w/ no controls	_							-	
(b) Control devices are No control devices 2.(a) What was the total of the standard of the s	are re	equired to be ity of perchloons ow many? [_	installed [y perc)	_] purchased in				r 1
Check why it is less 3. What is the facility's so (Indicate with an "X". Existing small ar	urce (Selec ea so	classification t one classifi urce []	based on the cation only.)	e defi	nitions found	d in section (3			
Existing large are	ea sou	irce	Ne	w lai	rge area sour	LE [

DEP Form No. 62-213.900(2) Effective: 6-25-96

4. What control technology is required on machines (Indicate with an "X".)	, , , , , , , , , , , , , , , , , , , ,
Existing large area source Carbon adsorber	Refrigerated condenser [X]
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
	units shall not be eligible to use the general permit pursuant d hot water generating units on-site meet the following
	have a total heat input of 10 million BTU/hr or less (298 atural gas except for periods of natural gas curtailment than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring 2	and Recordkeeping Information
• •	and Recordkeeping Information in accordance with the requirements of this general permit:
• •	
Check all logs which are required to be kept on-site	in accordance with the requirements of this general permit:
Check all logs which are required to be kept on-site (a) Purchase receipts and solvent purchases	in accordance with the requirements of this general permit:
Check all logs which are required to be kept on-site (a) Purchase receipts and solvent purchases (b) Leak detection inspection and repair	in accordance with the requirements of this general permit:
Check all logs which are required to be kept on-site (a) Purchase receipts and solvent purchases (b) Leak detection inspection and repair (c) Refrigerated condenser temperature monitoring	in accordance with the requirements of this general permit:

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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)
<u> </u>	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notific statements maintain	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 s made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to the 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.
	7 1 1 1 0 1 111101

Signature



7771 W. OAKLAND PARK BLVD. • SUITE 201 • SUNRISE, FLORIDA 33351 TELEPHONE: (954) 747-7599 • FAX (954) 747-9878

December 18, 2000

Title V Air General Permits Receipts P.O. Box 3070 Tallahassee, FL 32315-3070

Ke: Title V Permits for all Locations

To Whom It May Concern:

Enclosed is a check in the amount of \$1,350.00 representing payment of Title V Air General Permits for 27 of our locations General Permits for 27 of our locations.

Please be advised that the following locations are no longer operating as drycleaning or laundry plants, but have been converted to drop off service locations only:

, Store #	Location	AIRS ID
Store # 11412 11423	931 Village Blvd #901	0990473
√ 11423	3013 Yamato Rd #B-4	0990471
√72601	20355 Biscayne Blvd #K5	0250787
√ 71403	11924 Forest Hill Blvd.	0990468

Please delete these locations from your files as stores requiring the Title V Air General Permit. In addition, please update your files with our new mailing address as noted on the attached invoices.

Please feel free to contact me directly with any questions at 954/747-7599. Thank you for your help.

Sincerely,

Ruth Fultz

Real Estate Administrator

Sandy Bowman (pyrot wroll separate now to above P.D. B.) Cc:



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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	annual 🔀	COMPLAI	NT/DISCOVERY	RE-INSPECTION	
TIME IN: 12:00	TIME OUT:	1:00	AIRS ID#:	099047=	3
TYPE OF FACILITY: FACILITY NAME: FACILITY LOCATION: 9	Dry (lean RY CLEAD B) Village W-P.B.		5A- d # 90/ 33409	DATE: 2-11-9	
RESPONSIBLE OFFICIAL:					-6700
compliance with DEP Ru	ule 62-213.300, Florida Ad ne compliance requirement l:	dministrative (ts evaluated di	ring this inspection, the factoring this inspection, the factoring this inspection, the fole FOLLOW-UP ACT	llowing compliance	
· :		-			
					are e
	The second of the second se				
					•
COMMENTS:				_	
*** ***					
The Annual Compliance Certifical DATE OF NEXT INSPECTION INSPECTION CONDUCTED E	v: 2-11-	ly certified and 97 (Approximately Approximately Approxima		YES NO	X
INSPECTOR'S SIGNATURE:	av ch	(Please P	rint) PHONE NUMBER:		70 ad 10/96



PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECTI	COMPLAINT/DISC	OVERY 🗆
FACILITY LOCATION: 931 V	en USA illage BIVE H	90(
W.P.B.	, FL 3340	9
PART I: NOTIFICATION		
(check appropriate box)		
1. Existing facility notified DARM by 9/1/96		×
2. New facility notified DARM 30 days prior to st	artup	
3. Facility failed to notify DARM to use general p	ermit	
PART II: CLASSIFICATION		
Facility indicated on notification form that it is (check appropriate box)	•	
A. 1. Existing small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)	2. New small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed on or after 12/9/91)	
3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,="" yr=""><td>4. New large area source dry-to-dry only, 140<x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,></td></x<2,>	4. New large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,>	
This is a correct facility classification	ON ON	
If no, please check the appropriate classification:		•
facility qualified for a general perfacility exceeds above limits and	ermit as numberabove I is not eligible for a general permit	•
B. The total quantity of perchloroethylene (perc) facility was 220 gallons.	purchased within the preceding 12 month	s by this dry cleaning

Per delivery Person disectly delivers Person into

PART III: GENERAL CONTROL REQUIREMENTS	white Thou fo
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
Storing perchloroethylene in tightly sealed and impervious containers?	AY DN
2. Examining the containers for leakage?	DAY ON
3. Closing and securing machine doors except during loading/unloading?	, Σ Σ □N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	Ø □n
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorbe beds according to the manufacturer's specifications?	T OY ON MANA

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)
- (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? Have fan
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?
- 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?
- 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

AY ON

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JOY 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 locate on dry-to-dry, reclaimer, and dryer machines on a weekly basis? 	ed YY	ПN	,
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?		□и	
Is the temperature differential equal to or greater than 20° F?	XY	ΩN	
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?	_Y	, П	X _{N/A}
Is the perc concentration equal to or less than 100 ppm?	. OY	ПN	/\n (\dag{\alpha})
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?		ПИ	[X]
		ΠN	12
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual	_	□N	()2(N/A
condenser coils?	ΟY	L1 1	
· · · · · · · · · · · · · · · · ·			XV/A
condenser coils?			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times?			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official:			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption?			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption?			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:			.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?		и п п п п п п п п п п п п п п п п п п п	.
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?			X v/A
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? For direct reading instruments only) 5. Maintained exhaust duct monitoring data on perc concentrations?			Ø√V/A
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? (for direct reading instruments only)			Ø√V/A
condenser coils? 6. Routed airflow to the carbon adsorber (if used) at all times? PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 4. Maintained calibration data? **Gor direct reading instruments only**) 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan?			Ø√V/A

1. Does the responsible official conduct a weekly leak detection and repair inspection?

Visual e	d of detection is used by examination (condensed s	-	,		\mathbf{a}^{\prime}			
	Physical detection (airflow felt through gaskets)							
Odor (noticeable perc odor)								
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)						ZX,	MA	
If using	direct-reading instrum	entation,	is the equip	ment:			, . ,	
	a. Capable of detecting	perc vapo	or concentrati	ons in a range of 0-500 ppm?	ΟY	ПΝ		•
	b. Calibrated against a (PID/FID only)?	standard g	gas prior to a	nd after each use	ΩY	ND		
	c. Inspected for leaks a	nd obviou:	s signs of we	ar on a weekly basis?	QY	ПП		
	d. Kept in a clean and	secure are;	a when not is	ı use?	ΟY	ND		
	e. Verified for accuracy	y by use of	duplicate sa	mples (calorimetric only)?	QΥ	ПП	.:	
Has the facili	ty maintained a leak log?	,			X	ИΩ		
Does the resp	onsible official check the	: following	z areas for lea	aks?	, /			
	nnections, fittings, ngs, and valves	₫ ¥	ΠN	Muck cookers	ΠY		1	N/
Door g	askets and seating	ÆΥ	ПN	Stills	AY		r	
Filter g	askets and seating	PIY	ПИ	Exhaust dampers	ΟY		ı Ø	٦,
Pumps		TYÝ.	□N	Diverter valves Haue Fan	ΩY		A	4/
Solvent	tanks and containers	Δ_{Y}	\Box N	Cartridge filter housings	PX	N	ī	
	eparators	EX.	□N .			-		1

Inspector's Signature Approximate Date of Next Inspection

They have Secondary Confairments

for dry cleaning MC. & Woste area.

They have Spotting area Scaled.

Revised 10/28/96



DRY CLEANER AIR QUALITY GENERAL PERMIT

ANNUAL COMPLIANCE CERTIFICATION FORM & MODERAL TERMINER

Village Common Sairs id#0990473

DRYCLEAN USA # 11412

GAGLIANO MICHAEL

1875 W COMMERCIAL BLVD., STE 140

FT LAUDERDALE FL 33309

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70

	Do <u>NOT</u> I	Remove Label	
Annual Reporting Period: Janua	ary 1, 1997	то	December 31, 1997
Based on each term or condition of 62-213.300, Florida Administrative			<u> </u>
If NO, complete the following:			
#1. Term or condition of the genera	al permit that has not been in conti	nuous compliance du	ring the reporting period stated above:
Exact period of non-compliance: fr	om	to	
Action(s) taken to achieve complian	ce:		
Method used to demonstrate compli	ance:		·
#2. Term or condition of the genera	l permit that has not been in conti	nuous compliance du	ring the reporting period stated above:
Exact period of non-compliance: fr	om	to	
Action(s) taken to achieve complian	ce:		· · · · · · · · · · · · · · · · · · ·
Method used to demonstrate compli	ance:		
	nplete. Further, my annual consump for dry-to dry facilities or 1,800 gall MICHAEL GAGLIANO	tion of perchloroethylons per year for transf	2/9/98
	Name (Please Print)	Sig	nature Date

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

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	APLAINT/DISCOVERY RE-INSPECTION
TIME IN: 11:05 TIME OUT: 11:5 TYPE OF FACILITY: Doy Clean U FACILITY NAME: 931 Village B FACILITY LOCATION: WPB, FL	
RESPONSIBLE OFFICIAL: SEO TAIKISSOON	PHONE NUMBER: 954-493-6700
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.).
	~
<u> </u>	
COMMENTS:	
INSPECTION CONDUCTED BY: R V CHOR	proximate) (SHI) ease Print)
INSPECTOR'S SIGNATURE: V-Choholi	\sim PHONE NUMBER: $355-3070$

Page of

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

ARM3

TYPE OF INSPECTION:

ANNUAL

A

COMPLAINT/DISCOVERY

RE-INSPECTION .

AIRS ID#: 0990473 DATE: 2-19-98 TIME IN: 11:05 TIME OUT: 11:55 FACILITY NAME: DRY (can USA)			
responsible official: Seo TAIN	FL 33409 (15500N PHONE: 954-493-6700		
CONTACT NAME:	PHONE:PHONE:		
PART I: NOTIFICATION			
(check appropriate box)	`		
1. New facility notified DARM 30 days prior to sta	artup 🗓		
2. Facility failed to notify DARM to use general po			
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) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a general source.	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 (constructed on or after 12/9/91) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		
	nits and is not eligible for a general permit urchased within the preceding 12 months by this dry cleaning		

Now Machine Aero Tech 6/97 (Mfg Date) with Refresented Condenser Revised 8/11/97

No longer exists old dry cleaning Mechine previously owned by the

PART III: GENERAL CONTROL REQUIREMENTS

Is the responsible official of the dry cleaning facility: (check appropriate boxes)

- 1. Storing perchloroethylene in tightly sealed and impervious containers?
- 2. Examining the containers for leakage?
- Closing and securing machine doors except during loading/unloading?
- 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

AVO ON ON/A

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PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

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

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

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

- A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)
- 1. Equipped all machines with the appropriate vent controls?
- 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?
- 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?
- 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?
- 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

ATY ON

AND NO YE

ANO NO YE

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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?	AY	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	XY.	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	SA Y	Ωи	□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,	ΩÝ		A
	if machines are equipped with a carbon adsorber?	UY	UN	UN/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ΠИ	AVNJ
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction,	· .	•	
	or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ΩY	ПΝ	ANA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y	_N _	AVN
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	ΩΝ	ΦN/A

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes)			
1. Maintained receipts for perc purchased?	фy ом		
2. Maintained rolling monthly averages of perc consumption?	DY ON		
3. Maintained leak detection inspection and repair reports for the following:	. "		
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם צים		
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ANA ' NO YO		
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN DN/A		
5. Maintained exhaust duct monitoring data on perc concentrations?	באא עם אם		
6. Maintained startup/shutdown/malfunction plan?	AY ON		
7. Maintained deviation reports?	אַעָּחם אם צאָ		
Problem corrected?	ANO NO YA		
8. Maintained compliance plan, if applicable?	OY ON ON/A		

PART VI: LEAK DETECTION AND	PART VI: LEAK DETECTION AND REPAIRS			
1. Does the responsible official conducta	weekly (for small sources, b	oi-weekly) leak detection ar	nd repair	
inspection?	required		MY ON	
2. Has the facility maintained a leak log?	•		AY ON	
3. Does the responsible official check the	following areas for leaks?			
Hose connections, fittings, couplings, and valves	фу он он/а	Muck cookers	םע טו מאא	
Door gaskets and seating	DY ON ON/A	Stills	MY ON ON/A	
Filter gaskets and seating	אומם מם צם	Exhaust dampers	DA DU CON	
Pumps	אומם מם צף	Diverter valves	MY ON ON/A	
Solvent tanks and containers	אואם אם צל	Cartridge filter housings	MY ON ON/A	
Water separators	dy on ona			
4. Which method of detection is used by t	the responsible official?		,	
Visual examination (condensed solvent on exterior surfaces)				
Physical detection (airflow felt through gaskets)			A	
Odor (noticeable perc odor)			Ø	
Use of direct-reading instruments	ation (FID/PID/calorimetric	tubes)	ØN/A	
Halogen leak detector	``		取 とんな	
If using direct-reading instr	rumentation, is the equipm	ent:	ØN/A	
a. Capable of detecting	perc vapor concentrations is	n a range of 0-500 ppm?	OY ON	
b. Calibrated against a (PID/FID only)?	standard gas prior to and aft	ter each use	מם עם	
c. Inspected for leaks a	nd obvious signs of wear on	a weekly basis?	אם צם	
d. Kept in a clean and s	secure area when not in use?		OY ON	
e. Verified for accuracy by use of duplicate samples (calorimetric only)?			OY ON	

JAIKISSOD N Responsible Official's Name (Please Print)

Inspector's Signature

Date of Inspection

Approximate Date of Next Inspection

ADDITIONAL SITE II	NFORMATION:				
1. Secondary Cor	ntainment for: I	Wast	nine & Storage te area tting area Seal	ι/j1	NO [] [] []
		2 a. c.f	o jagovate	L_	
·	C	or contracted Was	stewater service	æ []	
Safet7	Kleen	Picks	ice a	pion	th.
			2 12 22 2 2 1 N		

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION			
TIME IN: 10:10 TIME OUT: 10	:30 _AIRS ID#: 0990474			
TYPE OF FACILITY: Dry Cleaning	-			
FACILITY NAME: Dry Clean US	A DATE: 7-14-98			
FACILITY LOCATION: 1/395 - 4 W.	Palmetto Park Rd			
BOCa Raton, D	L 33428			
RESPONSIBLE OFFICIAL: Ken Morga	nPHONE NUMBER: 487-6/00			
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra				
Based on the results of the compliance requirements evaluadiscrepancies were noted:	ted during this inspection, the following compliance			
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED			
· .	P			
	- Burgar CK			
	OBJET LE TO			
•	Dalle Source of Land			
	oring.			
The second of th				
	·			
•	· · · · · · · · · · · · · · · · · · ·			
COMMENTS:				
• •				
	·			
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO			
DATE OF NEXT INSPECTION:	ly /999			
INSPECTION CONDUCTED BY:	proximate) ChoKShi			
INSPECTOR'S SIGNATURE: 2.V. Choks PHONE NUMBER: 355-3070				

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ARMS

TYPE OF INSPECTION:

ANNUAL



COMPLAINT/DISCOVERY

RE-INSPECTION

ATRS 10#: 09904	74 _{DATE:}	7-14-98T	IME IN: 10:10	7 TIME OUT	r: 10:30
FACILITY NAME:	DAY	CLEAN	USA	·	
FACILITY LOCATION:	1139	5-A	W. Dala	metto	Pask Re
	1500	Ca Raton			428
RESPONSIBLE OFFICE	AL: Ker	Morgan	PHONE:	487-	6100
CONTACT NAME:	,		PHONE:	·.	·

PART I: NOTIFICATION

(check appropriate box)

- 1. New facility notified DARM 30 days prior to startup
- 2. Facility failed to notify DARM to use general permit .

Bureau of Philosophy Months of Philosophy Manual Philosophy Manual

PART II: CLASSIFICATION

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

- ☐ No notification form
- ☐ Drop store/out of business/petroleum

- 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
- Y ON OCan not determine

If no, please check the appropriate classification:

. 🗆

- ab facility qualified for a general permit as number ab
- 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 180 gallons.

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at 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? DN DN/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the AY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?

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

verifying that the coolant had been completely charged?

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?	MO AIA
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	אוחם מם אם אוחם מם אם
	Is the temperature differential equal to or greater than 20° F?	AND NO TA
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?	DY DN ZNIA
	Is the perc concentration equal to or less than 100 ppm?	OY ON BINA
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?	אואבן אם צם
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	אות מום עם אות מום עם אות מום עם
6.	Routed airflow to the carbon adsorber (if used) at all times?	אואש אם צם

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	אס אס			
2. Maintained rolling monthly averages of perc consumption?	אם אס			
3. Maintained leak detection inspection and repair reports for the following:				
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם צום,			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אַאם אם אַבאָ			
4. Maintained calibration data? (for applicable direct reading Instruments)	DY DN ZNIA			
5. Maintained exhaust duct monitoring data on perc concentrations?	אואם אם אם			
6. Maintained startup/shutdown/malfunction plan?	DY ON			
7. Maintained deviation reports?	אַאם אם אַאַ			
Problem corrected?	ANO NO YO			
8. Maintained compliance plan, if applicable?	בואק אם צם			

PART VI: LEAK DETECTION AND REPAIRS

1.	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair			
	inspection?	ND YD		
2.	Has the facility maintained a leak log?	אם אם		
3.	Does the responsible official check the following areas for leaks?			
	Hose connections, fittings, couplings, and valves DY DN DN/A Muck cookers	אואס אם אם		
	Door gaskets and seating DY DN DN/A Stills	DY ON ON/A		
	Filter gaskets and seating	DY ON DAVIA		
	Pumps DY ON ON/A Diverter valves	A'אם אם צוב,		
	Solvent tanks and containers DY DN DN/A Cartridge filter housings	YNO NO YES		
	Water separators DY DN DN/A			
4.	Which method of detection is used by the responsible official?			
	Visual examination (condensed solvent on exterior surfaces)			
	Physical detection (airflow felt through gaskets)	9		
	Odor (noticeable perc odor)			
	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)			
	Halogen leak detector	RMA		
	If using direct-reading instrumentation, is the equipment:	ØN/A		
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?	DĂ DM		
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?	DY DN		
Ų.	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?	OY ON		
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?	אם עם		

Responsible Official's Name
(Please Print)

Inspector's Name (Please Print)

Inspector's Signature

Approximate Date of Next Inspection

Yes NO 1. Secondary Containment for: Dry Cleaning Machine & Storage area [] Waste area

Spotting area Sealed

ADDITIONAL SITE INFORMATION:

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

Setoth Kleen picks up the Waste about Once a month of the Containment about Chen - un necessary empty Containers around dry cleaners.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

	PLAINT/DISCOVERY RE-INSPECTION				
TIME IN: 10:35 TIME OUT: 1/:10	AIRS ID#: 0990 473				
TYPE OF FACILITY: Day · Cleaning					
FACILITY NAME: D&Y CLEAN	DATE: 1-12-99				
	BIVA				
· WPB, FL 33	409				
RESPONSIBLE OFFICIAL: 130/1dy De Angeli	'SPHONE NUMBER: 686-0555				
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra					
Based on the results of the compliance requirements evalua	ted during this inspection, the following compliance				
discrepancies were noted:					
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED				
·					
	4				
• .					
·					
-					
COMMENTS:	•				
The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO					
DATE OF NEXT INSPECTION: Jan 2000					
(Approximate)					
KIST ECTION COMPOCIED BY:	Please Print)				
INSPECTOR'S SIGNATURE Q.V. Chow PHONE NUMBER: 355-3070					

PERCHLOROETHYLENE DRY CLEANERS

ARMS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL

 λ

COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS ID#: 0990473 DATE: 1-12-9	9 TIME IN: 10:35 TIME OUT: 11:10
FACILITY NAME: Doy (lear	1 USA
FACILITY LOCATION: 931	lillage Blud
WPB	FL 33409
Ralida	De Angelis 686-0555
RESPONSIBLE OFFICIAL: 104	PHONE: 680 6333
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to star	tup 🖸
2. Facility failed to notify DARM to use general per	mit
	pagiti katen itak gatak ili kiti ji ka
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	□ No notification form
(check appropriate box) A.	☐ Drop store/out of business/petroleum
1. Existing small area source	2. New small area source
dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	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)	both types, x < 140 gal/yr (constructed on or after 12/9/91)
3. Existing large area source	4. New large area source
dry-to-dry only, $140 \le x \le 2,100$ gal/yr	dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$
transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$	transfer only, $200 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800 \text{ gal/yr}$
(constructed before 12/9/91)	(constructed on or after 12/9/91)
5. This is a correct facility classification	ON Can not determine
If no, please check the appropriate classific	eation:
,	neral permit as number above
facility exceeds above lin	nits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) pu	

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) Y 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 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? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the 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?

ØY ON ON/A

5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the

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

verifying that the coolant had been completely charged?

condenser exceeded 45° F?

as the responsible official of an existing large or new large area source also:	
easured and recorded the exhaust temperature on the outlet side of the condenser located	0
dry-to-dry, reclaimer, and dryer machines on a weekly basis?	אם יו בע
	/
easured and recorded the washer exhaust temperature at the condenser	
let and outlet weekly?	Y ON ON/A
Is the temperature differential equal to or greater than 20° F?	MY ON ON/A
	,
easured and recorded the perc concentration in the exhaust stream weekly	
the end of the final drying cycle while the machine is venting to the adsorber,	,
machines are equipped with a carbon adsorber?	DY DN PN/A
Is the perc concentration equal to or less than 100 ppm?	DY DN MANA
20 de procession estado estado estado estado personal estado estado estado estado estado estado estado estado e	<i> </i>
ssured that the sampling port on the carbon adsorber exhaust for measuring	
erc concentrations is at least 8 duct diameters downstream of any bend, contraction,	
expansion; is at least 2 duct diameters upstream from any bend, contraction,	. ,
expansion; and downstream from no other inlet?	DY DN ZIN/A
	•
• ••	
ondenser coils?	DY DN DN/A
	Dy Dy Byy
outed airflow to the carbon adsorber (if used) at all times?	אוא לבן אם צם
	easured and recorded the washer exhaust temperature at the condenser let and outlet weekly? Is the temperature differential equal to or greater than 20° F? easured and recorded the perc concentration in the exhaust stream weekly the end of the final drying cycle while the machine is venting to the adsorber, machines are equipped with a carbon adsorber? Is the perc concentration equal to or less than 100 ppm? essured that the sampling port on the carbon adsorber exhaust for measuring erc concentrations is at least 8 duct diameters downstream of any bend, contraction, expansion; is at least 2 duct diameters upstream from any bend, contraction,

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: MY ON ONA a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days MY ON ON/A and parts installed w/in 5 days of receipt? DY ON ANIA 4. Maintained calibration data? (for applicable direct reading instruments) DY DN ØN/A 5. Maintained exhaust duct monitoring data on perc concentrations? ØY ON 6. Maintained startup/shutdown/malfunction plan? ZY ON ON/A 7. Maintained deviation reports? MY ON ON/A Problem corrected? DY DN ZNA 8. Maintained compliance plan, if applicable?

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? 2. Has the facility maintained a leak log? Dи 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, AY ON ON/A DY DN ZN/A Muck cookers couplings, and valves ANO NO YA DY ON ON/A Door gaskets and seating Stills DY DN DN/A DAY ON ON/A Filter gaskets and seating Exhaust dampers DY ON ON/A ZY ON ON/A Pumps Diverter valves MY ON ON/A Cartridge filter housings Y ON ON/A Solvent tanks and containers 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? OY ON b. Calibrated against a standard gas prior to and after each use (PID/FID only)? OY ON 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)? NO YO

Responsible Official's Name
(Please Print)

RV ChoKshi

1-12-99

pector's Name (Please Print) Date of Ins

R. V. Choh Jan 2000

Approximate Date of Next Inspection

OITIOD	AL SITE INFORMATI	ON:		
				*/ ND
l. Seco	ndary Containment	for: Dry Clear	ning Machine & Storage a	Yes NO area [/ []
	-		Waste area	1/1 [1]
			Spotting area Seale	ed [/] []
			_	
		`.	•	
				•
	 .			•
2-40 -454 				•
nier	ocal of Water fm	- Water Senarate	and a second areas	V []
رس <i>د</i> ط ه.	OSAL OF HATER THO		or using approved evapor acted Wastewater service	
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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 1:50 TIME OUT: 2:	ao airs id#: 0990473
TYPE OF FACILITY: Deycleaning	· - -
FACILITY NAME: DRY Clean USA	DATE: 2/1/00
FACILITY LOCATION: 931 Viilage Blvd.	, ,
West Palm Beach, FI	·
RESPONSIBLE OFFICIAL: BOILDY DO AND LIS	PHONE NUMBER: 686 - 0555
Based on the results of the compliance requirements of compliance with DEP Rule 62-213.300, Florida Adm	evaluated during this inspection, the facility is found to be in ainistrative Code (F.A.C.).
Based on the results of the compliance requirements of discrepancies were noted:	evaluated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	M FOLLOW-UP ACTION REQUIRED
	- R
	WAR OF A
	AMONITORING SOURCES
	- σ
COMMENTS:	
	· .
The Annual Compliance Certification form has been properly ce	ertified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	Feb 2001 (Approximate)
NSPECTION CONDUCTED BY: Je	(Approximate) (Approximate) (Please Print)
NSPECTOR'S SIGNATURE: Our Duro'K	PHONE NUMBER: 355 - 3070 VT 1139

of

Page

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	Ж П ис	COMPLA	NT/DISCOVER	Y - 🗀
AIRS ID#: <u>0990473</u> I	DATE: 2/1/0	zTIMI	e in: <u>/: 50</u>	TIME OUT	: 2:20
FACILITY NAME:	•			 	
FACILITY LOCATION:	931 Villas	e Biss.			
ä	Jest Palm	Beach Fl	33409		
RESPONSIBLE OFFICIAL:		•		686 - 05	55
CONTACT NAME:					
PART I: NOTIFICATION		· ·		With the second	
(check appropriate box)					
1. New facility notified DARM 3	0 days prior to star	tup			
2. Facility failed to notify DARM	to use general per	mit			
The second order to the second order to the second or the second or the second or the second order to the		CONTRACT NO TAXABLE DAY			
PART II: CLASSIFICATION					
Facility indicated on notification	form that it is:		□ No notific		, , 1
(check appropriate box) A.			LI Drop store	e/out of business/	petroleum
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)		transfer only, both types, x <	y, x < 140 gal/yr x < 200 gal/yr		
3. Existing large area source dry-to-dry only, $140 \le x \le 2,10$ transfer only, $200 \le x \le 1,800$ g both types, $140 \le x \le 1,800$ gal (constructed before $12/9/91$)	gal/yr /yr	transfer only, 2 both types, 140	area source $7, 140 \le x \le 2,10$ $100 \le x \le 1,800$ gal $10 \le x \le 1,800$ gal $10 \le x \le 1,800$ gal	gal/yr /yr	
5. This is a correct facility class	ification	XYY DN	□Can not de	termine	
	propriate classificat qualified for a gene exceeds above limi	eral permit as nu			
3. The total quantity of perchloroe facility was <u>535</u> gallons.	thylene (perc) pure	chased within th	ne preceding 12 i	months by this di	y cleaning

PART III: GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
1. Storing perchloroethylene in tightly sealed and impervious containers?	MY ON ONA
2. Examining the containers for leakage?	AND NO $\gamma \not Q$
3. Closing and securing machine doors except during loading/unloading?	X DN
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	אין פא פאל פאל
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	DY DN 🔀 N/A
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part	v.
If classification 2 has been checked, the machine should be equipped with a refr (complete A below).	igerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber mu prior to September 22, 1993	_
If classification 4 has been checked, the machine should be equipped with a refr (complete A and B below).	igerated condenser
A. Has the responsible official of all new sources and existing large area sources (check appropriate boxes)	s: .
1. Equipped all machines with the appropriate vent controls?	X Y □N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	איאם אם צאָ
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	אירם אם צי אל .
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	Þ YY □N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	XY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	₹у □и

	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?	½ √. □	1
	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	≱ YYY □N	I □N/A
	ls the temperature differential equal to or greater than 20° F?	X DV	A/ND I
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?	DY DM	•
ľ	Is the perc concentration equal to or less than 100 ppm?	DY DN	X 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?	ОУ ОИ	A\n ⊠
5	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON	AVN K
6.	Routed airflow to the carbon adsorber (if used) at all times?	ОУ ОМ	M/A

PART V: RECORDKEEPING REQUIREMENTS	-
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	У У ОИ
2. Maintained rolling monthly total of perc consumption?	XYY COM
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם ציאַ
 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 ק
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN XNA
5. Maintained exhaust duct monitoring data on perc concentrations?	□Y □N X N/A
6. Maintained startup/shutdown/malfunction plan?	XY DN
7. Maintained deviation reports?	AND NO Y
Problem corrected?	DY DN DN/A
8. Maintained compliance plan, if applicable?	DY DN X N/A

1.	Secondary	Contain	ent for:	Dry Cleaning	Machine & Storage area	Yes [X]	[]
	20001111-1				Waste area	[X]	[]
					Spotting area Sealed	[X]	[]
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		4					
	6.50 mm	···			•		
		• •	•		•	- ~	
2.	Disposal o	f Water :	ficom Wate		sing approved evaporator	ſΧì	I J
				or contracted	l Wastewater service	, []	
	(2)		•				
	(A)	SAFETY	Llees	Dicks up -	the waste sludge.		
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Does the responsible official conduct	a weekly (101 Sillali Soul	ces, bi-weekly) leak detection	
inspection?			XY DN
2. Has the facility maintained a leak log			XYY DN
3. Does the responsible official check th	e following areas for leal	s?	
Hose connections, fittings, couplings, and valves	XY ON ON/A	Muck cookers	ANA NO YO
Door gaskets and seating	AND NO ANA	Stills	A'N DN DN/A
Filter gaskets and seating	YY ON ONA	Exhaust dampers	DY DN X
Pumps	AND NO YA	Diverter valves	AND ND Y
Solvent tanks and containers	XY ON ON/A	Cartridge filter housings	AVA NO YA
Water separators	AVA DN DN/A		
. Which method of detection is used by	the responsible official?		
Visual examination (condensed s	solvent on exterior surfac	es)~	×
Physical detection (airflow felt th	rough gaskets)		×
Odor (noticeable perc odor)	. /		×
Use of direct-reading instruments	ation (FID/PID/calorimet	ric tubes)	M NA
Halogen leak detector			₩ NA
If using direct-reading instr	umentation, is the equip	oment:	M/N/A
a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?	DY DN
b. Calibrated against a s (PID/FID only)?	tandard gas prior to and a	after each use	מט עם
c. Inspected for leaks ar	d obvious signs of wear	on a weekly basis?	DY DN
d. Kept in a clean and se	ecure area when not in us	e?	חא מס אם
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	OY ON
entra aptinostro antiquativo antiquativo antiquativo antiquativo del constructivo del const	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.		
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Jeffre, Dizek Inspector's Name (Please Prin		2/1/00	
Inspector's Name (Please Prin	it)	Date of Inspection	
0.44.		Feb 200	
The Course of th			-

inspection s	UMMARY REPORT
TYPE OF INSPECTION: ANNUAL CO	OMPLAINT/DISCOVERY RE-INSPECTION
TIME IN:TIME OUT:	AIRS ID#: 0990 473
TYPE OF FACILITY: D-1 Cleaning	
FACILITY NAME: Und Clean of	DATE: 27 NOVO
FACILITY LOCATION: 931 VINGLE	Blw
West	Peh Beach.
RESPONSIBLE OFFICIAL:	PHONE NUMBER:
Based on the results of the compliance requirements evaluation compliance 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
Drop off only	Does M to Be Mise I
air. permit	E D Lilli Ir Montorin
COMMENTS:	•
The Annual Compliance Certification form has been properly certified DATE OF NEXT INSPECTION:	
NSPECTION CONDUCTED BY: M_ Lieble \	e Print)
NSPECTOR'S SIGNATURE: \ \ \ \ Leble	PHONE NUMBER: 35 5 30 70



Department of Environmental Protection

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

David B. Struhs Secretary

TO: Holder of Title V Air General Permit

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

Title V Air General Permits
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070





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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.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 0990473

VILLAGE COMMONS #11412 ANGELO IZQUIERDO

7771 W. Oakland Park Blvd. #201 Sunrise, FL 33351 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1 Fund: 20-2-035001

Fund: 20-2-0350 Obj.: 002273

° P 265 302 284 **US Postal Service Receipt for Certified Mail** No Insurance Coverage Provided. AIRS ID#: 0990473 **DRYCLEAN USA** EDDIE RODRIGUEZ 1875 W COMMERCIAL BLVD., STE 140 FT LAUDERDALE FL 33309 Postage Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom Date, & Addressee's Address PS Form 3800, TOTAL Postage & Fees Postmark or Date 2/17/97

				- - (
on the reverse side?	SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write "Return Receipt Requested" on the mailpiece below the article. The Return Receipt will show to whom the article was delivered and delivered.	e does not e number.	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.	leipt Service.
completed	3. Article Addressed to:	4a. Article No. P265 4b. Service	302284	eturn Rec
ADDRESS cor	AIRS ID#: 0990473 DRYCLEAN USA EDDIE RODRIGUEZ 1875 W COMMERCIAL BLVD., STE 140 FT LAUDERDALE FL 33309	☐ Registere ☐ Express I☐ Return Rec 7. Date of De	Mail Insured ceipt for Merchandise COD	
s your RETURN	5. Received By: (Print Name) 6. Signature: (Addresses of Agent)	8. Addressee and fee is	*	Thank
-	PS Form 3811 , December 1994		Domestic Return Receip	t



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7771 W. Oakland Park Blvd. #201 Sunrise, FL 33351

FOR GOVERNMENT USE ONLY Org.: 37550101000 ECDA1 O Fund: 20-2-035001

Obj.: 002273

Z 333 L US Postal Service			
Receipt for Cer No Insurance Coverage Do not use for Internatio	Provide	d.	se)
DRYCLEAN USA GAGLIANO MICHAEI 1875 W COMMERCIAL FT LAUDERDALE FL	BLVD	IRS ID 099 , STE 140	0473
Certified Fee	-		
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered			
Return Receipt Showing to Whom, Date, & Addressee's Address			
TOTAL Postage & Fees	\$		
Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addressee's Address TOTAL Postage & Fees Postmark or Date			

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you.		I also wish to receive the following services (for an extra fee):	
■ Attach this form to the front of the mailpiece, or on the back if permit. ■ Write "Return Receipt Requested" on the mailpiece below the ■ The Return Receipt will show to whom the article was delivered.	article number.	1. Addres 2. Restric	•
3. Article Addressed to: AIRS ID 0990473 DRYCLEAN USA GAGLIANO MICHAEL 1875 W COMMERCIAL BLVD., STE 140 FT LAUDERDALE FL 33309 5. Received By: (Print Name) 6. Signature (Addressee or Agent)	4b. Service Register Express Return Re 7. Date of D	Type ed Mail eceipt for Merchandi elivery e's Address (Onle	Certified Insured
PS Form 3811 , December 1994		Domestic Re	eturn Receipt

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Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273

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VIVAGE CommonSairs ID#0990473
DRYCLEAN USA # 11412
GAGLIANO MICHAEL
1875 W COMMERCIAL BLVD., STE 140
FT LAUDERDALE FL 33309

FOR GOVERNMENT USE ONLY

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

Obj.: 002273

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Fund: 20-2-035001 Obj.: 002273