

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

March 14, 1997

Mr. Nizakat A. Baig President Crystal Cleaners 2316 South Dixie Highway West Palm Beach, Florida 33401

Re: Facility No. 0990483

Dear Mr. Baig:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 14, 1997.

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,

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"

BEST AVAILABLE COPY

LX

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL C	OMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:50 TIME OUT: //	50 AIRS ID#: 0990483
TYPE OF FACILITY: Dry Clean	ng,
	eaners DATE: 2-11-97
FACILITY LOCATION: 2316 S. D	TATE HOT
RESPONSIBLE OFFICIAL: NIZAKAT I	3340/ BAIG PHONE NUMBER: 655 -0051
	luated during this inspection, the facility is found to be in
compliance with DEP Rule 62-213.300, Florida Admini Based on the results of the compliance requirements eva	
discrepancies were noted:	action carring and appearion, are following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
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COMMENTS:	
	
The Annual Compliance Certification form has been properly cert	ified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	-11-98
ρ	pproximate)
INSPECTION CONDUCTED BY:	CNOR SP(1)
INSPECTOR'S SIGNATURE:	PHONE NUMBER: 353-3070

ARMS

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PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INSPEC	TION COMPLAIN I/DISCOVERY	ч
FACILITY NAME: CRYSTI FACILITY LOCATION: 2316 5	1-97 TIME IN: 10:50 TIME OUT: 11 7 L CLEANERS 7. Dixie Huy, P.B., FL 33401	;50
PART I: NOTIFICATION		
(check appropriate box)		<u> </u>
1. Existing facility notified DARM by 9/1/96	·	
2. New facility notified DARM 30 days prior to	startup	<u> </u>
3. Facility failed to notify DARM to use general		×
PART II: CLASSIFICATION Facility indicated on notification form that it (check appropriate box)	is: be Belause Perc Usag may be Belause Perc Usag is manufactured in 1976.	ge is
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	MY ON (See above)	
If no, please check the appropriate classification	n:	
	permit as number above nd is not eligible for a general permit above The preceding 12 months by this dry cl	

asked to keep Records for Perc

use Hose t 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 least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY ON XNA 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 prior to September 22, 1993 installed If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) OY ON 1. Equipped all machines with the appropriate vent controls? DY '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 DY DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated DY DN condenser on a weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after

PART III: GENERAL CONTROL REQUIREMENTS

DY ON

verifying that the coolant had been completely charged?

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?	ΟY	ПП	
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	□N	
Is the temperature differential equal to or greater than 20° F?	ΠY	□и	
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?	ΟY	□N □N/A	
Is the perc concentration equal to or less than 100 ppm?	ΩY	□N	
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ΟY	ΩΝ	
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	_ QY	□N □N/A	
6. Routed airflow to the carbon adsorber (if used) at all times?	ΟY	□N □N/A	
<u> </u>			
PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?	Cosd	s for Per	₹(
1. Maintained receipts for perc purchased?	ΠY	XM	
2. Maintained rolling monthly averages of perc consumption?	ΩY	Ми	
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	XX	וא□	
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	XY	ПN	
4. Maintained calibration data? (for direct reading instruments only)	□Y	ON XIVA	
5. Maintained exhaust duct monitoring data on perc concentrations?	ΩY	韓図り	4
6. Maintained startup/shutdown/malfunction plan?	XY	ПИ	سد
7. Maintained deviation reports? as Ked to keep seports.	ΠY	Ø€4	
Problem corrected?	XY	□N	
8. Maintained compliance plan, if applicable?	ΩY	ON XVA	
PART VI: LEAK DETECTION AND REPAIRS			
	/	ИП	

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) If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? QY QN d. Kept in a clean and secure area when not in use? QY QN e. Verified for accuracy by use of duplicate samples (calorimetric only)? QY QN 3. Has the facility maintained a leak log? Able to Keep Log for leaks Hose connections, fittings, couplings, and vaives Door gaskets and seating QY QN Stills Will Filter gaskets and seating QY QN Stills Solvent tanks and containers QY QN Aproximate QY QN Approximate Date of Next Inspection R.V. Chokshi Inspector's Name (Please Print) R.V. Chokshi Inspector's Signature Approximate Date of Next Inspection Red to inspection Red to inspection Approximate Date of Next Inspection Red to inspection Approximate Date of Next Inspection Red to inspection Approximate Date of Next Inspection Red to inspection Revised 10/28/96 Approximate Date of Next Inspection Red to inspection Red to inspection Revised 10/28/96 Approximate Date of Next Inspection Revised 10/28/96 Approximate Date of Next Inspection Red to inspection Revised 10/28/96 Approximate Date of Next Inspection Revised 10/28/96 Red to inspection	2. Which method of de	tection is used by th	e respon	sible offic	ial?						
Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/FID/calorimetric tubes) If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? b. Calibrated against a standard gas prior to and after each use (PID/FID only)? c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? e. Verified for accuracy by use of duplicate samples (calorimetric only)? 3. Has the facility maintained a leak log? When the facility maintained a leak log? When the facility maintained a leak log? Abose the responsible official check the following areas for leaks? Hose connections, fittings, couplings, and valves Door gaskets and seating When Stills Filter gaskets and seating When Stills Filter gaskets and seating When Solvent tanks and containers When Cartridge filter housings When Cartridge filter housings When Cartridge filter housings When Chokshi Inspector's Signature Market of Responsible Official R.V. Chokshi Inspector's Signature When Same of Responsible Official Roll Section Approximate Date of Next Inspection Roll Section Approximate Date of Next Inspection Roll Section Roll Section Approximate Date of Next Inspection Roll Section Roll		•	•					A.			
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Pumps Solvent tanks and containers Water separators Water separ	Door gaskets a	nd seating	√Y Y	ΠN		Stills		XY	ПN		-
Solvent tanks and containers Sty ON Cartridge filter housings Sty ON Water separators Water separato	Filter gaskets a	and seating	*	ПN		Exhaust damper	· S	OY	*	×	NA
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sked to seal Spotting asea. N. 15 211 sked to keep log for Perc Consumption of leak detection	Name of Inspector's	Responsible Officia K S h (Name (Please Prin	0	is fr	cat a	2-(1	of Inspe	ction 3	nspection	<u>,</u>	
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FEB 1 4 1997

Perchloroethylene Dry Cleaning Facility Notification

Bureau of Air Monitoring & Mobile Sources

	Facility Name and Location Nie Huy Cleaning Corp 1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	ile S
	1 Facility Owner/Company Name (Name of corporation, agency, or individual owner):	
DI.	ACRYSTAL CLEANERS	
	2. Site Name (For example, plant name or number): $(1/2)^2 = (1/2$	
	2316 S. DixIe HW7 3340	
	3. Hazardous Waste Generator Identification Number:	·
	FLD 981014731	
	4. Facility Location: SAM E Street Address:	
	City: County: Zip Code:	4
	5. Facility Identification Number (DEP Use):	
	0990483	
	Responsible Official	
7	6. Name and Title of Responsible Official: NZAKAT A BA C, Pres.	
	7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: County: Zip Code:	
	8. Responsible Official Telephone Number: Telephone: (561)655-005/ 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:	
en e	11. Facility Contact Telephone Number: Telephone: () - SAMIZFax: () -	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Facility Information Facility Information Facility Information Facility Information Facility Information Facility Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable. Machine Date Machine Control Machine Control Machine Control Machine Control Initially Device Initially Initially Device Initially	790 1 -221 T	/	a occ	<u>_</u> _ > _ (STR	CEX	==	> 8-	90-
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Date Machine Control Machine Control Initially Device Installed ID Purchased Installed I	1.(a) Provide the inform	nation	below for ea	ch machine a	t the	facility. Indi	icate the type	e of n	nachine, the	date of
Type of Machine ID Purchased Installed ID Purchased ID Purchased Installed ID Purchased ID P	its purchase, and the dat	e the	control device	e was installe	d, if a	ipplicable.				
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Example #1 03-OCT-93 12-NOV-93 #2 08-DEC-91 #3 02-MAR-92 02-MAR-92 Dry-to-Dry Unit		ID	1 -		מו			תו		1
Dry-to-Dry Unit M/4 Year A He hought in 1991	Type of Machine	עז	Furchased	installed	LID	Fulchased	Ilistaneu	TID	Furchased	Instaned
(1) w/ ref. condenser 1976 N/A	Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
(1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls Washer Unit (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 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? [No Yelox d) 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:	Dry-to-Dry Unit	da	18 3/20 C).	· · · · · ·		1+ 6	1001			·
(2) w/ carbon adsorber (3) w/ no controls They have water Cooley for Rexc Washer Unit (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 Reclaimer Unit (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ carbon adsorber (14) w/carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ ref. condenser (18) w/ carbon adsorber (19) w/ no controls Reclaimer Unit (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ ref. condenser (18) w/ carbon adsorber (19) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ ref. condenser (18) w/ carbon adsorber (19) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ ref. condenser (18) w/ carbon adsorber (19) w/ no controls (19) w/ ref. condenser (11) w/ carbon adsorber (11) w/ carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ ref. condenser (18) w/ carbon adsorber (19) w/ no controls (19) w/ ref. condenser (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ ref. condenser (18) w/ carbon adsorber (19) w/ carbon adsorber (19) w/ carbon adsorber (19) w/ carbon adsorber (10) w/ carbon adsorber (11) w/ carbon adsorber (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ carbon adsorber (16) w/ carbon adsorber (17) w/ carbon adsorber (18) w/ carbon adsorber (19) w/ carbon adsorber (19) w/ carbon adsorber (19) w/ carbon ads		1//17	100%	A TED	DUS			T 7-	to too	1.
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\cdot	[No Yecox d (b) If less than 12 mo	∑] gall nths, l	ons now many? [] months	i					
Po not have records for Parc wage as ked to keep records for Perc usage 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.) The Existing small area source New small area source New large area source New large area source	Check why it is le	ss tha	n 12 months:	New owner:	[_] New store	: Did	not k	eep records:	
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(Indicate with an "X". Select one classification only.) Existing small area source New small area source New large area	3 What is the facility's	T	classification	n based on th	e defi	nitions found	d in section (-: '3) of	Part II2	
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New small area source [] New small area source [] New large area source []		. 3616	er one classil	ication only.,	,					
Existing large area source [] New large area source []	4) (maicate with all X		/			all area cour	rce [1		
	they Existing small	area s	ource [Ne	ew sm	iaii ai ca soui		J		

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

4. What control technology is required on machines pursuant to section (5) of	Part II of this notification form?
(Indicate with an "X".)	att II of this notification form:
Existing large area source Carbon adsorber [] Refrigerated condenser	
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser	
· · · · · · · · · · · · · · · · · · ·	
	t 3
5. A facility which contains non-exempt emissions units shall not be eligible to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating univexemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total heat input of boiler HP or less), and (2) are fired exclusively by natural gas except for perioduring which propane or fuel oil containing no more than one percent sulfur is	ods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Recordkeeping Infor	mation
Check all logs which are required to be kept on-site in accordance with the req	
	[] asked Keep Record
(a) Purchase receipts and solvent purchases	1
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring.	LI N/A
(d) Carbon adsorber exhaust perc concentration monitoring	LINA
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	$ \swarrow $

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

Surrender of Existing Air Permit(s)

Ple	ase 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)	
		No air permits currently exist for the operation of the facility indicated in this notification form.	
	,	Responsible Official Certification	
	this notific statements maintain i	dersigned, 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form.	
	I will proi	mptly notify the Department of any changes to the information contained in this notification.	
	Signature	Jakeilal Bay 02/11/97.	

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

Z 333 613 550

US Postal Service Seceipt for Certified Mail

AIRS ID# 0990483 CRYSTAL CLEANERS NAZAKAT A BAIG 2316 S DIXIE HWY WEST PALM BEACH FL 33401

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



Department of Environmental Protection

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

Virginia B. Wetherell Secretary

LETTER OF NONCOMPLIANCE

TO:

Our records indicate that you have previously claimed entitlement to use a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.), as the owner or operator of an eligible facility. However, if one or more of the following events has occurred, you are no longer eligible to operate under the Title V Air General Permit. Department records currently indicate that your facility is not in compliance with the item(s) checked below:

- () 1) The facility has a new owner or operator (Rule 62-213.300(3)(a), F.A.C.).
- () 2) The annual emissions fee for your facility has not been received by the Department (Rule 62-213.300(3)(b), F.A.C.).
- () 3) The annual Compliance Certification for your facility has not been filed with the Department (Rule 62-213.300(3)(n), F.A.C.).

If your facility is to continue to operate under the Title V Air General Permit, the condition(s) referenced above must be corrected. Please call our Division for assistance--either Sandra Bowman at 850/921-9583 or Rick Butler at 850/921-9586.

The terms and conditions stated in the Title V Air General Permit continue to apply whether or not the facility is still operating. The Responsible Official (RO) is considered to be responsible for the permitted facility until the permit is surrendered, including any violations or payment of fees. If you wish to give up your eligibility to use the Title V Air General Permit, please sign and return this form in the enclosed self-addressed envelope. This will remove your name from our annual billing list used to notify when Title V permit fees are due.

I am the Responsible Official for the facility identified above and hereby notify the Department that I surrender the Title V Air General Permit for that facility.

Signature
9
Date
_

Facility Owner or Operator Page Two

Your prompt response to correct or clarify this situation will be greatly appreciated. If you have any questions, please call the Division staff listed above or the Small Business Assistance Program hotline at 800/722-7457.

Sincerely,

Sandra Bowman

Title V Air General Permit Program

/SB

cc: District/Local program



Department of **Environmental Protection**

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

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

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 # 0990483 CRYSTAL CLEANERS

NAZAKAT A BAIG **3111 45TH STREET** WEST PALM BEACH FL 33407-1974 FOR GOVERNMENT USE ONLY

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

Obj.: 002273

MIZAKAT BATG 6/03 NW. Its Street. Dale 3 90198 Sent one letter at your office years Since lost march. 1997, flant was Shut down, due to mostgage aligntion between the bank (FIRST Union + the land land) and Building went to forclosure by l Hice and last inspater Name John he came to my 45 St doop of Star mean and I sign on few papers, 1998 people don't have any record morey even Business Loss not try to close this case NO Business for last two years need to check out court order to falm Beach court house. thank you !!



Department of Environmental Protection

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

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.

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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

CRYSTAL CLEANERS NAZAKAT A BAIG 3111 45TH STREET WEST PALM BEAGUE

AIRS ID # 0990483

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1 Fund: 20-2-035001

Obj.: 002273

WEST PALM BEACH FL 33407-1974

UNITED STATES
POSTAL SERVICE 0000 SANDY BOUMAN TITLE V - General Permit Receipts
Post Office Box 3070 Tallahassee, FL 32315-3070

32315X3Ø7Ø

Indicated and a state of the st



Department of **Environmental Protection**

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

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),

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(cut here)

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 # 0990483

CRYSTAL CLEANERS NAZAKAT A BAIG **3111 45TH STREET**

WEST PALM BEACH FL 33407-1974

There 15 no business Since

FOR GOVERNMENT USE ONLY

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

Obj.: 002273

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199	Return Receipt Show Whom & Date Deliver			
Form 3800 , April 1995	Return Receipt Showing to Date, & Addressee's Addr			
88	TOTAL Postage & Fe	es \$		
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PS				
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and addr	ess on the reverse of	this form so that	we can return this	extra fee):
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	uested" on the mailpid			2. Restricted Delive
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■Attach this form using Return Receipt Service see's Address permit.

Write "Return Rece
The Return Rece ted Delivery delivered. ister for fee. Is your RETURN ADDRESS completed on 3. Article Addre AIRS ID # 0990483 4b. Service Type CRYSTAL CLEANERS Certified ☐ Registered NAZAKAT A BAIG 3111 45TH STREET ☐ Insured ☐ Express Mail WEST PALM BEACH FL 33407-1974 ☐ Return Receipt for Merchandise ☐ COD 7. Date of Delivery Thank you 8. Addressee's Address (Only if requested 5. Received By: (Print Name) and fee is paid) 6. Signature: (Addressee gr. Adent)

PS Form **381/1**, December 1994

SENDER:
Complete items
Complete items

102595-97-B-0179 Domestic Return Receipt

UNITED STATES POSTAL SERVICE

01



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

● Print your name, address, and ZIP Code in this box ●

DARM/MOBILE SOURCE CONTROL PROGRAM
DEPT. OF ENVIRONMENTAL PROFESTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2440

Ory Stal Cleams

Bureau of All Montes Sources Post Office Box 3070
Tallahassee, FL 32315-3070

PATE | FT. LAUD. FL 33355 | MAR II. 99 | AMOUNT | SD. 33 | 00037251-10

SANDY BROWNER

32315-3070

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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL X CO	DMPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 11: 35 TIME OUT: 12: 35	AIRS ID#:_ <u>0990383</u>
TYPE OF FACILITY: Dey Cleaning	
FACILITY NAME: AROOMS FABRICARE CON	Hell DATE: 2/7/00
FACILITY LOCATION: 2565 Forest Hill B	
West Palm Beach, Fl	
RESPONSIBLE OFFICIAL: ARUNIO STEWART	PHONE NUMBER: 968 - 3909
Based on the results of the compliance requirements eval compliance with DEP Rule 62-213.300, Florida Adminis	· · · · · · · · · · · · · · · · · · ·
Based on the results of the compliance requirements eval discrepancies were noted:	uated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
,	
	70
	Bureau C
	Sof A
•	Monitoring Sources
	a la constant de la c
<u> </u>	
· · · · · ·	
COMMENTS:	
The Annual Compliance Certification form has been properly certification	ried and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	200/
(Ap	pproximate)
	rey Direk
PI) INSPECTOR'S SIGNATURE: <u>مولوم</u> کاستمبالا	ease Print)PHONE NUMBER: <u>355 - 3070 X7 //39</u>

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPEC	CTION COMPLAINT/DISCOVERY CTION
	/00 TIME IN: 1/235 TIME OUT: 12:35
	icale Contre
]	Drest Hill Blud.
West Pala	m Beach, F/ 33406
RESPONSIBLE OFFICIAL: AENOIC .	5kuaet Phone: 968 - 3909
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to	o startup
2. Facility failed to notify DARM to use genera	
PART II: CLASSIFICATION	
Facility indicated on notification form that it	
(check appropriate box) A.	☐ 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 □N □Can not determine
	sification: a general permit as number above e limits and is not eligible for a general permit

Is the responsible official of the dry cleaning facility: (check appropriate boxes) XY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? XY ON ON/A 2. Examining the containers for leakage? NO YO 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at MY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN XN/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 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) MD AK 1. Equipped all machines with the appropriate vent controls? MY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the **∀**Y □N □N/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated MY DN condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MY ON ON/A condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after XY DN 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?	ΟY	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	□N	□N/A
	Is the temperature differential equal to or greater than 20° F?	· □Y	ΠИ	□N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber,			
	if machines are equipped with a carbon adsorber?	ΠY	ПИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПN	□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?	ЦY	UМ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΠY	□и	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	מם	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	XYY ON
2. Maintained rolling monthly total of perc consumption?	⊠Y □N
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	XY 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?	אורם אם או
4. Maintained calibration data? (for applicable direct reading instruments)	AVA X NO YO
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON XIN/A
6. Maintained startup/shutdown/malfunction plan?	MA □N
7. Maintained deviation reports?	YY ON ON/A
Problem corrected?	AY ON ON/A
8. Maintained compliance plan, if applicable?	OY ON XIN/A

ADD	DITIONAL SITE INFORMATION:		
1.	Secondary Containment for: Dry Cleaning Machine & Storage area Waste area Spotting area Sealed	Yes [×] [×]	() ()
	committee of the commit	•	
2.	Disposal of Water from Water Separator using approved evaporator or contracted Wastewater service	í] [X]	[]
	(A) MCF PICKS up the waste		

owing areas for leaks' Y ON ON/A Sponsible official?	Muck cookers Stills Exhaust dampers Diverter valves Cartridge filter housings		A\N ⊠ N A\N□ N
Y ON ON/A	Muck cookers Stills Exhaust dampers Diverter valves		N X N/A N □N/A N X N/A N □N/A
Y ON ON/A	Muck cookers Stills Exhaust dampers Diverter valves		A\N□ N A\N
Y ON ON/A (Y ON ON/A (Y ON ON/A (Y ON ON/A (Y ON ON/A	Stills Exhaust dampers Diverter valves		A\N□ N A\N
Y ON ON/A Y ON ON/A Y ON ON/A Y ON ON/A	Exhaust dampers Diverter valves	MO YES	A\N ⊠ N A\N□ N
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Y ON ON/A Y ON ON/A			
Y ON ON/A	Cartridge filter housings	DYY ON	1
			1 □N/A
esponsible official?			
nt on exterior surfaces	s) -	×	
h gaskets)		X	
		X	
(FID/PID/calorimetri	c tubes)	X NA	
		X NA	. (
ntation, is the equip	ment:	⊠ N/A	
vapor concentrations	in a range of 0-500 ppm?	עם אם	1
ard gas prior to and at	fter each use	OY ON	1 .
vious signs of wear o	n a weekly basis?	DY DN	1
area when not in use	?	OY ON	1
se of duplicate sampl	es (calorimetric only)?	DY DN	I
	(FID/PID/calorimetri ntation, is the equipal vapor concentrations and gas prior to and a vious signs of wear of area when not in use se of duplicate sample	(FID/PID/calorimetric tubes) Intation, is the equipment: vapor concentrations in a range of 0-500 ppm? and gas prior to and after each use vious signs of wear on a weekly basis? area when not in use? se of duplicate samples (calorimetric only)?	(FID/PID/calorimetric tubes) Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation, is the equipment: Vapor concentrations in a range of 0-500 ppm? Intation concentrations in a range of 0-500 ppm? Intation concentration

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	Special Delivery Fee	
	Restricted Delivery Fee	
April 1995	Return Receipt Showing to Whom & Date Delivered	
April	Return Receipt Showing to Whom, Date, & Addressee's Address	
PS Form 3800 ,	TOTAL Postage & Fees	\$
33	Postmark or Date	
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AIRS ID# 0990483

DIXIE HWY CLEANING CORP NAZAKAT A BAIG 2316 S DIXIE HWY WEST PALM BEACH FL 33401

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

Z 333 660 598 US Postal Service **Receipt for Certified Mail** AIRS ID # 0990483 CRYSTAL CLEANERS NAZAKAT A BAIG **3111 45TH STREET** WEST PALM BEACH FL 33407-1974 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 3800. TOTAL Postage & Fees Postmark or Date Form S Fold at line over top of envelope to SENDER: I also wish to receive the ■Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. following services (for an ■Print your name and address on the reverse of this form so that we can return this extra fee): = Attach this form to the front of the mailpiece, or on the back if space does not 1. Addressee's Address permit.

Write Receipt Requested on the mailpiece below the article number. 2. Restricted Delivery ■ The Return Receipt will show to whom the article was delivered and the date delivered. Pocelot Consult postmaster for fee. 3. Article Addressed to: 4a. Article Number Z 333 660 59 AIRS ID # 0990483 4b. Service Type CRYSTAL CLEANERS NAZAKAT A BAIG ☐ Registered Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD

3111 **45**TH STREET WEST PALM BEACH FL 33407-1974 5. Received By: (Print Name)

on the

completed

RETURN ADDRESS

2-19-94 8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-97-B-0179

7. Date of Delivery

Domestic Return Receipt

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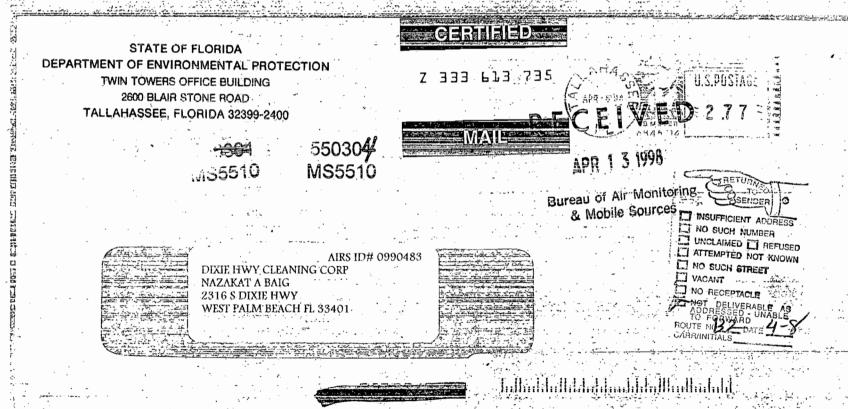
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3. Article Addressed to: AIRS ID# 0990483 DIXIE TEWY CLEANING CORP NAZAKAT A BAIG 2316-S-DIXIE HWY WEST-FALM BEACH FL 33401	4a. Article if 4b. Service Registe Express Return Re 7. Date of C	336/3735 Type red © Cert Mail □ Insu eccipt for Merchandise □ COL
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