

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

June 24, 1997

Mr. Patel Rashmikant One Price Cleaner 121 North US 1 Tequesta, Florida 33469

Re: Facility No.: 0990493

Dear Mr. Rashmikant:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on April 21, 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, 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



Department of Environmental Protection

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

David B. Struhs Secretary

December 22, 2000

Mr. Mukund Patel Star Cleaners # 990 493 121 North US Highway 1 Tequesta, Florida 33469

Dear Mr. Patel:

Thank you for your note informing the Division of Air Resource Management that Star Cleaners has changed ownership. We received your note on December 21 and changed the facility status to inactive in our files.

In accordance with Rule 62-213.300(3), Florida Administrative Code (F.A.C.), the Title V Air General Permit is not-transferable and does not follow a change in ownership of the facility. As the new owner of Star Cleaners, you are eligible to operate under the terms of a Title V air general permit provided a Perchloroethylene Dry Cleaner Air General Permit Notification Form is completed and submitted to the Department. The terms and conditions for perchloroethylene dry cleaning facilities are listed in Part II of the notification form. For your convenience, I am enclosing a copy of the Perchloroethylene Dry Cleaner Air General Permit Notification Form for your convenience. Please complete this form and submit it to the following address:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

If you have any questions pertaining to the completion of this form or about the Title V general permit program, please contact either Rick Butler at 850/921-9586 or me at 850/921-9583.

Sincerely,

Sandra Bowman

Mobile Source Control Section

Bureau of Air Monitoring and

Mobile Sources

SB/

Enclosures

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

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	19/1 / 2 can	
. 6	Pau of Air Monitoring RE-INSPECTION IN	

TYPE OF INSPECTION: ANNUAL COM	1PLAINT/DISCOVERY RE-INSPECTION RE-INSPECTION
TIME IN:TIME OUT:	AIRS ID#: 0990493
TYPE OF FACILITY: Day Cleaners	-
FACILITY NAME: One Price	Cleme-> DATE: 4/14/97
FACILITY LOCATION: 121 V)	Tegopota 33469
(A)	
RESPONSIBLE OFFICIAL: Patel Rush mi ku	Int PHONE NUMBER: 511 747829
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra	ative Code (F.A.C.).
Based on the results of the compliance requirements evalua discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	-
·	
The second secon	
	·
COMMENTS:	•
	· · · · · · · · · · · · · · · · · · ·
The Annual Compliance Certification form has been properly certified DATE OF NEXT INSPECTION:	
INSPECTION CONDUCTED BY: W, L'ebi	
INSPECTOR'S SIGNATURE: h, Liebl	PHONE NUMBER: 56 355754

#0990493

· · ·	五0110113
	One Price Cleaner
P.14	1.(a) add date control device
	1.(c) mark out "X"
	3. Should be new small area Source
	
	· · · · · · · · · · · · · · · · · · ·
	!

RECEIVED

APR 2 1 1997

Perchloroethylene Dry Cleaning Facility Notification Bureau of Air Monitoring & Mobile Sources

Facility Name and Location

-1	Facility Course (Carrows Name Office of a course of a	
1.	Facility Owner/Company Name (Name of corporation, agency, or individu	ial owner):
	JAY SANTOSHI INC	
2.	Site Name (For example, plant name or number):	
	ONE PRICE CLEANER	
3.	Hazardous Waste Generator Identification Number:	
	FLR 000009498	,
4.	Facility Location: 121 N US 1	
	City: TEQNESTA County: WPB.	Zip Code: 33469
5.,	Facility Identification Number (DEP Use):	
		0990493
	Responsible Official	
6.	Name and Title of Responsible Official:	
	A RASHMIKANT (PRESIDENT)	·
7.	Responsible Official Mailing Address:	
	Organization/Firm: Street Address: 2 N US 1	
	City: County:	Zip Code: 33469
	City: 7EQUESTA County: WPB	55/10
8.	Responsible Official Telephone Number:	
	Telephone: $(561)747 - 8289$ Fax: $(-)$	· -
-	Facility Contact (If different from Responsible Of	ficial)
9.	Name and Title of Facility Contact (For example, plant manager):	-
10.	Facility Contact Address:	
	Charle Additions	
	Street Address: City: County:	Zip Code:
	County.	2.10 0000.
11.	Facility Contact Telephone Number:	
	Telephone: () - Fax: ()	-
	·	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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	1	Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
ype of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit	<u> </u>		٠						*.
(1) w/ ref. condenser	1	JULY 95							
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit		• .							
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Oryer 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 No control devices (a) What was the total of 90 (b) If less than 12 mont Check why it is less	are r quant gallo	equired to be ity of perchlo ons ow many? [installed [_ proethylene (X perc)	purchased in	the latest 12	2 mor	ths?	· · .
What is the facility's so (Indicate with an "X". Existing small ar	urce Selec	classification et one classifi	based on the cation only.)	e defi		d in section (·	
MAN Existing large are					rge area sour		, ,	7	
2 PH.1									

DEP Form No. 62-213.900(2)

Effective: 6-25-96

(Indicate with an "X".)	ired on machines	pursuant to section (5) of	Part II of this notification form?
Existing large area source Carbon adsorber	<u>:</u>	Refrigerated condenser	
New small area source Refrigerated condenser			
New large area source Refrigerated condenser			
5. A facility which contains non-eto Rule 62-213.300, F.A.C. Verify exemption criteria or that no such a All steam and hot water generating boiler HP or less), and (2) are fireduring which propane or fuel oil contains and hot water generating No such units on-site	y that all steam an units exist on-site g units on-site (1) d exclusively by n ontaining no mor	d hot water generating un: have a total heat input of the state of th	its on-site meet the following 10 million BTU/hr or less (298 ods of natural gas curtailment
	·		
Equipm	ent Monitoring	and Recordkeeping Info	rmation
Check all logs which are required	to be kept on-site	in accordance with the rec	quirements of this general permit:
(a) Purchase receipts and solvent p	ourchases		
(b) Leak detection inspection and t	repair		
(c) Refrigerated condenser tempera	ature monitoring		
(d) Carbon adsorber exhaust perc of	concentration mor	nitoring	
(e) Instrument calibration			
(f) Start-up, shutdown, malfunction	on plan		

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

Surrender of Existing Air Permit(s)

ease indica	tte 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 notif statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the nts made in this notification are true, accurate and complete. Further, I agree to operate and in the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.					
I will pro	omptly notify the Department of any changes to the information contained in this notification.					
	Q4-08-97					
Signature	Date					

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

ARMS



PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANN RE-D	UAL NSPECTION	CO	MPLAINT/DISCOVER	.Y 📮
AIRS ID#: 0990493 DATE: FACILITY NAME: One	Mrs.	TIME IN: 1	TIME OU	T: _
FACILITY LOCATION: 121	υS		33469	
	:			
PART I: NOTIFICATION				
(check appropriate box)				
1. Existing facility notified DARM by 9	/1/96			
2. New facility notified DARM 30 days	prior to startup			
3. Facility failed to notify DARM to use	general permit			
PART II: CLASSIFICATION				
Facility indicated on notification form (check appropriate box)	that it is:			
A. 1. Existing small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both fypes, x<140 gal/yr (constructed before 12/9/91)	dry trai bot	New small area s to-dry only, x<14 sfer only, x<200 1 types, x<140 ga 1 structed on or af	10 gal/ут gal/ут l/ут	
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>dry trai bot</td><td>New large area seto-dry only, 140- sfer only, 200-x- types, 140-x-1, astructed on or af</td><td><x<2, 100="" gal="" yr<br=""><1,800 gal/yr ,800 gal/yr</x<2,></td><td>. *</td></x<2,>	dry trai bot	New large area seto-dry only, 140- sfer only, 200-x- types, 140-x-1, astructed on or af	<x<2, 100="" gal="" yr<br=""><1,800 gal/yr ,800 gal/yr</x<2,>	. *
This is a correct facility classification.	-5	. □N		
If no, please check the appropriate class facility qualified for a facility exceeds above	general permit a limits and is not	eligible for a gen	eral permit	io devolvening
B. The total quantity of perchloroethyle.	rie (here) britegia	sea within the big	scentus 12 montus by m	as any cicaming.

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? DY ON DY ON 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? ZY ON 4. Draining cartridge filters in their housing or in sealed containers for at DY DN 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 BNA 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? ZY On DY ON ONA 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 MY DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated MY ON condenser on a weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the MY ON 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?	ØÝ	ПD
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ØY	ПΩ
	Is the temperature differential equal to or greater than 20° F?	PÝ	ИΩ
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?	QY	ON OMIA
	Is the perc concentration equal to or less than 100 ppm?	ДY	ON _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?	ΩY	ON_M/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	QY	ON ON/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	QΥ	ON ON/A
_			

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	DY ON
2. Maintained rolling monthly averages of perc consumption?	SY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	AY UN
4. Maintained calibration data? (for direct reading instruments only)	DY DN BN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON_N/A
6. Maintained startup/shutdown/malfunction plan?	DY ON
7. Maintained deviation reports?	BY ON
Problem corrected?	AT ON
8. Maintained compliance plan, if applicable?	AVO NO VA

PART VI: LEAK DETECTION AND REPAIRS	/
1. Does the responsible official conduct a weekly leak detection and repair inspection?	AY ON

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2. W	Thich method of detection is used by	•		me.		-
	Visual examination (condensed			urfaces)	<u>/</u>	
	Physical detection (airflow felt the	rough ga	skets)		,0	
	Odor (noticeable perc odor)				A	
	Use of direct-reading instrument	ation (FII)/PID/cald	rimetric tubes)		N/
	If using direct-reading instrum	entation,	is the equ	iipment:		
İ	a. Capable of detecting	perc.vapo	or concent	rations in a range of 0-500 ppm?	ΩY	$\square N \underline{\hspace{0.1cm}} N / R$
:	b. Calibrated against a (PID/FID only)?	standard;	gas prior t	o and after each use	ΩY	ON_N/A
	c. Inspected for leaks a	nd obviou	s signs of	wear on a weekly basis?	\Box Y	ON_N/A
	d. Kept in a clean and	secure are	a when no	ot in use?	\Box Y	ON_N/A
	e. Verified for accurac	y by use of	duplicate	samples (calorimetric only)?	ΠY	ON_N/A
3. H	las the facility maintained a leak log	?			ZY	N
4. D	oes the responsible official check the	following	g areas for	· leaks?		
	Hose connections, fittings, couplings, and valves	Δ _Y	ИП	Muck cookers	, Q Y	_א_אם
	Door gaskets and seating	QX	N	Stills	Q.Y	□NN
	Filter gaskets and seating	A Y	ПD	Exhaust dampers	QY	מ_מם
	Pumps	ΔΥ	ПN	Diverter valves	ZY	ן_אַ□
	Solvent tanks and containers	QY	ИD	Cartridge filter housings	s ZIY	ם א_ו
	Water separators	ØΥ	ZO			744 1
	the left			Patel Rush	mil	cont
	Name of Responsible Office	ial (Signa	ature)	Name of Responsible Officia	al (Pri	nt) & Phon
	m, Lieblen		-	417197		
	Inspector's Name (Please Pr	rint)		Date of Insp	ection	
	m. Liebla			4/15/91		
	Inspector's Signature	,		Approximate Date of	Next L	nspection
conda	ry Containment for: Dry	Cleanin	g Machi	ne & Storage area		Yes No
	•			Waste area		[]
				Spotting area Seale	ed	[] []
spos	al of Water from Water Sep	parator	using	approved evaporator		
	or	Waste H	Handle	Pick s up Water		[][]

	LEANER AIR NUAL COMPLIA	•		
	JAY SANTOSHI IN RASHMIKANT PA 121 N US 1 TEQUESTA FL 334	TEL	90493	
	Do]	NOT Remove Label		
Annual Reporting Period:	TAN	19 <i>98</i> TO	JAN	19 <u>9 </u>
Based on each term or condition of the Title	e V general air perm	it, my facility has re	mained in complianc	e with DEP Rule
62-213.300, Florida Administrative Code (F.A.C.), during the p	eriod covered by this	s statement. LYE	s \square NO
If NO, complete the following:				
#1. Term or condition of the general permi	t that has not been in	continuous complia	ance during the repor	ting period stated above:
Exact period of non-compliance: from	4/P		to	
Action(s) taken to achieve compliance:	NA.			c 33
Method used to demonstrate compliance:	_JA			E POPE V
#2. Term or condition of the general permi	t that has not been in	continuous complia	ince during the repor	ting period stated above:
	D			
Exact period of non-compliance: from	1/J)	CEIAF		
Action(s) taken to achieve compliance:		JAN 2 2 1998		
Method used to demonstrate compliance:	Вщ	eau of Air Monitor & Mobile Sources	ring	
As the responsible official, I hereby certify, ban notification are true, accurate and complete. I does not exceed 2,100 gallons per year for dry-	Further, my annual co	nsumption of perchlo	roethylene solvent, bas	sed upon purchase receipts,
RESPONSIBLE OFFICIAL: 18 18 Na	HMIKAKT me (Please Print)	BATEL	Signature	1/16/9 V

^{*}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 sun	MMARY REPORT			
TYPE OF INSPECTION: ANNUAL COM	PLAINT/DISCOVERY RE-INSPECTION			
TIME IN: 9650 TIME OUT: 10:3	0AIRS ID#: 09904-93			
TYPE OF FACILITY: Dry "Cleaning	-			
FACILITY NAME: One Price C	Cleaners DATE: 6-2-98			
FACILITY LOCATION: $1210.5.1$				
Tequesta, FL 33469				
RESPONSIBLE OFFICIAL: RASHMT PAT	EL PHONE NUMBER: 747-8287			
Based on the results of the compliance requirements evaluate 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			
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COMMENTS:	JUL 1 5 1998			
	Bureau of Air Monitoring			
	& Mobile Sources			
	•			
The Annual Compliance Certification form has been properly certific	ed and submitted to the inspector. YES NO			
DATE OF NEXT INSPECTION: JUNE 1999				
	proximate)			
INSPECTION CONDUCTED BY: K.V. Ch	okshi'			
Ple (Ple	ase Print) 355-3070			
INSPECTOR'S SIGNATURE: α - ν				

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ARRIS

TYPE OF INSPECTION:

PART I: NOTIFICATION

(check appropriate box)

ANNUAL

X

COMPLAINT/DISCOVERY

C

RE-INSPECTION

AIRS ID#: 0990493 DATE: 6-2-98 TIME IN: 9:50 TIME OUT: 10:30
FACILITY NAME: One Price Cleaners
FACILITY LOCATION: 121 U.J. 1
Jeguesta, FL 33469
RESPONSIBLE OFFICIAL: RASHMI PATEL PHONE: 747 - 8287
CONTACT NAME:PHONE:

New facility notified DARM 30 days prior to startup	
2. Facility failed to notify DARM to use general permit	0
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box) A.	n form t 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 before $12/9/91$)	/ут
5. This is a correct facility classification OY ON OCan not determ	mine
If no, please check the appropriate classification: \[\sum \frac{1}{2} \text{facility qualified for a general permit as number \frac{1}{2} \text{facility exceeds above limits and is not eligible for a general state.} \]	above permit
B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 me facility was gallons.	onths by this dry cleaning

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 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
- 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?

2 of 5

PY ON

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MY ON ONA

MY ON

AVO NO YA

AY DN

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

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	MY ON
2. Maintained rolling monthly averages of perc consumption?	אם אלם .
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם צאם
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 צא
4. Maintained calibration data? (for applicable direct reading Instruments)	OY ON MINA
5. Maintained exhaust duct monitoring data on perc concentrations?	באמבע מם צם
6. Maintained startup/shutdown/malfunction plan?	ио Ye
7. Maintained deviation reports?	DY ON ON/A
Problem corrected?	DY ON ON/A
8. Maintained compliance plan, if applicable?	OY ON ON/A

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair DΝ inspection? DΝ 2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, DY ON ONA DY DN DN/A Muck cookers couplings, and valves DY ON ON/A Stills DY ON ON/A Door gaskets and seating MY ON ON/A Exhaust dampers DY DN ØN/A Filter gaskets and seating DY ON ONA MY ON ON/A Diverter valves Pumps, DY ON ON/A DY ON ON/A Cartridge filter housings Solvent tanks and containers DY DN DN/A Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN

b. Calibrated against a standard gas prior to and after each use

d. Kept in a clean and secure area when not in use?

c. Inspected for leaks and obvious signs of wear on a weekly basis?

e. Verified for accuracy by use of duplicate samples (calorimetric only)?

Responsible Official's Name
(Please Print)
O(1)
KV Chokshi
Inspector's Name (Please Print)
The process is Name (Flease Frint)
(11/0 Val
10. William
Inspector's Signature

(PID/FID only)?

Responsible Official's Signature

DY DN

DY DN

OY ON

DY DN

Date of Inspection

June 1999

Approximate Date of Next Inspection

ADDITIONAL SITE INFO	ORMATION:		
1. Secondary Conta	inment for: Dry Clea	aning Machine & Storage area Waste area Spotting area Sealed	M []
	· .		
2. Disposal of Wat		tor using approved evaporate racted Wastewater service	
Safé	ty Kleen 1 other	pich the	- weste
		y v 124 / 14	

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL X CO	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:00 TIME OUT: 10:59	AIRS ID#: 0990493
TYPE OF FACILITY: Dey Cleading	
FACILITY NAME: One Perce Cleaners	DATE: $1/27/\infty$
FACILITY LOCATION: 121 U.S. North	
TequestA, FI	·
RESPONSIBLE OFFICIAL: RAShm. Pak!	PHONE NUMBER: 747 - 8287
Based on the results of the compliance requirements evalue compliance with DEP Rule 62-213.300, Florida Administration	
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
•	
	7
	FEB (FEB Mobile 2 Mob
	ZUUD ZUUD IN MONITORI RE Sources
The state of the s	200
	·
COMMENTS:	
The Annual Compliance Certification form has been properly certific	ed and submitted to the inspector. YES NO
	2001 proximate)
INSPECTION CONDUCTED BY:	Roy Dizo K ase Print)
INSPECTOR'S SIGNATURE: Outrous Direk	PHONE NUMBER: 355 - 3070 XT 1/39

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INSPECTION: ANNUAL	TION []
AIRS ID#: 0990 493 DATE: 1/2-	7 /00 TIME IN: 10:00 TIME OUT: 10:55
FACILITY NAME: One PEIG DE.	Cleanels
FACILITY LOCATION: /2/ US :	
	, F1 33469
•	PAKI PHONE: 747 - 8287
	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to st	tartup
2. Facility failed to notify DARM to use general p	permit \square
PART II: CLASSIFICATION	
	☐ No notification form
Facility indicated on notification form that it is: (check appropriate box)	☐ Drop store/out of business/petroleum
A. 1. Existing small area source	2. New small area source
 Existing small area source ☐ dry-to-dry only, x < 140 gal/yr 	2. New small area source dry-to-dry only, x < 140 gallyr
transfer only, x < 200 gal/yr	transfer only, x < 200 gal/yr
both types, $x < 140$ gal/yr	both types, x < 140 gal/yr
(constructed before 12/9/91)	(constructed on or after 12/9/91)
3. Existing large area source	4. New large area source
dry-to-dry only, $140 \le x \le 2,100 \text{ gaVyr}$	dry-to-dry only, $140 \le x \le 2,100$ gal/yr
transfer only, $200 \le x \le 1,800 \text{ gaVyr}$	transfer only, $200 \le x \le 1,800 \text{ gal/yr}$
both types, $140 \le x \le 1,800 \text{ gal/yr}$	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	¥Y □N □Can not determine
If no, please check the appropriate classific facility qualified for a ge facility exceeds above lin	
The total quantity of perchloroethylene (perc) pu facility was 40 gallons. for 1999	urchased within the preceding 12 months by this dry cleaning

Is the responsible official of the dry cleaning facility: (check appropriate boxes) MY DN DN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? XY ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at XY 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 XNA 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) XY DN 1. Equipped all machines with the appropriate vent controls? XY 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 MY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated λ condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the AYO NO YX condenser exceeded 45° F? Conducted all temperature monitoring after an appropriate cooldown period and after MA DN verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

1	3. 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?	ロハロソ
2	. Measured and recorded the washer exhaust temperature at the condenser	:
	inlet and outlet weekly?	DY DN DN/A
	Is the temperature differential equal to or greater than 20° F?	DY DN DN/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber,	
	if machines are equipped with a carbon adsorber?	DY DN DN/A
	Is the perc concentration equal to or less than 100 ppm?	OY ON ON/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?	DY DN DN/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual	
	condenser coils?	AVAC NC YC
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	XY DN
2. Maintained rolling monthly total of perc consumption?	XIY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	AVAC NC Y
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אַץ בא באוא.
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN 💆 NIA
5. Maintained exhaust duct monitoring data on perc concentrations?	אאו אַ אם צם
6. Maintained startup/shutdown/malfunction plan?	XX DN
7. Maintained deviation reports?	XIY DN DN/A
Problem corrected?	XY ON ON/A
8. Maintained compliance plan, if applicable?	DY DN X

i ni	nimional ci	TE INFORMATI	ON.				******	
MVD	PITIONNESI	TAMOMMA						
	C	Cartairment	.F	Der Clamina	· Machina f Ci		Yes	, o
1.	secondary	Contamient	TOL	Dry Cleaning	Waste area	lorage area		l J
							[X]	LJ
					Spotting are	ea Seated	[X]	LJ
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2.	Disposal o	f Water from	Water	Separator us	sing approved	evaporator,	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	[]
				or contracted	Wastewater :	service	<u>(</u>)	[X]
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1. Does the responsible official conduct	a neckly (for siliali sou	roos, or weekly) reak detection			
inspection?			XY DN		
2. Has the facility maintained a leak log	?		DAY DN		
3. Does the responsible official check th	e following areas for lea	ks?			
Hose connections, fittings, couplings, and valves	XY ON ON/A	Muck cookers	אואו אָל אם צם		
Door gaskets and seating	AA ON ONVY.	Stills	XY ON ON/A		
Filter gaskets and seating	DYY ON ON/A	Exhaust dampers	OY ON XINA		
Pumps	₩Y □N □N/A	Diverter valves	XY ON ON/A		
Solvent tanks and containers	ANO NO Y	Cartridge filter housings	אותם מם צא		
Water separators	MY ON ON/A		-		
1. Which method of detection is used by	the responsible official?				
Visual examination (condensed s	×				
Physical detection (airflow felt th	rough gaskets)		×		
Odor (noticeable perc odor)	X				
Use of direct-reading instrumenta	X √NA				
Halogen leak detector	X ~ ~ ~				
If using direct-reading instr	X N/A				
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					
b. Calibrated against a s (PID/FID only)?	tandard gas prior to and	after each use	OY ON		
c. Inspected for leaks an	d obvious signs of wear	on a weekly basis?	DY DN		
d. Kept in a clean and se	cure area when not in us	e?	אם עם		
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	DY DN		
JAY Connection					
onsible Official's Name (Please Print)		Responsible Offic	cial's Sign		
Jeffey Diek Inspector's Name (Please Prin	1)	Date of Inspection	· · · · · · · · · · · · · · · · · · ·		

BEST AVAILABLE COPY TYPE OF INSPECTION:	WHAT WELL TON	COMPLAINT/DISCOVERY	RE-INSPECTION
- va Di	TIME OUT:		0990493
TIME IN:	Drx Cleaner	Alto ID#	
TYPE OF FACILITY:	,	Star Cleinson	DATE: 13 Dec 6-0
FACILITY NAME:	The OFFice Che		DATE: 13 DEC 8-0
FACILITY LOCATION:		North Teguesta	
	MUKUND		747 8287
RESPONSIBLE OFFICIAL:	Rashmi Patel.	PHONE NUMBER:	11) _820)
compliance with DEP Ru	ile 62-213.300, Florida Admii ne compliance requirements ev	valuated during this inspection, the facilinistrative Code (F.A.C.). valuated during this inspection, the following the facility that the facility is a second that the facility is a second the facility that the facility is a second that the facility i	
COMPLIANCE REQU	IREMENT/PROBLEM	FOLLOW-UP ACTION	ON REQUIRED
	•	-	R Hurea
			AN 8 200 Mobile Source
•			Mbnitoring Sources
	•		• •
COMMENTS:			
	•		,
• •	n form has been properly certi	ified and submitted to the inspector.	YES NO
ATE OF NEXT INSPECTION:_ NSPECTION CONDUCTED BY:	(A	pproximate) Lievler	
	, (P	Please Print)	375 3070

PERCHLOROETHY LENE DRY CLEANERS-TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

•	
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
	A Programme Commence
PART II: CLASSIFICATION	
Facility indicated on notification form that it is (check appropriate box)	•
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	2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr
Facility indicated on notification form that it is (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr
Facility indicated on notification form that it is (check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr transfer only, 200 \le x \le 1,800 gal/yr both types, 140 \le x \le 1,800 gal/yr (constructed before 12/9/91)	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 \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)
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 class facility qualified for facility exceeds above	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) PY □N □Can not determine

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 beds according to the manufacturer's specifications?

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? Equipped dry-to-dry machines with a closed-loop vapor venting system?	ΖY	ПN
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	ΣΥ	ON ON/A
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ØY	ON ON/A
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	ďΥ	□N .
٥.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	ÞΥ	ON ON/A
5	Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	ØY.	ПХ

-				1
ឞ	. Has the responsible official of an existing large or new large area source also:			
ι.	Measured and recorded the exhaust temperature on the outlet side of the condenser located			
1	on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ΟV	Ви	
2.	. Measured and recorded the washer exhaust temperature at the condenser			
	inlet and outlet weekly?	\Box Y	ИП	□N/A
	Is the temperature differential equal to or greater than 20° F?	QΥ	ПN	□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 adsorver?	ΠY	.ИП.	"DN/A"
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ПИ	□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?			□N/A
	or expansion, and downstream from no other finer;		CI (A	UN/A
5	5. Equipped transfer machines (dryers, reclaimers, and washers) with individual			
	condenser coils?	UΥ	ПИ	- DN/A
é	5. Routed airflow to the carbon adsorber (if used) at all times?	ΠY	. □И	□N/A
		•		
<u></u>				
	PART V: RECORDKEEPING REQUIREMENTS			
	PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes)			
(Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?		□N □	
) (Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?		מם	
	Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?			
	Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption?	ØΥ	ΝП	□N/A
	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:	øY øY	מם	
	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: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of perts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ØY ØY	מם אם	P? □N/A
	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: 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		70 X CO X C	ON/A
	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: 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? Ger applicable direct reading instruments)		70 X CO X C	ON/A ON/A ON/A ON/A
	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: 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? Ger applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations?		и и и и и и и и	ON/A ON/A ON/A ON/A
	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: 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? Ger applicable direct reading instruments) 5. Maintained exhaust duct monitoring data on perc concentrations? 6. Maintained startup/shutdown/malfunction plan?			ON/A ON/A ON/A ON/A

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Secondary Containment for:	1	Waste area		
	\$	Spotting area Sealed	[] []	
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Disposal of Water from Water	r Separator us	ing approved evapora	ator [/] []	
·	or contracted	l Wastewater service	[] [\(\forall \)]	
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ART VI: LEAR DETECTION AND	KEPAINS		· ·	
. Does the responsible official conduct	a weekly (for small sourc	es, bi-weekly) leak detection a	nd repair	
inspection?			אם זיע	
. Has the facility maintained a leak log	?		MD AX	
. Does the responsible official check th	e following areas for leak	s?		
Hose connections, fittings, couplings, and valves	DY ON ONA	Muck cookers	אואל אם צם	
Door gaskets and seating	DY ON ONA	Stills	אוחם אם צ'בן	
Filter gaskets and seating	אוחם אם אף	Exhaust dampers	DY DN DAVA	
Pumps	AND NO YA	Diverter valves	אורם אם צאב	
Solvent tanks and containers	אום אם אום	Cartridge filter housings	אוחם אם צים	
Water separators	אוום אם צם			:
4. Which method of detection is used b	y the responsible official?			
Visual examination (condensed	d solvent on exterior surfa	cės)	Þ	
Physical detection (airflow felt	through gaskets)		, .	
· Odor (noticeable perc odor)	-		n	
Use of direct-reading instrume	ntation (FID/PID/calorime	etric tubes)	M MA	
- Halogen leak detector			A NA	
If using direct-reading in	strumentation, is the equ	ipment:	DAN/A	
a. Capable of detecti	ng perc vapor concentration	ons in a range of 0-500 ppm?	DY DN	
 b. Calibrated against (PID/FID only)? 	a standard gas prior to an	d after each use	מם עם	
c. Inspected for leak	s and obvious signs of wea	ar on a weekly basis?	אם עם	
d. Kept in a clean ar	id secure area when not in	use?	אם עם	
	tack in the contract of	mples (calorimetric only)?	DY DN	1
		• • • • • • • • • • • • • • • • • • • •		
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Y (ISHA.	•	7 whatel		
sponsible Official's N (Please Print)	Iame	Responsible Off	icial's Sign	nat
h lidder		Dec [360	
Inspector's Name (Pleas	e Priz:)	Date of Inspection	<u> </u>	
:, 9,				
- h Jul	yler	Dec	91	
Inspector's Signature	•	Approximate Date o	ENext Inspection	

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0354369

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

TOTAL AMOUNT DUE: 15550.200 1998

Bureau of Air Monitoring & Mobile Sources

Do NOT Remove Label

AIRS ID # 0990493

ONE PRICE CLEANER RASHMIKANT PATEL 121 N US 1 TEQUESTA FL 33469 FOR GOVERNMENT USE ONLY

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

Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

400066

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 # 0990493

ONE PRICE CLEANER
PARTICE CLEANER
PARTICE CLEANER
PRICE CLEANER
PARTICE CLEANER
PRICE CLEA

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#0990493

JAY SANTOSHI INC RASHMIKANT PATEL 121 N US 1 **TEQUESTA FL 33469**

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Оыј.: 002273



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 # 0990493

ONE PRICE CLEANER RASHMIKANT PATEL 121 N US 1 TEQUESTA FL 33469

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