

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

July 28, 1997

Mr. Steve Jennings President Royal Cleaners 2621 North Federal Highway, Suite 7 Boca Raton, Florida 33431

Re: Facility No.: 0990505

Dear Mr. Jennings:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on June 20, 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"

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL X	COM	IPLAINT/DISCO	OVERY	RE-INSI	PECTION _
TIME IN: 9:20 TYPE OF FACILITY:	<u> </u>	ontri		_AIRS ID#: <u>(</u>	99050	5
FACILITY NAME:	2621 N.	FEL	ERS). HWY	·/ Si	DATE: S	121197 BXALATON,
RESPONSIBLE OFFICIAL:	STEVE JE	ととう	LS PH	IONE NUMBE	R: (561) 35	5-
compliance with DEP	f the compliance requirem Rule 62-213.300, Florida	Administra	ative Code (F.A.	C.).		
discrepancies were not					TION REQUI	
They failed +	o motity in	1996	Notition issued	icotion may in Ju		were fin
			-			1
						, etc.
						<u>.</u>
						1
COMMENTS:						
76	. :					
The Annual Compliance Certification	, [98	ed and submitted	to the inspect	or. YES	пор
INSPECTION CONDUCTED		\	ase Print)	TWE	(01) 0=	\$- 4537
INSPECTOR'S SIGNATURE	E: (Tohra (1)	Page_	_of	ONE NUMBEI	8: (261) 35	Revised 10/96

#0990505

	Royal Cleaners
P.15	4. mark out "X" and initial 5.(c) not required, mark out "X" and initial
·.	<u> </u>
· ·	

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
31	Site Name (For example, plant name or number):
2.	Site Name (For example, plant name or number):
	ρ_{-} (a) ρ_{-}
	Hazardous Waste Generator Identification Number:
∃.	Hazardous Waste Generator Identification Number:
4	Parities Caracians
4.	Facility Location:
	Cing County 7in Code:
	Street Address: ZLOZI N. Fed. HWY Suite Z City: County: Zip Code: 33431
	Facility Identification Number (DEP Use)
	Fair 0990505
e, are less this	
	Responsible Official
6.	Name and Title of Responsible Official:
	·
	President Steve Jennings
7.	Responsible Official Mailing Address:
	Organization/Firm:
	Street Address:
	City: County: Zip Code:
8.	Responsible Official Telephone Number:
	Telephone: 661341 - 8727 Fax: () W/A
	Facility Contact (If different from Despersible Official)
	Facility Contact (If different from Responsible Official)
٥	Name and Title of Facility Contact (For example, plant manager):
Ž.	Name and Title of Facility Contact (For example, plant manager):
10	Facility Contact Address:
10.	Addition of the state of the st
	Street Address:
	City: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: () - Fax: ()

RECEIVED

JUN 2 0 1997

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

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Bureau of Air Monitoring & Mobile Sources

Facility Information

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

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#]	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit	·								٠.
(1) w/ ref. condenser	ì	60 89							
(2) w/ carbon adsorber	Ť	 							
(3) w/ no controls									
Washer Unit		• .	'						
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls	_								_
Dryer Unit								· · ·	
(7) w/ ref. condenser				T			_		
(8) w/ carbon adsorber									
(9) w/ no controls							_	 	
Reclaimer Unit			'						
(10) w/ ref. condenser			1						
(11) w/carbon adsorber									
(12) w/ no controls			_			_			
(b) Control devices are (c) No control devices 2.(a) What was the total of the least than 12 montrol Check why it is less	are r quant gallo	equired to be ity of perchlo ons ow many? [_	installed [_ oroethylene (] months	perc)	_] purchased in				
3. What is the facility's so (Indicate with an "X".	Selec	t one classifi	cation only.)				3) of	Part II?	
Existing small ar	ea so	urce 🔭	Ne	ew sn	nall area sour	ce []			
√S Existing large are	ea so	urce []	Ne	w lar	ge area sour	ce []			

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What control technology is required on machines pursuant to section (5) (Indicate with an "X".)	of Part II of this notification form?
Existing large area source. Carbon adsorber [] Refrigerated condense	r [〉
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
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 to exemption 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 peduring which propane or fuel oil containing no more than one percent sulfut	riods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Recordkeeping Inf	ormation
Check all logs which are required to be kept on-site in accordance with the	equirements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	
Refrigerated condenser temperature monitoring	(F)
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	[*]

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Surrender of Existing Air Permit(s)

	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)				
Ł	No air permits currently exist for the operation of the facility indicated in this notification form.				
	Responsible Official Certification				
this notij 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 sts made in this notification are true, accurate and complete. Further, I agree to operate and a 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.				
	5th/7				

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: ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY O
FACILITY NAME: ROYAL FACILITY LOCATION: 2621	197 TIME IN: 9:20 TIME OUT: 10:10 CELAWERS N. FZO. HWY., SUITE-Z
to CARA	70N, FL 8343
PART I: NOTIFICATION	
(check appropriate box)	
1. Existing facility notified DARM by 9/1/96	
2. New facility notified DARM 30 days prior to sta	
3. Facility failed to notify DARM to use general p	ermit
PART II: CLASSIFICATION Facility indicated on notification form that it is: (check appropriate box)	
A. 1. Existing small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)	2. New small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed on or after 12/9/91)
3. Existing large area source Cl 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=""></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=""></x<2,>
This is a correct facility classification.	VIY ON
If no, please check the appropriate classification:	
facility qualified for a general pe facility exceeds above limits and	rmit as number above is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) perc) perchloroethylene (perc) perchloroethyle	ourchased within the preceding 12 months by this dry cleaning

PART III: GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
l. Storing perchloroethylene in tightly sealed and impervious containers?	MY ON
2. Examining the containers for leakage?	XY DN
3. Closing and securing machine doors except during loading/unloading?	A X □N
4. Draining cartridge filters in their housing or in sealed containers for at ieast 24 hours prior to disposal?	XY ON
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON THA
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	i
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 refu (complete A below).	rigerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber me installed prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	rigerated condenser
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?	OY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	רערם אם. אס A/אם.
3. Equipped the condenser with a diverter valve so aifflow will be directed away from the condenser upon opening the door?	אַעם אם אַם. אַעם אם אַם
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	מע מא :
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	מע טא
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	OY ON

l			
B.	Has the responsible official of an existing large or new large area source also:		
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located		
	on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ΩY	ΩИ
2.	Measured and resorded the washer exhaust temperature at the condenser		
	inlet and outlet weekly?	\Box Y	ロな
	Is the temperature differential equal to or greater than 20° F?	ΠY	N
3.	Measured and recorded the perc concentration in the exhaust stream weekly		
	at the end of the final drying cycle while the machine is wenting to the adsorber,		
	if machines are equipped with a carbon adsorber?		ON ON/A
	Is the perc concentration equal to or less than 100 ppm?	ПY	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?	QΥ	UN_N/A
_	Former days of machines (days a malaire and machine) with it is a		,
٦.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coals?	ZHY.	ON ON/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ПĀ	ON ON/A
			!
$\ \mathbf{P}_{E}\ $	ιρτικ, ρτοπρηγατητίο στοιπρυμένες		
=	ART V: RECORDKEEPING REQUIREMENTS		
H	as the responsible official: heck appropriate boxes)		· · · · · · · · · · · · · · · · · · ·
H (cl	as the responsible official:	×	□N ,
(c)	as the responsible official: heck appropriate boxes)	√Y √Y	□N ;
(c)	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased?	XY XY	NΩ ΩN
(c)	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption?	,	ON ,
(c)	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following:	,	
(c)	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or;	KY.	
田 (cl 1. 2. 3.	as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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	\$\tag{\tau}{\tau}\tau	ПЙ
H (c) 1. 2. 3.	Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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?	\$\tag{\tau}{\tau}\tau	
H. (cl 1. 2. 3. 4. 5.	As the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only)	dy Ay	
H(c) 1. 2. 3. 4. 5. 6.	Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations?		ON ON AN/A
H(c) 1. 2. 3. 4. 5. 6.	Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan?	AY AY	ON ON AN/A ON N/A
H (cl 1. 2. 3. 4. 5. 6. 7.	Maintained receipts for perc purchased? Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports?	大大大人 八八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八	
H (cl 1. 2. 3. 4. 5. 6. 7.	Maintained receipts for perc purchased? Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected?	大大大人 八八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八	
H (c) 1. 2. 3. 4. 5. 6. 7. 8.	Maintained receipts for perc purchased? Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected?	大大大人 八八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八十八	

	2. Which method of detection is used by	the respon	isible offic	rial?		•	
	Visual examination (condensed				A		
	Physical detection (airflow felt the	A					
	Odor (noticeable perc odor)						
	Use of direct-reading instrument	tation (FII	O/PID/calo	primetric (ubes)	4	· N/A	
	If using direct-reading instrum			· NL ctil Will	/	_ ·	
			-	rations in a range of 0-500 ppm?	ΩY	□N (N/A	
	b. Calibrated against a					ON N/A	
	(PID/FID only)?	ad obtaiou	a sisma of	more on a markety basis?	_	ON N/A	
			_	wear on a weekly basis?		ON N/A	
	d. Kept in a clean and					ON N/A	
	a. Verified for accuracy		r anhucate	samples (calorimetric only)?			
	4. Does the responsible official check the		σ areas for	· leaks?	A -4	į,	
	Hose connections, fittings,	2 10110 11112	, m om 101	· Nata		· · · · · · · · · · · · · · · · · · ·	
	couplings, and valves	Ø¥.	ПΩ	Muck cookers	ΩY	ON X	
	Door gaskets and seating	+W	ЙΠ	Stills	A.	□NN	
	Filter gaskets and seating	AX.	Ωи	Exhaust dampers	ŪΥ	□n J n	
	Pumps	· FY	ПN	Diverter valves	g Y	<u> Пи_и</u>	
	Solvent tanks and containers	A.	Ωи	Cartridge filter housings	A.	□N_N	
	Water separators	AT	ПΩ				
	Name of Responsible Office Name of Responsible Office Name (Please Proposition of Please Proposition of Plea	Kazu		Steve Jenning 50 Name of Responsible Official Date of Inspe	Prince (Prince)	(int) & Phone	
Sec	Condary Containment form:	01				Yes No	
. 5000	condary Containment for: Dry	Cleanin	ig Machi			1/1	
				Waste area		M []	
				Spotting area Sealed	f	t∤ []	
. Di	sposal of Water from Water Ser	parator	using	approved evaporator		[][]	
				Pick s up Water		M []	

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM Bureau of Air Monitoring AIRS ID 0990505 S & D OF BOCA INC STEVE JENNINGS 2621 N FEDERAL HWY **BOCA RATON FL 33431** Do NOT Remove Label Annual Reporting Period: Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule \square NO 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

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

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	1PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 11:15 TIME OUT: 12:1	0 _AIRS ID#: 0990505
TYPE OF FACILITY: Doy Clean ing	
FACILITY NAME: Royal Cleaners	DATE: 5-15-98
FACILITY LOCATION: 2621 N. Federa	l Hwy 1
Boca Raton, FL	33431
RESPONSIBLE OFFICIAL: Steve Jennings	PHONE NUMBER: 391-8722
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra	•
Based on the results of the compliance requirements evaluated discrepancies were noted:	ted during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
•	
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	E SE L
	ENDONE OF L
	E MODIE OF REAL PROPERTY OF THE PARTY OF THE
	
•	
COMMENTS:	
	•
The Annual Compliance Certification form has been properly certified	ed and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION: May	1999
INSPECTION CONDUCTED BY: R.V. Choks	roximate)
INSPECTOR'S SIGNATURE OF CLUM (Ple	ase Print) PHONE NUMBER: 355-3070

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST COMPLAINT/DISCOVERY TYPE OF INSPECTION: ANNUAL RE-INSPECTION 98 TIME IN: 11:15 TIME OUT: 12:10 AIRS 10#: 0990505 DATE: 5-15-FACILITY LOCATION: 6 RESPONSIBLE OFFICIAL: Steve Jennings PHONE: PHONE: CONTACT NAME: 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 . PART II: CLASSIFICATION ☐ No notification form Facility indicated on notification form that it is: (check appropriate box) ☐ Drop store/out of business/petroleum 1. Existing small area source 2. New small area source dry-to-dry only, x < 140 gal/yrdry-to-dry only, x < 140 gal/yrtransfer only, x < 200 gal/yrtransfer only, x < 200 gal/yr both types, x < 140 gal/yrboth 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, $140 \le x \le 2,100$ gal/yr dry-to-dry only, $140 \le x \le 2,100 \text{ gal/yr}$ transfer only, $200 \le x \le 1,800$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ 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 $\square N$ □Can not determine If no, please check the appropriate classification: facility qualified for a general permit as number above facility exceeds above limits and is not eligible for a general permit B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 90 gallons.

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DN DN/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 DN DN/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY ON ØN/A 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 23, 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? DY DN 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? AVAC AC YO 3. Equipped the condepser with a diverter valve so airflow will be directed away from the condenser upon opening the door? AVAD ND YD 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? DY DN 5. Repaired or adjusted the equipment within 24 hours if the exhaust emperature of the condenser exceeded 45°F? AVAD AD YD 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? OA. OM

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?	אם צם	
2.	Measured and recorded the washer exhaust temperature at the condenser		/ A
	inlet and outlet weekly?	מאם אם אם	A
	Is the temperature differential equal to or greater than 20° F?	OY ON ON	Ά
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/	Α
	Is the perc concentration equal to or less than 100 ppm?	אם אם צם	Ά
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 אם	'A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	אם אם עם	Α
6.	Routed airflow to the carbon adsorber (if used) at all times?	אם אם צם	A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	NO NO
2. Maintained rolling monthly averages of perc consumption?	У СИ
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	AYO OO OOYA
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אוום מם עלק.
4. Maintained calibration data? (for applicable direct reading instruments)	אואם אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN PN/A
6. Maintained startup/shutdown/malfunction plan?	MY ON
7. Maintained deviation reports?	אַעם אם צאַ
Problem corrected?	MY ON ON/A
8. Maintained compliance plan, if applicable?	DY ON DAVIA

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? \square N $\square N$ 2. Has the facility maintained a leak log? 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, AYO NO YÀ DY DN DX/A Muck cookers couplings, and valves DY ON ON/A DY ON ON/A Stills Door gaskets and seating DY ON ON/A DY ON DINA Exhaust dampers Filter gaskets and seating MY ON ON/A Diverter valves DY ON ONA Pumps Cartridge filter housings DY ON ON/A Solvent tanks and containers DXY ON ON/A Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector If using direct-reading instrumentation, is the equipment: a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN b. Calibrated against a standard gas prior to and after each use (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? DY DN d. Kept in a clean and secure area when not in use? DY DN e. Verified for accuracy by use of duplicate samples (calorimetric only)? DY DN Inspector's Name (Please Print)

Inspector's Signature

ADDITIONAL SITE INFORMATION:

ı.	Secondary Containment for:	Dry Cleaning Machine & Storage area	Yes NO
		Waste area	1/1
		Spotting area Sealed	11 []

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

Safet > Kleen picks The Waste

Asked to keep area Clean around the dry Cleaning machine

Grave Steve FDFP Calender and Phenix form for Record Keeping

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

ESPONSIBLE OFFICIAL: Steve Jennings	PHONE NUMBER: 391-8722
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra Based on the results of the compliance requirements evalua	tive Code (F.A.C.).
discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
• · · ·	
,	
-	
COMMENTS:	•
	. •

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

a

RE-INSPECTION

AIRS ID#: 0990 505 DATE: 4-26-99 TIME IN: 12;15 TIME OUT: 12:55 FACILITY NAME: ROYAL Cleaners FACILITY LOCATION: 2621 N. Federal Hwy 1 Boca 129ton, FL 33431 RESPONSIBLE OFFICIAL: Steve Jennings PHONE: 391-8722 CONTACT NAME: PHONE: PART I: NOTIFICATION (check appropriate box)
FACILITY LOCATION: 2621 N. Federal Hwy 1 Boca 1297on, FL 33431 RESPONSIBLE OFFICIAL: Steve Jennings PHONE: 391-8722 CONTACT NAME: PHONE: PART I: NOTIFICATION
Boca [2970n, FL 3343] RESPONSIBLE OFFICIAL: Steve Jennings PHONE: 391-8722 CONTACT NAME: PHONE: PART I: NOTIFICATION
Boca 1297on, FL 33431 RESPONSIBLE OFFICIAL: Steve Jennings PHONE: 391-8722 CONTACT NAME: PHONE: PART I: NOTIFICATION
CONTACT NAME: PHONE: PART I: NOTIFICATION
CONTACT NAME: PHONE: PART I: NOTIFICATION
PART I: NOTIFICATION
(chack appropriate hox)
(check appropriate box)
1. New facility notified DARM 30 days prior to startup
2. Facility failed to notify DARM to use general permit
PART II: CLASSIFICATION
Facility indicated on notification form that it is:
(check appropriate box) □ Drop store/out of business/petroleum
1. Existing small area source 2. New small area source
dry-to-dry only, x < 140 gal/yr dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr transfer only, x < 200 gal/yr
both types, x < 140 gal/yr (constructed before 12/9/91) both types, x < 140 gal/yr (constructed on or after 12/9/91)
3. Existing large area source 4. New large area source
dry-to-dry only, $140 \le x \le 2,100$ gal/yr dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr
both types, $140 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr
(constructed before 12/9/91) (constructed on or after 12/9/91)
5. This is a correct facility classification ON OCan not determine
If no, please check the appropriate classification:
facility qualified for a general permit as number above
facility exceeds above limits and is not eligible for a general permit
facility exceeds above limits and is not eligible for a general permit B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning

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 refri (complete A below).	gerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber mu prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refri (complete A and B below).	gerated condenser
A. Has the responsible official of all new sources and existing large area sources (check appropriate boxes)	s:
1. Equipped all machines with the appropriate vext controls?	□Y □N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A
3. Equipped the condenser with a diverter valve so air low will be directed away from the condenser upon opening the door?	OY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	, מם אם י

B. Has the responsible official of an existing large or new large area source also:	
1. Measured and recorded the exhaust temperature on the outlet side of the condenser located	
on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ח□
2. Measured and recorded the washer exhaust temperature at the condenser	
inlet and outlet weekly?	□N □N/A
ls the temperature differential equal to or greater than 20° F2	ON ON/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?	□N □N/A
Is the perc concentration equal to or less than 100 ppm?	□N □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,	
	□N □N/A
	Cit Cit/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual	
	□N □N/A
6. Routed airflow to the carbon adsorber (if used) at all times?	□N □N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	MY ON
2. Maintained rolling monthly total of perc consumption?	ZY DN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	DY 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?	DY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	DY ON MIN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY ON ØN/A
6. Maintained startup/shutdown/malfunction plan?	MA' ON
7. Maintained deviation reports?	AND NO LAN
Problem corrected?	DA DN DNA
8. Maintained compliance plan, if applicable?	DY DN DYNA

PART VI: LEAK DETECTION AND REPAIRS

ι.	Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
	inspection?						
2.	Has the facility maintained a leak log?						
3.	Does the responsible official check the following areas for leaks?						
	Hose connections, fittings, couplings, and valves						
	Door gaskets and seating DY ON ON/A Stills DY ON ON/A						
	Filter gaskets and seating OY ON ON/A Exhaust dampers OY ON ON/A						
	Pumps ON ON/A Diverter valves ON ON/A						
	Solvent tanks and containers DY DN DN/A Cartridge filter housings DY DN DN/A						
Water separators							
4.	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? □Y □N						
	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)?						

Siteren						
Responsib	ole	Of:	fic	ial'	B	Nam
(1	Plea	ase	Pr	int)		

R.V. Chokshi
Inspector's Name (Please Print)

2. V. Chokshi

Inspector's Signature

Responsible Official's Signature

4-26-99

Date of Inspection

Approximate Date of Next Inspection

ODITIONAL SITE INFORMATION:			
l. Secondary Containment for	W	achine & Storage are aste area potting area Sealed	
	•		
•		• •	
en e			
2. Disposal of Water from W			
	or contracted	Wastewater service	
		·	
0 1 1 1 1 1		6-10 H	. 10
Safety KI.	3en P1		
	经资本 医克莱克氏试验		
When (g)	101		
www. Car	() ()		
•		•	
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		•	

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL X	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 2:06 TIME OUT: 3:20	AIRS ID#: 0990505
TYPE OF FACILITY: Del Chaving	
FACILITY NAME: Royal Ciennes	DATE: $3/17/c_0$
FACILITY LOCATION: 2621 N. Federal Hu	11
Boca RATON, F/ 3343/	•
RESPONSIBLE OFFICIAL: DAVID ZZA	PHONE NUMBER: 39/ -8722
Based on the results of the compliance requirements evaluation compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluation discrepancies were noted:	rative Code (F.A.C.). sated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
· · · · · · · · · · · · · · · · · · ·	
<u>(</u>	7
	APR Bureau of
	1 2 2000 Air Monito
	oring
FACILITY HAS TWO PERC MACHINES, O	FACILITY has suitched classification size ect to a new inese area source. Le new and one existing.
The Annual Compliance Certification form has been properly certifie	d and submitted to the inspector. YES NO
	ech 2001 roximate)
	vy DivK sé Print)
NSPECTOR'S SIGNATURE: acuru Dineli	PHONE NUMBER: 355 - 3070 XT //39

PERCHLOROETHYLENE DRY CLEANERS / TITLE V GENERAL PERMIT

COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	•	X	COMPLAINT/DI	SCOVERY	
	RE-INSPEC	CTION				
AIRS ID#: <u>0990505</u>	n.m. 3/	7/2	TOYN 41		ME OUT.	
			11IVII	11. 3.02 11	ME 001:	7.20
FACILITY NAME:						···
FACILITY LOCATION:	2621 N	. Fedeer	1 Hw	, 1		
	BOLA RA	tou, Fl	334	3/		·
RESPONSIBLE OFFICIAL:	David I	ZA		PHONE: 39/	- 8722	· · · · ·
CONTACT NAME:				•		
		· · · · · · · · · · · · · · · · · · ·			ookd	
PART I: NOTIFICATION			-			
(check appropriate box)						
1. New facility notified DARM 3	0 days prior to	startup				
2. Facility failed to notify DARM	í to use general	permit			•	
PART II: CLASSIFICATION				· · · · · · · · · · · · · · · · · · ·		
Facility indicated on notification	n form that it i	s: 🤌		☐ No notification fo	orm	
(check appropriate box)		Α.		Drop store/out of	business/petro	oleum
A.	At-si	0 1				
 Existing small area source dry-to-dry only, x < 140 gal/yr 	, ,			area source. , x < 140 gal/yr		
transfer only, $x < 200 \text{ gal/yr}$		•		< 200 gal/yr		
both types, x < 140 gal/yr				140 gal/yr		
(constructed before 12/9/91)		(const	ructed on	or after 12/9/91)		
3. Existing large area source	, D	4. Ne	w large a	rea source		
dry-to-dry only, $140 \le x \le 2,10$, 140 ≤ x ≤ 2,100 gal/yı	•	
transfer only, $200 \le x \le 1,800$ §				$00 \le x \le 1,800 \text{ gal/yr}$		
both types, $140 \le x \le 1,800$ gal	/yr			$\leq x \leq 1,800 \text{ gal/yr}$		
(constructed before 12/9/91)		(const	ructed on	or after 12/9/91)		
5. This is a correct facility class	ification	ΠY	M	□Can not determine		
If no, please check the app	propriate classif	ication:				
☐ facility of	qualified for a g	general per	mit as nu	mber above		
☐ facility (exceeds above l	imits and	is not elig	ible for a general perm	it .	
3. The total quantity of perchloroe facility was 237 gallons.				e preceding 12 months	by this dry cle	aning

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? XIY ON ON/A XY ON ON/A 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? MD. AM 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? YDY ON ON/A 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN XXN/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) XY DN 1. Equipped all machines with the appropriate vent controls? XY ON ON/A 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 \mathbf{X} Y \square N \square N/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated **X**OY ON condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the AYNO NO YAY condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after MO AM verifying that the coolant had been completely charged?

l	B. Has the responsible official of an existing large or new large area source also:	
I		
1	1. Measured and recorded the exhaust temperature on the outlet side of the condenser located	
l		XON DN
	on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	W 1. (1)
1		
12	2. Measured and recorded the washer exhaust temperature at the condenser	,
l	inlet and outlet weekly?	AVAD ND YIX
	•	AND NO YA
1	ls the temperature differential equal to or greater than 20° F?	AND NO YOR
13	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,	
ľ		רוע רואו לקלאנע
ľ	if machines are equipped with a carbon adsorber?	DY DN XN/A
Į.	Is the perc concentration equal to or less than 100 ppm?	AVA NO YO
1	20 mg para comanina aquan 10 cr 1200 mun 200 pp	-> -: / -:
٨	Accurate that the compling part on the carbon advarbar exhaust for measuring	
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,	
ľ	or expansion; is at least 2 duct diameters upstream from any bend, contraction,	
	or expansion; and downstream from no other inlet?	DY DN X N/A
		^
5	. Equipped transfer machines (dryers, reclaimers, and washers) with individual	
	condenser coils?	ראי ראו לאואיא
	Condenser cons:	DY DN ANA
6.	Routed airflow to the carbon adsorber (if used) at all times?	DY DN MONA
_		

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	X YY □N
2. Maintained rolling monthly total of perc consumption?	XYY DN
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?	XY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON XON/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN XX N/A
6. Maintained startup/shutdown/malfunction plan?	X 1Y □N
7. Maintained deviation reports?	AYY ON ON/A
Problem corrected?	AYA ON ON/A
8. Maintained compliance plan, if applicable?	DA DN XVIV

ADI	ITIONAL SITE INFORMATION:		(A)C
1.	Secondary Containment for: Dry Cleaning Machine & Storage area	Yes [X]	001
	Waste area Spotting area Sealed	[X] [X]	[]
			:
2.	Disposal of Water from Water Separator using approved evaporator or contracted Wastewater service	ίχ <u>ι</u> []	[X] []
	(A) FACILITY has 2 PREC machines. Left owner 1. 2nd DEP compliance Calendar 2000 FOR Rewed Keeping.	e	
	(C) Safety Klew Ficks up the waskwake and wask sludge.		
	AN existing small need source to a New		
	TARJE AREA SOLECE.		

PART VI: LEAK DETECTION AND	DKELVIKZ			
1. Does the responsible official conduc	t a weekly (for small sour	ces, bi-weekly) leak detection	and repair	
inspection?			XY	ΠN
2. Has the facility maintained a leak log	;?		XY	אם
3. Does the responsible official check the	ne following areas for lea	ks?		
Hose connections, fittings, couplings, and valves	X Y □N □N/A	Muck cookers	ם צם	ANN X V
Door gaskets and seating	AND NO YE	Stills	XY D	A'MO N
Filter gaskets and seating	AA ON ONVY	Exhaust dampers		ANA K
Pumps :	AND NO YX	Diverter valves	MY DI	I DN/A
Solvent tanks and containers	Y ON ONA	Cartridge filter housings	MY DN	I DN/A
Water separators	ANO NO YX		•	
4. Which method of detection is used by	the responsible official?			
Visual examination (condensed	solvent on exterior surfac	cs)	×	}
Physical detection (airflow felt the	hrough gaskets)		/ SÍ	
Odor (noticeable perc odor)			X	 .
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)			XI NA	.
Halogen leak detector			X NA	
If using direct-reading instrumentation, is the equipment:			XN/A	
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?			אם צם	
b. Calibrated against a s (PID/FID only)?	standard gas prior to and a	after each use		
c. Inspected for leaks ar	nd obvious signs of wear	on a weekly basis?	OY ON	
d. Kept in a clean and se	ecure area when not in us	e?	OY ON	
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	□У □И	
			Λ	
DAVID 12A	•			
sponsible Official's Name (Please Print)	e	Responsible Office	cial's	Signat
		, ,		
Inspector's Name (Please Prin		3/17/00		
inspector's Name (Please Prin	11)	Date of Inspection		
0	•	mar t or	20.1	
Unspector's Signature	<u></u>	Approximate Date of N		ion

Z 333 613 077 US Postal Service Receipt for Certified Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse) AIRS ID 0990505 S & D OF BOCA INC STEVE JENNINGS 2621 N FEDERAL HWY **BOCA RATON FL 33431** Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom Date, & Addressee's Address Return Receipt Showing to Whom, Date, & Addressee's Address PS Form **3800**, \$ TOTAL Postage & Fees Postmark or Date

ADDRESS completed on the reverse side?	■Print your name and address on the reverse of this form so that we can recard to you. ■Attach this form to the front of the mailpiece, or on the back if space does permit. ■Write 'Return Receipt Requested' on the mailpiece below the article numb The Return Receipt will show to whom the article was delivered and the delivered. 3. Article Addressed to: AIRS ID 0990505 S & D OF BOCA INC STEVE JENNINGS 2601 N FEDERAL HWY		Type ed Certified Mail Insured ceipt for Merchandise COD	u for using Return Receipt Service.
Is your RETURN	5. Received By: (Print Name) 6. Signature: (Addressee or Agent) PS Form 3811, December 1994	8. Addressee and fee is	D-14-4 X S's Address (Only if requested paid) Domestic Return Receipt	Thank you



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0355894

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

RECEIVED MAIL ROOM
TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

ROYAL CLEANERS STEVE JENNINGS 2621 N FEDERAL HWY BOCA RATON FL 33431 AIRS ID # 0990505

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273



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

303551

Do NOT Remove Label

AIRS ID 0990505

S & D OF BOCA INC STEVE JENNINGS 2621 N FEDERAL HWY BOCA RATON FL 33431 FOR GOVERNMENT USE ONLY:
Org.: 37550101000 EO3B1
Fund: 20-2-035001
Obj.: 002273

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MAIL ROOM

TOTAL AMOUNT DI

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AIRS ID # 0990505

ROYAL CLEANERS

DAUID IZA

2621 N FEDERAL HWY **BOCA RATON FL 33431** FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: BI Fund: 20-2-035001 Obj.: 002273=

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

400007

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

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Do NOT Remove Label

AIRS ID # 0990505

ROYAL CLEANERS DAVID IZA 2621 N FEDERAL HWY **BOCA RATON FL 33431** FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273