

Department of **Environmental Protection**

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

Virginia B. Wetherell Secretary

August 27, 1997

Mr. Jeffrey Scot Cohen Scot Michael Associates, Inc. 4180 Jog Road, Suite 9 Lake Worth, Florida 33467

Re: Facility No. 0990513

Dear Mr. Cohen:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on July 28, 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

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

#0990513

	# 0990313
	Cost Less Cleaners
p/3	7 add firm + address - Zip Codes different in 4. +7.
	Codes different in 4.47.
P./4	1.(c) mark out "X"
<u>.</u>	
,	
-]	

RECEIVED

JUL 28 1997

Perchloroethylene Dry Cleaning Facility Notification

Bureau of Air Monitoring & Mobile Sources

Zip Code:

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):

Soft Michael Associales Inc

2. Site Name (For example, plant name or number):

4/180 Jog Rd Science 9 Estless Cleaness

3. Hazardous Waste Generator Identification Number:

4 S09 \$02036

4. Facility Location:

Street Address:

Lake Worth.

City: 4/180 Jog Ld Seite 9

County: Palm Bearth

Zip Code: 23467

5. Facility Identification Number (DEP Use):

Responsible Official

6. Name and Title of Responsible Official:

Jeffrey Sco 7 Colon Pres

Responsible Official Mailing Address:

(561)642 - 5023 Fax: (

Facility Contact (If different from Responsible Official)

County:

9. Name and Title	9. Name and Title of Facility Contact (For example, plant manager):				
Si	Ame				
10. Facility Contact	Address:			-	
Street Address: City:	SAME	County:	Zip Code:		
11 Facility Contact	Telephone Number:				

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

Organization/firm>

Telephone:

8. Responsible Official Telephone Number:

Page 13 of 16

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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
Example	#1	03-OCT-93	3 12-NOV-93	· #2	08-DEC-9	1.	#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit		12195	t .						**
(1) w/ ref. condenser	<u> </u>	Come W/1	nachiac						
(2) w/ carbon adsorber	<u> </u>								
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber						*			
(6) w/ no controls									
Dryer Unit								<u> </u>	
(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			1			,			
(b) Control devices are No control devices 2.(a) What was the total of the control devices (b) If less than 12 montrol Check why it is less	are r quant gallo	equired to b ity of perch ons ow many? [e installed [_loroethylene	(perc)	purchased		12 moi	nths?	
 What is the facility's so (Indicate with an "X". Existing small ar 	Selec	t one classi	fication only.)	nitions four		(3) of _]	Part II?	
Existing large ar	ea so	urce []	N	ew la	rge area sou	rce 💢	נ		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines pursuant to section (5) of I (Indicate with an "X".)	Part II of this notification form?
Existing large area source. Carbon adsorber [] Refrigerated condenser	
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser	
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 unit 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 perioduring which propane or fuel oil containing no more than one percent sulfur is	ds of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
	•
Equipment Monitoring and Recordkeeping Infor	mation
Check all logs which are required to be kept on-site in accordance with the req	uirements of this general permit:
(a) Purchase receipts and solvent purchases	× .
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	<u> </u>
(f) Start-up, shutdown, malfunction plan	

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

Surrender of Existing Air Permit(s)

Plea	ase indicat	e with an "X" the appropriate selection:
		I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
		No air permits currently exist for the operation of the facility indicated in this notification form.
		Responsible Official Certification
	this notifi statemen maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.
	I will pro	Imptly notify the Department of any changes to the information contained in this notification. [1] 1849 197
	Signature	Date

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

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COMP	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:05 TIME OUT: 10:4	5 AIRS ID#: 0990513
TYPE OF FACILITY: Doy Cleaning	· · -
FACILITY NAME: Cost less cleane	
FACILITY EOCATION: 710	ad #9
· Lake Worth,	FL 334-67
RESPONSIBLE OFFICIAL: Je fferey Scot Co	phone number: 642-5023
Based on the results of the compliance requirements evaluat	•
compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evaluate discrepancies were noted:	ed during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	Bureau of Air Monitoring & Mobile Sources
	
	•
•	r
COMMENTS:	
	·
The Annual Compliance Certification form has been properly certif	ied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	1999
INSPECTION CONDUCTED BY: $\mathcal{R}^{(A)}$	Chokshi.
	PHONE NUMBER: 355-3070

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ARMS

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

O

RE-INSPECTION

AIRS ID#: 0990513 DATE: 8-7-98 TIME IN: 10;05 TIME OUT: 10 FACILITY NAME: Cost less Cleaners FACILITY LOCATION: 4/80 JoG Road # 9 Lake Worth, FL 3) 467 RESPONSIBLE OFFICIAL: Jeffrey Set Cohen PHONE: 642-50 CONTACT NAME:	:
PART I: NOTIFICATION	
(check appropriate box)	
New facility notified DARM 30 days prior to startup	ם
2. Facility failed to notify DARM to use general permit	۵.
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box) Check appropriate box) Check appropriate box	roleum
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) 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 before 12/9/91) 5. This is a correct facility classification	
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 facility was 450 gallons.	cleaning

PART III: GENERAL CONTROL REQUIREMENTS					
Is the responsible official of the dry cleaning facility: (check appropriate boxes)					
1. Storing perchloroethylene in tightly sealed and impervious containers?	אואם אם צאם,				
2. Examining the containers for leakage?	אוחם אם אַעַ				
3. Closing and securing machine doors except during loading/unloading?	אם צום				
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	PY ON ON/A				
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON GANA				
PART IV: PROCESS VENT CONTROLS					
In Part II-A:					
If classification 1 has been checked, no controls are required. Proceed to Part	٧.				
If classification 2 has been checked, the machine should be equipped with a refu (complete A below).	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 ref. (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?	אם אַב.				
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	אואם אם צובע				
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	אואם אם אבל				
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	DY ON				
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	DY ON ONA				
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	ØY: ΠΝ				

В.	Has the responsible official of an existing large or new large area source also:	
I.	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 צאק
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY ON ON/A
	Is the temperature differential equal to or greater than 20° F?	אואם אם אס
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 DIVIA
	Is the perc concentration equal to or less than 100 ppm?	DY ON ZNIA
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?	
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY ON DINA
6.	Routed airflow to the carbon adsorber (if used) at all times?	אואבן אם צם

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ed w/in 2 days	IN □N/A
DY C	ANNE NE
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ZY C	אנ
ØY C	AND NC
<i>p</i> rý c	A'NO NE
OY C	A/NE NC
	ed w/in 2 days Pay C Cay C Cay C Pay C Pay C Pay C Pay C Pay C Pay C

PART VI: LEAK DETECTION AND REPAIRS

1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?			-dy on		
2.	Has the facility maintained a leak log?			מם אמ		
3.	Does the responsible official check the	following areas for leaks	?			
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	OY ON DAN/A		
	Door gaskets and seating	DY ON ON/A	Stills	אואם אם אַעַּק		
	Filter gaskets and seating	אוחם אם אלם	Exhaust dampers	אואבן אם צם		
	Pumps	אוֹאם אם אַס	Diverter valves	אוחם אם אים		
	Solvent tanks and containers	אומם מם אַכ	Cartridge filter housings	אאם אם אָוֹשׁ		
	Water separators	אומם מם צום ב				
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		•	DNIK		
	If using direct-reading inst	rumentation, is the equi	pment:	DN/A		
	a. Capable of detecting	perc vapor concentration	ns in a range of 0-500 ppm?	אם צם		
	b. Calibrated against a (PID/FID only)?	standard gas prior to and	l after each use	ОУ ОИ		
	c. Inspected for leaks and obvious signs of wear on a weekly basis?					
	d. Kept in a clean and	secure area when not in t	use?	DY ON		
	e. Verified for accurac	y by use of duplicate sam	ples (calorimetric only)?	אם צם		

Responsible Official's Name
(Please Print)

Inspector's Name (Please Print)

(a.V. Chora

Inspector's Signature

Residual's Signature

7-98

Date of Inspection

August 199

Approximate Date of Next Inspection

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n						
R	Anni	TIM	U A I	CITE	INCOD	MATION
Ш	ΔDDI	LIVI	1/1	SILE	III P O KU	MATION

1.	Secondary Containment for:	Dry Cleaning Machine & Storage area	Yes [/]		
'		Waste area	[/		١
		Spotting area Sealed	1/1	[]	l

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

Safety Kleen picks up waste every two weeks A Gave FDEP Colonder for Record Keeping

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: AN	MUAL X COM	1PLAINT/DISCOVERY	RE-INSPECTION
TIME IN: //: 00	TIME OUT: //; 5	AIRS ID#:	0990513
TYPE OF FACILITY: Dry	Cleaning	<u> </u>	
FACILITY NAME: COST 1	less Clea	eners	DATE:
FACILITY LOCATION: 418	10 - JOG,	Road #9	
	ake Worth	, FL 3346	57
RESPONSIBLE OFFICIAL: Jet		hen_phone number:_	642-5023
Based on the results of the concompliance with DEP Rule 62		ated during this inspection, the facil ative Code (F.A.C.).	ity is found to be in
Based on the results of the condiscrepancies were noted:	mpliance requirements evalua	ated during this inspection, the follo	wing compliance
COMPLIANCE REQUIRE	MENT/PROBLEM	FOLLOW-UP ACTION	ON REQUIRED
			•
-		_	
	<u> </u>		
	·		
·	·		
•			
	•		
COMMENTS:			

1.0	•		
The Annual Compliance Certification	form has been properly certifi	ed and submitted to the inspector.	YES NO
DATE OF NEXT INSPECTION:	7-6	24-98	·
INSPECTION CONDUCTED BY:_	R. V. (Ap	Chokshi.	
*	Plan (Ple	ease Print)	8355-3070
INSPECTOR'S SIGNATURE!	1 - Cusu	PHONE NUMBER:	

ARM5

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT

	COMPLIANCE I				
TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	N O	COMPLAINT/DISC	COVERY	
			· ·		·
AIRS ID#: 0990513 D				vie out: <u>/</u>	1:55
FACILITY NAME: COST	less (cleane	275		.
FACILITY LOCATION: 4				49	- -
FACILITY LOCATION:				77/1	67
	<u>La</u>	ke Wo	The FU	<u> </u>	2 2 3
		 	761-64	<u> </u>	063
PART I: NOTE CATION					
(check appropriate box)					
Existing facility notified DAR	M by 9/1/96				
2. New facility notified DARM 3			+ 1:11 + +	- ,	4/
3. Facility failed to notify DARM	1 to use general pe	mir D(9	not fill out	2m for	
			1000		
PART II: CLASSIFICATION					<u></u>
Facility indicated on notification	n form that it is:			.•	
(check appropriate box)					ı
A.	_				:
1. Existing small area source dry-to-dry only, x<140 gal/yr	te. 🗆	New small dry-to-dry only		<u></u>	
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both types, x<140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" g="" gal="" only,="" td="" transfer="" types,=""><td>0 gal/yr al/yr yr cation</td><td>transfer only, both types, x< (constructed of the large dry-to-dry only transfer only, both types, 140 (constructed of the large dry-to-dry only).</td><td>x<200 gal/yr 140 gal/yr n or after 12/9/91) area source y, 140<x<2, 100="" gal="" yr<br="">200<x<1,800 gal="" yr<br="">0<x<1,800 gal="" td="" yr<=""><td></td><td></td></x<1,800></x<1,800></x<2,></td></x<2,>	0 gal/yr al/yr yr cation	transfer only, both types, x< (constructed of the large dry-to-dry only transfer only, both types, 140 (constructed of the large dry-to-dry only).	x<200 gal/yr 140 gal/yr n or after 12/9/91) area source y, 140 <x<2, 100="" gal="" yr<br="">200<x<1,800 gal="" yr<br="">0<x<1,800 gal="" td="" yr<=""><td></td><td></td></x<1,800></x<1,800></x<2,>		
both types, x<140 gallyr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 200<x<1,800="" 9="" 91)="" a="" appropriation<="" before="" check="" classified="" correct="" facility="" gally="" if="" is="" no,="" only,="" please="" td="" the="" this="" transfer=""><td>0 gal/yr al/yr yr ation ate classification: ad for a general per</td><td>transfer only, both types, x < (constructed of the large dry-to-dry only transfer only, both types, 140 (constructed of the large dry transfer only).</td><td>x<200 gal/yr 140 gal/yr n or after 12/9/91) area source y, 140<x<2, 0<x<1,300="" 100="" 12="" 200<x<1,800="" 9="" 91)<="" after="" gal="" n="" or="" td="" yr=""><td></td><td></td></x<2,></td></x<2,>	0 gal/yr al/yr yr ation ate classification: ad for a general per	transfer only, both types, x < (constructed of the large dry-to-dry only transfer only, both types, 140 (constructed of the large dry transfer only).	x<200 gal/yr 140 gal/yr n or after 12/9/91) area source y, 140 <x<2, 0<x<1,300="" 100="" 12="" 200<x<1,800="" 9="" 91)<="" after="" gal="" n="" or="" td="" yr=""><td></td><td></td></x<2,>		
both types, x<140 gal/yr (constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 200<x<1,800="" 9="" 91)="" a="" before="" classified="" correct="" facility="" from="" gal="" is="" of="" only,="" property="" td="" the="" the<="" this="" transfer=""><td>0 gal/yr al/yr yr ation ate classification:</td><td>transfer only, both types, x < (constructed of the large dry-to-dry only transfer only, both types, 140 (constructed of the large dry transfer only).</td><td>x<200 gal/yr 140 gal/yr n or after 12/9/91) area source y, 140<x<2, 0<x<1,300="" 100="" 12="" 200<x<1,800="" 9="" 91)<="" after="" gal="" n="" or="" td="" yr=""><td></td><td></td></x<2,></td></x<2,>	0 gal/yr al/yr yr ation ate classification:	transfer only, both types, x < (constructed of the large dry-to-dry only transfer only, both types, 140 (constructed of the large dry transfer only).	x<200 gal/yr 140 gal/yr n or after 12/9/91) area source y, 140 <x<2, 0<x<1,300="" 100="" 12="" 200<x<1,800="" 9="" 91)<="" after="" gal="" n="" or="" td="" yr=""><td></td><td></td></x<2,>		

ARMS

PART III: GENERAL CONTROL REQUIREMENTS

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

- 1. Storing perchloroethylene in tightly sealed and impervious containers?
- 2. Examining the containers for leakage?
- 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?

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PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

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

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

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

- A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)
- 1. Equipped all machines with the appropriate vent controls?
- 2. Equipped dry-to-dry machines with a closed-loop vapor venting system?
- 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly 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?

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MY ON

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?	\$x	ПИ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ŽΥ	מם	BA
	Is the temperature differential equal to or greater than 20° F?	XYY	ПΝ	
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?	ΩY	□и	DNA XN/A
	Is the perc concentration equal to or less than 100 ppm?	ΩY	ПИ	XN/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?	ПY	N_	IN/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY	ИD	AVIA AVIA
ó.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	ПИ	A VIA

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	qл ои			
2. Maintained rolling monthly averages of perc consumption?	dy on			
3. Maintained leak detection inspection and repair reports for the following:	,			
a. documentation of leaks repaired w/in 24 hrs? or;	фл ои			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	da on			
4. Maintained calibration data? (for direct reading instruments only)	DY ON AMIA			
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON YN/A			
6. Maintained startup/shutdown/malfunction plan?	AY ON			
7. Maintained deviation reports?	JEAK □N			
Problem corrected?	DA ON			
8. Maintained compliance plan, if applicable?	DY ON XIVA			

7. Maintained deviation reports?	Øx □N
Problem corrected?	DX ON
8. Maintained compliance plan, if applicable?	OY ON XINA
PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	COM ON
1. Does the responsible official conduct a weekly leak detection and repair hispection?	CAI CIN
	•

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	2. Which method of detection is used by th	e respon	sible offic	tial?		
	Visual examination (condensed solvent on exterior surfaces)					
	Physical detection (airflow felt through gaskets) Odor (noticeable perc odor)					
	Use of direct-reading instrumentat	ion (FID	/PID/calc	rimetric tubes)		(FN/A
	If using direct-reading instrume	atation,	is the equ	ipment:	·	
	a. Capable of detecting p	erc vapo	r concent	rations in a range of 0-500 ppm?	$\Box Y$	ON_IN/A
	b. Calibrated against a st (PID/FID only)?	andard g	gas prior t	o and after each use	ΩY	ON_N/A
	c. Inspected for leaks and	d obvious	s signs of	wear on a weekly basis?	ΩY	ON_N/A
	d. Kept in a clean and se	cure area	a when no	t in use?	QY.	ON N/A
	e. Verified for accuracy b	y use of	duplicate	samples (calorimetric only)?	ΩY	DNVN/A
	3. Has the facility maintained a leak log?				AX	ПN
	4. Does the responsible official check the f	ollowing	g areas for	leaks?	, ,	
	Hose connections, fittings,	1				` .
	couplings, and valves	фх	ИΩ	Muck cookers	. QY	□N - K u
	Door gaskets and seating	ΦY	ΠN	Stills'	4X	□ии
	Filter gaskets and seating	фх.	ПΩ	Exhaust dampers	QY	ON FW
	Pumps	ϕ_{λ}	ПD	Diverter valves	\$x	Ωи_и
	Solvent tanks and containers	AA	ΠN	Cartridge filter housings	#X	Ωи_и
	Water separators	φx	ПN			
•	- Heffing Modx			Jeffrey S Cohe	`	
	// Name of Responsible Officia	ì	1 -	Name of Responsible Official	l (Pri	nt) & Phone
			oksh	2/24/97	· .	
	Inspector's Name (Please Prin	it)		Date of Inspe	ction	
	Co.V. Cha			7-241	9 X	<u>,</u>
	Inspector's Signature			Approximate Date of	Next L	nspection
Sec	ondary Containment for: Dry C	leanin	g Machi	ne & Storage area		(A) [] Ass No
	·			Waste area		Q []
				Spotting area Sealed	d	FA-[]
Dis	sposal of Water from Water Sepa	rator	using	approved evaporator	(N1 11
				Pick s up Water		1
	•	-		and and warrest		



DRY CLEANER AIR QUALITY GENERAL PERMIT

ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID 0990513 SCOT MICHEAL ASSOCIATES INC JEFFREY SCOT COHEN 4180 JOG ROAD SUITE #9 LAKE WORTH FL 33467

Do NOT Remove Label

MAR 0 4 1938

Bureau of Air Monitoring
& Mobile Sources

Annual Reporting Period:	19 TO	19
Based on each term or condition of the Title V general air permit, 62-213.300, Florida Administrative Code (F.A.C.), during the per-	<u> </u>	_
If NO, complete the following:		
#1. Term or condition of the general permit that has not been in c	ontinuous compliance during the reporti	ing period stated above:
Exact period of non-compliance: from		
·		
#2. Term or condition of the general permit that has not been in c	ontinuous compliance during the reporti	ing period stated above:
<u> </u>		
Exact period of non-compliance: from	to	
Action(s) taken to achieve compliance:	<u> </u>	
Method used to demonstrate compliance:		
As the responsible official, I hereby certify, based on information and be notification are true, accurate and complete. Further, my annual cons does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800	umption of perchloroethylene solvent, base	ed upon purchase receipts,
RESPONSIBLE OFFICIAL: Name (Please Print)	Signature	2/12/98 Date

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

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

YPE OF INSPECTION:	ANNUAL	COMPLAINT/DISCOVERY RE-INSPECTION
MEN: /2:10	TIME OUT: /2:	35 AIRS 10#: 0990513
YPE OF FACILITY:	Doy Cleaning	· · -
ACILITY NAME: 65	+ less clea	ners DATE: 5-13-9
ACILITY LOCATION:	-180 Jog R	d # 9
·La	Ke WONTH,	FL 3346/
ESPONSIBLE OFFICIAL:_	Jeffsey Cor	en PHONE NUMBER: 642-502
		valuated during this inspection, the facility is found to be in
	Rule 62-213.300, Florida Admi	
discrepancies were no		valuated during this inspection, the following compliance
·	QUIREMENT/PROBLEM	I FOLLOW-UP ACTION REQUIRED
	· · · · · · · · · · · · · · · · · · ·	
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		· · · · · · ·
•	·	OUT TO THE
		· · · · · · · · · · · · · · · · · · ·
•	•	To the state of th
•		9-
	•	
COMMENTS:		•
The Annual Compliance Cer	tification form has been properl	certified and submitted to the inspector. YES NO
DATE OF NEXT INSPEC	TION: MQ	72000
	0.11	(Approximate)
INSPECTION CONDUCT	ED BY:	(Please Print)
INSPECTOR'S SIGNATU	(x1/ C/12)	Shi PHONE NUMBER: 355-307

ARMS

PERCHLOROETHYLENE DRY CLEANERS

TITLE VIGENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL



COMPLAINT/DISCOVERY

a

RE-INSPECTION

AIRS 1D#: 0990513 DATE: 5-13-99 TIME IN: 12:10 TIME OUT: 12:35
FACILITY NAME: Cost less cleaners
FACILITY LOCATION: 4/80 Jog Road # 9
Lakeworth, FL 33467
RESPONSIBLE OFFICIAL: Jeffrey Cohenphone: 642-5023
CONTACT NAME:PHONE:
PART I: NOTIFICATION
(check appropriate box)
I. 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) No notification form Drop store/out of business/petroleum
(check appropriate box) 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 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 both types, x < 140 gal/yr
(check appropriate box) 1. Existing small area source
(check appropriate box) 1. Existing small area source 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 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 \leq x \leq 2,100 gal/yr transfer only, 200 \leq x \leq 1,800 gal/yr transfer only, 200 \leq x \leq 1,800 gal/yr transfer only, 200 \leq x \leq 1,800 gal/yr both types, 140 \leq x \leq 1,800 gal/yr both types, 140 \leq x \leq 1,800 gal/yr (constructed on or after 12/9/91)

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?

AND ND YES

2. Examining the containers for leakage?

DY ON ON/A

3. Closing and securing machine doors except during loading/unloading?

אם אַם

4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?

- ZY ON ON/A
- 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

ΠY	ПN	ZN/A
$\supset Y$	ПN	ZNA

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?

אם צים

2. Equipped dry-to-dry machines with a closed-loop vapor venting system?

- MY ON ON/A
- 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?
- אוחם אם צאם
- 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?
- MD AM
- 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?
- באתם אם אם
- 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

_		
B.	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.	
	on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	אם יוש
2.	Measured and recorded the washer exhaust temperature at the condenser	
	inlet and outlet weekly?	DY ON ON/A
	Is the temperature differential equal to or greater than 20° F?	DY 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?	DY DN PANJA
	Is the perc concentration equal to or less than 100 ppm?	אומבן מם צם
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,	
i	or expansion; is at least 2 duct diameters upstream from any bend, contraction,	. /
	or expansion; and downstream from no other inlet?	DY ON MINA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual	
	condenser coils?	DY DN ZN/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	אואק אם צם

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

PART VI: LEAK DETECTION AND REPAIRS 1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? 2. Has the facility maintained a leak log? $\square N$ 3. Does the responsible official check the following areas for leaks? Hose connections, fittings, DY ON ON/A couplings, and valves DY ON DAVA Muck cookers אוחם אם צם-DY ON ON/A Door gaskets and seating Stills Filter gaskets and seating DY ON DXIA DY ON ON/A Exhaust dampers DN DN/A Pumps DY DN DN/A Diverter valves Solvent tanks and containers EY ON ON/A Carridge filter housings DY ON ON/A ZY DN DNA 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: **DN**/A 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 Responsible Official's Name

Approximate Date of Next Inspection

דומסג	IONAL SITE IN	FORMATION:			· · · · · · · · · · · · · · · · · · ·
1. S	econdary Cont	ainment for:	Dry Cleaning	Machine & Storage are Waste area Spotting area Sealed	11 [1]
			•		
2. p	Disposal of Wa			using approved evaporated Wastewater service	
5	agety	Kle	en p	ichs PT Calleb	1
					. ;

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVERY RE-INSPECTION
	1: 45 AIRS ID#: 099 05/3
TYPE OF FACILITY: Dey (leaving)	
FACILITY NAME: Cost Less Cleanes	DATE: 3/29/00
FACILITY LOCATION: 4/80 Jog Road #	
LAKE Worth, F/ 330	467
RESPONSIBLE OFFICIAL: Jeffey Cohe.J.	PHONE NUMBER: 642 - 5023
compliance with DEP Rule 62-213.300, Florida Adn	evaluated during this inspection, the facility is found to be in ninistrative Code (F.A.C.). evaluated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLE	M FOLLOW-UP ACTION REQUIRED
Incomplete perchisently lone Furchase Receipts At facility during inspection.	FACILITY is required to maintain all perchlesethy we prechase receipts on site for a minimum of 5 years.
	. T
	APR 1 's wobile & Mobile
	VEL 2000 r Monitori Sources
OMMENTS:	ng
ne Annual Compliance Certification form has been properly ce	rtified and submitted to the inspector. YES NO
ATE OF NEXT INSPECTION:	MARCH Zeei
(Approximate)
	CARREY Dizek
•	Please Print) PHONE NUMBER: 355 - 3070 X7 1/39

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT OMPLIANCE INSPECTION CHECKLIST

COMPER	ANCE INST	ECTION (CHECKLIST .		
TYPE OF INSPECTION: ANNUA RE-INSP	L ECTION	X	COMPLAIN	T/DISCOVERY	Y D
AIRS ID#: 09905/3 DATE: 3	24/00	TIME I	N: 11: 15	_ TIME OUT:	: 11:45
FACILITY NAME: Cost Zess	Cleaner	?5			
FACILITY LOCATION: 4/80 J					
LAKE W			67		
RESPONSIBLE OFFICIAL: Jeffey	_		PHONE: 4	642 - 503	23
· .				77. 202	
CONTACT NAME:			PHONE:		
EFFECTION BLOW S. C. T. S. Extraction of the control of the contro	, .		evanació de autorio esta consecuencia de autorio de aut	· · · · · · · · · · · · · · · · · · ·	
PART I: NOTIFICATION					
check appropriate box)		•			
. New facility notified DARM 30 days prior t	o startup				
2. Facility failed to notify DARM to use gener	-				
· ·				STREET CHEST OF THE PERSON NAMED IN	managandos programas providentes
ART II: CLASSIFICATION					2.31
'acility indicated on notification form that it check appropriate box)	is:		☐ No notification	on form ut of business/p	etroleum
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)	dry-to- transfer both ty	r only, x < pes, x < 14	: < 140 gal/yr 200 gal/yr		
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 $12/9/91$)	dry-to-o transfer both typ	only, 200 pes, 140 ≤ :	a source 40 ≤ x ≤ 2,100 g ≤ x ≤ 1,800 gal/yr x ≤ 1,800 gal/yr after 12/9/91)	•	
5. This is a correct facility classification	XΥ	ם אם	□Can not detern	nine	
If no, please check the appropriate class facility qualified for a facility exceeds above	general perm			oove ermit	

Revised 9/15/97

B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 244 gallons. July 99 12 march 2000

Is the responsible official of the dry cleaning facility: (check appropriate boxes) XY ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? XY ON ON/A 2. Examining the containers for leakage? MO VIX 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at MY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN XNA beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been 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? ANO NO YX 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 XY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated MO AM condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the VY ON ON/A condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after MY ON verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

-		
]	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?	אם יאק
2	?. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	MY ON ONA
	ls the temperature differential equal to or greater than 20° F?	XX 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?	ANN X NO YO
	Is the perc concentration equal to or less than 100 ppm?	DY DN X NIA
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?	ANA NO YO
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	אוא א אם אם
5.	Routed airflow to the carbon adsorber (if used) at all times?	DY DN XX

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased? Incomplete	XY ON
2. Maintained rolling monthly total of perc consumption?	XA DW
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?	ארם אם צ יא
4. Maintained calibration data? (for applicable direct reading instruments)	אואל א אם צם
5. Maintained exhaust duct monitoring data on perc concentrations?	מאוא אל אם אם
6. Maintained startup/shutdown/malfunction plan?	XA DN
7. Maintained deviation reports?	YAY ON ON/A
Problem corrected?	AND NO YA
8. Maintained compliance plan, if applicable?	ANK NO YO

YDDILIONYT	SITE INFORMATION:	44		*** <u>*</u>	
			•		
1. Secondar	cy Containment for:	Dry Cleaning	Machine & Storage area	Yes [X]) [
	-		Waste area	[]	Ι
•		. ,	Spotting area Sealed	[X]	I
		· .			
		•	•		
					:
	;				
guis m aus mil			•		
2. Disposal	of Water from Water	a Commonton	*	r zi	г'n
: Distregi	or water from water		ing approved evaporator Wastewater service	IX J	l .l
	`	or contracted	:	ŗ,	
	•				
	NAC WASA	: 2720 ye :	the unikualee		
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				,	·
	·		A contract of		

inspection?	•,•		XY	ПN
2. Has the facility maintained a leak log	,,		19 1Y	DИ
3. Does the responsible official check the		ke?	1 345	CIN
Hose connections, fittings,	.o 10110111118 at oas 101 10a.			
couplings, and valves	AND NO YE	Muck cookers		alni x n
Door gaskets and seating	AND NO YA	Stills	X Y 🗆	A'ND N
Filter gaskets and seating	ANA NO YX	Exhaust dampers		ANK K N
Pumps	AND NO YA	Diverter valves	Æ TY □	A/ND V
Solvent tanks and containers	AVA NO Y X	Cartridge filter housir	ngs /86 Ý 🗆 i	A/ND N
Water separators	ANO NO YA			•
4. Which method of detection is used by	the responsible official?			
Visual examination (condensed s	solvent on exterior surface	es)~	7 2	
Physical detection (airflow felt th	rough gaskets)		1 27	
Odor (noticeable perc odor)	• .			
Use of direct-reading instruments	ation (FID/PID/calorimet	ric tubes)	⊠ i √a	
Halogen leak detector	•		XI NA	
If using direct-reading instr	umentation, is the equip	oment:	MNA	
a. Capable of detecting	perc vapor concentrations	s in a range of 0-500 ppm?	OY ON	
b. Calibrated against a s (PID/FID only)?	tandard gas prior to and a	ifter each use	מם עם	
c. Inspected for leaks an	d obvious signs of wear o	on a weekly basis?	OY ON	
d. Kept in a clean and se	cure area when not in use	?	OY ON	
e. Verified for accuracy	by use of duplicate sampl	les (calorimetric only)?	מם אם	
	. ,			.
bot on		1/// 10	1	
xxleg When		Jeffus 10	4	
onsib√e Official's Name (Please Print)		kesponsible Off	icial's	Signa
Technology		- 1 1		
Jeffey Dizek Inspector's Name (Please Print)	Date of Inspection	ĉ ·	
		. Date of hispection		

BEST AVAILABLE COPY . INSPECT	TIONSU	MMARY	report -	• .	• -
TYPE OF INSPECTION: ANNUAL	co	MPLAINT/D	ISCOVERY [J	RE-INSPECTION
TIME IN:TIME OUT:			AIRS ID#	099	0 513
TYPE OF FACILITY: D-& Cleanor					
	10 ener 7		•	DA	TE: 3/2/01
FACILITY LOCATION: 4180 Jos	hd #	9	rake Wo		33467
					•
RESPONSIBLE OFFICIAL: De Free Cohen	ή		PHONE NUM	BER: 64	1 - 5023
Based on the results of the compliance requirem compliance with DEP Rule 62-213.300, Florida	ients evalua Administra	ated during thing thing thing the Code (F.	s inspection, the	facility is i	found to be in
Based on the results of the compliance requirement discrepancies were noted:	•	ted during this	s inspection, the	following o	compliance
COMPLIANCE REQUIREMENT/PROBI	LEM]	FOLI	LOW-UP AC	CTIONR	EQUIRED
		•			\mathcal{P}
· ·		· .	·	Burea &	
•		. •		eau of Air & Mobile	OE I
		:	•	Monitorine Sources	V E D
			. •		
	:-•				
OMMENTS:					
				•	
e Annual Compliance Certification form has been properly	certified a	nd submitted t	o the inspector.	YES	NO
SPECTION CONDUCTED BY:	(Approx				
SPECTOR'S SIGNATURE:	(Please)		E NUMBER:_	3~5	3070
Da.	″r of	•			Revised 10/9

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL	á	COMPLAINT/DISCOVERY	
/ ARCOP	RE-INSPECTION	<u> </u>		-
AIRS ID#: 0 140 713			TIME OUT:	
FACILITY NAME:	ost Loss Cla	eulr >		
FACILITY LOCATION:	4180 707	hd	Lake Worth	33767
RESPONSIBLE OFFICIAL:	Johnney Col	~ℓ ∽]	PHONE: 642 502	}
CONTACT NAME:		1	PHONE:	
•				
PART I: NOTIFICATION				
(check appropriate box)			•	
New facility notified DARM	-			
2. Facility failed to notify DAR	M to use general permit	•		
	· .	• •	and the street of the second	· · · · /.
PART II: CLASSIFICATION	N .		the best water than the second	/-
PART II: CLASSIFICATION Facility indicated on notificate (check appropriate box) A.		-	☐ No notification form ☐ Drop store/out of business/pet	roleum
Facility indicated on notification (check appropriate box)	rce	-	☐ Drop store/out of business/peta a source < 140 gal/yr 200 gal/yr O gal/yr	roleum
Facility indicated on notification (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gallyr both types, x < 140 gallyr	ion form that it is: True Z. Yyr dry trar bot (co. True 100 gal/yr gal/yr bot dry trar bot trar bot	New small are -to-dry only, x asfer only, x < 14 h types, x < 14 nstructed on or New large are -to-dry only, 1- asfer only, 200	☐ Drop store/out of business/petons a source < 140 gal/yr 200 gal/yr 20 gal/yr after 12/9/91) a source 10 ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr x ≤ 1,800 gal/yr	roleum
Facility indicated on notification (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gally transfer only, x < 200 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area sound dry-to-dry only, 140 < x < 2 transfer only, 200 < x < 1,800 both types, 140 < x < 1,800	ion form that it is: free	New small are to-dry only, x isfer only, x < 14 is types, x < 14 is tructed on or New large are to-dry only, 1 isfer only, 200 h types, 140 < 1 is tructed on or or types, 140 < 1 is tructed on or or types, 140 < 1 is tructed on or or the types, 140 or or or types, 140 or	☐ Drop store/out of business/petons a source < 140 gal/yr 200 gal/yr 20 gal/yr after 12/9/91) a source 10 ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr x ≤ 1,800 gal/yr	roleum
Facility indicated on notification (check appropriate box) A. 1. Existing small area sound dry-to-dry only, x < 140 gally transfer only, x < 200 gallyr both types, x < 140 gallyr (constructed before 12/9/91) 3. Existing large area sound dry-to-dry only, 140 < x < 2 transfer only, 200 < x < 1,80 both types, 140 < x < 1,800 (constructed before 12/9/91) 5. This is a correct facility of	ion form that it is: True Z. Yyr dry trar bot (co. 100 gal/yr gal/yr gal/yr bot (co.	New small are -to-dry only, x isfer only, x < 14 isfer only, x < 14 instructed on or New large are -to-dry only, 14 isfer only, 200 h types, 140 < 17 instructed on or IN IN IN IN IN IN IN IN IN I	☐ Drop store/out of business/petons a source < 140 gal/yr 200 gal/yr 200 gal/yr after 12/9/91) a source 40 ≤ x ≤ 2,100 gal/yr x ≤ 1,800 gal/yr x ≤ 1,800 gal/yr after 12/9/91) ☐ Can not determine cer acove	roleum

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 ONIA
2. Examining the containers for leakage?	AND ND YD
3. Closing and securing machine doors except during loading/unloading?	MY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	MY ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	בא מו אם אם
DIRECT PROCESSION CO.	
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 ref (complete A below).	
If classification 3 has been checked, the machine should be equipped with eithe condenser or a carbon adsorber (complete A and B below). Carbon adsorber m prior to September 22, 1993	r a refrigerated ust have been installed
If classification 4 has been checked, the machine should be equipped with a ref (complete A and B below).	rigerated condenser
A. Has the responsible official of all new sources and existing large area source (check appropriate boxes)	es:
1. Equipped all machines with the appropriate vent controls?	GY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	4 ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Y 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

 Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?

AY ON ONA

QA DX

6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

8.	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 on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	,
	Is the temperature differential equal to or greater than 20° F?	١.
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?	Α.
	Is the perc concentration equal to or less than 100 ppm?	4
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?	A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	A
6	Routed airflow to the carbon adsorber (if used) at all times?	A
_	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אם עס
2. Maintained rolling monthly total of perc consumption?	אם אַק
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	אותם אם אם
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ØÝ □N □N/A
4. Maintained calibration data? Ger explicable direct reading instruments)	אא אם אם אם
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN YEDYA
6. Maintained startup/shutdown/malfunction plan?	אָם אָע
7. Maintained deviation reports?	DY ON ON/A
Problem corrected?	GY ON ON/A
3. Maintained compliance plan, if applicable?	אאלאל אם אם

ART VI: LEAR DETECTION AND	REPAIRS	المنها فالمناه المستماع والمراج			
Does the responsible official conduct :	weekly (for small source	es, bi-weekly) leak detection	n and repair		
inspection?		,	אם עם		
Has the facility maintained a leak log?	••	"	OY ON		
Does the responsible official check the	following areas for leak	:s?	·		
Hose connections, fittings, couplings, and valves	אומם מם צים	Muck cookers	A/אבל מם צם		
Door gaskets and seating	DY ON ON/A	Stills	DY ON ON/A		
Filter gaskets and seating	DY ON ONIA	Exhaust dampers	אואם אם אם		
Pumps	אואם אם אם	Diverter valves	DY ON ON/A		
Solvent tanks and containers	אואם אם אם	Cartridge filter housing	gs DY DN DN/A		
Water separators	DY ON ONA				
Which method of detection is used by	the responsible official?			. '	
Visual examination (condensed.	solvent on exterior surfac	cės)	ď		
Physical detection (airslow felt t	hrough gaskets)	•	e .		
· Odor (noticeable perc odor)			E ·		
Use of direct-reading instrumen	ation (FID/PID/calorime	tric tubes)	Efrila.		
· Halogen leak detector			₽ NK.		
If using direct-reading inst	rumentation, is the equ	ipment:	SAVA :		
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
c. Inspected for leaks	and obvious signs of wea	r on a weekly basis?	ПА ПИ		
d. Kept in a clean and	secure area when not in t	use?	עם עם		
e. Verified for accurac	y by use of duplicate san	nples (calorimetric only)?	אם צם		
•			<u> </u>		
<i>Y</i>		> Stanley	Al	-	
orsible Official's Na (Please Print)	me	Responsible of	ficial's Sign	ature	
h Liebler		3/2/	/ 0 /		
Inspector's Name (Please Prize) Date of Inspection					
. h he		3/0			
Inspector's Signature		Approximate Date	of Next Inspection		

		•	DEST AVAILABL	E COPY	
۵۵۸	ITIONAL SI	TE INFORMATION:			
1.	Secondary	Containment for:	Dry Cleaning	y Machine & Storage area Waste area Spotting area Sealed	Yes NO 1 [] [] [] []
			•		
	•		`	•	
		•		• 	
2.	Disposal	of Water from Wat	ter Separator 1	using approved evaporato	
l	•		or contract	ed Wastewater service	
			· ·		. •

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item 4 if Restricte Print your name a so that we can re	, 2, and 3. Also complete of Delivery is desired. and address on the reverse turn the card to you. o the back of the mailpiece, space permits.	C. Siggature	B. Date of Delivery // 3/3/2 Agent Addressee
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10 AIRS JEFFREY SCOT (COST LESS CLE			
4180 JOG ROAD		3. Service Type	
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6. Signature: (Addressee or Agent) PS Form 3811, December 1994

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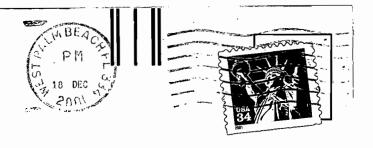
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33467

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Obj.: 002273





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LAKE WORTH FL 33467

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