

Department of Environmental Protection

Jeb Bush
Governor

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

David B. Struhs
Secretary

April 18, 2000

Mr. Martin Roman
Unique Dry Cleaners
2677 Forest Hill Boulevard
West Palm Beach, Florida 33406

Re: Facility No.: 0990585

Dear Mr. Roman:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on March 16, 2000.

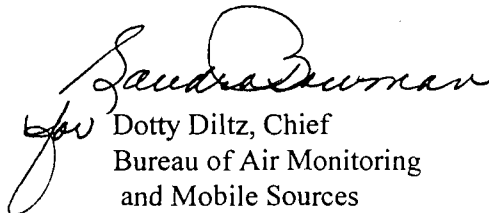
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements 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



Department of Environmental Protection

Jeb Bush
Governor

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

David B. Struhs
Secretary

March 20, 2000

#0990585

Mr. Martin Roman
Unique Dry Cleaners
2677 Forest Hill Boulevard
West Palm Beach, Florida 33406

Dear Mr. Roman:

The Bureau of Air Monitoring and Mobile Sources recently received your Perchloroethylene Dry Cleaning Notification Form and check (#1028) in the amount of \$50.00.

We appreciate your submittal. However, your check is being returned to you since it is not due at this time. Fees are due and payable between January 15 and March 1 in the year following each year for which the facility is in operation and subject to the requirements of the general permit. The Department will send you an invoice in time for the next payment cycle.

If you have any questions, please call me at 850/921-9583.

Sincerely,

Sandra Bowman
Environmental Manager
Mobile Source Control Section
Bureau of Air Monitoring
and Mobile Sources

UNIQUE DRY CLEANERS Ph 561-969-1771 2677 Forest Hill Blvd West Palm Beach, FL 33406		1028
PAY TO THE ORDER OF <u>DEPT. OF ENVIRONMENTAL AGENCY</u>		DATE <u>3/13/00</u>
<u>FIFTY</u>		\$ <u>50.00</u> ^{00/100}
RIVERSIDE NATIONAL BANK RIVERSIDE NATIONAL BANK OF FLORIDA 2685 FOREST HILL BLVD., WEST PALM BEACH, FL 33406		<u>ce/xx</u> DOLLARS <input type="checkbox"/> Security features included. Details on back.
FOR	<u>Martin Roman</u>	

Bowman, Sandy

From: Martin_Liebler@doh.state.fl.us
Sent: Tuesday, July 01, 2003 6:43 AM
To: Bowman, Sandy
Cc: Ajaya_Satyral@doh.state.fl.us
Subject: RE: Pay 02NoPay.xls

Sandy,0990372 has been renamed and renumbered 0990607, 0990415 is a drop store,0990426 is closed,0990450 is closed,0990478 needs to pay,0990527 is a drop store,0990585 is out of business.

-----Original Message-----

From: Bowman, Sandy [mailto:Sandy.Bowman@dep.state.fl.us]
Sent: Monday, June 30, 2003 2:27 PM
To: Norman, Charles; Schilling, Tracy; Lewis, Wayne; Culliver, Sherrill; Janis, Neal; tutt@coj.net; John.Parker@ocfl.net; cbittle@broward.org; Martin_liebler@doh.state.fl.us; nozari@epchc.org; mmccann@co.pinellas.fl.us; ajaya_satyral@doh.state.fl.us; scameron@co.sarasota.fl.us; barrom@miamidade.gov
Cc: Davis, William; Grant, Patricia
Subject: Pay 02NoPay.xls

Hey All!

According to our records, the attached list identifies those facilities that have not paid their Title V general permit 2002 annual operations fee. Some of these facilities may no longer be in business or they may have changed ownership. If you are aware of any such changes, please let us know so that we may update the database.

Penalty letters were mailed in April to 140 facilities. If you are interested in pursuing enforcement for non-payment and would like copies of letters mailed or signed certified receipts, please contact Pat Grant.

Thank you. Have a safe and happy Fourth!

Sandy

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): MARTIN ROMAN -
2. Site Name (For example, plant name or number): UNIQUE DRY CLEANERS
3. Hazardous Waste Generator Identification Number:
4. Facility Location: Street Address: 2677 FOREST HILL BLVD. City: WEST PALM BEACH County: PALM BEACH Zip Code: 33406
5. Facility Identification Number (DEP Use ONLY - do not fill in): 0990585

Responsible Official

6. Name and Title of Responsible Official: Name: MARTIN ROMAN Title: OWNER
7. Responsible Official Mailing Address: Organization/Firm: SAME Street Address: City: County: Zip Code:
8. Responsible Official Telephone Number: Telephone: (561) 969-1771 Fax: (561) 582-8663

Bureau of Air Monitoring
& Mobile Sources

MAR 16 2000

RECEIVED

Facility Contact (If different from Responsible Official)

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

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1987	Existing	RC/CA/None required	
	Existing	RC/CA/None required	
	Existing	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing	RC/CA/None required	
	Existing	RC/CA/None required	
	Existing	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening)

3. What is the facility's source classification based on the definitions found in section (3) of Part II?
 Indicate with an "X". Select one classification only.)

- Small Area Source
- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?
 (Indicate with an "X".)

- | | |
|--|---|
| <u>Existing machines at small area source</u>
(NONE REQUIRED) <input checked="" type="checkbox"/> | <u>New machines at small area source</u>
Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u>
Carbon adsorber <input type="checkbox"/>
Refrigerated condenser <input type="checkbox"/> | <u>New machines at large area source</u>
Refrigerated condenser <input type="checkbox"/> |

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt OR
 No such units on-site

How many boilers do you have on-site? 1

For each boiler, indicate its horsepower (HP) rating: 10

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. 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, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

MARTIN ROMAN

Print name of responsible official


Signature

3/13/00
Date



Jeb Bush
Governor

Robert G. Brooks, M.D.
Secretary

Date: March 13, 2000

Sandy Bowman
General Permits Section
Bureau of Air Monitoring & Mobile Sources
Department of Environmental Protection
Mail Station 5510
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

RECEIVED
MAR 16 2000
Bureau of Air Monitoring
& Mobile Sources

Sandy,

While reading the Pennysaver I recently stumbled across a new dry cleaner in Palm Beach County. I visited this cleaner on March 13, 2000 and helped him fill out a notification form. The owner also wrote a check for his annual Title V General Air Permit which I have included in this packet. This facility is classified as an Existing Small Area Source since the dry cleaning machine was manufactured in 1987. However, Mr. Roman, the facility owner, has marked off in the notification form that his machine is using a refrigerated condenser even though it is not required. Since this is a new facility location, Mr. Roman estimated that he would not purchase more than 139 gallons of perchloroethylene within a twelve (12) month period. This facility currently does not have a hazardous waste generator identification number. According to Mr. Roman, he has not generated any waste at this facility as of March 13, 2000. He began operations at this location approximately three (3) months ago (January 2000).

Please let me know if you need any more information on this facility.

Thanks

Jeff

BEST AVAILABLE COPY

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

[Handwritten signature]

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY
RE-INSPECTION

AIRS ID#: 0990585 DATE: 6/6/00 TIME IN: _____ TIME OUT: _____

FACILITY NAME: Unique Dry Cleaners

FACILITY LOCATION: 2677 Forest Hill Blvd
West Palm Beach 33406

RESPONSIBLE OFFICIAL: Martin Roney PHONE: 582 5663

CONTACT NAME: _____ PHONE: _____

PART I: NOTIFICATION

(check appropriate box)

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

RECEIVED
JUL 10 2000
Bureau of Air Monitoring
& Mobile Sources

PART II: CLASSIFICATION

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

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

- 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) <input checked="" type="checkbox"/> | 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) <input type="checkbox"/> |
| 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
both types, $140 \leq x \leq 1,800$ gal/yr
(constructed before 12/9/91) <input type="checkbox"/> | 4. New 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
both types, $140 \leq x \leq 1,800$ gal/yr
(constructed on or after 12/9/91) <input type="checkbox"/> |
5. This is a correct facility classification Y 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 75 gallons. Year to date new owner

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? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 2. Examining the containers for leakage? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 3. Closing and securing machine doors except during loading/uploading? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |
| 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> N/A |

PART IV: PROCESS VENT CONTROLS

In Part II-A:

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

If classification 2 has been checked, the machine should be equipped with a 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? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? | <input type="checkbox"/> Y <input type="checkbox"/> N |
| 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A |
| 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? | <input type="checkbox"/> Y <input type="checkbox"/> N |

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? Y N
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? Y N N/A
Is the temperature differential equal to or greater than 20° F? Y N N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Y N N/A
Is the perc concentration equal to or less than 100 ppm? Y 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, or expansion; and downstream from no other inlet? Y N N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? Y N N/A
6. Routed airflow to the carbon adsorber (if used) at all times? Y N N/A

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? Y N
2. Maintained rolling monthly total of perc consumption? Y N
3. Maintained leak detection inspection and repair reports for the following:
 - a. documentation of leaks repaired w/in 24 hrs? or; Y N N/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? Y N N/A
4. Maintained calibration data? (for applicable direct reading instruments) Y N N/A
5. Maintained exhaust duct monitoring data on perc concentrations? Y N N/A
6. Maintained startup/shutdown/malfunction plan? Y N
7. Maintained deviation reports? Y N N/A
Problem corrected? Y N N/A
8. Maintained compliance plan, if applicable? Y N N/A

ADDITIONAL SITE INFORMATION:

- | | Yes | NO |
|---|-------------------------------------|--------------------------|
| 1. Secondary Containment for: Dry Cleaning Machine & Storage area | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Waste area | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Spotting area Sealed | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

- | | | |
|---|-------------------------------------|-------------------------------------|
| 2. Disposal of Water from Water Separator using approved evaporator | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| or contracted Wastewater service | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? Y N

2. Has the facility maintained a leak log? Y N

3. Does the responsible official check the following areas for leaks?

Hose connections, fittings, couplings, and valves

Y N N/A

Muck cookers

Y N N/A

Door gaskets and seating

Y N N/A

Stills

Y N N/A

Filter gaskets and seating

Y N N/A

Exhaust dampers

Y N N/A

Pumps

Y N N/A

Diverter valves

Y N N/A

Solvent tanks and containers

Y N N/A

Cartridge filter housings

Y N N/A

Water separators

Y N N/A

4. Which method of detection is used by the responsible official?

Visual examination (condensed solvent on exterior surfaces)

Physical detection (airflow felt through gaskets)

Odor (noticeable perc odor)

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)

Halogen leak detector

If using direct-reading instrumentation, is the equipment: N/A

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)? Y N

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

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

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

Martin Roman

Responsible Official's Name
(Please Print)

M. Lieber

Inspector's Name (Please Print)

M. Lieber

Inspector's Signature

Martin Roman

Responsible Official's Signature

8/6/00

Date of Inspection

8/01

Approximate Date of Next Inspection

**TITLE V AIR QUALITY GENERAL PERMIT
INSPECTION SUMMARY REPORT**

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN:	TIME OUT:	AIRS ID#:	0990585
TYPE OF FACILITY:	Dry cleaning		
FACILITY NAME:	Unique Dry Cleaners		DATE: 6/6/00
FACILITY LOCATION:	2477 Forest Hill Blvd West Palm Beach 33406		
RESPONSIBLE OFFICIAL:	Martin Roman	PHONE NUMBER:	582 5863

- Based on the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).
- Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED

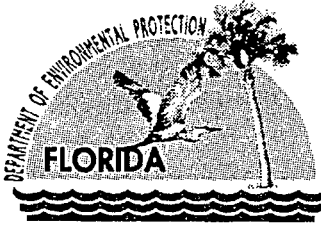
COMMENTS:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO

DATE OF NEXT INSPECTION: 6/01 (Approximate)

INSPECTION CONDUCTED BY: M Liebler (Please Print)

INSPECTOR'S SIGNATURE: M Liebler PHONE NUMBER: 355 3070



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

TO: Holder of Title V Air General Permit

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

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

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

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



(cut here)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

12/10/02

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID#0990585

UNIQUE DRY CLEANERS
MARTIN ROMAN
2677 FOREST HILL BLVD
WEST PALM BEACH FL
33406

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273

CERTIFIED MAIL

MS# 5510 MC Acct# 5521

Department of Environmental Protection
2600 Blair Stone Rd
Tallahassee FL 32399-2400



7001 0320 0001 7976 4603



Bureau of Air Monitoring
& Mobile Sources

FEB 10 2003

RECEIVED



UNIQ677 33406 2012 1702 32 02/07/03
RETURN TO SENDER
UNIQUE DRY CLEANERS
MOVED LEFT NO ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER

32399-52

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID#0990585

~~UNIQUE DRY CLEANERS
MARTIN ROMAN
2677 FOREST HILL BLVD
WEST PALM BEACH FL
33406~~

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery _____

C. Signature _____ Agent
 Addressee

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7001 0320 0001 7976 4603

PS Form 3811, March 2001


Domestic Mail Receipt

102595-01-M-1424

7001 0320 0001 7976 4603

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

OFFICIAL USE

Postage \$	 Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

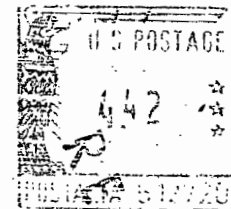
AIRS ID#0990585

UNIQUE DRY CLEANERS
MARTIN ROMAN
2677 FOREST HILL BLVD
WEST PALM BEACH FL
33406

PS Form 3800, January 2001 See Reverse for Instructions

CERTIFIED MAIL

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
TWIN TOWERS OFFICE BUILDING
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400



MS5510

5521 7001 0320 0001 7976 7543

Bureau of Air Monitoring
& Mobile Sources
RECEIVED
MAR 13 2003

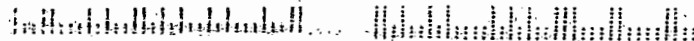
Do NOT Remove Label

AIRS ID#0990585

UNIQUE DRY CLEANERS
MARTIN ROMAN
2677 FOREST HILL BLVD
WEST PALM BEACH FL
33406

UNIQ677 334063015 1702 21 03/08/03
RETURN TO SENDER
UNIQUE DRY CLEANERS
MOVED LEFT NO ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER

334063015/2400



SENDER COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID#0990585

UNIQUE DRY CLEANERS
 MARTIN ROMAN
 2677 FOREST HILL BLVD
 WEST PALM BEACH FL
 33406

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
X

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured-Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number **7001 0320 0001 7976 7543**
 (Transfer from service label)

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only - No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Postmark Here

AIRS ID#0990585

UNIQUE DRY CLEANERS
 MARTIN ROMAN
 2677 FOREST HILL BLVD
 WEST PALM BEACH FL
 33406

7001 0320 0001 7976 7543

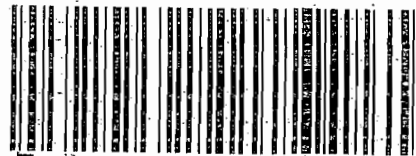
See Reverse for Instructions

5510

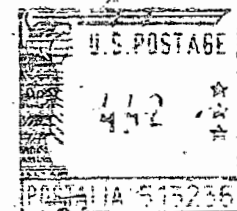
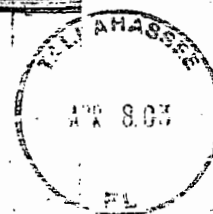
6521

CERTIFIED MAIL

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
TWIN TOWERS OFFICE BUILDING
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

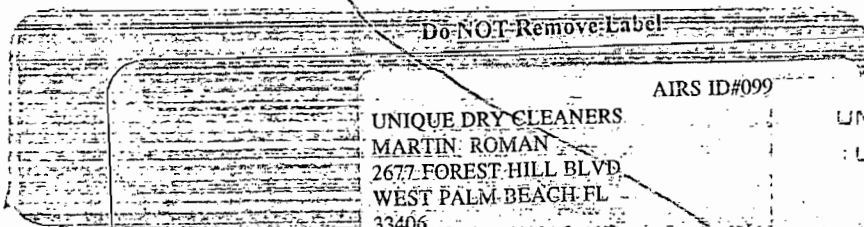


7000 1670 0013 3108 9015



MC5521

BAMMS/BCO
JOEY ROBERTS
5510



UNIQUE DRY CLEANERS
MARTIN ROMAN
2677 FOREST HILL BLVD
WEST PALM BEACH FL
33406

Bureau of Air Mail
& Mobile Services

RECEIVED
APR 14 2003

UNIQ677 334063081 1702 34 04 10/03
RETURN TO SENDER
UNIQUE DRY CLEANERS
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES
UNABLE TO FORWARD
RETURN TO SENDER

334063081 1702 34 04 10/03



SENDER COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: UNIQUE DRY CLEANERS MARTIN ROMAN 2677 FOREST HILL BLVD WEST PALM BEACH FL 33406		B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number <i>70001670001331089015</i> (Transfer from service label)		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, August 2001		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
7000 1670 0013 3108 9015	
Postage \$	<i>02</i> <i>3rd</i> <i>Jan 2000</i> Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	AIRS ID#0990585
Sent To	UNIQUE DRY CLEANERS MARTIN ROMAN 2677 FOREST HILL BLVD WEST PALM BEACH FL City, St 33406
PS Form 3800, May 2000 See Reverse for Instructions	



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

402490

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID # 0990585
UNIQUE DRY CLEANERS MARTIN ROMAN 2677 FOREST HILL BLVD WEST PALM BEACH FL 33406

1-11-01pd

RECEIVED
MAIL ROOM
JAN 11 0

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

413405 JAN22 2002

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID # 0990585
UNIQUE DRY CLEANERS MARTIN ROMAN 2677 FOREST HILL BLVD WEST PALM BEACH FL 33406

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273