PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

The send of the form. Send 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):				
Dryclean USA				
2. Site Name (For example, plant name or number):				
#11491				
3. Hazardous Waste Generator Identification Number:				
50730274				
4. Facility Location: Street Address: 1100 Technology Place # 110 City: W. Palm Bch County: W. Palm Bch Zip Code: 33-107				
5. Facility Identification Number (DEP Use ONLY - do not fill in):  0 990596-00/				
Responsible Official				
6. Name and Title of Responsible Official:				
Name: Robert Wenderott Title: Sr. Project Mgr.				
7. Responsible Official Mailing Address: Organization/Firm: Dry Clean USA Street Address: 771 W Dakland PK Blud Swite 201 City: Sunnie, FL County: Browned Zip Code: 33351				
City: Sunvise, FL County: Browned Zip Code: 33351				
8. Responsible Official Telephone Number: Telephone: (954) NUN - 1599  Ext 1018  Fax: 954) NUN-9878				
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: ( ) -				

DEP Form No. 62-213.900(2)

### **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 Status Control Device Required\* Date Control Device Installed From Manufacturer (circle one) . (circle one) (if already included at time of purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required RC/CA/None required Existing/New RC = refrigerated condenser CA = carbon adsorber \*CONTROL DEVICE KEY: 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 Control Device Required\* Date Control Device Installed Status From Manufacturer (if already included at time of (circle one) (circle one) purchase, write "SAME") RC/CA/None required Existing/New Existing/New RC/CA/None required Existing/New 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

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New store: New machine [ \_\_ ]

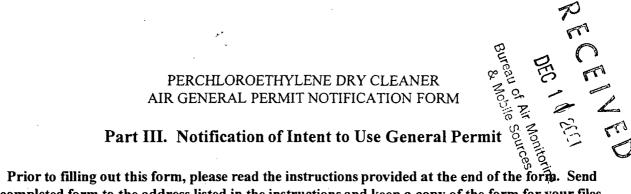
Unopened store [\_\_\_\_] (date of expected opening

Check why it is less than 12 months: New owner: [\_\_\_ ] Did not keep records: [\_\_\_ ]

3. What is the facility's source classification based on th Indicate with an "X". Select one classification only	· · · · · · · · · · · · · · · · · · ·			
Small Area Source				
Transfer only on-site (us	sed less than 140 gallons of perc per year) sed less than 200 gallons of perc per year) sed less than 140 gallons of perc per year)			
Large Area Source				
Transfer only on-site (us	sed 140 - 2,100 gallons of perc per year) sed 200 - 1,800 gallons of perc per year) sed 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".)				
Existing machines at small area source (NONE REQUIRED)	New machines at small area source Refrigerated condenser []			
Existing machines at large area source Carbon adsorber Refrigerated condenser	New machines at large area source Refrigerated condenser  []			
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 No such units on-site	OR 			
How many boilers do you have on-site?				
For each boiler, indicate its horsepower (HP) rating:				
What type of fuel do you use? propane No. 2 fuel oil No. 6 fuel oil	<u> </u>			
6. Equipment Monitoring and Recordkeeping Information	on			
Check all logs which are required to be kept on-site in a	ccordance with the requirements of this general permit:			
(a) Purchase receipts and solvent purchases/solvent additional additional control of the control	tion log []			
(b) Leak detection inspection and repair				
(c) Refrigerated condenser temperature monitoring				
(d) Carbon adsorber exhaust perc concentration monitor	ing []			
(e) Startup, shutdown, malfunction plan				

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7. Surrender	of Existing DEP Air Permit(s)			
Please indica	te 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.  Print name of responsible official				
Signatur	Emula 11/20/01 Date			



completed form to the address listed in the instructions and keep a copy of the form for your files.

Fac	Facility Name and Location			
1.				
	Drychean USA			
2.	Site Name (For example, plant name or number):			
	#11491			
3.	Hazardous Waste Generator Identification Number:			
	507302741			
4.	Facility Location: Street Address: 1100 Technology Place #110 City: W. Palm Bch County: W. Palm Bch Zip Code: 38-107			
5.	Facility Identification Number (DEP Use ONLY - do not fill in):			
	0990596-001			
	sponsible Official			
	Name and Title of Responsible Official:			
Nar	ne: Robert Wenderott Title: Sr. Project Mgr.			
7.	Responsible Official Mailing Address: Organization/Firm: Dryclean USA Street Address: 7771 W. Dakland PK Blyd Suite 201 City: Burnise, FL County: Broward Zip Code: 33351			
8.	Responsible Official Telephone Number: Telephone: (954) NUM - NS 99 Fax: AS4) NUM-9878  EXX 1018			
Fac	cility 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: ( ) -			

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## **Facility Information**

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

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

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

	, 1	1	
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")
MAR 2000	Existing/Ne	ROCA/None required	SAME
MAR 2000	Existing/Ne	w KCCA/None required	SAME.
·	Existing/Ne	w RC/CA/None required	
*CONTROL DEVICE KI	EY: RC = re	frigerated condenser CA	= carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY		
How many washers do yo	ou have on-site?		
How many dryers/reclaim	iers do you have o	n-site? [2]	•
unit. If the transfer machi 1993, it is a NEW unit (n permit). For each transfer	ne was purchased to units purchased	from the manufacturer between after September 22, 1993 are all , please provide the following in	
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")
MARCH 2000	Existing/New	RC/CA(None required)	Detroleam
MARCH 2000.	Existing/New	RC/CA/None required	Petro Ceeum
	Existing/New	RC/CA/None required	
*CONTROL DEVICE KI	EY: RC = re	frigerated condenser CA	= carbon adsorber
43 1 1 1 m	roethylene (perc) h	nave you used within the last 12 this in)	months?
(b) If less than 12 mon	ths, how many? [	] months	•
Check why it is les	s than 12 months:	New owner: [] Did not ke	ep records: []
•		New store: New machin	ne []
	•	Unopened store [ ] (date of	expected opening )

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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".)					
Existing machines at small area source (NONE REQUIRED)  []  New machines at small area source Refrigerated condenser  []					
Existing machines at large area source Carbon adsorber Refrigerated condenser  Refrigerated condenser					
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?					
For each boiler, indicate its horsepower (HP) rating: [/OD] []					
What type of fuel do you use?  [] propane  [] No. 2 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					

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7. Surrender o	of Existing DEP Air Permit(s)
Please indicat	e 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
this notifi statement maintain comply w I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in faction. 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 produce the information contained in this notification.  DEAL WENDEROLL  The of responsible official  Date

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# **IMPORTANT**

A facility is eligible to operate under a Title V air general permit for no more than five (5) years. Your facility is approaching the end of the five (5) year period for which it was entitled to operate with an air Title V general permit

- If you wish to **continue** your entitlement, please complete the enclosed notification form and return it to the Department of Environmental Protection at the address included with the notification form. A fee is not required with this notification submittal
  - ☐ If you are a new owner, please check this and return this form with your completed notification form.
  - If you are a **new RO** (Responsible Official), and/or your existing business has **moved** to a new location, please check this box and return this form with your completed notification form.
- If you do not wish to continue your eligibility, please disregard this notice.