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PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

Rureau of Air Monitorine & Mobile Sources

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.

_Fa	cility Name and Location	_
1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):	
	NEWYEN HO HWYNH, INC.	}
2.	Site Name (For example, plant name or number):]
	FLGER DE LIS]
3.	Hazardous Waste Generator Identification Number:] .
L.	a letter le	
4.	Facility Location: 15280 Jog Rd #C-Cl Street Address:	
	Street Address: City: De Fray Reach County: FJ Zip Code: 33433 Facility Identification Number (DEP Use ONLY - do not fill in): 0990599—0 sponsible Official	33446
5.	Facility Identification Number (DEP Use ONLY - do not fill in):	-mB
	<i>U110511-0</i>	43
	sponsible Official Name and Title of Responsible Official:	1
1	Title: OWNER	
7.	Responsible Official Mailing Address:	Ţ
	Organization/Firm: Street Address: Same as about	
	City: Zip Code:	
8.	Responsible Official Telephone Number:	
	Telephone: (561) 929 6320 Fax: ()	
Fac	cility Contact (If different from Responsible Official) Store Phone # 56/14	99-2727
9.	Name and Title of Facility Contact (For example, plant manager):	
		[
10.	Facility Contact Address:	
	Street Address:	
	City: Zip Code:	
11.	Facility Contact Telephone Number:	
	Telephone: () - Fax: () -	

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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") اەلىھ _5 HMB Existing New RC/CA/None required -Mew Existing/New RC/CA/None required Existing/New RC/CA/None required CA = carbon adsorber *CONTROL DEVICE KEY: RC = refrigerated condenser 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 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 Existing/New RC/CA/None required *CONTROL DEVICE KEY: CA = carbon adsorber RC = refrigerated condenser 2.(a) How much perchloroethylene (perc) have you used within the last 12 months? [175] 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 _____

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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 - 2,100 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 []			
(NONE REQUIRED) Refrigerated condenser Existing machines at large area source			
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: [43] 21/2 HP _WB			
What type of fuel do you use? [] propane [] No. 2 fuel oil [] No. 4 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			
(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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(e) Startup, shutdown, malfunction plan			

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7. Surrender of Existing DEP Air Permit(s)			
Please indicate with an "X" the appropriate selection:			
[] Thereby 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. LEN He Print name of responsible official			
Signature Solution Date			

NEWYEN HO HOYNH 15280 Jog Rd. #C-d. Delray Beach, Fl 33446.

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General Permits Section. Belreau OF Air Monitoring: Mobile Sources MS5510 Department of ENV'+ Protection 2600 Blair Stone Rd-Tallahusse , Fl 32399-2400.

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