

# Department of Environmental Protection

10/0337

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

Virginia B. Wetherell Secretary

August 23, 1996

Mr. Doug Joo Shin Exquisite Cleaners 8647-12 Little Road Newport Richey, Florida 34654

Dear Mr. Shin:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 16, 1996.

Please note that in November 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 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

cc: Louis Fernandez, Southwest District



## Department of **Environmental Protection**

leb Bush Governor

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

David B. Struhs Secretary

June 21, 2001

Mr. Dong Shin **Exquisite Cleaner** 8647-12 Little Road New Port Richey, Florida 34654

Dear Mr. Shin:

Thank you for your submittal of the Perchloroethylene Dry Cleaner Air General Permit Notification Form. The Department received your submittal on June 18.

In reviewing your submittal, it was noted that Exquisite Cleaner elected to surrender its existing Title V air general permit (AIRS ID 1010331). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

General Permits Section Bureau of Air Monitoring and Mobile Sources, MS 5510 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, Florida 32399-2400

If you no longer wish to operate as a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 850/921-9583.

Sincerely,

Sándra Bowman

Bureau of Air Monitoring

and Mobile Sources

SB/

Enclosure

cc: Mr. Bill Proses, Southwest District

"More Protection, Less Process"

Printed on recycled paper.

•	ID - 1010331
ρ	14
l Co	i) need to fill in date
	Control device installed
1.(c	) is not required to be
	marked
p. 15	·
4	New Small erea Source
	r.C. Should be marked
m = www.	CB
	CB_
	CB
	CB
	CB.
	CB
	CB.
	CB.

#### Perchloroethylene Dry Cleaning Facility Notification

#### **Facility Name and Location**

1.	Facility Owner/Company Name (Name of corporation, agency, or individual	ıal owner):
	SHIN, DONG 500 Site Name (For example, plant name or number):	
2.	•	
	EXQUISITE CLEAMERS	
3.	Hazardous Waste Generator Identification Number:	
	FLD. 9820773.15	
4.	FLD. 9820773.15 Facility Location: 8647-12 LITTLE RD.	
	City: County: PASCO Facility Identification Number (DEP: Use):	Zip Code: 34654
5.	Facility Identification Number (DEP Use):	
j.	10,1033   11	A STATE OF THE PARTY OF THE PAR
	Doministr Official	
	Responsible Official	
6.	Name and Title of Responsible Official:	
	SHIN, DONG 500 (OWNER) Responsible Official Mailing Address:	
7.	Responsible Official Mailing Address:	
	Organization/Firm: SUJ-12-CITTLE RD. Street Address:	
	City: New Port Richey  Responsible/Official Telephone Number:  County: PASCO  Responsible/Official Telephone Number:	Zip Code: 34654
8.	Responsible/Official Telephone Number:	
	Telephone: $9/3$ 841-0022 Fax: ( )	-
	Facility Contact (If different from Responsible Of	ficial)
9.	Name and Title of Facility Contact (For example, plant manager):	
10.	Facility Contact Address:	
	Street Address:	7. 6.1
	City: County:	Zip Code:
11.	Facility Contact Telephone Number:	
	Telephone: ( ) - Fax: ( )	-

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#### **Facility Information**

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

		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	lD	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit									
(1) w/ ref. condenser	1	5.3.96			T				
(2) w/ carbon adsorber									
(3) w/ no controls	` '								
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber						_			
(6) w/ no controls									
Dryer Unit									
(7) w/ ref. condenser									
(8) w/ carbon adsorber				_			_		
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser	(10) w/ ref. condenser								
(11) w/carbon adsorber					•				
(12) w/ no controls									
(b) Control devices are required, but not yet installed									
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.)  Existing small area source New small area source									
Existing large are	ea soi	urce []	Ne	w lar	rge area sour	ce []			

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

#### Surrender of Existing Air Permit(s)

No 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 at this notification. I hereby certify, based on information and belief formed after reasonable inquisitatements made in this notification are true, accurate and complete. Further, I agree to operate maintain the air pollutant emissions units and air pollution control equipment described above so comply with all terms and conditions of this general permit as set forth in Part II of this notification.	indicated in this notifica	_	peration of the permit number	
I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility activities this notification. I hereby certify, based on information and belief formed after reasonable inquivatatements made in this notification are true, accurate and complete. Further, I agree to operate maintain the air pollutant emissions units and air pollution control equipment described above s		ration of the f	acility indicated	d in
this notification. I hereby certify, based on information and belief formed after reasonable inquisitatements made in this notification are true, accurate and complete. Further, I agree to operate maintain the air pollutant emissions units and air pollution control equipment described above s	Responsi	ial Certificati	ion	
	hereby certify, based on this notification are true llutant emissions units a	ion and belief te and comple llution contro	formed after re te. Further, I a l equipment des	easonable inquiry, that agree to operate and scribed above so as to
I will promptly notify the Department of any changes to the information contained in this notification	or a p	to the inform	ation contained	d in this notification.

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

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# Perchloroethylene Dry Cleaning Facility Notification Bureau of Air Monitoring \*\*Mobile Sources\*\* Facility Name and Location\*\*



1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	SHIN. DONG JOO
2.	Site Name (For example, plant name or number):
	EXQUISITE CLEANERS
3.	Hazardous Waste Generator Identification Number:
	FLD. 982077315
4.	Facility Location: 8647-12 LITTLE RD.
	New poit Richey County PASCO ) Zip Code: 34654
5.	Facility Identification Number (DEP Use):

#### Responsible Official

	·
6.	Name and Title of Responsible Official:
	SHIN, DONG JOU (OWNER)
7.	Responsible Official Mailing Address:  Organization/Firm: Sulf-12-17716 RD.  Street Address:
	Organization/Firm: Della-12/17/10 RD
	Street Address:
	New Point Richey County: PASCO Zip Code: 34654
8.	Responsible/Official Telephone Number:
	Telephone: (913) 841-0022 Fax: ( ) -

#### Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Co	ontact (For example, plant man	ager):	
10. Facility Contact Address:		<del>.</del> .	
Street Address: City:	County:	Zip Code:	
11. Facility Contact Telephone N Telephone: ( )		ax: ( ) -	

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

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Bureau of Air Monitoring & Mobile Sources

#### **Facility Information**

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

		Date	Date		Date	Date		Date	Date
<b>.</b> .		Machine	Control		Machine	Control		Machine	Control
·		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit									
(1) w/ ref. condenser / 5.3.96 5-3-96									
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit		-							
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Oryer Unit						-			
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit		<u>-</u>							
(10) w/ ref. condenser									
(11) w/carbon adsorber								·	
(12) w/ no controls									
(b) Control devices are required, but not yet installed [									
B. What is the facility's sou (Indicate with an "X". S Existing small are	Selec	t one classifi	cation only.)		nitions found	1/	6) of	Part II?	
Existing large are	a soı	ırce []	Ne	w lar	ge area sour	ce []			

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

(Indicate with an "X".)	es pursuant to section (5) of Part I	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 emission to Rule 62-213.300, F.A.C. Verify that all steam a exemption criteria or that no such units exist on-signal.	nd hot water generating units on-	
All steam and hot water generating units on-site (I boiler HP or less), and (2) are fired exclusively by during which propane or fuel oil containing no mo	natural gas except for periods of	natural gas curtailment
All steam and hot water generating units exempt No such units on-site		
Equipment Monitoring	and Recordkeeping Information	on
Check all logs which are required to be kept on-sit		
(a) Purchase receipts and solvent purchases	· [_/	V1
(b) Leak detection inspection and repair		<u>·</u> <u>·</u> /
(c) Refrigerated condenser temperature monitoring		V
(d) Carbon adsorber exhaust perc concentration me	onitoring [	_1
(e) Instrument calibration	[	$\underline{\mathcal{V}}_{1}$
(f) Start-up, shutdown, malfunction plan	· [	$\underline{ u}_1$

DEP Form No. 62-213.900(2)

Effective: 6-25-96

#### Surrender of Existing Air Permit(s)

Please indicate	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)
Ľ)	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notific statements maintain i	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form.
I will proi	nptly notify the Department of any changes to the information contained in this notification.
Signature	1 Danam Cho Date 3-4-97

Effective: 6-25-96

AIRS ID#: 1010 331

MAH REVISED 10/10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT & Mobile Sources ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Exquisile	laners	DATE: 3/4/9 <b>7</b>
FACILITY LOCATION: 8647 L	the Rd 34654	
Annual Reporting Period: Supt /	1996 то	March 4 1997
Based on each term or condition of the Title V gen 62-213.300, Florida Administrative Code (F.A.C.)	_	^
If NO, complete the following:  #1. Term or condition of the general permit that h	as not been in continuous compliance du	uring the reporting period stated above:
Exact period of non-compliance: from	to	
Action(s) taken to achieve compliance:  Method used to demonstrate compliance:		
#2. Term or condition of the general permit that ha	as not been in continuous compliance du	uring the reporting period stated above:
Exact period of non-compliance: from	to	
Action(s) taken to achieve compliance:		
Method used to demonstrate compliance:		-
As the responsible official, I hereby certify, based of made in this notification are true, accurate and consupon rolling averages of purchase receipts, does not year for transfer or combination facilities.  RESPONSIBLE OFFICIAL:	mplete. Further, my annual consumption of exceed 2,100 gallons per year for dry	n of perchloroethylene solvent, based

<sup>\*</sup>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.

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# TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

MAR 1 0 1997

TYPE OF INSPECTION:	ANNUAL 🔀	COMPL	AINT/DISCOVERY	BREANSPECT	ON tering
TIME IN:	TIME OUT:		AIRS ID#:	10/0 33/	Durces
FACILITY NAME: EX QU	USITE CIFAA	VERS	<u>.</u>	DATE: 3 /4/4	77
<del>-</del>	8647 LITTLE	RA		DATE. O J.P/	<u></u>
FACILITY LOCATION.	7 0	CHEY	34654	<del></del>	<del></del>
RESPONSIBLE OFFICIAL:_	Cul		PHONE NUMBE	r: <u>8/3/841-0</u>	1022
17 💟	of the compliance requirement PRule 62-213.300, Florida Ac			acility is found to be in	
Based on the results of discrepancies were no	of the compliance requirement oted:	ts evaluated	during this inspection, the f	ollowing compliance	
COMPLIANCE REC	QUIREMENT/PROBLI	EM	FOLLOW-UP AC	TION REQUIREI	) ·
<u> </u>					
	•				
COMMENTS:		•			,
The Annual Compliance Certif	ication form has been properl	y certified a	nd submitted to the inspecto	or. YES N	——— ○□_
DATE OF NEXT INSPECTION	on:/h	ARCH		. / `	<u>.</u>
INSPECTION CONDUCTED	BY: MARGARE	(Approx (Please	NGRU		
INSPECTOR'S SIGNATURE	!: Nargaret Ca	Nease	Print)PHONE NUMBER	a: 813/744-61	00 x 12S
	V F	Page of	<u>/_</u> .	Rev	ised 10/96



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#### PERCHLOROETHYLENE DRY CLEANERS

MAR 1 0 1997

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

Bureau of Air Monitoring & Mobile Sources

COMPLI	ANCE INSP	ECTION C	HECKLIST	. &	Mobile Sources
TYPE OF INSPECTION: ANNUA	AL.	$\bowtie$	COMPLAIN	T/DISCOVER	
RE-INS	PECTION				
AIRS ID#: 10/033/ DATE: 3  FACILITY NAME: Exquisi  FACILITY LOCATION: 8647	14/97	TIME I	N:	_ TIME OUT	î:
FACILITY NAME: Exquisi	ti Cl	axer			
FACILITY LOCATION: $8647$	Little	Rd			
NPR	34	654			
PART I: NOTIFICATION					· 
(check appropriate box)		•		· · · · · ·	j
1. Existing facility notified DARM by 9/1/9	96				p
2. New facility notified DARM 30 days price	or to startup				ت ا
3. Facility failed to notify DARM to use get	neral permit				
PART II: CLASSIFICATION					
Facility indicated on notification form that (check appropriate box)	at it is:				
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)	dry- tran both	sser only, x< types, x<14	x<140 gal/yr <200 gal/yr	<b>X</b>	
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="" gal="" only,="" td="" transfer="" types,="" yr=""><td>dry- tran both</td><td>sfer only, 20 types, 140&lt;</td><td>rea source 140<x<2, 100;<br="">0<x<1,800 gal="" yr<br="">or after 12/9/91</x<1,800></x<2,></td><td>/yr</td><td></td></x<2,>	dry- tran both	sfer only, 20 types, 140<	rea source 140 <x<2, 100;<br="">0<x<1,800 gal="" yr<br="">or after 12/9/91</x<1,800></x<2,>	/yr	
This is a correct facility classification	XY	ПN			
If no, please check the appropriate classifica	ation:				
facility qualified for a general facility exceeds above limit			above general permit		
B. The total quantity of perchloroethylene () facility was gallons.	perc) purchas	ed within th	e preceding 12	months by this	dry 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?	XÝY	□и
2. Examining the containers for leakage?	XY	Пи
3. Closing and securing machine doors except during loading/unloading?	<b>∭</b> Ŷ	NO
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ДY	□и
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	ΩY	ON AMNA
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 refi (complete A below).	rigerated	condenser
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 minstalled prior to September 22, 1993	_	_
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	rigerated	condenser
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)		,
1. Equipped all machines with the appropriate vent controls?	ŹΥ	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	Ϋ́Y	ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	<b>É</b> Á	□N □N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	Ø(Y	ПИ
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	Q(Y	Ωи
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	<b>A</b> Y	ΩN

B. Has the responsible official of an existing large or new large area source also:		
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?		I
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON	ī
Is the temperature differential equal to or greater than 20° F?	DY DN	ſ
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?	חם אם	□N/A
Is the perc concentration equal to or less than 100 ppm?	OY ON	
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?	OY ON	
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON	□N/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON	□N/A
PART V: RECORDKEEPING REQUIREMENTS		
Has the responsible official: (check appropriate boxes)		
Has the responsible official:	MA ON	
Has the responsible official: (check appropriate boxes)	MA ON	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?	MO ADA	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?	NO AND	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:	אם אס	·
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days	ио уу	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	MA ON  MAY  MAY  MAY  MAY  MAY  MAY  MAY  MA	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)	йо ло мо лу мо лу мо луж	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?	NO AD NO AD NO AD NO AD NO AD	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?	MO AD MO AD MO AD MO AD MO AD MO AD MO AD	
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?	NO AND	Ø(N/A N/A
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?  Problem corrected?  8. Maintained compliance plan, if applicable?	MO ADA MO ADA	Ø(N/A N/A
Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instruments only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?  7. Maintained deviation reports?  Problem corrected?	MO ADA MO ADA	Ø(N/A N/A

2. Which method of detection is used by the responsible official?					
Visual examination (condensed	solvent	on exterior	surfaces)	Ø	
Physical detection (airflow felt the	hrough g	gaskets)		<b>X</b>	
Odor (noticeable perc odor)				. <b>9</b> (	
Use of direct-reading instrument	ation (F	ID/PID/calo	orimetric tubes)	- WA	
If using direct-reading instrum	entatio	n, is the eq	uipment:		
a. Capable of detecting	perc va	por concent	trations in a range of 0-500 ppm?	OY ON	
b. Calibrated against a (PID/FID only)?	□У □И				
c. Inspected for leaks a	OY ON				
d. Kept in a clean and secure area when not in use?				OY ON	
e. Verified for accuracy by use of duplicate samples (calorimetric only)?				OY ON	
3. Has the facility maintained a leak log?	•		· ·	□Y □N	
4. Does the responsible official check the	followi	ng areas for	r leaks?		
Hose connections, fittings, couplings, and valves	<b>\$</b> (Y	Πи	Muck cookers	ŊY □N	
Door gaskets and seating	фу	п□и	Stills	DY DN	
Filter gaskets and seating	фY	□N ,	Exhaust dampers	dy ON	
Pumps	ΠY	□N	Diverter valves	MO Y	
Solvent tanks and containers	ΠY	□и	Cartridge filter housings	ру ом	
Water separators		□и	:	<u> </u>	

Shin Dong Joo
Name of Responsible Official
Margaret Cangro
Inspector's Name (Please-Print)
Margaret Cangro
Inspector's Signature

Date of Inspection

Mach 98

Approximate Date of Next Inspection

#### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY
FACILITY NAME: Exquisite	99 TIME IN: 10:30 TIME OUT: 10:45
FACILITY LOCATION: 8647	Little Rd Richer
RESPONSIBLE OFFICIAL: Dong Joo.	Richey Shin phone: 727-841-0022
CONTACT NAME:	PHONE:
	K
PART I: NOTIFICATION	
(check appropriate box)	RE E M
1. New facility notified DARM 30 days prior to sta	artup 3.9.
2. Facility failed to notify DARM to use general pe	
	200
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)	☐ No notification form ☐ Drop store/out of business/petroleum
Facility indicated on notification form that it is:	
Facility indicated on notification form that it is:  (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr	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
Facility indicated on notification form that it is:  (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  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	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 (constructed on or after 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
Facility indicated on notification form that it is:  (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  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)  5. This is a correct facility classification  If no, please check the appropriate classific  ☐ facility qualified for a ge ☐ facility exceeds above line	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 (constructed on or after 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 on or after 12/9/91)  Y □N □Can not determine

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN WN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY DN MIN/A 2. Examining the containers for leakage? DY DN 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DY DN DN/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DYNA 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) 1. Equipped all machines with the appropriate vent controls? DN ON/A 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/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY ON DX/A condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

Ė				·
B.	Has the responsible official of an existing large or new large area source also:			
١,	Measured and recorded the exhaust temperature on the outlet side of the condenser located			
1.	•	_	_	
١	on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	$\Box$ Y	$\square N$	
2	Measured and recorded the washer exhaust temperature at the condenser			
١~.	•			
	inlet and outlet weekly?	LIY	ЦN	□N/A
	Is the terrographic differential equal to an expectant have 20° F2			DN//
	Is the temperature differential equal to or greater than 20° F?	ЦY	UN	□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,			
		ΠV		□N/A
ļ	if machines are equipped with a carbon adsorber?	U 1	ПN	UIV/A
	Is the perc concentration equal to or less than 100 ppm?	$\Box v$	ΠN	□N/A
	is the perc concentration equal to of less than 500 ppin:	<b>—</b> .	<b>—</b> ; 1	UIV/A
١.				
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,			
İ	or expansion; is at least 2 duct diagreters upstream from any bend, contraction,			
	or expansion; and downstream from no other inlet?	ΠV	□N!	□N/A
	or expansion, and downstream from no other met?	u ı	ПN	UIV/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			ľ
	condenser coils?	$\Box$ Y	$\square N$	□N/A
			• •	
_				-Size
6.	Routed airflow to the carbon adsorber (if used) at all times?	ЦY	UИ	□N/A
_				

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	XY DN
2. Maintained rolling monthly total of perc consumption?	XY DN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	OY 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?	OY ON PM/A
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN DN/A
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DN/A
6. Maintained startup/shutdown/malfunction plan?	MY ON
7. Maintained deviation reports?	DY ON GNA
Problem corrected?	DY ON ON/A
8. Maintained compliance plan, if applicable?	DY ON BN/A

PART VI: LEAK DETECTION AND REPAIRS						
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
insp	ection?			<b>₽</b> Y □N		
2. Has	the facility maintained a leak log?			V DN		
3. Doe						
	Hose connections, fittings, couplings, and valves	ØY ON ON/A	Muck cookers	try on on/a		
	Door gaskets and seating	MY ON ON/A	Stills	CENY ON ON/A		
	Filter gaskets and seating	Y ON ON/A	Exhaust dampers	DY ON ON/A		
	Pumps	12Y ON ON/A	Diverter valves	d√ on on/a		
	Solvent tanks and containers	ORY ON ON/A	Cartridge filter housings	ON □N/A		
	Water separators	DY ON ON/A				
4. Whi	ch method of detection is used by th	ne responsible official?				
Visual examination (condensed solvent on exterior surfaces)				<b>G</b> ⁄		
	₫ /					
	₽⁄					
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)						
Halogen leak detector						
If using direct-reading instrumentation, is the equipment:				<b>™</b> /A		
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?			a range of 0-500 ppm?	DY DN		
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?			OY ON			
	e. Verified for accuracy	by use of duplicate samples	s (calorimetric only)?	□Y □N		
·						

MARGARET CANGRO	3-2-99
Inspector's Name (Please Print)	Date of Inspection
Margard Carero Inspector's Signature	MARCH 2000 Approximate Date of Next Inspection

Acc

AIRS ID#: 10/033/

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Exquisite Cleaners	DATE: 3/2/99
FACILITY LOCATION: 8647 Little Rd	· •
New Port Richey, Fr 34654	
Annual Reporting Period: 3-5-1998 TO	3-2- 1999
Based on each term or condition of the Title V general air permit, my facility has remained in complian 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous compliance during the rep	orting period stated above:
Exact period of non-compliance: from	No. Co.
Action(s) taken to achieve compliance:	3, L
Method used to demonstrate compliance:	The Ison Co
#2. Term or condition of the general permit that has not been in continuous compliance during the rep	orting period stated above:
Exact period of non-compliance: fromtoto	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and belief formed after reasonable in made in this notification are true, accurate and complete. Further, my annual consumption of perchloupon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facily year for transfer or combination facilities.	roethylene solvent, based
RESPONSIBLE OFFICIAL: Dorg Too Shin Signature  Name (Please Print)  Signature	$\frac{3\sqrt{2/99}}{\text{Date}}$

<sup>\*</sup>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.

#### PERCHLOROETHYLENE DRY CLEANERS

#### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

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ANNUAL

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COMPLAINT/DISCOVERY MARCO 9 1998

RE-INSPECTIO	N	<u> </u>			& Mobile	ir Monitering
AIRS ID#: 10/033/ DATE: 3/4/9	98	TIME II	v: 11:45	_ TIME O	ut:/2//	Sources
FACILITY NAME: Exquisite CC	eakes	2				
FACILITY NAME: Exquisite CC FACILITY LOCATION: 8647 LE	Hlei	Pd				
New Port	Rich	Q-i/_	3465	4		
responsible official: Dong Too S	hin		PHONE: 🖄	3/841	002	2_
CONTACT NAME:		<u> </u>	PHONE:		,	
PART I: NOTIFICATION						
(check appropriate box)						
New facility notified DARM 30 days prior to sta	-				. 1	
Facility failed to notify DARM to use general pe	rmit		<u> </u>			
PART II: CLASSIFICATION						
Facility indicated on notification form that it is: (check appropriate box) A.			☐ No notification ☐ Drop store		ess/petrole	eum
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-c transfer both typ	lry only, only, $x < 1$ only, $x < 1$	rea source x < 140 gal/yr < 200 gal/yr 40 gal/yr or after 12/9/93	) <b>)</b> (1)		
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-c transfer both typ	iry only, only, 20 oes, 140	rea source $140 \le x \le 2,10$ $0 \le x \le 1,800$ gal or after $12/9/9$ ?	gal/yr /yr		
5. This is a correct facility classification	ŹΫ́	ПN	□Can not de	termine		
If no, please check the appropriate classific    facility qualified for a ge facility exceeds above lin	neral peri					
B. The total quantity of perchloroethylene (perc) per facility was $OS$ gallons.	urchased	within th	e preceding 12	months by t	his dry cle	aning

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

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 עם	-
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON	□N/A
	Is the temperature differential equal to or greater than 20° F?	OY ON	□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?	OY ON	□N/A
i	Is the perc concentration equal to or less than 100 ppm?	OY ON	□N/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction,		
	or expansion; and downstream from no other inlet?	OY ON	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	j <b>a</b> & □μ
2. Maintained rolling monthly averages of perc consumption?	D√ □N
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	AVAC NC YES
<ul> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul>	OY ON DAVIA
4. Maintained calibration data? (for applicable direct reading instruments)	באאם אם צם Alwa
5. Maintained exhaust duct monitoring data on perc concentrations?	אוענאַ אם צם אם א
6. Maintained startup/shutdown/malfunction plan?	₹ <b>₫</b> Ý □N
7. Maintained deviation reports?	A/אַלָּל אם צם
Problem corrected?	□Y □N ┺Ñ/A
8. Maintained compliance plan, if applicable?	AIND NO YO

ADTAIL TEAM DETECTION AND	DEDATE		
ART VI: LEAK DETECTION AND		hi walda lala da ai	
1. Does the responsible official conduct	a weekly (for small sources	s, bi-weekly) leak detection a	5
inspection?  2. Has the facility maintained a leak log	n		AA ON
Has the facility maintained a leak log     Does the responsible official check th		7	DI UN
•	e following areas for leaks:	<i>(</i> - V	
Hose connections, fittings, couplings, and valves	AND NO NA	Muck cookers	DAX ON ONIA
Door gaskets and seating	MY ON ON/A	Stills	ASY ON ONIA
Filter gaskets and seating	ANO NO YE	Exhaust dampers	AINO NO YA
Pumps	A/NO NO YE	Diverter valves	AINO NO YA
Solvent tanks and containers	AND ND YX	Cartridge filter housings	AVNO NO YE
Water separators	אומם מם עצל		
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surface	s)	×
Physical detection (airflow felt t	hrough gaskets)		A A
Odor (noticeable perc odor)			À
Use of direct-reading instrumen	tation (FID/PID/calorimetr	ric tubes)	
Halogen leak detector			
If using direct-reading ins	trumentation, is the equip	oment:	DE VIA
a. Capable of detecting	g perc vapor concentrations	s in a range of 0-500 ppm?	OY ON
	standard gas prior to and	after each use	
(PID/FID only)?			OY ON
•	and obvious signs of wear o	•	DY DN
d. Kept in a clean and	secure area when not in us	se?	OY ON
e. Verified for accurac	y by use of duplicate sampl	les (calorimetric only)?	DY DN
· 			
^			

MAKGARET CANGRO	3/4/98
Inspector's Name (Please Print)	Date of Inspection
Magnet Cangro  Inspector's Signature	May 98 Approximate Date of Next Inspection

#### **Best Available Copy**

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#1010331 SHIN DOUG JOO SHIN DONG JOO 8647-12 LITTLE ROAD **NEW PORT RICHEY FL 34654** Do NOT Remove Label \_\_\_\_19\_*98* то Annual Reporting Period: Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

<sup>\*</sup>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.

# This portion must be attached to remittance for proper handling $\sqrt{\ 300644}$

Pleas 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** 

MAIL ROOM

JAN 22 93

Do NOT Remove Label

AIRS ID#1010331

SHIN DOUG JOO SHIN DONG JOO 8647-12 LITTLE ROAD NEW PORT RICHEY FL 34654 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

#### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION		COMPLAINT/DISCOV	VERY (	
AIRS ID#: 1010331 D  FACILITY NAME: EXP  FACILITY LOCATION:	usite Cla 8647 Lit	eaners tle R	l L		
RESPONSIBLE OFFICIAL : CONTACT NAME:	Song Joo Shir			41-002	1 <u>2</u>
PART I: NOTIFICATION					
(check appropriate box)  1. New facility notified DARM 3  2. Facility failed to notify DARM	•				0
PART II: CLASSIFICATION					
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr	e 🛭 2. N r dry-t trans	New small are to-dry only, x sfer only, x <	x < 140 gal/yr 200 gal/yr	siness/petrole	eum
(constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility class If no, please check the a facility	e 4. N 00 gal/yr dry-t gal/yr trans al/yr both (consessification ppropriate classification: y qualified for a general p	New large are to-dry only, 1 sfer only, 200 types, 140 structed on o	r after 12/9/91)  ea source  140 \( \leq \times \leq 2,100 \) gal/yr  0 \( \leq \leq 1,800 \) gal/yr  or after 12/9/91)  Can not determine  Therefore a general permit	Air Monitoring ile Sources	L   V   L   V   L   V   C   V

#### PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN WN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY DN MINA 2. Examining the containers for leakage? DN YOU Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at DY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DXV/A beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 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/bi-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?

#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0354629

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

#### **TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

AIRS ID # 1010331 **EXQUISITE CLEANERS** 

SHIN DONG JOO 8647-12 LITTLE ROAD

**NEW PORT RICHEY FL 34654** 

\$50.00

Sources

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: B1
Fund: 20-2-035001
Obj.: 002273

B. Has t	he responsible official of an existing large or new large area source also:			<u> </u>
II .	ared and recorded the exhaust temperature on the outlet side of the condenser located y-to-dry, reclaimer, and dryer machines on a weekly basis?	ΟY	ΠN	
ll .	ared and recorded the washer exhaust temperature at the condenser and outlet weekly?	ΩY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	ПY	ПN	□N/A
at the	end of the final drying cycle while the machine is venting to the adsorber,			
if mad	hines are equipped with a carbon adsorber?	ПY	ПИ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	$\square$ N	□N/A
perc c	ed that the sampling port on the carbon adsorber exhaust for measuring oncentrations is at least 8 duct diameters downstream of any bend, contraction,			
II *	vansion; is at least 2 duct diameters upstream from any bend, contraction, vansion; and downstream from no other inlet?	ΠY	ΠN	□N/A
	ped transfer machines (dryers, reclaimers, and washers) with individual nser coils?	ΩY	□и	□N/A
6. Route	d airflow to the carbon adsorber (if used) at all times?	ΠY	ΠИ	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	YY ON
2. Maintained rolling monthly total of perc consumption?	XXY DN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	OY 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?	OY ON PM/A
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN DANIA
5. Maintained exhaust duct monitoring data on perc concentrations?	DY ON DAY/A
6. Maintained startup/shutdown/malfunction plan?	MY ON
7. Maintained deviation reports?	DY ON 1911/A.
Problem corrected?	DY ON ON/A
8. Maintained compliance plan, if applicable?	DY ON BAYA

PA	ART VI: LEAK DETECTION AND R	EPAIRS		
1.	Does the responsible official conduct a v	weekly (for small sources,	bi-weekly) leak detection as	ıd repair
	inspection?			ØY □N
2.	Has the facility maintained a leak log?			MY ON
3.	Does the responsible official check the f	following areas for leaks?		
	Hose connections, fittings, couplings, and valves	ØY □N □N/A	Muck cookers	dry on on/a
	Door gaskets and seating	MY ON ON/A	Stills	CHY ON ON/A
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	QY ON ON/A
	Pumps	121Y ON ON/A	Diverter valves	dy on on/a
	Solvent tanks and containers	CRY ON ON/A	Cartridge filter housings	□Y □N □N/A
	Water separators	DAY ON ON/A		
4.	Which method of detection is used by the	e responsible official?		
	Visual examination (condensed so	lvent on exterior surfaces)		CP _
	Physical detection (airflow felt thr	ough gaskets)		<b>(1)</b>
	Odor (noticeable perc odor)			₽⁄
	Use of direct-reading instrumentat	ion (FID/PID/calorimetric	tubes)	
	Halogen leak detector		·	
	If using direct-reading instru	mentation, is the equipm	ient:	<b>™</b> /A
	a. Capable of detecting p	erc vapor concentrations i	п a range of 0-500 ppm?	NO Y
	<ul><li>b. Calibrated against a st (PID/FID only)?</li></ul>	andard gas prior to and aft	er each use	OY ON
	c. Inspected for leaks and	d obvious signs of wear or	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 sample	es (calorimetric only)?	OY ON

MARGARET CANGRO	3-2-99
Inspector's Name (Please Print)	Date of Inspection
Margard Carego	MARCH 2000
Inspector's Signature	Approximate Date of Next Inspection

#### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	COMPLIANCE INS	PECTION C	HECKLIST	
TYPE OF INSPECTION:	ANNUAL		HECKLIST COMPLAINT/DISCOVI	
	RE-INSPECTION	. /		30 P P P
				le Si N
AIRS ID#: 1010331 D	ATE: 3/15/00	TIME II	N: 2:25 TIME O	UT: (4 )
FACILITY NAME: Ex qu	usite I	laren	)	
FACILITY LOCATION:				
	kw Port 1	,		
RESPONSIBLE OFFICIAL :	Dong Joo Shui		PHONE: 727/841	-0022
CONTACT NAME:	· · · · · · · · · · · · · · · · · · ·		PHONE:	
PART I: NOTIFICATION				
(check appropriate box)				
1. New facility notified DARM 3	0 days prior to startup			
2. Facility failed to notify DARM	l to use general permit			<u> </u>
PART II: CLASSIFICATION				
Facility indicated on notification	n form that it is:		□ No notification form	
	n form that it is:		☐ No notification form☐ Drop store/out of busi	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source	·	New small a	Drop store/out of busi	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr	e 🗅 2.	y-to-dry only,	Drop store/out of business source x < 140 gal/yr	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	e 🛭 2. dr tra	y-to-dry only, insfer only, x	Drop store/out of busing preasource x < 140 gal/yr < 200 gal/yr	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr	e 🛭 2. dr tra bo	y-to-dry only, ansfer only, x oth types, x <	Drop store/out of busing preasource x < 140 gal/yr < 200 gal/yr	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	e 🗆 2. dr tra bo (co	y-to-dry only, insfer only, x oth types, x < onstructed on	Drop store/out of business  rea source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,16	e 2. dr tra bo (co	y-to-dry only, insfer only, x oth types, x < onstructed on  New large a y-to-dry only,	□ Drop store/out of business source  x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)  rea source  140 ≤ x ≤ 2,100 gal/yr	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800	e 2. dr tra bo (co	y-to-dry only, ansfer only, x oth types, x < onstructed on  New large a y-to-dry only, ansfer only, 20	Drop store/out of business source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $ 40 \text{ gal/yr} $ or after $ 12/9/91 $ $ 140 \le x \le 2,100 \text{ gal/yr} $ $ 140 \le x \le 1,800 \text{ gal/yr} $	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,16	2. dr tra bo (co	y-to-dry only, ansfer only, x oth types, x < onstructed on  New large a y-to-dry only, ansfer only, 20 oth types, 140	□ Drop store/out of business  rea source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)  rea source 140 ≤ x ≤ 2,100 gal/yr	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 gal/yr	e 2. dr tra bo (co	y-to-dry only, ansfer only, x oth types, x < onstructed on New large a y-to-dry only, ansfer only, 20 onstructed on	Drop store/out of business source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $  40 \text{ gal/yr}$ or after $  12/9/91 \rangle$ $  140 \leq x \leq 2,100 \text{ gal/yr}$ $  140 \leq x \leq 1,800 \text{ gal/yr}$ $  1,800 \text{ gal/yr}$ $  1,800 \text{ gal/yr}$	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)	dr. tra bo (co. 2. 4. 00 gal/yr gal/yr tra l/yr bo (co. 3. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	y-to-dry only, ansfer only, x oth types, x < onstructed on  New large a y-to-dry only, ansfer only, 20 oth types, 140 onstructed on	Drop store/out of business source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $  40 \text{ gal/yr}$ or after $  12/9/91 \rangle$ $  140 \le x \le 2,100 \text{ gal/yr}$ $  160 \le x \le 1,800 \text{ gal/yr}$ $  170 \le x \le 1,800 \text{ gal/yr}$ or after $  12/9/91 \rangle$	ness/petroleum
Facility indicated on notification (check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,10 transfer only, 200 ≤ x ≤ 1,800 both types, 140 ≤ x ≤ 1,800 ga (constructed before 12/9/91)  5. This is a correct facility class If no, please check the applications.	2. dry tra bo (co	y-to-dry only, ansfer only, x oth types, x < onstructed on  New large a y-to-dry only, ansfer only, 20 onstructed on  Y	Drop store/out of business source $x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $  40 \text{ gal/yr} $ or after $  12/9/91 \rangle$ rea source $  140 \le x \le 2,100 \text{ gal/yr} $ $\le x \le 1,800 \text{ gal/yr}$ or after $  12/9/91 \rangle$ DCan not determine	ness/petroleum

# Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

#### PART IV: PROCESS VENT CONTROLS

#### In Part II-A:

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

If classification 2 has been checked, the machine should be equipped with a 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/bi-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?

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

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official:					
(check appropriate boxes)					
1. Maintained receipts for perc purchased?	אם אַל				
2. Maintained rolling monthly total of perc consumption?	ру́ ои				
3. Maintained leak detection inspection and repair reports for the following:					
a. documentation of leaks repaired w/in 24 hrs? or;	AY ON ON/A				
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	XY ON ON/A				
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN MONA				
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN MAN'A				
6. Maintained startup/shutdown/malfunction plan?	XY ON				
7. Maintained deviation reports?	DY DN BONA.				
Problem corrected?	OY ON ÆN/A				
8. Maintained compliance plan, if applicable?	OY ON DÂN(A				

#### 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, AY ON ON/A ZÍY ON ON/A couplings, and valves Muck cookers DÝ ON ON/A ZY ON ON/A Door gaskets and seating Stills ZY ON ON/A DY ON ON/A Filter gaskets and seating Exhaust dampers ZY ON ON/A ZÝ ON ON/A Pumps Diverter valves ZY ON ON/A Solvent tanks and containers Cartridge filter housings DY ON ON/A ZY ON ON/A Water separators 4. Which method of detection is used by the responsible official? Visual examination (condensed solvent on exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) D. Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector EN/A If using direct-reading instrumentation, is the equipment: DY DN 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 DY DN (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a clean and secure area when not in use? DY DN DY DN

Inspector's Name (Please Print)

Manguet Cangro

Tospector's Signature

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

K de

Revised 10/10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM $_{\wp}$

FACILITY NAME: Exquisite Cleaners	Бате 3 S400
FACILITY LOCATION: 8647 Little Rd	Source
New Port Richey, Fr 34654	Jring
Annual Reporting Period: 3-3-199 TO	3-15-2000
Based on each term or condition of the Title V general air permit, my facility has remained in cor 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	N* /
If NO, complete the following:	\
#1. Term or condition of the general permit that has not been in continuous compliance during the	ne reporting period stated above:
Exact period of non-compliance: fromto	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	
#2. Term or condition of the general permit that has not been in continuous compliance during the	he reporting period stated above:
Exact period of non-compliance: from	
Action(s) taken to achieve compliance:	
Method used to demonstrate compliance:	·
As the responsible official, I hereby certify, based on information and belief formed after reasonal made in this notification are true, accurate and complete. Further, my annual consumption of perupon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry year for transfer or combination facilities.	erchloroethylene solvent, based
RESPONSIBLE OFFICIAL: Down Joo Shin / Mang (Please Print) Signature	9 15 100 e Date

<sup>\*</sup>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.



#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

400647

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

1000

AIRS ID # 1010331

EXQUISITE CLEANERS
SHIN DONG JOO
8647-12 LITTLE ROAD
NEW PORT RICHEY FL 34654

MAIL R

FOR GOVERNMENT USE ONLY Org.: 37550101000 ED A10 Fund: 20-2-035001

Obj.: 002273

Excrinite Dry Cleaners 8547-12 Little Rd. New Port Richey, FL. 34654



TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

SENT of the feture address	TE THIS SECTION ON DELIVERY				
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Received by (Please Print Clearly)  B. Date of Delivery  C. Signature  Addressee  D. Is delivery aggress different room fem 12 Dyes				
Article Addressed to:	D. Is delivery address different from Yen ? Yes If YES, enter delivery address below:				
AIRS ID # 1010331001AG	JUN 1 1 200  Bureau of Air Monitoring				
CQUISITE CLEANERS 47-12 LITTLE ROAD EW PORT RICHEY FL 34654	3. Service Type & Mobile Sources Certified Mail				
2210662978	4. Restricted Delivery? (Extra Fee) ☐ Yes				
Article Number (Copy from service label)					
PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789					

#### Z 210 662 978

US Postal Service
Receipt for Certified Mail

10 AIRS ID # 1010331001AG SHIN DONG JOO EXQUISITE CLEANERS 8647-12 LITTLE ROAD NEW PORT RICHEY FL 34654

		_
	Postage	\$
	Certified Fee	
	Special Delivery Fee	
	Restricted Delivery Fee	
1995	Return Receipt Showing to Whom & Date Delivered	
, April 1995	Return Receipt Showing to Whom, Date, & Addressee's Address	
800,	TOTAL Postage & Fees	\$
PS Form <b>3800</b>	Postmark or Date	

#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

#### **TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

AIRS ID # 1010331

**EXQUISITE CLEANERS** SHIN DONG JOO 8647-12 LITTLE ROAD NEW PORT RICHEY FL 34654

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001

Obj.: 002273

#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

RECEIVED MAIL ROOM **TOTAL AMOUNT DUE: \$50.00** 

JAN 17 97

Do NOT Remove Label

AIRS ID# 1010331

EXQUISITE CLEANERS SHIN DONG JOO 8647-12 LITTLE ROAD NEW PORT RICHEY FL 34654 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273