

Department of Environmental Protection

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

Colleen M. Castille Secretary

August 9, 2006

Ms. Daniel A. Benoit Carriage Trade, Incorporated 38225 12th Avenue Zephyrhills, Florida 33542

Re: Facility No.: 1010332-003

Dear Mr. Benoit:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on July 5, 2006.

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

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

Title V General Permits Office Bureau of Air Monitoring and Mobile Sources MS 5510 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, FL 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,

Joseph Kahn, Chief

Bureau of Air Monitoring and Mobile Sources

JK/jw

cc: Mr. Christopher Bradley, SouthWest District

"More Protection, Less Process"

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PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files. 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	n, agency, or individual owner):
CArriage Trade.	/NC.
2. Site Name (For example, plant name or number):	
3. Hazardous Waste Generator Identification Number:	7 > 000
V FLCESQG (IN 2004 WAS)	FLD 482099897 ;
4. Facility Location: 38225 12 th	1
Street Address: 38775 /2 5/	tre.
City: Lephyrhols County: PA	7500 Zip Code: 33542
5. Pacility Identification Number (DEP Use ONIX do	or fill in) the desired and the second
Responsible Official	
6. Name and Title of Responsible Official:	
Name: DANIEL A. BENOIT	Title: OWNER
7. Responsible Official Mailing Address:	
Organization/Firm: Some AS ABOUG	Ì
Street Address:	7'- Codo
City: County:	Zip Code:
8. Responsible Official Telephone Number:	
Telephone: (813) 788 - 9808	Fax: (352) 588-0914
<u></u>	
Facility Contact (If different from Responsible Official)	
9. Name and Title of Facility Contact (For example, plan	
, , , , , , , , , , , , , , , , , , , ,	
	`
10. Facility Contact Address:	·
Street Address:	
City: County:	Zip Code:
11. Facility Contact Telephone Number:	Fax: () -
Telephone: () -	rax: l
,	

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility Information			
1.(a) DRY-TO-DRY M	ACHINES ONLY	1	
How many dry-to-dry ma	chines do you have	on-site?	
For each dry-to-dry macl	nine on-site, please p	rovide the following information	on:
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")
07/05	Existing New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	-
*CONTROL DEVICE K	EY: RC = refr	igerated condenser CA =	carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY		
How many washers do yo	ou have on-site?		
How many dryers/reclain	ners do you have on-	site? []	
unit. If the transfer maching 1993, it is a NEW unit (r	ine was purchased fr to units purchased af	om the manufacturer between I	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, owed to operate under this general formation:
Date Initially Purchased From Manufacturer	-	Control Device Required* circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/New R	C/CA/None required	
	Existing/New R	C/CA/None required	
	Existing/New R	C/CA/None required	
*CONTROL DEVICE KI	EY: RC = refri	gerated condenser CA =	carbon adsorber
2.(a) How much perchlor	oethylene (perc) hav	ve you used within the last 12 m	nonths?
[60] gallor	ns (You must fill thi	s in)	
(b) If less than 12 mon	ths, how many? [] months	
Check why it is les	s than 12 months: N	lew owner: [] Did not kee	p records: []
	N	lew store: New machine	:

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Unopened store [____] (date of expected opening ___

3. What is the facility's source classification ba Indicate with an "X". Select one classification	used on the definitions found in section (3) of Part II?
Small Area Source	\triangle
Dry-to-dry machines only on Transfer only on-site Both machine types on-site	(used less than 140 gallons of perc per year) (used less than 200 gallons of perc per year) (used less than 140 gallons of perc per year)
Large Area Source]
Dry-to-dry machines only or Transfer only on-site Both machine types on-site	(used 140 - 2,100 gallons of perc per year) (used 200 - 1,800 gallons of perc per year) (used 140 - 1,800 gallons of perc per year)
4. What control technology is required on mac (Indicate with an "X".)	chines pursuant to section (5) of Part II of this notification form?
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 []
	sions units shall not be eligible to use the general permit pursuant a and hot water generating units on-site meet the following on-site (see attached memo for the criteria).
All steam and hot water generating units exem	npt [] OR
How many boilers do you have on-site?	<u>2</u> 1
For each boiler, indicate its horsepower (HP)	rating: (15) (15)
No No	pane [] natural gas 2 fuel oil [] No. 4 fuel oil 6 fuel oil [] Other (please list)
6. Equipment Monitoring and Recordkeeping	Information
Check all logs which are required to be kept of	on-site in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases/so	lvent addition log
(b) Leak detection inspection and repair	oring in monitoring
(c) Refrigerated condenser temperature monit	oring [X]
(d) Carbon adsorber exhaust perc concentration	on monitoring [X]
(e) Startup, shutdown, malfunction plan	ι Χ Ι

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Please indica	
. Italy maior	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
ட	No DEP air permits currently exist for the operation of the facility indicated in this notification form.
Responsible	Official Certification
this notij	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in
maintain comply t	ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the is 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. Somptly notify the Department of any changes to the information contained in this notification.

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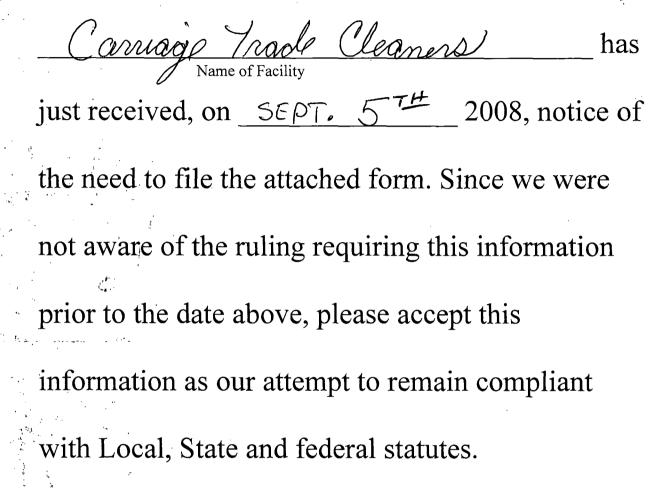
PERCHLOROETHYLENE (Perc) Dry Cleaning Notification to EPA & FLDEP

Each owner or operator of a Perc dry cleaning facility shall submit to the EPA and FLDEP by registered mail on or before July 28, 2008 a notification of compliance status providing the following information and signed by a responsible official who shall certify its accuracy:

The name and address of the owner or operator; DUNICL BLNOIT Name of the owner or operator of the dry cleaning facility 34600 Blanton Road Mailing address of the owner or operator of the dry cleaning facility	Is the Perc dry cleaning machine located in a building with a residence(s), even if the residence is vacant at the time of this notification? Check one: No Yes Is the Perc dry cleaning machine located in a building with no other tenants, leased space, or owner occupants? Check one: No Yes
Mailing address line 2 Dudl City FC 33563 City State Zip Code The address (that is, physical location) of the dry cleaning facility; Name of the dry cleaning facility 38225 12 H GVL Address of the dry-cleaning facility (physical location)	Is the Perc dry cleaning operation a major or area source? Major Source: Perc consumption is greater than 2100 gallons/year Area Source: Perc consumption is 2100 gallons/year or below The yearly Perc solvent consumption: (How much Perc did you buy over the last 12 months?) Is the Perc dry cleaning operation in compliance with each applicable requirement of the Federal Standard of 40 CFR §63.322? Check one: No Yes
Address line 2 Z-Ghyrh: M FL 33542 State Zip Code	All information contained in this statement is accurate and true. Signature of the Responsible Official for the dry cleaning facility
By Registered Mail Send to: USEPA Region 4 And to: Air Toxics and Monitoring Branch 61 Forsyth Street SW Atlanta, Georgia 30303-8960	Florida Department of Environmental Protection General Permits Section Bureau of Air Monitoring and Mobile Sources 2600 Blair Stone Road, MS #5510 Tallahassee, Florida 32399-2400

[&]quot;- DISCLAIMER: You are required by rule to provide the above information; however, this form is not required and is only provided as a compliance tool.

To Whom It May Concern:



Cancil Benort	
Signature	
DANIEL BENOIT	
Print The state of	
OWNER DRYCLEAVER	
Title	

Carriage Trade Cleaners 38225 12th Ave. Zephyrhills, FL 33542







Florida Dept. of Environmental Protection

General Permits Sections
Bureau of air Monitoring
2600 Blair Stone Road

MS#5510

Tallahassee, Fl 32359,2400

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

466056 DEC14206

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00



FLAIR ACCT. CODE 372020350013755010000 BENIFITTING OBJECT CODE 002000 BENIFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1 FUND: 20-2-035001

FUND: 20-2-035001 OBJECT: 002273

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