

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

February 26, 1997

Mr. Donald J. Gouden Golden Touch Cleaners, Inc. 4034 Little Road New Port Richey, Florida 34655

Re: Facility No. 1010352

Dear Mr. Gouden:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 7, 1997.

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

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

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

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

Sincerely,

Dotty Diltz, Chief

Bureau of Air Monitoring and Mobile Sources

DD/jw

cc: Mr. Louis Fernandez, Southwest District

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

#1010352 Golden Touch Cleaners, Inc. - spoke to business - 2/18/97 p.13 6. add title - Owner p.15 5.(f) required

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):							
2. Site Name (For example, plant name or number):							
2. Site Name (For example, plant name or number):							
3. Hazardous Waste Generator Identification Number:							
3. Hazardous Waste Generator Identification Number:							
4. Facility Location: Street Address:							
City: County: PASCO Zip Code: 3465-5 5: Facility Identification Number (DEP Use): 7.7							
5 Facility Identification Number (DEP [1ke):							
1010352							
Demonstrate Official							
Responsible Official							
6) Name and Title of Responsible Official:							
7. Responsible Official Mailing Address: Organization/Firm: Street Address: Organization/Firm: Street Address:							
7. Responsible Official Mailing Address:							
Organization/Firm: SAME AS ABOUE Street Address:							
City: County: Zip Code:							
8. Responsible Official Telephone Number:							
Telephone: (') Fax: (') NONE							
Facility Contact (If different from Responsible Official)							
9. Name and Title of Facility Contact (For example, plant manager):							
9. Name and Title of Facility Contact (For example, plant manager):							
STEVE MARTIN							
10. Facility Contact Address: 4034 LITTLIZ RD							
Street Address:							
City: RICHEY PASCO Zip Code: 34655							
11. Facility Contact Telephone Number:							
Telephone: () Fax: () NOWB							

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:FEB 7 1997

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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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit									2
(1) w/ ref. condenser									
(2) w/ carbon adsorber									
(3) w/ no controls	1	JUN 94	JULY 94						
Washer Unit						_			, ,
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		11.	j		•				
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									1. 1
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are (c) No control devices 2.(a) What was the total of the control of the control devices (b) If less than 12 mont Check why it is less	are re quant gallo	equired to be ity of perchlo ons ow many? [_	installed [_ proethylene (perc)	purchased in	the latest 12	2 moi	nths?	
3. What is the facility's so (Indicate with an "X".					nitions found	d in section (3) of	Part II?	
Existing small ar	ea so	urce []	Ne	w sn	nall area sour	ce []		
Existing large are	ea soi	urce []	Ne	w la	rge area sour	ce 🔀	1		

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 What control technology is required on machin (Indicate with an "X".) 	es pursuant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber []	Refrigerated condenser []
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser	
	ns units shall not be eligible to use the general permit pursuant and hot water generating units on-site meet the following ite:
	(1) have a total heat input of 10 million BTU/hr or less (298 v natural gas except for periods of natural gas curtailment ore than one percent sulfur is fired.
All steam and hot water generating units exempt No such units on-site	
Equipment Monitorin	g and Recordkeeping Information
Check all logs which are required to be kept on-si	te in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	□ □ □ □ □ □ □ □ □ □
(c) Refrigerated condenser temperature monitoring	g 🔀
(d) Carbon adsorber exhaust perc concentration m	onitoring []
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	

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Surrender of Existing Air Permit(s)

Please indicat	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)
\bowtie	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notifi statement maintain	dersigned, 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 pro	mptly notify the Department of any changes to the information contained in this notification.
Oon Signature	rald Jolden 1/28/97

Effective: 6-25-96

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
COLDEN TOUCH CLEANIERS TWC 2. Site Name (For example, plant name or number):
2. Site Name (For example, plant name or number):
3. Hazardous Waste Generator Identification Number:
3. Hazardous Waste Generator Identification Number:
4. Facility Location: Street Address:
City: County: PASEO Zip Code: 34655 5: Facility Identification Number (DEP Use):
5: Facility Identification Number (DEP Use):
7010352
Responsible Official
6. Name and Title of Responsible Official: GOLDEN
POWALD J GOUDEN, OWNER 7. Responsible Official Mailing Address: Organization/Firm: Street Address: Street Address: ORGANIZ AS ABOUE
7. Responsible Official Mailing Address:
Street Address: SAME AS MISSING
City: County: Zip Code:
8. Responsible Official Telephone Number:
Telephone: (') Fax: (') Now E
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
STEVE MARTIN
10. Facility Contact Address: 4034 LITTLE RO
Street Address:
City: County: PASCO Zip Code: 34655
11. Facility Contact Telephone Number: Telephone: () - Fax: () -
1elephone: () - Fax: () NONB
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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
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
					1				
Example	#]	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									
(2) w/ carbon adsorber		_							
(3) w/ no controls	1	JUN 94	JULY 94						
Washer Unit	-	1			1			•	•
(4) w/ ref. condenser	_								
(5) w/ carbon adsorber									
(6) w/ no controls				-					
Dryer Unit					1	1		•	
(7) w/ ref. condenser									
(8) w/ carbon adsorber		_							
(9) w/ no controls		_							
Reclaimer Unit			<u> </u>	1		-L			
(10) w/ ref. condenser	_								
(11) w/carbon adsorber									
(12) w/ no controls						1			
(b) Control devices are (c) No control devices 2.(a) What was the total of the control of the control devices (b) If less than 12 mont Check why it is less	are re quant gallo	equired to be ity of perchlo ons ow many? [_	installed [_ proethylene (] months	perc)	_] purchased in	n the latest 12	? mor	nths?	
3. What is the facility's son (Indicate with an "X". Existing small are	Selec	t one classifi	cation only.)		nitions found	·	_	Part II?	
Existing large are	a soi	urce []	Ne	w la	rge area sour	ce 🔀	[

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Effective: 6-25-96

(Indicate with an "X".)	iant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber [] Ref	rigerated condenser []
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser	
	·
5. A facility which contains non-exempt emissions units to Rule 62-213.300, F.A.C. Verify that all steam and hot exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have boiler HP or less), and (2) are fired exclusively by nature during which propane or fuel oil containing no more that	l gas except for periods of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and E	decordkeeping Information
Check all logs which are required to be kept on-site in ac	cordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases	\bowtie
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration monitoria	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	\simeq

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

Surrender of Existing Air Permit(s)

Ple	Please indicate 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)						
	\bowtie	No air permits currently exist for the operation of the facility indicated in this notification form.						
		Responsible Official Certification						
۶-	this notific statements maintain t	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 smade 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 the all terms and conditions of this general permit as set forth in Part II of this notification form.						
	I will pron	nptly notify the Department of any changes to the information contained in this notification.						
	Oor Signature	næld Folden 1/28/97 næld Folden 6/13/97						
		//						

AIRS ID#: /0/0352

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

				
	Touch C			_date: <u>9/18/97</u>
FACILITY LOCATION: 4034	Little Kd			
FACILITY LOCATION: 4034 New Port	- Richey,	FC		
Annual Reporting Period:	iept 1	1996 то	Sept.	18, 1997
Based on each term or condition of the Title	V general air permi	t my facility has remai	ined in compliance	e with DEP Rule
62-213.300, Florida Administrative Code (F.		•		-4-6
If NO, complete the following:				·
#1. Term or condition of the general permit	that has not been in	continuous compliance	e during the repor	ting period stated above:
Refrigerated Condenser	and them	nometer		
Exact period of non-compliance: from	9-1-6	96to	3-11	-97
Action(s) taken to achieve compliance:	•	and therm		
Method used to demonstrate compliance:				
#2. Term or condition of the general permit Relordkeeping Luf	rigerated	tempena	lare	
Exact period of non-compliance: from	4-1-9	76to_	<u> </u>	EIVED.
Action(s) taken to achieve compliance:	Logs dere	ated		SEP 2 2 1997
Method used to demonstrate compliance: _	log			au of Air Monitoring Mobile Sources
As the responsible official, I hereby certify, be made in this notification are true, accurate an upon rolling averages of purchase receipts, de year for transfer or combination facilities.	nd complete. Furthe	r, my annual consumpt	tion of perchloroe	thylene solvent, based
RESPONSIBLE OFFICIAL: Donald Name	Golden e (Please Print)	Donale	Signature	0/18/9.7 Date
<u> </u>				

^{*}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

RE-IN	JAL ISPECTION		COMPLAINT/DI	SCOVERY	
AIRS ID#: 1010352 DATE: FACILITY NAME: Golden FACILITY LOCATION: 4030 NEW RESPONSIBLE OFFICIAL: DONG CONTACT NAME:	Touch Littl Port R ald (70)	Chean Liche Liche	ers d		9
PART I: NOTIFICATION					
(check appropriate box)					
1. New facility notified DARM 30 days p	rior to startup		•		
2. Facility failed to notify DARM to use	general permit				a
					
PART II: CLASSIFICATION					
	2. No dry-to trans: both (consum dry-to-to-to-to-to-to-to-to-to-to-to-to-to-	fer only, x < types, x < 1 structed on of the structed on of the structed on of types, 140 structed on of types, 140 structed on of types.	$x < 140 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $< 200 \text{ gal/yr}$ $< 40 \text{ gal/yr}$ or after $12/9/91$) Free source $140 \le x \le 2,100 \text{ gal/yr}$ $< x \le 1,800 \text{ gal/yr}$ or after $12/9/91$) Can not determ	of business & Mobile Sources Al/yr inne ove	智口

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN MN/A 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? ON ON/A 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? DY DN DOWNA 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) **≥**Y □N 1. Equipped all machines with the appropriate vent controls? AVA UN DYA 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 MY ON ON/A 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 ON ON/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?

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?	ELY ON	
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?	QY QN	□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	□N/A
	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?	XY DN
2. Maintained rolling monthly total of perc consumption?	ØØY □N
3. Maintained leak detection inspection and repair reports for the following:	J
a. documentation of leaks repaired w/in 24 hrs? or;	ÞØÝ □N □N/A
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days	
and parts installed w/in 5 days of receipt?	DY DN DEKVA
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON BOVA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON KANA
6. Maintained startup/shutdown/malfunction plan?	à r □n
7. Maintained deviation reports?	OY ON BONA
Problem corrected?	OY ON BYVA
8. Maintained compliance plan, if applicable?	OY ON BYWA

PART VI: LEAK DETECTION AND REPAIRS

1.	Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
	inspection?			STY ON				
2.	Has the facility maintained a leak log?			Ø¥ □N				
3.	Does the responsible official check the	following areas for leaks	?					
	Hose connections, fittings, couplings, and valves	Y ON ON/A	Muck cookers	TON ON/A				
	Door gaskets and seating	אוחם אם צף	Stills	Y ON ON/A				
	Filter gaskets and seating	DY ON ON/A	Exhaust dampers	DY ON ON/A				
	Pumps	DY DN DN/A	Diverter valves	Y ON ON/A				
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	אואם אם צם				
	Water separators	DY ON ON/A						
4.	Which method of detection is used by	the responsible official?						
	Visual examination (condensed s	solvent on exterior surface	es)	×				
	Physical detection (airflow felt the	hrough gaskets)		D				
	Odor (noticeable perc odor)			每				
	Use of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)					
	Halogen leak detector	•						
	If using direct-reading inst	rumentation, is the equip	oment:	N/A				
	a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?	OY ON				
	□Y □N							
	c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	DY DN				
	d. Kept in a clean and s	secure area when not in us	ee? ·	OY ON				
	e. Verified for accuracy	y by use of duplicate samp	oles (calorimetric only)?	DY DN				

Approximate Date of Next Inspection

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL	OMPLAINT/DISCOVERY	RE-INSPECTION
TIME IN: 9:10A TYPE OF FACILITY: DC	TIME OUT:9:	40Δ AIRS ID#:_	1010352
FACILITY NAME: GOLDEN FACILITY LOCATION: 40			DATE: June 13, 97
RESPONSIBLE OFFICIAL:	1 1 1		ER: 813/376-2150
compliance with DEP Ru Based on the results of the	le 62-213.300, Florida Adminis e compliance requirements eval	uated during this inspection, the trative Code (F.A.C.). uated during this inspection, the	
discrepancies were noted:		FOLLOW-UP AC	CTION REQUIRED
Failure to main temperateure < 4	tain exhaust	- Complete	installation
Proper vent Con installed.		- Closed loop System	Vapor Venting
		-	ralee on Condenser
COMMENTS: If prop a Compliance July 7, 1997.	per controls has	et installed t be submi	by Jun 30, 1997 thed by
The Annual Compliance Certification DATE OF NEXT INSPECTION:	Week of 7	fied and submitted to the inspect - 7 - 9 7 pproximate)	or, YES NO
INSPECTION CONDUCTED BY	(P	CANGRO lease Print) PHONE NUMBE	r:813/144-6100
	Daga	1 05 /	*/25

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANY	NUAL .	COMPLAIN	NT/DISCOVERY	RE-INSPE	CTION 💢
TIME IN: 9:10A TYPE OF FACILITY: DC	TIME OUT:	9:40A	AIRS ID#:	101035	2
FACILITY NAME: GOLDEN FACILITY LOCATION: 4034	TOUCH CL LITTLE K	EANER	3	DATE: JU/	2 13,97
	ORT RICHE		9 34655		
RESPONSIBLE OFFICIAL: Dora	ld Golde	<u> </u>	PHONE NUM	BER: 813/376	-2150
Based on the results of the comcompliance with DEP Rule 62-	213.300, Florida Adn	ninistrative Co	ode (F.A.C.).		
Based on the results of the com discrepancies were noted:	pliance requirements	evaluated dur	ing this inspection, th	ne following complian	ce
COMPLIANCE REQUIREM	MENT/PROBLE			CTION REQUI	
Failure to mainta	• •	it -	Complete	install	ation
temperature = 45°		O _y	refregera	ted Syste, piapor ve	ກ .
Proper vent Contra	es not	- C	losed loe,	piapor ve	inting
installed.			System		
		- (diverter	value on	Conderser
	-			APR 7 of Ar 1 & Mobile S	CEI
				Monitoria e Sources	VED
	•			- σ̄α 	
COMMENTS: If proper	Controls	not 1	installed	by Jun	30,1997
COMMENTS: H proper a compliance &	Plan Mi	est l	r subm	itted by	4
Julip 1/199 1.					
The Annual Compliance Certification for	m has been properly. Ullk OL	certified and	submitted to the insp $\mathcal{Q}\mathcal{T}$	ector, YES	NOIX
DATE OF NEXT INSPECTION: ℓ	CHER OF	(Approxim	ate)		
INSPECTION CONDUCTED BY:	LARGARE		NGRO		
INSPECTOR'S SIGNATURE:	aut Ca	(Please Pr LOVA)	· ·	BER: <u>8/3/744</u> -	-6100
•	U	ageof		x,	7.25 Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION		COMPLAINT/DISC	COVERY	
AIRS ID#: 1010352				ME OUT:	
FACILITY NAME: <u>(70)</u>					·
FACILITY LOCATION: _	4034 Lite	tle Rd			
FACILITY LOCATION:	New Port	Richey	34655		
<u> </u>		. :/	· · · · · · · · · · · · · · · · · · ·		
PART I: NOTIFICATION			<u>-</u>		
(check appropriate box)					
Existing facility notified D	ARM by 9/1/96	•		хí	.
2. New facility notified DAR	•	ום			
3. Facility failed to notify DA	• •	-			
	· · ·		· · · · ·		
PART II: CLASSIFICATIO)N				
Facility indicated on notifical (check appropriate box) A. 1. Existing small area soundary-to-dry only, x<140 gallyr both types, x<140 gallyr (constructed before 12/9/91) 3. Existing large area soundary (check appropriate both types).	urce	2. New small a dry-to-dry only, ransfer only, x ooth types, x < 14 constructed on	x<140 gal/yr 200 gal/yr 0 gal/yr or after 12/9/91)		
dry-to-dry only, 140 <x<2, (constructed="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" before="" both="" classi<="" correct="" facility="" gr="" is="" only,="" td="" this="" transfer="" types,=""><td>100 gal/yτ d 0 gal/yr t al/yτ b) (0</td><td>lry-to-dry only, ransfer only, 20 ooth types, 140<</td><td>140<x<2, 100="" gal="" yr<br="">0<x<1,800 gal="" td="" yr<=""><td></td><td></td></x<1,800></x<2,></td></x<2,>	100 gal/yτ d 0 gal/yr t al/yτ b) (0	lry-to-dry only, ransfer only, 20 ooth types, 140<	140 <x<2, 100="" gal="" yr<br="">0<x<1,800 gal="" td="" yr<=""><td></td><td></td></x<1,800></x<2,>		
If no, please check the approp	riate classification:			•	
	fied for a general permiteds above limits and is n		above general permit		
B. The total quantity of perch facility was 149 gallon		hased within th	e preceding 12 month	s by this dry clean	ing

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? 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? OY ON ANA 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 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? XY □N

321

Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY ON NA
Is the temperature differential equal to or greater than 20° F?	DY DN NA
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? Is the perc concentration equal to or less than 100 ppm?	AMP NO YO
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 NA
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY ON DANA
6. Routed airflow to the carbon adsorber (if used) at all times?	אואל מם צם
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	אַל בוא
Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption?	ол Б и р бл ои
2. Maintained rolling monthly averages of perc consumption?	
2. Maintained rolling monthly averages of perc consumption?3. Maintained leak detection inspection and repair reports for the following:	DY BYN
 Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: documentation of leaks repaired w/in 24 hrs? or; documentation of parts ordered to repair leak and leak repaired w/in 2 days 	рай пи
 Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: documentation of leaks repaired w/in 24 hrs? or; documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? 	MA NO AO
 Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) 	MA NO ADA MA NO AO MA
 Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? 	MA NO AO
 Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? 	MA NO ADA MA NO AO MA
 Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? 	MA CO MO YOU MO YOU MO YOU MO YOU MO YOU MO YOU MO YOU MO YOU MO YOU
 Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected? Maintained compliance plan, if applicable? 	MA CA MO ASA MO ASA
 Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected? 	MA CA MO ASA MO ASA

B. Has the responsible official of an existing large or new large area source also:

on dry-to-dry, reclaimer, and dryer machines on a weekly basis?

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located

					<u> </u>
2. Which method of detection is used by	the respo	nsible official?			
Visual examination (condensed	solvent or	n exterior surfaces)	X	
Physical detection (airflow felt the	hrough ga	iskets)	•	Æ	
Odor (noticeable perc odor))	
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)					
If using direct-reading instrum					
a. Capable of detecting		אב			
b. Calibrated against a (PID/FID only)?	Oy (אכ			
c. Inspected for leaks and obvious signs of wear on a weekly basis?					JN .
d. Kept in a clean and secure area when not in use?					אב
e. Verified for accuracy	by use o	f duplicate sample	s (calorimetric only)?		אב
3. Has the facility maintained a leak log?	,		. · · · · · · · · · · · · · · · · · · ·	XY	אב
4. Does the responsible official check the	followin	g areas for leaks?			
Hose connections, fittings, couplings, and valves	EXY	n □n	Muck cookers	ŻΥ	ΠN
Door gaskets and seating	Y	ПΝ	Stills	YY	ПN
Filter gaskets and seating	XX	□N	Exhaust dampers	₽ ¢r	□N
Pumps	XY	□N	Diverter valves	BA	·□N
Solvent tanks and containers	XX	□N	Cartridge filter housings	XY	□N
Water separators	XY.	□N	्राम्ब	to the	Min n
DOWNERD GOLDEN	a))) ***	a en es políticos egas es es	and the second s	an teast	de . · · · · · · · · · · · · · · · · · ·

DONALD GOLDEN	757.			and the state of t	!
Name of Responsible Official	-			et a	
MARGACET CANGRO		' .'	3/3	1/97	, /
Inspector's Name (Please Print)		_	Date	of Inspection	
Margaret Cangro	. ₁ 2	Off and the	Apr	el 9.7	ŧ
Inspector's Signature		•	Approximate	Date of Next Inspect	tion
,					,

Suprema Model 750/Single/E Sirial # 5 090830 3380.

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	N 0	COMPLAINT/DISCOVER	XY 🗆
AIRS ID#: 1010352 FACILITY NAME: 601				Т:
FACILITY LOCATION:				
PART I: NOTIFICATION			· .	:
(check appropriate box)		—— A	ele. Te	
1. Existing facility notified D.	ARM by 9/1/96	V	huplecate	K
2. New facility notified DARN	A 30 days prior to start	$_{ m up}$	XXX J	à
3. Facility failed to notify DA	RM to use general perr	nit		<u> </u>
PART II: CLASSIFICATIO				
Facility indicated on notifica (check appropriate box) A. 1. Existing small area soudry-to-dry only, x<140 gal/transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/91	ırce 🗆 yı	2. New small a dry-to-dry only, transfer only, x both types, x<1.	x<140 gal/yr <200 gal/yr	
3. Existing large area sou dry-to-dry only, 140 <x<2, 1<br="">transfer only, 200<x<1,800 both types, 140<x<1,800 ga<br="">(constructed before 12/9/91</x<1,800></x<1,800 </x<2,>	l00 gal/ут gal/ут al/ут	transfer only, 20 both types, 140	rea source 140 <x<2, 00<x<1,800="" 100="" 12="" 9="" 91)<="" <x<1,800="" after="" gal="" or="" td="" yr=""><td></td></x<2,>	
This is a correct facility classi	fication	Му □и		
If no, please check the approp	riate classification:			
☐ facility excee	fied for a general perm ds above limits and is	not eligible for a		
B. The total quantity of perchl facility was 149 gallons		chased within th	ne preceding 12 months by thi	s 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?	ÞΥ □N				
2. Examining the containers for leakage?	ØY □N				
3. Closing and securing machine doors except during loading/unloading?	Ø(Y □N				
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	XY ON				
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON BONA				
PART IV: PROCESS VENT CONTROLS	·				
In Part II-A:	1				
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 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?	□Y Ş QÑ				
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	MY ZON ON/A				
Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	□Y 26 □N/A				
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	□Y № 				
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	DY DEVI				
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	XY ON				

12

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?	X Y	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?		on V	
	Is the temperature differential equal to or greater than 20° F?	ΩY	□и √	14
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?	ΩY	ои ја	Ñ/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	□N Å	VA
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?	ΟY	□и ∕	IA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	□и ф	ĺγ.
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ON D	NT/A
ł				WA.
_	;	-	<u> </u>	(VA
_	ART V: RECORDKEEPING REQUIREMENTS		<u> </u>	
P.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes)		<u>- </u>	
Р. Н (с	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased?	Nay.	/	
P./ (c. 1.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes)	Nay.	/	
P/ H (c: 1.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased?	Nay.	/	
P/ H (c: 1.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption?	Nay.	/	
P/ H (c: 1.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following:	Nay.	ои ои	
H (c. 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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	Ø4. Ø(A ØA	ои ои	
P./ (c. 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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?	Ø4. Ø(A ØA	ои ф ои фи	
P/ H (c) 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations?	2 2 2 3 3 3 3 3 3 3 3 3 3	ои у ои ои ои ои	
P./ (c. 1. 2. 3. 4. 5. 6.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations?	YY YY DY DY	ои м ои м ои ои	
P./ (c. 1. 2. 3. 4. 5. 6.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan?	(A)	ои ои ои ои ои	

PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	Ý DN

2. Which met	2. Which method of detection is used by the responsible official?							
Visua	l examination (condensed se	olvent on	exterior surfaces)		X			
Physic	cal detection (airflow felt the	rough gas	kets)	•	Æ			
Odor		E						
Use of	f direct-reading instrumenta	tion (FID	/PID/calorimetric	tubes)				
If usi	ng direct-reading instrumo	entation,	is the equipment:	· :				
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? □Y □N								
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?								
	a weekly basis?	□ Y □	IN					
			N					
	e. Verified for accuracy	by use of	duplicate samples	(calorimetric only)?	OY O	N		
3. Has the faci	lity maintained a leak log?			**	X (Y 0	N		
4. Does the res	sponsible official check the	following	areas for leaks?					
1	connections, fittings, lings, and valves	eq y	ПΝ	Muck cookers	ŻΥ	ПN		
Door g	gaskets and seating	YY	□N .	Stills	Αίλ	□и		
Filter	gaskets and seating	XX	□и .	Exhaust dampers	5 40	□и		
Pumps	s .	XX	□и	Diverter valves	\$\$\frac{1}{2}	ΩΝ		
Solver	nt tanks and containers	XX	□и	Cartridge filter housings	XY	□и		
Water	separators	XY,	□Ņ _{i, d} t	, control	lazerit :	· ;		

Name of Responsible Official MARGACET CANCRO Inspector's Name (Please Print) Date of Inspection April 97 Inspector's Signature Approximate Date of Next Inspection	The Garage		the state of the s
MARGACET CANGRO Inspector's Name (Please Print) Margaret Cangro Date of Inspection April 97	DONALD GOLDEN		and the second s
MARGACET CANCRO Inspector's Name (Please Print) Margaret Cangro Date of Inspection April 97	Name of Responsible Official		
Margaret Cangro April 97	MARGACET CANGRO		3/31/97
Margaret Cangro April 97	Inspector's Name (Please Print)		Date of Inspection
Inspector's Signature Approximate Date of Next Inspection	Margaret Cangro	· ': · · · · · ·	Anio 97
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Inspector's Signature		Approximate Date of Next Inspection

Suprema Model 750/Single/E Sirial # 5 090830 3380

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

		18/1/1891	MA Care		
FACILITY NAME: Golden 10	Duch Cleane	154	TA TOA	TE: 9/17/9	
FACILITY LOCATION: 4034	Little Rd	7.60 DA 7.	2,	(A)	
New Port	Richey Fr	34655	1998	, de la companya del companya de la companya del companya de la co	
			4575/270x		
Annual Reporting Period:	-19- 199	7 то	July July	7 - 19	998
Based on each term or condition of the Title V 62-213.300, Florida Administrative Code (F.A.				DEP Rule	
If NO, complete the following:	•				
#1. Term or condition of the general permit the	hat has not been in continue	us compliance duri	ng the reporting p	eriod stated abo)VC:
·				Mreau & N	—
Exact period of non-compliance: from		to		APR	<u> </u>
Action(s) taken to achieve compliance:				PR 19	TO STATE OF THE PARTY OF THE PA
Method used to demonstrate compliance:				Mon to Sources	<
			- 41	ring	
#2. Term or condition of the general permit th	iat has not been in continuo	us compliance durin	g the reporting po	nod stated abo	vc:
		t,			
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, ba made in this notification are true, accurate and upon rolling averages of purchase receipts, do year for transfer or combination facilities.	d complete. Further, my chi	ual consumption of	perchloroethyler	ie solver:, base	d
responsible official: Donald		Donald (7 Tolder	9/17/98	,
Name	(Please Print)	Signat	pre	Date	

^{*}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.

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 rolling averages of 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.

RESPONSIBLE OFFICIAL Donald Golden

Name (Please Print)

Signature

Date

*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

TYPE OF INSPECTION:	ANNUAL		COMPLAINT/D	ISCOVERY_	
	RE-INSPECTION	´ `		THE SEX	, 'M
		-		30, 5	5
AIRS ID#: <u>/0/0352</u> D.	ATE 9-12-90	TIME I		OI P	12/10
			N: 10 1 -1 3	TIME UNITS	1.5.0
facility name: <u>Gold</u>		CRO	iners	ice ito	3
FACILITY LOCATION:		& Kd	· · · · · · · · · · · · · · · · · · ·		
	•	Rich			
RESPONSIBLE OFFICIAL : 1	Donald Gold	den	PHONE: 727	-376-2	150
CONTACT NAME:			_ PHONE:	-	
PART I: NOTIFICATION				·	
(check appropriate box)					
1. New facility notified DARM 30	0 days prior to startup				٥
2. Facility failed to notify DARM	to use general permit				0
PART II: CLASSIFICATION		<u> </u>			
Facility indicated on notification	form that it is:		☐ No notification	n form	
(check appropriate box)			☐ Drop store/ou	t of business/p	etrol e um
A.	<u></u>			>	
1. Existing small area source dry-to-dry only, x < 140 gal/yr		New small a	rea source x < 140 gal/yr	A	
transfer only, x < 200 gal/yr			< 200 gal/yr		
both types, x < 140 gal/yr		types, x <			
(constructed before 12/9/91)			or after 12/9/91)		
3. Existing large area source	4.1	New large a	rea source		
dry-to-dry only, $140 \le x \le 2,10$			$140 \le x \le 2,100 \text{ g}$		
transfer only, $200 \le x \le 1,800$	gal/yr tran	sfer only, 20	$00 \le x \le 1,800 \text{ gal/}$		
both types, $140 \le x \le 1,800$ ga			$\leq x \leq 1,800 \text{ gal/yr}$	•	
(constructed before 12/9/91)	(cor	nstructed on	or after 12/9/91)		
5. This is a correct facility clas	sification	N	□Can not determ	nine	
If no, please check the ap	opropriate classification:	:			
· -	qualified for a general		mber a	bove	
☐ facility	evende abova limite a	nd is not elig	gible for a general j	permit	
	exceeds above mints at		,	•	
B. The total quantity of perchloro facility was // gallons.		_	-		y 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? DY DN QXVA 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 DAY ON ON/A 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? DY DN ØN/A PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? 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 DN DN/A 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 DN DN/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?

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?	ΠY	ПŇ	
2	Measured and recorded the washer exhaust temperature at the condenser	/		
۷.	inlet and outlet weekly?	ПУ	ΠNI	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	ΠИ	□N/A
2	Managered and recorded the nero concentration in the exhaust street wookly			-
٥.	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?	ПΥ	ПΝ	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ЦY	ЦN	□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?	\Box Y	ПΝ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual		-	
	condenser coils?	ЦY	ПN	□N/A
6	Routed airflow to the carbon adsorber (if used) at all times?	ΠV	ΠN	□N/A
<u>ن</u> .	Routed an now to the carbon adsorber (it used) at an times?	<u> </u>		UIVA

Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: ÆÍY □N □N/A 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 applicable direct reading instruments) DY DN DY/A 5. Maintained exhaust duct monitoring data on perc concentrations? ATY ON 6. Maintained startup/shutdown/malfunction plan? 7. Maintained deviation reports? DY DN JON/A

PART V: RECORDKEEPING REQUIREMENTS

Problem corrected?

8. Maintained compliance plan, if applicable?

DY DN BAN/A

OY ON ANNA

PA	ART VI: LEAK DETECTION AND R	EPAI	RS				
1.	Does the responsible official conduct a	weekl	y (for	small sources, b	i-weekly) leak detection a	nd rep	air
	inspection?					XY	□N
2.	Has the facility maintained a leak log?			•		ØŸ	□N
3.	Does the responsible official check the	follow	ing ar	eas for leaks?			
	Hose connections, fittings, couplings, and valves	ŽĪΥ	ПΝ	□N/A	Muck cookers	Pγ	□N □N/A
	Door gaskets and seating	₽ Y	ПΝ	□N/A	Stills	2 Y	□N □N/A
	Filter gaskets and seating	ĢХ	ПΝ	□N/A	Exhaust dampers	QVY	□N □N/A
	Pumps	BA	ПИ	□N/A	Diverter valves	ÞΈΥ	□N □N/A
	Solvent tanks and containers	BA	ПΝ	□N/A	Cartridge filter housings	ΔY	ON ON/A
	Water separators	₫X	□и	□N/A			
4.	Which method of detection is used by the	he resp	onsib	le official?		•	
	Visual examination (condensed so	olvent	on ex	terior surfaces)	,	A	
	Physical detection (airflow felt the	rough	gaske	ts)		Þ	
	Odor (noticeable perc odor)					B	
	Use of direct-reading instrumenta	tion (F	'ID/PI	ID/calorimetric t	ubes)		
	Halogen leak detector			,	·		
	If using direct-reading instru	ument	ation	, is the equipme	nt:	MA	'A -
	a. Capable of detecting p	perc va	ipor c	oncentrations in	a range of 0-500 ppm?	ΠY	אם
	b. Calibrated against a st (PID/FID only)?	tandar	d gas	prior to and after	r each use	ΩY	□N
	c. Inspected for leaks an	d obvi	ous si	igns of wear on a	a weekly basis?	ΠY	□и
	d. Kept in a clean and se	cure a	rea w	hen not in use?		ΠY	□и
	e. Verified for accuracy	by usε	of du	aplicate samples	(calorimetric only)?	ΠY	אם

Inspector's Name (Please Print)

Marguet Canaci
Inspector's Signature

9-22,99 Date of Inspection

Approximate Date of Next Inspection



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413467 JAN24 2002

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Obj.: 002273

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·	□ Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes
2. Article Number (Copy from service label)	- ~ C C C C C C C C C C C C C C C C C C
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7825	Postage Certified Fee	\$	Postmark
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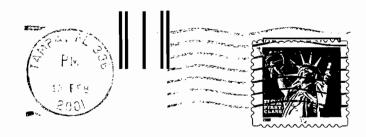
AIRS ID # 1010352

GOLDEN TOUCH CLEANERS DONALD GOLDEN 4034 LITTLE ROAD NEW PORT RICHEY FL 34655

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

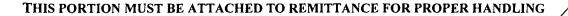


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