

Department of Environmental Protection

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

David B. Struhs Secretary

June 12, 2000

Mr. Jay S. Versfelt Elite Cleaners 5427 North 4th Street St. Petersburg, Florida 33703

Re: Facility No.: 1030293-002

Dear Mr. Versfelt:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on May 8, 2000.

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. Gary Robbins, Pinellas County

1030293-002

ρ16 4.

Existing machines at large area source Ref. Condenser should not be marked. Morbourt and initial. New machine at large area source Ref. Condenser should be marked.

p17 7

Jary S. Versfelt loes not have authority to surrender prior permit for day cleoner. No OFP air permits should be marked.

Responsible Official should sign and date for changes mode.

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.

Facility Name and Location	
1. Facility Owner/Company Name (Name of corporation, agency, or indivi-	dual owner):
2. Site Name (For example, plant name or number):	,
2. Site Name (For example, plant name or number):	
Elite Cleaners	
3. Hazardous Waste Generator Identification Number:	
FLD982100307	
4. Facility Location: Street Address: 5\$27 4th Street North	
City: St. Petersburg, FL County: Pinellas	Zip Code: 33703
5. Facility Identification Number (DEP Use ONLY - do not fill in):	
10	30293-002
Responsible Official	
6. Name and Title of Responsible Official:	8° 0 -1
Name: Jay S. Versfelt Title:	30293-002 President
7. Responsible Official Mailing Address: Organization/Firm: JBV, Inc./Elite Cleaners	III CONTRACTOR OF THE PARTY OF
Street Address: 5#27 4th Street North	10 A.
City: St. Petersburg, FL County: Pinellas	Zip Code: 33703
8. Responsible Official Telephone Number:	
Telephone: (727) 522-2429 Fax: (72	7) 520 1403
Facility Contact (If different from Responsible Official)	
9. Name and Title of Facility Contact (For example, plant manager):	
10. Facility Contact Address:	
Street Address:	
City: County:	Zip Code:
11. Facility Contact Telephone Number:	
Telephone: () - Fax: (
Telephone. ()) -

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DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY How many dry-to-dry machines do you have on-site? For each dry-to-dry machine on-site, please provide the following information: Date Control Device Installed Date Initially Purchased Status Control Device Required* From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") 6/13/96 Existing/New (RC)CA/None required same Existing/New RC/CA/None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 1.(b) TRANSFER MACHINES ONLY How many washers do you have on-site? How many dryers/reclaimers do you have on-site? If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an EXISTING unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a NEW unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information: Date Initially Purchased Control Device Required* Date Control Device Installed Status From Manufacturer (if already included at time of (circle one) (circle one) purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber2.(a) How much perchloroethylene (perc) have you used within the last 12 months? [247] gallons (You must fill this in) (b) If less than 12 months, how many? [] months Check why it is less than 12 months: New owner: [] Did not keep records: [] New store: [____] New machine [____]

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Unopened store [____] (date of expected opening ____

3. What is the facility's source classification based on Indicate with an "X". Select one classification of	• • • • • • • • • • • • • • • • • • • •
Small Area Source []	
Transfer only 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 on-site 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 machines required with an "X".)	oursuant 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 [X]	New machines at large area source Refrigerated condenser []
5. A facility which contains non-exempt emissions under Rule 62-213.300, F.A.C. Verify that all steam and he exemption criteria or that no such units exist on-site of the contains and the exemption criteria or that no such units exist on-site of the contains and the contains and the contains and the contains are contained as the contains and the contains are contained as the conta	· -
All steam and hot water generating units exempt No such units on-site	OR
How many boilers do you have on-site?	
For each boiler, indicate its horsepower (HP) rating:	[20][_]
What type of fuel do you use? [] propane [] No. 2 fuel [] No. 6 fuel	The state of the s
6. Equipment Monitoring and Recordkeeping Inform	ation
Check all logs which are required to be kept on-site it	in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases/solvent a	ddition log
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	
(d) Carbon adsorber exhaust perc concentration mon	itoring []
(e) Startup, shutdown, malfunction plan	· [X_]

DEP Form No. 62-213.900(2) Effective: 2/24/99

DEP Form No. 62-213.900(2) Effective: 2/24/99

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

EACH ITY NAME: Flite Dry Cleaner (dbe IDV Inc. 10/0/00
FACILITY NAME: Elite Dry Cleaner (dba JBV, Inc. Date: 10/9/00
FACILITY LOCATION: 5427 4th Street North
St. Petersburg, FL, 33703
Sourchito
Annual Reporting Period: April 10, 2000 To October 9, 2000
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. \Box YES \Box NO
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: 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 reporting period stated above:
Exact period of non-compliance: fromto
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 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: Jay Versfelt
(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.

TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF IN	SPECTION:	ANNUAL	☑ COMPLA	AINT/DISCOVER	Y 🛄	RE-INSPECTION	
AIRS ID#:	1030293	DAT 1	E: <u>10/9/00</u>	TIME IN:_	10:270	TIME OUT: ΔΙ'.	03am
FACILITY	FACILITY NAME: Elite Dry Cleaners (dba_JBV, Inc.)						
FACILITY	LOCATION:	_5427 4th.St	treet North				
		St. Petersbu	urg, FL, 33703		•		
RESPONSIE	BLE OFFICIAL:	Jay Versfe	elt		Phone	No.: <u>(727) 522-242</u>	9
	Permit No.	_1030293-00	01-AG	Exp. Date:	4/11/2	005	
<u> </u>				nts evaluated during t Administrative Code		ction, the facility is found	to be in
			npliance requireme y items which are	_	this inspe	ection, the following comp	liance

Inspection Summary Report Guidance

Compliance Requirement/Problem	Follow-up Action Required
Did not have a start-up, shutdown, malfunction (SSM) plan in place, along with associated recordkeeping, on site.	If no specific procedures are available from the manufacturer, develop a SSM plan that describes procedures for maintaining and operating equipment during periods of start-up and shutdown associated with a malfunction. EPA's O&M manual may be used if no manufacturers information is available. Keep log of maintenance actions
Purchase receipts were not maintained properly.	Maintain all purchase receipts in a log kept on-site for determination of perchloroethylene solvent consumption.
Monthly purchase records were not maintained as a consecutive twelve month total.	Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a consecutive twelve month total.
Could not confirm that temperature sensor was designed to measure 45°F with an accuracy of ±2°F.	Obtain verification from the manufacturer that the temperature sensor is designed to measure 45°F with an accuracy of ±2°F, or determine this by another method that the Department would consider appropriate.
Evaporator for separator wastewater does not incorporate a pre-filtration system.	Facility may choose to either dispose of perc-containing separator water as hazardous waste, or incorporate a carbon filtration system with the evaporator (as per the State's guidelines).
Did not store all perc, and perc-containing waste in tightly sealed containers.	Store all perc and perc-containing waste in tightly sealed containers which are impervious and chemically unreactive to the solvent.
Did not maintain a log of leak detection inspection and repair records.	Develop and implement a leak detection inspection and repair program. Maintain a log of leak detection inspection and repair records.

Compliance Requirement/Problem	Follow-up Action Required		
Did not conduct weekly leak detection and repair inspection.	Develop and implement a leak detection inspection and repair program. Use at least one of the methods outlined in Part II, Section 7(a), of the general permit provisions, to detect leaks. Inspect the items listed in Part II, Section 7(b), for leaks. Repair leaks within 24 hours of detection, unless repair equipment must be ordered.		
No calibration records for the mechanical direct reading instrumentation (halogen detector) were available.	Mechanical direct-reading instrumentation shall be operated as directed by the manufacturer and must meet the conditions in Part II, Section 7(e) of the general permit provisions		
Did not measure and record the outlet temperature of the refrigerated condenser on the dry-to-dry machine (dryer, reclaimer) on a weekly basis.	Develop and implement a monitoring program. Measure and record the outlet temperature on a weekly basis. The temperature, measured at the end of the drying cycle, must not exceed 45°F.		
Airflow is directed towards the refrigerated condenser upon the door being opened and no diverter valve is in place.	Equip the condenser with a diverter valve to prevent air flow to the refrigerated condenser when the door is opened.		
The outlet exhaust temperature of the refrigerated condenser exceeds 45°F and was not repaired within 24 hours.	Repair or adjust condenser within 24 hours of measurement indicating that the outlet exhaust temperature of the refrigerated condenser exceeds 45°F. The repair shall be documented in the monitoring record log.		
Machine doors are not closed and secure during times other than loading and unloading.	Keep doors closed and secured at all times except during loading and unloading.		
Temperature monitoring was not conducted after an appropriate cooldown period and after verifying that the coolant was completely charged.	Conduct all temperature monitoring following an appropriate cooldown period and after verifying that the coolant has been completely charged.		
Containers for perchloroethylene and/or perchloroethylen- containing waste were found to be leaking.	Examine the containers, used for storing perchloroethylene and/or perchloroethylene-containing waste, for leakage.		
·			
Comments:			
Comments.			
If the Inspection Summary Report indicates follow-up as measures to achieve compliance. Pinellas County will perfective actions have been taken.			
Inspection Conducted by: Jeff	Morris		
Inspector's Signature:	Mranie		
Phone Number: 461/4	422		
Pa	ge 2 of 2		

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL ⊠ RE-INSPECTION □	COMPLAINT/DISCO	OVERY 🗖
AIRS ID#: 1030293 FACILITY NAME: FACILITY LOCATION:	· .	ners (dba JBV, Inc.) Orth	antime out: 11:03am
RESPONSIBLE OFFICIAL	L: Jay Versfelt Jay Versfelt		HONE: (727) 522-2429 HONE: (727) 522-2429
PART I: NOTIFICATION			
(Check appropriate box) 1. Existing facility notified I 2. New facility notified DAF 3. Facility failed to notify DAF	RM 30 days prior to start	•	ର୍ଷ ପ
PART II: CLASSIFICATION	ON		
1	ource 0 gal/yr al/yr 2/9/91) ource 0 (<2,100 gal/yr 1,800 gal/yr 2/9/91) dification: ppropriate classification: or a general permit as nu	mber above	ousiness / petroleum urce 140 gal/yr 0 gal/yr cal/yr after 12/9/91)
-	hloroethylene (perc) pur	gible for a general permit chased within the preceding 1	12 months by this dry cleaning

PART III: GENERAL CONTROL REQUIREMENTS		38"					
Is the responsible official of the dry cleaning facility: (check appropriate boxes)							
1. Storing perchloroethylene in tightly sealed and impervious containers?	¥Y	ΠN	□ NA				
2. Examining the containers for leakage?	⊈ Y	ΠN	☐ NA				
3. Closing and securing machine doors except during loading/unloading?	2 Y	ПN					
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ĭ⊒íY	□N	□ na				
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	QΥ	ΩN	NA				
PART IV: PROCESS VENT CONTROLS	333						
In Part II-A:							
If classification (1) has been checked, no controls are required. Proceed to Pa	art 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 sou (check appropriate boxes)	irces:						
Equipped all machines with the appropriate vent controls?	ĭ¥Y	ΠN					
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	☑ Y	ΠN	□NA				
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	₫ Y	ПN	□NA				
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly bi-weekly basis?	₫ Y	□N					
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	₫ _Y	ΠN	□NA				
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	₫Y	学 N					

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?	Øy □n
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ONA
Is the temperature differential equal to or greater than 20°F?	DY ON ONA
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?	□y □n □na □y □n □na
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 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?	□y □n □na
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y □N □NA
6. Routed airflow to the carbon adsorber (if used) at all times?	□Y □N □NA
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased?	∰y □n
	Øy □n Øy □n
1. Maintained receipts for perc purchased?	ØY □N
 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; 	
 Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following: 	ØY ON ØNA OY ON ØNA
 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; 	ØY □N ØNA
 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? 	ØY ON ØNA OY ON ØNA
 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 instrument only) 	ØY ON OY ON MA OY ON MA OY ON MA
 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 instrument only) Maintained exhaust duct monitoring data on perc concentrations? 	OY ON ONA
 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 instrument only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? 	OY ON ONA OY ON

*new Still installed (reinforced) 9/22/00.

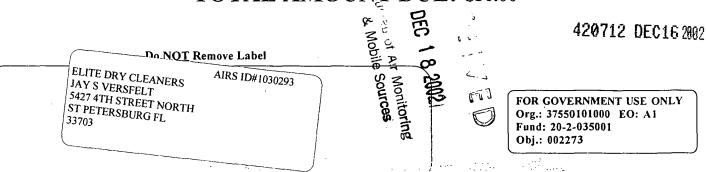
PA	ART VI: LEAK DETECTIO	N AN	D REI	PAIRS			
1.	Does the responsible official of inspection?	onduc	t a wee	kly)(for s	mall sources, bi-weekly) leak	detect ☑Y	
2.	Has the facility maintained a l	eak log	g?	٠		¥Y	□N
3.	Does the responsible official of	heck tl	ne folle	owing are	as for leaks:		
	Hose connections, fitting couplings, and valves	Y	□N	□NA	Muck cookers	□Y	ON MINA
	Door gaskets and seating	Y	ŪΝ	□NA	Stills	₽ÝY	□n □na
	Filter gaskets and seating	$\mathbf{\nabla}_{\mathbf{Y}}$	ΩN	\square NA	Exhaust dampers	₫Y	□n □na
	Pumps	$\mathbf{v}_{\mathbf{Y}}$	□N	□NA	Diverter valves	Y	□n □na
	Solvent tanks and containers	₫y	ŪΝ	□NA	Cartridge Filter housing	ĽΥ	□n □na
	Water separators	Y	ΩN	□NA			
T •	4. Which method of detection is used by the responsible official? Visual examination (condensed solvent of exterior surfaces) Physical detection (airflow felt through gaskets) Odor (noticeable perc odor) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) Halogen leak detector If using direct-reading instrumentation, is the equipment:						
	a Capable of detecting perc vapor concentrations in a range of 0-500 ppm.						
	b. Calibrated against a standard gas priorito and after each use(PID/FID only).						
	c. Inspected for leaks and o	byious	signs	of wear or	n a weekly basis?		$\square_{Y} \square_{N}$
ļ	d. Kept in a clean and secure area when not in use.						
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?						
	Inspector's Name (Please Print) Date of Inspection						
	Inspector's Signature Approximate Date of Next Inspection						



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





THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER MANAGEMENT

412861 JAN10 2002

 $ert \times$

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 # 1030293

ELITE DRY CLEANERS JAY S VERSFELT 5427 4TH STREET NORTH ST PETERSBURG FL 33703

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

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 is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 1030293 10 ELITE DRY CLEANERS 5427 4th Street N ST PETERSBURG, FL 33703

Printed on recycled paper.

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1

FUND: 20-2-035001 OBJECT: 002273



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

436778 FEB23 2004

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

ID# 1030293 JAY VERSFELT **ELITE DRY CLEANERS** 5427 4TH STREET ST PETERSBURG, FL 33703

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001

Obj.: 002273

m		Service MAIL RECEIPT Inly; No Insurance Coverage Provided)
E	Article Sent To:	The second second of the second
UJ		
451	Postage	\$
7	Certified Fee	Rbstmark
0000	Return Receipt Fee (Endorsement Required)	Mee
10	Restricted Delivery Fee (Endorsement Required)	
0	то ID# 1030293	
Ξ	JAY VERSFI	
	ELITE DRY	
<u>n</u>	Stre 5427 4TH ST	
7099	City ST PETERSE	BURG, FL 33703
•	PS Form 3800, July 1999	See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	A. Signature Agent Addresses B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
ID# 1030293 JAY VERSFELT ELITE DRY CLEANERS 5427 4TH STREET ST PETERSBURG, FL 33703	3. Service Type Certified Mail
2. Article Number 7099 3406 (Transfer from service label)	5000 1451 2933
PS Form 3811, August 2001 Domestic Re	turn Receipt 102595-02-M-1540

