

# Department of Environmental Protection

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

Colleen M. Castille Secretary

March 2, 2004

Mr. Frank Tsang Olympian Cleaners 11926 Seminole Boulevard Largo, Florida 33778

Re: Facility No.: 1030297-004

Dear Mr. Tsang:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on January 30, 2004.

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. Gary Robbins, Pinellas County

"More Protection, Less Process"

Printed on recycled paper.

#### Dibble, Dickson

From:

Dibble, Dickson

Sent:

Tuesday, January 06, 2009 1:58 PM

To:

'Morris, Jeffrey H'

Cc:

Bowman, Sandy; 'McCann, Matt'

Subject:

RE: Followup; AIRS ID# 1030297-004-AG, OLYMPIAN CLEANERS d.b.a. OLYMPIAN CLEANERS, 11926 Seminole

Blvd, LARGO, FL 33778-2803

Tracking: Recipient

Delive ry

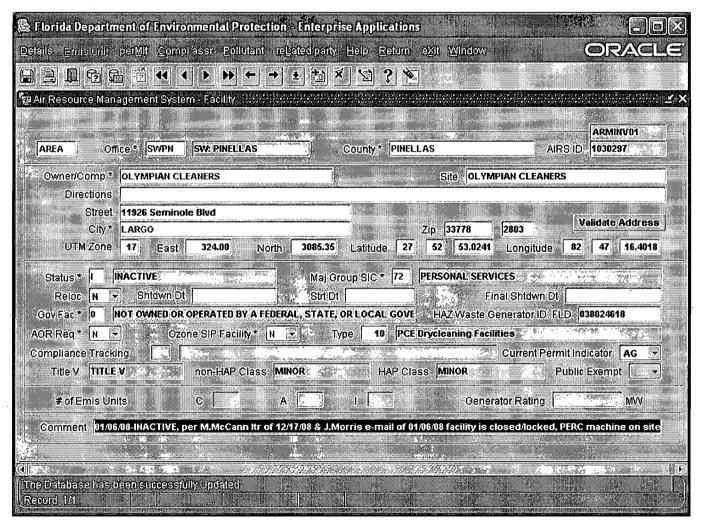
'Morris, Jeffrey H'

Bowman, Sandy Delivered: 1/6/2009 1:59 PM

'McCann, Matt'

Jeff.

Thank you for the follow-up. I have INACTIVATED the subject item facility based on your findings in the field and Matt's and your request to change the status of this facility to INACTIVE.



Have a Happy New Year!

Dick.

#### Dickson E. Dibble, ES III

FL Dept of Environmental Protection

Div. of Air Resource Management Bureau of Air Monitoring & Mobile Sources Air General Permit Program Tel. (850) 921-9586 FAX (850) 922-6979 ICG-#345

#### Dickson.Dibble@dep.state.fl.us



**Please note**: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

From: Morris, Jeffrey H [mailto:jmorris@co.pinellas.fl.us]

Sent: Tuesday, January 06, 2009 9:52 AM

To: Dibble, Dickson

Subject: Followup; AIRS ID# 1030297-004-AG, OLYMPIAN CLEANERS d.b.a. OLYMPIAN CLEANERS, 11926 Seminole Blvd, LARGO, FL

33778-2803

Good Morning Mr. Dibble,

Air Quality determined the facility was still closed and locked on 1/5/09. The dry-dry machine was observed to be in the back of the facility and it was not clear whether it was connected to a power source. Telephone calls were placed to the RO, but no answer. Another follow-up inspection is planned in a couple of months.

If you have any further questions, please contact our office.

Thanks,

Jeff

Jeff Morris
Pinellas County DEM / Air Quality

#### Dibble, Dickson

From: Dibble, Dickson

Sent: Tuesday, December 23, 2008 2:48 PM

To: 'McCann, Matt'
Cc: Bowman, Sandy

Subject: AIRS ID# 1030297-004-AG, OLYMPIAN CLEANERS d.b.a. OLYMPIAN CLEANERS, 11926

Seminole Blvd, LARGO, FL 33778-2803

#### Matt,

I received your letter dated 12/17/08 regarding your request to change the status of the subject item facility to INACTIVE. The only question I have is that since this site was found to be vacant during Mr. Jeff Morris's recent attempt to inspect was he able to verify if the equipment had been removed or at least disconnected and whether or not the PERC had been removed from the site? If so, I would like to add the appropriate comments to ARMS when I INACTIVATE it.

Thank you for your assistance.

Merry Christmas and Happy New Year!

Dick.

#### Dickson E. Dibble, ES III

FL Dept of Environmental Protection Div. of Air Resource Management Bureau of Air Monitoring & Mobile Sources Air General Permit Program Tel. (850) 921-9586 FAX (850) 922-6979 ICG-#345

#### Dickson.Dibble@dep.state.fl.us



**Please note**: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

# BOARD OF COUNTY COMMISSIONERS

Nancy Bostock
Neil Brickfield
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Kenneth T. Welch





December 17, 2008

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

Re: Olympian Cleaners, dba - 1030297-004-AG

Mr. Dibble:

Based on a January 11, 2008 inspection at Olympian Cleaners, dba, located at 11926 Seminole Boulevard, Largo, FL this facility is considered shutdown. Inspection findings indicate that:

The building space previously used by this facility for its operations is now vacant.

Therefore, the facility is considered shutdown. Air Quality attempted to contact the Responsible Official, Frank Tsang, but proved unsuccessful. Air Quality intends to deactivate this facility from its tracking files and awaits confirmation from your office that it has been deactivated in the ARMS system.

Should you have any questions relative to this facility's operations please contact the assigned inspector Jeffrey Morris. If you wish to contact me directly, please call 727-464-4422, or email at <a href="mmccann@pinellascounty.org">mmccann@pinellascounty.org</a>.

Sincerely,

Matt McCann, Environmental Program Manager

Air Quality Division

copy: Read file, Permit file (103 0297)

PLEASE ADDRESS REPLY TO: 300 S. Garden Avenue Clearwater, Florida 33756 Phone: (727) 464-4422

FAX: (727) 464-4420 TDD: (727) 464-4106

Website: www.pinellascounty.org





#### PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

### Part III. Notification of Intent to Use General Permit

SUPPORT AL MORITORIO. 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,	•	•
Frank Tsang / Olya  2. Site Name (For example, plant name or number):	ا ممتمه	leaners
2. Site Name (For example, plant name or number):	· WICCII	<u> </u>
·		
3. Hazardous Waste Generator Identification Number:		
F1 D638024618		
FLD638024618  4. Facility Location: Semina Location, FL		
Street Address: 17426 Seminate Blva.		Zio Codo.
City: Largo County: Pin	ellas	Zip Code: 33778
5. Facility Identification Number (DEP Use ONLY - do no	t fill in):	
5. Facility Identification Number (DEP Use ONLY - do no	030	241 <i>-0</i> 04
3990001 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The state of the second of the
Responsible Official	•	
6. Name and Title of Responsible Official:	Day .	
Name: Frank Tsang	Title: Ox	iner
7. Responsible Official Mailing Address:	-	·
Organization/Firm: Street Address: 11926 Seminole Blud		·
City: Largo County: Pinel	as	Zip Code: 33778
8. Responsible Official Telephone Number:		
Telephone: (727)586-2012	Fax: (	) -
Facility Contact (If different from Responsible Official)		·
9. Name and Title of Facility Contact (For example, plant)	nanager):	
10. Facility Contact Address:		
Street Address:		
City: County:		Zip Code:
11. Facility Contact Telephone Number: Telephone: ( ) -	Fax: (	· · · · · · · · · · · · · · · · · · ·
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DEP Form No. 62-213.900(2)

Effective: 2/24/99

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

#### **Facility Information** 1.(a) DRY-TO-DRY MACHINES ONLY How many dry-to-dry machines do you have on-site? For each dry-to-dry machine on-site, please provide the following information: Date Initially Purchased Status Control Device Required\* Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Nov 1991 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 **EXASTING** 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: Control Device Required\* Date Control Device Installed Date Initially Purchased Status (if already included at time of From Manufacturer (circle one) (circle one) purchase, write "SAME") Existing/New Re/CA/Nohe 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? [34] gallons (You must fill this in)

DEP Form No. 62-213.900(2)

(b) If less than 12 months, how many? [\_\_\_\_] months

Effective: 2/24/99

New store: [ New machine [ ]

Unopened store [\_\_\_\_] (date of expected opening \_

Check why it is less than 12 months: New owner: [\_\_\_\_] Did not keep records: [\_\_\_\_]

3. What is the facility's source classification Indicate with an "X". Select one classifi		finitions found in section (3) of Part II?	
Small Area Source	<b>X</b> _]	•	
Dry-to-dry machines only or Transfer only on-site Both machine types on-site	(used 1	ess than 140 gallons of perc per year) ess than 200 gallons of perc per year) ess than 140 gallons of perc per year)	
Large Area Source	[]		
Dry-to-dry machines only on Transfer only on-site Both machine types on-site	(used 2	40 - 2,100 gallons of perc per year) 200 - 1,800 gallons of perc per year) 40 - 1,800 gallons of perc per year)	
4. What control technology is required on ma (Indicate with an "X".)	achines pursuan	t to section (5) of Part II of this notification f	orm?
Existing machines at small area sou (NONE REQUIRED)	rce	New machines at small area source Refrigerated condenser []	
Existing machines at large area sour Carbon adsorber [] Refrigerated condenser []	rce	New machines at large area source Refrigerated condenser []	
5. A facility which contains non-exempt em Rule 62-213.300, F.A.C. Verify that all stea exemption criteria or that no such units exist	m and hot water	r generating units on-site meet the following	irsuant to
All steam and hot water generating units exe No such units on-site	empt []	OR	
How many boilers do you have on-site?	[ <b>1</b> ]		
For each boiler, indicate its horsepower (HP)	rating: [ <u>15</u> ]	[]	
[] N	opane o. 2 fuel oil o. 6 fuel oil	[] natural gas [] No. 4 fuel oil [] Other (please list)	
6. Equipment Monitoring and Recordkeeping	g Information		
Check all logs which are required to be kept	on-site in accor	dance with the requirements of this general p	ermit:
(a) Purchase receipts and solvent purchases/s	olvent addition	log [ <u>×</u> ]	
(b) Leak detection inspection and repair		[ <b>*</b> ] .	
(c) Refrigerated condenser temperature moni	toring	[]	
(d) Carbon adsorber exhaust perc concentrate	ion monitoring	[]	
(e) Startup, shutdown, malfunction plan		[ <del>×</del> ]	

DEP Form No. 62-213.900(2)

Effective: 2/24/99

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7. Surrender	of Existing DEP Air Permit(s)
Please indica	the with an "X" the appropriate selection: The company of the comp
[ <u>*</u> ]	I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are  103 0297-003-AG
[]	No DEP air permits currently exist for the operation of the facility indicated in this notification form.
Responsible	Official Certification
this notij statemen maintain comply v	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the last made in this notification are true, accurate and complete. Further, I agree to operate and a 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.
	Frank Tsang ne of responsible official
Signatur	Frank Jang 1/26/04 Date

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

### **Instructions for Completing Part III of Notification Form**

The Perchloroethylene Dry Cleaning Facility Notification of Intent to Use General Permit, Part III of this form, shall be completed and submitted to the Division of Air Resources Management at least 30 days prior to beginning operations under the general permit. Please type or print clearly all information. A copy of this notification form shall be kept on-site and made available for review by Department personnel.

The responsible official of the facility, as defined in Part II of this notification form, is responsible for ensuring that the facility complies with all applicable terms and conditions of this general permit, as set forth in Part II of this form.

Mail the signed and completed Part III of this form to:

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

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

- 1. Facility Owner/Company Name Enter the name of the corporation, agency, or individual that has ownership or control of the dry cleaning facility for which this notification is submitted.
- 2. **Site Name** Enter the common name, if any, of the facility site; for example, Plant A, Metropolis plant, etc. If more than one facility is owned, a notification form must be completed for each.
- 3. **Hazardous Waste Generator Identification Number** Enter the hazardous waste generator identification number, if known, assigned by the Department to the facility.
- 4. Facility Location Enter the street address and zip code of the facility and the city and county in which it is located.
- 5. Facility Identification Number (DEP Use ONLY) Please leave this space blank. DEP will enter the facility identification number assigned to you by ARMS.

#### Responsible Official

- 6. Name and Title of Responsible Official Enter the name and title of the designated responsible official for the facility who, by signing this form, is certifying that the facility is eligible for a general permit pursuant to the requirements of Part II of this notification form and Rule 62-213.300, F.A.C.
- 7. **Responsible Official Mailing Address** Enter the mailing address for the responsible official if different than the address entered in No. 4 above.
- 8. **Responsible Official Telephone Number** Enter the telephone number and facsimile number, if available, at which the responsible official can be contacted.

#### Facility Contact

9. Name and Title of Facility Contact - Enter the name of the facility contact, if other than the responsible official. For example, a plant manager could be designated as the facility contact for Department inspections.

Effective: 2/24/99

	U.S. Postal Serv CERTIFIED M (Domestic Mail	ice IAIL RECEIPT Only; No Insurance Coverage Provid	ded)
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7556 B	Postage Certified Fee	s Posinaria	
. 1000	Return Receipt Fee (Endorsement Required Restricted Delivery Fee (Endorsement Berning)		
	Total Post OLYM	MPIAN CLEANERS AM PATEL SEMINOLE BLVD	
7001 1140	Street, Apt. LARC or PO Box	4/030297	}
-	PS:Form 3800, Janu	iary 2001 See Reverse for list	ructions.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Addressee  C. Date of Delivery  D. Is delivery address different from Netern 1? Yes
Article Addressed to:	If YES, enter delivery address below:
OLYMPIAN CLEANERS PRIYAM PATEL 11926 SEMINOLE BLVD	
LARGO, FL 33778	3. Service Type  Certified Mall Express Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee)
<sup>2</sup> 7001 1140 0001 7556 3210	
PS Form 3811, August 2001 Domestic Retu	urn Receipt 102595-02-M-1540



# **BEST AVAILABLE COPY**

8068		D MAILTM RECEIPT  Only; No Insurance Coverage Provided)
<b>_</b>	For delivery inform	ation visit our website at www.usps.com⊕
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<u>П</u>	Total Postag	AIRS 1D# 1030297
700		AM PATEL  MPIAN CLEANERS
1~	Street, Apt. No 11920	SEMINOLE BLVD
	or PO Box No.  City, State, ZiF	GO, FL 33778
	Oly, State, ZIF	; -
	PS Form 3800, June 2002	See Reverse for Instructions

<ul> <li>Complete items 1, 2, and 3. And complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  C. Date of Delivery  D. Is delivery address different from item 1? Yes
ATRICITED # 1930397  PRIYAM PATEL OLYMPIAN CLEANERS	If YES, enter delivery address below:
LARGO, FL 30778	3: Şervice Type  Certified Mail
	4. Restricted Delivery? (Extra Fee) Yes
7003 0500 0004 0144 8	068



• Sender: Please print your name, address, and ZIP+4 in this box.

DARM/MOBILE SOURCE CONTROL PROGRAMDEPT. OF ENVIRONMENTAL PROTECTION MAIL STATION 5510

PI AIR STONE ROAD

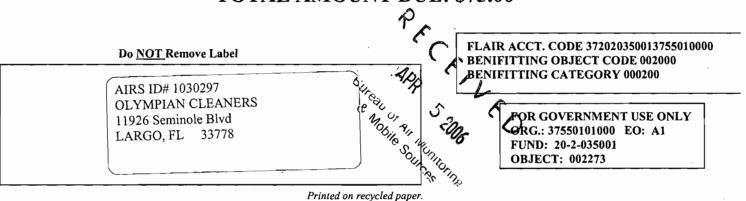
TI ORIDA 32399-2400

#### 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.

460510 APR 3200S

# **TOTAL AMOUNT DUE: \$75.00**



#### 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.

Do NOT Remove Label

AIRS ID# 1030297 **OLYMPIAN CLEANERS** 11926 Seminole Blvd LARGO, FL 33778

TOTAL AMOUNT DUE: \$50.00

Nobile Sources

Programmed Air Monitoring

TOTAL AMOUNT DUE: \$50.00

Nobile Sources

Programmed Air Monitoring

FOR COVERNMENT USE ONLY

ORG. 5/350101000 EO: A1 FUND: 20-2-035001

**OBJECT: 002273** 

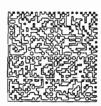
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ENVIRONMENTAL MANAGEMENT Air Quality

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

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