

# Department of Environmental Protection

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

Virginia B. Wetherell Secretary

September 19, 1996

Mr. Abdallah Kleih Granada Cleaners 1256 County Road #1 Dunedin, Florida 34698

Dear Mr. Klein:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 26, 1996.

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

sety lle

Bureau of Air Monitoring and Mobile Sources

/DD

cc: Mr. Gary Robbins, Pinellas County

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



### Department of Environmental Protection

Jeb Bush Governor Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400 June 29, 2001

David B. Struhs Secretary

Mr. Abdallah Kleib Granada Cleaners 1256 County Road #1 Dunedin, Florida 34698

Dear Mr. Kleib:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on June 27.

In reviewing your submittal, it was noted that Granada Cleaners elected to surrender its existing Title V air general permit (AIRS ID 1030311). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

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

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

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

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 840/921-9583.

Sincerely,

Sandra Bowman

Bureau of Air Monitoring and Mobile Sources

SB/

Enclosure

cc: Mr. Gary Robbins, Pinellas County

"More Protection, Less Process"

Printed on recycled paper.

### Perchloroethylene Dry Cleaning Facility Notification

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

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
Crranada Cleaners
2. Site Name (For example, plant name or number):
Granada Cleaners  3. Hazardous Waste Generator Identification Number:
3. Hazardous Waste Generator Identification Number:
FLD981031099
4. Facility Location: Street Address: 1250 Country hoad #1 City: Ounedin Country: Pinellass Zip Code: 34698
City: Quartage Country Pine 11955 Zip Code: 34698
City: Ounedin County: Pinellass Zip Code: 34698
5. Facility Identification Number (DEP Use):
1030311
Responsible Official
Nesponsible Official
6. Name and Title of Responsible Official:
Abdallah Hleih -owner
7. Responsible Official Mailing Address: Organization/Firm:
Street Address: 1256 Country Road #1 City: Dunedin Country Pinellas Zip Code: 34698
City: Dinedia County: Dine 1/05 Zip Code: 34698
8. Responsible Official Telephone Number:
Telephone: (813) 734-0302 Fax: ( ) -
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: Zip Code:
11. Facility Contact Telephone Number:
Telephone: ( ) - $\longrightarrow$ Fax: ( ) -
1 0 1

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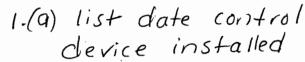
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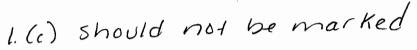
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Bureau of Air Monitoring & Mobile Sources

### # 1030311

P.14





3. mark new small area source with an "x"

P.15 4. New small area source r. c. Should be marked only (f) should be marked

#### **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
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit	Su	PRemo	1 850	53	1)97	y clean	in	9 Mai	chine
(1) w/ ref. condenser	#1	01-Jan-96				J 10-3-	٦	1 77 20 20	
(2) w/ carbon adsorber		yes							
(3) w/ no controls									
Washer Unit		NA						•	
(4) w/ ref. condenser									
(5) w/ carbon adsorber						9			
(6) w/ no controls									
Dryer Unit		NA			•	•		•	
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit		NA			_				
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are required, but not yet installed []  (c) No control devices are required to be installed []									
2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [ ] TO									
(b) If less than 12 months, how many? [] months  Check why it is less than 12 months: New owner: [] New store: [] Did not keep records: []									
3. What is the facility's source classification based on the definitions found in section (3) of Part II? (Indicate with an "X". Select one classification only.)									
Existing small ar	ea so	urce []	Ne	ew sn	nall area sou	rce [hh	]		
Existing large are	ea sou	ırce []	Ne	ew la	rge area sour	rce [	]		

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 $a \in \mathcal{A}(\mathfrak{s}_1) \setminus \{1, 2, 3, \dots \}$ 

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<ol> <li>What control technology is required on machine (Indicate with an "X".)</li> </ol>	es pursuant to section (5) of Part II of this notification form?
Existing large area source Carbon adsorber  [X]	Refrigerated condenser [X]
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser  []	
to Rule 62-213.300, F.A.C. Verify that all steam a exemption criteria or that no such units exist on-sit All steam and hot water generating units on-site (	l) have a total heat input of 10 million BTU/hr or less (298 natural gas except for periods of natural gas curtailment
Fauinment Menitorin	g and Recordkeeping Information
	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	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

### Surrender of Existing Air Permit(s)

	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
LX	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notif statemen maintain	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 sits made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.
I will pro	omptly notify the Department of any changes to the information contained in this notification.
Alca	Lallah Kleil Bate

Granala

# 1030311

P. 14

1.(9) list date control device installed

1. (c) should not be marked

3. mark new small area source with an "x"

P.15

4. New small area source r. c. should be marked only

(f) should be marked

### Perchloroethylene Dry Cleaning Facility Notification

#### Facility Name and Location

I Ferilia Our Month of the Common of the Com
1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
Cranda Cleanors
2. Site Name (For example, plant name or number):
•
3. Hazardous Waste Generator Identification Number:
3. Hazardous waste Generator Identification Number.
FLD981031099
A -   中 - '1'e,
Street Address: 1256 Country hoad #1 City: Ounedin Country Pinellass Zip Code: 34698
City: Ounedin County: Pinellass Zip Code: 34698
5. Facility Identification Number (DEP Use):
1030311
Responsible Official
Nesponsible Official
6. Name and Title of Responsible Official:
Abdallah Heih -owner  7. Responsible Official Mailing Address:
• • • • • •
Street Address: 1256 Country Road #1
Organization/Firm: Street Address: 1256 Courty Road #1 City: Dunedin County: Pinellas Zip Code: 34698
8. Responsible Official Telephone Number:
Telephone: (813) 734-0302 Fax: ( ) -
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
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: ( ) -

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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
<b>.</b> .		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit	50	PRemo	1 850	53	1)47	y clean	in	9 Mac	chine
(1) w/ ref. condenser		01-Jan-96		100			, ,	7 70000	I
(2) w/ carbon adsorber		yes	7	707					
(3) w/ no controls					_				
Washer Unit		$\sim$ A			•	•			
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		NA			<u>'</u>				
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit		NA							
(10) w/ ref. condenser				T					
(11) w/carbon adsorber									
(12) w/ no controls									<del> </del>
(b) Control devices are required, but not yet installed []  (c) No control devices are required to be installed []									
2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  [									
(b) If less than 12 months, how many? [] months  Check why it is less than 12 months: New owner: [] New store: [] Did not keep records: []									
3. What is the facility's source classification based on the definitions found in section (3) of Part II? (Indicate with an "X". Select one classification only.)									
Existing small ar	ea so	urce []	N	ew sn	nall area sou	rce			
Existing large area source [] New large area source []									

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4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)					
	sting large area source bon adsorber	Let UL	Refrigerated condenser	X	
	small area source	X 6			
	large area source igerated condenser				
to Rule 62-21		that all steam and		use the general permit pursuant on-site meet the following	
boiler HP or	less), and (2) are fired	exclusively by na		nillion BTU/hr or less (298 ls of natural gas curtailment fired.	
All steam and No such units	hot water generating on-site	units exempt			
	Equipme	nt Monitoring a	nd Recordkeeping Inform	nation	
Check all logs	s which are required to	be kept on-site i	n accordance with the requ	irements of this general permit:	
(a) Purchase r	receipts and solvent pu	rchases			
(b) Leak detec	ction inspection and re	pair	•		
(c) Refrigerate	ed condenser temperat	ture monitoring			
(d) Carbon ad	lsorber exhaust perc co	oncentration moni	itoring		
(e) Instrument	t calibration				
(f) Start-up, s	shutdown, malfunction	plan			

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

No air permits currently exist for the operation of the facility indicated in this notification form.
Responsible Official Certification
rsigned, am the responsible official, as defined in Part II of this form, of the facility addressed in tion. I hereby certify, based on information and belief formed after reasonable inquiry, that the made in this notification are true, accurate and complete. Further, I agree to operate and e air pollution control equipment described above so as to hall terms and conditions of this general permit as set forth in Part II of this notification form.
otly notify the Department of any changes to the information contained in this notification.
n e

### TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:

ANNUAL

COMPLAINT/DISCOVERY

RE-INSPECTION □

TIME IN: 1:00p.m.	TIM	E OUT: 2:25p.m.	AIRS ID#	1030311			
TYPE OF FACILITY:	Perchloroethyle	ne Dry Cleaner					
FACILITY NAME:	Granada Clean	iers	DATE: <b>May 20,</b>	1997			
FACILITY LOCATION:	1256 Country F	Rd #1, Dunedin, FL	. 34698				
RESPONSIBLE OFFICIAL:	Abdallah Kleir	1	PHONE NUMBER:	813-734-002			
Based of the results of the compliance requirements evaluated during this inspection, the facility is foun to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).  Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:  COMPLIANCE REQUIREMENT/PROBLEM  FOLLOW-UP ACTION REQUIRED							
Monthly purchase records wer as a twelve month rolling aver	e not maintained	Develop and implen	nent a recordkeeping propurchases (perc) as a tw	rocedure that			
Could not confirm that temper designed to measure 45°F with ±2°F.		temperature sensor in accuracy of ±2°F, or	from the manufacturer of states of the state	45°F with an other method that			
Evaporator for separator waste incorporate a pre-filtration sys		separator water as h	to either dispose of pe azardous waste, or inco th the evaporator (as pe	orporate a carbon			
Did not maintain a log of leak inspection and repair records.	detection		nent a leak detection in intain a log of leak dete	_			
Did not measure and record the temperature of the refrigerated the dry-to-dry machine (dryer, weekly basis.	condenser on	and record the outle	nent a monitoring prog t temperature on a week red at the end of the dry	kly basis. The			
The Annual Compliance Certification  DATE OF NEXT INSPECTION:	The Annual Compliance Certification form has been properly certified and submitted to the inspector.  Yes No DATE OF NEXT INSPECTION:  Tune 10, 1997						
NSPECTION CONDUCTED BY		Jeffre	Yernate Morris				
NSPECTOR'S SIGNATURE:	William From	· · · · · · · · · · · · · · · · · · ·		4422			

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Revised 10/96

. AIRS,ID#: 1030311

pol)

Revised 10/10/9

### DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Granada Cleaners DATE: 5/20/97
FACILITY LOCATION: 1256 County Rd #1
Dunedin, FL 34698
Annual Reporting Period: May 20, 1996 TO May 20, 1997
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.   YES  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:
Evaporator for separator wastewater does not incorpora a pre-filtration system.  Exact period of non-compliance: from May 20, 1996 to May 20, 1997
Action(s) taken to achieve compliance: Facility may choose to either dispos
Method used to demonstrate compliance: hozordous waste, or in corporate
(arbon filtration system with evaporator. #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:
Monthly nurchase records were not maintained a twelve month rolling average.  Exact period of non-compliance: from May 20, 1996 to May 20, 1997
Action(s) taken to achieve compliance: Develop and implement a record keeping procedure that maintains monthly
Method used to demonstrate compliance: purchases (perc) as a 12 mo, rolling over
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: A ROALL AH Lil Signature 5-20-97 Name (Please Print) Signature Date
RECEIVED

\*This form is made available to you as an aid in order to meet your annual compliance certification requitements. Itseet the discretion of the responsible official to use this form.

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Bureau of Air Monitoring & Mobile Sources

### DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Granada Cleaners DATE: 5/20/9
FACILITY LOCATION: 1256 County Rd#1
Dunedin FL 34698
Annual Reporting Period: May 20, 1996 TO May 20, 199
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.   YES  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:  Did not measure and record the outlet temperature the refrigerated condenser on the dry-dry machine on a weekly is Exact period of non-compliance: from May 20, 1996 to May 20, 1997  Action(s) taken to achieve compliance:  Develop and implement a monitoring period stated above:  Measure and record outlet temperature and record outlet temperature and weekly basis
#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:  Could not confirm that temperature sensor was designed to measure 45°F with an accuracy of ±2°F. Exact period of non-compliance: from May 20, 1996 to May 20, 1997  Action(s) taken to achieve compliance: Obtain verification from the manufact that the temperature sensor is designed to measure 45°F with an accuracy of the measure 45°F with 4
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: ARIALLAH Led Signature S-20 9 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.

### DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Granda Cleans	يرح	DATE: 5/25/9
FACILITY LOCATION:	1256 County Ro	1#1	
	Ducedia Fl 3	4698	
Annual Reporting Period:	May 20, 1996	o to May	20, 19,97
	on of the Title V general air permit, my facili rative Code (F.A.C.), during the period cover	· —	<b>—</b>
If NO, complete the following			
•	general permit that has not been in continuous	•	<b>-</b> -
Did not mo and repair a Exact period of non-compliance	_ <i>,</i>	to May	20, 1991
Action(s) taken to achieve com  Method used to demonstrate co	inspection and to	lement a leak epair program detection insp	detection Mointain section and
#2. Term or condition of the g	eneral permit that has not been in continuous		ing period stated above:
Exact period of non-compliance	re: from	to	
Action(s) taken to achieve com	pliance:		
Method used to demonstrate co	ompliance:		
ji .			
made in this notification are tr	ereby certify, based on information and beliej we, accurate and complete. Further, my anno asse receipts, does not exceed 2,100 gallons p on facilities.	ual consumption of perchloroe	thylene solvent, based
RESPONSIBLE OFFICIAL:	ABDALLAH Heil	12	5-20-97
	Name (Please Print)	Signature	Date

RECEIVED

\*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.

10 1997

### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT

	COMPLIANCE	E INSPECTION	CHECKLIST		
TYPE OF INSPECTION:	ANNUAL RE-INSPECT	о пои	COMPLAINT/DISC	OVERY	
AIRS ID#: 103031			•	11	
FACILITY LOCATION:		,			<del>.</del>
	Duned	in, FL	34698		
PART I: NOTIFICATION					
(check appropriate box)					
Existing facility notified DA	RM by 9/1/96 *				Ø
2. New facility notified DARM	30 days prior to s	tartup			
3. Facility failed to notify DAR	M to use general p	permit			
	The second secon				
PART II: CLASSIFICATION	N				
Facility indicated on notificati	on form that it is	:			
(check appropriate box)					
A.  1. Existing small area sour dry-to-dry only, x<140 gal/y transfer only, x<200 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)	τ	transfer only, a both types, x<	/, x<140 gal/yr <<200 gal/yr	<b>d</b>	
3. Existing large area sour dry-to-dry only, 140 <x<2, (constructed="" 10="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" before="" both="" gal="" only,="" td="" transfer="" types,=""><td>00 gal/ут gal/ут Иуг</td><td>transfer only, 2 both types, 140</td><td>area source v, 140<x<2, 100="" gal="" yr<br="">200<x<1,800 gal="" yr<br="">0<x<1,800 gal="" yr<br="">n or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td></td><td></td></x<2,>	00 gal/ут gal/ут Иуг	transfer only, 2 both types, 140	area source v, 140 <x<2, 100="" gal="" yr<br="">200<x<1,800 gal="" yr<br="">0<x<1,800 gal="" yr<br="">n or after 12/9/91)</x<1,800></x<1,800></x<2,>		
This is a correct facility classif	ication	MY ON			
If no, please check the appropr	iate classification:			•	
	ed for a general pe Is above limits and		above a general permit		
B. The total quantity of perchlofacility was <u>55</u> gallons.	proethylene (perc)	purchased within	the preceding 12 month	s by this dry o	cleaning

PART III: GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
Storing perchloroethylene in tightly scaled and impervious containers?	MA DN
2. Examining the containers for leakage?	BY ON
3. Closing and securing machine doors except during loading/unloading?	DY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	dy on
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ON/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 refrig (complete A below).	erated condenser
If classification 3 has been checked, the machine should be equipped with either a condenser or a carbon adsorber (complete A and B below). Carbon adsorber must installed prior to September 22, 1993	~
If classification 4 has been checked, the machine should be equipped with a refrig (complete A and B below).	erated condenser
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)	١.
1. Equipped all machines with the appropriate vent controls?	A DN
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	MY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	MY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	MY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	DY ON
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	MY ON
B. Has the responsible official of an existing large or new large area source also:	
Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	<b>N</b>

2. Measured and recorded the washer exhaust temperature at the condenser	
inlet and outlet weekly?	
Is the temperature differential equal to or greater than 20° F?  3. Measured and recorded the perc concentration in the exhaust stream weeks at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	e dy dn
3. Measured and recorded the perc concentration in the exhaust stream week	
at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	OY ON ON/A
Is the perc concentration equal to or less than 100 pan?	OY ON OWA
	<b></b>
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction,	
or expansion; is at least 2 duct diameters upstream from any bend, contraction,	
or expansion; and downstream from no other inlet?	DY DN
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual	
condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	מאום אם עם
PART V: RECORDKEEPING REQUIREMENTS	·
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	EN ON
2. Maintained rolling monthly averages of perc consumption?	DY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	DY BW
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 W
4. Maintained calibration data? (for direct reading instruments only)	באת אם עם A
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON N/A
6. Maintained startup/shutdown/malfunction plan?	MO NO
7. Maintained deviation reports?	DY WN
Problem corrected? (No deviation report)	OY ON
8. Maintained compliance plan, if applicable?	DY ON MYA
PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	NO YE
2. Which method of detection is used by the responsible official?	,
· · · ·	-
Visual examination (condensed solvent on exterior surfaces)	<b>a</b>
Visual examination (condensed solvent on exterior surfaces)  Physical detection (airflow felt through gaskets)	el el

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)

	If using direct-reading instrume	ntation,	, is the eq	uipment:		
	a. Capable of detecting p	oere vapo	or concent	rations in france of 0-500 ppm?	OY C	מו
	b. Calibrated against a s	tandard	gas prior	b and after each use		
	(PID/FID only)?	$\cap$ $I$	1		OY C	או
c. Inspected for leaks and obvious sights of wear on a weekly basis?						IN
d. Kept in a clean and secure area when not in use?					DY C	IN
	e. Verified for accuracy	by use o	f duplicate	e samples (calorimetric only)?	DY C	IN
3. H	as the facility maintained a leak log?				□Y Œ	W
4. T	he following areas should be checked	for leaks	s by the in	spector:		
		Leak I	Detected?		Leak D	etected?
	Hose connections, fittings, couplings, and valves	ΩY	M	Muck cookers	ΩY	ΕΝ
	Door gaskets and seating	ΩY	QN	Stills	ΟY	EN
	Filter gaskets and scating	ΩY	MED	Exhaust dampers	ΠY	MED
	Pumps	П¸Y	ΒN	Diverter valves	ΠY	M
	Solvent tanks and containers	ΩY	1700	Cartridge filter housings	ΠY	MM
	Water separators	ΩY	ÚΝ			
	Abdallon Kle Name of Responsible Officia	eih.				

Date of Lispection

Tune 10 1997
Approximate Date of Next Inspection

### Supremo

Model 850 SB 53 30 Hb Serial# 50729304062

- Evaporates wastewater without treatment.
- No monthly rolling perc aug.
- No weekly teak log
- No weekly temperature sensor 109.
- Provided a copy of deviation reporting form

- Hurst Natural Gas Boiler Model#

Ser# 0895 45239

- Needs Secondary Containment for

Perc. #Olvent + Perc Waste (Steel Pan

	INSPECTI	ON SUMMARY		V
TYPE OF INSPECTION:	ANNUAL 🗆	COMPLAINT	DISCOVERY 🗆	RE-INSPECTION I
TIME IN: 1:20 p.m.	TII	ME OUT: 2:35 p.r	m. AIRS ID#	1030311 001
TYPE OF FACILITY:	Perchloroethy	ylene Dry Clean	er	
FACILITY NAME:	Granada Cle	eaners	DATE: Sept	tember 9, 1997
FACILITY LOCATION	: 1256 Countr	y Rd #1, Duned	in, FL 34698	
RESPONSIBLE OFFICE	AL: Abdallah Kl	eih	PHONE NUMBER:	734-0302
to be in compliance	with DEP Rule 62-2 s of the compliance rancies were noted:	213.300, Florida A equirements evalu	ated during this inspecting the code (F.A. atted during this inspecting the code (F.A. atted during this inspecting the code (FOLLOW-UP ACTION)	A.C.). ion, the following
Monthly purchase records as a twelve month rolling			mplement a recordkeep nthly purchases (perc) as e.	~ -
Did not maintain a log of inspection and repair reco		-	mplement a leak detecti n. Maintain a log of lea ords.	<u>-</u>
Did not measure and record temperature of the refriger the dry-to-dry machine (dweekly basis.	rated condenser on	and record the	mplement a monitoring outlet temperature on a measured at the end of the F.	weekly basis. The
Comments: Facility did not have record				Yes ☑ No □
The Annual Compliance Certific DATE OF NEXT INSPECTI			OMITTED to the inspector.  (Approximate)	1 C2 M 1/10 M

Page \_\_ of \_\_

INSPECTION CONDUCTED BY

INSPECTOR'S SIGNATURE:

Revised 10/96

\_ PHONE NUMBER: <u>464-4422</u>

### PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	ON 0	COMPLAINT/DISC	COVERY 🗆	
AIRS ID#: 10303   1  FACILITY NAME:  FACILITY LOCATION:		ada Count	leaners	:_2:35 p	_m_
PART I: NOTIFICATION		1	·		
(check appropriate box)					===
Existing facility notified DARM	1 by 9/1/96 °			ਤ	
2. New facility notified DARM 30	days prior to sta	irtup			
3. Facility failed to notify DARM	to use general pe	ermit		0	
PART II: CLASSIFICATION					
A.  1. Existing small area source dry-to-dry only, x<140 gal/yr transfer only, x<140 gal/yr both types, x<140 gal/yr (constructed before 12/9/91)	form that it is:	2. New small dry-to-dry only transfer only, a both types, x<1 (constructed or	, x<140 gal/yr :<200 gal/yr		
3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" before="" both="" classificat<="" correct="" facility="" gall="" is="" only,="" td="" this="" transfer="" types,="" yr=""><td>gal/yr /yr</td><td>transfer only, 2 both types, 140</td><td>area source , 140<x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,></td><td></td><td></td></x<2,>	gal/yr /yr	transfer only, 2 both types, 140	area source , 140 <x<2, 100="" gal="" yr<br="">00<x<1,800 gal="" yr<br=""><x<1,800 gal="" yr<br="">or after 12/9/91)</x<1,800></x<1,800></x<2,>		
If no, please check the appropriate	classification:			•	
☐ facility qualified ☐ facility exceeds a					
B. The total quantity of perchlorod facility was 36.2 gallons.	ethylene (perc) p	urchased within	he preceding 12 month	s by this dry clea	ning

PART III: GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	/
1. Storing perchloroethylene in tightly scaled and impervious containers?	Dry On
2. Examining the containers for leakage?	ØY, ON
3. Closing and securing machine doors except during loading/unloading?	DA DN
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DAY CON
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ZN/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).

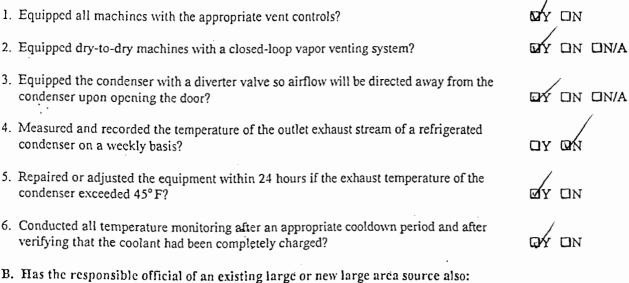
If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993

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. 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?



DY DY

Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	
Is the temperature differential equal to or greater than 20° F?	OY ON
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber	
if machines are equipped with a carbon adsorber?	OY ON ON/A
Is the perc concentration equal to or less than 100 ppm?	OY ON
4. Assured that the sampling port on the carbon adsorber expansion measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 fluct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ОУ ОИ
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON ON/A
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	DY ON
2. Maintained rolling monthly averages of perc consumption?	OY ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	OY M
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	OY ON
4. Maintained calibration data? (for direct reading instruments only)	OY ON ON/A
5. Maintained exhaust duct monitoring data on perc concentrations?	oy on N/A
6. Maintained startup/shutdown/malfunction plan?	EY ON
7. Maintained deviation reports?	DY ON
· Problem corrected?	DY DN
8. Maintained compliance plan, if applicable?	OY ON WN/A
PART VI: LEAK DETECTION AND REPAIRS	
1. Does the responsible official conduct a weekly leak detection and repair inspection?	MY ON
2. Which method of detection is used by the responsible official?	/
Visual examination (condensed solvent on exterior surfaces)	4
Physical detection (airflow felt through gaskets)	च्
Odor (noticeable perc odor)	幺

Use of direct-reading instrumentation (FID/PID/calorimetric tubes)

If using direct-reading instrum	entation	, is the equi	ipment:		
a. Capable of detecting	perc vap	or concentra	ations in a range of 0-500 ppm?	ΠY	<u>ייי</u> אַם
b. Calibrated against a (PID/FID only)?	standard	gas prifer to	and one Kehruse	ΩY	מם
c. Inspected for leaks at	id obviou	is signs of v	vear on a weekly basis?	$\Box$ Y	ПИ
d. Kept in a clean and secure area when not in use?				□Y.	מם
e. Verified for accuracy	by use o	f duplicate	samples (calorimetric only)?	$\Box$ Y	מאַם
3. Has the facility maintained a leak log?				ΠY	on
4. The following areas should be checked	for leak	s by the insp	pector:		
	Leak I	Detected?		Leak	Detected?
Hose connections, fittings, couplings, and valves	ΩY	NED	Muck cookers	ΠY	Фи
Door gaskets and seating	ΠY	ŒN	Stills	ΠY	(ZAV
Filter gaskets and scating	$\Box$ Y	ØN	Exhaust dampers	ΠY	COX.
Pumps	Ο'λ	QN	Diverter valves	ΠY	<b>13</b> 11
Solvent tanks and containers	ΠY	DN	Cartridge filter housings	ΠY	<b>₽</b> ⁄1
Water separators	ΩY	CZ/V			
Abdolloh Kle	ìh				

Abdallah Kleih
Name of Responsible Official
Jeff Morris
Inspector's Name (Please Print)
Mus Thans
Inspector's Signature
// <b>/</b> //
VIV

Date of Inspection

9/23/97

Approximate Date of Next Inspection

#### ADDITIONAL SITE INFORMATION:

Model Suprema 85053 850 Series

- Facility has not Kept a bi-weekly leak log on sitc.
- Facility has not kept a monthly rolling average on site.
- Facility has not kept a weekly temperature 169 on site
- FacilityAn
- Recortikeeping, perc purchases maintained in chronological order
- No secondary containment for perc waste refer to FDER
  - Send advisory letter

### TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🗆	COMPLAINT/D	ISCOVERY 🗆	RE-	INSPECTION 🖾
TIME IN: 3:00 p.m.	TIME OU	T: 3:15 p.m.		AIRS ID#	1030311
TYPE OF FACILITY:	Perchloroethylen	e Dry Cleane	er		
FACILITY NAME:	Granada Cleane	ers	DA	TE: 12/04/19	997
FACILITY LOCATION:	1256 Country Ro	d #1, Dunedii	n, FL 34698		
RESPONSIBLE OFFICIAL	: Mr. Abdallah Kle	eigh	PHONE	NUMBER: 8	813-734-0302
Based of the results of to be in compliance with Based on the results of compliance discrepance	ith DEP Rule 62-213.3 f the compliance requi	300, Florida Ad rements evalua	lministrative C ted during this	Code (F.A.C.) inspection,	the following
COMPLIANCE REQUIF	REMENT/PROBLEM	F	OLLOW-UP	ACTION RE	QUIRED
Comments:					
				•	
The Annual Compliance Certificati DATE OF NEXT INSPECTION		certified and sub	_	ector. Ye	s □ No □
INSPECTION CONDUCTED E	av. Margaret	V. Hennis	(Approximate)		
INSPECTOR'S SIGNATURE:	Majaret D. Leurs	PH	(Please Print) ONE NUMBE	R: 813-46	:4-4422
	Pa	ge <u>/</u> of <u>/</u>			Revised 10/96

GRANDA1.DOC

### /

### PERCHLOROETHYLENE DRY CLEANERS

### TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INSPECTIO	ON B
AIRS 10#: 1830311 DATE: 14/4/9	7 time in:3 :00 time out: _33:15
FACILITY NAME: Avenador Class	~erS
FACILITY LOCATION: 1256 Com	The 34698'
RESPONSIBLE OFFICIAL: Abdallah Keigi	PHONE: 734-0302  PHONE:
PART I: NOTIFICATION	
(check appropriate box)	·.
1. New facility notified DARM 30 days prior to star	rtup
2. Facility failed to notify DARM to use general per	rmit 🗆
DIDT'R O' LOCYTYOL TOO'	
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box)  A.	☐ No notification form ☐ Drop store/out of business/petroleum
1. Existing small area source	2. New small area source
dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91)
dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr	dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr
dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed before $12/9/91$ )  3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr	dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after $12/9/91$ )  4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr
dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91)  5. This is a correct facility classification  If no, please check the appropriate classification  facility qualified for a gen	dry-to-dry only, $x < 140$ gal/yr transfer only, $x < 200$ gal/yr both types, $x < 140$ gal/yr (constructed on or after $12/9/91$ )  4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$ )  BY $\square N$ $\square$ Can not determine

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?	QY □N □N/A
2. Examining the containers for leakage?	DY ON ON/A
3. Closing and securing machine doors except during loading/unloading?	DY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	Dy On On/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON 1917/A
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part	<i>y</i> .
If classification 2 has been checked, the machine should be equipped with a refu (complete A below).	igerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber minimum installed prior to September 22, 1993	_
If classification 4 has been checked, the machine should be equipped with a refr (complete A and B below).	igerated 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?	ey on
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	QY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	GYÝ □N □N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	GYÝ □N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	BÝ ON

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?	ΠY	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΠY	ПN	□N/A
	Is the temperature differential equal to or greater than 20° F?	$\Box$ Y	ПΝ	□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?	ΟY	אם	□N/A
	Is the perc concentration equal to or less than 100 ppm?	$\Box$ Y	□и	□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?	ΠY	ИС	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	Y (	ЛС	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	_ OY (	אכ	□N/A
PA	RT V: RECORDKEEPING REQUIREMENTS			

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	GY ON
2. Maintained rolling monthly averages of perc consumption?	מם צים
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	©Y □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?	⊕Y □N □N/A
4. Maintained calibration data? (for applicable direct reading instruments)	OY ON ONA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON DAYA
6. Maintained startup/shutdown/malfunction plan?	BY DN
7. Maintained deviation reports?	□Y □N □N/A
Problem corrected?	CHY ON ON/A
8. Maintained compliance plan, if applicable?	A/AD NO YO

PA	PART VI: LEAK DETECTION AND REPAIRS .							
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair							
	inspection?					CPA	5	ИС
2.	Has the facility maintained a leak log	?				₽Y	5	NC
3.	Does the responsible official check the	e followin	g ar	eas for leaks?				
	Hose connections, fittings, couplings, and valves	GY (	מכ	□N/A	Muck cookers	ΩY	ΠN	□N/A
	Door gaskets and seating	UY C	NL	□N/A	Stills	ΘY	ΠN	□N/A
	Filter gaskets and seating	' 19Y [	NC	□N/A	Exhaust dampers	ΩY	ПN	□N/A
	Pumps	GYC	NE	□N/A	Diverter valves	ΘY	ПN	□N/A
	Solvent tanks and containers		NC	□N/A	Cartridge filter housings	ΩY	ПN	□N/A
	Water separators	ØY □	NC	□N/A				
4.	Which method of detection is used by	the respon	nsib	le official?				
	Visual examination (condensed	solvent or	ext	erior surfaces)		<u> </u>		
	Physical detection (airflow felt the	hrough ga	sket	is)		<u> </u>		
Odor (noticeable perc odor)						G·		
	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)							
	Halogen leak detector							
	If using direct-reading instrumentation, is the equipment:						□N/A	
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?						ΠN	
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					ΟY	ПN	
	c. Inspected for leaks a	nd obviou	s sig	gns of wear on a	weekly basis?	ΠY	ΠN	
	d. Kept in a clean and secure area when not in use?					ΩY	ПN	
	e. Verified for accuracy				(calorimetric only)?	ΩY	ΠN	
		•						
	1170				12/4/67			
	Inspector's Name (Please Pri	nt)			Date of Inspec	ction		
					ŕ		,	
	Margaret o danie				May 1998 Approximate Date of N			
	Inspector's Signature			<del></del>	Approximate Date of N	lext I	nspec	tion

ADDITIONAL SITE INFORMATION:	
Source has Tovenday containment-under worde Storage.  and Machine.	
Jource This Iconday Contament-under wester Storage.	
and Machine.	
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## TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INS	SPECTION:	ANNUAL	COMPLA	AINT/DISCOVE	ERY 🖵	RE-INSPECTION $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	
	1030311 001 NAME:		E: <u>/2/2//9</u> ada Cleaners		N: <u>12:40</u>	TIME OUT:	
	LOCATION:		Country Rd #1				_
		Dunec	lin, FL, 34698				_
RESPONSI	BLE OFFICIA	AL: Abdall	ah Kleih		Phone N	No.:734-002	
Permi	t No. <u>1030311-0</u>	01-AG	Exp. Date: 09	9/06/2001	-		
<u> </u>				ents evaluated durin Administrative Co		ection, the facility is found to be in	
			pliance requireme		ing this inspe	ection, the following compliance	

### **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 dete perchloroethylene solvent consumption.		Maintain all purchase receipts in a log kept on-site for determination of perchloroethylene solvent consumption.
ড	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 $45^{\circ}F$ with an accuracy of $\pm 2^{\circ}F$ , 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.
마	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				
D	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: No monthly records	Eine august 1998, No biweelely leak				
	Comments: No monthly records since August 1998. No biweekly leake los Sure 8/22/98. No longerature monitoring record since 9/15/98					
	If the Inspection Summary Report indicates follow-up actions are required, you must take immediate corrective measures to achieve compliance. Pinellas County will perform a follow-up inspection to determine that proper corrective actions have been taken.					
	Inspection Conducted by: Margaret Henni	is				
	Inspector's Signature: ma garet	V. Hennis				
	Phone Number: 464-4422					

### PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

AIRS ID#: 1030311 001 DATE: 12/21/98 TIME IN: 10.40 TIME OUT: 10.00  FACILITY NAME: Granada Cleaners  FACILITY LOCATION: 1256 Country Rd #1  Dunedin, FL, 34698  RESPONSIBLE OFFICIAL: Abdallah Kleih PHONE: 734-002  CONTACT: Charled Klack (son) PHONE: 734-002  PART I: NOTIFICATION  (Check appropriate box)  1. Existing facility notified DARM By 9/1/96  2. New facility indicated on notification form that it is: (Check appropriate box)  3. Facility failed to notify DARM to use general permit  PART II: CLASSIFICATION  Facility indicated on notification form that it is: (Check appropriate box)  1. Existing small area source dry-to-dry only, x > 140 gallyr both types, x   40 gallyr both types, x   40 gallyr both types, x   40 gallyr constructed before 12/9/91)  3. Existing large area source dry-to-dry only, 140\cdot x - 2, 100 gallyr both types, x   40 gallyr both types, x   40 gallyr transfer only, 200		ANNUAL RE-INSPECTION	— COMPLAINT/L	DISCOVERY 🖵	
PART I: NOTIFICATION  (Check appropriate box)  1. Existing facility notified DARM By 9/1/96  2. New facility notified DARM 30 days prior to startup  3. Facility failed to notify DARM to use general permit  PART II: CLASSIFICATION  Facility indicated on notification form that it is: (Check appropriate box)  A.  1. Existing small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (Constructed before 12/9/91)  3. Existing large area source  4. New large area source	FACILITY NAME:	Granada Cleane 1256 Country Rd #	ers	<u> 40</u> тіме оит: <u>/:/</u>	/D
Check appropriate box     1. Existing facility notified DARM By 9/1/96     2. New facility notified DARM 30 days prior to startup     3. Facility failed to notify DARM to use general permit     PART II: CLASSIFICATION	$\alpha = \alpha = 1$	_			,
1. Existing facility notified DARM By 9/1/96  2. New facility notified DARM 30 days prior to startup  3. Facility failed to notify DARM to use general permit  PART II: CLASSIFICATION  Facility indicated on notification form that it is: (Check appropriate box)  A.  1. Existing small area source dry-to-dry only, x-140 gal/yr transfer only, x-200 gal/yr both types, x-140 gal/yr (Constructed before 12/9/91)  3. Existing large area source  4. New large area source  4. New large area source	PART I: NOTIFICATION				
Facility indicated on notification form that it is:  (Check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr both types, x < 140 gal/yr (Constructed before 12/9/91)  3. Existing large area source    No notification form	<ol> <li>Existing facility notified D</li> <li>New facility notified DAR</li> </ol>	M 30 days prior to startu	•	·	
Check appropriate box)  A.  1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (Constructed before 12/9/91)  3. Existing large area source  Check appropriate box)  Drop store / out of business / petroleum  2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (Constructed on or after 12/9/91)  4. New large area source	PART II: CLASSIFICATIO	)N			
This is a correct facility classification:  If no, please check the appropriate classification:  facility qualified for a general permit as number above  facility exceeds above limits and is not eligible for a general permit  B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was gallons.	A.  1. Existing small area so dry-to-dry only, x<140 transfer only, x<200 ga both types, x<140 gally (Constructed before 12  3. Existing large area so dry-to-dry only, 140 <x (constructed="" 12="" 140<x="" 200<x<1="" a="" ab.="" ap="" b.="" before="" both="" check="" class.="" correct="" exceeds="" facility="" for="" if="" is="" no,="" of="" only,="" percentages.<="" please="" qualified="" quantity="" td="" the="" this="" total="" transfer="" types,="" x<1,8=""><td>ource 0 gal/yr al/yr yr 2/9/91) ource 0 &lt; 2,100 gal/yr 1,800 gal/yr 00 gal/yr c/9/91) ification: or a general permit as nu ove limits and is not elig hloroethylene (perc) pur</td><td>2. New small ar dry-to-dry onl transfer only, both types, x &lt; (Constructed of the constructed of the constru</td><td>ea source y, x&lt;140 gal/yr x&lt;200 gal/yr 140 gal/yr on or after 12/9/91) ea source y, 140<x<2,100 000="" 0<="" 12="" 140<x<2,100="" 200<x<1,800="" 9="" 91)="" a="" after="" e="" gal="" on="" or="" source="" td="" y,="" yr=""><td>cleaning</td></x<2,100></td></x>	ource 0 gal/yr al/yr yr 2/9/91) ource 0 < 2,100 gal/yr 1,800 gal/yr 00 gal/yr c/9/91) ification: or a general permit as nu ove limits and is not elig hloroethylene (perc) pur	2. New small ar dry-to-dry onl transfer only, both types, x < (Constructed of the constructed of the constru	ea source y, x<140 gal/yr x<200 gal/yr 140 gal/yr on or after 12/9/91) ea source y, 140 <x<2,100 000="" 0<="" 12="" 140<x<2,100="" 200<x<1,800="" 9="" 91)="" a="" after="" e="" gal="" on="" or="" source="" td="" y,="" yr=""><td>cleaning</td></x<2,100>	cleaning

PART III: GENERAL CONTROL REQUIREMEN	NTS					
Is the responsible official of the dry cleaning facility: (check appropriate boxes)						
1. Storing perchloroethylene in tightly sealed and imp	ervious containers?	ĽΥ	ΠN	□ NA		
2. Examining the containers for leakage?	ĽΎΥ	□N	□ NA			
3. Closing and securing machine doors except during	¥	$\square$ N				
4. Draining cartridge filters in their housing or in seale least 24 hours prior to disposal?		□N	□NA			
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?						
PART IV: PROCESS VENT CONTROLS						
In Part II-A:		-				
If classification (1) has been checked, no controls a	are required. Proceed to Pa	ırt V.				
If classification (2) has been checked, the machine (complete A below)	should be equipped with a	refrige	rated con	denser		
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 (complete A and B below.)	should be equipped with a	refrige	rated con	denser		
A. Has the responsible official of all new sources are (check appropriate boxes)	nd existing large area sou	rces:		1		
1. Equipped all machines with the appropriate vent co	ontrols?	ΨÝ	$\square$ N			
2. Equipped dry-to-dry machines with a closed-loop va	por venting system?	¥Ý	□N	□NA		
3. Equipped the condenser with a diverter valve so airfl away from the condenser upon opening the door?	low will be directed	<b>□</b> Y	ΩN	□NA		
4. Measured and recorded the temperature of the outl refrigerated condenser on a weekly/bi-weekly basis		☐ Y	Θ'n			
5. Repaired or adjusted the equipment within 24 hour temperature of the condenser exceeded 45°F?	rs if the exhaust	ŪΎ	ΩN	□NA		
6. Conducted all temperature monitoring after an apprain and after verifying the coolant had been completely		₽Y	□ <sub>N</sub>			

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?	□Υ	□N	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20°F?	□Y □Y	□N □N	□na □na
	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?  Assured that the sampling port on the carbon adsorber exhaust for measuring perc.	□Y □Y	□N □N	□na □na
٦.	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	ПN	□na
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ŪΥ	ΠN	□NA
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ΠN	□NA
PA	ART V: RECORDKEEPING REQUIREMENTS			
	MIT TIME COLD REPORT IN GIVE QUITE MENTE			
	as the responsible official: heck appropriate boxes)		_	
H: (cl	as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?	<b>₽</b> ₹		
H: (cl	as the responsible official: neck appropriate boxes)		On Fan	,
H2 (cl 1. 2.	As the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not Since Deliber 1998  Maintained leak detection inspection and repair reports for the following:	Tes 1	ON CON	,
H2 (cl 1. 2.	As the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not Since Deliber 1998  Maintained leak detection inspection and repair reports for the following:	Tes 1	4211	√ □na
H2 (cl 1. 2.	As the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not Since Details 1998  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;	Tes 1		_ □na □na
H2 (cl 1. 2. 3.	As the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not since Detailer 1998  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  Notecords after 8/22/98  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	Y		_
H2 (cl 1. 2. 3.	As the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not Since Details 1998  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;			□NA
H2 (cl 1. 2. 3.	Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not Since Detailer 1998  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)	□Y □Y □Y		□na □na
H2 (ch 1. 2. 3. 4. 5. 6.	Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not since declarate 1998  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?			□na □na
H2 (ch 1. 2. 3. 4. 5. 6.	Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption? Not Since Detains 1998  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?			□na □na □na

` : i · · · ·

PA	PART VI: LEAK DETECTION AND REPAIRS							
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) lead inspection? No recerds from 8/22/8					k detection and repair		
2.		facility maintained a leak log?						
3.	. Does the responsible official check the following areas for leaks:							
	Hose connections, fitting couplings, and valves	uy.	DN	□NA	Muck cookers	ey On Ona		
	Door gaskets and seating	UY	$\square_{N}$	□NA	Stills	DY ON ONA		
	Filter gaskets and seating	ΘÝ	□N	□NA	Exhaust dampers	GY ON ONA		
	Pumps	₽Ŷ	ΠN	□NA	Diverter valves	Dy On Ona		
	Solvent tanks and containers	Q Y	$\square_N$	□NA	Cartridge Filter housing	DY ON ONA		
	Water separators	UY	□N	□NA				
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 pe	rc vapo	or cond	centration	ns in a range of 0-500 ppm.	□y □n		
	b. Calibrated against a stan	dard ga	ıs prio	r to and a	fter each use(PID/FID only).	□Y □N		
	c. Inspected for leaks and c	bvious	signs	of wear o	on a weekly basis?	□Y □N		
	d. Kept in a clean and secu	ire area	a when	not in u	se.	□y □n		
	e. Verified for accuracy by	use of	duplic	ate samp	les (calorimetric only)?	□Y □N		
	Margaret Hennis 12/21/98 Inspector's Name (Please Print) Date of Inspection							
7	Margarek J. Henris Inspector's Signature				2/99			
	Inspector's Signature				Approximate Date	of Next Inspection		

No perc oder was delected. Waste was Stored in a Sufe manner. Do eviding of Spills around madeine.	DITIONAL SITE INFORMATION:	
	No perc odor was delec	lef. Waste was Stored in a
	Sufe manner Do widene	of Spills around machine.
		<u> </u>
	·	
		<u> </u>
	<u> </u>	
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		<u>,                                      </u>

AIR'S ID#: /030}1/

### BEST AVAILABLE COPY

Her

Revised 10/10/96

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Granada CIERTIERS	DATE: ///22/9	39
FACILITY LOCATION: 1256 County Rd#	/	
FACILITY NAME: Granada Cleaners  FACILITY LOCATION: 1256 County Rd#,  Dunedin FL 34698		
Annual Reporting Period: 19/2//98 19	TO <u>"/22/99</u> 19	·
Based on each term or condition of the Title V general air permit, my for 62-213.300, Florida Administrative Code (F.A.C.), during the period co	acility has remained in compliance with DEP Rule overed by this statement. The Depth	
If NO, complete the following:		
#1. Term or condition of the general permit that has not been in contin	uous compliance during the reporting period stated above	ve:
Exact period of non-compliance: from	to	
Action(s) taken to achieve compliance:		
	·	· 
Method used to demonstrate compliance:	uous compliance during the reporting period stated abov	/e:
Method used to demonstrate compliance:  #2. Term or condition of the general permit that has not been in contin	uous compliance during the reporting period stated abov	/e:
Method used to demonstrate compliance: #2. Term or condition of the general permit that has not been in contin  Exact period of non-compliance: from		/e:
Method used to demonstrate compliance:  #2. Term or condition of the general permit that has not been in contin  Exact period of non-compliance: from  Action(s) taken to achieve compliance:		/e:
#2. Term or condition of the general permit that has not been in contin  Exact period of non-compliance: from  Action(s) taken to achieve compliance:  Method used to demonstrate compliance:  4s the responsible official. I hereby certify, based on information and be	totototototo	ts d
Method used to demonstrate compliance:  #2. Term or condition of the general permit that has not been in contin  Exact period of non-compliance: from  Action(s) taken to achieve compliance:  Method used to demonstrate compliance:  #3. The responsible official, I hereby certify, based on information and be nade in this notification are true, accurate and complete. Further, my upon rolling averages of purchase receipts, does not exceed 2,100 gallets.	totototototo	ts d

This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the iscretion of the responsible official to use this form.

# TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: AN	NUAL —COMPLAINT/DISCO	VERY 🔲 RE-INSPECTION 🚨
AIRS ID#: <u>1030311 001</u>	DATE: 11/24/95 TIME	IN: 12:56 TIME OUT: 1:16
FACILITY NAME:	Granada Cleaners	
FACILITY LOCATION:	1256 Country Rd #1	
	Dunedin, FL, 34698	·
RESPONSIBLE OFFICIAL:	Abdallah Kleih	Phone No.: 734-002
Permit No1030311-001-A	G Exp. Date: 09/06/2001	<del></del>
	f the compliance requirements evaluated du Rule 62-213.300, Florida Administrative (	uring this inspection, the facility is found to be in Code (F.A.C.).

### **Inspection Summary Report Guidance**

Based on the results of the compliance requirements evaluated during this inspection, the following compliance <u>discrepancies</u> were noted (only items which are checked ):

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:				
	· · · · · · · · · · · · · · · · · · ·	·			
If the Inspection Summary Report indicates follow-up actions are required, you must take immediate corremeasures to achieve compliance. Pinellas County will perform a follow-up inspection to determine that precorrective actions have been taken.					
	Inspection Conducted by: Margaret Henni	is .			
	Inspector's Signature:	V. Hornes			
Phone Number: 464-4422					

#### PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	COMPL	AINT/DISCOVERY 🗖	
AIRS ID#: 1030311 001	DATE: _///2-	<i>≥/95</i> TIME	IN: <u>/2:50</u> TIME OUT: _	18/0
FACILITY NAME:	Granada Cle	aners	<u> </u>	•
FACILITY LOCATION:	1256 Country R	.d #1		
	Dunedin, FL, 3	4698		
RESPONSIBLE OFFICIA	L: Abdallah Kleih		PHONE: _734-002	
CONTACT:		,	PHONE:	
PART I: NOTIFICATION	[	·		
(Check appropriate box)				
1. Existing facility notified	DARM By 9/1/96			. 🖳
2. New facility notified DA	RM 30 days prior to st	artup		
3. Facility failed to notify D	ARM to use general p	ermit		
PART II: CLASSIFICATI				
Facility indicated on notificate (Check appropriate box)	ition form that it is:		tification form tore / out of business / petroleum	1
A.  1. Existing small area and dry-to-dry only, x < 14	source	2. New s dry-to	mall area source -dry only, x<140 gal/yr	•
1. Existing small areased dry-to-dry only, x<14 transfer only, x<200 both types, x<140 galacter (Constructed before	gaffyr Gyr !2/9/91)	(Cons.	mall area source -dry only, x < 140 gal/yr er only, x < 200 gal/yr ypes, x < 140 gal/yr tructed on or after 12/9/91)	
both types, x<140 ga (Constructed before)  3. Existing large area so dry-to-dry only, 140 so transfer only, 200 < x so both types, 140 < x<1, (Constructed before)		(Cons.	er only, x<200 gallyr ypes, x<140 gallyr tructed on or after 12/9/91) arge area source -dry only, 140 <x<2,100 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" er="" gallyr="" on="" only,="" or="" th="" tructed="" ypes,=""><td></td></x<2,100>	
	source	(Cons.	arge area source -dry only, 140 <x<2,100 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" er="" eypes,="" gal="" on="" only,="" or="" th="" tructed="" yr=""><th></th></x<2,100>	
3. Existing large area as dry-to-dry only, 140 stransfer only, 200	source x < 2,100 gal/yr < 1,800 gal/yr 800 gal/yr 12/9/91) sification: □Y	4. New ladry-to transfe both ty (Const.)  N Can not don: number	arge area source dry only, 140 <x<2,100 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" _="" above<="" after="" er="" eructed="" etermine="" eypes,="" gal="" on="" only,="" or="" th="" yr=""><td></td></x<2,100>	
3. Existing large area as dry-to-dry only, 140 transfer only, 200 < x - both types, 140 < x < 1, (Constructed before and the second secon	source (x < 2,100 gal/yr (1,800 gal/yr 800 gal/yr 82/9/91)  sification:  Appropriate classification for a general permit as bove limits and is not one	4. New ladry-to transfe both to (Const.)  N Can not don:  numbereligible for a general	arge area source dry only, 140 <x<2,100 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" _="" above<="" after="" er="" eructed="" etermine="" eypes,="" gal="" on="" only,="" or="" th="" yr=""><td>ry cleaning</td></x<2,100>	ry cleaning

Is the responsible official of the dry cleaning facility: (check appropriate boxes)							
1. Storing perchloroethylene in tightly sealed and impervious containers?	9 Y	ΠN	□ NA				
2. Examining the containers for leakage?	9-Y	ΠN	□ NA				
3. Closing and securing machine doors except during loading/unloading?	ĽY	□N					
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	<u>U</u> Y	□N	□NA				
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	□ Y	□N	□NA				
PART IV: PROCESS VENT CONTROLS		<u>.</u> -					
In Part II-A:							
If classification (1) has been checked, no controls are required. Proceed to Pa	ırt 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 (complete A and B below.)	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)	rces:						
1. Equipped all machines with the appropriate vent controls?	<u>O</u> Y	□N					
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	¥Ý	□N	□NA				
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	□ŁY	ΠN	□NA				
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	<b>D</b> Y	□N					
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	<b>Z</b> -Y	□N	□NA				
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	QY	ПN					

### BEST AVAILABLE COPY

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 cond located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	enser
2. Measured and recorded the washer exhaust temperature at the condenser inlet outlet weekly?  Is the temperature differential equal to or greater than 20°F?	and Oy On Ona Oy On Ona
<ul> <li>3. Measured and recorded the perc concentration in the exhaust stream weekly a 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?</li> <li>4. Assured that the sampling port on the carbon adsorber exhaust for measuring</li> </ul>	OY ON CHA OY ON CHA
concentrations is at least 8 duct diameters downstream of any bend, contraction expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?	on, or
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	Dy On Cana
6. Routed airflow to the carbon adsorber (if used) at all times?	AKQ NO YO
PART V: RECORDKEEPING REQUIREMENTS	
	:
check appropriate boxes)	
Has the responsible official: check appropriate boxes)  1. Maintained receipts for perc purchased?	□ DN
	CHY ON
1. Maintained receipts for perc purchased?	Gy On Gy On
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> </ol>	
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> </ul> </li> </ol>	CHY ON
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> </ol>	CHY ON ONA
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instrument only)</li> </ol>	CHY ON ONA CHY ON ONA CHY ON ONA
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> </ol>	CHY ON ONA CHY ON ONA CHY ON ONA OHY ON OHA
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instrument only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> </ol>	CHY ON ONA
<ol> <li>Maintained receipts for perc purchased?</li> <li>Maintained rolling monthly averages of perc consumption?</li> <li>Maintained leak detection inspection and repair reports for the following:         <ul> <li>a. documentation of leaks repaired w/in 24 hrs? or;</li> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul> </li> <li>Maintained calibration data? (for direct reading instrument only)</li> <li>Maintained exhaust duct monitoring data on perc concentrations?</li> <li>Maintained startup/shutdown/malfunction plan?</li> </ol>	CHY ON ONA CHY ON ONA CHY ON ONA OY ON CHA OY ON CHA OY ON CHA OY ON

PA	RT VI: LEAK DETECTIO	N AN	D REI	PAIRS			
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and inspection?							
2.	Has the facility maintained a le	eak log	<u>;</u> ?			CY ON	
3.	3. Does the responsible official check the following areas for leaks:						
	Hose connections, fitting couplings, and valves	<u>G</u> Ý	DN	□na	Muck cookers	OY ON ONA	
j.	Door gaskets and seating	₽Y	Ωи	□NA .	Stills	ĐÝ ON ONA	
	Filter gaskets and seating	ØY	ŪΝ	□na	Exhaust dampers	AND NO YE	
	Pumps	ΘY	ΠN	□na	Diverter valves	DÝ ON ONA	
	Solvent tanks and containers	ΘY	Пи	□na	Cartridge Filter housing	OY ON ONA	
	Water separators	Ľ	Пи	□na			
4.	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 instru		-	•	-	Fire Chr	
	•				ns in a range of 0-500 ppm.	UY UN	
		,	_		fter each use(PID/FID only).	MA MM	
	c. Inspected for leaks and o	bvious	signs	of wear o	on a weekly basis?	· QY QN	
	d. Kept in a clean and seco	are are	a wher	n not in u	se.	□Y· □N	
	e. Verified for accuracy by	use of	duplic	ate samp	les (calorimetric only)?	□Y □N	
	Margaret Hennis Inspector's Name (Please Print)  Margaret U. Umns:  11/2000						
	Inspector's Signature				Approximate Date	of Next Inspection	

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ADDITION	AL SITE INFORMATION:
	Hurst Natural gas fired Boller
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Revised 10/10/9

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	sranada	Cleaner	·s	DAT	E: 5/30/00
FACILITY LOCATION:	1256 Co	unty Ros	ad#1	·	
1		, FL 34			
Annual Reporting Period: Nove	mber 22	19 <b>99</b> TO	May	30,	2000
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F					DEP Rule
If NO, complete the following:					
#1. Term or condition of the general permit	that has not been in	continuous compliar	nce during the re	eporting per	iod stated above:
Exact period of non-compliance: from		•	to		N
Action(s) taken to achieve compliance:				Burea &	
Method used to demonstrate compliance:				Mobil	
#2. Term or condition of the general permit	that has not been in	continuous compliar	ace during the re	e Soutces	iod statediabove:
T				<del></del>	
Exact period of non-compliance: from		T	0		
Action(s) taken to achieve compliance:					
Method used to demonstrate compliance:	<del></del>	•			
As the responsible official, I hereby certify, is made in this notification are true, accurate a upon rolling averages of purchase receipts, wear for transfer or combination facilities.  RESPONSIBLE OFFICIAL:	and complete. Furth	er, my annual consur	aption of perchi	oroethylen	e solvent, based

<sup>\*</sup>This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

# TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:	ANNUAL 🗹 COMPLAINT/DISCOVERY 🗆 RE-INSPECTION 🗅
AIRS ID#: 103621	DATE: _5/30/00 TIME IN: 10: 12a.mTIME OUT: 10: 53a.a.
FACILITY NAME:	_Granada Cleaners
FACILITY LOCATION:	
	Dunedin, FL, 34698
RESPONSIBLE OFFICIAL	: Abdallah Kleih Phone No.: 946-4158
Permit No.	1030311-001-A6 Exp. Date: 8/23/01
Based of the resi	ults of the compliance requirements evaluated during this inspection, the facility is found to be in

### Based of the results of the compliance requirements evaluated during this inspection, the facility is found to be in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).

Based on the results of the compliance requirements evaluated during this inspection, the following compliance <u>discrepancies</u> were noted (only items which are checked):

### **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:				
	· · · · · · · · · · · · · · · · · · ·				
	If the Inspection Summary Report indicates follow-up actions are required, you must take immediate corrective measures to achieve compliance. Pinellas County will perform a follow-up inspection to determine that proper corrective actions have been taken.				
	Inspection Conducted by:	E Morris			
	Inspector's Signature:	Maris			
. •	Phone Number:				
	. Ha	ge 2 of 2			

#### PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY		
AIRS ID#: 103 63 1   FACILITY NAME:	<b>Date:</b> 5/30/00 Granada Cleaner	TIME IN: 10:12 m. TIME OUT: 10:530 m		
FACILITY LOCATION:	1256 County Rd #1			
	Dunedin, FL, 34698			
RESPONSIBLE OFFICIA	L: Abdallah Kleih	PHONE: 946-4158		
CONTACT:	Abdallah Kleih	PHONE: 946-4158		
PART I: NOTIFICATION				
(Check appropriate box)				
1. Existing facility notified l	DARM By 9/1/96	<u> </u>		
2. New facility notified DAl	RM 30 days prior to startup	·		
3. Facility failed to notify D	ARM to use general permit	e e e e e e e e e e e e e e e e e e e		
	<u> </u>	<u> </u>		
PART II: CLASSIFICATI	ON			
Facility indicated on notifica (Check appropriate box)	tion form that it is:	No notification form Drop store / out of business / petroleum		
A.  1. Existing small area so dry-to-dry only, x<14 transfer only, x<200 so both types, x<140 gal (Constructed before I	Source O gal/yr gal/yr /yr /2/9/91)	2. New small area source dry-to-dry only, x<140 gal/yr transfer only, x<200 gal/yr both types, x<140 gal/yr (Constructed on or after 12/9/91)		
3. Existing large area s dry-to-dry only, 140 < transfer only, 200 < x < both types, 140 < x < 1, (Constructed before 1	ource	4. New large area source dry-to-dry only, 140 < x < 2,100 gal/yr transfer only, 200 < x < 1,800 gal/yr both types, 140 < x < 1,800 gal/yr (Constructed on or after 12/9/91)		
This is a correct facility class		☐ Can not determine		
If no, please check the appropriate classification:  facility qualified for a general permit as number above  facility exceeds above limits and is not eligible for a general permit				
B. The total quantity of pere facility was38		nased within the preceding 12 months by this dry cleaning		

PART III: GENERAL CONTROL REQUIREMENTS	· .	·	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)			
1. Storing perchloroethylene in tightly sealed and impervious containers?	Y	ΩN	□NA
2. Examining the containers for leakage?	Y	□N	□ NA
3. Closing and securing machine doors except during loading/unloading?	Ϋ́Υ	□N	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	Y	.□ N	□NA
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐ Y	□N	☑ NA
PART IV: PROCESS VENT CONTROLS			
In Part II-A:			
If classification (1) has been checked, no controls are required. Proceed to Pa	rt V.		
If classification (2) has been checked, the machine should be equipped with a (complete A below)	refrigei	rated cond	enser
If classification (3) has been checked, the machine should be equipped with eicondenser or a carbon adsorber (complete A and B below). Carbon adsorber installed prior to September 22, 1993.			1
If classification (4) has been checked, the machine should be equipped with a (complete A and B below.)	refriger	rated conde	enser
A. Has the responsible official of all new sources and existing large area sour (check appropriate boxes)	rces:		
1. Equipped all machines with the appropriate vent controls?	☑ Y	ΠN	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	¥ Y	$\square_N$	□ NA
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Ľ Y	ΠN	□NA
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly bi-weekly basis?	☑ Y	ΠN	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	☐ Y	ПN	□NA
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	<b>☑</b> Y	ΠN	

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?	⊠íy □n			
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20° F?	OY ON ONA OY 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 prim?	OY ON ONA OY ON ONA			
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?				
PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official: (check appropriate boxes)				
1. Maintained receipts for perc purchased?	☑Y □N			
2. Maintained rolling monthly averages of perc consumption?	ØY □N			
3. Maintained leak detection inspection and repair reports for the following:				
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON YNA			
<ul> <li>b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?</li> </ul>	DY DN DNA			
4. Maintained calibration data? (for direct reading instrument only)	□y □n ☑na			
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DNA			
6. Maintained startup/shutdown/malfunction plan?	☑Y □N			
7. Maintained deviation reports?	OY ON MA			
Problem corrected?	OY ON DINA			

PA	PART VI: LEAK DETECTION AND REPAIRS						
1.	Does the responsible official c inspection?	onduct	t a wee	ekly (for s	small sources (bi-weekly) lea	ak detect	tion and repair
2.	Has the facility maintained a le	ak log	;?			¥Y	□N
3.	Does the responsible official c	heck tl	ne folle	owing are	eas for leaks:		
	Hose connections, fitting couplings, and valves	ΔY	ΠN	□NA	Muck cookers	□Y	On Ona
	Door gaskets and seating	<b>□</b> Y	$\square_{N}$	□NA	Stills	ĽY	□n □na
	Filter gaskets and seating	Y	ΠN	□NA	Exhaust dampers	☑Y	□n □na
	Pumps	ØΥ	ΠN	□NA	Diverter valves	<b>I</b> Y	□n □na
	Solvent tanks and containers	ØY	ΠN	□NA	Cartridge Filter housing	Y	□n □na
	Water separators	YE	ΠN	□NA			
4.	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 pe	rc vap	or con	centratio	ns in a range of 0-500 ppm		DY ON
	b. Calibrated against a stan	dard g	as prio	r to and	fter each use(PID/FID only).		$\square_{Y}$ $\square_{N}$
	c. Inspected for leaks and o	bviou	signs	of wear o	on a weekly basis?		$\square_{Y}$ $\square_{N}$
	d. Kept in a clean and secure area when not in use.			□Y □N			
	e. Verified for accuracy by	use of	duplic	ate samp	les (calorimetric only)?		□Y □N
	Inspector's Name (Please Print)  Date of Inspection  Inspector's signature  Approximate/Date of Next Inspection						

Acti

## DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Granada Cleaners	DA	ATE:	1/8/2000	
FACILITY LOCATION:	1256 County Rd #1	<u>.</u>			
	Dunedin, FL, 34698				
Annual Reporting Period:	May 30	20 00 To	Januar	ry 8 20 0 1	
Based on each term or condit compliance with DEP Rule 6 covered by this statement.		2 2			MO
IF NO, complete the following #1. Term or condition of the above:				,	stated
Exact period of non-complian		ber 2000			000
Action(s) taken to achieve co	mpliance: <u>Facilit</u>	y needs to mai	ntain 12	-month consec	utive
Method used to demonstrate of	compliance: totals	for perc consu	umption.		
#2. Term or condition of the above:	general permit that has not	been in continuous com	pliance during t	Bureau & N	
Exact period of non-compliar	ce: <b>from</b>	:	to	of Air	
Action(s) taken to achieve co	mpliance:			(n = = = = =	1
Method used to demonstrate	compliance:			Nonit	m
				oring	0
As the responsible official, I l statements made in this notification solvent, based upon rolling at 1,800 gallons per year for transport to the statement of t	cation are true, accurate and rerages of purchase receipts	d complete. Further, my , does not exceed 2,100	annual consum	ption of perchloroetl	nylene
RESPONSIBLE OFFICIAL:	Abdallah Kleih		llah Wei	1-2-00	•
	(Name Please Pri		onature	Date	

<sup>\*</sup>This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

# TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

	/ YSF
TYPE OF INSPECTION:	ANNUAL (1) COMPLAINT/DISCOVERY (1) RE-INSPECTION
AIRS ID#: 1030311	DATE: 12/21/00 TIME IN: 9:457W/FIME OUT: 10:10 ALA
FACILITY NAME:	Granada Cleaners
FACILITY LOCATION:	1256 County Rd #1
	Dunedin, FL, 34698
RESPONSIBLE OFFICIAL:	Abdallah Kleih Phone No.: 946-4155
Permit No.	1030311-001-AG Exp. Date: 8/23/2001
☐ Based of the resul	ts of the compliance requirements evaluated during this inspection, the facility is found to be in

### compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.).

Based on the results of the compliance requirements evaluated during this inspection, the following compliance <u>discrepancies</u> were noted (only items which are checked):

### **Inspection Summary Report Guidance**

		- A A A
	Compliance Requirement/Problem	Follow-up Action Required
in the state of th	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.
X	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: Facility did not carry substitut of perc consumption from					
	Sept to Oct, Oct to Nov, and Dec 2000, Thosefore the facility did not indicates follow-up actions are required, you must take immediate corrective measures to achieve compliance. Pinellas County will perform a follow-up inspection to determine that proper corrective actions have been taken.					
	Inspection Conducted by: Pwu-	Sheng Liu				
	Inspector's Signature: Part - 50	ley Ten				
	Phone Number: 464-4422					

#### PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	PR COMPL	AINT/DISCOVERY 📮				
AIRS ID#: 1030311	. •	- 1	IN: <u>45 45 AU</u> TIME OUT:	10:10 AM			
• •	FACILITY NAME: Granada Cleaners						
FACILITY LOCATION:	1256 County Rd						
	Dunedin, FL, 34	698	·.				
RESPONSIBLE OFFICIA	L: Abdallah Kleih	***************************************	<b>PHONE</b> : (727) 940	6-4155			
CONTACT:	Abdallah Kleih		PHONE: (727) 946	6-4155			
PART I: NOTIFICATION	<u> </u>						
(Check appropriate box)							
1. Existing facility notified I	OARM By 9/1/96			$ abla\!\!$			
2. New facility notified DAI	RM 30 days prior to star	tup					
3. Facility failed to notify D	ARM to use general per	mit					
PART II: CLASSIFICATI	ON						
Facility indicated on notifica (Check appropriate box)	tion form that it is:		tification form store / out of business / petrole	um			
A.  1. Existing small area s dry-to-dry only, x < 14 transfer only, x < 200 g both types, x < 140 gal. (Constructed before 1	/yr	2. New s dry-to transfe both t	mall area source -dry only, x<140 gal/yr er only, x<200 gal/yr ypes, x<140 gal/yr tructed on or after 12/9/91)	ช์			
3. Existing large area s dry-to-dry only, 140 < transfer only, 200 < x < both types, 140 < x < 1,5 (Constructed before 1	ource x<2,100 gal/yr 1,800 gal/yr 300 gal/yr 2/9/91)	4. New l dry-to transfe both t	arge area source -dry only, 140 <x<2,100 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" er="" gal="" on="" only,="" or="" th="" tructed="" ypes,="" yr=""><th></th></x<2,100>				
This is a correct facility class	sification: 🗹 Y 🗖	N 🖵 Can not d	etermine				
If no, please check the appropriate classification:  facility qualified for a general permit as number above facility exceeds above limits and is not eligible for a general permit							
B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was/ \( \begin{align*} \tilde{\mu} \cdot \ellipset \delta \cdot \delta \cdot \ellipset \delta \cdot \ellipset \delta \cdot \delta \cdot \ellipset \delta \cdot \delta \delta \cdot \delta \delta \cdot \delta \delta \cdot \delta \cdot \delta \cdot \delta \cdot \delta \cdot \							

PA	RT III: GENERAL CONTROL REQUIREMENTS						
	the responsible official of the dry cleaning facility: seck appropriate boxes)						
1.	Storing perchloroethylene in tightly sealed and impervious containers?	Y	□N	□ NA			
2.	Examining the containers for leakage?	¥Υ	□N	□ NA			
3.	Closing and securing machine doors except during loading/unloading?	<b>☑</b> Y	N				
4.	Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	<b>M</b> Y	ΠN	□NA			
5.	Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	QΥ	□ N	☑NA.			
PA	RT 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.	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	□N				
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	Y	□ N	☐ NA			
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Y	□ N	<b>¼</b> NA			
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?		□N				
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	ΔY	ΠN	☐ NA			
6.	Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	Y	ΩN				

B. Has the responsible official of an existing large or new large area source als	o:
Measured and recorded the exhaust temperature on the outlet side of the condens located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ser ☑Y □N
2. Measured and recorded the washer exhaust temperature at the condenser inlet an outlet weekly?  Is the temperature differential equal to or greater than 20° F?	d
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 dayborn adsorber?  Is the perc concentration equal to or less than 100 ppm?	ne Oy On Ona Oy On Ona
4. Assured that the sampling port on the carbon adsorber exhaust for measuring per concentrations is at least 8 duet diameters downstream of any bend, contraction, expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?	
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
6. Routed airflow to the carbon adsorber (if used) at all times?  PART V: RECORDKEEPING REQUIREMENTS	LIY LIN LINA
PART V: RECORDKEEPING REQUIREMENTS	LIY LIN LINA
	MY ON
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)	<b>M</b> Y □N
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?	
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?	<b>M</b> Y □N
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:	MY ON OY MN OY ON MNA OY ON MNA
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;	☑Y □N □Y ☑N □Y □N ☑NA
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased? 2. Maintained rolling monthly averages of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	MY ON OY MN OY ON MNA OY ON MNA
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instrument only)	DY ON DNA OY ON DNA OY ON DNA
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instrument only)  5. Maintained exhaust duct monitoring data on perc concentrations?	DY ON DNA OY ON DNA OY ON DNA OY ON DNA
PART V: RECORDKEEPING REQUIREMENTS  Has the responsible official: (check appropriate boxes)  1. Maintained receipts for perc purchased?  2. Maintained rolling monthly averages of perc consumption?  3. Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  4. Maintained calibration data? (for direct reading instrument only)  5. Maintained exhaust duct monitoring data on perc concentrations?  6. Maintained startup/shutdown/malfunction plan?	DY ON OY ON MA

PA	PART VI: LEAK DETECTION AND REPAIRS						
1.	Does the responsible official conspection?	onduct	a wee	ekly (for	small sources, bi-weekly) lea	k detect	ion and repair
2.	Has the facility maintained a l	eak log	;?			$ abla_{\mathbf{Y}}$	$\square_{\mathrm{N}}$
3.	Does the responsible official of	heck th	ne follo	owing ar	eas for leaks:		
	Hose connections, fitting couplings, and valves	⊠Y	□N	□NA	Muck cookers	ПY	□n Ma
	Door gaskets and seating	$\nabla Y$	$\square_{N}$	□NA	Stills	ΨY	$\square_N$ $\square_{NA}$
	Filter gaskets and seating	$\square_{Y}$	□N	$\square_{NA}$	Exhaust dampers	$\mathbf{Z}_{\mathbf{Y}}$	□n □na
	Pumps	$\mathbf{\nabla}_{\mathbf{Y}}$	□N	□NA	Diverter valves	$\square_{Y}$	□n Úna
	Solvent tanks and containers	$\square_{Y}$	□N	□NA	Cartridge Filter housing	ŬY	□n □na
	Water separators	ØΥ	$\square_{N}$	□NA			
4.	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 pe	rc vapo	or con	centratio	ns in a range of 0-500 ppm.		$\square_{\mathrm{Y}} \square_{\mathrm{N}}$
	b. Calibrated against a stan	dard ga	as prio	r to and a	fter each use(PID/FID only).		$\square_{Y}$ $\square_{N}$
	c. Inspected for leaks and obvious signs of wear on a weekly basis?						□y □n
	d. Kept in a clean and secure area when not in use.					$\square_{Y} \square_{N}$	
	e. Verified for accuracy by	use of	duplic	ate samp	les (calorimetric only)?		$\square_{\mathbf{Y}}$ $\square_{\mathbf{N}}$
•	Inspector's Name (Please Print)  Inspector's Signature / Approximate Date of Next Inspection						

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Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273

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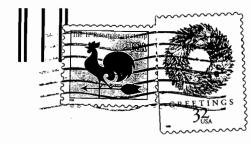
AIRS 1D # 1030311

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GRANADA CLEANERS 1256 COUNTY RD #1 DUNEDIN, FL 34698







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

### Z 333 613 048 US Postal Service **Receipt for Certified Mail** AIRS ID 1030311 ABDALLAH KLEIB ABDALLAH KLEIB 1256 COUNTRY ROAD #1 **DUNEDIN FL 34698** \$ Postage Certified Fee Special Delivery Fee Restricted Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom Date, & Addressee's Address TOTAL Postage & Fees Postmark or Date Return Receipt Showing to Whom, Date, & Addressee's Address \$

-				9	
	SENDER:	envelope to	e over top of	Fold at lin	_
the reverse side?	■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you.			I also wish to receive the following services (for an extra fee):	a:
ě	■Attach this form to the front of the mailpiece, or on the back if space does not permit.			1. Addressee's Address	<u> </u>
	<ul> <li>Write "Return Receipt Requested" on the mailpiece below the article number.</li> <li>The Return Receipt will show to whom the article was delivered and the date delivered.</li> </ul>			2. Restricted Delivery	Ser
8	3. Article Addressed to:	<u> </u>		Consult postmaster for fee.	ceipt
completed	ABDALLAH KLEIB ABDALLAH KLEIB	AIRS ID 1030311	4a. Article N 2 33 4b. Service	73 6 13 048 Type	- eturn Re
DRESS	1256 COUNTRY ROAD #1 DUNEDIN FL 34698		☐ Registere		using R
IRN AD			7. Date of De		you for
RETU	5. Received By: (Print Name)		8. Addressee and fee is	's Address (Only if requested paid)	Thank )
ls your	6. Signature: (Addressee or Age	Llent			
	PS Form <b>3811</b> , December 199	1	02595-97-B-0179	Domestic Return Receipt	

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DARM/MOBILE SOURCE CONTROL PROGRAM DEPT. OF ENVIRONMENTAL PROTECTION 2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

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ĺ	US Postal Service  Receipt for Cert  No Insurance Coverage I	Provided.		,
ABI	AIRS ID DALLAH KLEIB DALLAH KLEIB 16 COUNTRY ROAD #1 NEDIN FL 34698	#: 103031	1	
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	Certified Fee			
	Special Delivery Fee			
	Restricted Delivery Fee			
1995	Return Receipt Showing to Whom & Date Delivered			
April	Return Receipt Showing to Whom, Date, & Addressee's Address			
8	TOTAL Postage & Fees	\$		
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4a, and	for additional services. 4b. ss on the reverse of this forn	n so that we	can return this	I also wish to receive the following services (for an extra fee):
the fron	t of the mailpiece, or on the t	oack if space	e does not	1. Addressee's Add
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ot will she	ow to whom the article was d	ielivered and	ersp enr c	Consult postmaster for fe
sed to:			4a. Article N	umber 302 268
		` `	1 X 6 5	) JUM ~ 40

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Write \*Return Rece tricted Delivery ■The Return Receip delivered. tmaster for fee. 3. Article Addres 268 4b. Service Type AIRS ID#: 1030311 ☐ Registered ☐ Certified ABDALLAH KLEIB RETURN ADDRESS ☐ Express Mail ☐ Insured ABDALLAH KLEIB 1256 COUNTRY ROAD #1 ☐ Return Receipt for Merchandise ☐ COD Thank you for **DUNEDIN FL 34698** 7. Date of Delivery 5. Received By: (Print Name) 8. Addressee's Address (Only if requested and fee is paid) 6, Signature: (Addressee or Agent) ls your PS Form 3811, December 1994 Domestic Return Receipt

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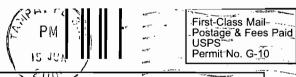
BUR. OF AIR MONITORING & MOBILE SOURCES DEPT. OF ENVIRONMENTAL PROTECTION MAIL STATION 5510 2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

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	Z 570 PI	62	980				
	US Postal Service Receipt for Cer	tifie	d Mail				
GI I2	10 AIRS ID # 1030311001AG ABDALLAH KLEIB GRANADA CLEANERS 1256 COUNTRY ROAD #1 DUNEDIN FL 34698						
	Postage	\$					
	Certified Fee						
	Special Delivery Fee						
10	Restricted Delivery Fee						
199	Return Receipt Showing to Whom & Date Delivered		_				
, April	Return Receipt Showing to Whom, Date, & Addressee's Address		-				
TOTAL Postage & Fees \$							
PS Form <b>3800</b> , April 1995							

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. Received by (Please Print Clearly)  B. Pate of Delivery  C. Signature  Agent  Addressee  D. Is delivery address different from item 1?   Yes
1. Article Addressed to:  10 AIRS ID # 1030311001AG ABDALLAH KLEIB GRANADA CLEANERS	If YES, enter delivery address below:
DUNEDIN FL 34698	3. Service Type  Of Certified Mail
• • • •	Registered Receipt for Merchandise Insured Mail C.O.D.
Z21066Z98D	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Copy from service label)	
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