

Jeb Bush
Governor

Department of Environmental Protection

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

Colleen M. Castille
Secretary

January 3, 2005

Mr. Michael Bassous
Scott's Custom Cleaners
755 Indian Rocks Road, North
Belleair Bluffs, Florida 33770

Re: Facility No.: 1030341-003

Dear Mr. Bassous:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 24, 2004.

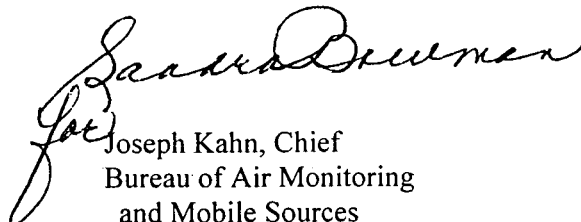
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

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

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

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

Sincerely,



Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Mr. Gary Robbins, Pinellas County

"More Protection, Less Process"

Printed on recycled paper.

EMISSION FEE DATES 197-2003
NO ACTIVITY FOR FACILITY.....
SOC REPORTS 6.....
COMP. STATUS - SNC MNC 8/20/2003 (IN)

Scott's CUSTOM CLEANERS

RECEIVED

OCT 13 2006

October 5, 2006

Scott's Custom Cleaners
755 N. Indian Rocks Road
Belleair Bluffs, Florida 33770

Bureau of Air Monitoring
& Mobile Sources

Re: Air Pollution Permit Number 1030341-003-AG

To Whom It May Concern:

This letter is to notify the Pinellas County Environmental Management Air Quality that Scott's Custom Cleaners has purchased a new dry cleaning machine. The new machine is an 80 pound, Columbia USA, Model TDMACCI 280 MS, Serial Number 9904613226. This new dry cleaning machine has replaced the Lindas machine that Scott's Custom Cleaners had used for dry cleaning and which has been disposed and it has also replaced our Miraclean dry cleaning machine. All of the perc has been drained from the Miraclean dry Cleaning machine. The machine is still in our location but is disconnected and no longer being used. We are in the process of looking at different options and making a decision on how to dispose it. The current twelve-month running total for the perc used in the new Columbia model is 19 gallons.

The Columbia dry cleaning machine was purchased in May 2005 and the purchase of our new machine and the disconnection of our old machines makes Scott's Custom Cleaners subject to the requirements of a "new small" dry cleaning facility.

Sincerely,

Mike Bassous, Owner



Belleair Bluffs
755 N. Indian Rocks Rd.
Belleair Bluffs, FL 33770
584-8382

Island Estates
282 Windward Passage
Clearwater, FL 33767
443-1029

LaBelle Plaza
1587 Highland Ave.
Clearwater, FL 33756
446-5872

Downtown Clearwater
531 South Ft. Harrison Ave.
Clearwater, FL 33756
443-6930

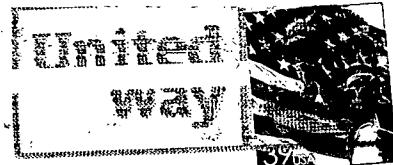


Scotts Custom Cleaners
 755 Indian Rocks Rd N
 Belleair Bluffs, FL 33770



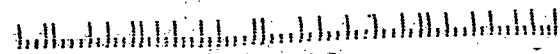
ST PETERSBURG FL 337

11 OCT 2008 PM 3 T



Title V General Permits Office
 Bureau of Air Monitoring and Mobile Sources MS 551C
 Department of Environmental Protection
 2600 Blair Stone Road
 Tallahassee, FL 32399-2400

32399+6542



BEST AVAILABLE COPY

Scott's CUSTOM CLEANERS

Scott's Custom Cleaners
755 N. Indian Rocks Road
Belleair Bluffs, Florida 33770

October 5, 2006

FAXED
OCT 06 2006
Per...
RECEIVED
OCT 09 2006
Bureau of Air Monitoring
& Mobile Sources

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Sincerely,

Mike Bassous, Owner



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Clearwater, FL 33767

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1587 Highland Ave.
Clearwater, FL 33756

Downtown Clearwater
531 South Ft. Harrison Ave.
Clearwater, FL 33755

| | | | | | |
|-------------------|------------------|---------|--------------|------------|---|
| Post-it® Fax Note | 7671 | Date | 10/9/06 | # of pages | 1 |
| To | Dir. Ryan Pihlak | From | Shoa Jackson | | |
| Co./Dept. | B.A.M.M. | Co. | P.C.H.A. | | |
| Phone # | | Phone # | 727-464-4562 | | |
| Fax # | 850-922-6579 | Fax # | | | |

Gardner, Kelly

From: Bowman, Sandy
Sent: Monday, March 13, 2006 2:40 PM
To: Gardner, Kelly
Subject: RE: Scott's Customer Cleaners Check

If the address is 755 N. Indian Rocks Rd, Belleair Bluffs, then the AIRS ID # is 1030341.

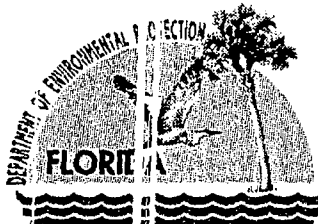
Sandy Bowman
Environmental Administrator
Division of Air Resource Management
850/921-9583 or sandy.bowman@dep.state.fl.us

-----Original Message-----

From: Gardner, Kelly
Sent: Monday, March 13, 2006 1:31 PM
To: Bowman, Sandy
Cc: Sullivan, Ann
Subject: Scott's Customer Cleaners Check

I received a check from Scott's Customer Cleaners in the amount of \$50.00 for a Title V Air General Permit. They only sent the Third Notice Letter with the check. It doesn't have their Air ID # on it. What reference # would you like me to use?
Thanks.

Kelly Gardner
Accountant I
Department of Environmental Protection
Finance & Accounting - Revenue Section
Phone: (850) 245-2427, SC: 205-2427
Fax: (850) 245-2464, SC: 205-2464, MS - 77
Kelly.Gardner@dep.state.fl.us



Jet Wash
Go Green

Department of Environmental Protection

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

Colleen M. Castille
Secretary

March 8, 2006

THIRD NOTICE OF ANNUAL EMISSIONS FEE

TO: User of Title V Air General Permits

Records in the Division of Air Resource Management indicate that during calendar year 2005 you owned or operated a facility which is a source of air pollution. You have also claimed eligibility for this facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual emissions fee as established by the Department in Rule 62-213.205, F.A.C. You are also required, under Rule 62-213.300(2)(c)2, F.A.C., to notify the Department in writing of any change in facility status.

Your annual emissions fee is \$50 for calendar year 2005. A notice of your obligation to pay the annual emissions fee was sent to you by U.S. mail, along with an invoice form and instructions.

This notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual emissions fee not paid by **March 1, 2006**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, under Rule 62-213(1)(g), F.A.C., failure to timely pay any required annual emissions fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit. We have not received your air emissions fee payment. Therefore, you are being assessed a 50% penalty plus the invoice amount.

To submit your \$75 fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Bruce Thomas at 850/921-7744 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

/JK

Enclosure: Invoice Form

RECEIVED

NOV 24 2004

Bureau of Air Monitoring
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location *Pinellas CO - GR*

| |
|--|
| 1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): <i>Michael Bassous</i> |
| 2. Site Name (For example, plant name or number): <i>Scott's Custom Cleaners</i> |
| 3. Hazardous Waste Generator Identification Number: <i>FCID 98084727 032438079</i> |
| 4. Facility Location: Street Address: <i>755 Indian Rocks Rd. N.</i> City: <i>Belleair Bluffs</i> County: <i>Pinellas</i> Zip Code: <i>33770</i> |
| 5. Facility Identification Number (DEP Use ONLY - do not fill in) <i>1030341-003</i> |

Responsible Official

| |
|--|
| 6. Name and Title of Responsible Official: Name: <i>Michael Bassous</i> Title: <i>Owner</i> |
| 7. Responsible Official Mailing Address: Organization/Firm: <i>Michael Bassous Enterprises, Inc. dba Scott's Custom Cleaners</i> Street Address: <i>755 Indian Rocks Rd. N.</i> City: <i>Belleair Bluffs</i> County: <i>Pinellas</i> Zip Code: <i>33770</i> |
| 8. Responsible Official Telephone Number: Telephone: <i>(727) 585-4515</i> 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: () - |

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site? [2]

For each dry-to-dry machine on-site, please provide the following information:

| Date Initially Purchased From Manufacturer | Status (circle one) | Control Device Required* (circle one) | Date Control Device Installed (if already included at time of purchase, write "SAME") |
|--|----------------------|---------------------------------------|---|
| <u>Miraclean 1986</u> | <u>Existing</u> /New | RC/CA/None required | <u>Same</u> |
| <u>Lindus 1985</u> | <u>Existing</u> /New | RC/CA/None required | <u>Same</u> |
| _____ | Existing/New | RC/CA/None required | _____ |

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site? [_____]

How many dryers/reclaimers do you have on-site? [_____]

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

| Date Initially Purchased From Manufacturer | Status (circle one) | Control Device Required* (circle one) | Date Control Device Installed (if already included at time of purchase, write "SAME") |
|--|---------------------|---------------------------------------|---|
| _____ | Existing/New | RC/CA/None required | _____ |
| _____ | Existing/New | RC/CA/None required | _____ |
| _____ | Existing/New | RC/CA/None required | _____ |

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

[0] gallons (You must fill this in)

(b) If less than 12 months, how many? [1/2] months

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

New store: [_____] New machine [_____]

Unopened store [_____] (date of expected opening _____)

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.)

- Small Area Source
 - Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
 - Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (used 140 - 1,800 gallons of perc per year)

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)

- | | |
|---|---|
| <u>Existing machines at small area source</u> (NONE REQUIRED) <input type="checkbox"/> | <u>New machines at small area source</u> Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u> Carbon adsorber <input type="checkbox"/> Refrigerated condenser <input checked="" type="checkbox"/> | <u>New machines at large area source</u> Refrigerated condenser <input type="checkbox"/> |

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

All steam and hot water generating units exempt OR
No such units on-site

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating: 50

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____

No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. 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, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

MICHAEL BASSOUS

Print name of responsible official

M Bassous
Signature

11-17-04
Date

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

466259 DEC20 2006

X

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 1030341
SCOTT'S CUSTOM CLEANERS ✓
755 N Indian Rocks Rd
BELLEAIR BLUFFS, FLORIDA
33770

DEC 21 2006
Bureau of Air Monitoring
& Mobile Sources

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

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

RECEIVED

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