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Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
2. Site Name (For example, plant name or number):
2. Site Name (For example, plant name or number):
3. Hazardous Waste Generator Identification Number:
3. Hazardous Waste Generator Identification Number:
FLD 032438079
4. Facility Location: 755 North Indian Rocks Road
City: Bellain Bloffs County: Pinn Zip Code: 33770
5. Facility Identification Number (DEP Use): 5. Facility Identification Number (DEP Use): 1.03034/
Responsible Official
6. Name and Title of Responsible Official:
James R Scott Jr. Owner
7. Responsible Official Mailing Address: Organization/Firm: Scott's Coston Cleaners Street Address: 755 North Indian Rales Road City: Bellenin Blofts County: Pinn Zip Code: 33770
8. Responsible Official Telephone Number:
Telephone: (813) 585 - 4515 Fax: (813) 585 - 480)
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
James M Hennahane General Manager 10. Facility Contact Address:
Scottis Custom Cleaners
Street Address: 755 N. Indian Kale Rd City: Bellenin Dlufts County: Ann. Zip Code: 33:770
11. Facility Contact Telephone Number: Telephone: (১13) SYS - 4815 Fax: (565-) SYS - 4801

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Bureau of Air Monitoring & Mobile Sources # 1030341

P.14

1. (a) add date control devices installed

(. (c) Should not 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
	1	Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	lD	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit									
(1) w/ ref. condenser	#1	30-April-85	F	#2	18-Aug-86			<u> </u>	
(2) w/ carbon adsorber	-	- Anne	<u> </u>	h	12 7 12 7 2				
(3) w/ no controls	· · ·	 							
Washer Unit	-		1		1		:	<u> </u>	
(4) w/ ref. condenser								T	T
(5) w/ carbon adsorber		 			 				
(6) w/ no controls		<u> </u>			 				
Dryer Unit									
(7) w/ ref. condenser		<u> </u>]		1	
(8) w/ carbon adsorber									<u> </u>
(9) w/ no controls								<u> </u>	
Reclaimer Unit	- :			٠.				<u> </u>	
(10) w/ ref. condenser		<u></u>		Π		T			
(11) w/carbon adsorber					,	•		1	
(12) w/ no controls		· · · · · · · · · · · · · · · · · · ·							
(b) Control devices are required, but not yet installed									
3. What is the facility's so (Indicate with an "X". Existing small an Existing large ar	Selec	et one classifi	cation only.) ew sn	initions found nall area sour	rce []	Part II?	
Daniel im ge m	 30		14	- **	. 60 m ca 30th	·	1		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines pursuant to section (5) of F (Indicate with an "X".)	Part II of this notification form?
Existing large area source Carbon adsorber Refrigerated condenser	\triangle
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall not be eligible to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating unit exemption criteria or that no such units exist on-site:	
All steam and hot water generating units on-site (1) have a total heat input of l boiler HP or less), and (2) are fired exclusively by natural gas except for period during which propane or fuel oil containing no more than one percent sulfur is	ds of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	•
	•
Equipment Monitoring and Recordkeeping Information	mation
Check all logs which are required to be kept on-site in accordance with the required	uirements of this general permit:
(a) Purchase receipts and solvent purchases	ن ب
(b) Leak detection inspection and repair	
(c) Refrigerated condenser temperature monitoring	LXI
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	ι X ı

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)					
ι X ι	No air permits currently exist for the operation of the facility indicated in this notification form.					
	Responsible Official Certification					
this notig 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 th its 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.					

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Scotts Cy	istom	Cleane	.rs	DATE: 3	127/97
FACILITY LOCATION:	755 N I	Indian	Rock	<u>(</u> 5		
	Belleair B	luffs,	FL 33	770		
		J				
Annual Reporting Period:	March 27,	19 9	6 то	March	27,	1997
Based on each term or conditio 62-213.300, Florida Administr	-	-	=			NO ŋe
If NO, complete the following:						
#1. Term or condition of the g	eneral permit that has not l	been in continuou	s compliance du	ring the reporti	ng period sta	ated above:
Exact period of non-compliance	e; from		to			
Action(s) taken to achieve com	pliance:	·				·
Method used to demonstrate co	mpliance:					<u> </u>
#2. Term or condition of the go	eneral permit that has not t	been in continuou	s compliance du	ring the reporti	ng period sta	ited above:
Exact period of non-compliance	e: from		to			
Action(s) taken to achieve comp	pliance:	· · ·	 			
Method used to demonstrate co	mpliance:			·.		
As the responsible official, I he made in this notification are tra upon rolling averages of purch year for transfer or combination RESPONSIBLE OFFICIAL:	ie, accurate and complete. ase receipts <mark>, does</mark> not exce	Further, my annued 2,100 gallons	nual consumption per year for dry-	of perchloroei	thylene solve	nt, based

^{*}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.

Perc P.14 1. (a) add date control	h
rerd 1 (a) add date control	
devices installed	
1. Facility Owner/Com Should Size Name (For exame) 1. (c) Should And	
Scotts NOV 1 2 1996 NOV 1 2 1996 Depart SouthWEST DISTRICT	
4. Facility Location: Street Address: City: Bellair	 -
5. Facility Identificatio	
6. Name and Title of R	
7. Responsible Official maning Address: Organization/Firm: Scott's Coston Cleaners Street Address: 755 North Indian Rales Road City: Bellenin Blotts County: Pinn Zip Code: 33770	<u> </u>
8. Responsible Official Telephone Number: Telephone: (813) 585 - 4515 Fax: (813) 585 - 470)	

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	
James M Hennahane 10. Facility Contact Address:	General Manager
10. Facility Contact Address:	
10. Facility Contact Address: Scott's Custom Cleaners Street Address: 755 N. Indian Kale Rd.	
City: Bellenin Bluffs County: Ann	Zip Code: 33 770
11. Facility Contact Telephone Number: Telephone: (১) ১১১ - ৭১১ Fax: (১৫)	=) 585 -4801
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Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

2. Site Name (For example, plant name or number):
,
Scott's Custom Cleaners
3. Hazardous Waste Generator Identification Number:
FID 032438079
4. Facility Location: 755 North Indian Rocks Boad
City: Belleain Bloffs County: Pinn. Zip Code: 33770
5. Facility Identification Number (DEP Use):
529501285 1030341
Responsible Official
6. Name and Title of Responsible Official:
James R Scott Jr. Owner 7. Responsible Official Mailing Address:
7. Responsible Official Mailing Address:
Organization/Firm: Scott's Coston Cleaners
Organization/Firm: Scott's Coston Cleaners Street Address: 755 North Indian Rales Road City: Bellenin Blofts County: Pinn Zip Code: 33770
8. Responsible Official Telephone Number:
Telephone: (813) 585 - 4515 Fax: (813) 585 - 480)
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
James M Hennahane General Manager
10. Facility Contact Address:
Scottis Custom Cleaners
Street Address: 755 N. Indian Kale Rd.
City: Bellenin Dlufts County: Pin Zip Code: 33770
11. Facility Contact Telephone Number:
Telephone: (413) SY 5 - 4515 Fax: (565) SY5 - 4701

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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
	١.	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	#]	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit			· · · · · · · · · · · · · · · · · · ·			. .		· <u>-</u>	
(1) w/ ref. condenser	#1	30-April-35	07-11-93	#2	18-Aug-86	07-5014-93			
(2) w/ carbon adsorber	_,	7	373		1	3R	5.		
(3) w/ no controls			3,), ,		
Washer Unit		•							
(4) w/ ref. condenser								1	
(5) w/ carbon adsorber									
(6) w/ no controls				_			-	1	1
Dryer Unit		•			· ' · · · · · · · · · · · · · · · · · · 			<u>-</u>	
(7) w/ ref. condenser								1	T
(8) w/ carbon adsorber			-		<u> </u>				
(9) w/ no controls		·.		<u> </u>			 	1	
Reclaimer Unit					<u> </u>	·			<u> </u>
(10) w/ ref. condenser			T	Г				1	T
(11) w/carbon adsorber	 			_	<u> </u>				
(12) w/ no controls				 		-			
(b) Control devices are (c) No control devices 2.(a) What was the total of the control of the c	are requant	equired to be ity of perchlo	installed [=	perc)	JJR.S.		2 mo:	nths?	
(b) If less than 12 mont Check why it is less					_] New store	: [] Did	not l	keep records:	
3. What is the facility's so (Indicate with an "X".					initions found	d in section (3) of	Part II?	
Existing small ar	ea so	ource []	No	ew sn	nall area soui	rce []		
Existing large area source New large area source									

DEP Form No. 62-213.900(2)

Effective: 6-25-96

4. What control technology is required on machines pursuant to section (5) of Par (Indicate with an "X".)	t II of this notification form?
Existing large area source Carbon adsorber [] Refrigerated condenser [\mathbf{X}
New small area source Refrigerated condenser []	
New large area source Refrigerated condenser []	
5. A facility which contains non-exempt emissions units shall not be eligible to u to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units exemption criteria or that no such units exist on-site:	on-site meet the following
All steam and hot water generating units on-site (1) have a total heat input of 10 boiler HP or less), and (2) are fired exclusively by natural gas except for periods during which propane or fuel oil containing no more than one percent sulfur is fit	of natural gas curtailment
All steam and hot water generating units exempt No such units on-site	
Equipment Monitoring and Recordkeeping Informs	ition
Check all logs which are required to be kept on-site in accordance with the require	rements of this general permit:
(a) Purchase receipts and solvent purchases	
(b) Leak detection inspection and repair	[X]
(c) Refrigerated condenser temperature monitoring	LXI
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Instrument calibration	
(f) Start-up, shutdown, malfunction plan	Ϋ́I

DEP Form No. 62-213.900(2)

Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please in	dicate with an "X" the appropriate selection:
<u></u>	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)
ιX	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this i state mair	e undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the ments made in this notification are true, accurate and complete. Further, I agree to operate and stain the air pollutant emissions units and air pollution control equipment described above so as to ply with all terms and conditions of this general permit as set forth in Part II of this notification form.
I wil	I promptly notify the Department of any changes to the information contained in this notification.
Sign	ane // Scott / Sono Profit Date

TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION:

ANNUAL 包

COMPLAINT/DISCOVERY □

RE-INSPECTION &

TIME IN: 9:53 am	TIME OUT: 1	1:14 am	AIRS ID#	1030341 001
TYPE OF FACILITY:	Perchloroethylene D	ry Cleaner	-	
FACILITY NAME:	Scott's Custom Cle	eaners	DATE:	March27, 1997
FACILITY LOCATION:	755 Indian Rocks R	d. N, Belleair E	Bluffs, FL 33770)
RESPONSIBLE OFFICIAL:	JAMES R. SCOTT	P	HONE NUMBER:	(813) 584-8382
to be in compliance with	he compliance requirement h DEP Rule 62-213.300, the compliance requirement es were noted:	Florida Administ	rative Code (F.A.C.).
COMPLIANCE REQUIRE	EMENT/PROBLEM	FOLLO	W-UP ACTION RI	EQUIRED
COMMENTS: The existing temperature sens Temperature measurements in 45° F. The facility indicated the "Zapper" carbon filtration. July 1, 1997.	nade with a portable pyroto the inspector that the s	ometer indicated the sensor is being rep	hat the actual tempe laced. Facility also	rature was below indicated that
				,
The Annual Compliance Certification DATE OF NEXT INSPECTION:		June 15, 19 (Approxin	997 nate)	es 🗹 No 🗆
INSPECTION CONDUCTED BY INSPECTOR'S SIGNATURE:	Manix .	Jeffrey M PHONE N	int)	
	- M - M - M - M - M - M - M - M - M - M			

Page 1 of 1

Revised 10/96

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PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	ON E	COMPLAINT/DISC	OVERY 🗖	
AIRS ID#: 103034			A.M. TIME OUT:		۲.
facility name:Sc	a 1			<u> </u>	_
FACILITY LOCATION:	55 N	India	n Rocks		_ [
f	Belleair	Bluffs	FL 33-	770	_
		/			
PART I: NOTIFICATION					
(check appropriate box)					
1. Existing facility notified DAR	M by 9/1/96 °	·		ø	
2. New facility notified DARM 3	0 days prior to sta	rtup			
3. Facility failed to notify DARM	I to use general pe	rmit			
			- Annang		<u></u>
PART II: CLASSIFICATION					
Facility indicated on notification (check appropriate box)	n form that it is:				
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)	e 🗆	2. New small a dry-to-dry only, transfer only, x both types, x<1 (constructed on	x<140 gal/yr <200 gal/yr	о ·	
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)<="" before="" gaboth="" gal="" only,="" td="" transfer="" types,="" y=""><td>gal/yr il/yr</td><td>transfer only, 20 both types, 140</td><td>rca 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><i>:</i></td></x<2,>	gal/yr il/yr	transfer only, 20 both types, 140	rca 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,>		<i>:</i>
This is a correct facility classification	ation	MO AM			
If no, please check the appropria	te classification:			•	
	d for a general per above limits and i				
B. The total quantity of perchlore facility was 2.70 gallons	oethylene (perc) pi	urchased within t	he preceding 12 month	s by this dry cleanin	g

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY 12/N DN/A beds according to the manufacturer's specifications? 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) Mirocless Lindus MY DN DY DN 1. Equipped all machines with the appropriate vent controls? MY ON ON/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? 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 DY ON

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

Did not ped

_		201.01
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ר אם צם
	Is the temperature differential equal to or greater than 20° F?	
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 ppor	OY ON
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring	
	perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction,	
	or expansion; and downstream from no other inlet?	OY ON
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
P	ART V: RECORDKEEPING REQUIREMENTS	
	as the responsible official:	
	neck appropriate boxes)	
1.	Maintained receipts for perc purchased?	CAX ON
2.	Maintained rolling monthly averages of perc consumption?	DAY DN
3.	Maintained leak detection inspection and repair reports for the following:	,
	a. documentation of leaks repaired w/in 24 hrs? or;	MY ON
	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 ON
4.	Maintained calibration data? (for direct reading instruments only)	OY ON ON/A
5.	Maintained exhaust duct monitoring data on perc concentrations?	DY DN N/A
6.	Maintained startup/shutdown/malfunction plan? (Started Writeup Of	ray on
7.	Maintained deviation reports? Plan and has course of action in Manual	MA ON
	Problem corrected? (Temp problem for both machines	MA ON
8.	Maintained compliance plan, if applicable?	DY DN DANA
	The state of the s	
P	ART VI: LEAK DETECTION AND REPAIRS	
1.	Does the responsible official conduct a weekly leak detection and repair inspection?	QY ON
2.	Which method of detection is used by the responsible official?	,
	Visual examination (condensed solvent on exterior surfaces)	प ्र
	Physical detection (airflow felt through gaskets)	a /
	Odor (noticeable perc odor)	ਰ
1	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)	_

If using direct-reading instrumentation, is the equipment a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? DY DN b. Calibrated against a standard gas prior to and after each use DY DN (PID/FID only)? DY DN c. Inspected for leaks and obvious signs of wear on a weekly basis? d. Kept in a elean and secure area when not in use? \Box Y \Box N e Verified for accuracy by use of duplicate samples (calorimetric only)? OY ON DYY ON 3. Has the facility maintained a leak log? 4. The following areas should be checked for leaks by the inspector: Leak Detected? Leak Detected? Hose connections, fittings, QΥ QΥ couplings, and valves Muck cookers ŒΝ Door gaskets and seating $\Box Y$ Stills $\Box Y$ $\Box Y$ DX($\Box Y$ ВŃ Filter gaskets and scating Exhaust dampers ЩN \Box Y $\Box Y$ UN Pumps Diverter valves MD Solvent tanks and containers $\Box Y$ **d**N Water separators $\Box Y$

Approximate Date of Wext Inspection

- carbon filtration system (Zapper) will be installed in 90 days.
- Miraclean Dry-Dry was distributed to Scott's by Equipment Sales Co. Equipment Sales Co. Equipment Sales Co. Equipment Sales Co. cannot supply facility with letter stating that temperature. Cannot demonstrate that the temperature sensor is designed for accuracy of ±2°F.
 - Lindus 5516 Machine Serial #2918 Mode#1032
 Lindus Machine during cooldown was
 at 32°F
 - Temperature sensor has 2 degree divisions.

 Miraclean 5516 Machine Serial 6066

 Moolel 165-5
- Temp Sensor gauge reads 50°F Promieter reads 42°F, Will change fout temperature sensor within 3-5days Temperature sensor has 2 degree (2°F) divisions.

TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

T	YPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION					
	AIRS ID#: 1030341 001 DATE: 2/27/98 TIME IN: 18105 TIME OUT: 131/15 FACILITY NAME: Scott's Custom Cleaners FACILITY LOCATION: 755 Indian Rocks Rd. N Belleair Bluffs, FL RESPONSIBLE OFFICIAL: Mr. James R. Scott Phone No.: 584-8382 Permit No. 1030341-001-AG Exp. Date: 09/26/2001 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 discrepancies 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 which are impervious and chemically unreactive to the solvent.					
<u> </u>	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.					
_	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.		
	,	·		
	Meg. Comments: Wastewater wag. System	is in place. Follow Mfgs operating instruction		
		s are required, you must take immediate corrective measures to up inspection to determine that proper corrective actions have been		
	The Annual Compliance Certification form has been properly	y certified and submitted to the inspector. Yes \(\Boxed{\Boxes}\) No \(\Boxed{\Boxes}\)		
	Inspection Conducted by: Margaret V. Inspector's Signature: Margaret V. 4e	Hennis (Please Print)		
Phone Number: 464-4422 Date of next Inspection: (Approximate)				

TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

	TYPE OF INSPECTION: ANNUAL LA COM	APLAINT/DISCOVERY ARE-INSPECTION			
	FACILITY NAME: Scott's Custom Clea				
	FACILITY LOCATION: 755 Indian Rocks Rd. N Belleair Bluffs, FL				
	RESPONSIBLE OFFICIAL: Mr. Jámes R. Scott Phone No.: 584-8382				
	Permit No1030341-001-AG Exp. Date:	09/26/2001			
	Based of the results of the compliance requ compliance with DEP Rule 62-213.300, Flo	irements evaluated during this inspection, the facility is found to be in orida Administrative Code (F.A.C.).			
	Based on the results of the compliance requ discrepancies were noted (only items which	nirements evaluated during this inspection, the following compliance are checked:):			
	Inspection Sum	mary 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 perchloroethylene solvent consumption.				
머	Monthly purchase records were not maintained as a consecutive twelve month total. (From 9/97 W. 44e)	Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a consecutive twelve month total.			
	•	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).			
IJ.	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.			
	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.
· .	
in bilicel, hoter must be allegised of a If the Inspection Summary Report indicates follow-up actions	(megeoup) not yet in Stalled. Currently Megeoup) not yet in Stalled. Currently Still bottoms need to be covered or placed share required, you must take immediate corrective measures to up inspection to determine that proper corrective actions have been Henris (Please Print)
Phone Number: 464-4422	Date of next Inspection: <u>February 28 1998</u> (Approximate)

BRLEAK

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

JAMES R SCOTT JR
JAMES R SCOTT JR
755 NORTH INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL 33770

Do NOT Remove Label

Annual Reporting Period:	1	19 <u>97</u>	то		12	_19 <u><i>9.</i>7</u>
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 bee	n in continuous c	ompliance during	the reporting pe	riod stated a	above:
Exact period of non-compliance: from			to			
Action(s) taken to achieve compliance:						
Method used to demonstrate compliance:						
#2. Term or condition of the general permit	that has not bee	n in continuous c	ompliance during t	the reporting pe	riod stated a	above:
Exact period of non-compliance: from			to			
Action(s) taken to achieve compliance:						
Method used to demonstrate compliance:						
As the responsible official, I hereby certify, base notification are true, accurate and complete. Findoes not exceed 2,100 gallons per year for dry-to-	urther, my annua	d consumption of p	perchloroethylene so	lvent, based upor	n purchase r	
RESPONSIBLE OFFICIAL:	S R Sco ne (Please Print)	HJC S	James A. Signatus	Scott	2-24- Date	<u>-98</u>

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

TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INS	SPECTION: A	NNUAL	COMPLAINT	T/DISCOVERY 📮	RE-INSPECTION	<u> </u>
AIRS ID#:	1030341	_ DATI	E: 7/15/98	TIME IN: STE	STIME OUT: 9'€	5a.m.
FACILITY I	NAME:	Parcl	ay Corporation	<i>♦. 4</i> /.		
FACILITY I	LOCATION:	13819	Walsingham Rd.	Will Sold Sold Sold Sold Sold Sold Sold So	- 1	
	_	Largo,	FL, 33774	100 Air	1940	
RESPONSIE	RESPONSIBLE OFFICIAL: Emad Mossad Phone No.: 595-4376					
Permit	No		Exp. Date:		⊗	
Q		-	-	valuated during this inspeinistrative Code (F.A.C.).	ection, the facility is found	d to be in
			pliance requirements e		ection, the following com	pliance

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 $45^{\circ}F$ 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.
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 is mai	ntaining its records					
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: Jeffrey Morris	<u></u>					
Inspector's Signature:						
Phone Number: 464-4422 / //-						

Page 2 of 2

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

	NNUAL E-INSPECTION	COMPLAINT/DISCOVERY	
AIRS ID#: 103034 FACILITY NAME: FACILITY LOCATION:	Parclay Corporate 13819 Walsingham I Largo, FL, 33774	Rd. St. Al. K.	1.15a.m
RESPONSIBLE OFFICIAL: CONTACT:	- 1 00		
PART I: NOTIFICATION			
(Check appropriate box) 1. Existing facility notified DAI 2. New facility notified DARM 3. Facility failed to notify DAR	30 days prior to startup	(facility notified just) after Startup	0 0
PART II: CLASSIFICATION			
Facility indicated on notification (Check appropriate box) A. 1. Existing small area sour dry-to-dry only, x<140 gally both types, x<140 gallyr (Constructed before 12/9) 3. Existing large area sour dry-to-dry only, 140 <x<2 (constructed="" 12="" 140<x<1,800="" 200<x<1,8="" 9)="" a="" above.="" appropriate="" b.="" before="" both="" check="" classification,="" correct="" exceeds="" facility="" for="" is="" of="" only,="" perchloses.<="" please="" qualified="" quantity="" th="" the="" this="" total="" transfer="" types,=""><td>ce </td><td>ple for a general permit</td><td>v cleaning</td></x<2>	ce	ple for a general permit	v cleaning
~ ~	proethylene (perc) purct llons.	nased within the preceding 12 months by this dr	y cleaning

_				
PA	RT III: GENERAL CONTROL REQUIREMENTS			
	he responsible official of the dry cleaning facility: eck appropriate boxes)			
1.	Storing perchloroethylene in tightly sealed and impervious containers?	☑ Y	ΠN	□ NA
2.	Examining the containers for leakage?	☑ Y	□N	□ NA
3.	Closing and securing machine doors except during loading/unloading?	¥Υ	□N	
4.	Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☑ Y	ΠN	□NA
5.	Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	□ Y	□N	✓ NA
	DE W. DDO CDGG VIZIE GOVERNOLG		-	
	ART IV: PROCESS VENT CONTROLS			
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 (complete A below)	refrige	rated con	denser
	If classification (3) has been checked, the machine should be equipped with e condenser or a carbon adsorber (complete A and B below). Carbon adsorber installed prior to September 22, 1993.	ither a must ha	refrigerate ive been	ed
	If classification (4) has been checked, the machine should be equipped with a (complete A and B below.)	refrige	rated con	denser
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?	₫ Y	ПN	
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	⊴ Y	ΠN	□ NA
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Y	□N	□NA
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	⊠ .Y	□N	
5,.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	Y	ΠN	□NA
6.	Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	Y	ΠN	
1				

B. Has the responsible official of an existing large or new large area source	e also:
Measured and recorded the exhaust temperature on the outlet side of the con located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	denser VY N
2. Measured and recorded the washer exhaust temperature at the condenser into outlet weekly? Is the temperature differential equal to or greater than 20° F?	et and OY ON ONA
 3. Measured and recorded the perc concentration in the exhaust stream weekly 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? 4. Assured that the sampling port on the carbon adsorber exhaust for measuring 	OY ON ONA
concentrations is at least 8 duct diameters downstream of any bend, contract expansion; is at least 2 dust diameters upstream from any bend contraction, expansion; and downstream from no other inlet?	ion, or
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	al
6. Routed airflow to the carbon adsorber (if used) at all times?	□Y □N □NA
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	\
1. Maintained receipts for perc purchased?	MY ON
2. Maintained rolling monthly averages of perc consumption?	My ON
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	☑Y □N □NA
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	. WY ON ONA
4. Maintained calibration data? (for direct reading instrument only)	DIY DIN DINA
5. Maintained exhaust duct monitoring data on perc concentrations?	DIY DN DANA
6. Maintained startup/shutdown/malfunction plan?	Y ON
7. Maintained deviation reports? (No problem & with	DY DN MA
7. Maintained deviation reports? (No problem & with Problem corrected? Problem corrected? Problem corrected?	DY DN DNA

PA	PART VI: LEAK DETECTION AND REPAIRS						
1.	Does the responsible official of inspection?	onduct a	a wee	kly (for s	small sources, bi-weekly) le		tion and repair ☑N
2.	Has the facility maintained a l	eak log?				¥Y	\square N
3.	3. Does the responsible official check the following areas for leaks:						
	Hose connections, fitting couplings, and valves	$\mathbf{v}_{\mathbf{Y}}$	□N	□NA	Muck cookers	ШY	□n □na
	Door gaskets and seating	☑Y	ΠN	□NA	Stills	Y	□N □NA
	Filter gaskets and seating	☑Y	ŪΝ	□NA	Exhaust dampers	ŪY	□n □na
	Pumps	\square Y	ΠN	□NA	Diverter valves	☑Y	□n □na
	Solvent tanks and containers	V Y	ΠN	□NA	Cartridge Filter housing	Y	□n □na
	Water separators	¥Y	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	erc vapor	r conc	entration	ns in a range of 0-500 ppm.		□Y □N
		_			flet/each use(PID/FID only).		□Y □N
	c. Inspected for leaks and	obvious :	signs-	of wear	on a weekly basis?		$\square_{\mathrm{Y}} \square_{\mathrm{N}}$
	d. Kept in a clean and sec	ure area	when	not in u	se.		$\square_{\mathrm{Y}} \square_{\mathrm{N}}$
	e. Verified for accuracy by	use of d	luplic	ate samp	les (calorimetric only)?		□y □n
	Inspector's Name (Please Print) Date of Inspection T/29/98 Inspector's Signature Approximate Date of Next Inspection						

FACI	LITY	DET	AIL	S:
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FACILITY NAME:		Parclay Cle	oners		
Dry Cleaning Mach	nine #1:				
Manufacturer	Aerota	ch	Capacity <u>25</u> lbs		
Model#	Aerotech 410	Serial# 130136031	160 Mfg yr 1996		
Dry Cleaning Mach	ine #2:				
Manufacturer			Capacity lbs		
Model#		Serial#	Mfg yr		
Boiler:					
Manufacturer			Hp		
Model #		Serial #	Mfg yr		
Fuel Type:	Natural gas?	propane? ufuel	Mfg yr oil? □ electric Ø		
2. Did the faci Record keeping: 1. Does facilit	cility assisted in fil ility insist on fillin ty have statement/s	ling out the notification bg out its own notification	, and will send it to FDEP? uracy of the temperature sensor		□N ~/A
_		ewater either treated or d		☑ Y	□N □N 11/A
		it an approved system, and arry containment for the d		IJY IJY	
	•	ary containment for any p		ΞY	— <u>></u> `
Comments: Facilities waste	y willing	stall second reeks	vary containm	ent	tor
					
	·				

[03034] airs id#: 1030302 **y**w Revised 10/10/9

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Parcl	ay Co	porat	zion	PDAT	E: 7/24/98
FACILITY LOCATION:	13819	y Wal	singh	an Ro		
	Lace	O. FL	337	74 &	11/2 1	
		<i>)</i>			6,0	1
Annual Reporting Period:	,			o	1 5 2 2 Ed.	1998
Based on each term or conditi 62-213.300, Florida Administ					npliand with I YES	DEP Rule
If NO, complete the following						
#1. Term or condition of the	general permit that	t has not been in	continuous com	pliance during th	e reporting per	iod stated above;
Exact period of non-compliance	ce: from			to		
Action(s) taken to achieve con	npliance:					· · · · · · · · · · · · · · · · · · ·
Method used to demonstrate co	ompliance:			· · · · · · · · · · · · · · · · · · ·		
#2. Term or condition of the g	general permit that	t has not been in	continuous com	pliance during th	e reporting per	iod stated above:
•	_					
Exact period of non-compliant	ce: from			to		
Action(s) taken to achieve con	apliance:					
Method used to demonstrate co	ompliance:		· · · · · · · · · · · · · · · · · · ·	·		· · · · · · · · · · · · · · · · · · ·
As the responsible official, I had made in this notification are to upon rolling averages of purch year for transfer or combination RESPONSIBLE OFFICIAL:	rue, accurate and on the second confacilities.	complete. Furthe	er, my annual co O gallons per ye	nsumption of per	chloroethylene	solvent, based

^{*}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.

NEW GPV NOTIFICATION

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PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

RE-INSPECTION COMPLAIN 17DISCOVERY	
AIRS ID#: 1030341 DATE: 2/27/98 TIME IN: 13:05 TIME OUT: 12	3:15
FACILITY NAME: Scott's Custom Cleanors	
FACILITY LOCATION: 755 Indian Rocks Rd.	
Belleair Bluffs FL	
RESPONSIBLE OFFICIAL: James Scott Phone No.: 813-584-	8382
Permit No. 1030341-001-46 Exp. Date: 9/26/01	
PART I: NOTIFICATION Reinsnected to verity waste writer was not	- Seine
(Check appropriate box) evaporated I still bottoms were covered. No anyl accorded in Dampster.	
No anyl accrate in Dampster. 1. Existing facility notified DARM by 9/1/96	<u> </u>
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) No notification form Drop store / out of business / petroleum	
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) 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)	
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 $12/9/91$) 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 before $12/9/91$)	1 .
This is a correct facility classification:	
Y N 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 perchloroethylene (perc) purchased within the preceding 12 months by this dreleaning facility was gallons.	y

								
PA	RT III: GENERAL CONTROL REQUIREMENTS							
Is (ch	the responsible official of the dry cleaning facility: seck appropriate boxes)							
1.	Storing perchloroethylene in tightly sealed and impervious containers?	Ϋ́Υ		1				
2.	Examining the containers for leakage?	ŪΥ		1				
3.	Closing and securing machine doors except during loading/unloading?	ΩÝ		1				
4.	Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ΘÝΥ		N				
5.	Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐ Y	<u> </u>	N 🗖 NA	· 			
PA	ART IV: PROCESS VENT CONTROLS							
_	Part II-A:							
111		rt V 7						
	If classification (1) has been checked, no controls are required. Proceed to Pa							
	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 e condenser or a carbon adsorber (complete A and B below). Carbon adsorber installed prior to September 22, 1993.	ither a r must ha	efrigo ve be	erated een				
	If classification (4) has been checked, the machine should be equipped with a (complete A and B below.)	refrige	rated	condenser				
A.	Has the responsible official of all new sources and existing large area sou	rces:						
(ci	neck appropriate boxes)	Mach	i	Mach 2				
1.	Equipped all machines with the appropriate vent controls?	⊡ ′Y (ЛN	QYQ N				
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	□ Y [ĴΝ	DY ON				
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ĐÝ (IJ'n	⊡y On				
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	∃ y (ΠN	□ _Y □ _N				
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	⊒ Y (ΔN	□Y □N				
6.	Conducted all temperature monitoring after an appropriate cooldown period and after verifying the coolant had been completely charged?	₽y□	M	O YON				

L. W. C.

	<u> </u>
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?	©ły" □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 GNA
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Is the perc concentration equal to or less than 100 ppm?	OY ON ONA OY ON
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?	Oy On Oma
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	Oy On Ona
6. Routed airflow to the carbon adsorber (if used) at all times?	OY ON OMA
PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	OY ON
 Maintained rolling monthly averages of perc consumption? Assisted within 2/19/48 in specific. Maintained leak detection inspection and repair reports for the following: 	Qy On
a. documentation of leaks repaired w/in 24 hrs? or;	⊡rý On
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ÐY ON
4. Maintained calibration data? (for direct reading instrument only)	DY DN DRYA
5. Maintained exhaust duct monitoring data on perc concentrations?	DY ON BNA
6. Maintained startup/shutdown/malfunction plan?	OY ON
7. Maintained deviation reports?	BY ON
Problem corrected?	
	□y □n

PART VI: LEAK DETECTION AND F	REPAIR	S			
1. Does the responsible official conduct a	weekly l	eak detecti	ion and repair inspection?	ŪΫ́	Пи
2. Which method of detection is used by the	ie respoi	nsible offic	cial?		
Visual examination (conden-	sed solv	ent of exte	rior surfaces)		
Physical detection (airflow f				\(\)	
Odor (noticeable perc odor)			,		
Use of direct-reading instrum	nentatio	n (FID/PII	Valorimetric tubes	_ _	
If using direct-reading instrumentation			·	_	
a Capable of detecting perc vap 0-500 ppm.				\square_{Y}	\square N
b. Calibrated against a standard (PID/FID only).	gas prio	r to and an	ter each use	\square_{Y}	\square_{N}
c. Inspected for leaks and obvio	us signs	of wear or	n a weekly basis?	\square_{Y}	\Box N
d. Kept in a clean and secure are	a when	not in use.		\square_{Y}	\square N
e. Verified for accuracy by use	of duplic	ate sample	es		Г ⁻¹ ь •
(calorimetric only)?			•	ΩY	ΠN
3. Has the facility maintained a leak log?				\square_{Y}	\square N
4. The following area should be checked for	or leaks	by the insp	pector:		
Hose connections, fitting couplings, and valves	(All All All All All All All All All All	™	Muck cookers	ŪΥ	ŪΝ
Door gaskets and seating	MA A		Stills	\square_{Y}	ME
Filter gaskets and seating	ŪΥ	\square_{N}	Exhaust dampers	ŪΥ	NED!
Pumps	\square_{Y}	$\square_{\mathbb{N}}$	Diverter valves	\square_{Y}	
Solvent tanks and containers	\square_{Y}	Ø.	Cartridge Filter housing	ΠY	
Water separators	\Box Y		· · · · · · · · · · · · · · · · · · ·		
			•		
Name of Responsible Official			•		
Margaret J. Hennis			2/27/98		
Inspector's Name (Please Print)		. –	Date of Inspection	on	
Utanjant V. Herris			1/99		
Inspector's Signature			Approximate Date of Nex	t Inspect	ion

ADDITIONAL	SITE INFORMATION:			
Machine #1: Manufacturer		Capacity	lbs	
Model#	Serial#	Mfg yr		
Machine #2: Manufacturer		Capacity	lbs	
Model#	Serial#	Mfg yr		
1. Was the facilit	permitted sources only): y assisted in filling out the notification by the in v insist on filling out its own notification, and wi		□Y □Y	□N □N
	: ave statement/specs as to the design accuracy of re of 45°F w/accuracy ±2°F, or 7.2°C w/accu		or? ⊡Y	□N
Hazardous Was	te:		_	_
	taminated wastewater either treated or disposed		Ŭ Y	
	s evaporated, is it an approved system, and using o			
İ	ty have secondary containment for the dry-dry n			□N.
4. Does the facili	ty have secondary containment for any perc. wa	iste containers?	<u>un</u>	ΔİN .
Boiler: Manufacturer	·	Нр		
Model #	Serial #	-	_	
Fuel Type:]	Natural gas? 🔲 propane? 🖵 fuel oil?	a		
Comments: /	tas installed mege-evap Syst	emo. Waste wo	alie	aporala
is gove. A	tas installed mege-evap Syste Wange accepte odor in dany	gste.		· ·
	<u> </u>		·	
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ADDITIONAL SITE INFORMATION:		
		
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TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION DATE: 2/19/98 TIME IN: 9:50 TIME OUT: 11:35 **AIRS ID#:** 0341 001 **FACILITY NAME:** Scott's Custom Cleaners **FACILITY LOCATION:** 755 Indian Rocks Rd. N Belleair Bluffs, FL RESPONSIBLE OFFICIAL: Mr. James R. Scott Phone No.: 584-8382 09/26/2001 Permit No. 1030341-001-AG Exp. Date: Jin Hennahane-manage **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: ■ No notification form (Check appropriate box) ☐ Drop store / out of business / petroleum 2. New small area source 1. Existing small area source dry-to-dry only, x≺140 gal/yr dry-to-dry only, x < 140 gal/yr transfer only, x < 200 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) (Constructed before 12/9/91) 4. New large area source 3. Existing large area source dry-to-dry only, 140 < x < 2,100 gal/yr dry-to-dry only, 140 < x < 2,100 gal/yr transfer only, 200 x x 1,800 gal/yr both types, 140 x x 1,800 gal/yr transfer only, 200 < x < 1,800 gal/yr both types, 140 < x < 1,800 gal/yr (Constructed before 12/9/91) (Constructed before 12/9/91) This is a correct facility classification: Y N 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 perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was 400 gallons.

PA	RT III: GENERAL CONTROL REQUIREMENTS		_	
Is t	he responsible official of the dry cleaning facility: eck appropriate boxes)			
1. 2.	Storing perchloroethylene in tightly sealed and impervious containers? Sill Bottom residue Stored in open container my percentainer the containers for leakage?	□ Y· □ Y		
3.	Closing and securing machine doors except during loading/unloading?	□ -Y		1
4.	Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	IJ¥		1
5.	Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐ Y		AK-D V
PA	RT IV: PROCESS VENT CONTROLS			
	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)	refrige	rated	condenser
	If classification (3) has been checked, the machine should be equipped with excondenser or a carbon adsorber (complete A and B below). Carbon adsorber installed prior to September 22, 1993.	ither a r must ha	efrigo ve be	erated een
	If classification (4) has been checked, the machine should be equipped with a (complete A and B below.)			
A.	Has the responsible official of all new sources and existing large area sou eck appropriate boxes)	rces:	(ov	_
(CII	eck appropriate boxes)	Mach_	i	Mach 2
1.	Equipped all machines with the appropriate vent controls?	☑ Y [И	∆ Y □ N
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	⊒ -y [□n	⊡y □n
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	□Y [□N	Gry On
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	Qy (Jn ́	⊡y □n
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	□ Y [□N	ŊY □N
6.	Conducted all temperature monitoring after an appropriate cooldown period and after verifying the coolant had been completely charged?	ΩY□	M	⊒ Y□N

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?	PY	□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		IJ NA
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? Is the perc concentration equal to or less than 100 ppm?	□Y □Y		□NA
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?	ПY	□N	⊒na
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ΠN	□na
_				
0.	Routed airflow to the carbon adsorber (if used) at all times?	ПY	N	□ NA
	ART V: RECORDKEEPING REQUIREMENTS	Y	N	
PA	ART V: RECORDKEEPING REQUIREMENTS	□Y ·	□N	LINA
PA H:		□Y □Y	Z	L-INA
H: (c)	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased?			L-INA
H: (c)	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes)	<u></u>	□N	LINA
P.A. (c) 1. 2.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Up mits 9/97	<u></u>	ME ON	L-INA
P.A. (c) 1. 2.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Up with 9/97 Maintained leak detection inspection and repair reports for the following:	⊡•Y □Y	NE⊡N ON	L-INA
H (c) 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Up and 9/97 Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or;	□Y □Y □Y		₽ÑA
PA Hi (c) 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Up mitil 9/97 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?	□ Y □ Y □ Y □ Y		
P.A. H. (c) 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Up until 9/97 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?			₽ńA
P/A H: (c) 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Up mits 9/97 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?			₽ńA
H: (c) 1. 2. 3. 4. 5. 6.	ART V: RECORDKEEPING REQUIREMENTS as the responsible official: heck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Up mtd 9/97 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?			₽ńA

								
PART VI: LEAK DETECTIO	N AND REPAIR	RS						
1. Does the responsible official c	onduct a weekly l	eak detect	tion and repair inspection?	97	□N			
2. Which method of detection is used by the responsible official?								
Visual examination	ı (condensed solv	ent of exte	erior surfaces)	<u>u</u> -				
Physical detection	(airflow felt throu	ıgh gasket	s)	<u></u>				
Odor (noticeable p								
Use of direct-readi	ng instrumentatio	n (FID/PI	D/calorimetric tubes)					
If using direct-reading instru	imentation, is the	e equipm	ent:	•				
a Capable of detecting	g perc vapor conc	entrations	in a range of					
0-500 ppm. b. Calibrated against a	ĀĀ	\square N						
(PID/FID only).	ΩY	ŪΝ						
c. Inspected for leaks a	ŬY	ΠN						
d. Kept in a clean and	•		•	□Y	ΠN			
e. Verified for accurac (calorimetric only)		cate sampl	les	. Q Y	ΠN			
3. Has the facility maintained a l	eak log? Usin	J DEPS	s Calindar	Y	\square_N			
4. The following area should be	i	' .						
Hose connections, fittin couplings, and valves	g Egy	□n	Muck cookers	□Y	ΠN			
Door gaskets and seatin	_		Stills	Qly				
Filter gaskets and seating	_	\square_N	Exhaust dampers	ΞY	ΠN			
Pumps	□Y	\square_N	Diverter valves	ΞY	\square_N			
Solvent tanks and conta	iners $\Box \Upsilon$	\square_{N}	Cartridge Filter housing	\square_{Y}	\square_{N}			
Water separators	ŪΥ	ΠN						
			· · · · · · · · · · · · · · · · · · ·					
James Scott Name of Responsible Office								
Margaret U. Llenni Inspector's Name (Please Pr	5		February 19,19 Date of Inspect	98				
Inspéctor's Name (Please Pr	rint)		· · · · · · · · · · · · · · · · · · ·					
Inspector's Signature	/o 		Approximate Date of Ne	xt Inspect	ion	-		
· ·								

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ADDITIONAL	SITE INFORMATION:		
Machine #1: Manufacturer		Capacity	. lbs
Model#	Serial#	Mfg yr	
Machine #2: Manufacturer Model#	Serial#		
1. Was the facili	npermitted sources only): ty assisted in filling out the notification by the ir y insist on filling out its own notification, and w	-	
11	have statement/specs as to the design accuracy of the design accurac	-	sor? 🖭 Y 🗆 N
2. If wastewater and 3. Does the facil	ste: Intaminated wastewater either treated or disposed is evaporated, is it an approved system, and using a lity have secondary containment for the dry-dry ratio ity have secondary containment for any perc. was the secondary containment for any perc.	carbon filtration?	OY ON OY ON OY ON
1	Industrial Boiler FDH 506602 Serial # S5062 Natural gas? propane? fuel oil?		
not operate or disposed	or machine is down. Temp. on the No Leakest Have Megeving Syre waporate wales Advised him to as hazardous wash. Still &	tim. Notinistale hat wastinate wastinate	So F. Madrine ions Redjust Still asing a must be filtered Lin bottom of
Still or Ke	rep covered. Solvent oder comi	ng from dem	meter-Sweet
-Swent Si	nell. Gord mot ditermine its o	bren - Clorage	yparentlers Compl
an open ! Evaporator	of for Spotting-Banana Smell. O valien drum bekind machin Contride bekind the Store), the sles will be moved offsile. Tassist	e. Mr. Scott 7 Lelped identified Mr. Scott + Boy	furned off water sweetsomethy odor and stated years paccountant

AUC

AIRS ID#: 1030341

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: FACILITY LOCATION: _	Scotta Custom	Cleana	oks R	ECE	DAT	E: <u>3/8/99</u>
FACILITY LOCATION:	755	Indian	Rock	S RA	6 KER1 6	
	Belle	ar Bluff	SFL	3377	Air Monitoring	
		_ 		& Mol	oile sour	
Annual Reporting Period:						19 <u>9</u> 9
Based on each term or condi	tion of the Title V gene	ral air permit, r	ny facility has i	remained in c	compliance with I	DEP Rule
62-213.300, Florida Admini	strative Code (F.A.C.),	during the perio	od covered by the	his statement	<u>Oyes</u>	ОиО
If NO, complete the followin	g:					
#1. Term or condition of the	general permit that ha	s not been in co	ntinuous comp	liance during	the reporting pe	riod stated above:
Exact period of non-complia	nce: from			to		
Action(s) taken to achieve co	ompliance:	•				
Method used to demonstrate	compliance:					
					ing the state of t	,
#2. Term or condition of the	general permit that has	s not been in co	ntinuous comp	liance during	the reporting per	iod stated above:
·			· · ·	Sec.		
Exact period of non-complia	nce: from	<u>.</u>		to		· ,
Action(s) taken to achieve co	mpliance:		<u>.</u>			
Method used to demonstrate	compliance:	- · · · · · · · · · · · · · · · · · · ·			. .	<u> </u>
As the responsible official, I made in this notification are upon rolling averages of pur vear for transfer or combina	true, accurate and com chase receipts, does not	plete. Further,	my annual cor	nsumption of	perchloroethylen	e solvent, based
RESPONSIBLE OFFICIAI	L: <u>James</u> R Name (Plea	Scott I se Print)	c. <u> </u>	Signafi	Med Je	<u>J-8-95</u> Date

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

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	COMPLAINT/DISCOVERY.
AIRS ID#: 1030341 001 FACILITY NAME: FACILITY LOCATION:	DATE: 2800 Scott's Custom C 755 Indian Rocks R Belleair Bluffs, FL,	Cleaners Rd. N
RESPONSIBLE OFFICIA	14	.,
PART I: NOTIFICATION		
(Check appropriate box) 1. Existing facility notified 1 2. New facility notified DA 3. Facility failed to notify D	RM 30 days prior to startuj	<u>_</u>
PART II: CLASSIFICATI	ON .	·
facility qualified	ource 0 gal/yr 2/9/91) ource x<2,100 gal/yr 1,800 gal/yr 800 gal/yr 2/9/91)	
	chloroethylene (perc) purc	chased 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)			
Storing perchloroethylene in tightly sealed and impervious containers?	97	ПN	□ NA
2. Examining the containers for leakage?	UY	ΠN	□NA
3. Closing and securing machine doors except during loading/unloading?	Q Y	ПN	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	₽ Ý	ПN	□NA
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	QΥ	□N	<u>G</u> NA
PART IV: PROCESS VENT CONTROLS			
In Part II-A:			·
If classification (1) has been checked, no controls are required. Proceed to Pa	art V.		
If classification (2) has been checked, the machine should be equipped with a (complete A below)	refrige	rated con	ndenser
If classification (3) has been checked, the machine should be equipped with e condenser or a carbon adsorber (complete A and B below). Carbon adsorber installed prior to September 22, 1993.	ither a must ha	refrigerat ave been	ed ,
If classification (4) has been checked, the machine should be equipped with a (complete A and B below.)	refrige	rated con	ndenser
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?	ďΥ	ŪΝ	
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?	<u>u</u> y	ПN	□NA
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	UY	ΠN	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	ÐÝ	ПΝ	□NA
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	<u>u</u> ry	ΠN	

	•
. Has the responsible official of an existing large or new large area source also:	.इं. <i>e</i>
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?	OY ON
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY ON ONA
Is the temperature differential equal to or greater than 20°F?	Oy On Oma
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?	AME NO YO
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?	OY ON OMA
Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ONA
Routed airflow to the carbon adsorber (if used) at all times?	OY ON ONA
ART V: RECORDKEEPING REQUIREMENTS	4
as the responsible official: heck appropriate boxes)	
Maintained receipts for perc purchased?	OY On
Maintained rolling monthly averages of perc consumption?	DY ON
Maintained leak detection inspection and repair reports for the following:	There I have
a. documentation of leaks repaired w/in 24 hrs? or;	DY ON ONA
 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 ONA
Maintained calibration data? (for direct reading instrument only)	DY DN DNA
Maintained exhaust duct monitoring data on perc concentrations?	AMED NO YES
Maintained startup/shutdown/malfunction plan?	DY DN
Maintained deviation reports?	DY ON ONA
Problem corrected?	OY ON ONA
Maintained compliance plan, if applicable?	DV DN DAYA

PA	ART VI: LEAK DETECTIO	N AND RE	PAIRS		. g.:*	
1.	Does the responsible official of inspection?	all sources, bi-weekly) leak	detection and repair			
2.	Has the facility maintained a l	eak log?	•		OY ON	
3.	Does the responsible official of					
	Hose connections, fitting couplings, and valves	OY ON	I □NA	Muck cookers	DY ON ONA	
	Door gaskets and seating	OY ON	I QNA	Stills	DY ON ONA	
	Filter gaskets and seating	DY ON	□ NA	Exhaust dampers	EY ON ONA	
	Pumps	DY ON	□na	Diverter valves	OY ON ONA	
	Solvent tanks and containers	OY ON	□NA	Cartridge Filter housing	DY ON ONA	
	Water separators	OY ON	AM			
4.	Which method of detection is Visual examination Physical detection Odor (noticeable p Use of direct-readi Halogen leak detect					
	If using direct-reading instru	ımentation,	is the equip	oment:		
	a Capable of detecting pe	rc vapor cor	ncentrations	in a range of 0-500 ppm.	DY ON	
	b. Calibrated against a stan	dard gas pric	or to and afte	r each use(PID/FID only).	\square_{Y} \square_{N}	
	c. Inspected for leaks and o	bvious signs	of wear on	a weekly basis?	□y □n	
	d. Kept in a clean and secu	ure area whe	n not in use.		\Box Y· \Box N	
	e. Verified for accuracy by	use of dupli	cate samples	(calorimetric only)?	□y □n	
_	Margaret V. He Inspector's Name (Please Prin	ennis nt)		3/8/99 Date of Ins	pection	
_	March Viffor	nis		3/00	of Next Inspection	
	Inspector's Signature	*		Approximate Date	of Next Inspection	

ITIONAL SITE INFO		
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TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

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TYPE OF IN	SPECTION:	ANNUAL	COMPLAIN_	NT/DISCOVER	XY 🛄	RE-INSPECTION	<u> </u>
AIRS ID#:	1030341 001	DATI	E: <u>3/8/</u> 99	_ TIME IN:	J:00	TIME OUT: 3.	15
FACILITY	NAME:	Scott	's Custom Clea	ners			
FACILITY	LOCATION:	755_In	dian Rocks Rd.	N			
		Bellea	ir Bluffs, FL, 33'	770			
RESPONSI	BLE OFFICIA	L: James	R. Scott		Phone N	Io.:584-8382	
Permi	t No. <u>1030341-0</u>	01-AG	Exp. Date:09/2	6/2001			
G			pliance requirements 213.300, Florida Ad			ection, the facility is found	d to be in
			pliance requirements / items which are ch	•	g this inspe	ection, the following com	pliance

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, measure 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 an 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:	
	nctions are required, you must take immediate corrective perform a follow-up inspection to determine that proper
Inspection Conducted by: Margaret Henni	is
Inspector's Signature: Mangaret U.	Henris
Phone Number: 464-4422	

He

Revised 01/18/00

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	Scott's	Cistom	Cleaner	S	DATE: 2/4/00
FACILITY LOCATION:	755	INDIAN T	Locks, Rd.	N	
	Bell.	eair BL	uffs .FL	- 33770	
Annual Reporting Period:	March 8		1999 TO	Februare	20,00
Based on each term or condition	on of the Title V ge	eneral air permit, 1	ny facility has ren	nained in compliance	with DEP Rule
62-213.300, Florida Administr	ative Code (F.A.C	.), during the peri	od covered by this	statement. AYES	s 🗖 NO
If NO, complete the following	:				
#1. Term or condition of the g	general permit that	has not been in co	ntinuous complia	nce during the reportin	ng period stated above:
Exact period of non-compliance	ce: from			_ to	
Action(s) taken to achieve con	npliance:			•	
Method used to demonstrate co	ompliance:				
#2. Term or condition of the g	general permit that	has not been in co	ntinuous complia	nce during the reporting	ng period stated above:
Exact period of non-compliance	ce: from	<u> </u>		to	
Action(s) taken to achieve con	npliance:				
Method used to demonstrate co	ompliance:				
As the responsible official, I he in this notification are true, ac purchase receipts, does not excombination facilities. RESPONSIBLE OFFICIAL	curate and comple	ete. Further, my a per year for dry-i	nnual consumption	n of perchloroethylene	solvent, based upon
,	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.

Page _____ of _____.

MAR 1 3 2000

TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF IN	SPECTION:	ANNUAL	└ J-COMPLAIN	T/DISCOVER	Y 🚨	RE-INSPECTION	
AIRS ID#:	103 0341	DATE	:: <u>2/4/</u> 08	TIME IN:	12:45	_TIME OUT: _/a	3:30
FACILITY	FACILITY NAME: Scott's Custom Cleaners						
FACILITY	LOCATION:	_755 Indian R	Rocks Rd. N				
		Belleair Bluf	ffs, FL, 33770				·
RESPONSIE	RESPONSIBLE OFFICIAL: James R. Scott Phone No.: 727-584-8382						
	Permit No.		·	Exp. Date:			
		_	liance requirements e 13.300, Florida Adm	_	-	ction, the facility is four	ıd to be in
. 🗆		-	oliance requirements e items which are check	_	this inspe	ction, the following con	npliance

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, Secti 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 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 I 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, measure 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 unloading.				
	Temperature monitoring was not conducted after an appropriate cooldown period and after verifying that the coolant was 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:				
		ctions are required, you must take immediate corrective perform a follow-up inspection to determine that proper			
	Inspection Conducted by: Margaret H.	annis			
	Inspector's Signature: Margaret V.	Henris			
	Phone Number: 464-4	422			

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION
AIRS ID#: 1030341 Date: 2/4/00 TIME IN: 12:45 TIME OUT: 13:30 FACILITY NAME: Scott's Custom Cleaners FACILITY LOCATION: 755 Indian Rocks Rd. N Belleair Bluffs, FL, 33770
RESPONSIBLE OFFICIAL: James R. Scott PHONE: 727-584-1382 CONTACT: James R. Scott PHONE: 1
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 (Constructed before 12/9/91) 3. Existing large area source dry-to-dry only, 140 < x < 2.100 gal/yr both types, x<140 gal/yr (Constructed before 12/9/91) 4. New large area source dry-to-dry only, 140 < x < 2.100 gal/yr both types, 140 < x < 1.800 gal/yr (Constructed on or after 12/9/91) This is a correct facility classification: If no, please check the appropriate classification: If acility qualified for a general permit as number above 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 386 gallons.

DADE III. CENEDAL COMEDOL DECLIDEMENTO						
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	ΠN	□NA			
2. Examining the containers for leakage?	Y	Ū N	□NA			
3. Closing and securing machine doors except during loading/unloading?	Y Y	ΠN	•			
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	O 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 refrigerated condenser (complete A below)						
If classification (3) has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993.						
If classification (4) has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below.)						
A. Has the responsible official of all new sources and existing large area sou (check appropriate boxes)	rces:					
1. Equipped all machines with the appropriate vent controls?	UY	□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?	UY	□N	□NA			
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	<u>u</u> ry	□N				
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	UY	ΠN	□NA			
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	Y P	□N				

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?	DY On
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 ppm?	Oy On Oma Oy On Oma
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?	Oy On Mána
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	Oy On Oma
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON SMA
PA	ART V: RECORDKEEPING REQUIREMENTS	
Ha (cl	as the responsible official: neck appropriate boxes)	
1.	Maintained receipts for perc purchased?	D. D.
2.		LY UN
	Maintained rolling monthly averages of perc consumption?	
3.	Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following:	DY ON
3.		
3.	Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or;	Dy On
	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?	OY ON ONA
4.	Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or;	OY ON ONA
4.	Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? (for direct reading instrument only) Maintained exhaust duct monitoring data on perc concentrations?	OY ON ONA OY ON ONA OY ON ONA
4.5.6.	Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? (for direct reading instrument only) Maintained exhaust duct monitoring data on perc concentrations?	OY ON ONA OY ON ONA OY ON ONA OY ON ONA
4.5.6.	Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? Maintained calibration data? (for direct reading instrument only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan?	OY ON ONA OY ON ONA OY ON ONA OY ON ONA OY ON ONA

PA	PART VI: LEAK DETECTION AND REPAIRS							
1.	Does the responsible official c inspection?	onduct	a wee	kly (for sn	nall sources, bi-weekly) leak	detect	ion and repair □N	
2.	Has the facility maintained a le	ak log	;?			Y	ПN	
3.	Does the responsible official c	heck tl	ne follo	owing area	as for leaks:			
	Hose connections, fitting couplings, and valves	Ūrý	Пν	□na	Muck cookers	⊒Ý	□n □na	
	Door gaskets and seating	UY	ПΝ	\square NA	Stills	Y Y	□n □na	
	Filter gaskets and seating	YY.	ΠN	□NA	Exhaust dampers	CY	□n □na	
	Pumps	Y Y	Ωи	□na	Diverter valves	<u>U</u> Y	□n □na	
	Solvent tanks and containers	TY	ПN	□NA	Cartridge Filter housing	Q _Y	□n □na	
	Water separators	Y	ΠN	□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 vap	or con	centrations	s in a range of 0-500 ppm.		OY ON	
	b. Calibrated against a star	dard g	as prio	r to and af	ter each use(PID/FID only).		UY UN	
	c. Inspected for leaks and	obviou	s signs	of wear or	n a weekly basis?		□y □n	
	d. Kept in a clean and sec	ire are	a wher	n not in us	e.		□Y □N	
	e. Verified for accuracy by	use of	duplic	cate sample	es (calorimetric only)?		□Y □N	
	Margaret H. Inspector's Name (Please Pri Margaret V.	Jenn nt) Jen	is		2/4/00 Date of Ins	spection	1	
	inspector's Signature				Approximate Date of Next Inspection			

ADDITIONAL SITE INFORMATION:	
Observed meg-Evap System	- No percodor in Blank
Observed meg-Evap System Owner keeps noag seconds	in spiead sheet formal.
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TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

()(Q (ASS)
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TYPE OF IN	SPECTION:	ANNUAL L	1 COMPLAIN	T/DISCOVERY 🖵	RE-INSPECTION	
AIRS ID#:	1030341	DATE:	8/21/00	TIME IN: 11:00	entime out: 11	<u>:39n.m</u> .
FACILITY	NAME:	_Scott's Cus	stom Cleaner	S :		<u> </u>
FACILITY	LOCATION:	_755 Indian Roc	ks Rd. N	· ,		
		Belleair Bluffs.	FL, 33770			
RESPONSI	BLE OFFICIAL	James R. Sco	ott ·	Phon	e No.: <u>(727) 584-838</u>	2
	Permit No.	_1030341-001-4	\G	Exp. Date:2/2	21/2002	
		•	•	valuated during this inspinistrative Code (F.A.C.	pection, the facility is foun	d to be in
d			nce requirements e		pection, the following con	npliance

Inspection Summary Report Guidance

	Compliance Requirement/Problem	Follow-up Action Required
	<u> </u>	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.
Ø	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 maintalin 12-month consecutive perchloroethylene usage total from January, 2000 - July, 2000. m. 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: Jeff Morris Inspector's Signature:						
Phone Number: Phone Number: Pa	92 de 2 of 2					

PERCHLOROETHYLENE DRY CLEANERS TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	☑ COMPLAINT/DISCOVERY ☐
AIRS ID#:_1030341 FACILITY NAME: FACILITY LOCATION:	Date: 8/21/ Scott's Custor 755 Indian Rocks Belleair Bluffs, F	as Rd. N
RESPONSIBLE OFFICIA	AL: James R. Scott	PHONE: (727) 584-8382
CONTACT:	Alice Harwood	PHONE: <u>(コユコ) 5</u> 84- <u>8382</u>
PART I: NOTIFICATION	<u> </u>	
 Existing facility notified New facility notified DA Facility failed to notify I 	ARM 30 days prior to sta	•
PART II: CLASSIFICAT	ION	
Facility indicated on notific (Check appropriate box) A. 1. Existing small area dry-to-dry only, x<12 transfer only, x<200 both types, x<140 ga (Constructed before) 3. Existing large area and dry-to-dry only, 140 transfer only, 200 < x-both types, 140 < x<1 (Constructed before) This is a correct facility class	source 40 gal/yr gal/yr gal/yr 12/9/91) source <x ,800="" 12="" 2,100="" 9="" 91)<="" <="" <1,800="" gal="" th="" yr=""><th> No notification form Drop store / out of business / petroleum 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) 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) Can not determine </th></x>	 No notification form Drop store / out of business / petroleum 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) 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) Can not determine
If no, please check the a facility qualified facility exceeds a B. The total quantity of per	appropriate classification for a general permit as nabove limits and is not elerchloroethylene (perc.) proceedings and the control of the con	

PART III: GENERAL CONTROL REQUIREMENTS						
Is the responsible official of the dry cleaning facility: (check appropriate boxes)		٠				
1. Storing perchloroethylene in tightly sealed and impervious containers?	₫ Y	□ N	☐ NA			
2. Examining the containers for leakage?	T Y	ΠN	□ NA			
3. Closing and securing machine doors except during loading/unloading?	⊈ Y	ΠN				
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	ĭ NA			
PART IV: PROCESS VENT CONTROLS						
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 (complete A below)	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 should be equipped with a (complete A and B below.)	refrige	rated con	denser			
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?	₫ Y	\square N				
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	 Y Y	ΠN	□ NA			
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	⊴ Y	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	ΠN	□ NA.			
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	QΥ	ďN				

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?	ody □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 ppm?	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 eoils?	□Y □N □NA
6. Routed airflow to the carbon adsorber (if used) at all times?	□y □n □na
PART V: RECORDKEEPING REQUIREMENTS	· · · · · · · · · · · · · · · · · · ·
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	⊠y □n
2. Maintained rolling monthly averages of perc consumption?	DY MYN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	OY ON MA
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 MYA
4. Maintained calibration data? (for direct reading instrument only)	DY DN DNA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON MA
6. Maintained startup/shutdown/malfunction plan?	ɗy □n
7. Maintained deviation reports?	□y □n ☑na
Problem corrected?	DY DN MNA

PA	ART VI: LEAK DETECTIO	N AN	D REF	PAIRS			<u> </u>
1.	Does the responsible official c inspection?	onduc	t awee	kly (for s	mall sources, bi-weekly) leal		tion and repair
2.	Has the facility maintained a le	eak log	3 ?			⊈Y.	\square_{N}
3.	Does the responsible official of	heck t	he folk	owing are	as for leaks:		
,	Hose connections, fitting couplings, and valves	ďγ	□N	□NA	Muck cookers	₫Y	□n □na
	Door gaskets and seating	₫Y	□N	□NA	Stills	₫Y	\square N \square NA
	Filter gaskets and seating	Y Y	\square_{N}	\square_{NA}	Exhaust dampers	₫Y	□n □na
	Pumps	₽́Y	□N	□NA	Diverter valves	₫Y	□n □na
	Solvent tanks and containers	₫Y	N	□NA	Cartridge Filter housing	$\mathbf{\underline{r}}_{\mathbf{Y}}$	□n □na
	Water separators	Y	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	centration	s in a range of 0-500 ppm.		DY On
	b. Calibrated against a stan	dard g	as prio	r to and af	ter each use(PID/FID only).	_	$\square_{Y} \square_{N}$
	c. Inspected for leaks and o	bvious	s signs	of wear o	n a weekly basis?		□y □n
	d. Kept in a clean-and secure area when not in use.						$\square_{\mathrm{Y}} \square_{\mathrm{N}}$
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?						
Inspector's Name (Please Print) Date of Inspection 2/21/2001 Inspector's Signature Approximate Date of Next Inspection							
	\cup \downarrow \downarrow \backslash $/$						



DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:S	Scott's Custom Cleaners		Date: 8/21/60
FACILITY LOCATION:_	755 Indian Rocks Rd. N		· · ·
_	Belleair Bluffs, FL, 3377	' 0	<u> </u>
Annual Reporting Period:	February 4,	20 <u>00</u> To Au	gust 21, 20 00
Based on each term or condition of 213.300, Florida Administrative C	· ·	•	compliance with DEP Rule 62- □ YES ×NO
IF NO, complete the following	: .	•	
	•		g the reporting period stated above:
Exact period of non-compliance:	from January,	<u>, 2000</u> - ဗ <u>ည</u> မ	•
Action(s) taken to achieve compliant	ance: Maintain Perchlornet	monthly 12 an	nonto consecutiv
Method used to demonstrate comp	oliance:	71333 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
			ng the reporting period stated above:
Exact period of non-compliance: 1	rom	to	<u> </u>
Action(s) taken to achieve complia	ance:		
Method used to demonstrate comp	oliance:		·
As the responsible official, I that the statements made in to f perchloroethylene solvent per year for dry-to-dry facility	hereby certify, based on his notification are true, a hased upon rolling averates or 1,800 gallons per y	information and belief for accurate and complete. Fages of purchase receipts ear for transfer or combi	ormed after reasonable inquiry, Further, my annual consumption , does not exceed 2,100 gallons mation facilities.
RESPONSIBLE OFFICIAL	: James R. Scott (Name Please Print)		8-21-2000

^{*}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.

Z 333 LL3 237 US Postal Service Receipt for Certified Mail

AIRS ID 1030341

JAMES R SCOTT JR
JAMES R SCOTT JR
755 NORTH INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL 33770

Postage	\$
Certified Fee	
Special 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	
	Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Addresse's Address TOTAL Postage & Fees

SENDER: "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 card to you. "Attach this form to the front of the mailpiece, or on the back if spacemint. "Write 'Return Receipt Requested' on the mailpiece below the article "The Return Receipt will show to whom the article was delivered and delivered.	I also wish to red following service extra fee): 1. Address 2. Restricte Consult postmas	s (for an ee's Address ed Delivery	
AIRS ID 1030341 JAMES R SCOTT JR JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770	4b. Service Registere Express	Type od Mail ceipt for Merchandise	Certified Insured COD
5. Received By: (Print Name) 6. Signature: (Addressee or Agent) X Lynn Nitchun	8. Addressed and fee is	e's Address (Only paid)	

SCOTT'S CUSTOM	CLEANER	IS, INC. • BELLEAI	R BLUFFS, FLORIDA 33770	013232			
• •				013232	CHECK NO.	12232	
Invoice #	Type	Date	Description	Total	Amount	Discount	
012098	Inv	01/20/98	PERMIT		\$50.00	\$0.00	
012198	Inv	01/21/98	PERMIT		\$50.00	\$0.00	

Remittance for: DEPT. OF ENVIRONMENTAL PROTECT

Totals:

\$100.00

\$0.00

\$100.00

Date: 02/23/98 Check Amount:



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

303845

Do NOT Remove Label

AIRS ID 1030341

JAMES R SCOTT JR JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770

FOR GOVERNMENT USE ONLY COR.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

SCOTT'S CUSTOM CLEANERS, INC. BELLEAIR BLUFFS, FLORIDA 34640

011795

11795

Invoice # Type

Date

Description

Total Amount

Discount

4 LOC

Inv. 02/27/97 Invoice

\$200.00

CHECK NO.

\$0.00

TOT OF ENVIRONMENTAL PROTECT

Date: 02/27/97

Check Amount:

\$200.00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

MAR 10 97

TOTAL AMOUNT DUE: \$50.00

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AIRS ID#: 1030341

JAMES R SCOTT JR JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Оы.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 1030341 SCOTT'S CUSTOM CLEANERS JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273 .P. 265 302 308

US Postal Service Receipt for Certified Mail

AIRS ID#: 1030341 JAMES R SCOTT JR JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770

	Postage	\$				
	Certified Fee					
	Special Delivery Fee					
10	Restricted Delivery Fee					
1999	Return Receipt Showing to Whom & Date Delivered					
, Apri	Return Receipt Showing to Whom, Date, & Addressee's Address					
800	TOTAL Postage & Fees	\$				
<u>۔</u>	Postmark or Date					
PS Form 3800 , April 1995	2/17/	97				

Is your RETURN ADDRESS completed on the reverse side?	SENDER: 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 card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write 'Return Receipt Requested' on the mailpiece below the article. The Return Receipt will show to whom the article was delivered and delivered.	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.	ceipt Service.	
	3. Article Addressed to ARS ID#: 1030341 ARS ID#: 1030341 JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770	4a. Article Number 265302308 4b. Service Type Registered		
	5. Received By: (Print Name) 6. Signature: (Addressee or Agent), X PS Form 3811, December 1994	8. Addréssee and fee is	paid) Domestic Return Receipt	Thank

Z 210 662 954 US Postal Service Receipt for Certified Mail No Insurance Coverage Provided. Do not use for International Mail (See reverse) Sent to AIRS ID # 1030341001AG JAMES R SCOTT JR SCOTT'S CUSTOM CLEANERS 755 NORTH INDIAN ROCKS ROAD **BELLEAIR BLUFFS FL 33770** Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whorn & Date Delivered Return Receipt Showing to Whorn Date, & Addressee's Address Return Receipt Showing to Whom, Date, & Addressee's Address Form **3800**, TOTAL Postage & Fees Postmark or Date

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature X Agent Addressee D. Is delivery address different from item 1? If YES, enter delivery address below:
10 AIRS ID # 1030341001AG JAMES R SCOTT JR SCOTT'S CUSTOM CLEANERS	ii red, citor delivery address below.
755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label) Z 2 / 0 6 6 2 75 4	
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789

S

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THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 1030340

SCOTT'S CUSTOM CLEANERS JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1

Fund: 20-2-035001 Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

400782

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00 ✓

Do NOT Remove Label

AIRS ID # 1030341

SCOTT'S CUSTOM CLEANERS JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770 RECEIVED MAIL ROOM DEC 22 00

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273

SCOTT'S CUSTOM CLEANERS, INC. . BELLEAIR BLUFFS, FLORIDA 33770

•		016417	CHECK NO.	16417
Invoice #	Type Date Description		Total Amount	Discount
1201 12012000	Inv 12/01/2000 INVOICE Inv 12/01/2000 Invoice		\$50.00 \$50.00	\$0.00 \$0.00

Remittance for:

Totals:

\$100.00

\$0.00

DEPT. OF ENVIRONMENTAL PROTECT
Date: 12/19/2000

Check Amount:

\$100.00



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

		Z 3333 US Postal Service Receipt for Cer	tified Mail	
	EMA 1381		AIRS ID # 10304 AD	331
		Postage	\$	
		Certified Fee		
, a		Special Delivery Fee		
		Restricted Delivery Fee		
	1995	Return Receipt Showing to Whom & Date Delivered		
	April	Return Receipt Showing to Whom, Date, & Addressee's Address		
	800,	TOTAL Postage & Fees	\$	
	PS Form 3	Postmark or Date		
		top of envelope to	old at line over	4
, 8	Postage Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom & Addressee's Address TOTAL Postage & Fees \$ 13819 WALSINGHAM ROAD Return Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date, & Addressee's Address		hat we can return this	I also wish to receive the following services (for an extra fee):
e f	ront of th	ne mailpiece, or on the back i	f space does not	1. Addressee's Addre

1	ver top of envelope to	o ənil ts blo	건		
RETURN ADDRESS completed on the reverse side?	SENDER: 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 card to you. Attach this form to the front of the mailpiece, or on the back if spac permit.		I also wish to receive the following services (for an		
	■Write *Return Receipt Requested* on the mailpiece below the articl ■The Return Receipt will show to whom the article was delivered an delivered.			eipt Servic	
	AIRS ID # 1030431 PARCLAY CLEANERS EMAD MOSSAD 13819 WALSINGHAM ROAD LARGO FL 33774	4b. Service Type Registered Express Mail Return Receipt for Merchandise COD 7. Date of Delivery		you for using Return Rec	
	5. Received By: (Print Name) (EMA) (SAD)	8. Addressee's Address (Only if requested and fee is paid)		Lank	
ls your	6. Signaturé: (Addressee or Agent)		Daniel Date Date Date Date Date Date Date Date		
1	PS Form 3811 , December 1994		Domestic Return Receipt	Ì	

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

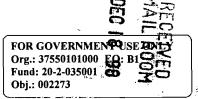
Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID # 1030340

SCOTT'S CUSTOM CLEANERS JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0354779

Please mclode Four AIRS IDE in your check or money order. This number can be found below on your mailing label.

DEC ? 3 1978 TOTAL AMOUNT DUE: \$50.00

Bureau of Air Monitoring & Mobile Sources

Do NOT Remove Label

AIRS ID # 1030341

SCOTT'S CUSTOM CLEANERS JAMES R SCOTT JR 755 NORTH INDIAN ROCKS ROAD BELLEAIR BLUFFS FL 33770 FOR GOVERNMENT US

Org.: 37550101000 EO: B Fund: 20-2-035001

Fund: 20-2-03500 Obj.: 002273

	SCOTT'S CUSTOM CLI	EANERS, I	NC. • BELLEAIR E	LUFFS, FLORIDA 33770	,			
:					014304	CHECK NO.	14304	
	Invoice #	Type	Date	Description	Total	Amount	Discount	:
	12-01 12-02	Inv Inv	12/01/98 12/01/98			\$50.00 \$50.00	\$0.00 \$0.00	
!								ì
								1

Remittance for:

DEPT. OF ENVIRONMENTAL PROTECT
Date: 12/15/98

Totals: \$100.00 \$0.00

Check Amount: \$100.00