Department of Environmental Protection

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

January 30, 1997

Mr. Michael T. Grubbs
President
Pacer, Inc.
2300 9th Street North
St. Petersburg, Florida 33704

Re: Facility I.D. No. 1030344

Dear Mr. Grubbs:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 5, 1996.

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

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

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

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

Sincerely,

for Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Louis Fernandez, Southwest District

Bowman, Sandy

From: Landrum, AnneMarie
Sent: Thursday, February 14, 2002 8:26 AM
To: Bowman, Sandy
Cc: George, Jared
Subject: DDN 413957

Good morning Sandy:

After looking at my copies in the 2/11/02 deposit folder, I see that there was a hand written note attached to the invoice which reads: We have a 3rd location at 6111 10th Street North, St. Petersburg, Fl.. The note was paper clipped to the invoice; it SHOULD still be there. Let me know if you need me to make a copy of my copy to send to you.

Anne Marie Landrum
Accountant 1

Bowman, Sandy

From: Bowman, Sandy
Sent: Wednesday, February 13, 2002 2:17 PM
To: George, Jared
Subject: FW: RE: Cashlisting for 11-feb-2002

-----Original Message-----
From: Bowman, Sandy
Sent: Wednesday, February 13, 2002 2:13 PM
To: Barfoot, Heath
Subject: RE: Cashlisting for 11-feb-2002

Heath,

I received a cashlisting today that lists 3 $50.00 payments for 3 separate Pacer Inc facilities. The DDN for all three facilities is 413957. I have the blue receipts for two of the facilities (Value Cleaners), but did not receive any documentation for the third. With out any documentation, I do not know which of there other facility to apply the third $50 payment.

Sandy Bowman
Environmental Consultant
DEP-Division of Air Resource Management
(850)921-9583 or SUNCOM 291-9583
E-Mail: Sandy.Bowman@dep.state.fl.us

Bowman, Sandy

From: Bowman, Sandy
Sent: Wednesday, February 13, 2002 2:12 PM
To: 'jmorris@co.pinellas.fl.us'
Subject: RE: Pacer Inc

Hey Jeff!

We received a little sticky note attached to an invoice receipt from PACER INC that they have a third facility for which they paid the $50.00 fee. The facility is AIRS ID #1030346. We have this facility identified as INACTIVE in the database. Do you know if this facility has recently changed their status?

Thanks for any information you may have on this.

Sandy

Sandy Bowman
Environmental Consultant
DEP-Division of Air Resource Management
(850)921-9583 or SUNCOM 291-9583
E-Mail: Sandy.Bowman@dep.state.fl.us

Bowman, Sandy

From: Bowman, Sandy
Sent: Thursday, February 14, 2002 10:11 AM
To: 'jmorris@co.pinellas.fl.us'
Subject: RE: Pacer

OOPS! I gave you the wrong AIRS ID # in the previous email I sent you concerning Pacer IN. The correct ID# is 1030344 (not 1030346). ARMS indicates this facility is now using petroleum.

Pacer Inc has apparently sent in payments for 3 facilities. We have invoice receipts for AIRS #'s 1030466 and 0571086. The only clue to the third payment is the note stating that there is a third facility located at 6111 10th Street North in St. Petersburg.

If this facility is still using petroleum, then I can refund the $50.00.

Thank you. Happy Valentines Day!

Sandy

Sandy Bowman
Environmental Consultant
DEEP-Division of Air Resource Management
(850)921-9583 or SUNCOM 291-9583
E-Mail: Sandy.Bowman@dep.state.fl.us

Bowman, Sandy

From: Jeff Morris [jmorris@co.pinellas.fl.us]
Sent: Thursday, February 14, 2002 10:59 AM
To: Bowman, Sandy
Subject: RE: Pacer

Hey Sandy,

Happy Valentine's Day to you too!

Pacer, Inc. (1030344) is indeed classified as Pertrolium Dry Cleaner. The facility switched over December, 1999.

Take Care. May your day be filled with roses.

>>> "Bowman, Sandy" <Sandy.Bowman@dep.state.fl.us> 02/14/02 10:11AM >>>
OOPS! I gave you the wrong AIRS ID # in the previous email I sent you concerning Pacer IN. The correct ID# is 1030344 (not 1030346). ARMS indicates this facility is now using petroleum.

Pacer Inc has apparently sent in payments for 3 facilities. We have invoice receipts for AIRS #'s 1030466 and 0571086. The only clue to the third payment is the note stating that there is a third facility located at 6111 10th Street North in St. Petersburg.

If this facility is still using petroleum, then I can refund the $50.00.

Thank you. Happy Valentines Day!

Sandy

Sandy Bowman
Environmental Consultant
DEEP-Division of Air Resource Management
(850)921-9583 or SUNCOM 291-9583
E-Mail: Sandy.Bowman@dep.state.fl.us

PACER, INC.

1800 4th Street North
St. Petersburg, FL 33704
Phone: (727) 822-3159
Fax: (727) 822-1607

February 23, 2001

Title V Air General Permits Receipts
P.O. Box 3070
Tallahassee FL 32315-3070

RE: Pacer Inc. d/b/a Sterling Cleaners/Value Cleaners

Enclosed are two permit renewals, and a check for three permit renewals. We need to renew for three locations, however I cannot tell which location is missing.

In the past, we had four permits but our location at 2300 9th Street North was completely lost in a fire on October 29, 1999. The locations we are renewing are:

1800 4th Street North, St. Petersburg FL 33704 #1030466
6111 10th Street North, St. Petersburg FL 1030344
4214 Nebraska Avenue, Tampa FL #0571086

Please also change our address to the 4th Street location.

PACER, INC.

Elizabeth Pauley-Wisniewska
Controller

Enclosures

Sterling Cleaners
Quality Without Compromise Since 1946

Value Cleaners
"Best for Less"

PT = 11672

A

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☐

TIME IN: 2:00p.m.	TIME OUT: 3:45p.m.	AIRS ID# **1030344 001**
TYPE OF FACILITY:	**Perchloroethylene Dry Cleaner**	
FACILITY NAME:	**Pacer, Inc.**	DATE: **June 17, 1997**
FACILITY LOCATION :	**6111 10th St. N, St. Petersburg, FL 33703**	
RESPONSIBLE OFFICIAL:	**MICHAEL GRUBBS**	PHONE NUMBER:**813 527-5322**

☐ 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:

COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
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 twelve month rolling average.	Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a twelve month rolling average.
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
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.
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.

The Annual Compliance Certification form has been properly certified and submitted to the inspector. Yes ☒ No ☐

DATE OF NEXT INSPECTION: July 7, 1997 (Approximate)

INSPECTION CONDUCTED BY: Jeffrey Morris (Please Print)

INSPECTOR'S SIGNATURE: Jeffrey Morris PHONE NUMBER: 464-4422

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☐

TIME IN: 2:00p.m.	TIME OUT: 3:45p.m.	AIRS ID# **1030344 001**
TYPE OF FACILITY:	**Perchloroethylene Dry Cleaner**	
FACILITY NAME:	**Pacer, Inc.**	DATE: **June 17, 1997**
FACILITY LOCATION :	**6111 10th St. N, St. Petersburg, FL 33703**	
RESPONSIBLE OFFICIAL:	**MICHAEL GRUBBS**	PHONE NUMBER:**813 527-5322**

☐ 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:

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.

Comments:

The Annual Compliance Certification form has been properly certified and submitted to the inspector. Yes ☒ No ☐

DATE OF NEXT INSPECTION: July 7 1997 (Approximate)

INSPECTION CONDUCTED BY: Jeffrey Morris (Please Print)

INSPECTOR'S SIGNATURE: Jeffrey Morris PHONE NUMBER: 464-4422

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
   Pacer, Inc.
2. Site Name (For example, plant name or number):
   62nd Ave
3. Hazardous Waste Generator Identification Number:
   FLD 982 172 355
4. Facility Location:
   Street Address: 6111 10th Street North
   City: St. Petersburg County: Pinellas Zip Code: 33703
5. Facility Identification Number (DEP Use):
   1030344 ~~0402816~~

Responsible Official

6. Name and Title of Responsible Official:
   Michael T. Corubbs, President
7. Responsible Official Mailing Address:
   Organization/Firm: PACER Inc.
   Street Address: 2300 9th Street North
   City: St. Petersburg County: Pinellas Zip Code: 3704
8. Responsible Official Telephone Number:
   Telephone: (813) 822 - 3159 Fax: (813) 822 - 1607

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):
   Elizabeth Wisnieustra
10. Facility Contact Address: 2300 9th Street North
    Street Address:
    City: St. Petersburg County: Pinellas Zip Code: 33704
11. Facility Contact Telephone Number:
    Telephone: (813) 822 - 3155 Fax: (813) 822 - 1607

RECEIVED
SEP 5 1996
Bureau of Air Monitoring & Mobile Sources

#1030344

62nd Ave.

- Spoke with Elizabeth Wisnieuska 10/4/96

p. 13 9. add title – Controller

p. 14 3. Should be new large area source

p. 15 4. Should be new large area source w/ refrig. con.
5. (d) not required, mark out "V" and initial

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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
Example	*#1*	*03-OCT-93*	*12-NOV-93*	*#2*	*08-DEC-91*		*#3*	*02-MAR-92*	*02-MAR-92*
Dry-to-Dry Unit	#1								
✓ (1) w/ ref. condenser		5/93	5/93						
(2) w/ carbon adsorber		5/93	5/93						
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit									
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									

(b) Control devices are required, but not yet installed [____]

(c) No control devices are required to be installed [____]

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?
[260] gallons

(b) If less than 12 months, how many? [____] months
Check why it is less than 12 months: New owner: [____] New store: [____] Did not keep records: [____]

(3) What is the facility's source classification based on the definitions found in section (3) of Part II?
(Indicate with an "X". Select one classification only.)

new large nt.

Existing small area source [____] New small area source [____]

Existing large area source [X] New large area source [____]

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

Existing large area source Carbon adsorber	[X]	Refrigerated condenser	[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 use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site:

All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.

All steam and hot water generating units exempt	[X]
No such units on-site	[ ]

Equipment Monitoring and Recordkeeping Information

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

(a) Purchase receipts and solvent purchases	[✓]
(b) Leak detection inspection and repair	[✓]
(c) Refrigerated condenser temperature monitoring	[✓]
(d) Carbon adsorber exhaust perc concentration monitoring	[✓]
(e) Instrument calibration	[✓]
(f) Start-up, shutdown, malfunction plan	[✓]

Surrender of Existing Air Permit(s)

Please indicate with an "X" the appropriate selection:

[ ] I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s) _____.

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

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

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

Signature _____ Date 9/1/96

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☐

AIRS ID#: 1030344 TIME IN: 1:50 p.m TIME OUT: 2:50 p.m
FACILITY NAME: Sterling Cleaners (Ph# 527-5322)
FACILITY LOCATION: 6111 10th St N
St Petersburg, FL 33703

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)

2. New small area source ☐
   dry-to-dry only, x<140 gal/yr
   transfer only, x<200 gal/yr
   both types, x<140 gal/yr
   (constructed on or after 12/9/91)

3. Existing large area 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 on or after 12/9/91)

This is a correct facility classification ☑Y ☐N

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 65 gallons.

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 ☐N
2. Examining the containers for leakage?	☑Y ☐N
3. Closing and securing machine doors except during loading/unloading?	☑Y ☐N
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☑Y ☐N
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐Y ☐N ☑N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

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

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls?	☑Y ☐N
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	☑Y ☐N ☐N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	☑Y ☐N ☐N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	☐Y ☑N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	☑Y ☐N
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	☑Y ☐N

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	☐Y ☑N

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? ☐Y ☐N

   Is the temperature differential equal to or greater than 20° F? ☐Y ☐N

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? ☐Y ☐N ☐N/A

   Is the perc concentration equal to or less than 100 ppm? ☐Y ☐N

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? ☐Y ☐N

5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? ☐Y ☐N ☐N/A

6. Routed airflow to the carbon adsorber (if used) at all times? ☐Y ☐N ☐N/A

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? ☐Y ☑N
3. Maintained leak detection inspection and repair reports for the following:
   a. documentation of leaks repaired w/in 24 hrs? or; ☐Y ☑N
   b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? ☐Y ☑N
4. Maintained calibration data? *(for direct reading instruments only)* ☐Y ☐N ☑N/A
5. Maintained exhaust duct monitoring data on perc concentrations? ☐Y ☐N N/A
6. Maintained startup/shutdown/malfunction plan? ☐Y ☑N
7. Maintained deviation reports? ☐Y ☑N
   Problem corrected? ☐Y ☐N
8. Maintained compliance plan, if applicable? ☐Y ☐N ☑N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly leak detection and repair inspection? ☑Y ☐N
2. Which method of detection is used by the responsible official?
   - Visual examination (condensed solvent on exterior surfaces) ☑
   - Physical detection (airflow felt through gaskets) ☑
   - Odor (noticeable perc odor) ☑
   - 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? ☐Y ☐N

b. Calibrated against a standard gas prior to and after each use (PID/FID only)? ☐Y ☐N

c. Inspected for leaks and obvious signs of wear on a weekly basis? ☐Y ☐N

d. Kept in a clean and secure area when not in use? ☐Y ☐N

e. Verified for accuracy by use of duplicate samples (calorimetric only)? ☐Y ☐N

Non Applicable

3. Has the facility maintained a leak log? ☐Y ☑N

4. The following areas should be checked for leaks by the inspector:

	Leak Detected?			Leak Detected?	
Hose connections, fittings, couplings, and valves	☐Y	☑N	Muck cookers	☐Y	☑N
Door gaskets and seating	☐Y	☑N	Stills	☐Y	☑N
Filter gaskets and seating	☐Y	☑N	Exhaust dampers	☐Y	☑N
Pumps	☐Y	☑N	Diverter valves	☐Y	☑N
Solvent tanks and containers	☐Y	☑N	Cartridge filter housings	☐Y	☑N
Water separators	☐Y	☑N			

Matthew Blaine
Name of Responsible Official

Jeffrey Morris
Inspector's Name (Please Print)

Inspector's Signature

6/17/97
Date of Inspection

7/2/97
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Renzacci 48lb Capacity
Clean Pro 440
Serial # 10300

- No maintenance of perc receipts.
- No rolling monthly average
- No leak log
- No weekly temperature sensor log.
- No SSM plan
- No Temperature sensor accuracy letter.

- Purchase receipts located at 2300 9th St. N
- Facility has prefiltration for waste water. MegEvap super system
- Fulton boiler 15hp Natural gas fired.
- Consultant is hired to monitor equipment.

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☑

TIME IN: 10:35 a.m.	TIME OUT: 11:55 a.m.	AIRS ID# **1030344 001**
TYPE OF FACILITY:	**Perchloroethylene Dry Cleaner**	
FACILITY NAME:	**Sterling Cleaners**	DATE: September 25, 1997
FACILITY LOCATION :	**6111 10th St. N, St. Petersburg, FL 33703**	
RESPONSIBLE OFFICIAL:	**Michael Grubbs**	PHONE NUMBER:(813) 527-5322

☐ 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:

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.

Comments:
The facility will need to provide proof that the temperature sensor is on the outlet exhaust side of the refrigerated condenser.

1030344
equals 62nd AVE

The Annual Compliance Certification form has been properly certified and submitted to the inspector. Yes ☑ No ☐

DATE OF NEXT INSPECTION: October 9, 1997 (Approximate)

INSPECTION CONDUCTED BY: Jeff Morris (Please Print)

INSPECTOR'S SIGNATURE: Jeffrey Morris PHONE NUMBER: 464-4422

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☑

TIME IN: 10:35 a.m.	TIME OUT: 11:55 a.m.	AIRS ID# **1030344 001**
TYPE OF FACILITY:	**Perchloroethylene Dry Cleaner**	
FACILITY NAME:	**Sterling Cleaners**	DATE: September 25, 1997
FACILITY LOCATION :	**6111 10th St. N, St. Petersburg, FL 33703**	
RESPONSIBLE OFFICIAL:	**Michael Grubbs**	PHONE NUMBER:(813) 527-5322

☐ 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:

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.

Comments:
The facility will need to provide proof that the temperature sensor is on the outlet exhaust side of the refrigerated condenser.

The Annual Compliance Certification form has been properly certified and submitted to the inspector. Yes ☑ No ☐

DATE OF NEXT INSPECTION: October 9, 1997 (Approximate)

INSPECTION CONDUCTED BY: Jeff Morris (Please Print)

INSPECTOR'S SIGNATURE: Jeffrey Thomas PHONE NUMBER: 464-4422

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☑

AIRS ID#: 1030344 DATE: 9/25/97 TIME IN: 10:35am TIME OUT: 11:55am

FACILITY NAME: Sterling Cleaners

FACILITY LOCATION: 6111 10th St N
St Petersburg, FL 33703

RESPONSIBLE OFFICIAL: Michael Grubbs PHONE: 527-5322

CONTACT NAME: Matt Blaine PHONE: 527-5322

PART I: NOTIFICATION

(check appropriate box)

Existing facility notified DARM by 9/1/96 ☑

1. New facility notified DARM 30 days prior to startup ☐
2. 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
(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 on or after 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 on or after 12/9/91)

5. 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 339 gallons.

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	☐N	☐N/A
2. Examining the containers for leakage?	☑Y	☐N	☐N/A
3. Closing and securing machine doors except during loading/unloading?	☑Y	☐N	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☑Y	☐N	☐N/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐Y	☐N	☑N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

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

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls?	☑Y	☐N	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	☑Y	☐N	☐N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	☑Y	☐N	☐N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? (records not on-site)	☑Y	☑N	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	☑Y	☐N	☐N/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	☑Y	☐N	

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? (records, not on site) ☐Y ☑N

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? ☐Y ☐N ☐N/A

   Is the temperature differential equal to or greater than 20° F? ☐Y ☐N ☐N/A

3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? ☐Y ☐N ☐N/A

   Is the perc concentration equal to or less than 100 ppm? ☐Y ☐N ☐N/A

4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? ☐Y ☐N ☐N/A

5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? ☐Y ☐N ☐N/A

6. Routed airflow to the carbon adsorber (if used) at all times? ☐Y ☐N ☐N/A

NO Applicable

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? (rolling avg not maintained) ☐Y ☑N
3. Maintained leak detection inspection and repair reports for the following:
   a. documentation of leaks repaired w/in 24 hrs? or; ☐Y ☑N ☐N/A
   b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? ☐Y ☑N ☐N/A
4. Maintained calibration data? *(for applicable direct reading instruments)* ☐Y ☐N ☑N/A
5. Maintained exhaust duct monitoring data on perc concentrations? ☐Y ☐N ☑N/A
6. Maintained startup/shutdown/malfunction plan? ☐Y ☑N
7. Maintained deviation reports? (Dewpt) ☑Y ☐N ☐N/A

   Problem corrected? ☐Y ☐N ☐N/A
8. Maintained compliance plan, if applicable? ☐Y ☐N ☑N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☑Y ☐N

2. Has the facility maintained a leak log? ☐Y ☑N

3. Does the responsible official check the following areas for leaks?

Hose connections, fittings, couplings, and valves	☐Y ☑N ☐N/A	Muck cookers	☐Y ☑N ☐N/A
Door gaskets and seating	☐Y ☑N ☐N/A	Stills	☐Y ☑N ☐N/A
Filter gaskets and seating	☐Y ☑N ☐N/A	Exhaust dampers	☐Y ☑N ☐N/A
Pumps	☐Y ☑N ☐N/A	Diverter valves	☐Y ☑N ☐N/A
Solvent tanks and containers	☐Y ☑N ☐N/A	Cartridge filter housings	☐Y ☑N ☐N/A
Water separators	☐Y ☑N ☐N/A		

4. Which method of detection is used by the responsible official?

Visual examination (condensed solvent on 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:	☐N/A
a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?	☐Y ☐N
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?	☐Y ☐N
c. Inspected for leaks and obvious signs of wear on a weekly basis?	☐Y ☐N
d. Kept in a clean and secure area when not in use?	☐Y ☐N
e. Verified for accuracy by use of duplicate samples (calorimetric only)?	☐Y ☐N

Non Applicable

Jeff Morris
Inspector's Name (Please Print)

9/25/97
Date of Inspection

Jeff Morris
Inspector's Signature

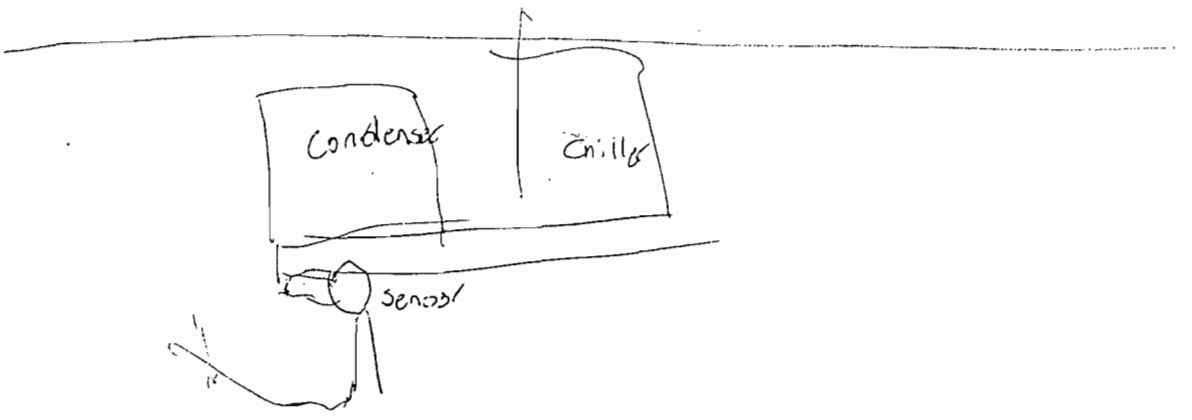
10/8/97
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Renzacci 48 lb capacity

Moolel # Clean Pro 44019
Ser # 10300 Mfg:

- No operations manual (ordered from Gene Rutherford)
- Need verification that temperature sensor is on the butlet exhaust of the refrigerated condenser
- No verification design accuracy of temp. sensor.
- rolling avg. not maintained from June 97 - Sept 97
- Leak log not on site. Needs to be on site.
- Temp sensor log not on site.



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C+C Dry Cleaners

-spoke with Carl Hawkins-
10/4/96

p.13 6. add title - Owner

p.15 5.(f) required

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AUG 25 1997
AIR QUALITY

33774

30349

1. F
2. S
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7.
8.

Industrial

Code: 33774

173

9. Name and Title of Facility Contact (For example, plant manager):
Carl D. Hawkins

10. Facility Contact Address:
Street Address: 14100 Walsingham Rd Unit #1
City: Largo Fl County: Pinellas Zip Code: 33774

11. Facility Contact Telephone Number:
Telephone: (813) 596 1983 Fax: (813) 593-0173

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DEC 5 1997

Bureau of Air Monitoring & Mobile Sources

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
   C+C Dry Cleaners Div of Hawkins Industries
2. Site Name (For example, plant name or number):
   C+C Dry Cleaners
3. Hazardous Waste Generator Identification Number:
   FLD-055-750-608
4. Facility Location:
   Street Address: 14100 Walsingham Rd Unit #1
   City: Largo Fl County: Ft Pinellas Zip Code: 33774
5. Facility Identification Number (DEP Use):
   1030349

Responsible Official

6. Name and Title of Responsible Official:
   Carl D. Hawkins, owner
7. Responsible Official Mailing Address:
   Organization/Firm: C+C Dry Cleaners Div Hawkins Ind.
   Street Address: 14100 Walsingham Rd Unit #1
   City: Largo Fl County: Pinellas Zip Code: 33774
8. Responsible Official Telephone Number:
   Telephone: (813 596-1983 Fax: (813) 593-0173

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):
   Carl D. Hawkins
10. Facility Contact Address:
    Street Address: 14100 Walsingham Rd Unit #1
    City: Largo Fl County: Pinellas Zip Code: 33774
11. Facility Contact Telephone Number:
    Telephone: (813) 596-1983 Fax: (813) 593-0173

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Bureau of Air Monitoring & Mobile Sources

03 Dec 91
Before Dec 8 1991

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.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
Example	*#1*	*03-OCT-93*	*12-NOV-93*	*#2*	*08-DEC-91*		*#3*	*02-MAR-92*	*02-MAR-92*
Dry-to-Dry Unit									
(1) w/ ref. condenser	1	03JUN83	02FEB94						
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit									
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit									
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									

(b) Control devices are required, but not yet installed [____]

(c) No control devices are required to be installed [____]

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?
[175] gallons

(b) If less than 12 months, how many? [____] months
Check why it is less than 12 months: New owner: [____] New store: [____] Did not keep records: [____]

3. What is the facility's source classification based on the definitions found in section (3) of Part II?
(Indicate with an "X". Select one classification only.)

Existing small area source [____] New small area source [____]

Existing large area source [X] New large area source [____]

14 Dec 2100 Dat

Default Dat 08-Dec-91

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

Existing large area source
Carbon adsorber [ ] Refrigerated condenser [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 use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site:

All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.

All steam and hot water generating units exempt [X]
No such units on-site [ ]

Equipment Monitoring and Recordkeeping Information

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

(a) Purchase receipts and solvent purchases [X]

(b) Leak detection inspection and repair [X]

(c) Refrigerated condenser temperature monitoring [X]

(d) Carbon adsorber exhaust perc concentration monitoring [ ]

(e) Instrument calibration [ ]

(f) Start-up, shutdown, malfunction plan [X]

Surrender of Existing Air Permit(s)

Please indicate with an "X" the appropriate selection:

[ ] I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s) _____.

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

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

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

Carl Vause 8-29-96
Signature Date

Corrections made by: Carl Vause Date 11-6-97

aee

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

RECEIVED
MAR 9 1998
Bureau of Air Monitoring & Mobile Sources

AIRS ID#1030344
PACER INC
MICHAEL T GRUBBS
2320 9TH STREET NORTH
ST PETERSBURG FL 33704

Do NOT Remove Label

Annual Reporting Period: 1/1 19 97 TO 12/31 19 97

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. ☑ YES ☐ NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

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 been in continuous compliance during the reporting period stated 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, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Michael T. Grubbs _____ 9MAR98
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.

11/06/97

AIRS ID#: 1630344

Revised 10/10/9

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Sterling Cleaners DATE: 6/17/97

FACILITY LOCATION: 6111 10th St N
St Petersburg, FL 33703

Annual Reporting Period: June 17, 1996 TO June 17, 1997

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. ☐ YES ☒ NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Responsible official shall maintain purchase records for perchloroethylene in chronological order.

Exact period of non-compliance: from June 17, 1996 to June 17, 1997

Action(s) taken to achieve compliance: Responsible official shall maintai on-site perchloroethylene purchase record

Method used to demonstrate compliance:

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Responsible official shall maintain monthly rolling perchloroethylene average

Exact period of non-compliance: from June 17, 1996 to June 17, 1997

Action(s) taken to achieve compliance: Responsible official ~~shall~~ will maintain rolling monthly average

Method used to demonstrate compliance:

As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Matthew Blaine (Name (Please Print)) Matthew Blaine (Signature) 6-17-97 (Date)

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facility copied repo
prior to leaving site

#1030344

Wrong R.O.

057086

AIRS ID#: 1030344

Revised 10/10/9

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Sterling Cleaners DATE: 6/17/97

FACILITY LOCATION: 6111 10th St N
St Petersburg, FL 33703

Annual Reporting Period: June 17, 1996 TO June 17, 1997

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. ☐ YES ☒ NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Responsible official shall maintain weekly temperature sensor log.

Exact period of non-compliance: from June 17, 1996 to June 17, 1997

Action(s) taken to achieve compliance: Responsible official will maintain temperature sensor log.

Method used to demonstrate compliance:

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Responsible official shall maintain weekly leak log.

Exact period of non-compliance: from June 17, 1996 to June 17, 1997

Action(s) taken to achieve compliance: Responsible official will maintain weekly leak log.

Method used to demonstrate compliance:

As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to-dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Matthew Blaine [signature] 6-17-97
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.

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Bureau of Air Monitoring & Mobile Sources

AIRS ID#: 1030344

Revised 10/10/9

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Sterling Cleaners DATE: 6/17/97

FACILITY LOCATION: 6111 10th St N
St Petersburg, FL 33703

Annual Reporting Period: June 17, 1996 TO June 17, 1997

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. ☐ YES ☒ NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Responsible official shall develop and maintain a startup, shutdown for malfunction plan.

Exact period of non-compliance: from June 17, 1996 to June 17, 1997

Action(s) taken to achieve compliance: procure operator's manual or develop a plan.

Method used to demonstrate compliance:

#2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

Responsible official must procure a letter/schemat
Verifying that temperature sensor/outlet exhaust of refriger
condenser is accurate ±2°F

Exact period of non-compliance: from June 17, 1996 to June 17, 1997

Action(s) taken to achieve compliance: Responsible official will provide letter verifying design accuracy.

Method used to demonstrate compliance:

As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Matthew Blaine (Name (Please Print)) Matthew Blaine (Signature) 6.17.97 (Date)

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Bureau of Air Monitoring & Mobile Sources

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

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☑

TIME IN: 10:35 a.m.	TIME OUT: 11:55 a.m.	AIRS ID# **1030344 001**
TYPE OF FACILITY:	**Perchloroethylene Dry Cleaner**	
FACILITY NAME:	**Sterling Cleaners**	DATE: September 25, 1997
FACILITY LOCATION :	**6111 10th St. N, St. Petersburg, FL 33703**	
RESPONSIBLE OFFICIAL:	**Michael Grubbs**	PHONE NUMBER:(813) 527-5322

☐ 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:

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.

Comments:
The facility will need to provide proof that the temperature sensor is on the outlet exhaust side of the refrigerated condenser.

The Annual Compliance Certification form has been properly certified and submitted to the inspector. Yes ☑ No ☐

DATE OF NEXT INSPECTION: October 9, 1997 (Approximate)

INSPECTION CONDUCTED BY: Jeff Morris (Please Print)

INSPECTOR'S SIGNATURE: Jeffrey Morris PHONE NUMBER: 464-4422

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☑

TIME IN: 10:35 a.m.	TIME OUT: 11:55 a.m.	AIRS ID# **1030344 001**
TYPE OF FACILITY:	**Perchloroethylene Dry Cleaner**	
FACILITY NAME:	**Sterling Cleaners**	DATE: September 25, 1997
FACILITY LOCATION :	**6111 10th St. N, St. Petersburg, FL 33703**	
RESPONSIBLE OFFICIAL:	**Michael Grubbs**	PHONE NUMBER:(813) 527-5322

☐ 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:

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.

Comments:
The facility will need to provide proof that the temperature sensor is on the outlet exhaust side of the refrigerated condenser.

The Annual Compliance Certification form has been properly certified and submitted to the inspector. Yes ☑ No ☐

DATE OF NEXT INSPECTION: October 9, 1997 (Approximate)

INSPECTION CONDUCTED BY: Jeff Morris (Please Print)

INSPECTOR'S SIGNATURE: Jeffrey Morris PHONE NUMBER: 464-4422

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☐ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☑

AIRS ID#: 1030344 DATE: 9/25/97 TIME IN: 10:35a.m. TIME OUT: 11:55a.m.

FACILITY NAME: Sterling Cleaners

FACILITY LOCATION: 6111 10th St N
St Petersburg, FL 33703

RESPONSIBLE OFFICIAL: Michael Grubbs PHONE: 527-5322

CONTACT NAME: Matt Blaine PHONE: 527-5322

PART I: NOTIFICATION

(check appropriate box)

Existing facility notified DARM by 9/1/96 ☑

1. New facility notified DARM 30 days prior to startup ☐
2. 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

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)

2. **New small area source** ☐
dry-to-dry only, x < 140 gal/yr
transfer only, x < 200 gal/yr
both types, x < 140 gal/yr
(constructed on or after 12/9/91)

3. **Existing large area 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 on or after 12/9/91)

5. 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 339 gallons.

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	☐N	☐N/A
2. Examining the containers for leakage?	☑Y	☐N	☐N/A
3. Closing and securing machine doors except during loading/unloading?	☑Y	☐N	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☑Y	☐N	☐N/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐Y	☐N	☑N/A

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification 1 has been checked, no controls are required. Proceed to Part V.

If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below).

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

If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below).

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls?	☑Y	☐N	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	☑Y	☐N	☐N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	☑Y	☐N	☐N/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? (records not on-site)	☑Y	☑N	
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	☑Y	☐N	☐N/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	☑Y	☐N	

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? (records not on site) ☐Y ☑N

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? ☐Y ☐N ☐N/A

   Is the temperature differential equal to or greater than 20° F? ☐Y ☐N ☐N/A

3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber? ☐Y ☐N ☐N/A

   Is the perc concentration equal to or less than 100 ppm? ☐Y ☐N ☐N/A

4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet? ☐Y ☐N ☐N/A

5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? ☐Y ☐N ☐N/A

6. Routed airflow to the carbon adsorber (if used) at all times? ☐Y ☐N ☐N/A

Not Applicable

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? (rolling avg not maintained) ☐Y ☑N
3. Maintained leak detection inspection and repair reports for the following:
   a. documentation of leaks repaired w/in 24 hrs? or; ☐Y ☑N ☐N/A
   b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? ☐Y ☑N ☐N/A
4. Maintained calibration data? *(for applicable direct reading instruments)* ☐Y ☐N ☑N/A
5. Maintained exhaust duct monitoring data on perc concentrations? ☐Y ☐N ☑N/A
6. Maintained startup/shutdown/malfunction plan? ☐Y ☑N
7. Maintained deviation reports? (Deviations) ☑Y ☐N ☐N/A

   Problem corrected? ☐Y ☐N ☐N/A
8. Maintained compliance plan, if applicable? ☐Y ☐N ☑N/A

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☑Y ☐N

2. Has the facility maintained a leak log? ☐Y ☑N

3. Does the responsible official check the following areas for leaks?

Hose connections, fittings, couplings, and valves	☐Y ☑N ☐N/A	Muck cookers	☐Y ☑N ☐N/A
Door gaskets and seating	☐Y ☑N ☐N/A	Stills	☐Y ☑N ☐N/A
Filter gaskets and seating	☐Y ☑N ☐N/A	Exhaust dampers	☐Y ☑N ☐N/A
Pumps	☐Y ☑N ☐N/A	Diverter valves	☐Y ☑N ☐N/A
Solvent tanks and containers	☐Y ☑N ☐N/A	Cartridge filter housings	☐Y ☑N ☐N/A
Water separators	☐Y ☑N ☐N/A		

4. Which method of detection is used by the responsible official?

- Visual examination (condensed solvent on 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: ☐N/A

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? ☐Y ☐N

b. Calibrated against a standard gas prior to and after each use (PID/FID only)? ☐Y ☐N

c. Inspected for leaks and obvious signs of wear on a weekly basis? ☐Y ☐N

d. Kept in a clean and secure area when not in use? ☐Y ☐N

e. Verified for accuracy by use of duplicate samples (calorimetric only)? ☐Y ☐N

Non Applicable

Jeff Morris
Inspector's Name (Please Print)

9/25/97
Date of Inspection

Inspector's Signature

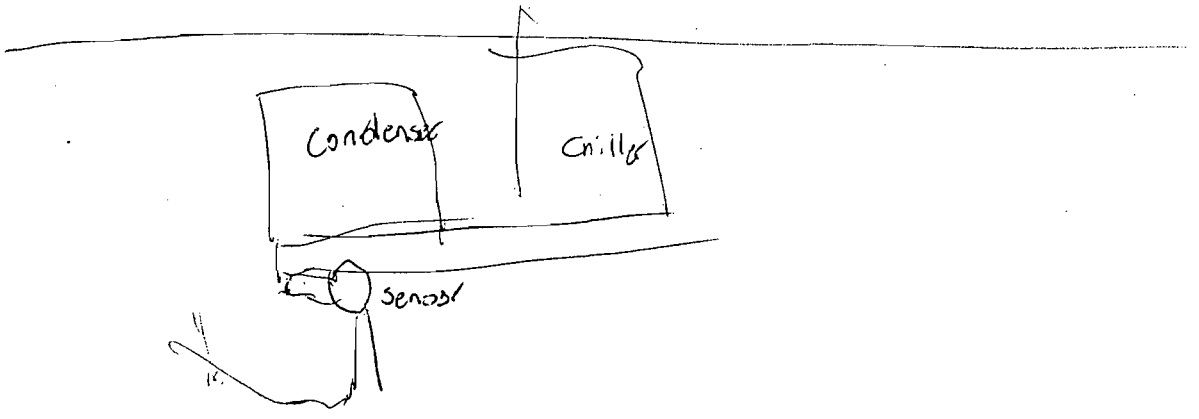
10/8/97
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

Renzacci 48 lb capacity

Model # Clean Pro 44019
Ser # 10300 Mfg:

- No operations manual (ordered from Gene Rutherford)
- Need verification that temperature sensor is on the outlet exhaust of the refrigerated condenser
  - No verification design accuracy of temp. sensor.
  - rolling avg. not maintained from June 97 - Sept 97
  - Leak log not on site. Needs to be on site.
  - Temp sensor log not on site.



TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☐

AIRS ID#: 1030344 001 **DATE:** 10/5/98 **TIME IN:** 2:15p.m **TIME OUT:** 2:47p.m.

FACILITY NAME: Pacer, Inc.

FACILITY LOCATION: 6111 10th St. N

St. Petersburg, FL, 33703

RESPONSIBLE OFFICIAL: Michael Grubbs Phone: 822-3159

Permit No. 1030344-001-AG Exp. Date: 10/04/2001

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Bureau of Air Monitoring & Mobile Sources

☑ 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.	Store all perc and perc-containing waste in tightly sealed containers which are impervious and chemically unreactive to the solvent.
☐	Did not maintain a log of leak detection inspection and repair records.	Develop and implement a leak detection inspection and repair program. Maintain a log of leak detection inspection and repair records.

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

Comments: _____

_____

_____

If the Inspection Summary Report indicates follow-up actions are required, you must take immediate corrective measures to achieve compliance. Pinellas County will perform a follow-up inspection to determine that proper corrective actions have been taken.

Inspection Conducted by: **Jeffrey Morris**

Inspector's Signature: _____

Phone Number: 464-4422

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☐

AIRS ID#: 1030344 001 **DATE:** 10/5/98 **TIME IN:** 2:15 p.m. **TIME OUT:** 2:47 p.m.

FACILITY NAME: Pacer, Inc.

FACILITY LOCATION: 6111 10th St. N
St. Petersburg, FL, 33703

RESPONSIBLE OFFICIAL: Michael Grubbs **PHONE:** 822-3159

CONTACT: Mary Tisdale **PHONE:** 527-5322 ~~822-3159~~

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)

☐ 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
(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 on or after 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 on or after 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 ~~320~~ 387 gallons.

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	☐ N	☐ NA
2. Examining the containers for leakage?	☑ Y	☐ N	☐ NA
3. Closing and securing machine doors except during loading/unloading?	☑ Y	☐ N	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☑ Y	☐ N	☐ NA
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐ Y	☐ N	☑ NA

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification (1) has been checked, no controls are required. Proceed to Part V.

If classification (2) has been checked, the machine should be equipped with a refrigerated condenser (complete A below)

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

If classification (4) has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below.)

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls?	☑ Y	☐ N	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	☑ Y	☐ N	☐ NA
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	☑ Y	☐ N	☐ 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	☐ N	☐ NA
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	☑ Y	☐ N	

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? ☑Y ☐N

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? ☐Y ☐N ☐NA
   Is the temperature differential equal to or greater than 20° F? ☐Y ☐N ☐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? ☐Y ☐N ☐NA
   Is the perc concentration equal to or less than 100 ppm? ☐Y ☐N ☐NA

4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc. concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet? ☐Y ☐N ☐NA

5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? ☐Y ☐N ☐NA

6. Routed airflow to the carbon adsorber (if used) at all times? ☐Y ☐N ☐NA

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? ☑Y ☐N
2. Maintained rolling monthly averages of perc consumption? ☑Y ☐N
3. Maintained leak detection inspection and repair reports for the following:
   a. documentation of leaks repaired w/in 24 hrs? or; (No problems since previous inspection) ☐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? ☐Y ☐N ☑NA
4. Maintained calibration data? *(for direct reading instrument only)* ☐Y ☐N ☑NA
5. Maintained exhaust duct monitoring data on perc concentrations? ☐Y ☐N ☑NA
6. Maintained startup/shutdown/malfunction plan? ☑Y ☐N
7. Maintained deviation reports? (No problems since previous problems) ☐Y ☐N ☑NA
   Problem corrected? ☐Y ☐N ☑NA
8. Maintained compliance plan, if applicable? ☐Y ☐N ☑NA

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☑Y ☐N

2. Has the facility maintained a leak log? ☑Y ☐N

3. Does the responsible official check the following areas for leaks:

Hose connections, fitting couplings, and valves	☑Y	☐N	☐NA	Muck cookers	☑Y	☐N	☐NA
Door gaskets and seating	☑Y	☐N	☐NA	Stills	☑Y	☐N	☐NA
Filter gaskets and seating	☑Y	☐N	☐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	☑Y	☐N	☐NA
Water separators	☑Y	☐N	☐NA				

4. Which method of detection is used by the responsible official?
   - Visual examination (condensed solvent of exterior surfaces) ☑
   - Physical detection (airflow felt through gaskets) ☑
   - Odor (noticeable perc odor) ☑
   - Use of direct-reading instrumentation (FID/PID/calorimetric tubes) ☐
   - Halogen leak detector ☐

If using direct-reading instrumentation, is the equipment:

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm. ☐Y ☐N

b. Calibrated against a standard gas prior to and after each use(PID/FID only). ☐Y ☐N

c. Inspected for leaks and obvious signs of wear on a weekly basis? ☐Y ☐N

d. Kept in a clean and secure area when not in use. ☐Y ☐N

e. Verified for accuracy by use of duplicate samples (calorimetric only)? ☐Y ☐N

Jeff Morris
Inspector's Name (Please Print)

10/5/98
Date of Inspection

Inspector's Signature

4/5/99
Approximate Date of Next Inspection

FACILITY DETAILS:

FACILITY NAME: Sterling Cleaners (store #62)
Paced, Inc.

Dry Cleaning Machine #1:

Manufacturer Renzacci Capacity 35 lbs

Model# 44019 Serial# 10300 Mfg yr 1989

Dry Cleaning Machine #2:

Manufacturer _____ Capacity _____ lbs

Model# ~~42201 M~~ Serial# ~~T37962 M~~ Mfg yr ~~19 M~~

Boiler:

Manufacturer Fulton Steam Boiler Hp 45

Model # 42201 Serial # T37962 Mfg yr 1982

Fuel Type: Natural gas? ☒ propane? ☐ fuel oil? ☐

Notification (unpermitted sources only):

1. Was the facility assisted in filling out the notification by the inspector? ☐Y ☐N N/A
2. Did the facility insist on filling out its own notification, and will send it to FDEP? ☐Y ☐N N/A

Record keeping :

1. Does facility have statement/specs as to the design accuracy of the temperature sensor? ☑Y ☐N
   (temperature of 45°F w/accuracy ±2°F, or 7.2°C w/accuracy of ±1.1°C)

Hazardous Waste:

1. Is all perc. contaminated wastewater either treated or disposed of properly? ☑Y ☐N
2. If wastewater is evaporated, is it an approved system, and using carbon filtration? ☐Y ☐N N/A
3. Does the facility have secondary containment for the dry-dry machine? ☑Y ☐N
4. Does the facility have secondary containment for any perc. waste containers? ☑Y ☐N

Comments:

AIRS ID#: 1030344

Revised 10/10/9

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: dba. Pacer, Inc. Sterling Cleaners DATE: 10/5/98

FACILITY LOCATION: 6111 10th St N
St Petersburg, FL 33703

Annual Reporting Period: September 25, 1997 TO October 5, 1998

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. ☑ YES ☐ NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

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 been in continuous compliance during the reporting period stated 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, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: Mary Tisdale (Name (Please Print)) Mary Tisdale (Signature) 10/5/98 (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.

0357500

PACER INC.
2300 9TH STREET NORTH
ST. PETERSBURG, FL
33704
(813) 822-3159

3755
2273

UNITED BANK
333-3RD AVENUE NORTH
ST. PETERSBURG, FLORIDA 33701

[redacted]

016835
NO.

THREE HUNDRED DOLLARS AND NO/100

DATE	AMOUNT
1/8/98	$300.00

1030344 / 1030346 / 0571086

PAY TO THE ORDER OF

FLORIDA DEPT OF ENV PROTECTION
Title V General Permits & Receipts
P.O. Box 3070
Tallahassee FL 32315-0370

AUTHORIZED SIGNATURE

THE REVERSE SIDE OF THIS DOCUMENT INCLUDES AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

[redacted]

#

PACER INC.
2300 Ninth Street North
St. Petersburg, Florida 33704

32313-3070

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☐ RE-INSPECTION ☐

AIRS ID#: 1030344 001 **DATE:** 10/5/98 **TIME IN:** 2:15p.m **TIME OUT:** 2:47p.m.

FACILITY NAME: Pacer, Inc.

FACILITY LOCATION: 6111 10th St. N

St. Petersburg, FL, 33703

RESPONSIBLE OFFICIAL: Michael Grubbs Phone: 822-3159

Permit No. 1030344-001-AG Exp. Date: 10/04/2001

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DEC - 1 1999
Bureau of Air Monitoring & Mobile Sources

☑ 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.	Store all perc and perc-containing waste in tightly sealed containers which are impervious and chemically unreactive to the solvent.
☐	Did not maintain a log of leak detection inspection and repair records.	Develop and implement a leak detection inspection and repair program. Maintain a log of leak detection inspection and repair records.

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

Comments:_____

If the Inspection Summary Report indicates follow-up actions are required, you must take immediate corrective measures to achieve compliance. Pinellas County will perform a follow-up inspection to determine that proper corrective actions have been taken.

Inspection Conducted by: **Jeffrey Morris**

Inspector's Signature: Jeffrey Morris

Phone Number: 464-4422

PE...CHLOROETHYLENE DRY CLEAN...S
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☐
RE-INSPECTION ☐

AIRS ID#: 1030344 001 **DATE:** 10/5/98 **TIME IN:** 2:15p.m. **TIME OUT:** 2:47p.m.

FACILITY NAME: Pacer, Inc.

FACILITY LOCATION: 6111 10th St. N
St. Petersburg, FL, 33703

RESPONSIBLE OFFICIAL: Michael Grubbs **PHONE:** 822-3159

CONTACT: Mary Tisdale **PHONE:** 527-5322 ~~822-3159~~

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)

☐ 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
(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 on or after 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 on or after 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 ~~320~~ 387 gallons.

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	☐ N	☐ NA
2. Examining the containers for leakage?	☑ Y	☐ N	☐ NA
3. Closing and securing machine doors except during loading/unloading?	☑ Y	☐ N	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	☑ Y	☐ N	☐ NA
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐ Y	☐ N	☑ NA

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification (1) has been checked, no controls are required. Proceed to Part V.

If classification (2) has been checked, the machine should be equipped with a refrigerated condenser (complete A below)

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

If classification (4) has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below.)

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls?	☑ Y	☐ N	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	☑ Y	☐ N	☐ NA
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	☑ Y	☐ N	☐ 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	☐ N	☐ NA
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	☑ Y	☐ N	

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis? ☑Y ☐N

2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly? ☐Y ☐N ☐NA
   Is the temperature differential equal to or greater than 20° F? ☐Y ☐N ☐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? ☐Y ☐N ☐NA
   Is the perc concentration equal to or less than 100 ppm? ☐Y ☐N ☐NA

4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc. concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet? ☐Y ☐N ☐NA

5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils? ☐Y ☐N ☐NA

6. Routed airflow to the carbon adsorber (if used) at all times? ☐Y ☐N ☐NA

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased? ☑Y ☐N
2. Maintained rolling monthly averages of perc consumption? ☑Y ☐N
3. Maintained leak detection inspection and repair reports for the following:
   a. documentation of leaks repaired w/in 24 hrs? or; (No problems since previous inspection) ☐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? ☐Y ☐N ☑NA
4. Maintained calibration data? *(for direct reading instrument only)* ☐Y ☐N ☑NA
5. Maintained exhaust duct monitoring data on perc concentrations? ☐Y ☐N ☑NA
6. Maintained startup/shutdown/malfunction plan? ☑Y ☐N
7. Maintained deviation reports? (No problems since previous problems) ☐Y ☐N ☑NA
   Problem corrected? ☐Y ☐N ☑NA
8. Maintained compliance plan, if applicable? ☐Y ☐N ☑NA

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☑Y ☐N

2. Has the facility maintained a leak log? ☑Y ☐N

3. Does the responsible official check the following areas for leaks:

Hose connections, fitting couplings, and valves	☑Y	☐N	☐NA	Muck cookers	☑Y	☐N	☐NA
Door gaskets and seating	☑Y	☐N	☐NA	Stills	☑Y	☐N	☐NA
Filter gaskets and seating	☑Y	☐N	☐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	☑Y	☐N	☐NA
Water separators	☑Y	☐N	☐NA				

4. Which method of detection is used by the responsible official?

Visual examination (condensed solvent of exterior surfaces)	☑
Physical detection (airflow felt through gaskets)	☑
Odor (noticeable perc odor)	☑
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)	☐
Halogen leak detector	☐

If using direct-reading instrumentation, is the equipment:

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm. ☐Y ☐N

b. Calibrated against a standard gas prior to and after each use (PID/FID only). ☐Y ☐N

c. Inspected for leaks and obvious signs of wear on a weekly basis? ☐Y ☐N

d. Kept in a clean and secure area when not in use. ☐Y ☐N

e. Verified for accuracy by use of duplicate samples (calorimetric only)? ☐Y ☐N

Jeff Morris — Inspector's Name (Please Print)

10/5/98 — Date of Inspection

Inspector's Signature

4/5/99 — Approximate Date of Next Inspection

FACILITY DETAILS:

FACILITY NAME: Sterling Cleaners (Store #62)

Dry Cleaning Machine #1:

Manufacturer Renzacci Capacity 35 lbs

Model# 44019 Serial# 10300 Mfg yr 1989

Dry Cleaning Machine #2:

Manufacturer _____ Capacity _____ lbs

Model# ~~42201~~ Serial# ~~T37962~~ Mfg yr ~~19~~

Boiler:

Manufacturer Fulton Steam Boiler Hp 45

Model # 42201 Serial # T37962 Mfg yr 1982

Fuel Type: Natural gas? ☒ propane? ☐ fuel oil? ☐

Notification (unpermitted sources only):

1. Was the facility assisted in filling out the notification by the inspector? ☐Y ☐N N/A
2. Did the facility insist on filling out its own notification, and will send it to FDEP? ☐Y ☐N N/A

Record keeping :

1. Does facility have statement/specs as to the design accuracy of the temperature sensor? ☑Y ☐N
   (temperature of 45°F w/accuracy ±2°F, or 7.2°C w/accuracy of ±1.1°C)

Hazardous Waste:

1. Is all perc. contaminated wastewater either treated or disposed of properly? ☐Y ☐N
2. If wastewater is evaporated, is it an approved system, and using carbon filtration? ☐Y ☐N N/A
3. Does the facility have secondary containment for the dry-dry machine? ☑Y ☐N
4. Does the facility have secondary containment for any perc. waste containers? ☑Y ☐N

Comments:

AIRS ID#: 1030344

AEC

Revised 10/10/9

DRY CLEANER AIR QUALITY GENERAL PERMIT
ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: ** Pacer, Inc. (dba Sterling Cleaners) DATE: 3/24/00

FACILITY LOCATION: 6111 10th St. N.
St. Petersburg, FL 33703

Annual Reporting Period: October 5, 1998 TO December 18, 1999

Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. ☒ YES ☐ NO

If NO, complete the following:

#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above:

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 been in continuous compliance during the reporting period stated above:

Exact period of non-compliance: from _____ to _____

Action(s) taken to achieve compliance: _____

Method used to demonstrate compliance: _____

RECEIVED
APR 2000
Bureau of Air Monitoring & Mobile Sources

As the responsible official, I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities.

RESPONSIBLE OFFICIAL: MICHAEL GRUBB (Name Please Print) _____ (Signature) 3/23/00 (Date)

** Facility suspended operation as a perchloroethylene dry cleaning operation

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

TITLE V AIR QUALITY AIR GENERAL PERMIT
INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT/DISCOVERY ☑ RE-INSPECTION ☐

AIRS ID#: 1030344 **DATE:** 3/20/00 **TIME IN:** 10:03a.m **TIME OUT:** 10:50a.m.

FACILITY NAME: Pacer, Inc.

FACILITY LOCATION: 6111 10th Street North
St. Petersburg, FL, 33703

RESPONSIBLE OFFICIAL: Michael Grubbs Phone No.: 822-3159

Permit No. 1030344-001-AG **Exp. Date:** 9/1/2001

☐ 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.	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 operates a petrolium dry cleaning machine. Dry-dry perchloroethylene machine was removed by Boggs, Inc., December, 1999.

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: Jeffrey Morris

Phone Number: 464-4422

PERCHLOROETHYLENE DRY CLEANERS
TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION: ANNUAL ☑ COMPLAINT (DISCOVERY) ☑
RE-INSPECTION ☐

AIRS ID#: 1030344 **Date:** 3/22/00 **TIME IN:** 10:03a.m **TIME OUT:** 10:50a.m.

FACILITY NAME: Pacer, Inc.

FACILITY LOCATION: 6111 10th Street North
St. Petersburg, FL, 33703

RESPONSIBLE OFFICIAL: Michael Grubbs **PHONE:** 822-3159

CONTACT: Michael Grubbs **PHONE:** 822-3159

PART I: NOTIFICATION

(Check appropriate box)

1. Existing facility notified DARM By 9/1/96 (As a perc facility; the facility is now operating as a petroleum dry cleaning facility; transfer effective December, 1999.) ☑
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
(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 on or after 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 on or after 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 75 gallons. (up to December 18, 1999)

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	❑ N	❑ NA
2. Examining the containers for leakage?	❑ Y	❑ N	❑ NA
3. Closing and securing machine doors except during loading/unloading?	❑ Y	❑ N	
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	❑ Y	❑ N	❑ NA
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	❑ Y	❑ N	❑ NA

PART IV: PROCESS VENT CONTROLS

In Part II-A:

If classification (1) has been checked, no controls are required. Proceed to Part V.

If classification (2) has been checked, the machine should be equipped with a refrigerated condenser (complete A below)

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

If classification (4) has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below.)

A. Has the responsible official of all new sources and existing large area sources:
(check appropriate boxes)

1. Equipped all machines with the appropriate vent controls?	❑ Y	❑ N	
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	❑ Y	❑ N	❑ NA
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	❑ Y	❑ N	❑ 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	❑ N	❑ NA
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	❑ Y	❑ N	

B. Has the responsible official of an existing large or new large area source also:

1. Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	❑Y	❑N	
2. Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	❑Y	❑N	❑NA
Is the temperature differential equal to or greater than 20° F?	❑Y	❑N	❑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?	❑Y	❑N	❑NA
Is the perc concentration equal to or less than 100 ppm?	❑Y	❑N	❑NA
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc. concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?	❑Y	❑N	❑NA
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	❑Y	❑N	❑NA
6. Routed airflow to the carbon adsorber (if used) at all times?	❑Y	❑N	❑NA

PART V: RECORDKEEPING REQUIREMENTS

Has the responsible official:
(check appropriate boxes)

1. Maintained receipts for perc purchased?	❑Y	❑N	
2. Maintained rolling monthly averages of perc consumption?	❑Y	❑N	
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?	❑Y	❑N	❑NA
4. Maintained calibration data? *(for direct reading instrument only)*	❑Y	❑N	❑NA
5. Maintained exhaust duct monitoring data on perc concentrations?	❑Y	❑N	❑NA
6. Maintained startup/shutdown/malfunction plan?	❑Y	❑N	
7. Maintained deviation reports?	❑Y	❑N	❑NA
Problem corrected?	❑Y	❑N	❑NA
8. Maintained compliance plan, if applicable?	❑Y	❑N	❑NA

PART VI: LEAK DETECTION AND REPAIRS

1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection? ☐Y ☐N

2. Has the facility maintained a leak log? ☐Y ☐N

3. Does the responsible official check the following areas for leaks:

Hose connections, fitting couplings, and valves	☐Y	☐N	☐NA	Muck cookers	☐Y	☐N	☐NA
Door gaskets and seating	☐Y	☐N	☐NA	Stills	☐Y	☐N	☐NA
Filter gaskets and seating	☐Y	☐N	☐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	☐Y	☐N	☐NA
Water separators	☐Y	☐N	☐NA				

4. Which method of detection is used by the responsible official?

Visual examination (condensed solvent of exterior surfaces)	☐
Physical detection (airflow felt through gaskets)	☐
Odor (noticeable perc odor)	☐
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)	☐
Halogen leak detector	☐

If using direct-reading instrumentation, is the equipment:

a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm. ☐Y ☐N

b. Calibrated against a standard gas prior to and after each use(PID/FID only). ☐Y ☐N

c. Inspected for leaks and obvious signs of wear on a weekly basis? ☐Y ☐N

d. Kept in a clean and secure area when not in use. ☐Y ☐N

e. Verified for accuracy by use of duplicate samples (calorimetric only)? ☐Y ☐N

Jeff Morris
Inspector's Name (Please Print)

3/22/00
Date of Inspection

Jeff Morris
Inspector's Signature

—
Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

* Facility operates a petrolium machine
dry-dry machine removed December, 1999 by Boggs, Inc

Facility will rescind its permit.

Note: Facility was in compliance with its record keeping requirements from October 5, 1998 - December 18, 1999, or last day of operation of the perc. dry-dry machine.

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

RECEIVED 304768

MAR 9 1998

Bureau of Air Monitoring
& Mobile Sources

RECEIVED
MAIL ROOM
MAR -6 98

Do NOT Remove Label

AIRS ID#1030344

PACER INC
MICHAEL T GRUBBS
2300 9TH STREET NORTH
ST PETERSBURG FL 33704

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: B1
Fund: 20-2-035001
Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: $50.00

Do NOT Remove Label

AIRS ID # 1030344
62ND AVE
MICHAEL T GRUBBS
2320 9TH STREET NORTH
ST PETERSBURG FL 33704

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: B1
Fund: 20-2-035001
Obj.: 002273

Z 333 613 240

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided

AIRS ID 1030344

PACER INC
MICHAEL T GRUBBS
2320 9TH STREET NORTH
ST PETERSBURG FL 33704

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	

PS Form **3800**, April 1995

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 can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write *"Return Receipt Requested"* on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PACER INC
MICHAEL T GRUBBS
2320 9TH STREET NORTH
ST PETERSBURG FL 33704

AIRS ID 1030344

4a. Article Number
Z 333 613 240

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
2-17-98

5. Received By: *(Print Name)*

6. Signature: *(Addressee or Agent)*
X

8. Addressee's Address *(Only if requested and fee is paid)*

Thank you for using Return Receipt Service.

PS Form **3811**, December 1994 102595-97-B-0179 Domestic Return Receipt

7004 2510 0002 3939 0805

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark Here

Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+

AIRS ID# 1030444 1stC
SAND KEY CLEANERS
1261 Gulf Blvd
CLEARWATER, FL 33767

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: *COMPLETE THIS SECTION*

- 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:

AIRS ID# 1030444 1stC
SAND KEY CLEANERS
1261 Gulf Blvd
CLEARWATER, FL 33767

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☒ Agent
☒ Addressee

B. Received by *(Printed Name)* S. Zedro

C. Date of Delivery 2-8-05

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

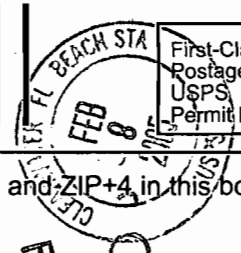
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7004 2510 0002 3939 0805

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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

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

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: $50.00

Do NOT Remove Label

AIRS ID# 1030344
PACER INC
MICHAEL T GRUBBS
2320 9TH STREET NORTH
ST PETERSBURG FL 33704

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: B1
Fund: 20-2-035001
Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0354377

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

RECEIVED
DEC 21 1998
Bureau of Air Monitoring
& Mobile Sources

RECEIVED
MAIL ROOM
DEC 15 99

TOTAL AMOUNT DUE: $50.00

Do NOT Remove Label

AIRS ID # 1030344
62ND AVE
MICHAEL T GRUBBS
2320 9TH STREET NORTH
ST PETERSBURG FL 33704

FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: B1
Fund: 20-2-035001
Obj.: 002273

7000 0520 0020 9372 9651

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Re 10 AIRS ID # 1030344001AG
MICHAEL T GRUBBS
Str 62ND AVE
1800 4TH STREET NORTH
City ST PETERSBURG FL 33704

PS Instructions

SENDER: *COMPLETE THIS SECTION*

- 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:

10 AIRS ID # 1030344001AG
MICHAEL T GRUBBS
62ND AVE
1800 4TH STREET NORTH
ST PETERSBURG FL 33704

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery 8/18

C. Signature
X [signature] ☑ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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)*
7000 0520 0020 9372 9651

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952