

## Department of Environmental Protection

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

Virginia B. Wetherell Secretary

December 6, 1996

Mr. Ron Sacino Sacino's Formalwear 3430 Fairfield Avenue South St. Petersburg, Florida 33711

Re: Facility I.D. No. 1030351

Dear Mr. Sacino:

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

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

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

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

Sincerely,

Dotty Diltz, Chief

Bureau of Air Monitoring

and Mobile Sources

DD/jw

cc: Mr. Louis Fernandez, Southwest District

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

Printed on recycled poper.

### Perchloroethylene Dry Cleaning Facility Notification

#### Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Sacino's Formalwear
2.	Site Name (For example, plant name or number):
3.	Hazardous Waste Generator Identification Number:
	FLD 982101347
4.	Facility Location: Street Address: 3430 Fair field Aue. South
	City: St. Petersburg County: Pinellas Zip Code: 33711
	Chy. 37. Fe1er 36419 County. F1/14/14/2 Zip couc. 33/11
5.	Facility Identification Number (DEP Use):
	103035/
(30/prep.80	
	Responsible Official
6.	Name and Title of Responsible Official:
	Ron Sacino
7.	Responsible Official Mailing Address:
	Organization/Firm: Street Address:
	City: County: Zip Code:
-	-D
8.	Responsible Official Telephone Number:  Telephone: (813)323 - 1940  Fax: (813)323 - 4053
	Facility Contact (If different from Responsible Official)
9.	
	Ron Brewster
10.	Facility Contact Address:
	Street Address:
	City: County: Zip Code:
11.	Facility Contact Telephone Number:
	Telephone: ( ) - RECEIVED
L	SEP 5 1996

Bureau of Air Monitoring & Mobile Sources

# 1030351

10-4-96 Spoke to Ron Brewster, Ron Sacino is the CEO

P.13 6-add title-CEO 7. fillin 9. add title

10. fill in

11 11/21 " .. 9

#### **Facility Information**

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

,		Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit									
(1) w/ ref. condenser	#1	11-Aug-84	10-04.90	#2	16-Jul-90	16-Jul-90	#3	16-541-90	16-Jul-9
(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				•.				A Table	•
(10) w/ ref. condenser		i.							
(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?  - [, 2, 13] 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: []									
(Indicate with an "X".  Existing small as	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 New large area source]								
			•						

DEP Form No. 62-213.900(2)

Effective: 6-25-96

(Indicate with an "X".)						
Existing large area source  Carbon adsorber  []  Refrigerated condenser  []						
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 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						

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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

[] I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)								
ιXι	No air permits currently exist for the operation of the facility indicated in this notification form.							
	Responsible Official Certification							
this notij statemer maintair	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the nts made in this notification are true, accurate and complete. Further, I agree to operate and in the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.							
this notij statemer maintair comply v	fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and in the air pollutant emissions units and air pollution control equipment described above so as to							

#### PERCHLOROETHYLENE DRY CLEANERS

## TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ANNUAL

TYPE OF INSPECTION:

COMPLAINT/DISCOVERY

RE-INSPECTION					
FACILITY NAME: Sacino's for	/97 TIME IN: 9:452 ΩΤΙΜΕ ΟυΤ: 12:30ρια.				
FACILITY LOCATION: 3430 Fa	in field Aur. S.				
J. Petersbur	£ L 33711				
RESPONSIBLE OFFICIAL: Ron Same	PHONE: 32-3-405-3				
CONTACT NAME: Richard Brull 60	regSacino PHONE: 323-4053				
PART I: NOTIFICATION					
(check appropriate box)					
1. New facility notified DARM 30 days prior to star	rtup 🗆				
2. Facility failed to notify DARM to use general per	rmit				
PART II: CLASSIFICATION					
Facility indicated on notification form that it is: (check appropriate box)  A.	☐ No notification form ☐ Drop store/out of business/petroleum				
1. Existing small area source 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, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$ )	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$ )				
5. This is a correct facility classification	□Y □N □Can not determine				
	ation: neral permit as number above nits and is not cligible for a general permit				
B. The total quantity of perchloroethylene (perc) pu facility was 455.1 gallons.	rchased within the preceding 12 months by this dry cleaning				

PART III: GENERAL CONTROL REQUIREMENTS	
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	
1. Storing perchloroethylene in tightly sealed and impervious containers?	OY ON ON/A
2. Examining the containers for leakage?	DY ON ON/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?	OY ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON ON/A
PART IV: PROCESS VENT CONTROLS	
In Part II-A:	
If classification 1 has been checked, no controls are required. Proceed to Part V	,.
If classification 2 has been checked, the machine should be equipped with a refri (complete A below).	igerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber mu installed prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refri (complete A and B below).	igerated condenser
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)	
1. Equipped all machines with the appropriate vent controls?	OÝ ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	©Y ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	ĐÝ ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY ©N
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	OY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	er-en

В.	. Has the responsible official of an existing large or new large area source also:			
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ΩY	ΘN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΩY	ПΝ	ĽYN/A
	Is the temperature differential equal to or greater than 20° F?	ΩY	ΠN	©∕Ñ/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,	- DV		5744
	if machines are equipped with a carbon adsorber?			⊡N/A
	Is the perc concentration equal to or less than 100 ppm?	$\Box X$	ΠN	₽Ñ/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?	ΩY	ПΝ	©₩/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ON	<b>Ω</b> ⁄Ω/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΟY	ПИ	₽N/A

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

P/	PART VI: LEAK DETECTION AND REPAIRS							
1.	Does the responsible official conduct a	weekly	y (for	small sources, b	oi-weekly) leak detection ar	nd rep	air	
	inspection?					ØÝ	ПN	1
2.	Has the facility maintained a leak log?					ΩY	<u>O</u> N	I
3.	Does the responsible official check the	follow	ing ar	reas for leaks?				
	Hose connections, fittings, couplings, and valves	ΘÝ	HE	<sup>∖</sup> □N/A	Muck cookers	ΘÝ	ם אם	N/A
	Door gaskets and seating	ΘY	ΩИ	□N/A	Stills	ΘÝ	ם אם	N/A
	Filter gaskets and seating	ΘÝ	ΠN	□N/A	Exhaust dampers	ØÝ	ם אם	N/A
	Pumps	ΘY	ПΝ	□N/A	Diverter valves	ΘÝ	ם אם	N/A
	Solvent tanks and containers	ΘÝ	ПΝ	□N/A	Cartridge filter housings	ΘÝ	ם אם	N/A
	Water separators	ΩÝ	ΠN	□N/A				
4.	Which method of detection is used by the	ne resp	onsib	le official?				
	Visual examination (condensed solvent on exterior surfaces)							
	Physical detection (airflow felt through gaskets)							
	Odor (noticeable perc odor)							
	Use of direct-reading instrumentat	tion (F	ID/PI	D/calorimetric 1	tubes)			
	Halogen leak detector					9		
	If using direct-reading instru	ament:	ation,	, is the equipme	ent:	ON/	A	
	a. Capable of detecting p	erc va	por co	oncentrations in	a range of 0-500 ppm?	ΩY	□N	
	<ul> <li>b. Calibrated against a standard gas prior to and after each use (PID/FID only)?</li> </ul>						ПN	-
	c. Inspected for leaks and	d obvic	ous sig	gns of wear on a	weekly basis?	ΩY	□N	
	d. Kept in a clean and se	cure a	rea w	hen not in use?		$\Box$ Y	$\square N \in$	
	e. Verified for accuracy b	by use	of du	plicate samples	(calorimetric only)?	ΩY	ΠN	
			•					

Jeff Marris & Margaret	Henris 10/20/97
Inspector's Name (Please Print)	Date of Inspection
All Maria	11/4/97
∏inspector's Signature	Approximate Date of Next Inspection

### BEST AVAILABLE COPY

#### ADDITIONAL SITE INFORMATION:

- 3 machines & Dry-to-Dry

  1. Minaclean "Armani" Dual 955 Serial # 1119

  554 capacity No. Tingua ture Sensor
- 2. Minacleen "Georgie" Duel 355, Serial + 1/29 55 # capacity - no temperature Serser
- 3. American Law dy (AJAX) Model 465, 70 4 capacity Serial # 465210 260584
- Industrial Berlen Industrial Borlen Co. 66 HF # 2867 Model P60 3PV 245 Sevice 4 6021

Uses Mist Evaporator W/anal carbon filtration.

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

TYPE OF INSPECTION: ANNUAL ☑	COMPLAINT/DISCOVERY  RE-INSPECTION
TIME IN: 9:45 a.m. TIME (	OUT: 12:30 p.m. AIRS ID# 1030351 001
TYPE OF FACILITY: Perchloroethyle	ene Dry Cleaner
FACILITY NAME: Sacino's Form	alwear & Cleaners DATE: October 20, 1997
FACILITY LOCATION: 3430 Fairfield	Ave. S, St. Petersburg, FL 33711
RESPONSIBLE OFFICIAL: Ron Sacino	PHONE NUMBER:(813) 323-4053
/ to be in compliance with DEP Rule 62-213	uirements evaluated during this inspection, the facility is found 3.300, Florida Administrative Code (F.A.C.). uirements evaluated during this inspection, the following  FOLLOW-UP ACTION REQUIRED
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.
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 two Miraclean machines will have after-mark	et temperature sensors installed within the next two weeks.
The Annual Compliance Certification form has been proper DATE OF NEXT INSPECTION:	ly certified and submitted to the inspector. Yes V No  November 4, 1997  (Approximate)
INSPECTION CONDUCTED BY:	Jeffrey Morris
INSPECTOR'S SIGNATURE:	PHONÉ NUMBER: 464-4422

Revised 10/96

## TITLE V AIR QUALITY AIR GENERAL PERMIT

INSPEC	HON SUMMARY REPOR	1				
TYPE OF INSPECTION: ANNUAL	COMPLAINT/DISCOVE	RY □ RE-I	INSPECTION 🗹			
TIME IN: 11:45 a.m. TIME	OUT: 12:30 p.m.	AIRS ID# 1	103035 001			
TYPE OF FACILITY: Perchloroet	hylene Dry Cleaner					
FACILITY NAME: Sacino's F	ormalwear & Cleaners	DATE: Decem	ber 22, 1997			
FACILITY LOCATION: 3430 Fairfie	eld Ave. S, St. Petersburg	յ, FL 33711				
RESPONSIBLE OFFICIAL: Mr. Ron Sa	acino PHON	E NUMBER: (813	3) 323-1940			
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						
Could not confirm that temperature sensor we designed to measure 45°F with an accuracy 6±2°F.	1	esigned to measure etermine this by an	45°F with an other method that			

The Annual Compliance Certification form has been properly of	ertified and submitted to the inspector	. Yes ☑	No □
DATE OF NEXT INSPECTION:	January 7, 1998		
	(Approximate)		
INSPECTION CONDUCTED BX:	Jeff Morri	5	
INSPECTOR'S SIGNATURE:	(2.1,	464-4422	2
	se L of L	Res	vised 10/96

# **BEST AVAILABLE COPY** DRY CLEANER AIR QUALITY GENERAL PERMITS of ANNUAL COMPLIANCE CERTIFICATION FORM SACINO'S FORMALWEAR RON SACINO 3430 FAIRFIELD AVE S ST PETERSBURG FL 33711 ST PETERSBURG FL 33711 Do NOT Remove Label 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 $\square$ 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 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 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: Treg Sacino

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

#### Perchloroethylene Dry Cleaning Facility Notification

#### Facility Name and Location

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Sacino's Formalwear
2.	Site Name (For example, plant name or number):
3.	Hazardous Waste Generator Identification Number:
	FLD 982101347
4.	Facility Location:
	Street Address: 3430 Fair field Ave. South
	City: St. Petersburg County: Pinellas Zip Code: 33711
5.	Facility Identification Number (DEP Use):
	Factor 1030351
C MERCEL AR	
	Responsible Official
6.	Name and Title of Responsible Official:
	Ron Sacino, President, CEO
7.	Responsible Official Mailing Address:
	Organization/Firm: SACI no's Formalwear Street Address: 3430 Fairfield AVE S.
	City: ST. Petersburg County: Pinellas Zip Code: 33711
8	Responsible Official Telephone Number:
	Telephone: (813)323-1940 Fax: (813)323-4053
	Facility Contact (If different from Responsible Official)
	Name and Title of Facility Contact (For example, plant manager):
-	Ron Brewsterm Greg Sacino, Vice President, Plant
	Facility Contact Address
l	Street Address: 3430 Failfield Ave 5.
	City: Sr. Petersburg County: Pinellas Zip Code: 3371/
11.	Facility Contact Telephone Number:
	Telephone: $(813)$ 323 - 1940 $\times$ 226 Fax: ( ) RECEIVED
	SED 5 1996
	- CFD 7 (7/0

#### **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.

	1	Date	Date		Date	Date		Date	Date
		Machine	Control		Machine	Control		Machine	Control
	1	Initially	Device		Initially	Device		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit	$\overline{}$								
(I) w/ ref. condenser	#1	11- Aug- 84	10-04.90	#2	16-541-90	16-Jul-90	#3	16-541-90	16-Jul-
(2) w/ carbon adsorber		,							
(3) w/ no controls									
Washer Unit		·			<del></del>			'	
(4) w/ ref. condenser	1		]						
(5) w/ carbon adsorber	_								
(6) w/ no controls									
Dryer Unit			•		•				
(7) w/ ref. condenser	<u> </u>								
(8) w/ carbon adsorber				_					
(9) w/ no controls	$\top$								
Reclaimer Unit	$\top$							J	
(10) w/ ref. condenser	1	1							
(11) w/carbon adsorber	1								
(12) w/ no controls	1	· · · · · · · · · · · · · · · · · · ·							
<ul> <li>(b) Control devices are required, but not yet installed []</li> <li>(c) No control devices are required to be installed []</li> <li>2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  - [, 2] gallons</li> <li>(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: []</li> </ul>									
3. What is the facility's s (Indicate with an "X".  Existing small a	Selec	ct one classif	ication only.)	)	initions found		3) of	Part II?	

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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  []
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  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

DEP Form No. 62-213.900(2) Effective: 6-25-96

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

Please indicat	e 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)							
•	·							
ΙX	No air permits currently exist for the operation of the facility indicated in this notification form.							
	Responsible Official Certification							
this notifi statement maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form.							
I will pro	mptly notify the Department of any changes to the information contained in this notification.  Date  Date							

AIRS 10#: 1030351

OCC RECEIVIED 10/9

# DRY CLEANER AIR QUALITY GENERAL PERMIT NOV 1 0 1997 ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: Sacino's Formal Wear	& Mobile Sources
FACILITY LOCATION: 3430 Fairfield Ave S.	
St Petersburg, FL 33711	
Annual Reporting Period: October 20, 1996 TO Octo	ober 20, 1997
Based on each term or condition of the Title V general air permit, my facility has remained in complete 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement.	·
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous compliance during the r	eporting period stated above:
Did not measure and record the outlet of the refrigerated condenser on the dry to dr Exact period of non-compliance: from October 20, 1996 to Oct	temperature y machine ober 20, 1997
Action(s) taken to achieve compliance:  Develop and implement a management of measure and record the compliance:  Method used to demonstrate compliance:  Sensors need to be install machines.	outlet temperature market temperature ed on both Mirroclean
#2. Term or condition of the general permit that has not been in continuous compliance during the re-	
Could not confirm that temperature designed to measurery 45°F with an accumentation of non-compliance: from October 20, 1996 to Oct	L Sensor Was wracy of tzof or =1.19 cober 20, 1997
Action(s) taken to achieve compliance: Obtain verication from the the temp sensor is designer Method used to demonstrate compliance? WHSOF with an accuracy of	d to measure
As the responsible official, I hereby certify, based on information and belief formed after reasonable made in this notification are true, accurate and complete. Further, my annual consumption of perch upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facy year for transfer or combination facilities.	loroethylene solvent, based
RESPONSIBLE OFFICIAL: Gregory J. Sacine Ly Signature  Name (Please Print)	10-20-97 Date

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

## RECENTED

### DRY CLEANER AIR QUALITY GENERAL PERMIT NOV 1 0 1997 ANNUAL COMPLIANCE CERTIFICATION FORM

	C	1 5 0		<u>.                                    </u>	∞ IAIODIIE	ir Monitoring Sources
FACILITY NAME:					DATE: _	10/20/97
FACILITY LOCATION:	3430	Fairfi	eld A	ie S		
	St Pet	tersbu	rg, FL	33711	· · · · · · · · · · · · · · · · · · ·	
Annual Reporting Period:	Octobe	r 20,	19 <b>96</b> TO	Octo	ber 20	, 1997
Based on each term or condition 62-213.300, Florida Administra					_	Rule ⊠NO
If NO, complete the following:						
#1. Term or condition of the ge	eneral permit that	t has not been ir	ı continuous comp	pliance during the r	eporting period	stated above:
Did not made and repair of Exact period of non-compliance Action(s) taken to achieve comp				k detect		
Method used to demonstrate con	mpliance:	spection	n and t	epair pr detection n a wee	09 rom.	Mainta
#2. Term or condition of the ge	eneral permit that	t has not been in	continuous comp	oliance during the r	eporting period	stated above:
Exact period of non-compliance	: from			to		
Action(s) taken to achieve comp	oliance:					
Method used to demonstrate con	mpliance:			-		
As the responsible official, I he made in this notification are tru upon rolling averages of purche year for transfer or combination	e, accurate and c use receipts, does	complete. Furth	ier, my annual co	nsumption of perch	loroethylene so	lvent, based
RESPONSIBLE OFFICIAL:	Gregory Name (	J. Cacia	20	Signature	in 10	7-20-97 Date

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

# TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF IN	SPECTION: A	NNUAL 🗹 COM	IPLAINT/DISCO	VERY 🖵 R	E-INSPECTION	<u> </u>
AIRS ID#:	1030351 001	_ DATE: 10/7	/ <u>/98</u> time	IN: <u>10: 10</u> 00	TIME OUT: 10	<u>:55a</u> ,m,
FACILITY	NAME: _	Sacino's Forma	alwear & Clear	ners		
FACILITY	LOCATION: _	3430 Fairfield Av	ve. S			3
	_	St. Petersburg, Fl	L, 33711		(D) A.	<u>, C</u>
RESPONSI	BLE OFFICIAL	: Ron Sacino		Phone No.:	323-1940	
Permi	t No. <u>1030351-001</u>	-AG Exp. Date:	10/04/2001		Note St. No.	
		of the compliance requir EP Rule 62-213.300, Flor			on, the facility is found	Too be in
		s of the compliance requi		uring this inspecti	on, the following com	pliance

### **Inspection Summary Report Guidance**

 Compliance Requirement/Problem	Follow-up Action Required
Did not have a start-up, shutdown, malfunction (SSM) plan in place, along with associated recordkeeping, on site.	If no specific procedures are available from the manufacturer, develop a SSM plan that describes procedures for maintaining and operating equipment during periods of start-up and shutdown associated with a malfunction. EPA's O&M manual may be used if no manufacturers information is available. Keep log of maintenance actions
Purchase receipts were not maintained properly.	Maintain all purchase receipts in a log kept on-site for determination of perchloroethylene solvent consumption.
Monthly purchase records were not maintained as a consecutive twelve month total.	Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a consecutive twelve month total.
Could not confirm that temperature sensor was designed to measure 45°F with an accuracy of ±2°F.	Obtain verification from the manufacturer that the temperature sensor is designed to measure 45°F with an accuracy of $\pm 2$ °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:	mà				
Phone Number: 464/4/22//					

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

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	COMPLAINT/DISC	OVERY 🗖	
AIRS ID#: 1030351 001	DATE: 10/7/	94 TIME IN: <u>۱۵</u>	antime out: 10	:65am
FACILITY NAME:	Sacino's Forma	lwear & Cleaners	<del> </del>	
FACILITY LOCATION:	3430 Fairfield Ave	. S		
	St. Petersburg, FL,	33711		
RESPONSIBLE OFFICIA	AL: Ron Sacino	<b>,</b>	PHONE: _323-1940	
CONTACT:	Greg Saci	^O F	'HONE: 323-19:	<u>+0</u>
PART I: NOTIFICATION	T			
(Check appropriate box)				
1. Existing facility notified	DARM By 9/1/96			<b>4</b>
2. New facility notified DA	RM 30 days prior to start	ıp		
3. Facility failed to notify I	OARM to use general pern	nit		ū
PART II: CLASSIFICAT	ION			
Facility indicated on notific (Check appropriate box)	ation form that it is:	No notification for Drop store / out of	m business / petroleum	
A.  1. Existing small area dry-to-dry only, x<14 transfer only, x<200 both types, x<140 ga (Constructed before	source 40 gal/yr gal/yr l/yr 12/9/91)	2. New small area so dry-to-dry only, x-transfer only, x-20 both types, x-140 (Constructed on or	ource <140 gal/yr 00 gal/yr gal/yr gal/yr r after 12/9/91)	
3. Existing large area a dry-to-dry only, 140-transfer only, 200 < x-both types, 140 < x < 1 (Constructed before	source <x 2,100="" <="" gal="" yr<br="">&lt;1,800 gal/yr ,800 gal/yr 12/9/91)</x>	4. New large area so dry-to-dry only, 14 transfer only, 200-both types, 140 <x (constructed="" of<="" on="" td=""><td>ource 10 &lt; x &lt; 2,100 gal/yr &lt; x &lt; 1,800 gal/yr &lt; 1,800 gal/yr r after 12/9/91)</td><td></td></x>	ource 10 < x < 2,100 gal/yr < x < 1,800 gal/yr < 1,800 gal/yr r after 12/9/91)	
This is a correct facility class	ssification: 🗹 Y 🗅 N	Can not determine		
facility qualified	appropriate classification: for a general permit as nu above limits and is not elig	mber above		
B. The total quantity of perfacility was957_		chased within the preceding	12 months by this dry	cleaning

PART III: GENERAL CONTROL REQUIREMENTS							
Is the responsible official of the dry cleaning facility: (check appropriate boxes)	. ,						
1. Storing perchloroethylene in tightly sealed and impervious containers?	ĭ Y	ΠN	□ NA				
2. Examining the containers for leakage?	☑ Y	□N	□ NA				
3. Closing and securing machine doors except during loading/unloading?	☑Y	ΠN	٠				
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	Y Y	ПN	□ NA				
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	☐ Y	ПN	☑ NA				
PART IV: PROCESS VENT CONTROLS							
In Part II-A:							
If classification (1) has been checked, no controls are required. Proceed to Pa	art V.						
If classification (2) has been checked, the machine should be equipped with a (complete A below)	refrige	rated con	denser				
If classification (3) has been checked, the machine should be equipped with e condenser or a carbon adsorber (complete A and B below). Carbon adsorber installed prior to September 22, 1993.	If classification (3) has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993.						
If classification (4) has been checked, the machine should be equipped with a (complete A and B below.)	refrige	rated con	denser				
A. Has the responsible official of all new sources and existing large area sou (check appropriate boxes)	rces:		·				
1. Equipped all machines with the appropriate vent controls?	<b>Y</b>	□N					
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	Y	ΠN	□ NA				
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	Y	□N	□NA				
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly bi-weekly basis?	Y	□N					
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	<b></b> Y Y	ПN	□NA				
6. Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	Y	ΠN					

В.	Has the responsible official of an existing large or new large area source also:		
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	✓Y	□n
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20° F?	□Y □Y	□n □na □n □na
	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?  Is the perc concentration equal to or less than 100 ppm?	□Y □Y	□n □na □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 injet?	□Y	□n □na
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y	□n □na
6	D-11'0 (1 1 1 1 1 0 0 1 1 1 0 0		
0.	Routed airflow to the carbon adsorber (if used) at all times?	ПY	□n □na
	ART V: RECORDKEEPING REQUIREMENTS	Y	□n □na
PA	ART V: RECORDKEEPING REQUIREMENTS	□Y ·	On Ona
PA H:		□Y 	On Ona
H2 (c)	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)	□Y ✓ ✓ ✓ ✓	ON ONA
H: (c) 1. 2.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?	□Y  ✓Y  ✓Y	□N □NA □NA □N □N □N
H: (c) 1. 2.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:	✓Y ✓Y	ON ONA ON ON ON ON ON ON
H: (c) 1. 2.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?	⊴Y ⊴Y ⊴Y ⊴Y	ON TINA ON TINA
H: (c) 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or; (door posket part)	⊴Y ⊴Y ⊴Y ⊴Y ⊝Y	ON SINA ON SINA
H: (cl 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or; (door oosket parts) b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	⊴Y ⊴Y ⊴Y ⊴Y ⊝Y	ON TINA ON TINA
H: (cl 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or; (door posket park for the following)  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?		ON SINA ON SINA
H: (cl 1. 2. 3. 4. 5.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: heck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or; (door posket park for standard of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?		ON ON ZÍNĂ ON ZÍNĂ ON ZÍNA

PA	PART VI: LEAK DETECTION AND REPAIRS								
1.	<ol> <li>Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?</li> </ol>								
2.	Has the facility maintained a le	eak log	?			$\mathbf{Y}$	$\square$ N		
3.	Does the responsible official c	heck th	ne follo	owing are	eas for leaks:				
	Hose connections, fitting couplings, and valves	<b>□</b> Y	□N	□NA	Muck cookers	✓Y	□n □	INA	
	Door gaskets and seating	Øy	$\square_N$	$\square$ NA	Stills	ĭY		NA	
	Filter gaskets and seating	<b>y</b>	ΠN	□NA	Exhaust dampers	ĭ Y		NA	
	Pumps	$\mathbf{v}_{\mathrm{Y}}$	ΠN	□NA	Diverter valves	Y		NA	
	Solvent tanks and containers	<b>V</b> Y	ΠN	□NA	Cartridge Filter housing	Y		INA	
	Water separators	ΨY	$\square_N$	□NA					
4. Which method of detection is used by the responsible official?  Visual examination (condensed solvent of exterior surfaces)  Physical detection (airflow felt through gaskets)  Odor (noticeable perc odor)  Use of direct-reading instrumentation (FID/PID/calorimetric tubes)  Halogen leak detector  If using direct-reading instrumentation, is the equipment:									
	a Capable of detecting pe	rc vapo	or con	centration	ns in a range of 0-500 ppm.	and the court of the first state of the court of	OY O	IN	
				\	fter each use(PID/FID only).		□y □	<b>IN</b>	
	c. Inspected for leaks and o	bvious	signs	of wear o	on a weekly basis?			IN	
	d. Kept in a clean and seco	ure area	a wher	n not in u	se.		OY O	lN	
	e. Verified for accuracy by	use of	duplic	ate samp	les (calorimetric only)?		□Y □	<b>j</b> N	
	Inspector's Name (Please Print)  Inspector's Signature  Date of Inspection  Approximate Date of Next Inspection								

T . ~	~~ ~~			~
FAC		ľYŁ	)ETA	ALLS:

FACILITY NAME: Sacino's Formalweart Cleanes
Dry Cleaning Machine #1:
Manufacturer Miraclean "Armani" Capacity 55 lbs  Model# Dual 955 Serial# 1119 Mfg yr 1989
Dry Cleaning Machine #2:
Manufacturer Miraclean "Georgio" Capacity 55 lbs  Model# Dual 355 Serial# 1129 Mfg yr 1990  Dry Cleaning Machine #3  (AJAX) copacity  Manufacturer American Laundry Hp yr 70 lbs  Model # 465 Serial # 465210260584 Mfg yr 1984  Boiler: Findustrial Bailer Co. Serial # 6021 Model # P603PV2AS Hp 60  Fuel Type: Natural gas? Propane? Guel oil?
Notification (unpermitted sources only):  1. Was the facility assisted in filling out the notification by the inspector?  2. Did the facility insist on filling out its own notification, and will send it to FDEP?  Property In N/A  Record keeping:  1. Does facility have statement/specs as to the design accuracy of the temperature sensor? In N/A (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?  2. If wastewater is evaporated, is it an approved system, and using carbon filtration?  3. Does the facility have secondary containment for the dry-dry machine?  4. Does the facility have secondary containment for any perc. waste containers?
Comments:

## PECE I VSP DSI

Mille

# MAY 1 9 1999 DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

Bureau of Air Monitoring				<del></del>	•		
& Mobile Sources FACILITY NAME:	Saci	nos Forn	nalwear	- of Clea	aners	DATE: 4	/13/99
FACILITY LOCATION:		) Fairfiel		_		·	
	St.	Petersbu	rg, Fc	33711			
Annual Reporting Period:	Octo	ober 7,	19 <b>98</b>	то/	April	13,	1999
Based on each term or condition 62-213.300, Florida Administr							
If NO, complete the following:							
#1. Term or condition of the g	eneral permit	that has not been i	n continuous co	mpliance du	ring the reporti	ing period stat	ed above:
The outlet e condenser on Exact period of non-compliance Action(s) taken to achieve com Method used to demonstrate co #2. Term or condition of the ga	pliance:	Repair of 24 hours & exhaust documented	adjusted sexceeds	st cor urement 45°F: monito	that Repair ring reco	the out shall b	in let e
Exact period of non-compliance	e: from _			to		<del></del>	
Action(s) taken to achieve comp	pliance:					-	
Method used to demonstrate co	mpliance:	· 		·			
As the responsible official, I he made in this notification are tra upon rolling averages of purch year for transfer or combination	ue, accurate a ase receipts, a	nd complete. Furt	her, my annual	consumption	of perchloroe	thylene solven	t, based
RESPONSIBLE OFFICIAL:	- The	N SACIN	0	F	>	4/	43/7
	Nam	ie (Pleace Print)		Sign	nature	T	Jate

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

# TITLE V AIR QUALITY AIR GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF IN	SPECTION: AN	INUAL 🗹 COI	MPLAINT/DISCOVERY	RE	E-INSPECTION				
AIRS ID#:	1030351 001	DATE: <u>-</u> -{/	13/99_ TIME IN: _i	1:14aT	IME OUT: 12;	15 p. m.			
FACILITY	FACILITY NAME: Sacino's Formalwear & Cleaners								
FACILITY	LOCATION:	3430 Fairfield	Ave. S						
	_	St. Petersburg,	FL, 33711						
RESPONSI	RESPONSIBLE OFFICIAL: Ron Sacino Phone No.: 323-1940								
Perm	it No. <u>1030351-001-A</u>	AG Exp. Date	:10/04/2001						
			uirements evaluated during the orida Administrative Code (F	-	, the facility is found	l to be in			
Ø	Based on the results of	• •	uirements evaluated during th	is inspection	n, the following com	pliance			

### **Inspection Summary Report Guidance**

Compliance Requirement/Problem	Follow-up Action Required
Did not have a start-up, shutdown, malfunction (SSM) plan in place, along with associated recordkeeping, on site.	If no specific procedures are available from the manufacturer, develop a SSM plan that describes procedures for maintaining and operating equipment during periods of start-up and shutdown associated with a malfunction. EPA's O&M manual may be used if no manufacturers information is available. Keep log of maintenance actions
Purchase receipts were not maintained properly.	Maintain all purchase receipts in a log kept on-site for determination of perchloroethylene solvent consumption.
Monthly purchase records were not maintained as a consecutive twelve month total.	Develop and implement a recordkeeping procedure that maintains monthly purchases (perc) as a consecutive twelve month total.
Could not confirm that temperature sensor was designed to measure 45°F with an accuracy of ±2°F.	Obtain verification from the manufacturer that the temperature sensor is designed to measure 45°F with an accuracy of ±2°F, or determine this by another method that the Department would consider appropriate.
Evaporator for separator wastewater does not incorporate a pre-filtration system.	Facility may choose to either dispose of perc-containing separator water as hazardous waste, or incorporate a carbon filtration system with the evaporator (as per the State's guidelines).
Did not store all perc, and perc-containing waste in tightly sealed containers.	Store all perc and perc-containing waste in tightly sealed containers which are impervious and chemically unreactive to the solvent.
Did not maintain a log of leak detection inspection and repair records.	Develop and implement a leak detection inspection and repair program. Maintain a log of leak detection inspection and repair records.

	Compliance Requirement/Problem	Follow-up Action Required
	Did not conduct weekly leak detection and repair inspection.	Develop and implement a leak detection inspection and repair program. Use at least one of the methods outlined in Part II, Section 7(a), of the general permit provisions, to detect leaks. Inspect the items listed in Part II, Section 7(b), for leaks. Repair leaks within 24 hours of detection, unless repair equipment must be ordered.
	No calibration records for the mechanical direct reading instrumentation (halogen detector) were available.	Mechanical direct-reading instrumentation shall be operated as directed by the manufacturer and must meet the conditions in Part II, Section 7(e) of the general permit provisions
	Did not measure and record the outlet temperature of the refrigerated condenser on the dry-to-dry machine (dryer, reclaimer) on a weekly basis.	Develop and implement a monitoring program. Measure and record the outlet temperature on a weekly basis. The temperature, 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.
Ø	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: The outlet exhau	st of the refrigerated
	condenser on machine	#3 exceeded 45°F during
	cooldown. Temperatu	ce was 55°Film
	• • • • • • • • • • • • • • • • • • •	actions are required, you must take immediate corrective
	•	perform a follow-up inspection to determine that proper
	corrective actions have been taken.	
	Inspection Conducted by: Jeffrey Morris	<u> </u>
	Inspector's Signature:	ema
	Phone Number: 464-4422	<del></del>

·	TITLE V C	GENER.	E DRY CLEANERS AL PERMIT FION CHECKLIST	V	
TYPE OF INSPECTION:	ANNUAL RE-INSPECTION		COMPLAINT/DISC	OVERY 🗖	
AIRS ID#: 1030351 001	DATE: <u>4/1</u> 3	199	TIME IN: 11/14	MATIME OUT: 12	:15p.m
FACILITY NAME:	Sacino's Forma	alwear	& Cleaners		
FACILITY LOCATION:	3430 Fairfield Av	e. S			
	St. Petersburg, FL	ر, 33711			
RESPONSIBLE OFFICIA	L: _Ron_Sacino		P	HONE: _323-1940	 
CONTACT:	-		P	HONE:	
PART I: NOTIFICATION	Г		-		
(Check appropriate box)			· · · · · · · · · · · · · · · · · · ·		
1. Existing facility notified	DARM By 9/1/96				$\mathbf{a}$
2. New facility notified DA	-	tup			
3. Facility failed to notify D	•	•			
3. Tacinty lanea to notify b				<del></del>	
PART II: CLASSIFICATI	ON				<del></del>
Facility indicated on notifica (Check appropriate box)		C C	No notification for Drop store / out of		
A.  1. Existing small area so dry-to-dry only, x<14 transfer only, x<200 so both types, x<140 galacter (Constructed before in	l0 gal/yr gal/yr l/yr	2.	New small area so dry-to-dry only, x < transfer only, x < 20 both types, x < 140 (Constructed on or	140 gal/yr 0 gal/yr gal/yr	
3. Existing large area so dry-to-dry only, 140 transfer only, 200 transfer only, 200 to both types, 140 transfer only, 200 tran	(x≺2,100 gal/yr	4.	New large area so dry-to-dry only, 14 transfer only, 200 < both types, 140 < x -	0≺x≺2.100 gal/vr	

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?	<b>⊴</b> Y	□N	□ NA				
2. Examining the containers for leakage?	☑ Y	$\square_N$	□ NA				
3. Closing and securing machine doors except during loading/unloading?	Y	ŪΝ					
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	∑ Y	ПN	□NA				
5. Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	□Y	ПN	☑ NA				
			-				
PART IV: PROCESS VENT CONTROLS							
In Part II-A:							
If classification (1) has been checked, no controls are required. Proceed to Pa	ırt V.						
If classification (2) has been checked, the machine should be equipped with a refrigerated condenser (complete A below)							
If classification (3) has been checked, the machine should be equipped with e condenser or a carbon adsorber (complete A and B below). Carbon adsorber installed prior to September 22, 1993.	ither a must ha	refrigerate ave been	ed ·				
If classification (4) has been checked, the machine should be equipped with a (complete A and B below.)	refrige	rated con	denser				
A. Has the responsible official of all new sources and existing large area sources:  (check appropriate boxes)							
1. Equipped all machines with the appropriate vent controls?		□N <sub>.</sub>					
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	Ŭ 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?	<b>I</b> 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	ПN					

В.	Has the responsible official of an existing large or new large area source also:			
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ΔY	□N	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?  Is the temperature differential equal to or greater than 20°F?	□Y □Y		□NA □NA
	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?  Is the perc concentration equal to or less than 100 ppm?  Assured that the sampling port on the carbon adsorber exhaust for measuring perc. concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 dust diameters downstream from any bend contraction or	□Y □Y		□na □na
5.	expansion; is at least 2 dust diameters upstream from any bend contraction, or expansion; and downstream from no other inlet?  Equipped transfer machines (dryers, reclaimers, and washers) with individual	□Y	_	□NA
	condenser eoils?	ЦY	IJN	IJNA
6.	Routed airflow to the carbon adsorber (if used) at all times?	ПY	ΠN	□NA
PA	ART V: RECORDKEEPING REQUIREMENTS			•
H: (cl	as the responsible official: heck appropriate boxes)	_		
1.	Maintained receipts for perc purchased?	IJY	ΠN	
2.	Maintained rolling monthly averages of perc consumption?	$\mathbf{p}_{\mathbf{v}}$		
3.	Maintained leak detection inspection and repair reports for the following:	<del>-</del> ·	- T (	
	a. documentation of leaks repaired w/in 24 hrs? or; ( Door Gasket replaced of	ΖÍΥ	$\square$ N	$\square$ NA
	b. documentation of parts ordered to repair leak and leak repaired Mochine #2/		_	
	w/in 2 days and parts installed w/in 5 days of receipt?	Y	Μ	IJNA
4.	b. documentation of parts ordered to repair leak and leak repaired win 2 days and parts installed win 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)	□Y	N	UNA ☑NA
4. 5.	Maintained calibration data? (for direct reading instrument only)	□y □y	N Q N	Una Una Una
	Maintained calibration data? (for direct reading instrument only)	□Y □Y □Y □Y		
5. 6.	Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?	□у	□N □N	
5. 6.	Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?	□ y		⊠NA

PART VI: LEAK DETECTION AND REPAIRS									
<ol> <li>Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?</li> </ol>									
2. Has the facility maintained a leak log?						□N			
Does the responsible official c	heck t	he follo	owing areas	for leaks:					
Hose connections, fitting couplings, and valves	ďγ	□N	□NA	Muck cookers	ПY	□n <b>⊠</b> na			
Door gaskets and seating	$\mathbf{v}_{\mathbf{Y}}$	□N	$\square$ NA	Stills	¥Y	$\square_N$ $\square_{NA}$			
Filter gaskets and seating	¥Υ	ŪN	□NA	Exhaust dampers	Y	□n □na			
Pumps	$\mathbf{\nabla}_{\mathbf{Y}}$	□N	□NA	Diverter valves	$\mathbf{Z}_{\mathbf{Y}}$	□n □na			
Solvent tanks and containers	Øy	□N	□NA	Cartridge Filter housing	Y	□n □na			
Water separators	ΞY	□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									
a Capable of detecting pe	rc vap	or con	centrations	in a range of 0-500 ppm.		$\square_{Y}$ $\square_{N}$			
b. Calibrated against a stan	dard g	as prio	r to and afte	er each use(PID/FID only).	warni "	$\square_{Y} \square_{N}$			
c. Inspected for leaks and o	bviou	s sign <del>s</del>	of wear on	a weekly basis?		$\square_{Y} \square_{N}$			
d. Kept in a clean and second	ure are	a wher	n not in use			$\square_{\mathrm{Y}} \ \square_{\mathrm{N}}$			
e. Verified for accuracy by	use of	duplic	cate samples	(calorimetric only)?		$\square_{Y}$ $\square_{N}$			
Inspector's Name (Please Print)  University of Inspection  University of Inspection  Approximate Date of Next Inspection									
	Does the responsible official coinspection?  Has the facility maintained a let Does the responsible official compositions, fitting couplings, and valves  Door gaskets and seating  Filter gaskets and seating  Pumps  Solvent tanks and containers  Water separators  Which method of detection is Visual examination Physical detection Odor (noticeable pulse of direct-reading Halogen leak detection In Capable of detecting per bound of the detection per content of the Calibrated against a standard of the Calibrated for leaks and content of the Calibrated against a standard of the Calibrated against a stan	Does the responsible official conductinspection?  Has the facility maintained a leak log Does the responsible official check to Hose connections, fitting couplings, and valves  Door gaskets and seating  Filter gaskets and seating  Pumps  Solvent tanks and containers  Water separators  Which method of detection is used by Visual examination (conducted Physical detection (airflow Odor (noticeable perconducted Use of direct-reading instrument)  a Capable of detecting percomposition of the Capable of the	Does the responsible official conduct awer inspection?  Has the facility maintained a leak log?  Does the responsible official check the following of the responsible official check the following. The properties of the properties of the following of the properties	Does the responsible official conduct a weekly (for sminspection?  Has the facility maintained a leak log?  Does the responsible official check the following areas  Hose connections, fitting couplings, and valves  Door gaskets and seating  Filter gaskets and seating  Pumps  Solvent tanks and containers  My	Does the responsible official conduct a weekly (for small sources, bi-weekly) leak inspection?  Has the facility maintained a leak log?  Does the responsible official check the following areas for leaks:  Hose connections, fitting couplings, and valves  Door gaskets and seating  Y N NA Muck cookers  Door gaskets and seating  Y N NA Exhaust dampers  Pumps  Solvent tanks and containers  Y N NA Cartridge Filter housing  Water separators  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.  b. Calibrated against a standard gas prior to and after the use(PID/PID only).  c. Inspected for leaks and obvious signs of weak on a weekly basis?  d. Kept in a clean and secure area when not in use.  e. Verified for accuracy by use of duplicate samples (calorimetric only)?  Has the facility maintained a leak log?  Does the responsible of leaks apples (calorimetric only)?  Has the facility maintained a leak log?  Name (Please Print)  Date of list  Hose connections, fitting could after samples (calorimetric only)?	Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detectinspection?  Has the facility maintained a leak log?  Does the responsible official check the following areas for leaks:  Hose connections, fitting couplings, and valves  Door gaskets and seating  Y N NA Muck cookers  Y  Door gaskets and seating  Y N NA Exhaust dampers  Y  Pumps  Solvent tanks and containers  Y N NA Cartridge Filter housing  Y  Water separators  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.  b. Calibrated against a standard gas prior to and after the use(PID/PID only).  c. Inspected for leaks and obvious signs weak on a weekly basis?  d. Kept in a clean and secure area when not in use.  e. Verified for accuracy by use of duplicate samples (calorimetric only)?  Has the facility and the detector  All 14 / 99  Has the facility and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and obvious signs of the second and the following areas for leaks and second and the following areas for leaks and obvious signs of the second and the following areas for leaks and second and second and the following areas for leaks and second and second and s			

Machine #2: Outlet exhaust temp. at cooldown = 41°F  Machine #3: Outle exhaust temp at cooldown = 55°F  - Outlet exhaust temperature not read at  temperature sensor in back of machine  but in tront of machine using a  conversion coalculation.			
Follow-up	4/14/99.		

## RECEIVED

MAY 1.9 1999

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

Bureau of Air Monitoring & Mobile Sources

TYPE OF INSPECTION:	ANNUAL GOMPLAINT/DISCOVE	ERY 🗆 RE-INSPECTION 🗹
AIRS ID#: 1030351 001	l	1:11:240.0TIME OUT: 12:10p.m.
FACILITY NAME:	Sacino's Formalwear & Cleaner	rs
FACILITY LOCATION:	3430 Fairfield Ave. S	· · ·
	St. Petersburg, FL, 33711	
RESPONSIBLE OFFICIA	AL: Ron Sacino	Phone No.: 323-1940
Permit No. <u>1030351-0</u>	01-AG Exp. Date: 10/04/2001	•
	ults of the compliance requirements evaluated durin DEP Rule 62-213.300, Florida Administrative Coo	
	ults of the compliance requirements evaluated during ere noted (only items which are checked):	ng this inspection, the following compliance

#### **Inspection Summary Report Guidance**

Compliance Requirement/Problem	Follow-up Action Required
Did not have a start-up, shutdown, malfunction (SSM) plan in place, along with associated recordkeeping, on site.	If no specific procedures are available from the manufacturer, develop a SSM plan that describes procedures for maintaining and operating equipment during periods of start-up and shutdown associated with a malfunction. EPA's O&M manual may be used if no manufacturers information is available. Keep log of maintenance actions
Purchase receipts were not maintained properly.	Maintain all purchase receipts in a log kept on-site for 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:					
<u> </u>					
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:	ont				
Phone Number: 464-4422					

Page 2 of 2

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

TYPE OF INSPECTION: ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION	
AIRS ID#: 1030351 001 DATE: 4/14/99 TIME IN: 11.240 m TIME OUT: 12.10 p	W.
	_
FACILITY LOCATION: 3430 Fairfield Ave. S	_
St. Petersburg, FL, 33711	_
RESPONSIBLE OFFICIAL: Ron Sacino PHONE: 323-1940	_
CONTACT: PHONE:	_
PART I: NOTIFICATION	
(Check appropriate box)	,
1. Existing facility notified DARM By 9/1/96   ☑	í
2. New facility notified DARM 30 days prior to startup	ì
3. Facility failed to notify DARM to use general permit	1
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (Check appropriate box)  No notification form Drop store / out of business / petroleum	
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: $\square Y \square N \square$ 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 cleanifacility was 539.4 gallons.	ng

P/	ART III: GENERAL CONTROL REQUIREMENTS						
	the responsible official of the dry cleaning facility: neck appropriate boxes)	(					
1.	Storing perchloroethylene in tightly sealed and impervious containers?		ΠN	□ NA			
2.	Examining the containers for leakage?	/	ΠN	□ NA			
3.	Closing and securing machine doors except during loading/unloading?	⊈ Y	ΠN				
4.	Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	✓ Y	□N	□NA			
5.	Maintaining solvent-to- carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	QΥ	ΠN	NA			
PA	ART IV: PROCESS VENT CONTROLS						
In	Part II-A:						
	If classification (1) has been checked, no controls are required. Proceed to Pa	ırt V.					
	If classification (2) has been checked, the machine should be equipped with a 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.)						
Α.	Has the responsible official of all new sources and existing large area sou (check appropriate boxes)	rces:	<b>'</b> :;				
1.	Equipped all machines with the appropriate vent controls?	Y	ŪΝ				
2.	Equipped dry-to-dry machines with a closed-loop vapor venting system?	☑ Y	$\square$ N	□ NA			
3.	Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	$\mathbf{v}_{\mathbf{Y}}$	□N	□NA			
4.	Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly bi-weekly basis?	Y	ΠN				
5.	Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	₫ <sub>Y</sub>	ΠN	□NA			
6.	Conducted all temperature monitoring after an appropriate cool down period and after verifying the coolant had been completely charged?	$\mathbf{A}_{\mathbf{Y}}$	ΠN				

_				
В.	Has the responsible official of an existing large or new large area source also:			
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser	/		
	located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	<b>⊴</b> Y	□N	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and	ΩY	ΠN	□NA
	outlet weekly?  Is the temperature differential equal to or greater than 20°F?	$\square_{Y}$	$\square_N$	□NA
2	Management and reasonated the name concentration in the exhaust atraces wealthy at the			
٥.	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 adsorbed?	$\Box$ Y	$\square$ N	□NA
	Is the perc concentration equal to or less than 100 ppm?	ΠY	$\square$ 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?	ΠY	<b>∟</b> N	□NA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			
	condenser coils?	ΠY	$\square$ N	□NA
6.	Routed airflow to the carbon adsorber (if used) at all times?	ŪΥ	□N	□NA
		¥	□N	□NA
PA	ART V: RECORDKEEPING REQUIREMENTS	ΩΥ	□N	□NA
PA		□Y ·	□N	□NA
PA Ha (cl	ART V: RECORDKEEPING REQUIREMENTS	□Y · · ·		□NA
PA Ha (cl	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)	√ Y √	□N	□NA
PA (cl 1. 2.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?	□Y □Y □Y □Y		□NA
PA (cl 1. 2.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;	√ Y √	□N	□NA
PA (cl 1. 2.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired moved w/in 2 days and parts installed w/in 5 days of receipt?	ØY ØY ØY		□NA □NA
PA Ha (cl. 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;	ØY ØY ØY		□NA
PA Ha (cl. 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired moved w/in 2 days and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)	ØY ØY ØY		□NA □NA
PA Ha (cl. 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired moved w/in 2 days and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)	Y Y Y Y Y		□NA □NA
PA Ha (cl. 1. 2. 3. 4. 5.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired moved w/in 2 days and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?	Y Y Y Y Y Y		□NA □NA
PA Ha (cl) 1. 2. 3.	ART V: RECORDKEEPING REQUIREMENTS  as the responsible official: neck appropriate boxes)  Maintained receipts for perc purchased?  Maintained rolling monthly averages of perc consumption?  Maintained leak detection inspection and repair reports for the following:  a. documentation of leaks repaired w/in 24 hrs? or;  b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?  Maintained calibration data? (for direct reading instrument only)  Maintained exhaust duct monitoring data on perc concentrations?  Maintained startup/shutdown/malfunction plan?	Y Y Y Y Y Y		□NA □NA □NA

PA	PART VI: LEAK DETECTION AND REPAIRS									
1.	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair inspection?									
2.	Has the facility maintained a le	eak log	g?			MY · N				
3.	Does the responsible official c	heck tl	he foll	owing area	as for leaks:					
	Hose connections, fitting couplings, and valves	✓Y	□N	□NA	Muck cookers	DY DN MA				
	Door gaskets and seating	ΨY	ΠN	□NA	Stills	My On Ona				
	Filter gaskets and seating	ŬY	ΠN	□NA	Exhaust dampers	My On Ona				
	Pumps	$\mathbf{V}_{\mathbf{Y}}$	□N	□NA	Diverter valves	My On Ona				
	Solvent tanks and containers	ΨY	□N	□NA	Cartridge Filter housing	My On Ona				
	Water separators		□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.									
	b. Calibrated against a stan	ıdard ga	as prio	r to and aft	er each use(PID/FID only).	QY QN				
	c. Inspected for leaks and o	bvious	s signs	of wear or	a weekly basis?	□y □n				
	d. Kept in a clean and seco	ure are	a when	not in us	e.	$\square_{\mathrm{Y}} \square_{\mathrm{N}}$				
	e. Verified for accuracy by	use of	duplic	ate sample	es (calorimetric only)?	$\square_{Y} \square_{N}$				
	Inspector's Name (Please Prin	c S nt)			4/14/9 Date of Ins	spection				
	Inspector's signature	∆ri <u>a</u>			10/14/S Approximate Date	of Next Inspection				

ADDITIONAL SITE INFORMATION:
-Repositioned temperature sensor closer to the outlet exhaust
- lint filter cleaned
- outlet exhoust temperature of the refrigerate condenser = 43°F
- Facility is in compliance.
·
·

# PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTION	<u> </u>	COMPLAINT/DISCOVERY	
AIRS ID#: 1030354 DEFACILITY NAME:  FACILITY LOCATION:  RESPONSIBLE OFFICIAL:  CONTACT NAME: Riche	Sacinos 3430 F St. Pet Ron Sac	s Fo airfi tersb ino	rmalwear eld Ave S. urg, FL 337 phone: 323-19	11.
PART I: NOTIFICATION				
(check appropriate box)				
New facility notified DARM 3	0 days prior to startup			
2. Facility failed to notify DARM				
PART II: CLASSIFICATION				
Facility indicated on notificatio (check appropriate box)	n form that it is:		☐ 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)	r dry trar botl	to-dry only, sfer only, x h types, x <	x < 140 gal/yr < 200 gal/yr 140 gal/yr or after 12/9/91)	
3. Existing large area source dry-to-dry only, $140 \le x \le 2,1$ transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ gas (constructed before $12/9/91$ )	00 gal/yr dry. 0 gal/yr trar al/yr botl	-to-dry only, asfer only, 2 h types, 140	rea source $140 \le x \le 2,100 \text{ gal/yr}$ $00 \le x \le 1,800 \text{ gal/yr}$ $00 \le x \le 1,800 \text{ gal/yr}$ or after $12/9/91$ )	
5. This is a correct facility cla	ssification 🖭 Y	Z ON	□Can not determine	
If no, please check the a  facility  facility	qualified for a general	permit as n	umberabove gible for a general permit	
B. The total quantity of perchlor				

DARTIII. CENERAL COMPONENTO PROGRAMMO	
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?	DY ON ON/A
2. Examining the containers for leakage?	DY ON ON/A
3. Closing and securing machine doors except during loading/unloading?	DY DN
4. Draining cartridge filters in their housing or in scaled containers for at least 24 hours prior to disposal?	DY ON ON/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	OY ON MINIA
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 refr (complete A below).	igerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber muinstalled prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refrience (complete A and B below).	igerated condenser
A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes)	
1. Equipped all machines with the appropriate vent controls?	o∕y on
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?	ey on ona
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	MY ON
<ol> <li>Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?</li> </ol>	CY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	CY ON

				<u> </u>
В.	Has the responsible official of an existing large or new large area source also:			
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	QХ	ПΝ	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	מם	□N/A
	ls the temperature differential equal to or greater than 20° F?	ΠY	$\square N$	□N/A
3.	Measured and recorded the perc concentration in the exhaust erream 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?	ОΥ	מם	□N/A
	Is the perc concentration equal to or less than 100 poin?	¿OY	ПΝ	□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?	ΟY	ПΩ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ИП	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	$\Box$ Y	ИП	□N/A
_				
70	ATTY. DECORNYEEDIG DECUMENTS			

PART V: RECORDKEEPING REQUIREMENTS						
Has the responsible official: (check appropriate boxes)						
1. Maintained receipts for perc purchased?	DY ON					
2. Maintained rolling monthly averages of perc consumption?	MY ON					
3. Maintained leak detection inspection and repair reports for the following:	/					
a. documentation of leaks repaired w/in 24 hrs? or,	MY ON ON/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?	MY ON ON/A					
4. Maintained calibration data? (for applicable direct reading instruments)	OA ON QNIV					
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON WNA					
6. Maintained startup/shutdown/malfunction plan?	MY ON					
7. Maintained deviation reports?	A/AO NO YE					
Problem corrected? (No problems)	באעם אם אים					
8. Maintained compliance plan, if applicable?	AND NO YO					

PA	PART VI: LEAK DETECTION AND REPAIRS								
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair								
	inspection?					MY	C	אב	
2.	Has the facility maintained a leak log?					ØΥ	C	אכ	
3.	Does the responsible official check the fe	ollowi	ng are	as for leaks?					
	Hose connections, fittings, couplings, and valves	<b>⊠</b> Y	ו אם	⊃N/A	Muck cookers	ďY	ПN	□N/A	
	Door gaskets and seating	DYY.	םא נ	⊃N/A	Stills	BY	ПИ	□N/A	
	Filter gaskets and seating	ŒΥ	ו אם	א/אכ	Exhaust dampers	Œ\Y.	ПИ	□N/A	
	Pumps	CD Y	ט אם	⊃N/A	Diverter valves	ďY	ΠN	□N/A	
	Solvent tanks and containers	<b>₽</b> YY	טא נ	A/AC	Cartridge filter housings	ďΥ	ΠN	□N/A	
	Water separators	ØΥ	םא נ	⊃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 instru	menta	ation,	is the equipme	ent:	□N/	A		
	a. Capable of detecting p	erc vaj	por co	ncentrations in	a range of 0-500 ppm?	ΩY	ПN		
	b. Calibrated against a standard gas priot to and after each use (PID/FID only)?						ПN		
	c. Inspected for leaks and obvious signs of wear on a weekly basis?						ΠN		
	d. Kept in a clean and see		1	1		ΟY	ПN		
	e Verified for accuracy b	y use	of dup	licate samples	(calorimetric only)?	ΠY	ΠN		
	•								

Inspector's Signature

Date of Inspection

Approximate Date of Next Inspection

#### ADDITIONAL SITE INFORMATION:

- -Armani + Georgio temperature Sensors installed Nov. 26
- -AJAX is exempt Mfg 11/83
- Temperature sensor records maintained weekly
  - Leak logs maintained on a weekly pasis:
- Did not have temperature sensor design accuracy letter. (Georgio+ Armani)

Ric

AIRS ID#: 103035\$

# DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

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

	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)									
1,968										
73	Postage	\$								
<u> </u>	Certified Fee									
050	Return Receipt Fee (Endorsement Required)		Postmark Here							
00	Restricted Delivery Fee (Endorsement Required)		·							
_	Total Postage & Fees	\$								
0520	SACINO'S FORM	AIRS ID # 1030351 ALWEAR	t by maller)							
	GREG SACINO									
2000	3430 FAIRFIELD ST PETERSBURG 33711									
	33/11		for Instructions							

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS.	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:         <ul> <li>AIRS ID # 1030351</li> <li>SACINO'S FORMALWEAR</li> <li>GREG SACINO</li> <li>3430 FAIRFIELD AVE S</li> <li>ST PETERSBURG FL</li> </ul> </li> </ul>	A. Received by (Please Print Clearly)  C. Signature  Agent Addressee  D. Is delivery address different from item 1? If YES, epter delivery address below:  No  3. Service Type Acertified 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 9373 PS Form 3811, July 1999 Domestic Ret	1968 turn Receipt 102595-99-M-1789

UNITED STATES POSTAL SERVICE



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

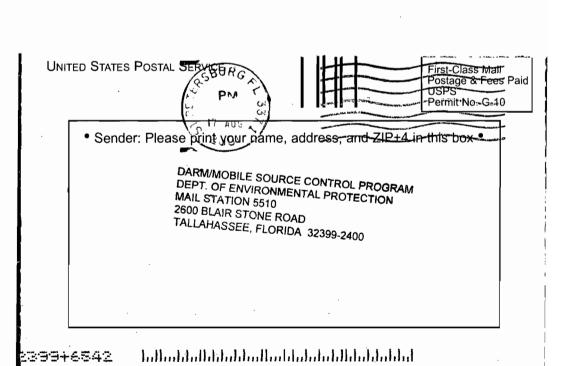
• Sender: Please print your name, address, and ZIP+4 in this box.

DARIWMOBILE SOURCE CONTROL PROBRAM
DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

TO THE BUTCH OF T

hallanklidlididanklidadkidkidkidhalladlid

		U.S. Postal Service CERTIFIED MA (Domestic Mail O	NIL RECEIPT nly; No Insurance Coverage Provided)
			The second secon
	<b>L</b> 75		9
	7000 0520 0020 9372 9	Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees	D AVE S
	7	1935	p accompany
RON SACINO SACINO'S FORMALWEA	nd 3. very dres ne ca back pern	Also complete is desired. s on the reverse and to you. of the mailpiece,	A. Received by (Please Print Clearly)  A. Received by (Please Print Clearly)  B. Date of Delivery  C. Signature  X. Marguet School States different from item 1?  Yes  If YES, enter delivery address below:
3430 FAIRFIELD AVE S ST PETERSBURG FL 337	111		3. Service Type  Certified Mail Registered Return Receipt for Merchandise C.O.D.
			4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from	servi	ice label)	0 9377 119675
PS Form 3811, July 1999		Domestic R	eturn Receipt 102595-00-M-0952



	` Z 333 £	613 245							
	US Postal Service								
	<b>Receipt for Cer</b>	tified Mail							
	No Insurance Coverage Provided.								
	SACINO'S FORMALW RON SACINO 3430 FAIRFIELD AVE ST PETERSBURG FL	AIRS ID 1030351 VEAR							
	Postage	\$							
	Certified Fee								
	Special Delivery Fee								
ın	Restricted Delivery Fee								
199	Return Receipt Showing to Whom & Date Delivered								
, April	Return Receipt Showing to Whom, Date, & Addressee's Address								
200	TOTAL Postage & Fees	\$							
PS Form 3800, April 1995	Postmark or Date								
3									

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 card to you.  Attach this form to the front of the mailpiece, or on the back if sp permit.  Write "Return Receipt Requested" on the mailpiece below the art  The Return Receipt will show to whom the article was delivered delivered.	1. Addressee's Addressee's Addressee and the date  2. Restricted Delivery Consult postmaster for fee.  4a. Article Number 4b. Service Type Registered  Consult Postmaster (and the date)  Consult Postmaster (and the date)		ee's Address
3. Article Addressed to:  AIRS ID 1030351  SACINO'S FORMALWEAR  RON SACINO 3430 FAIRFIELD AVE S  ST PETERSBURG FL 33711			
5. Received By: (Print Name)  6. Signature: (Addressee or Agent)  X	8. Addresse and fee is	e's Address (Only paid)	if requested i

.

CHECK: 044102 02/11/02 DEPARTMENT OF ENVIRONMENTAL

TOTAL

50.00



### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

414122 FEB142002

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 # 1030351 SACINO'S FORMALWEAR GREG SACINO 3430 FAIRFIELD AVE S ST PETERSBURG FL 33711

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: A1 Fund: 20-2-035001

Obj.: 002273

		INVOICE			12144
NUMBER	DATE	AMOUNT	AMOUNT PAID	DISCOUNT	1 NET ANTOUNT
012097 DESCRIPTION			50.00	0.00	50.00
				व	
					\$50.00
	YOUR INVOICE NUMBER	NUMBER DATE 012097 01/20/97	YOUR INVOICE INVOICE AMOUNT  012097 01/20/97 50.00	YOUR INVOICE NUMBER         INVOICE DATE         INVOICE AMOUNT         AMOUNT PAID           012097         01/20/97         50.00         50.00	YOUR INVOICE NUMBERINVOICE DATEINVOICE AMOUNTAMOUNT PAIDDISCOUNT012097 DESCRIPTION: AIRS ID50.0050.000.00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

259643

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

FEB -3 97 TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 1030351

SACINO'S FORMALWEAR RON SACINO 3430 FAIRFIELD AVE S ST PETERSBURG FL 33711 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

SACINO &	SONS, INC.				36803
DATE	INVOICE NO.	COMMENT	AMOUNT	DISCOUNT	NET AMOUNT
12/26/00	122600	COMMENT 1030351	50.00	.00	50.00

CHECK: 036803 12/25/00 DEPT. OF ENVIRONMENTAL PROTEC

TOTAL

50.00



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

101450

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** 

j . . . . .

Do NOT Remove Label

AIRS ID # 1030351

SACINO'S FORMALWEAR RON SACINO 3430 FAIRFIELD AVE S ST PETERSBURG FL 33711 MAIL ROO

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1

Fund: 20-2-035001

Obj.: 002273

SACINO & SONS, INC. 30191 COMMENT AMOUNT DISCOUNT **NET AMOUNT** INVOICE NO. 50.00 50.00 0.00 12/06/1999 120699 AIRS ID# 1030351

CHECK: 030191 12/06/1999

DEPARTMENT OF ENVIRONMENTAL

TOTAL

50.00

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

389551

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 # 1030351

SACINO'S FORMALWEAR RON SACINO 3430 FAIRFIELD AVE S ST PETERSBURG FL 33711

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1



DEC 13 '99 B

\* ≈ 0.33 \* POSTALIA 7/23544

P.O. BOX 15107 ST. PETERSBURG, FL 33733

32315X3070

OUF REFERENCE	SACINO & S	SONS, INC.	INVOICE			24610
NUMBER .	NUMBER	DATE	AMOUNT	AMOUNT PAID	DISCOUNT	NET AMOUNT
	020899	02/08/1999	50.00		0.00	50.00
CHECK: (	024610 02/08/	/1999 DEP	Γ. OF ENVIRONMEN	TAL PROTEC.	CHECK TOTAL:	50.00

Q

#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0360622

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 # 1030351

SACINO'S FORMALWEAR

RON SACINO
3430 FAIRFIELD AVE S
ST PETERSBURG FL 33711

KEGEIVED 99

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1

OUR REFERENCE NUMBER	SACINO & S YOUR INVOICE NUMBER	SONS, INC. INVOICE DATE	INVOICE AMOUNT	AMOUNT PAID	DISCOUNT	18604
348717	022398 DESCRIPTION	02/23/98 N: AIRS ID		50.00	0.00	50.00
						\$50.00



#### THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

303828

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

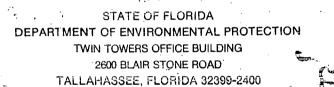
#### **TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

AIRS ID#1030351

SACINO'S FORMALWEAR RON SACINO 3430 FAIRFIELD AVE S ST PETERSBURG FL 33711 RECEIVED MAIL ROOM FEB 26 98

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1



MS# 5510 37550301000 - GERTIFIED

Z 333 660 694



AIRS ID # 1030351

SACINO'S FORMALWEAR RON SACINO 3430 FAIRFIELD AVE S. ST PETERSBURG FL 33711