

Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary-Designee

April 5, 2007

Mr. Sheldon Larson Hanson Cleaners 12963 Walsingham Road Largo Florida 33774

Re: Facility No.: 1030359-004

Dear Mr. Larson:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on March 5, 2007.

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

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

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

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

Sincerely,

Sandra Veazey, Chief
Bureau of Air Monitoring

and Mobile Sources

SV/pg

cc: Mr. Gary Robbins, Pinellas County

MAR 05 2007

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

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

Facility Name and Location		
1. Facility Owner/Company Name (Name of corporation	n, agency, or indivi	dual owner):
$\leq c \cdot c \cdot c \cdot c$		
2. Site Name (For example, plant name or number):		
2. Site (value (1 of example, plant hame of number).		
#81 Van		
3. Hazardous Waste Generator Identification Number:	-	
FLO 9+2/6953	4	
4. Facility Location: 13065 PARK B	rus	100
City Sen note I/ County: 1/1	ve/165	Zip Code: 33776
5. Facility Identification Number (DEP Use ONLY - do	not fill in):	
5 Facility Identification Number (DEP Use ONLY - do	//	3/359-11
Responsible Official		
6. Name and Title of Responsible Official:	- "	
Name: Sheldon (arson)	Title: MA	NAGING Nember
1 7. Responsible Official Mailing Address:		
Organization/Firm: SAC 166 C DRA	L HARLSON	Clauses
Street Address: 12913 Waksingtonia	RO	
City:	21/20	Zip Code: \$3714
Organization/Firm: Salar Street Address: 12963 Warsounts City: 200 7/. 8. Responsible Official Telephone Number:	11/GS	/
Telephone: (727) 573-1944	Fax: () -
1 27 343 / 997		, , , , , , , , , , , , , , , , , , ,
E 114 Control (16.196	1	
9. Name and Title of Facility Contact (For example, pla		
7. Ivanie and Thie of Facility Contact (For example, pla	in manager):	·
	:	
10. Facility Contact Address:		
Storet Address.		
Street Address: City: County:		Zip Code:
County.		Zip Code.
11. Facility Contact Telephone Number:		
Telephone: () -	Fax: () -
1		

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Dibble, Dickson

From: Robbins, Gary W [grobbins@co.pinellas.fl.us]

Sent: Monday, March 26, 2007 1:17 PM

To: Dibble, Dickson

Subject: S&L LCC, 1030359-004-AG

In the new notification form, the form shows instead of 2 dry-to-dry machines purchased in 1987, one of the machines is listed as 2002. This would make this a new facility.

Gary Robbins
Environmental Program Coordinator
Environmental Management
Air Quality Division

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY 2 1 How many dry-to-dry machines do you have on-site? For each dry-to-dry machine on-site, please provide the following information: Control Device Required* Date Initially Purchased Status Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Existing/New RC/CA/None required RC/CA/None required xisting/New Existing/New RC/CA/None required *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber 1.(b) TRANSFER MACHINES ONLY How many washers do you have on-site? How many dryers/reclaimers do you have on-site? If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an EXISTING unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a NEW unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information: Control Device Required* Date Initially Purchased Status Date Control Device Installed From Manufacturer (circle one) (circle one) (if already included at time of purchase, write "SAME") Existing/New RC/CA/None required Existing/New RC/CA/None required RC/CA/None required Existing/New *CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber2.(a) How much perchloroethylene (perc) have you used within the last 12 months? gallons (You must fill this in) (b) If less than 12 months, how many? [] months Check why it is less than 12 months: New owner: [] Did not keep records: [New store: New machine

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Unopened store [] (date of expected opening

3. What is the facility's source classification based on the definitions found in section (3) of Part II? Indicate with an "X". Select one classification only.)
Small Area Source []
Dry-to-dry machines only on-site (used less than 140 gallons of perc per year) Transfer only on-site (used less than 200 gallons of perc per year) Both machine types on-site (used less than 140 gallons of perc per year)
Large Area Source
Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year) Transfer only on-site (used 200 - 1,800 gallons of perc per year) Both machine types on-site (used 140 - 1,800 gallons of perc per year)
4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)
Existing machines at small area source (NONE REQUIRED) Mew machines at small area source Refrigerated condenser []
Existing machines at large area source Carbon adsorber Refrigerated condenser Refrigerated condenser New machines at 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 (see attached memo for the criteria).
All steam and hot water generating units exempt No such units on-site OR
How many boilers do you have on-site?
For each boiler, indicate its horsepower (HP) rating: [U]
What type of fuel do you use? [] propane [] natural gas [] No. 2 fuel oil [] No. 6 fuel oil [] Other (please list)
6. Equipment Monitoring and Recordkeeping Information
Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases/solvent addition log
(b) Leak detection inspection and repair
(c) Refrigerated condenser temperature monitoring
(d) Carbon adsorber exhaust perc concentration monitoring
(e) Startup, shutdown, malfunction plan

DEP Form No. 62-213.900(2) Effective: 2/24/99

7. Surrender o	of Existing DEP Air Permit(s)
Please indicat	e with an "X" the appropriate selection:
	I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are
4	No DEP air permits currently exist for the operation of the facility indicated in this notification form.
Responsible (Official Certification
this notifi statement maintain comply w I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the is 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form. I have a for the Department of any changes to the information contained in this notification. Description of the Department of any changes to the information contained in this notification. Description of the Department of any changes to the information contained in this notification.

Post-it® Fax Note 7671	Date 3/20/07 pages > 4
TO JEFF MORRIS	From DICK DIBBLE
Co./Dept PINELLAS CO.	CODEP-DARM -BAMMS
Phone # 570-4422	Phone #850-921-9586
Fax # 570 - 4420	Fax # 850-922-6979

DEP Form No. 62-213.900(2) Effective: 2/24/99

Dibble, Dickson

From:

Dibble, Dickson

Sent:

Wednesday, February 28, 2007 10:25 AM

To:

'shelllarson@hotmail.com'

Cc:

Bowman, Sandy

Subject: AIRS ID# 1030359, f.k.a. HANSON CLEANERS INC d.b.a. HANSON CLEANERS, to be owned by

S & L LLC d.b.a. HANSON CLEANERS on March 2, 2007

Tracking: Recipient

Delivery

Read

'shelllarson@hotmail.com'

Bowman, Sandy

Delivered: 2/28/2007 10:25 AM Read: 2/28/2007 11:00 AM

Dear Mr. Shell Larson.

It was a pleasure to speak with you today regarding the Air General permit for Perchloroethylene dry cleaners and the renewal process upon change of ownership.

As we have discussed, the Air General permit is **not** transferable upon a change of ownership. It is customary that the previous owner notify us when a change of ownership is imminent. At the same time it is his/her responsibility to inform the new owner of his/her responsibility to submit a new registration form at least thirty (30) days prior to the sale.

Below you will find the link to the subject item registration form. You may download and print the form from there. If you are the Responsible Official, please complete the form, print your name, sign your name and date the last page of the form. The form itself begins on page 14 and ends on page 17. Pages 1-13 provide an overview of the rule, and pages 18 thru 19 provide directions for completing the form.

http://www.floridadep.org/Air/forms/titlevgp/dep62 213 900(2).pdf

Please mail the signed and completed Part III of this form as soon as possible to:

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

Please keep a copy of the form for your records in the event your facility is visited by an inspector. From the date your form is received, your application will proceed thru a 30 day review period. Please fill out the form completely and according to the characteristics of your facility. Please don't forget to sign and date the form.

DO NOT SEND MONEY! We have already received the annual fee for your facility for the Year 2006, and it has been credited to your account.

Thank you for your prompt attention in this matter.

Sincerely,

Dickson E. Dibble

Dickson E. Dibble

FL Dept of Environmental Protection Div. of Air Resource Management

Bureau of Air Monitoring & Mobile Sources Air General Permit Program (850) 921-9586 SunCom 291-9586 ICG-#345 Dickson.Dibble@dep.state.fl.us



Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kotthamp Lt. Governor

Michael W. Sole Secretary

FAX TRANSMITTAL SHEET

DATE:	MARCH 20, 2007	
TO:	JEFF MORRIS	
PHONE:	6-540-4422	FAX: 6-570-4420
FROM:	DICK DIBBLE	PHONE: (850) 921-9586
	Division of Air Resources Management	FAX: 850.922.6979
RE:	LARSON CLEANERS, ATRS	IO #1030359-004
CC:		
Total n	umber of pages including cover sheet:	<u>, </u>
	VEF.	
		OWNERSHIP TAKES PLACE,
THE	FACILITY IS PLACED IN	are ·
Du	FING THE THIRTY (30)	DAY REVIEW CYCLE, THIS
FAC	CILITY BEGAN THE THIRT	DAY REVIEW CYCLE. THIS 4 (30) DAY REVIEW CYCLE ON
N	ARCH 5, 2007. HOPE T	THIS HELDS
	. , , , , , , , , , , , , , , , , , , ,	

If there are any problems with this fax transmittal, please call the above phone number.

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

Printed on recycled paper

BEST AVAILABLE COPY

TRANSMISSION VERIFICATION REPORT

TIME : 03/20/2007 04:56 NAME : FDEP DIVISION OF AIR FAX : 8509226979

FAX : 8509226979 TEL : 8504880114 SER.# : BROG2J568046

DATE, TIME FAX NO./NAME DURATION PAGE(S) RESULT MODE

03/20 04:46 65704420 00:09:42 07 NG STANDARD ECM

NG: POOR LINE CONDITION



Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kotthamp Lt. Governor

Michael W. Sole Secretary

FAX TRANSMITTAL SHEET

IAA IRANSWIIIAL SHEET
DATE: MARCH 20, 2007
TO: TEFF MORRIS
PHONE: 6-570-4422 FAX: 6-570-4420
FROM: DICK DIBBLE PHONE: (850) 921-9586
Division of Air Resources Management FAX: 850.922.6979
RE: LARSON CLEANERS, ATRS ID # 1030359-004
CC:
Total number of pages including cover sheet:
Message VEF,
WHEN A CHANGE OF OWNERSHIP TAKES PLACE,
THE FACILITY IS PIACED IN MAS TNACTIVE"

BEST AVAILABLE COPY

TRANSMISSION VERIFICATION REPORT

TIME

03/20/2007 06:11 FDEP DIVISION OF AIR NAME

8509226979 8504880114

DATE, TIME FAX NO./NAME DURATION

03/20 06:10 65704420 00:01:11

STANDARD **ECM**

Surrender of Existing DEP Air Permi	it(t	ľ	(ĺ						i			i	i	i	i	i			i		i										i								i			ĺ		ĺ	ĺ	((((((ĺ	(ĺ	ĺ	į	į	ί	Ċ	ľ	١	١	١	١	i	i	i	i	į	Ĺ	١	ľ	١	ľ	١		i	1	:	Ć	ì)	7	J			ľ	ĺ	i	i	j	L	١	١	ľ	4		P	Ì	ì		Ī))	I		Z	F	ľ	T	i	t	i	Ş	i	i	ζ	N	7		•	-	Ě	ĺ	١	?	f	Í		ı))	,	Ç	Ç	(((1	1	,			
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Please indicate with an "X" the appropriate selection:

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

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

Responsible Official Certification

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

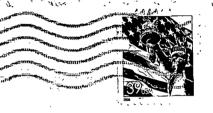
I will promptly notify the Department of any changes to the information contained in this notification.

Post-it® Fax Note

Sal-LEC 12963 Waldmarken Pd-Large Hr 53774

ST PETERSBURG FL 337

02-MAR 2007 PM 3 T



Att Dick Dibble
Coeneral Permits Section
Bureau of Air Monitoring + Monitor Sourceo MS 5510
Dept of Environmental trotection
2600 Blair Stone Rd
Talla nassee of 32399 241100

HANSON CLEANERS INC. 12963 WALSINGHAM RD **LARGO, FL 33774**

FEBRUARY 21,2007

GENERAL PERMITS SECTION BUREAU OF AIR MONITORING AND MOBILE SOURCES, MS 5510 DEPARTMENT OF ENVIRONMENTAL PROTECTION TWIN TOWERS OFFICE BUILDING 2600 BLAIR STONE RD TALLAHASSEE, FL 32399-2400

ATTN: DICKSON DIBBLE

RE: SURRENDER OF EXISTING DEP AIR PERMIT DEP FACILITY ID# 1030359-003

DEAR MR. DIBBLE;

HANSON CLEANERS INC. WILL BE SELLING THE ASSETS OF HANSON CLEANERS INC, TO S&L, LLC dba HANSON CLEANERS ON MARCH 2, 2007.

HANSON CLEANERS INC. WILL DISCONTINUE OPERATING ITS DRY CLEANING MACHINES AT 13065 PARK BLVD, SEMINOLE, FL 33776.

S&L, LLC. HAS FILED A NEW "REGISTRATION FORM", SO AS TO CONTINUE OPERATIONS AT 13065 PARK BLVD. SEMINOLE, FL 33776'

SINCERLY,

THOMAS HANSON

Tusu Han

Z/27/07 - 9:40 AM CALLED - RE: PROPER PERMIT FILING FOR AIR



Florida Department of Environmental Protection

Registration Form

Drycleaning Facilities and Wholesale Supply Facilities Please Print or Type (Instructions on reverse side) COMPLETE ENTIRE FORM

DEP Form: DC 1
Form Title: <u>Drveleaning</u> Facility: Wholesale Supply Facility Registration Form
Effective Date: May 1, 1996
DEP Registration No.:
(FDEP Use Only)

1.	Registration Type: New Registration ☐ Revision ☐
2.	Facility Type: Drycleaning Facility 🛱 Wholesale Supply Facility 🗆
3.	FACILITY Information: (fill in all lines) Name: SELUC, db. HANSON CLEANARS Address: [3065 PARK BLUD] City, Zip: Seminole, R. 33776 County: PINEUAS Contact Person: SHEL LARSON Telephone: (27) 593-1944
4.	OPERATOR Information: (filt in all lines) Name: S&L UC Upa HANSON (LETURERS Address: 12963 WAIS ING HAM RO City, State, Zip: LARGO FL 33774 Contact Person: SHU DALSON Telephone: 77) 58-1944 Operator Signature: Date: 21 211 67
5.	OWNER Information: (fill in all lines) Name: Selled by Hauson (leaners) Address: 12963 WALSING HAM RO City, State, Zip: Largo, FL 35774 Contact Person: Shelp Larson, Telephone: (727) 593-1944 Owner Signature: Date: 21 21 1 07
6.	REAL PROPERTY OWNER Information: (fill in all lines) Name: Partobecco Square Shorewo Center LTD LCP Address: 13055 PARK BLUB City, State, Zip: Seminole, FL 33776 Contact Person: ED LURIE Felephone: (727)393-2941 Real Property Owner Signature: Date: 216107
7.	Solvents Currently Used or Sold: (check all appropriate)
and B	oroethylene
8.	OWNER Florida Taxpayer ID Number (from the Florida Department of Revenue)
9.	Date FACILITY began operation: 1114 11987
10.	Attach a copy of any Notice Letter(s) for Joint Registration (Form DC2).

Hanson Cleaners

12963 Walsingham Road, #206 Largo, Florida 33774

FLORIDA DEPT ENVIRON MENTAL PROTECTE TWINTOWERS OFFICE BLOG 2600 BLAIR STONE PO TAUAHASSEE PL 32399- 2400

ATTN'. D. DIBBLE

հոհուհեռևենակիու<u>հեռելու</u>միհակինել

HANSON CLEANERS INC. 12963 WALSINGHAM RD LARGO, FL 33774

FEBRUARY 21,2007

GENERAL PERMITS SECTION
BUREAU OF AIR MONITORING AND MOBILE SOURCES, MS 5510
DEPARTMENT OF ENVIRONMENTAL PROTECTION
TWIN TOWERS OFFICE BUILDING
2600 BLAIR STONE RD
TALLAHASSEE, FL 32399-2400

ATTN: DICKSON DIBBLE

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SINCERLY,

THOMAS HANSON

Hanson Cleaners 12963 Walsingham Road, #206 Largo, Florida 33774

BUREAU OF AIR MONITORING & MOBILE SOURCES MIST DOOT. OF ENURONEWTA PROTECTION TWIN TOWERS OFFICE BLDG. 2600 BLAIR STONE RO TALLAHASSER, FL 32399 -2400