



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

February 7, 2007

Mr. Robert R. Yates
Yates Cleaners, Incorporated
710 South Missouri Avenue
Clearwater, Florida 33756

Re: Facility No.: 1030376-003

Dear Mr. Yates:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on January 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

EMISSION FEE DATES 97-2006
NO ACTIVITY FOR FACILITY.....
SOC REPORTS
COMP. STATUS - SNC MNC (IN) 7/16/2006

TRPT - socR statement of Compliance
Report.

Tasp - Pinellas Co - Gary Robbins

RECEIVED

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

JAN 05 2007

Part III. Notification of Intent to Use General Permit Bureau of Air Monitoring
& Mobile Sources

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, agency, or individual owner): YATES CLEANERS, INC
2. Site Name (For example, plant name or number): Plant
3. Hazardous Waste Generator Identification Number: FLD982130866
4. Facility Location: YATES CLEANERS, INC Street Address: 710 SO. MISSOURI AVE. City: CLEARWATER, FL. County: PINELLAS Zip Code: 33756
5. Facility Identification Number (DEP Use ONLY - do not fill in): 1030376-003

Responsible Official

6. Name and Title of Responsible Official: Name: ROBERT R. YATES Title: MGR.
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 710 So. Missouri Ave City: CLEARWATER, FL County: PINELLAS Zip Code: 33756
8. Responsible Official Telephone Number: Telephone: (727) 446-1963 Fax: () -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager): ROBERT R. YATES, MANAGER
10. Facility Contact Address: Street Address: 710 So. Missouri Ave City: CLEARWATER, FL County: PINELLAS Zip Code: 33756
11. Facility Contact Telephone Number: Telephone: (727) 446-1963 Fax: () -

Facility Information

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

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

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

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1988	<input checked="" type="radio"/> Existing <input type="radio"/> New	RC/CA/None required	Same
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

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

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

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

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

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

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

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

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

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)

New machines at small area source
Refrigerated condenser

Existing machines at large area source
Carbon adsorber
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 OR
No such units on-site

How many boilers do you have on-site? /

For each boiler, indicate its horsepower (HP) rating: ³⁰~~45~~

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

6. Equipment Monitoring and Recordkeeping Information

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

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

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

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

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

Robert R. Yates
Print name of responsible official

Robert R. Yates
Signature

12-29-06
Date

Instructions for Completing Part III of Notification Form

The Perchloroethylene Dry Cleaning Facility Notification of Intent to Use General Permit, Part III of this form, shall be completed and submitted to the Division of Air Resources Management **at least 30 days prior to beginning operations under the general permit.** Please type or print clearly all information. A copy of this notification form shall be kept on-site and made available for review by Department personnel.

The responsible official of the facility, as defined in Part II of this notification form, is responsible for ensuring that the facility complies with all applicable terms and conditions of this general permit, as set forth in Part II of this form.

Mail the signed and completed Part III of this form to:

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

Facility Name and Location

1. **Facility Owner/Company Name** - Enter the name of the corporation, agency, or individual that has ownership or control of the dry cleaning facility for which this notification is submitted.
2. **Site Name** - Enter the common name, if any, of the facility site; for example, Plant A, Metropolis plant, etc. If more than one facility is owned, a notification form must be completed for each.
3. **Hazardous Waste Generator Identification Number** - Enter the hazardous waste generator identification number, if known, assigned by the Department to the facility.
4. **Facility Location** - Enter the street address and zip code of the facility and the city and county in which it is located.
5. **Facility Identification Number (DEP Use ONLY)** - Please leave this space blank. DEP will enter the facility identification number assigned to you by ARMS.

Responsible Official

6. **Name and Title of Responsible Official** - Enter the name and title of the designated responsible official for the facility who, by signing this form, is certifying that the facility is eligible for a general permit pursuant to the requirements of Part II of this notification form and Rule 62-213.300, F.A.C.
7. **Responsible Official Mailing Address** - Enter the mailing address for the responsible official if different than the address entered in No. 4 above.
8. **Responsible Official Telephone Number** - Enter the telephone number and facsimile number, if available, at which the responsible official can be contacted.

Facility Contact

9. **Name and Title of Facility Contact** - Enter the name of the facility contact, if other than the responsible official. For example, a plant manager could be designated as the facility contact for Department inspections.

Dibble, Dickson

From: Robbins, Gary W [grobbins@co.pinellas.fl.us]
Sent: Thursday, February 15, 2007 7:38 AM
To: Dibble, Dickson
Subject: Yates Cleaners, Inc., 1030376-003-AG

Just an update to the notification form sent in by Yates. They indicated the dry-to-dry machine was purchased in 1988. We confirmed that the information we have on hand is correct. They have a 473 Real Star which was purchased in 1995 and has a refrigerated condenser. The facility is considered a small, new dry cleaner.

*Gary Robbins
Environmental Program Coordinator
Environmental Management
Air Quality Division*

From: Jackson, Shea L
Sent: Wednesday, February 14, 2007 3:42 PM
To: Robbins, Gary W
Subject: RE: Yates

I spoke to Mr. Yates, and he stated the machine was 1995. He does not know why he indicated 1988. He stated he has so many forms to process to different agencies he may have been confused. He should come work here, if he thinks he has a lot of forms to fill out. Ha

Environmental Specialist II
Pinellas County Air Quality
Phone 464-4422
sjackson@pinellascounty.org

From: Robbins, Gary W
Sent: Wednesday, February 14, 2007 7:36 AM
To: Jackson, Shea L
Subject: RE: Yates

Please verify the proper date on the machine in use and get back with me.

*Gary Robbins
Environmental Program Coordinator
Environmental Management
Air Quality Division*

From: Jackson, Shea L
Sent: Tuesday, February 13, 2007 2:22 PM
To: Robbins, Gary W
Subject: RE:

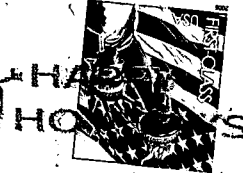
No, sorry for the confusion, they operate a 473 Real Star which according to previous notifications in file is listed as a 1995. (new small) I do not know why he put 1988? I had my numbers switched on the inspection history notes I changed, as should read 373 Realstar not in operation, this machine he has on site is being used to replace parts on 473 Realstar.

2/15/2007

YATES CLEANERS
710 S MISSOURI AVE
CLEARWATER FL 33758

ST PETERSBURG FL 337

03 JAN 2007 PM 2 T



GENERAL Permits Section
BUREAU OF AIR Monitoring & Mobile Sources
MS 5510
Dept. of ENVIRON. Protection
2600 BLAIR STONE ROAD.
TALLAHASSEE, FL. 32399-2400

32399+6542



Environmental Specialist II
Pinellas County Air Quality
Phone 464-4422
sjackson@pinellascounty.org

From: Robbins, Gary W
Sent: Tuesday, February 13, 2007 7:39 AM
To: Jackson, Shea L
Cc: McCann, Matthew G
Subject:

Shea, we finally received a copy of the notification form for Yates. One problem, we have them listed as a new Dry Cleaner with a purchase date in 1995. The new notification form says the machine was purchased in 1988 which would make it existing. Your last inspection notes they operate a Realstar Model 373, but the "Mfg yr" field was left blank. Do you have any information on this?

*Gary Robbins
Environmental Program Coordinator
Environmental Management
Air Quality Division*

2/15/2007