

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

November 14, 2003

Ms. Mary E. Jones
The Village Coin Laundry & Dry Cleaners
Post Office Box 1363
Oldsmar, Florida 34677

Re: Facility No.: 1030439-002

Dear Ms. Jones:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on October 13, 2003.

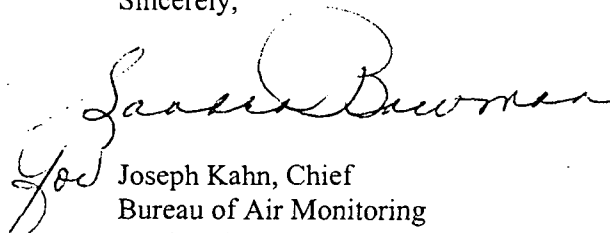
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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


Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

JK/jw

cc: Mr. Gary Robbins, Pinellas County

"More Protection, Less Process"

Printed on recycled paper.

Emission Fee - '99-2002
SOC REPORT - 3
Compliance status - IN (1/10/2003)

**BOARD OF COUNTY
COMMISSIONERS**

Kenneth T. Welch - Chairman
Ronnie E. Duncan - Vice Chairman
Calvin D. Harris
Susan Latvala
John Morroni
Karen Williams Seel
Robert B. Stewart

RECEIVED
JUL 03 2006
Bureau of Air Monitoring
& Mobile Sources



June 30, 2006

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

Re: The Village Coin Laundry and Dry Cleaners, dba - 1030439-002-AG

Mr. Thomas:

Based on a May 23, 2006 inspection at The Village Coin Laundry and Dry Cleaners, dba , located at 3780 Tampa Road, Oldsmar, FL this facility is shutdown for Perchloroethylene dry-to-dry operations. The inspection findings indicate that:

- 1) The general permit responsible official Mary E. Jones was no longer operating this facility.
- 2) A different owner is currently in possession of the building space.
- 3) Air Quality is unaware of any correspondence requesting the permit be rescinded.
- 4) Perchloroethylene equipment is no longer on the premises.
- 5) The new operation is considered exempt from air permits.
- 6) Air Quality intends to deactivate this facility from its tracking files and awaits confirmation from your office that it has been deactivated in the ARMS system.

Should you have any questions relative to this facility's operations please contact the assigned inspector Shea Jackson. If you wish to contact me directly, please call suncom 570-4422, or by email at sjackson@pinellascounty.org

Sincerely,

A handwritten signature in black ink that reads "Matt McCann".

Matt McCann, Environmental Program Manager
Air Quality Division

cc: RF, PF (103 0439)

PLEASE ADDRESS REPLY TO:
300 S. Garden Avenue
Clearwater, Florida 33756
Phone: (727) 464-4422
FAX: (727) 464-4420
TDD: (727) 464-4106
Website: www.pinellascounty.org



Laundro Depot V, Inc.
10537 Greencrest Drive
Tampa, FL 33626
813-926-7773 phone
813-926-7626 fax

RECEIVED
FEB 03 2006
Bureau of Air Monitoring
& Mobile Sources

Mr. Dick Dibble
Division of Air Resource Management
2600 Blair Stone Road, MS 5510
Tallahassee, FL 32399-2400

Dear Mr. Dibble:

I am sending you this letter in regard to an invoice I received for The Village Coin Laundry & Dry Cleaning, previously located at 3780 Tampa Road, Oldsmar, FL 34677. We signed a lease and took over the space where the aforementioned business was located in September. At the time, the space was empty with the exception of an old machine which to our knowledge was left behind by the previous owner.

We neither purchased the business from the prior owner nor did we purchase his equipment. There were no chemicals left behind by the prior owner and we believe the machine is empty of all hazardous chemicals. As a precaution we have contacted Safety Clean at 813-626-1203 who has dropped off a container, but as of yet no one can figure out how to open the machine.

We are in the process of attempting to find someone to remove the machine from our premises. I would like to reiterate the machine **has not been used and will not be used** by us. We are merely a drop-off dry cleaning facility. All of our Dry Cleaning is done by Alberto's Dry Cleaning 813-891-6668. If you need any further information please feel free to contact me at 813-926-7773 or 813-786-9296 (cell).

Sincerely,



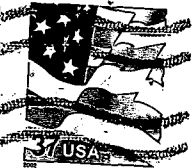
Marcie Reale
Owner

Cc: Mr. Gary Robbins, Pinellas County Department of Environmental Management

Laundro Depot V, Inc.
10537 Greencrest Drive
Tampa, FL 33626

TAMPA FL 336

31 JAN 2006 PM 3:11



Mr. Dick Dibble
Division of Air Resource Management
2600 Blair Stone Road, MS 5510
Tallahassee, FL 32399-2400

32399+2400



PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
OCT 13 2003
Bureau of Air Management
& Mobile Source

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, agency, or individual owner):	THE VILLAGE COIN LAUNDRY & DRY CLEANERS MARY E. JONES
2. Site Name (For example, plant name or number):	THE VILLAGE COIN LAUNDRY & DRY CLEANERS
3. Hazardous Waste Generator Identification Number:	62-09-165362-49-3
4. Facility Location: Street Address: 3780 TAMPA ROAD City: OLDSMAR FL County: PINELLAS Zip Code: 34677	
5. Facility Identification Number (DEP Use ONLY, do not fill in):	030489-002

Responsible Official

6. Name and Title of Responsible Official: Name: MARY E. JONES Title: OWNER	
7. Responsible Official Mailing Address: Organization/Firm: THE VILLAGE COIN LAUNDRY AND DRY CLEANERS Street Address: P.O. BOX 1363 - 3780 TAMPA RD City: OLDSMAR FL County: PINELLAS Zip Code: 34677	
8. Responsible Official Telephone Number: Telephone: (813) 891-1741 Fax: () -	

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	
10. Facility Contact Address: Street Address: City: County: Zip Code:	
11. Facility Contact Telephone Number: Telephone: () - 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")
1990	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

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? 1

For each boiler, indicate its horsepower (HP) rating: 5

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) ELECTRIC

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 # 1030439.
- 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.

MARY E. JONES
Print name of responsible official

Mary E. Jones
Signature

10/2/03
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.

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Restricted Delivery Fee (Endorsement Required)		

Postmark
Here

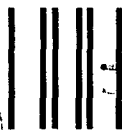
Total Postage ID# 1030439
 MARY JONES
 Sent To THE VILLAGE COIN LAUNDRY &
 DRY CLEANING
 Street, Apt. No., or PO Box No. PO BOX 1363
 City, State, ZIP+4 OLDSMAR, FL 34677

PS Form 3800, June 2002 See Reverse for Instructions

9868 5650 0003 2260 7003

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. <p>1 Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> ID# 1030439 MARY JONES THE VILLAGE COIN LAUNDRY & DRY CLEANING PO BOX 1363 OLDSMAR, FL 34677 </div>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Mary Jones</i></p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>2/12/09</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
2 Article Number (Transfer from service label)	7003 2260 0003 5650 9868

UNITED STATES POSTAL SERVICE



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

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

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

Bureau of Air Monitoring
& Mobile Sources

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7004 2510 0002 3939 0799

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Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage	AIRS ID# 1030439 1stC	
Sent To	THE VILLAGE COIN LAUNDRY & DRY CLEANING	
Street, Apt. No. or PO Box No.	3780 Tampa Road	
City, State, Zip	OLDSMAR, FL 34677	

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse, so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

 AIRS ID# 1030439 1stC
 THE VILLAGE COIN LAUNDRY &
 DRY CLEANING
 3780 Tampa Road
 OLDSMAR, FL 34677

2. Article Number
(Transfer from service label)

7004 2510 0002 3939 0799

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 May Egan Addressee

B. Received by (Printed Name) C. Date of Delivery
 2/7/05

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

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

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE



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

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

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

Bureau of
& Mobile Sources

FEB 9 2005

RECEIVED

0001



7004 2510 0002 3939 4957

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Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage	AIRS ID#1.03044e+006.....2 nd Cert 05	
Sent To	THE VILLAGE COIN LAUNDRY & DRY CLEANING	
Street, Apt. No. or PO Box No.	3780 Tampa Road	
City, State, Zip	OLDSMAR, FL 34677	
PS Form 3800, June 2002 See Reverse for Instructions		

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AIRS ID#1.03044e+006.....2nd Cert 05
 THE VILLAGE COIN LAUNDRY & DRY
 CLEANING
 3780 Tampa Road
 OLDSMAR, FL 34677

1030439-002

2. Article Number
 (Transfer from service label)

7004 2510 0002 3939 4957

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 May e p Addressee

B. Received by (Printed Name) C. Date of Delivery

3/4/05

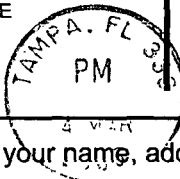
D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE



STRAWBERRY FESTIVAL
PLANTATION

First-Class Mail
Postage & Fees Paid
USPS PERMIT NO. G-10

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

DARM/MOBILE SOURCE CONTROL PROGRAM
DEPT. OF ENVIRONMENTAL PROTECTION
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

Mobile
UOI Air Mail
Postage

MAR 3 - MAR 13, 2005
MAR 7 2005
REIVER

0301





THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label. 436437 FEB17 2004

TOTAL AMOUNT DUE: \$50.00

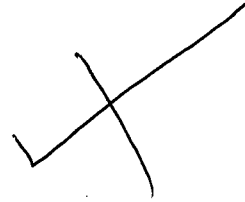
Do NOT Remove Label

ID# 1030439
MARY JONES
THE VILLAGE COIN LAUNDRY &
DRY CLEANING
PO BOX 1363
OLDSMAR, FL 34677

Bureau of Air Monitoring
& Mobile Sources

FEB 20 2004

RECEIVED



FOR GOVERNMENT USE ONLY
Org.: 37550101000 EO: A1
Fund: 20-2-035001
Obj.: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number is located on the mailing label. 447762 FEB28 2005

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 1030439 1stC
THE VILLAGE COIN LAUNDRY &
DRY CLEANING
3780 Tampa Road
OLDSMAR, FL 34677

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273