

# 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

April 1, 2008

Mr. Divyang Shah  
Diamond Cleaners  
926 Cleveland Street  
Clearwater, Florida 33755

Re: Facility No.: 1030462-004

Dear Mr. Shah:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on February 28, 2008.

Pursuant to Florida Statutes section 403.814, the authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

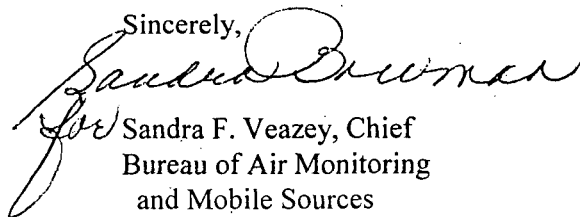
For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

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 F. Veazey, Chief  
Bureau of Air Monitoring  
and Mobile Sources

SFV/pg

cc: Mr. Gary Robbins, Pinellas County

NO ACTIVITY FOR FACILITY.....  
EMISSION FEE DATES *199-2006*.....  
SOC REPORTS *5*.....  
COMP. STATUS-SNC MNC **IN**

*TRPT-SOCR-statement of Compliance  
Report-10/18/2007-IN  
Insp-Pinellas Co - G Robbins*

**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, agency, or individual owner):	DIVYANG SHAH / GOVINDAM INC.
2. Site Name (For example, plant name or number):	DIAMOND CLEANERS
3. Hazardous Waste Generator Identification Number:	
4. Facility Location: Street Address: City:                      County:                      Zip Code:	926 CLEVELAND STREET CLEARWATER                      PINELLAS                      33755
5. Facility Identification Number (DEP Use ONLY - do not fill in):	1030462-004

**Responsible Official**

6. Name and Title of Responsible Official: Name:                      Title:	DIVYANG SHAH                      MANAGER
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City:                      County:                      Zip Code:	926 CLEVELAND STREET CLEARWATER                      PINELLAS                      33755
8. Responsible Official Telephone Number: Telephone:                      Fax:	(727) 446 8465                      (727) 446 - 5605

**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? 1

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")
<u>5/22/96</u>	Existing <input checked="" type="radio"/> New <input type="radio"/>	RC <input checked="" type="radio"/> CA <input type="radio"/> None required <input type="radio"/>	_____
_____	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? 0

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     )

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.

Divyang Shah

Print name of responsible official



Signature

2/29/08

Date

RECEIVED  
MAR 10 2008  
Bureau of Air Monitoring  
& Mobile Sources

Divyang Shah  
Diamond Cleaners  
926 Cleveland St  
Clearwater, FL 33755

February, 29th 2008

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

Dear Mr Dibble,

I have enclosed a filled out 'Perchloroethylene Dry Cleaner Air General Permit Notification Form' and wish to inform you the Pinellas County EPA Department is assisting me in completing the form required for the necessary permit. Contact has been made with the EPA department prior to my purchase and they have been informed ahead of time of the change in ownership.

If you have any questions Shea Jackson from the Pinellas County Environment Management team is working with me to make sure all requirements are met.

I thank you for your time.

Yours sincerely,

  
Divyang Shah

TRANSMISSION VERIFICATION REPORT

TIME : 03/14/2008 09:31  
NAME : FDEP DIVISION OF AIR  
FAX : 8509226979  
TEL : 8504880114  
SER.# : BROG2J568046

DATE, TIME	03/14 09:30
FAX NO./NAME	617274465605
DURATION	00:01:07
PAGE(S)	02
RESULT	OK
MODE	STANDARD ECM



# 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: 3/14/08

TO: Diamond Cleaners

PHONE: 727/446-8465

FAX: 727/446-5605

FROM: Cecily Tart

PHONE: 850/921-9513

Division of Air Resources Management

FAX: 850.922.6979

RE: Ant. of perc. by contrl device instal. date.

CC: \_\_\_\_\_

Total number of pages including cover sheet: 2

### Message

There are two places on the form that need to be filled out.

1) The date the control device

Diamond Cleaners  
1030462-004

Attention of  
CECILY TART.

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")
22 MAY 1996	Existing <input checked="" type="radio"/> New	<input checked="" type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	22 MAY 1996
_____	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?  0

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:

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_____	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?

→  120 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

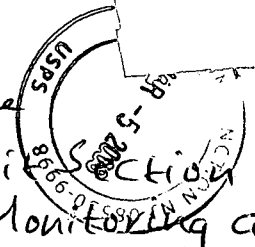
Unopened store  (date of expected opening \_\_\_\_\_)



From Sivyang Shah  
Diamond Cleaners  
926 Cleveland St  
Clearwater, FL 33755

TRENTON NJ 086  
05 MAR 2008 PM 2 T

To Mr. Dick Dibble  
General Permits Section  
Bureau of Air Monitoring and  
Mobile Sources, MS 5510  
2600 Blair Stone Rd  
Tallahassee, FL 32399-2400



02090+6542