

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

October 10, 2001

Mr. John B. Bouillon
Airoso Cleaners, Inc.
1335 B St. Lucie West Boulevard
Port St. Lucie, Florida 34986

Re: Facility No.: 1110078-002

Dear Mr. Bouillon:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 30, 2001.

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,


Dotty Diltz, Chief
Bureau of Air Monitoring
and Mobile Sources

DD/jw

cc: Mr. Bruce Offord, Southeast District

"More Protection, Less Process"

Printed on recycled paper.

9/5/01

called & left message. CMB

Fees Paid 96-00

SOC 3

Compliance IN

1110078-002

9/5/01 Spoke to John B. Bouillon and he stated that the facility has two dry to dry machines. He stated that one machine was purchased in Sept. of 1990 and the other was purchased in 1995.

Page 15

1(a) Add Date initially purchased from manufacturer for each machine.

1995 machine should have New circled under Status.

Page 16

4. New machines at large area source should be marked as well.

Page 17

Responsible official sign and date for changes made.

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
AUG 30 2001
Department of Environmental Monitoring
and Assessment Services

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): <i>AIROSO CLEANERS, INC.</i>
2. Site Name (For example, plant name or number): <i>AIROSO CLEANERS, INC.</i>
3. Hazardous Waste Generator Identification Number: <i>FLR 0000 28597</i>
4. Facility Location: Street Address: <i>1593 SE. VILLAGE GREEN DR.</i> City: <i>PORT ST LUCIE</i> County: <i>ST LUCIE</i> Zip Code: <i>34952</i>
5. Facility Identification Number (DEP Use ONLY - do not fill in): <i>1110078-002</i>

Responsible Official

6. Name and Title of Responsible Official: Name: <i>JOHN B. BOUILLON</i> Title: <i>PRES.</i>
7. Responsible Official Mailing Address: Organization/Firm: <i>AIROSO CLEANERS, INC</i> Street Address: <i>1335 B ST. LUCIE WEST BLVD.</i> City: <i>PORT ST LUCIE</i> County: <i>ST. LUCIE</i> Zip Code: <i>34986</i>
8. Responsible Official Telephone Number: Telephone: <i>(561) 335-1916</i> Fax: <i>(561) 335-1921</i>

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")
_____	Existing/New	RC/CA/None required	SAME
_____	Existing/New	RC/CA/None required	SAME
_____	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:

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 AIRS ID# 1110078.
- 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.

JOHN B. BOUILLON
Print name of responsible official

John B. Bouillon
Signature

8-25-01
Date

AIROSO CLEANERS. INC.

FOR YEAR 2001



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

*Paid 12/14/00
Ch #14360*

TO: Holder of Title V Air General Permit

Our records indicate that, as the owner or operator of an eligible facility, you have claimed entitlement to the use of a Title V Air General Permit under Rule 62-213.300, Florida Administrative Code (F.A.C.).

For your facility to maintain its eligibility for the Title V Air General Permit, Rule 62-213.300(3)(b), F.A.C. states "...the owner or operator of the facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. This fee is due and payable between January 15 and March 1 of each year for which the facility is in operation and subject to the requirements of this rule and the general permit." This invoice constitutes the Department's written notice, as required under the general permit rule.

Please make your check or money order payable to the Department of Environmental Protection and staple it to the detachable portion of this invoice below. To maintain your facility's eligibility for the general permit, the fee must be received by the Department not later than March 1. Your check and the detachable portion of this invoice below should be mailed to:

**Title V Air General Permits
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070**

AIRSID # 1110078

(cut here)

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
OCT 20 2003
Bureau of Air Monitoring
& 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):	AIROSO CLEANERS, INC.		
2. Site Name (For example, plant name or number):	PLANT		
3. Hazardous Waste Generator Identification Number:	FLR000 100461		
4. Facility Location: Street Address: City:	2825 S. US HWY 1 FORT PIERCE	County: ST. LUCIE	Zip Code: 34982
5. Facility Identification Number (DEP Use ONLY - do not fill in):	1110078-002		

Responsible Official

6. Name and Title of Responsible Official: Name:	JOHN B. BOUILLON SR.	Title:	PRES.
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City:	AIROSO CLEANERS, INC. 1335 B. ST LUCIE WEST BLVD PORT ST. LUCIE	County:	ST. LUCIE Zip Code: 34986
8. Responsible Official Telephone Number: Telephone:	(772) 461-6701	Fax:	(772) 461-6701

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	THOMAS BOUILLON (PLANT MANAGER)		
10. Facility Contact Address: Street Address: City:	2825 S. US 1 FORT PIERCE	County:	ST LUCIE Zip Code: 34982
11. Facility Contact Telephone Number: Telephone:	(772) 461-6701	Fax:	(772) 461-6701

Facility Information

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_____	<input checked="" type="radio"/> Existing/ <input type="radio"/> New	<input checked="" type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> None required	<u>SAME</u>
_____	Existing/ <input type="radio"/> New	RC/ <input type="radio"/> CA/ <input type="radio"/> None required	_____
_____	Existing/ <input type="radio"/> New	RC/ <input type="radio"/> CA/ <input type="radio"/> None required	_____

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

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

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_____	Existing/ <input type="radio"/> New	RC/ <input type="radio"/> CA/ <input type="radio"/> None required	_____
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*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

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

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(NONE REQUIRED)

New machines at small area source
Refrigerated condenser

Existing machines at large area source
Carbon adsorber
Refrigerated condenser

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

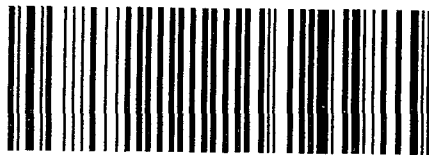
JOHN B. BAUILLON SR.
Print name of responsible official

John B. Baillon Sr.
Signature

10-16-03
Date

SB file
10/20/03

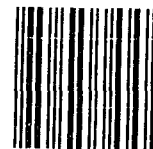
AIROSO CLEANERS
1335B St. Lucie West Blvd.
Port St. Lucie, FL 34986



7003 0500 0000 3164 8944



0000



32399

U.S. POSTAGE
PAID
PORT SAINT LUCIE, FL
34986
OCT 16, 03
AMOUNT

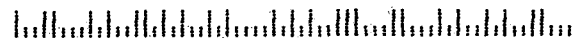
\$4.65

00041728-11

General Permits Section
Bureau of Air Monitoring & Mob.Sources, MS
5510
Dept. of Env. Prot.
2600 Blair Stone Rd.
Tallahassee, FL 32399-2400

RETURN RECEIPT
REQUESTED

32399+2400



RECEIVED
OCT 20 2003
Bureau of Air Monitoring
& Mobile Sources

Dear Sir or Madam:

Please be advised - this application
has been submitted twice before:

We were contacted by your office
before and was submitted to a
lady whose name we failed to
write down. We are registering this
application just to be on the safe
side.

Thank you,
John B. Saullo, Sr.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

456085 DEC15 2005

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

1110078 10
AIROSO CLEANERS
1335B St Lucie West Blvd
FT. PIERCE, FL 34982

Bureau of Air Monitoring
& Mobile Sources
DEC 16 2005

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

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

Printed on recycled paper.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

444012 JAN 3 2005

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID# 1110078 10
AIROSO CLEANERS
1335B St Lucie West Blvd
FT. PIERCE, FL 34982

RECEIVED
JAN 4 2005
Bureau of Air Monitoring
& Mobile Sources

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

Printed on recycled paper.

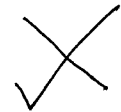


THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

434553 DEC22 2003

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

1110078 JOHN BOUILLON AIROSO CLEANERS 1335 B ST LUCIE WEST BLVD PORT ST LUCIE FL 34986
--

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 can be found below on your mailing label.

420741 DEC16 2002

TOTAL AMOUNT DUE: \$50.00



Do **NOT** Remove Label

AIROSO CLEANERS JOHN B BOUILLON 1335 B ST LUCIE WEST BLVD PORT ST LUCIE FL 34986	AIRS ID#1110078
--	-----------------

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001 Obj.: 002273
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Bureau of Air Mountain
& Mobile Sources

DEC 18 2002

RECEIVED



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

411986 DEC20 2001

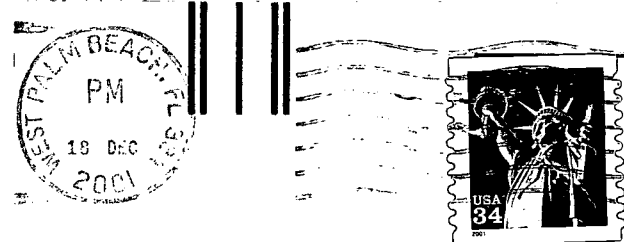
Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

AIRS ID # 1110078
AIROSO CLEANERS
JOHN B BOUILLON
1335 B ST LUCIE WEST BLVD
PORT ST LUCIE FL
34986

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



TITLE V - General Permit
Receipts
Post Office Box 3070
Tallahassee, FL 32315-3070

32315+3070 99

