

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

September 26, 2001

Ms. Becky Maughon
Martinizing Dry Cleaning
2831 Gulf Breeze Parkway
Gulf Breeze, Florida 32563

Re: Facility No.: 1130157-002

Dear Ms. Maughon:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 23, 2001.

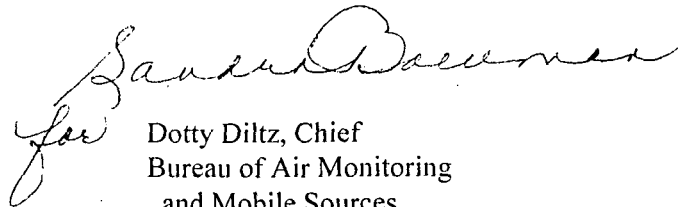
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

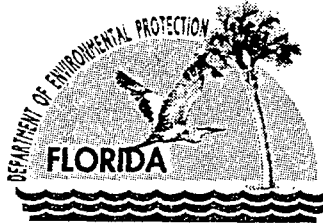
DD/jw

cc: Mr. Charles Norman, Northwest District

"More Protection, Less Process"

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Free Paid 96-00
SOC 4
Compliance IN



Department of Environmental Protection

Jeb Bush
Governor

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

David B. Struhs
Secretary

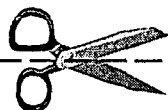
TO: Holder of Title V Air General Permit

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



(cut here)

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.

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

ID# 1130157
BECKY MAUGHON
ONE HOUR MARTINIZING
2831 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

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

Paid CK# 5468
Cleared my Bank 2/5/04
Must have passed to mail!



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

February 4, 2004

NOTICE OF ANNUAL OPERATION FEE
VIA: CERTIFIED MAIL WITH RETURN RECEIPT

TO: Users of Title V Air General Permits

Records in the Division of Air Resource Management indicate that you operate a source of air pollution and that you have claimed eligibility for your facility to operate under a Title V Air General Permit pursuant to Chapter 62-213, Florida Administrative Code (F.A.C.).

As a source of air pollution subject to Title V of the federal Clean Air Act, your facility is required under Section 403.0872, Florida Statutes (F.S.), to pay an annual operation fee as established by the Department in Rule 62-213.205, F.A.C.

Your annual operation fee is \$50 for calendar year **2003**. A notice of your obligation to pay the annual operation fee was sent to you by first class U.S. mail, along with an invoice form and instructions. If you have already submitted the annual operation fee in response to that request, please disregard this letter.

If you have not yet submitted the annual operation fee, this notice (with the enclosed replacement invoice) is being sent in accordance with Rule 62-213.205(1)(g), F.A.C., as a reminder that any annual operation fee not postmarked by **March 1, 2004**, may be subject to a 50% penalty, plus interest computed in accordance with Section 220.807, F.S. In addition, please be aware that under Rule 62-213.205(1)(g), F.A.C., failure to timely pay any required annual operation fee, penalty, or interest constitutes grounds for revocation of the Title V Air General Permit.

To submit your fee payment, please follow the directions on the enclosed invoice form. If you have any questions, you may call Rick Butler at 850/921-9586 or Sandra Bowman at 850/921-9583. Thank you for your prompt attention to this matter.

Sincerely,

Joseph Kahn, Chief
Bureau of Air Monitoring
and Mobile Sources

/JK

Enclosure: Invoice Form

"More Protection, Less Process"

Printed on recycled paper.

RECEIVED

AUG 23 2001

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Bureau of Air Monitoring
& Mobile Sources

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):	NU-WAY Dry Cleaners & Laundry Inc.
2. Site Name (For example, plant name or number):	DBTA Martiney Dry Cleaners
3. Hazardous Waste Generator Identification Number:	1130157001AG
4. Facility Location: Street Address:	2831 GUS BREEZE PKWY City: GUS BREEZE FL County: Santa Rosa Zip Code: 32563
5. Facility Identification Number (DEP Use ONLY - do not fill in):	1130157-002

Responsible Official

6. Name and Title of Responsible Official: Name:	Becky MAUGHTON	Title:	President
7. Responsible Official Mailing Address: Organization/Firm:	Same as above	Street Address:	2831 GUS BREEZE PKWY
		City:	GUS BREEZE FL County: Santa Rosa Zip Code: 32563
8. Responsible Official Telephone Number: Telephone:	(850) 932-0352	Fax:	(N/A)

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	
10. Facility Contact Address: Street Address:	DBTA
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")
X Feb 1984	Existing/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

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

(152) [172.8] gallons (You must fill this in)
172.8

(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".)

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| <u>Existing machines at small area source</u>
(NONE REQUIRED) <input type="checkbox"/> | <u>New machines at small area source</u>
Refrigerated condenser <input type="checkbox"/> |
| <u>Existing machines at large area source</u>
Carbon adsorber <input checked="" type="checkbox"/>
Refrigerated condenser <input type="checkbox"/> | <u>New machines at large area source</u>
Refrigerated condenser <input type="checkbox"/> |

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

*1 Hot water heater
1 Boiler*

How many boilers do you have on-site? *1*

X For each boiler, indicate its horsepower (HP) rating: *1* *5* *0* *WP*

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:

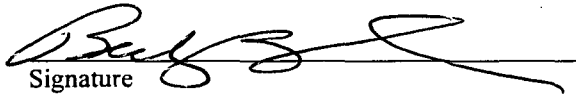
- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

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.

Becky MAUGHTON
Print name of responsible official


Signature

8/21/01
Date

RECEIVED

AUG 23 2001

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Bureau of Air Monitoring
& Mobile Sources

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):	NU-WAY DRY CLEANERS & Ldy Inc.
2. Site Name (For example, plant name or number):	DBTA MARTINEZ DRY CLEANERS
3. Hazardous Waste Generator Identification Number:	1130157001AG
4. Facility Location: Street Address:	2831 GUS BREEZE PKWY City: GUS BREEZE FL County: SANTA ROSA Zip Code: 32563
5. Facility Identification Number (DEP Use ONLY - do not fill in):	1130157-002

Responsible Official

6. Name and Title of Responsible Official: Name:	Becky MAUGHTON	Title:	President
7. Responsible Official Mailing Address: Organization/Firm:	Same as above		
Street Address:	2831 GUS BREEZE PKWY		
City:	County:	Zip Code:	
GUS BREEZE FL	SANTA ROSA	32563	
8. Responsible Official Telephone Number: Telephone:	(850) 322-0352	Fax:	(N/A)

Facility Contact (If different from Responsible Official)

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

Grant, Patricia

From: Dibble, Dickson
Sent: Wednesday, September 27, 2006 12:47 PM
To: Norman, Charles; Bowman, Sandy
Cc: Bradburn, Rick; Grant, Patricia
Subject: RE: Nu-Way Dry Cleaners and Laundry, 1130157

Attachments: Nu-Way Dry Cleaners and Laundry, 1130157

Charlie,

Based on the information you provided and your recommendation, I have changed the status of the subject item facility to **INACTIVE**.

Thanks for the update.

Dick

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



Nu-Way Dry
leaners and Laundr.



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

412653 JAN 7 2002 ✓

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 # 1130157
 ONE HOUR MARTINIZING
 BECKY MAUGHON
 2831 GULF BREEZE PARKWAY
 GULF BREEZE FL
 32563

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

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

435854 FEB 22 2004

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

1130157
 BECKY MAUGHON
 ONE HOUR MARTINIZING
 2831 GULF BREEZE PARKWAY
 GULF BREEZE FL 32563

FOR GOVERNMENT USE ONLY
 Org.: 37550101000 EO: A16
 Fund: 20-2-035001
 Obj.: 002273

✓ RECEIVED
 FEB 16 2004
 Bureau of Air Monitoring
 & Mobile Sources

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

443922 DEC 29 2004

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# 1130157 10
ONE HOUR MARTINIZING
2831 Gulf Breeze Pkwy
GULF BREEZE, FL 32563

Bureau of Air Monitoring
& Mobile Source
DEC 30 2004
RECEIVED

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

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