



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

June 3, 2008

Ms. Annette Valente
Rose's Cleaners, Incorporated
5825 Hollywood Boulevard
Sarasota, Florida 34231

Re: Facility No.: 1150158-001

Dear Ms. Valente:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on April 29, 2008.

Pursuant to Florida Statutes section 403.814(1), authority to operate under general permits commences thirty days after receipt of the notification form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

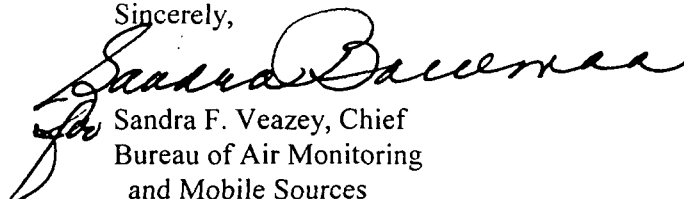
For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must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

INSP

C Bradley CO *Sudista*
Sarasota Co

NO ACTIVITY FOR FACILITY ..✓.....

EMISSION FEE DATES

VER REPORTS

COMP. STATUS - SNC MNC IN

INSP *C Bradley* CO *Sarasota*

No Activities Exist for the Selected Facility.

Insp Sarasota Co - J Hilkey

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
APR 29 2008
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):	ANNETTE VALENTE / ROSE'S CLEANERS INC.
2. Site Name (For example, plant name or number):	ROSE'S CLEANERS UNIT F
3. Hazardous Waste Generator Identification Number:	
4. Facility Location: Street Address: 820 BELL RD. BELL COMMERCE CENTER UNIT F City: SARASOTA County: SARASOTA, FL Zip Code: 34240	
5. Facility Identification Number (DEP Use ONLY - do not fill in):	1150158-001

Responsible Official

6. Name and Title of Responsible Official: Name: ANNETTE VALENTE Title: PRES.	
7. Responsible Official Mailing Address: Organization/Firm: ROSE'S CLEANERS INC. Street Address: 5825 HOLLYWOOD BLVD. City: SARASOTA FL County: SARASOTA Zip Code: 34231	
8. Responsible Official Telephone Number: Telephone: (941) 927-9455 Fax: () -	

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	MARC MARTOCCHIO - VP
10. Facility Contact Address: Street Address: 5991 CATTLE RIDGE BLVD. City: SARASOTA, FL County: SARASOTA Zip Code: 34232	
11. Facility Contact Telephone Number: Telephone: (941) 378-5071 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")
MAY 2004	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 _____)

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.

ANNETTE VALENTE, PRES.
Print name of responsible official

Annette Valente
Signature

4-25-08
Date



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 30, 2008

Ms. Annette Valente
Rose's Cleaners
5825 Hollywood Boulevard
Sarasota, Florida 34231-3903

Dear Ms. Valente:

The Bureau of Air Monitoring and Mobile Sources recently received your check (#6028) dated April 24 in the amount of \$100 for payment of your annual operations General Permit fee.

We appreciate your submittal. However, Rule 62-213.300, Florida Administrative Code (F.A.C.), provides that the owner or operator of a facility must, upon written notice from the Department, submit payment of an annual operation fee in the amount of \$50.00. Since you were not sent an invoice, your check is being returned to you. There is no fee due at this time.

If you have any questions, please call me at 850/921-9583.

Sincerely,

Sandy Bowman
Air General Permit Program

6028

ROSE'S CLEANERS
5825 HOLLYWOOD BLVD.
SARASOTA, FL 34231-3903

AMSOUTH BANK OF FLORIDA



4/24/2008

PAY TO THE
ORDER OF:

Department of Environmental Protection

\$ **100.00

One Hundred and 00/100***** DOLLARS

Department of Environmental Protection
2600 Blair Stone Road
Tallahassee FL 32399-2400

ROSE'S CLEANERS

AUTHORIZED SIGNATURE

MEMO

General Permit Fee



FD Security features. Details on back.