

# Department of Environmental Protection

Lawton Chiles  
Governor

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

Virginia B. Wetherell  
Secretary

January 16, 1997

Mr. Alfonso Santana  
Tuscawilla Dry Cleaners  
1442 Welson Road  
Orlando, Florida 32837

Re: Facility I.D. No. 1170079

Dear Mr. Santana:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 6, 1996.

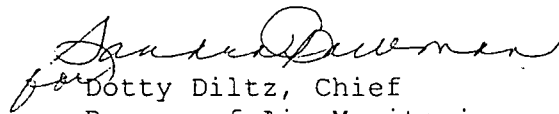
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

January 25, 1997

Department of Environmental Protection  
Mail Station 5510  
2600 Blair Stone Rd.  
Tallahassee, Fl. 32399-2400

Att. Ms. Sandy Bowman

Re: Facility ID. No. 1170079

Please be advice that on September 16 1996 the dry clean plant with the reference ID. number was sold to Dryclean USA Florida Inc. Their mailing address is the following:

Dryclean USA  
1875 W. Commercial Blvd. Suite 140  
Fort Lauderdale, Fl. 33309-3067

Also please update your records with my new mailing address which is as follows:

Alfonso Santana  
2106 Hockley Ct.  
Orlando, Fl. 32837

Thanks for your cooperation,



Alfonso Santana

RECEIVED

JAN 27 1997

Bureau of Air Monitoring  
& Mobile Sources

One copy

Copy onsite.

### Perchloroethylene Dry Cleaning Facility Notification

#### Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	TUSCAWILLA DRY CLEAN CORP DBA DRY CLEAN USA
2. Site Name (For example, plant name or number):	TUSCAWILLA PLANT
3. Hazardous Waste Generator Identification Number:	FLD 984177055
4. Facility Location: Street Address: City: WINTER SPRINGS County: SEMINOLE Zip Code: 32708	1425 TUSCAWILLA RD SUIT 129
5. Facility Identification Number (DEP Use)	

#### Responsible Official

1170079

6. Name and Title of Responsible Official:	ALFONSO SANTANA - president.
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: ORLANDO County: ORANGE Zip Code: 32837	1442 WELSON RD ORLANDO FL. 32837
8. Responsible Official Telephone Number: Telephone: (407) 240-6983 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: ( ) -	

RECEIVED

SEP. 6 1996

p.13 #1170079

7. add org / firm name

p.14

1.(c) should not be marked

**Facility Information**

1.(a) Provide the information below for each machine at the facility. Indicate the type of machine, the date of its purchase, and the date the control device was installed, if applicable.

Type of Machine	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed	ID	Date Machine Initially Purchased	Date Control Device Installed
<i>Example</i>	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
<b>Dry-to-Dry Unit</b>									
(1) w/ ref. condenser	1	FEB 29 92	SAME						
(2) w/ carbon adsorber									
(3) w/ no controls									
<b>Washer Unit</b>									
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls									
<b>Dryer Unit</b>									
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
<b>Reclaimer Unit</b>									
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									

(b) Control devices are required, but not yet installed

(c) No control devices are required to be installed

2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months?  
 gallons

(b) If less than 12 months, how many?  months  
 Check why it is less than 12 months: New owner:  New store:  Did not keep records:

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.)

Existing small area source       ✓ New small area source   
 Existing large area source       New large area source

\* 02 - FEB 92

4. What control technology is required on machines pursuant to section (5) of Part II of this notification form?  
(Indicate with an "X".)

Existing large area source

Carbon adsorber

Refrigerated condenser

New small area source

Refrigerated condenser

New 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:

*All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 boiler HP or less), and (2) are fired exclusively by natural gas except for periods of natural gas curtailment during which propane or fuel oil containing no more than one percent sulfur is fired.*

All steam and hot water generating units exempt   
No such units on-site

### 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
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Instrument calibration
- (f) Start-up, shutdown, malfunction plan

### Surrender of Existing Air Permit(s)

Please indicate with an "X" the appropriate selection:

I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)



No 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.*

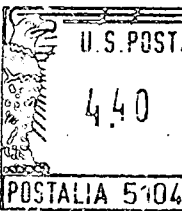
Signature


Date

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
MS 5510-37550 304000  
2600 BLAIR STONE ROAD  
TALLAHASSEE FL 32399-2400



7000 0520 0020 9372 6711



 Rt. # 401050  
Carrier inactive  
Date \_\_\_\_\_

Not Deliverable As Addressed  
 Unable To Forward  
 Insufficient Address  
 Moved, Left No Address  
 Unclaimed  Refused  
 Attempted - Not Known  
 No Such Street  Number  
 Vacant  Illegible  
 No Mail Receptacle  
 Box Closed - No Order  
 Returned For Better Address  
 Postage Due \_\_\_\_\_

10 AIRS ID # 1170079001AG  
ALFONSO SANTANA  
DRYCLEAN USA  
1442 WELSON RD  
ORLANDO FL 32837

Environmental Monitoring  
& Mobile Sources

AUG 27 2001

RECEIVED



PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- 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:

10 AIRS ID # 1170079001AG  
 ALFONSO SANTANA  
 DRYCLEAN USA  
 1442 WELSON RD  
 ORLANDO FL 32837

900520002093726711

2. Article Number (Copy from service label)

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

**X**

- Agent  
 Addressee

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

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

7000 0520 0020 9372 6711

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark  
Here

Total Postage & 10 AIRS ID # 1170079001AG

Recipient's Name: ALFONSO SANTANA

DRYCLEAN USA

Street, Apt. No.: 1442 WELSON RD

ORLANDO FL 32837

City, State, ZIP+4

*Alfonso Santana*

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

AIRS ID#: 1170079  
TUSCAWILLA DRY CLEAN CORP  
ALFONSO SANTANA  
1442 WELSON RD  
ORLANDO FL 32837

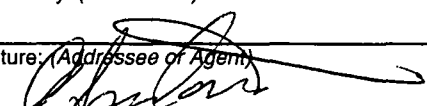
4a. Article Number  
**265 302 465**

4b. Service Type

Registered  Certified  
 Express Mail  Insured  
 Return Receipt for Merchandise  COD

7. Date of Delivery  
**2-25-97**

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
**X** 

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

P 265 302 465

US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

AIRS ID#: 1170079  
TUSCAWILLA DRY CLEAN CORP  
ALFONSO SANTANA  
1442 WELSON RD  
ORLANDO FL 32837

Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 400578

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** ✓


RECEIVED  
MAIL ROOM  
DEC 20 00

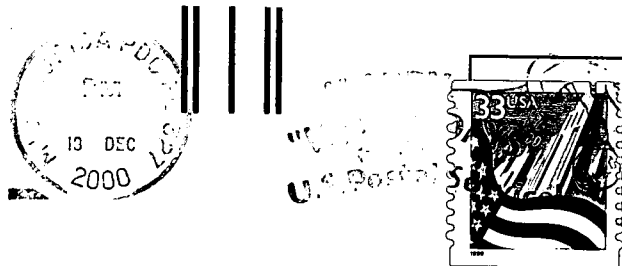
Do NOT Remove Label

AIRS ID # 1170080
TOUCH OF CLASS GERARD MENDEZ JR 620 HUNT CLUB BLVD APOPKA FL 32703

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

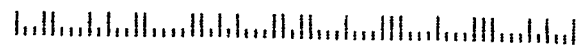
<b>TOUCH OF CLASS DRY CLEANERS</b>		
Dept of Environmental Prot		
	Check Number: 5656	<b>5656</b>
	Check Date: Dec 17, 2000	
	Check Amount: \$50.00	
Item to be Paid - Description	Discount Taken	Amount Paid
Licenses		50.00

 Gerardo Jr & Barbara Mendez  
2471 Jennifer Hope Blvd  
Longwood, FL 32779-4725



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

32315X3070





THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

301503



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

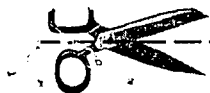
**TOTAL AMOUNT DUE: \$50.00**

Do NOT Remove Label

GBM INC GERARD MENDEZ JR 620 HUNT CLUB BLVD APOPKA FL 32703	AIRS ID#1170080
--	-----------------

<b>FOR GOVERNMENT USE ONLY</b> Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273
---

<b>TOUCH OF CLASS DRY CLEANERS</b>		<b>02502</b>
CHECK DATE:	01/15/98	CHECK NUMBER: 2502
AMOUNT:	*****\$50.00	
PAID TO:	DEPARTMENT OF ENVIRONMENT	
FOR:	AIRS ID#1170080	
ACCOUNT:	AMOUNT:	ACCOUNT: AMOUNT:
6120-01	50.00	



(cut here)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

✓ 0390556

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 RECEIVED

DEC 10 2000

RECEIVED  
MAIL ROOM  
JAN - 5 00

Do NOT Remove Label

AIRS ID # 1170080

TOUCH OF CLASS  
GERARD MENDEZ JR  
620 HUNT CLUB BLVD  
APOPKA FL 32703

Bureau of Air Monitoring  
& Mobile Sources

FOR GOVERNMENT USE ONLY  
Org.: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj.: 002273

TOUCH OF CLASS DRY CLEANERS  
Dept of Enviornmental Protect

Check Number: 4524 4524  
Check Date: Dec 19, 1999

Item to be Paid - Description

Check Amount: \$50.00  
Discount Taken      Amount Paid  
50.00

Licenses



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

0357050

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

TOUCH OF CLASS GERARD MENDEZ JR 620 HUNT CLUB BLVD APOPKA FL 32703	AIRS ID # 1170080
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FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: BT Fund: 20-2-035001 Obj.: 002273	JUN 13 99 RECEIVED MAIL ROOM
--	------------------------------------

TOUCH OF CLASS DRY CLEANERS		300485	
CHECK DATE:	01/10/99	CHECK NUMBER:	300485
AMOUNT:	*****\$50.00		
PAID TO:	DEP-GENERAL PERMIT		
FOR:	ID# 1170080		
ACCOUNT:	AMOUNT:	ACCOUNT:	AMOUNT:
6120-01	50.00		

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

258521 ✓

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

RECEIVED  
MAIL ROOM

JAN 21 97

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 1170080
GBM INC GERARD MENDEZ JR 620 HUNT CLUB BLVD APOPKA FL 32703

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273
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TOUCH OF CLASS DRY CLEANERS		01565	
CHECK DATE:	01/16/97	CHECK NUMBER:	1565
AMOUNT:	*****\$50.00		
PAID TO:	DEPT OF ENVIORMENTAL		
FOR:	TITLE V		
	AIRS ID# 1170080		
ACCOUNT:	AMOUNT:	ACCOUNT:	AMOUNT:
6230-01	50.00		



**THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING**

304067

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#1150079  
STEMROZ ENTERPRISES INC  
JOYCE ANDERSON  
1760 MAIN STREET  
SARASOTA FL 34236

**FOR GOVERNMENT USE ONLY**  
Org.: 37550101000 EO: B1  
Fund: 20-2-035001  
Obj.: 002273