RECEIVEL EFF2202010

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM Bureau of Air Michitoria.

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):		
RDBJR & RDB III LLC.		
2. Site Name (For example, plant name or number):		
A PERSONAL TOURH DRY CLORNES		
3. Hazardous Waste Generator Identification Number:		
MCF # 987-0110		
4. Facility Location: 2601 5. WOOD CAND BUD. City: DECAND County: Volume 2 Tip Code: 32720		
City: DECAND County: VOLUSIA Zip Code: 32720		
5. Facility Identification Number (DEP Use ONLY - do not fill in):		
1270121-0		
Responsible Official		
6. Name and Title of Responsible Official:		
Name: RALPH DEBONS V2 Title: OWNER		
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 7. Pool AND BUD.		
City: Derson County: Volume 32720		
8. Responsible Official Telephone Number:		
Telephone: (366) 138.9186 Fax: (386) 253-1182		
Facility Contact (If different from Responsible Official)		
9. Name and Title of Facility Contact (For example, plant/manager)		
SAME (FLANT OWNER)		
10. Facility Contact Address:		
Street Address:		
City: County: Zip Code:		
11. Facility Contact Telephone Number: Telephone: () - Fax: () -		
()		

DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility Information

1.(a) DRY-TO-DRY M	ACHINES ONL	Y	
How many dry-to-dry ma	achines do you h	ave on-site?	
For each dry-to-dry mac	hine on-site, plea	ise provide the following informati	on:
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")
3 1988+	Existing/N	ew (RG/CA/None required	SAME
	Existing/N	ew RC/CA/None required	
	Existing/N	ew RC/CA/None required	
*CONTROL DEVICE K	LEY: RC = 1	refrigerated condenser CA =	carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY	٨	
How many washers do ye	ou have on-site?	[]	
How many dryers/reclain	ners do you have	on-site?	
unit. If the transfer mach 1993, it is a NEW unit (n	ine was purchase to units purchase	ed from the manufacturer between	December 9, 1991, it is AEXISTING December 9, 1991 and September 22, owed to operate under this general formation:
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 K	EY: $RC = r$	efrigerated condenser CA = 0	carbon adsorber
•	roethylene (perc)	have you used within the last 12 this in)	months?
(b) If less than 12 mor	oths, how many?	[] months	
Check why it is les	ss than 12 month	s:New owner: [] Did not kee	records: []
		New store: New machine	;[]
		Unopened store [] (date of e	xpected opening)

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3. What is the facility's source cla Indicate with an "X". Select		definitions found in section (3) of Part II?			
Small Area Source	<u>Z</u>				
Transfer only or	n-site (used	l less than 140 gallons of perc per year) l less than 200 gallons of perc per year) l less than 140 gallons of perc per year)			
Large Area Source					
Dry-to-dry mach Transfer only on Both machine ty	n-site (used	1 140 - 2,100 gallors of perc per year) 1 200 - 1,800 gallons of perc per year) 1 140 - 1,800 gallons of perc per year)			
4. What control technology is req (indicate with an "X".)	uired on machines purs	uant to section (5) of Part II of this notification form?			
Existing machines at sm (NONE REQUIRED)	all area source	New machines at small area source Refrigerated condenser []			
Existing machines at larger Carbon adsorber Refrigerated condenser	ge area source	New machines at large area source Refrigerated condenser []			
	that all steam and hot w	shall not be eligible to use the general permit pursuant to ater generating units on-site meet the following attached memo for the criteria).			
All steam and hot water generating No such units on-site	ng units exempt	OR			
How many boilers do you have or	ı-site?				
For each boiler, indicate its horse	power (HP) rating: [
What type of fuel do you use?	propane No. 2 fuel oil No. 6 fuel oil	natural gas No. 4 fuel oil Other (please list)			
6. Equipment Monitoring and Rec	cordkeeping Information	n			
Check all logs which are required	to be kept on-site in ac	cordance with the requirements of this general permit:			
(a) Purchase receipts and solvent	purchases/solvent additi	on log			
(b) Leak detection inspection and	repair	L			
(c) Refrigerated condenser temperature monitoring					
(d) Carbon adsorber exhaust perc	concentration monitoring	ng (上)			
(e) Startup, shutdown, malfunction	on plan	[]			

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7. Surrender	of Existing DEP Air Permit(s)
Please indica	te 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
this notif statemen maintain comply v I will pro	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in fication. I hereby certify, based on information and belief formed after reasonable inquiry, that the its made in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to with all terms and conditions of this general permit as set forth in Part II of this notification form. Somptly notify the Department of any changes to the information contained in this notification. Define of responsible official Date

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Personal Town Dry Octamens
2601 S. WOODLAND BUD
DELAND 32720

GENERAL FORMIT SECTION

BURGAU OF AIR Montoring & Mobile Sources

MS VVIO

Z600 BLAIR STONE RD.

323938E54CAKA SCHOOLINGHILLING