



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

October 8, 2007

Ms. Ann Kiefer
The French Laundry
Post Office Box 1708
Santa Rosa Beach, Florida 32459

Re: Facility No.: 1310257-002

Dear Ms. Kiefer:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on August 31, 2007.

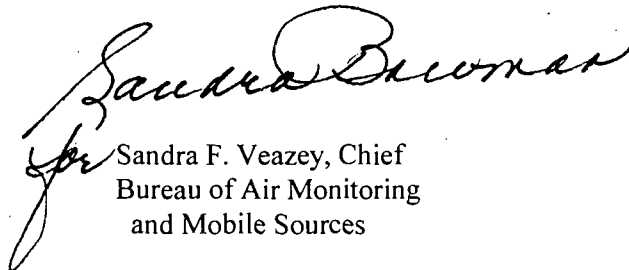
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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



Sandra F. Veazey, Chief
Bureau of Air Monitoring
and Mobile Sources

SFV/pg

cc: Mr. Armando Sarasua, Northwest District

NO ACTIVITY FOR FACILITY
EMISSION FEE DATES 1/2002-2006
SOC REPORTS
COMP. STATUS - SNC MNC IN

TRPT-SOCR-Statement of Compliance
Report - 9/25/2006 - IN
Iasp - Walton Co - NWD - AS

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
AUG 31 2007
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):	Second Wind LLC Corporation		
2. Site Name (For example, plant name or number):	The French Laundry		
3. Hazardous Waste Generator Identification Number:	-N-A-		
4. Facility Location: Street Address:	24 Shannon Lane	City:	Santa Rosa Bch
		County:	Walton
		Zip Code:	32459
5. Facility Identification Number (DEP Use ONLY - do not fill in):	1310257-002		

Responsible Official

6. Name and Title of Responsible Official: Name:	Ann Kiefer	Title:	Owner
7. Responsible Official Mailing Address: Organization/Firm: Street Address:	P.O. Box 1708	City:	Santa Rosa Bch
		County:	Walton
		Zip Code:	32459
8. Responsible Official Telephone Number: Telephone:	(850) 622-0432	Fax:	(850) 622-0522

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	Gwen Dixon (manager)		
10. Facility Contact Address: Street Address:	P.O. Box 1708	City:	Santa Rosa Bch
		County:	Walton
		Zip Code:	32459
11. Facility Contact Telephone Number: Telephone:	(850) 622-0432	Fax:	(850) 622-0522

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")
Aug 2001	Existing/ <input checked="" type="radio"/> New	<input checked="" type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> None required	same
Feb 2006	Existing/ <input checked="" type="radio"/> New	<input checked="" type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> None required	same
_____	Existing/ <input type="radio"/> New	<input type="radio"/> 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?

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/ <input type="radio"/> New	<input type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> None required	_____
_____	Existing/ <input type="radio"/> New	<input type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> None required	_____
_____	Existing/ <input type="radio"/> New	<input type="radio"/> RC/ <input type="radio"/> CA/ <input type="radio"/> 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?

268.8 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".)

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

How many boilers do you have on-site?

For each boiler, indicate its horsepower (HP) rating: 3HP

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.

Ann B. Kiefer
Print name of responsible official

Ann B. Kiefer
Signature

8-27-07
Date

The French Laundry

AM 10/3/08
EM 10/15/08

P. O. Box 1708
24 Shannon Lane
Santa Rosa Beach, Florida 32459
850622-0438 office 850622-0522 fax

September 30, 2008

Florida Department of Environmental Protection
160 Government Center
Pensacola, Florida 32502-5794

RE: Request for termination of coverage
Permit Number 1310257-002
VIA: Certified US Mail

Dear Sirs,

As per your electronic mail request dated September 04, 2008 from Erica Mitchell, please accept this written request for termination of coverage as our facility has discontinued using perchloroethylene in the dry cleaning plant. Our machines have been removed from our facility and replaced with a hydrocarbon cleaning machine.

The machines were removed by Dry Clean Concepts, Tim Morrow, 700 Carroll Street, P. O. Box 1087, Dothan, Alabama 36302. www.DryCleanConceptsInc.com. The filters and remaining perchloroethylene were removed by MCF Systems, Atlanta Inc. 5351 Snappinger Woods Drive, Decatur, Georgia, 30035. Phone 1-7705939434. You will find the receipts for the disposal attached.

RECEIVED

OCT - 3 2008

NORTHWEST FLORIDA
DEP

Please contact me or my Facility Manager, Gwen Dixon, at the above referenced numbers for any further information you may need.

Respectfully,


Ann B. Kiefer, Owner


Gwen Dixon, General Manager

MCF Systems Atlanta, Inc.
 5351 SNAPPINGER WOODS DR
 DECATUR, GA 30035
 USA

Telephone: 770-593-9434
 Warehouse: MAIN

INVOICE

Invoice No.	175541
Customer No.	111-0692

Bill To:
 THE FRENCH LAUNDRY
 P.O. BOX 1708
 SANTA ROSA BEACH, FL 32459
 U.S.A.

Ship To:
 THE FRENCH LAUNDRY
 24 SHANNON LANE
 SANTA ROSA BEACH, FL 32459
 U.S.A.

Manifest # 437628		Terms DUE 10 DAYS UPON RECEIPT		Salesperson MCF SYSTEMS	
Invoice Date 06/30/08	Service Date 06/30/08	SO #	Due Date 06/30/08	PO #	Resale #
Item Description			Quantity	Unit Price	Extended Price
STANDARD FILTERS			4	35.00	140.00
SPLIT FILTERS			3	52.50	157.50
STILL BOTTOM LIQUID			7	105.00	735.00
Fuel Surcharge			1	15.00	15.00



Amount due is based on 'Terms' above.

Subtotal **1,047.50** Freight **0.00** Balance Due **1,047.50**

PLEASE ENCLOSE THIS PORTION WITH YOUR PAYMENT. THANK YOU.

MCF Systems Atlanta, Inc.
 5351 SNAPPINGER WOODS DR
 DECATUR, GA 30035
 USA

If you pay by credit card print the billing address as shown on the credit card statement.

Name _____
 Street _____
 City/State/Zip _____

E-Check Payments are accepted. Please contact the office for further information.

Customer No. 111-0692 Invoice Total 1,047.50
 Invoice No. 175541 Balance Due 1,047.50
 Due Date 06/30/08 Amount Paid \$ _____

MC Visa Amex Discover Credit Card No. _____

Expiration Date ____/____/____ Signature _____

Print Name _____

Your signature authorizes MCF to process your credit card for the above invoice amount.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number FLR000122721	2. Page 1 of 1	3. Emergency Response Phone 800-424-9300	4. Manifest Tracking Number 004376286 JJK		
5. Generator's Name and Mailing Address THE FRENCH LAUNDRY 24 SHANNON LANE SANTA ROSA BEACH FL 32459				Generator's Site Address (if different than mailing address) Shipping Address: 24 SHANNON LANE SANTA ROSA BEACH, FL 32459			
Generator's Phone: (850) 622-0432				Ter: MOB		648511 111-0682	
6. Transporter 1 Company Name MCP SYSTEMS ATLANTA, INC.				900-520-9240		U.S. EPA ID Number GAT981269095	
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CLEAN HARBORS RECYCLING SERVICES OF OHIO, LLC 581 HULLIKEN DR SE HEBRON OH 43025				U.S. EPA ID Number OH0980587364			
Facility's Phone: (740) 923-2822							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes	
		No.	Type				
X	1. RD WASTE TETRACHLOROETHYLENE, 6.1 UN1897, III (Standard Fibers)	01	DE	80	P	F002 D038 D007 D040	
X	2. RD WASTE TETRACHLOROETHYLENE, 6.1 UN1897, III (Spill Jumbo)	03	DE	105	P	F002 D039 D007 D040	
X	3. RD WASTE TETRACHLOROETHYLENE, 6.1 UN1897, III (Liquid)	07	DR	840	P	F002 D039 D007 D040	
X	4. RD WASTE TETRACHLOROETHYLENE, 6.1 UN1897, III (Liq. Debris)		D		P	F002 D039 D007 D040	
14. Special Handling Instructions and Additional Information BRG #180 Pym Manifest No: 1047.50 PERC Check # AMANT 3 PAST [CURRENT] FBS [] INV [] CCI [] PCI [] Cont. # 1-20 2-15 The waste described in this manifest does not meet the technical standards or prohibition levels of LDR Rule 40 (CFR 262.7) (incineration) for non-wastewater that is 5.0 mg/l for tetrachloroethylene and trichloroethylene and 0.00 mg/l (TCLP) for chromium. THIS WASTE IS NOT TO BE LAND DISPOSED. It must be returned to generator.							
15. GENERATOR/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations, if export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name				Signature		Month Day Year	
				<i>[Signature]</i>		6 30 08	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name				Signature		Month Day Year	
Alexander C Locke				<i>[Signature]</i>		6 30 08	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H020		2. H020		3. H020		4. H020	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name				Signature		Month Day Year	

Dibble, Dickson

From: Dibble, Dickson
Sent: Wednesday, February 11, 2009 4:44 PM
To: Mitchell, Erica
Cc: Bowman, Sandy; Curle, Mary Beth; Grant, Patricia
Subject: RE: Dry Cleaner requesting termination of coverage

Erica,

Thank you. The information you have provided is more than adequate. Per your request the facility status has been changed to INACTIVE.

Below is the complete content of the text which I have included in the comment section of the Facility Screen capture below.

02/11/09-Status to INACTIVE per E.Mitchell (NWD) e-mail w/ltr fr RO A.Kiefer 09/30/08 stating no longer using PERC, PERC&PERC machine are removed & facility is now using a petroleum based solvent.

Florida Department of Environmental Protection - Enterprise Applications

Details Emission permit Compliance Pollutant related party Help Return exit Window

ORACLE

Air Resource Management System - Facility

AREA Office * **NWD** MW: **PENSACOLA** County * **WALTON** AIRS ID **1310257**

Owner/Comp * **SECOND WIND LLC** Site **THE FRENCH LAUNDRY**

Directions

Street **24 SHANNON LN**

City * **SANTA ROSA BEACH** Zip **32469** **4270** Validate Address

UTM Zone **16** East **573.89** North **3360.26** Latitude **30** **22** **19.2396** Longitude **86** **13** **51.5640**

Status * **INACTIVE** Maj Group SIC * **72** **PERSONAL SERVICES**

Reloc **N** Shtdwn Dt Strt Dt Final Shtdwn Dt

Gov Fac * **0** **NOT OWNED OR OPERATED BY A FEDERAL, STATE, OR LOCAL GOV** HAZ Waste Generator ID: FLD

AOR Req * **N** Ozone SIP Facility * **N** Type **10** **PCE Drycleaning Facilities**

Compliance Tracking Current Permit Indicator **AG**

Title V **TITLE V** non-HAP Class **MINOR** HAP Class **MINOR** Public Exempt

of Emis Units **C** **A** **I** Generator Rating MW

Comment **02/11/09-Status to INACTIVE per E.Mitchell (NWD) e-mail w/ltr fr RO A.Kiefer 09/30/08 stating no longer using PERC, PERC&PERC**

Enter the FACILITY COMMENT

Record: 1/1

Thank you and have a great day!

Dick

Dickson E. Dibble, ES III

FL Dept of Environmental Protection
 Div. of Air Resource Management
 Bureau of Air Monitoring & Mobile Sources
 Air General Permit Program

2/11/2009

Tel. (850) 921-9586
 FAX (850) 922-6979
 ICG-#345

Dickson.Dibble@dep.state.fl.us



Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

From: Mitchell, Erica
Sent: Wednesday, February 11, 2009 3:10 PM
To: Dibble, Dickson
Cc: Curle, Mary Beth
Subject: Dry Cleaner requesting termination of coverage

Hi Dick,

The R.O. for the French Laundry (1310257-002), Second Wind, LLC, has requested termination of coverage.

The last inspection noted that the perchloroethylene dry cleaning machine and the perc was removed from the facility in June 2008 and a new Hydrocarbon cleaning machine was installed. On September 4, 2008 the District sent a letter to the facility which included the following:

If the facility is no longer planning on using perchloroethylene, the permittee must mail in a request for termination of coverage to the Department at 160 Governmental Center, Pensacola, Florida, 32502-5794. In the request for termination, please provide

- *the reason for the request for termination of coverage*
- *any information/documentation on who and how the perchloroethylene was removed from the site.*

Please send a copy of the request to 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*

We received a response from the facility (pdf scan attached) on October 3, 2008, however the facility may not have copied you on their letter requesting termination, as the facility is still active in ARMS.

Please see their letter (attached) and let me know if you need any additional information to inactivate the facility in ARMS.

Thank you.

Erica.Mitchell@dep.state.fl.us
 Air Program, Compliance Supervisor
 160 Governmental Center
 Pensacola, Florida 32502-5794
 Phone: (850) 595-8300 x 1223 Fax: (850) 595-8096

Please Note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to

2/11/2009

public disclosure

Cover Florida, developed by Governor Charlie Crist and the Florida Legislature, gives Floridians access to more affordable health insurance options. To learn more or to sign up for email updates, visit www.CoverFloridaHealthCare.com.

THE French Laundry
PO Box 1708
Santa Rosa Bch Fl 32459

Gulf BAY COUNTY
FL 32421
30 AUG 2007 PM



General Permits Section
Bureau of Monitoring & Mobile Sources
MS5510
Dept. of Environmental Protection
2600 Blair Stone Rd.
Tallahassee, FL 32399-2400