

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-Designee

February 12, 2007

Mr. Robson Alves Kwality Dry Cleaner 2668 East Atlantic Boulevard Pompano Beach, Florida 33062

Re: Facility No.: 0112504-003

Dear Mr. Alves:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on January 2, 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 Veazey, Chief Bureau of Air Monitoring

and Mobile Sources

SV/pg

cc: Mr. Clifton Bittle, Broward County

EMISSION FEE DATES 2000-2006 NO ACTIVITY FOR FACILTY...... SOC REPORTS. 5. COMP. STATUS - SNC, MNC 10 1/30/2006

Insp-INS2-Compliance Inspection walkthrough Insp-Broward Co-CB: Hle

Each owner or operator of a Perc dry cleaning facility shall submit to the E notification of compliance status providing the following information and s	PA and FLDEP by registered mail on or before July 28, 2008 a
FLDEP Solity ID Number: 01538 0112504	Is the Perc dry cleaning machine located in a building with a residence(s), even if the residence is vacant at the time of this notification?
The name and address of the owner or operator; MACLUDA ALVES ROBSON ALVES	Check one: Yes
Name of the owner or operator of the dry cleaning facility 6534 0111/15 10/4/	Is the Perc dry cleaning machine located in a building with no other tenants, leased space, or owner occupants?
Mailing address of the owner or operator of the dry cleaning facility	Check one: Yes
COCNUT Check, FL 33073 Mailing address line 2	Is the Perc dry cleaning operation a major or area source?
	Major Source: Perc consumption is greater than 2100 gallons/year
City State Zip Code	Area Source: Perc consumption is 2100 gallons/year or below
The address (that is, physical location) of the dry cleaning facility; (MAS DAY (AANCA) LL D/6/A	The yearly Perc solvent consumption:
Name of the dry cleaning facility KVALITY CLEANERS	Is the Perc dry cleaning operation in compliance with each applicable requirement of the Federal Standard of 40 CFR §63.322?
Address of the dry cleaning facility (physical location)	Check one: No Yes
2668 E- ATLANTIC BUD- Address line 2	All information contained in this statement is accurate and true.
PANPAND BRACH, FL 33062 City State Zip Code	Signature of the Responsible Official for the dry cleaning facility
By Registered Mail Send to: USEPA Region 4 And to: Air Toxics and Monitoring Branch 61 Forsyth Street SW Atlanta, Georgia 30303-8960	Florida Department of Environmental Protection General Permits Section Bureau of Air Monitoring and Mobile Sources 2600 Blair Stone Road, MS #5510 Tallahassee, Florida 32399-2400

To Whom It May Concern:

KWACITY CLEAREN Name of Facility	has
just received, on Aug - 26.	_ 2008, notice of
the need to file the attached form.	Since we were
not aware of the ruling requiring the	nis information
prior to the date above, please acce	ept this
information as our attempt to rema	in compliant
with Local, State and federal status	tes.
	,

Mando Ahrs
Signature

MARILDA ALVES

Print

Title

PERCHLOROETHYLENE DRY CLEANER AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

PECENODIE SOUTOR OF THE SOUTOR 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.

1.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
	Site Name (For example, plant name or number):
2.	Site Name (For example, plant name or number):
	KWALITY DAY CLEANER, LLC
3.	Hazardous Waste Generator Identification Number:
4.	Facility Location: 2668 E. ATLANTIC BLVD.
	City: PAMPANO GEACH County: BROWARD Zip Code: 33062
5.	Facility Identification Number (DEP Use ONLY - do not fill in);
	0//2504-003
Res	sponsible Official
6.	Name and Title of Responsible Official:
Nar	KOBSON ALJES PRESIDENT
7.	Responsible Official Mailing Address: Organization/Firm: RWAL, + DR+ CLCANER
	Street Address: 2668 E A+LANTIC BLVD City: POMPANO BRACK BROWARD Zip Code: 33062
	Street Address: 2668 E A+LANTIC BLVD Zip Code: 33062 POMPANO BRACK BROWARD Zip Code: 33062
	Pompano BRACH BROWARD Zip Code: 33062
8.	Responsible Official Telephone Number
	Telephone: (951) 942 9779 Fax: (954) 895-5641
	ility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
	NONB SAME
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 Name and Location

Facility Information

1.(a) DRY-TO-DRY M	ACHINES ONL	Y	
How many dry-to-dry ma	chines do you hav	ve on-site?	
For each dry-to-dry mach	iine on-site, pleas	e provide the following information	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")
	Existing/Ne	ew RC/CA/None required	
	Existing/Ne	ew RC/CA/None required	· .
·	Existing/Ne	ew RC/CA/None required	
*CONTROL DEVICE K	EY; RC = r	efrigerated condenser CA =	- carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY		
How many washers do yo	ou have on-site?	<u>2_</u>	
How many dryers/reclain	ners do you have o	on-site? []	y y y
unit. If the transfer machi 1993, it is a NEW unit (r permit). For each transf	ine was purchased to units purchased or machine on-sit	from the manufacturer between	December 9, 1991, it is an EXISTING 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 =	- carbon adsorber
2.(a) How much perchlo	roethylene (perc)	have you used within the last 12 r	nonths?
[] gallo	ns (You must fill	this in)	
(b) If less than 12 mor	nths, how many?	[] months	
Check why it is les	ss than 12 months	: New owner: [] Did not kee	ep records: []
•		New store: [] New machin	e []
		Unopened store [] (date of	expected opening)

DEP Form No. 62-213.900(2) Effective: 2/24/99

Facility information			
I.(a) DRY-TO-DRY M	ACHINES ONL	Y	
How many dry-to-dry ma			
For each dry-to-dry mach	hine on-sitc, pleas	e provide the following information	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")
1996	Existing Ne	w RC/CA/None required	SAME
	Existing/Ne	w RC/CA/None required	
	Existing/Ne	w RC/CA/None required	
*CONTROL DEVICE K	EY; RC = r	efrigeneted condensor CA =	- carbon adsorber
I.(b) TRANSFER MAC	HINES ONLY		
How many washers do yo	ou have on-site?	\Box	
How many dryers/reclain	ners do you have o	on-site? []	
unit. If the transfer mach 1993, it is a NEW unit (t	ine was purchased to units purchased	from the manufacturer between	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, owed to operate under this general formation:
Date Initially Purchased From Manufacturer	Status (circle me)	Control Device Required* (circle me)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/New	RC/CA/None required	41-11-11
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
*CONTROL DEVICE K	EY: RC=n	efrigerated condenser CA =	· carbon adsorber
	roethylene (perc) l ns (You must fill	have you used within the last 12 n this in)	nonths?
(b) If less than 12 more	nths, how many? [] months	
Check why it is le	ss than 12 months	: New owner. [] Did not kee	p records: []
		New store: [] New machin	e []
		Linopened store [] (date of	expected opening)

DEP Form No. 62-213.900(2) Effective: 2/24/99

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".)
Existing machines at small area source (NONE REQUIRED) [] New machines at small area source Refrigerated condenser []
Existing machines at large area source Carbon adsorber [] Refrigerated condenser [] New machines at large area source Refrigerated condenser []
5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant 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 No such units on-site [X] OR
How many boilers do you have on-site? []
For each boiler, indicate its horsepower (HP) rating: [] []
What type of fuel do you use? [] No. 2 fuel oil [] No. 4 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
(c) Refrigerated condenser temperature monitoring $[\mathcal{Y}]$
(d) Carbon adsorber exhaust perc concentration monitoring
(e) Startup, shutdown, malfunction plan

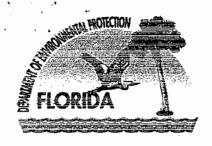
DEP Form No. 62-213.900(2)

Indicate with an "X". Select one classification only.	
Small Area Source	
Transfer only on-site (use	d less than 140 gallons of perc per year) d less than 200 gallons of perc per year) d less than 140 gallons of perc per year)
Large Area Source []	
Transfer only on-site (use	d 140 - 2,100 gallons of perc per year) d 200 - 1,800 gallons of perc per year) d 140 - 1,800 gallons of perc per year)
 What control technology is required on machines pursu (Indicate with an "X".) 	sant to section (5) of Part II of this notification form?
Existing machines at small area source (NONE REQUIRED) []	New machines at small area source Refrigerated condenser
Existing machines at large area source Carbon adsorber [] Refrigerated condenser []	New machines at large area source Refrigerated condenser []
5. A facility which contains non-exempt emissions units Rule 62-213.300, F.A.C. Verify that all steam and hot we exemption criteria or that no such units exist on-site (see	ther generating units on-site meet the following
All steam and hot water generating units exempt No such units on-site	() OR
How many boilers do you have on-site?	
For each boiler, indicate its horsepower (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 Recordkeeping Information	ı
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 additional additional control of the control	on log []
(b) Leak detection inspection and repair	[]
(c) Refrigerated condenser temperature monitoring	[]
(d) Carbon adsorber exhaust perc concentration monitoring	
(e) Startup, shutdown, malfunction plan	[]

DEP Form No. 62-213.900(2) Effective: 2/24/99

7. Surrender o	of Existing DEP Air Permit(s)
Please indicat	e 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 notifi statement maintain comply w I will pro	lersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in ication. 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. Imply notify the Department of any changes to the information contained in this notification. GSOV AUCS The of responsible official
Signature	12/29106 Date

DEP Form No. 62-213.900(2) Effective: 2/24/99



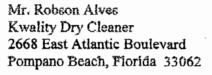
Florida Department of Environmental Protection

Charlie Crist

Governor

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400

February 12, 2007



Re: Facility No.: 0112504-003

Dear Mr. Alves:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on January 2, 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 Veazey, Chief Bureau of Air Monitoring

and Mobile Sources

SV/pg

cc: Mr. Clifton Bittle, Broward County

"More Protection, Less Process"

e Mohile Sources

Part III. Notification of Intent to Use General Permit

	PERC. AIR GEN Prior to filling out this form, pie completed form to the address lis Facility Name and Location [1. Facility Owner/Company Name (N. B. (A.S. D.B.))	EOUI ER	WHITE BURNETT
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2, bo. 10.1	5 4 Part III. Noti	fication of Intent to Use	
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The state of	Prior to filling out this form, nie	age read the instructions no	ovided at the end of the form. Send
' 0' \ 6	completed form to the address its	ted in the instructions and k	eep a copy of the form for your files.
ap gv			map = 10,000 to the table too great times.
<i>v</i> . 10 7	Facility Name and Location		
la,	1. Facility Owner/Company Name (N	ame of corporation, agency, or	individual owner):
•	BRAS DAY	CLEANER IL	1 /
	2. Site Name (For example, plant name		
	2. Site Partie (For example, prant than	e of number):	
	I KWALITY (LEANER	
	3. Hazardous Waste Generator Identifi	cation Number:	, , , , , , , , , , , , , , , , , , , ,
	4. Facility Location: 2668 E	. ATLANTIC BUS	D :
	Street Address:	O FOREST TO	zip Code: 33062
	4. Facility Location: 2668 E Street Address: City: Pompano BEAC	in County. F-C	24 COUC 35000
	5 Pacific Mentification Number (1987		
•			
	Homospilla (Milala)	•	
	Responsible Official 6. Name and Title of Responsible Official	ท่อใ-	
	1	-411.4	pppe Na +
	Name: ROBSON ALL	169	paes, Dent
	7. Responsible Official Mailing Addre	35:	WF VANA
	Organization/Firm:		
	Street Address:		491
	City:	County:	Zip Code:
	8. Responsible Official Telephone Nur	nher.	
	Telephone: () -	Fax: () -
	Facility Contact (If different from Res		
	9. Name and Title of Facility Contact	For example, plant manager);	
			.]
	10. Facility Contact Address:		
	NOTE OF THE PROPERTY OF THE PR		
	Street Address:		
	City:	County:	Zip Code:
	11. Facility Contact Telephone Number		
	Telephone: () -	Fax: () -

DEP Form No. 62-213.900(2)

7. Surrender o	of Existing DEP Air Permit(s)
Please indicat	e with an "X" the appropriate selection:
. []	I hereby surrender all existing DEP air pennits authorizing operation of the facility indicated in this notification form; the pennit number(s) are
£1	No DEP air permits currently exist for the operation of the facility indicated in this notification form.
Responsible (Official Certification
this notifi statement maintain comply w	sersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the smade 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 ith all terms and conditions of this general permit as set forth in Part II of this notification form. I have been the department of any changes to the information contained in this notification. ON AUTES To free formation contained in this notification.

Instructions for Completing Part III of Notification Form

The Perchloroethylene Dry Cleaning Facility Notification of Intent to Use General Permit, Part III of this form, shall be completed and submitted to the Division of Air Resources Management at least 30 days prior to beginning operations under the general permit. Please type or print clearly all information. A copy of this notification form shall be kept on-site and made available for review by Department personnel.

The responsible official of the facility, as defined in Part II of this notification form, is responsible for ensuring that the facility complies with all applicable terms and conditions of this general permit, as set forth in Part II of this form.

Mail the signed and completed Part III of this form to:

General Permits Section
Bureau of Air Monitoring and Mobile Sources, MS 5510
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Facility Name and Location

- 1. Facility Owner/Company Name Enter the name of the corporation, agency, or individual that has ownership or control of the dry cleaning facility for which this notification is submitted.
- 2. Site Name Enter the common name, if any, of the facility site; for example, Plant A, Metropolis plant, etc. If more than one facility is owned, a notification form must be completed for each.
- Hazardous Waste Generator Identification Number Enter the hazardous waste generator identification number, if known, assigned by the Department to the facility.
- Facility Location Enter the street address and zip code of the facility and the city and county in which it is located.
- 5. Facility Identification Number (DEP Use ONLY) Please leave this space blank. DEP will enter the facility identification number assigned to you by ARMS.

Responsible Official

- 6. Name and Title of Responsible Official Enter the name and title of the designated responsible official for the facility who, by signing this form, is certifying that the facility is eligible for a general permit pursuant to the requirements of Part II of this notification form and Rule 62-213.300, F.A.C.
- 7. Responsible Official Mailing Address Enter the mailing address for the responsible official if different than the address entered in No. 4 above.
- 8. Responsible Official Telephone Number Enter the telephone number and facsimile number, if available, at which the responsible official can be contacted.

Facility Contact

Name and Title of Facility Contact - Enter the name of the facility contact, if other than the
responsible official. For example, a plant manager could be designated as the facility contact for
Department inspections.

DEP Form No. 62-213.900(2)

- Facility Contact Address Enter the mailing address for the facility contact, if different than the address entered in No. 4 above.
- 11. Facility Contact Telephone Number Enter the telephone number and facsimile number, if available, at which this person can be contacted.

Facility Information

- 1. For each machine located at the facility, select the appropriate machine type and type of air pollution control device installed on the machine (for example, dry-to-dry unit w/ ref. condenser). If the dry-to-dry machine was purchased from the manufacturer prior to or on December 9, 1991, it is an EXISTING unit. If the dry-to-dry machine was purchased from the manufacturer after December 9, 1991, it is a NEW unit. Beginning with dry-to-dry machines, enter the date the machine was initially purchased from the manufacturer in the dd-mth-yy format. If you do not know the exact date of purchase, but can confirm it was prior to December 9, 1991, enter 08-DEC-91. Indicate the status of the machine as either new or existing. Circle the required control equipment for that machine (if required) and enter the date of its installation (in the dd-mth-yy format). If control equipment is required, but has not yet been installed, indicate this with an "X". If the control device was already included at the time of purchase, enter "SAME". Up to three dry-to-dry machines may be entered across this table. Complete the other table for transfer machines located at the facility, as applicable. Submit additional copies of these tables if more than three machines per type are located at the facility.
- 2. Enter the total amount, in gallons, of perchloroethylene consumed during the preceding twelve months. If this amount represents a period of less than twelve months, indicate the actual time period used to determine solvent consumption and the reason for this discrepancy (for example, new store). New owners should attempt to obtain solvent purchase records from the previous owner.
- 3. Using the amount of perc entered in No. 2 above, select the facility's classification. The classification is based on the definitions found in paragraph (3) of Part II.
- 4. Indicate which control technology is required on machines pursuant to paragraph (5) of Part II, based upon the selection in No. 3 above. Existing small area sources are not required to install any additional control equipment.
- 5. Indicate with an "X" that all steam and hot water generating units on-site are exempt from permitting pursuant to Rule 62-210.300(3), F.A.C., or that the facility has no such units on-site. Provide information on the quantities of boilers, their horsepower rating(s), and fuel used.

Equipment Monitoring and Recordkeeping Information

 Indicate all logs which are required to be kept on-site in accordance with the requirements of this notification form with an "X".

Surrender of Existing DEP Air Permit(s)

7. Rule 62-213.300(2)(a)2., F.A.C., makes the surrender of all existing DEP air permits authorizing the operation of a facility a condition precedent for the entitlement to a DEP air general permit. Indicate whether the responsible official surrenders such permit(s) or whether no such permit(s) exist with an "X" and list all existing DEP air permit numbers.

Responsible Official Certification

This statement must be both printed and signed by the person named on page 13, Field 6, of this form.

DEP Form No. 62-213.900(2)



PERCHLOROETHYLENE DRY CLEANER FACT SHEET



FLORIDA SMALL BUSINESS ENVIRONMENTAL ASSISTANCE

On July 27, 2006, the Environmental Protection Agency (EPA) strengthened air toxics requirements for all dry cleaners that use the chemical perchloroethylene (PERC).

The rule affects three types of dry cleaners that use PERC: large industrial and commercial dry cleaners; small area source dry cleaners (found in strip malls or stand-alone); and small dry cleaners located in residential buildings. The majority of dry cleaners in Florida are small area source dry cleaners.

SMALL AREA SOURCE DRY CLEANERS

Requirements for existing area source dry cleaners (machines installed prior to December 21, 2005)

- Eliminate all transfer machines by July 27, 2008.
- Begin using a halogen leak detector monthly by July 27, 2008 to detect PERC leaks and maintain records.

Requirements for new area source dry cleaners (machines installed after December 21, 2005)

- Eliminate all transfer machines by July 27, 2006.
- Add carbon adsorbers to the closed-loop machines with refrigerated condensers that are required under the 1993 rule.
- Use a halogen leak detector monthly to detect PERC leaks and maintain records.

(Note: Both new and existing dry cleaners must still perform weekly or bi-weekly leak checks on each machine. <u>All</u> leak detection checks and findings should be recorded on your dry cleaning compliance calendar)

SMALL CO-RESIDENTIAL DRY CLEANERS

The final rule eliminates PERC emission risks for small dry cleaners co-located in residential buildings:

Requirements for existing co-residential dry cleaners

- Eliminate all transfer machines by July 27, 2008.
- Begin using a halogen leak detector monthly by July 27, 2008, to detect PERC leaks, and maintain records.
- Phase-out PERC machines as the units wear out. All existing PERC machines must be removed from residential buildings by December 21, 2020. These dry cleaners may replace worn-out PERC machines with newer available non-PERC technology.

Requirements for <u>new</u> co-residential dry cleaning machines

- PERC use will not be allowed.
- Any new PERC dry cleaning machine in a residential building that began operations between December 21, 2005 and July 27, 2006 must eliminate PERC use by July 27, 2009. (During the three (3) year interim PERC elimination period (July 27, 2006 to July 27, 2009), new PERC co-residential sources will be required to use refrigerated condensers, and secondary carbon adsorbers, with equipment housed inside a vapor barrier enclosure¹ with general ventilation² to the outside air.)
- Must conduct weekly leak inspections using a leak detection device such as a halogenated hydrocarbon detector³ or PERC gas analyzer⁴



Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400

February 22, 2007

Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

Mr. Robson Alves Kwality Professional Dry Cleaners 2668 East Atlantic Boulevard Pompano Beach, Florida 33062

Re: Facility No.: 0112504-003

Dear Mr. Alves:

The Bureau of Air Monitoring and Mobile Sources recently received your check (#1222) in the amount of \$50 in payment of your Title V General Permit fee.

We appreciate your submittal. However, your check is being returned to you since it is not due at this time. Fees are due and payable between January 15 and March 1 in the year following each year for which the facility is in operation and subject to the requirements of the general permit. The Department will send you an invoice in time for the next payment cycle.

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

Sincerely,

Dick Dibble

Air General Permit Program Bureau of Air Monitoring

uk Dibbec

/DD

Enclosure

BRAS DRYCLEANER LLC

2668 E ATLANTIC BLVD.
POMPANO BEACH, FL 33062-4940

Washington Mutual
Washington Wash

1 RS XD # 0/12504

Dibble, Dickson

From:

Dibble, Dickson

Sent:

Friday, December 29, 2006 11:44 AM

To:

'alvs342@aol.com'

Cc:

Bowman, Sandy

Subject: FW: Perchloroethylene Dry Cleaner Air General Permit Notification Form for change of ownership

Tracking: Recipient

Delivery

'alvs342@aol.com'

Bowman, Sandy Delivered: 12/29/2006 11:44 AM

Mr. Alves.

I apologize, for I failed to include our mail to address, as I promised. It is below.

Mail the signed and completed Part III of this form to:

General Permits Section Bureau of Air Monitoring and Mobile Sources, MS 5510 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, FL 32399-2400

Thank you,

Dickson E. Dibble

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

From: Dibble, Dickson

Sent: Thursday, December 28, 2006 4:26 PM

To: 'alvs342@aol.com' Cc: Bowman, Sandy

Subject: Perchloroethylene Dry Cleaner Air General Permit Notification Form for change of ownership

Dear Mr. Robison Alves, _

As we have discussed, an Air General permit is not transferable upon a change of ownership. It is customary that the previous owner notify us when a change of ownership is imminent. At the same time it is his/her responsibility to inform the new owner of his/her responsibility to submit a new registration form at least thirty (30) days prior to the sale.

Below you will find the link to the subject item registration form. You may download and print the form from there. If you are the Responsible Official, please complete the form, print your name, sign your name and date the last page of the form. The form itself begins on page 14 and ends on page 17. Pages 1-13 provide an overview of the rule, and pages 18 thru 19 provide directions for completing the form.

http://www.floridadep.org/Air/forms/titlevgp/dep62 213 900(2).pdf

Please submit the original form to our office at the address below as soon as possible. Please keep a copy of the form for your records in the event your facility is visited by an inspector. From the date your form is received, your application will proceed thru a 30 day review period. Please filled out the form completely and according to the characteristics of your facility. Please don't forget to sign and date the form. DO NOT SEND MONEY! We have already received your annual fee for the Year 2006, and it has been credited to your account.

Thank you for your prompt attention in this matter.

Sincerely,

Dickson E. Dibble

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



Environmental Protection and Growth Management Department POLLUTION PREVENTION, REMEDIATION AND AIR QUALITY DIVISION Mailing Address: 115 South Andrews Avenue, Room A-240, Fort Lauderdale, Florida 33301

954-519-1260 • FAX 954-765-4804

YOUR RESPONSE IS REQUIRED

August 25, 2008 ROBSON ALVES BRAS DRY CLEANER LLC 2668 E ATLANTIC BLVD POMPANO BEACH, FL 33062

Subject:

New EPA Regulations for Perchloroethylene Dry Cleaners

Dear Dry Cleaning Facility Owner/Operator:

Your facility currently operates under the terms and conditions of a State of Florida Perchloroethylene Dry Cleaner Air General Permit Notification Form. This is a reminder that the U.S. Environmental Protection Agency (EPA) passed a final rule on July 27, 2006, that requires the implementation of an enhanced Leak Detection and Repair (LDAR) program at dry cleaning facilities. Effective July 27, 2008, the perchloroethylene dry cleaning facility owner or operator is required to use a halogen leak detector to detect PERC leaks on a monthly basis, and maintain appropriate records even though these new requirements were not included in the Perchloroethylene Dry Cleaner Air General Notification Form that you submitted. The attached fact sheet describes these new requirements.

What do you have to do in order to comply with these requirements?

The owner or operator of a dry cleaning facility was required to submit to Broward County on or before July 28, 2008, a notification of its compliance status. Broward County recognizes that the federal due date for the compliance notification has passed. Therefore, **Broward County requests that you** complete and submit the enclosed Perchloroethylene (Perc) Dry Cleaning Compliance Notification form to the following address by registered mail on or before September 30, 2008:

Mr. Paul Shelton Broward County Pollution Prevention, Remediation & Air Quality Division 115 S. Andrews Avenue, Room A-240

Ft. Lauderdale, FL 33301

Failure to comply with the above-mentioned requirement may result in enforcement action. If you have any questions regarding this letter, please call me at 954-519-1208 or Paul Shelton at 954-519-1444.

Sincerely,

Clifton R. Bittle Environmental Licensing Manager Pollution Prevention, Remediation and Air Quality Division

7800 W. 25th AVENUE HIALEAH, FL 33016 DADE 305-556-5831 TOLL FREE 800-407-2532

INVOICE

DATE 11/27/06

INVOICE NO. 298386

KWALITY PROFESSIONAL B.C. NEW 2668 E ATLANTIC BLVD.

POMPANO BEACH, FL 33062

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Thank You

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7800 W. 25th AVENUE HIALEAH, FL 33016 DADE 305-556-5831 TOLL FREE 800-407-2532

DATE

8/08/06

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Thank You

PAGE 01

From: Origin ID: (305)789-9200 Joel Slewart FOWLER WHITE BURNETT P.A.

1395 Brickell Avenue, 14th Floor

MIAMI, FL 33131

SHIP TO: (850)245-8767

BILL SENDER

Bureau of Air Monitoring & Mobile S General Permits Section Department of environmental Protect 2600 Blair Stone Rd.

Tallahasses, FL 323992400



STANDARD OVERNIGHT

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7980 7576 4007 TRK#

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FORM

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32399 DSR

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ActWgt: 1 LB





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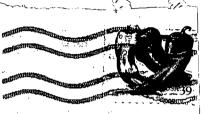
- 1. Use the 'Print' feature from your browser to send this page to your laser or inkjet printer.
- 2. Fold the printed page along the horizontal line.
- 3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

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Kwality Professional Dry Cleaners 2668 E. Atlantic Blvd. Pompano Beach, FL 33062 SOUTH FLORIDA PDC

FL 330 4 T 20 FEB 2007 PM



to: title V GENERAL PERMITS

OFFICE

B-A.M. & M.S. MSSSIO

Depto of ENV. PROTECTION

2600 BLAIR Stone RD.

+A 2LA SSEC, FL 32399.

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Kwality Professional Dry Cleaners 2668 E. Atlantic Blvd. Pompano Beach, FL 33062



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

32315+3070 2099

FOWLERWHITE BURNETT

ESPIRITO SANTO PLAZA

1395 BRICKELL AVENUE

FOURTEENTH FLOOR

MIAMI, FLORIDA 33131-3302 U.S.A.

CERTIFIED MAIL



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Florida Dept. of Environmental Protection General Permits Section Bureau of Air Monitoring & Mobile Sources 2600 Blair Stone Rd., MS #5510 Tallahassee, FL 32399-2400

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THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

466370 DEC22206

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

954)772-7600 ALVES

AIRS ID# 112504

BRAS DAY CLEANER Kwality Professional Dry Cleaners

2668 E. Atlantic Blvd.

Pompano Beach, FL 33062

Printed on recycled paper.

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OBJECT: 002273