

Department of Environmental Protection

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

Virginia B. Wetherell Secretary

November 25, 1997

Mr. Nazim Dharamsi Town Custom Cleaners 10201 Hammocks Boulevard #148 Miami, Florida 33196

Re: Facility No.: 0250890

Dear Mr. Dharamsi:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 5, 1997.

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,

Dotty Diltz, Chief
Bureau of Air Monitoring

and Mobile Sources

DD/jw

cc: Mr. Ewart Anderson, Dade County

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

Perchloroethylene Dry Cleaning Facility Notification

DECEIVED OCT 2 8 1997

Facility Name and Location

Air Quality

1. Facility Owner/Com				dual owner):	Management	Division
S.N.G.S.	INC	DIBI	A.			
2. Site Name (For exam			-			
TOWN C	WSTOM	CLEANE	512-S.			
3. Hazardous Waste Ge						
FLD 9	82090	345			,	
4. Facility Location: Street Address:			CKS BI	# GU	148	
Street Address: City:	10201	County: 3	>	Zin Code:		
MIA	MI,	t d	DADE.	Zip Code.	§ 3319	6].
5: Facility Identificatio	n Number (DEP U	se)::::::::::::::::::::::::::::::::::::		<i>-</i>		
Andreas de la production de la company de la				$-U\alpha$	50890	2
		Responsible O	fficial			
		responsible o				
6. Name and Title of R	esponsible Official	:				
Nazi	M DH	ARAMS	1. Mor	rager /	Part Owne	r2.
· · · - · · · · · · · · · · · · · · ·	NAZIM DHARAMSI. Monager / Port Owner. Responsible Official Mailing Address:				Ī	
Street Address:	Organization/Firm: Street Address: SAME AS AROUE.					
City:		County:		Zip C	Code:	
8. Responsible Official	Telephone Number	er:				
-						
1406.						
Facility Contact (If different from Responsible Official)						
9. Name and Title of F	acility Contact (Fo	r example, plant i	nanager):			
	-		- · · · · G · - / ·			
10. Facility Contact Add	dress:	<u> </u>	***	·		_
Street Address: City:		County:		Zip Code:		
		County.		zip Couc.		
11. Facility Contact Tele			Paris ()	-		
Telephone: () -		Fax: ()	-		
			-	 _		

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NOV 5 1997

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Bureau of Air Monitoring & Mobile Sources

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.

		Date	Date		Date	Date		Date	Date `
		Machine	Control		Machine	Control		Machine	Control
		Initially	Device		Initially	Device -		Initially	Device
Type of Machine	ID	Purchased	Installed	ID	Purchased	Installed	IĐ	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-
Dry-to-Dry Unit									
(1) w/ ref. condenser		20-NIV-93	20-NOV-93						
(2) w/ carbon adsorber									
(3) w/ no controls									
Washer Unit			•	•	•	•			
(4) w/ ref. condenser									
(5) w/ carbon adsorber									
(6) w/ no controls			-						
Dryer Unit		19.7	· Area and		•	•			
(7) w/ ref. condenser			-						
(8) w/ carbon adsorber					*.				
(9) w/ no controls									
Reclaimer Unit	a	14114			•	•			
(10) w/ ref. condenser									
(11) w/carbon adsorber					1				
(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 an	Existing small area source [] New small area source []								
Existing large ar	Existing large area source [] New large area source					•			

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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 []					
 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 perçent 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					
(c) Refrigerated condenser temperature monitoring					
(d) Carbon adsorber exhaust perc concentration monitoring					
(e) Instrument calibration					
(e) Instrument calibration (f) Start-up, shutdown, malfunction plan					

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Surrender of Existing Air Permit(s)

		Sufficient of Existing All Fermities				
Piε	lease 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)				
,	ι <u>X</u> ı	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 pro	mptly notify the Department of any changes to the information contained in this notification.				
	Signature	Dierous. Date Date				

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DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

·	
S.N.G.S. INC NAZIM DHARAMSI 10201 HAMMOCKS BLVD #148 MIAMI FL 33196 Do NOT Remove	Label RECEIVED Bureau of Air Monitoring ST ST RECEIVED ST 10 98
Annual Reporting Period: JAN 15T 1997	Label & Mobile Sources 1998 TO JAN 1 ST 1998
Based on each term or condition of the Title V general air permit, my facility 62-213.300, Florida Administrative Code (F.A.C.), during the period covered	<u> </u>
If NO, complete the following:	
#1. Term or condition of the general permit that has not been in continuous	compliance during the reporting period stated above:
Exact period of non-compliance: from	to
Action(s) taken to achieve compliance:	г.
Method used to demonstrate compliance:	
#2. Term or condition of the general permit that has not been in continuous of	compliance during the reporting period stated above:
Exact period of non-compliance: from	to
Action(s) taken to achieve compliance:	· .
Method used to demonstrate compliance:	
As the responsible official, I hereby certify, based on information and belief formed notification are true, accurate and complete. Further, my annual consumption of places not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per	perchloroethylene solvent, based upon purchase receipts,
RESPONSIBLE OFFICIAL: Name (Please Print)	Signature 1/20/98 Date
. ,	

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

PERCHLOROETHYLENE DRY CLEANERSE CEIV

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

RE-INSPECTION

TYPE OF INSPECTION:	ANNUAL
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COMPLAINT/DISCOVER
BUTTON

OCT 28 1998

Bureau of Air Monitoring & Mobile Sources

AIRS ID#: 0250820 DATE: 9/28/28 TIME IN: 1200/2 TIME OUT: 2-00

FACILITY NAME: TOWN COSTON Cleaners

FACILITY LOCATION: 10201 Hammore Bhd #148

RESPONSIBLE OFFICIAL: NA2/M DHARAMS PHONE: 305) 382-148

CONTACT NAME: NA2/M DHARAMS PHONE:

PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to startup	
2. Facility failed to notify DARM to use general permit	

PART II: CLASSIFICATION Facility indicated on notification form that it is: ☐ No notification form (check appropriate box) ☐ Drop store/out of business/petroleum 2. New small area source 1. Existing small area source dry-to-dry only, x < 140 gal/yr dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr transfer only, x < 200 gal/yrboth types, x < 140 gal/yr both types, x < 140 gal/yr(constructed before 12/9/91) (constructed on or after 12/9/91) 3. Existing large area source 4. New large area source dry-to-dry only, $140 \le x \le 2{,}100 \text{ gal/yr}$ dry-to-dry only, 140 < x < 2,100 gal/yrtransfer only, 200 < x < 1,800 gal/yrtransfer only, 200 < x < 1,800 gal/yrboth types, $140 \le x \le 1,800 \text{ gal/yr}$ both types, $140 \le x \le 1,800$ gal/yr (constructed on or after 12/9/91) (constructed before 12/9/91) DCan not determine 5. This is a correct facility classification ΠY If no, please check the appropriate classification: facility qualified for a general permit as number 2 'above facility exceeds above limits and is not eligible for a general permit B. The total quantity of perchloroethylene (perc) purchased within the preceding 12 months by this dry cleaning facility was $\beta 0$ gallons.

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Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?

PART IV: PROCESS VENT CONTROLS In Part II-A: If classification I has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been-checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? ON ON/A 3. Equipped the condenser with a diverter valve so airflow will be directed away from the XY ON ON/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

B. Has the responsible official of an existing large or new large area/source also:	
1. Measured and recorded the exhaust temperature on the outlet side of the condenser locat	ed
on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	DY DN
2. Measured and recorded the washer exhaust temperature at the condenser	
inlet and outlet weekly?	DY DN DN/A
Is the temperature differential equal to or greater than 20° F?	OY ON ON/A
3. Measured and recorded the perc concentration in the exhaust stream weekly	
at the end of the final drying cycle while the machine is venting to the adsorber,	
if machines are equipped with a carbon adsorber?	DY DN DN/A
	D. D. D. W.
Is the perc concentration equal to or less than 100 ppm?	DY DN DN/A
1. A sourced that the compling not on the corbon adoorhor authorist for	
4. Assured that the sampling port on the carbon adsorber exhaust for measuring	
perc concentrations is at least 8 duct diameters downstream of any bend, contraction,	
or expansion; is at least 2 duct diameters upstream from any bend, contraction,	
or expansion; and downstream from no other inlet?	AINO NO YO
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual	
condenser coils?	DY DN DN/A
6. Routed airflow to the carbon adsorber (if used) at all times?	DY DN DN/A

PART V: RECORDKEEPING REQUIREMENTS				
Has the responsible official:				
(check appropriate boxes)				
1. Maintained receipts for perc purchased?	AY ON			
2. Maintained rolling monthly total of perc consumption?	DY XN			
3. Maintained leak detection inspection and repair reports for the following:	, ,			
a. documentation of leaks repaired w/in 24 hrs? or;	DY DN TSKNA			
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days	,			
and parts installed w/in 5 days of receipt?	OY ON DAWA			
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN SMIA			
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON TOWA			
6. Maintained startup/shutdown/malfunction plan?	MO JA			
7. Maintained deviation reports?	OY ON TANA			
Problem corrected?	OY ON SANA			
8. Maintained compliance plan, if applicable?	DN DN/A			

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PART VI: LEAK DETECTION AND REPAIRS						
l.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?					
2.	Has the facility maintained a leak log?					
3.	Does the responsible official check the following areas for leaks?					
1	Hose connections, fittings, couplings, and valves $\square N \square N/A$ Muck cookers $\square N \square N/A$					
	Door gaskets and seating DN DN/A Stills SV DN DN/A					
	Filter gaskets and seating OY ON ON/A Exhaust dampers ON ON/A					
	Pumps 9Y ON ON/A Diverter valves ON ON/A					
	Solvent tanks and containers ON ON/A Cartridge filter housings ON ON/A					
	Water separators ON ON/A					
4.	Which method of detection is used by the responsible official?					
	Visual examination (condensed solvent on exterior surfaces)					
	Physical detection (airflow felt through gaskets)					
	Odor (noticeable perc odor)					
	Use of direct-reading instrumentation (FID/PID/calorimetric tubes)					
	Halogen leak detector					
	If using direct-reading instrumentation, is the equipment:					
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm? □Y □N					
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
	c. Inspected for leaks and obvious signs of wear on a weekly basis?					
	d. Kept in a clean and secure area when not in use?					
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?					

Mrtchell FishkinD	9/18/18
Inspector's Name (Please Print)	Date of Inspection
nitetthelling.	9/99
Inspector's Signature -	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:	
Gerve DEP Calendar	
Gave DEP Calendar Gave DERM P2 Bookfest. Aero-Teelf 480	-
App - Ted 480	`
·	
·	

BEST AVAILABLE COPY INSPECTION SUMN	AARY REPORT
	LAINT/DISCOVERY RE-INSPECTION
TIME IN: 100 AM TIME OUT: 150	AIRS 10#: 0250890
TYPE OF FACILITY: Dry to Dry	
ACILITY NAME: TOWN CUSTOM Cleaner	DATE: 7/28/98
FACILITY LOCATION: 10201 Hammarts 131	
(1	
RESPONSIBLE OFFICIAL MAZIM DHARAMS	TPHONE NUMBER: 305/382-14-88
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administrati	
Based on the results of the compliance requirements evaluate discrepancies were noted:	ed during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
Carlore to Maintain Rolling les Con	Use DEP calendar
Perc Consumption failure to maintain Lent & Mantenna	OSC DIT Carenaux
failure to maintain Lent & Mantenna	USE DEP Calada
(55	OUC DIT CAMA
	11.
, ·	
	`
COMMENTS:	
	γ
The Annual Compliance Certification form has been properly certific	ed and submitted to the inspector. YES NO
c_{i}/c_{i}	The state of the s
DATE OF NEXT INSPECTION: 7/97	proximate)
\sim	
INSPECTION CONDUCTED BY: // / / / / / / / / / / / / / / / / /	Fishk (NI) pase Print)
INSPECTOR'S SIGNATURE: Phil the Lith	PHONE NUMBER: 305372-692
Page	_of Revised 10/96

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: TOWN Coston Council Date: 928/28 FACILITY LOCATION: 1920 Hammocks Blud H HES Annual Reporting Period: 977 19 TO 9/28 19 Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. YES NO If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: #2. Term or condition of the general permit that has not been in continuous compliance during		
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213,300, Florida Administrative Code (F.A.C.), during the period covered by this statement. WES NO If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Falire fo manhain Rolling las for the Consumeration period covered by this statement. **DEP Consumeration** **DEP Co	FACILITY NAME: TOWN COSTON C	lanes DATE: 9/28/28
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213,300, Florida Administrative Code (F.A.C.), during the period covered by this statement. WES NO If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Falire fo manhain Rolling las for the Consumeration period covered by this statement. **DEP Consumeration** **DEP Co	FACILITY LOCATION: 10201 Ham	mocks Blud A 148
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213,300, Florida Administrative Code (F.A.C.), during the period covered by this statement. \(\text{YES} \) \(\text{NO} \) If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: \[\text{Falive fo mankern losses from 2/97 to 1005 Method used to demonstrate compliance:} \] **React period of non-compliance: \[\text{Bureau of Air Monitoring & Mobile Sources} \] **Method used to demonstrate compliance: \[\text{Falive fo mankern losses from 2/97 to 1005 Method used to demonstrate compliance:} \] **Bureau of Air Monitoring & Mobile Sources \] #*2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: \[\text{Mankernee Cg Consisterfly} \] Exact period of non-compliance: \[\text{Form of Silver losses from 2/97 to 2/93 Method used to demonstrate compliance: \[\text{Method used to demonstrate compliance: } \] As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities \(\text{RESPONSIBLE OFFICIAL: }\) **A21**M** DHARANS** SEPT 28**H.		
Based on each term or condition of the Title V general air permit, my facility has remained in compliance with DEP Rule 62-213,300, Florida Administrative Code (F.A.C.), during the period covered by this statement. \(\text{YES} \) \(\text{NO} \) If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: \[\text{Falive fo mankern losses from 2/97 to 1005 Method used to demonstrate compliance:} \] **React period of non-compliance: \[\text{Bureau of Air Monitoring & Mobile Sources} \] **Method used to demonstrate compliance: \[\text{Falive fo mankern losses from 2/97 to 1005 Method used to demonstrate compliance:} \] **Bureau of Air Monitoring & Mobile Sources \] #*2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: \[\text{Mankernee Cg Consisterfly} \] Exact period of non-compliance: \[\text{Form of Silver losses from 2/97 to 2/93 Method used to demonstrate compliance: \[\text{Method used to demonstrate compliance: } \] As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities \(\text{RESPONSIBLE OFFICIAL: }\) **A21**M** DHARANS** SEPT 28**H.		
62-213.300, Florida Administrative Code (F.A.C.), during the period covered by this statement. PES NO If NO, complete the following: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Falve fo minkin College for for for Consorptal EIVED	Annual Reporting Period: 977	19TO
#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: #3. **Maintenance** **Gonstone **G	Based on each term or condition of the Title V general air po	ermit, my facility has remained in compliance with DEP Rule
#1. Term or condition of the general permit that has not been in continuous compliance during the reporting period stated above: Additive fo manyain Rolling log for fore Consumption Exact Place Pla	62-213.300, Florida Administrative Code (F.A.C.), during the	he period covered by this statement. TYES TNO
Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: Manharn Leak & manhare (g Consistently Exact period of non-compliance: Manharn Leak & manhare (g Consistently Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities RESPONSIBLE OFFICIAL: We have a constant of the general permit that has not been in continuous compliance during the reporting period-stated above: Bureau of Air Monitoring Bureau of Air Monitoring & Mobile Sources Bureau of Air Monitoring & Mobile Sources Bureau of Air Monitoring & Mobile Sources Bureau of Air Monitoring & Mobile Sources Carlondar To 9/98 Calendar As the responsible of non-compliance: Method used to demonstrate compliance: Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities RESPONSIBLE OFFICIAL: MAZINI DHARANS SEPT 28 TH .	If NO, complete the following:	
Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: **Bureau of Air Monitoring** **Mobile Sources** **Mobile Sources** **Panh knaree** **Consisted by Exact period of non-compliance: from Action(s) taken to achieve compliance: **Method used to demonstrate compliance: **Method used to demonstr		<u>,</u> "
Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: **Bureau of Air Monitoring** **Mobile Sources** **Mobile Sources** **Panh knaree** **Consisted by Exact period of non-compliance: from Action(s) taken to achieve compliance: **Method used to demonstrate compliance: **Method used to demonstr	facture to maintain Rolling	lus for yere consumptine EIVED
Method used to demonstrate compliance: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: Main knaree		9/97 9/98
Method used to demonstrate compliance: #2. Term or condition of the general permit that has not been in continuous compliance during the reporting period-stated above: Main tenare	Action(s) taken to achieve compliance:	SE DEP Calendar OCI 2/1100
Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Action(s) taken to achieve compliance: SEPT 28TH. Calendar Action(s) taken to achieve compliance: Action(s) taken to achieve compliance: SEPT 28TH.	,	Bureau of Air Monitoring
Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Action(s) taken to achieve compliance: SEPT 28TH. Calendar Action(s) taken to achieve compliance: Action(s) taken to achieve compliance: SEPT 28TH.		
Exact period of non-compliance: from Action(s) taken to achieve compliance: Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Action(s) taken to achieve compliance: SEPT 28 TH THERAUS: SEPT 28 TH Calendar All 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. A211/1 DHARAUS: SEPT 28 TH	#2. Term or condition of the general permit that has not be	en in continuous compliance during the reporting period stated above:
Action(s) taken to achieve compliance: Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities: RESPONSIBLE OFFICIAL: AZIMI DHARAISI SEPT 28TH.	Maintain Leak & ma	unkrance Cog Consistently
Method used to demonstrate compliance: As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL:	Exact period of non-compliance: from	9/197 to 9/18
As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: AZIMI DHARAISI SEPT 28 TH	Action(s) taken to achieve compliance:	SE DEP Calendari
As the responsible official, 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, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: AZIMI DHARAISI SEPT 28 TH	Method used to demonstrate compliance:	
made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: AZIMI DHARAISI SEPT 28 TH		
made in this notification are true, accurate and complete. Further, my annual consumption of perchloroethylene solvent, based upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities. RESPONSIBLE OFFICIAL: AZIMI DHARAISI SEPT 28 TH		
upon rolling averages of purchase receipts, does not exceed 2,100 gallons per year for dry-to dry facilities or 1,800 gallons per year for transfer or combination facilities RESPONSIBLE OFFICIAL: AZI	,	
RESPONSIBLE OFFICIAL: Javani. NAZIMI DHARANSI SEPT 28TH		
RESPONSIBLE OFFICIAL: Jaransi NAZIVI DHARANSI SEPT 28TH		a 2,100 gailons per year jor ary juctimes or 1,000 gailons per
		W. NAZIMI DHARAUSI SEPT 28THO
1	Name (Please Prin	nt) Signature Date

DEPT. OF ENVIRONMENTAL 248955 !
RESOURCES MANAGEMENT (DERM)
AIR QUALITY MANAGEMENT DIVISION
33 S.W. SECOND AVENUE, SUITE 900
MIAMI, FLORIDA 33130-1540

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

ANNUAL

TYPE OF INSPECTION:

囟

COMPLAINT/DISCOVERY

RE-INSPECT	TION []
AIRS ID#: 0250890 DATE: 3/11	199 TIME IN: 11:10 am TIME OUT: 11:30 am
FACILITY NAME: Town Cust	
FACILITY LOCATION: 10201 H	ammocks Blvd. # 148
Miami, F	-L 33196
RESPONSIBLE OFFICIAL: Nation	Dharamsi phone: (305)382-1488
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to s	startup
2. Facility failed to notify DARM to use general parts	permit
PART II: CLASSIFICATION	
Facility indicated on notification form that it is (check appropriate box)	: No notification form Drop store/out of business/petroleum
A.	2 Drop store/out of business/perforeum
1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91)	2. New small area source dry-to-dry only, $x < 140 \text{ gal/yr}$ transfer only, $x < 200 \text{ gal/yr}$ both types, $x < 140 \text{ gal/yr}$ (constructed on or after 12/9/91)
3. Existing large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed before $12/9/91$)	4. New large area source dry-to-dry only, $140 \le x \le 2,100$ gal/yr transfer only, $200 \le x \le 1,800$ gal/yr both types, $140 \le x \le 1,800$ gal/yr (constructed on or after $12/9/91$)
5. This is a correct facility classification	□Y ÀN □Can not determine
	fication: general permit as number 2 above limits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) facility was <u>IDD</u> gallons.	purchased within the preceding 12 months by this dry cleaning

ARMS 3/12/99

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN MN/A 1. Storing perchloroethylene in tightly sealed and impervious containers? DY DN MYA 2. Examining the containers for leakage? 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at XY DN DN/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? □N □N/A 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the □N □N/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN MN/A condenser exceeded 45° F? 6: Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

B. Has the responsible official of an existing large or new large area source also:	: -
Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	OY ON
Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	□Y □N □N/A
ls the temperature differential equal to or greater than 20° F?	□Y □N □N/A
3. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber, if machines are equipped with a carbon adsorber?	OY ON ON/A
Is the perc concentration equal to or less than 100 ppm?	OY ON ON/A
4. Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	□Y □N □N/A
5. Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	OY ON ON/A
6. Routed airflow to the carbon adsorber (if used) at all times?	□Y □N □N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	X(Y □N
2. Maintained rolling monthly total of perc consumption?	XX □N
3. Maintained leak detection inspection and repair reports for the following:	-
a. documentation of leaks repaired w/in 24 hrs? or;	DY DN X
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	OY ON XVA
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN ĎKNA
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN XVA
6. Maintained startup/shutdown/malfunction plan?	XY □N
7. Maintained deviation reports?	מאא אל אם צם
Problem corrected?	\square \square \bowtie \bowtie
8. Maintained compliance plan, if applicable?	/ - DY DN XV/A

PA	PART VI: LEAK DETECTION AND REPAIRS					
1.	. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?			X Y	ΠN	-
2.	Has the facility maintained a leak log?			XY	ПN	
3.	Does the responsible official check the	following areas for leaks?	·			
	Hose connections, fittings, couplings, and valves	XY ON ON/A	Muck cookers	П	п)Д(и	٧/A
	Door gaskets and seating	XY ON ON/A	Stills	XY	מם אם	N/A
	Filter gaskets and seating	YY ON ON/A	Exhaust dampers	YY	מם אם	N/A
	Pumps	Y ON ON/A	Diverter valves	YY	וֹם אם	N/A
	Solvent tanks and containers	Y ON DN/A	Cartridge filter housings	Y	חם מם	N/A
	Water separators	DYY ON ON/A				
4.	Which method of detection is used by t	he responsible official?				
	Visual examination (condensed solvent on exterior surfaces)					
	Physical detection (airflow felt th	rough gaskets)	•	\nearrow		
	Odor (noticeable perc odor)			×		
	Use of direct-reading instrumenta	tion (FID/PID/calorimetric	tubes)			
	Halogen leak detector					
	If using direct-reading instr	umentation, is the equipme	ent:	XN/	Α	
	a. Capable of detecting perc vapor concentrations in a range of 0-500 ppm?					
 b. Calibrated against a standard gas prior to and after each use (PID/FID only)? 					□N	
	c. Inspected for leaks and obvious signs of wear on a weekly basis?					
	d. Kept in a clean and se	ecure area when not in use?		ΠY	□N ·	
	e. Verified for accuracy	by use of duplicate samples	(calorimetric only)?	ΠY	□N	
	·.					

Inspector's Name (Please Print)

Inspector's Signature

Date of Inspection

Approximate Date of Next Inspection

Excellent Recordkeeping. Aerotech Machine

BEST AVAILABLE COPY	MARY REPORT
	PLAINT/DISCOVERY RE-INSPECTION
	an AIRS IDH: 0250890 Ner Leaners DATE: 3/11/99
FACILITY LOCATION: 10201 Hamnuc Minni, FL 331	
Miami, FL 331 RESPONSIBLE OFFICIAL: Nazim Dharan	
Based on the results of the compliance requirements evalua compliance with DEP Rule 62-213.300, Florida Administra	
Based on the results of the compliance requirements evaluadiscrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	~
	,
	-
COMMENTS: Excellent Records	teeping
he Annual Compliance Certification form has been properly certi ATE OF NEXT INSPECTION: 3/2000	
SPECTION CONDUCTED BY: Debora	pproximate) Griner Tease Print)
(SPECTOR'S SIGNATURE:	PHONE NUMBER: (305)372-6925
Page_	of

NOC

Revised 10/10/96

ARS 10#: 00250890

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

custom C	leaver	S .	DATE	:3/11/99
) Hamm	ock5	Blvd	# 148	
(i) F1 33	37910			
				,
3	_19 <u>9</u> & TO			3 1999
e V general air permit,	my facility has r	emained in cor	appliance with E	EP Rule
F.A.C.), during the peri	od covered by th	us statement.	YES	□ио
it that has not been in co	ontinuous compl	liance during t	ne reporting per	riod stated above:
		to		
·				
it that has not been in c	ontinuous comp	lianœ during t	he reporting per	riod stated above:
		to		
				<u>.</u>
,				
and complete. Further	r, my annual coi	nsumption of p	erchloroethylen	e solvent, based
	Hammed FL 33 e V general air permit, F.A.C.), during the period it that has not been in continuous that has not been in conti	Hammeck 5 In FL 3319 (D) 3 1998 TO e V general air permit, my facility has ref. A.C.), during the period covered by the sit that has not been in continuous complete that has not been in continuous complete. Further, my annual continuous complete. Further, my annual continuous complete.	Hammacks Blvd 198 TO e V general air permit, my facility has remained in confice. F.A.C.), during the period covered by this statement. It that has not been in continuous compliance during the to to to to	Hammecks Blvd #148 1998 TO e V general air permit, my facility has remained in compliance with E F.A.C.), during the period covered by this statement. YES it that has not been in continuous compliance during the reporting per to

*This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

DEPT. OF ENVIRONMENTAL 248955 (
RESOURCES MANAGEMENT (DERM)
AIR QUALITY MANAGEMENT DIVISION
33 S.W. SECOND AVENUE, SUITE 900
MIAMI, FLORIDA 33130-1540

BEST AVAILABLE COPY

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL RE-INSPECTIO	NC	X .	COMPLAINT/DISCOVE	RY 🗆
RESPONSIBLE OFFICIAL:	vn Cus 0201 Ho 1iami,	stor amn FL hara	n () 100 33 (100)	leaners & Elvas E	
PART I: NOTIFICATION				-	
(check appropriate box)					
New facility notified DARM	30 days prior to sta	rtun		•	
2. Facility failed to notify DARM		•			
2. Facility latted to notify DAR	vi to use general pe	111111			
PART II: CLASSIFICATION		 			
Facility indicated on notification				☐ No notification form	
(check appropriate box) A.	on form that it is.			☐ Drop store/out of busine	ss/petroleum
 Existing small area source dry-to-dry only, x < 140 gal/y transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed before 12/9/91) Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,1 	vr e □ 100 gal/yr	dry-to-d transfer both typ (constru 4. New dry-to-d	lry only, only, x oes, x < octed on large a lry only,	rea source x < 140 gal/yr < 200 gal/yr 140 gal/yr or after $12/9/91$) rea source $140 \le x \le 2,100 \text{ gal/yr}$	-
transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ g			-	00 ≤ x ≤ 1,800 gal/yr ≤ x ≤ 1,800 gal/yr	
(constructed before 12/9/91)	,			or after 12/9/91)	
5. This is a correct facility cla	ssification	λ^{1}	ПN	□Can not determine	
fl .	y qualified for a ge	neral pern		mber above ible for a general permit	
B. The total quantity of perchlor facility was gallons.	oethylene (perc) pu	ırchased v	vithin the	c preceding 12 months by thi	s dry cleaning

ARKS

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) 1. Storing perchloroethylene in tightly sealed and impervious containers? DY DN MN/A 2. Examining the containers for leakage? DY DN 3. Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications? PART IV: PROCESS VENT CONTROLS In Part II-A: If classification 1 has been checked, no controls are required. Proceed to Part V. If classification 2 has been checked, the machine should be equipped with a refrigerated condenser (complete A below). If classification 3 has been checked, the machine should be equipped with either a refrigerated condenser or a carbon adsorber (complete A and B below). Carbon adsorber must have been installed prior to September 22, 1993 If classification 4 has been checked, the machine should be equipped with a refrigerated condenser (complete A and B below). A. Has the responsible official of all new sources and existing large area sources: (check appropriate boxes) 1. Equipped all machines with the appropriate vent controls? 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

n	The second secon			
ß.	Has the responsible official of an existing large or new large area source also:			
1.	Measured and recorded the exhaust temperature on the outlet side of the condenser located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ΠY	□и	
2.	Measured and recorded the washer exhaust temperature at the condenser			
	inlet and outlet weekly?	ΩY	ΩΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΠY	Ωи	□N/A
3.	Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the machine is venting to the adsorber,			
	if machines are equipped with a carbon adsorber?	ΠY	ПN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΠY	ΠN	□N/A
4.	Assured that the sampling port on the carbon adsorber exhaust for measuring perc concentrations is at least 8 duct diameters downstream of any bend, contraction, or expansion; is at least 2 duct diameters upstream from any bend, contraction, or expansion; and downstream from no other inlet?	ΟY	On	□n/a
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΟY	ПN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ПN	□N/A -

PART V: RECORDKEEPING REQUIREMENTS Has the responsible official: (check appropriate boxes) 1. Maintained receipts for perc purchased? 2. Maintained rolling monthly total of perc consumption? 3. Maintained leak detection inspection and repair reports for the following: a. documentation of leaks repaired w/in 24 hrs? or; b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt? OY ON 4. Maintained calibration data? (for applicable direct reading instruments) DY DN 5. Maintained exhaust duct monitoring data on perc concentrations? ΠN 6. Maintained startup/shutdown/malfunction plan? OY ON 7. Maintained deviation reports? Problem corrected? DY DN \Box Y \Box N 8. Maintained compliance plan, if applicable?

P	ART VI: LEAK DETECTION AND	REPAIRS					
١.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
	inspection?			$\nearrow Y$	□N		
2.	Has the facility maintained a leak log?	?		() X	□N		
3.	Does the responsible official check the	e following areas for leaks	s?				
	Hose connections, fittings, couplings, and valves	Y ON ON/A	Muck cookers	ים צום בו צום	N MN/A		
	Door gaskets and seating	AVO ON ON/A	Stills	XY o	N DN/A		
	Filter gaskets and seating	ON ON/A	Exhaust dampers	OY O	N XN/A		
	Pumps	YY ON ON/A	Diverter valves	ם צם	N XINIA		
	Solvent tanks and containers	אורז מם אל	Cartridge filter housings	5 X Y 🗅	N □N/A		
	Water separators	AND NO YA					
4.	Which method of detection is used by	the responsible official?		`			
Visual examination (condensed solvent on exterior surfaces)							
	Physical detection (airflow felt t	hrough gaskets)	/	\mathcal{A}			
	Odor (noticeable perc odor)			À			
	Use of direct-reading instrument	tation (FID/PID/calorimetr	ric tubes)	Ó			
	Halogen leak detector			ū			
	If using direct-reading inst	rumentation, is the equip	oment:	CXV/A			
	a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?		N		
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?						
	OY O	Ν					
	d. Kept in a clean and	secure area when not in us	e?	ם אַם	N		
	e. Verified for accuracy	y by use of duplicate samp	oles (calorimetric only)?	OY O	N		

Inspector's Name (Please Print)

Inspector's Signature

3/23/00 Date of Inspection

Approximate Date of Next Inspection

Machine not operating at time of inspection.

AIRS ID#: 0250890

ACC

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: TOWN CU FACILITY LOCATION: 10201 1 Mi'ami	stom	Cleane	1 5	DATE: 3/23/00
FACILITY LOCATION: 10201 7	Hamm	ocks a	Blvd	
Miami	FL	33194		
		,		
Annual Reporting Period:	3	.19 <u>99</u> то _		3200
Based on each term or condition of the Title V gene 62-213.300, Florida Administrative Code (F.A.C.),	-	•	. 🔀	
If NO, complete the following:			• •	
#1. Term or condition of the general permit that ha	as not been in cor	ntinuous complianc	e during the report	ing period stated above:
Exact period of non-compliance: from		t)	
Action(s) taken to achieve compliance:		·		
Method used to demonstrate compliance:				
#2. Term or condition of the general permit that ha	as not been in cor	ntinuous complianc	e during the report	ing period stated above:
Exact period of non-compliance: from		to		
Action(s) taken to achieve compliance:				
Method used to demonstrate compliance:			`	
As the responsible official, I hereby certify, based of made in this notification are true, accurate and consupon rolling averages of purchase receipts, does not year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name (Ple	mplete. Further, ot exceed 2,100 g MATAMS	my annual consum	ption of perchloroe	ethylene solvent, based

^{*}This form is made available to you as an aid in order to meet your annual compliance certification requirements. It is at the discretion of the responsible official to use this form.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	1PLAINT/DISCOVERY RE-INSPECTION			
TIME IN: 2:35 pm TIME OUT: 2:55	Pm airs id#: 0250890			
TYPE OF FACILITY: PEVC Dry Clea	aner			
FACILITY NAME: TOWN CUSTOM	Cleaners DATE: 3/23/00			
FACILITY LOCATION: 10201 Hamm	acts BIVQ			
Miane, FL	33194			
RESPONSIBLE OFFICIAL: Nazim Dhavan	MSI PHONE NUMBER (305) 382-1488			
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administr	- · · · · · · · · · · · · · · · · · · ·			
Based on the results of the compliance requirements evaluation discrepancies were noted:	·			
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED			
	-			
<u> </u>				
COMMENTS: To all and O				
Excellent Kecordk	Leeping/Good Housekeeping			
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO			
~ 1	C 1			
DATE OF NEXT INSPECTION:	proximate)			
INSPECTION CONDUCTED BY: Debara Triver				
INSPECTOR'S SIGNATURE:	case Print)PHONE NUMBER: (305) 372-6930			
Page	of Revised 10/96			

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. 	C. Signature Agent Addressee D.s delivery address different from item 1? Yes
1. Article Addressed to:	If YES, enter delivery address below:
10 AIRS ID # 0250890001AG NAZIM DHARAMSI TOWN CUSTOM CLEANERS 10201 HAMMOCKS BEVD #148 MIAMI FL 133196	3. Service Type ☑ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7000 1670 (1013 3095 3508
PS Form 3811, March 2001 Domestic Retu	urn Receipt 102595-01-M-1424

	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)			
5 D B	and the second s			
35	OFFICIAL USE			
35	Postage \$			
문	Certified Fee Postmark			
m	Return Receipt Fee (Endorsement Required)			
007	Restricted Delivery Fee (Endorsement Required)			
<u> </u>	Total P 10 AIRS ID # 0250890001AG			
1670	Sent To NAZIM DHARAMSI			
	TOWN CUSTOM CLEANERS			
2000	10201 HAMMOCKS BLVD #148			
7	City, Star MIAMI FL			
{	33196			

300628

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

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S.N.G.S. INC NAZIM DHARAMSI 10201 HAMMOCKS BLVD #148 MIAMI FL 33196 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001 Obj.: 002273



0391298

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TOWN CUSTOM CLEANERS NAZIM DHARAMSI 10201 HAMMOCKS BLVD #148 **MIAMI FL 33196**

FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1 Fund: 20-2-035001

Obj.: 002273



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10201 HAMMOCKS BLVD #148
MIAMI FL
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