

Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

December 11, 2001

Mr. Clarence Deaton
Eagle Cleaners
1368 North Killian Drive, Bay C/D
Lake Park, Florida 33403

Re: Facility No.: 0990481-002

Dear Mr. Deaton:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on November 7, 2001.

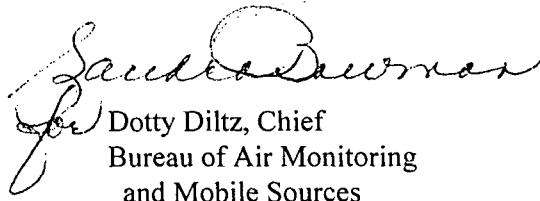
Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements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

"More Protection, Less Process"

Printed on recycled paper.

Fees Paid 97-00
SOC 2
Compliance IN

0990481-002

page 15

1.(a) Add Date Control Device Installed for each machine. If someone purchase date add "Some" for each machine.

Page 16

5. All steam and hot water generating units exempt should be marked. Mark out "x" by No such units on-site.

11/14/2001

Spoke to Clarence Denton and he stated the 1996 and 2000 dry to dry machines have built in control devices.

DEP ROUTING AND TRANSMITTAL SLIP

TO: (NAME, OFFICE, LOCATION)

3. _____

1. _____

4. _____

2. _____

5. _____

PLEASE PREPARE REPLY FOR:

____ SECRETARY'S SIGNATURE

____ DIV/DIST DIR SIGNATURE

____ MY SIGNATURE

____ YOUR SIGNATURE

____ DUE DATE _____

ACTION/DISPOSITION

____ DISCUSS WITH ME

____ COMMENTS/ADVISE

____ REVIEW AND RETURN

____ SET UP MEETING

____ FOR YOUR INFORMATION

____ HANDLE APPROPRIATELY

____ INITIAL AND FORWARD

____ SHARE WITH STAFF

____ FOR YOUR FILES

COMMENTS:

FROM: _____ DATE: _____ PHONE: _____

RECEIVED
NOV - 7 2001

Bureau of Air Monitoring
& Mobile Sources

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	The DKD Companies, Inc dba Eagle Cleaners
2. Site Name (For example, plant name or number):	Eagle Cleaners
3. Hazardous Waste Generator Identification Number:	FLR 0000 26435
4. Facility Location: Street Address: City: County: Zip Code:	1368 N. Killian Dr Bay c/D Lake Park Palm Beach 33403
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0990481-002

Responsible Official

6. Name and Title of Responsible Official: Name: Title:	Clarence Denton Owner
7. Responsible Official Mailing Address: Organization/Firm: Street Address: City: County: Zip Code:	The DKD Companies, Inc 1368 N. Killian Bay c/D Lake Park Palm Beach 33403
8. Responsible Official Telephone Number: Telephone: Fax:	(561) 863-6444 (561) 863-8315

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	John Freer - Plant Manager / Drycleaner
10. Facility Contact Address: Street Address: City: County: Zip Code:	1368 N. Killian Bay c/D Lake Park Palm Beach 33403
11. Facility Contact Telephone Number: Telephone: Fax:	(561) 863-6444 (561) 863-8315

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
11/96	Existing <input checked="" type="radio"/> New	<input checked="" type="radio"/> RC/CA/None required	
12/00	Existing <input checked="" type="radio"/> New	<input checked="" type="radio"/> RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

If the transfer machine was purchased from the manufacturer prior to or on December 9, 1991, it is an **EXISTING** unit. If the transfer machine was purchased from the manufacturer between December 9, 1991 and September 22, 1993, it is a **NEW** unit (no units purchased after September 22, 1993 are allowed to operate under this general permit). For each transfer machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	
	Existing/New	RC/CA/None required	

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

Unopened store (date of expected opening)

3. What is the facility's source classification based on the definitions found in section (3) of Part II?
Indicate with an "X". Select one classification only.)

- Small Area Source
- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
 - Transfer only on-site (used less than 200 gallons of perc per year)
 - Both machine types on-site (used less than 140 gallons of perc per year)
- Large Area Source
- Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year)
 - Transfer only on-site (used 200 - 1,800 gallons of perc per year)
 - Both machine types on-site (used 140 - 1,800 gallons of perc per year)

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

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

5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Verify that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).

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

How many boilers do you have on-site?

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

What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
 No. 6 fuel oil Other (please list) _____

6. Equipment Monitoring and Recordkeeping Information

Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:

- (a) Purchase receipts and solvent purchases/solvent addition log
- (b) Leak detection inspection and repair
- (c) Refrigerated condenser temperature monitoring
- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

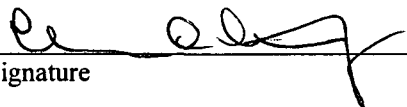
- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
- No DEP air permits currently exist for the operation of the facility indicated in this notification form.

Responsible Official Certification

I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification form.

I will promptly notify the Department of any changes to the information contained in this notification.

Clarence Denton
Print name of responsible official


Signature

10/31/01
Date

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
NOV - 8 2000

Bureau of Air Monitoring
& Mobile Sources

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form. Send completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	Chandan Cleaners & Valet LLC		
2. Site Name (For example, plant name or number):	Crest Cleaners & Valet DBA		
3. Hazardous Waste Generator Identification Number:	FLD 0326 24 629		
4. Facility Location: Street Address:	5800 Lake Underhill Road		
City:	County:	Zip Code:	
Orlando	Orange	32807	
5. Facility Identification Number (DEP Use ONLY - do not fill in):	0950322-002		

Responsible Official

6. Name and Title of Responsible Official:	Name: Satpal Singh Title: Owner		
7. Responsible Official Mailing Address:	Organization/Firm: Chandan Cleaners & Valet		
Street Address:	5800 Lake Underhill Road		
City:	County:	Zip Code:	
Orlando	Orange	32807	
8. Responsible Official Telephone Number:	Telephone: (407) 275-0330 Fax: () -		

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):	Satpal Singh		
10. Facility Contact Address:	Street Address: 5800 Lake Underhill Road		
City:	County:	Zip Code:	
Orlando	Orange	32807	
11. Facility Contact Telephone Number:	Telephone: (407) 275-0330 Fax: () -		

Facility Information

1.(a) DRY-TO-DRY MACHINES ONLY

How many dry-to-dry machines do you have on-site?

For each dry-to-dry machine on-site, please provide the following information:

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
April 19, 1996	Existing <input checked="" type="radio"/> New	<input checked="" type="radio"/> RC <input type="radio"/> CA <input type="radio"/> None required	Same
_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

*CONTROL DEVICE KEY: RC = refrigerated condenser CA = carbon adsorber

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site?

How many dryers/reclaimers do you have on-site?

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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 KEY: RC = refrigerated condenser CA = carbon adsorber

2.(a) How much perchloroethylene (perc) have you used within the last 12 months?

gallons (You must fill this in)

(b) If less than 12 months, how many? months

Check why it is less than 12 months: New owner: Did not keep records:

New store: New machine

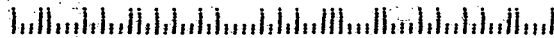
Unopened store (date of expected opening _____)



1963 P.G.A. Boulevard
Palm Beach Gardens, FL 33408



GENERAL PERMITS SECTION
BUREAU OF AIR MONITORING + MOBILE SOURCES
DEPT. OF ENVIRONMENTAL PROTECTION
2600 BLAIR STONE ROAD
TALLAHASSEE, FL 32399-2400

32399+2400 

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

466263 DEC 20 2006

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

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 990481 ✓
THE DKD COMPANIES INC
1368 N Killian Drive Bay C/D
LAKE PARK, FLORIDA 33403

Bureau of Air Monitoring
& Mobile Sources

DEC 21 2006

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

PAID

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.

THE DKD COMPANIES, INC.

Dept of Envir Protection DC Re

15602

Check Number: 15602
Check Date: Dec 15, 2006

Check Amount: \$50.00

Item to be Paid - Description

Discount Taken Amount Paid

990481

50.00

E DKD COMPANIES, INC.

Dept Of Environmental

443519 DEC202004

Check Number: 14031
Check Date: Dec 13, 2004

Check Amount: \$50.00
Discount Taken Amount Paid

Item to be Paid - Description

Air Permit

50.00



THE DKD COMPANIES, INC.
DBA EAGLE CLEANERS
1368 N. KILLIAN DR. BAY C/D
LAKE PARK, FL 33403
(561) 863-6444

COLONIAL BANK
PALM BEACH GARDENS, FLORIDA 33418

14031

Dec 13, 2004 *****\$50.00
DATE AMOUNT

Memo:

Fifty and 00/100 Dollars

AMSD (699048)



BY THE ORDER

Dept Of Environmental Protection
Title V General Permits
PO Box 3070
Tallahassee, FL 32315-3070

[Handwritten Signature]

[Redacted line]

Security Features Included. Details on back.

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

457002 DEC192005

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

990481 10
EAGLE CLEANERS-KILLIAN RD
1368 N Killian Drive Bay C/D
LAKE PARK, FL 33403

DEC 21 2005
Bureau of Air Management
Administrative Services

FLAIR ACCT. CODE 372020350013755010000
BENEFITTING OBJECT CODE 002000
BENEFITTING CATEGORY 000200

FOR GOVERNMENT USE ONLY
ORG.: 37550101000 EO: A1
FUND: 20-2-035001
OBJECT: 002273

Printed on recycled paper.



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

434308 DEC152003

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

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

990481
CLARENCE DENTON
EAGLE CLEANERS-KILLIAN RD
1368 N KILLIAN DRIVE BAY C/D
LAKE PARK FL 33403

RECEIVED
DEC 17 2003
Bureau of Air Management
Administrative Services

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



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

421041 DEC23 2002

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

TOTAL AMOUNT DUE: \$50.00

X
RECEIVED
JAN 02 2003
Bureau of Air Marketing
& Mobile Sales

Do NOT Remove Label

AIRS ID#0990481
EAGLE CLEANERS-KILLIAN RD CLARENCE D DENTON JR 1368 N KILLIAN DRIVE BAY C/D LAKE PARK FL 33403

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



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

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

TOTAL AMOUNT DUE: \$50.00

412399 DEC31 2001

Do NOT Remove Label

AIRS ID # 0990481
EAGLE CLEANERS-KILLIAN RD CLARENCE D DENTON JR 1368 N KILLIAN DRIVE BAY C/D LAKE PARK FL 33403

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

THE DKD COMPANIES, INC.

Dept Of Envir Protection DC

Check Number: 11631
Check Date: Dec 24, 2001 **11631**

Check Amount: \$50.00
Discount Taken Amount Paid

Item to be Paid - Description

Air Permit 50.00

THE DKD COMPANIES, INC.

Dept Of Environmental

Check Number: 12423
Check Date: Dec 16, 2002 **12423**

Check Amount: \$50.00
Discount Taken Amount Paid

Item to be Paid - Description

Air Permit 50.00