

Department of **Environmental Protection**

Lawton Chiles Governor

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

Virginia B. Wetherell Secretary

November 17, 1997

Mr. Rafael Lasprilla Fountain Cleaners 4602 Jog Road Lake Worth, Florida 33467

Re: Facility No.: 0990521

Dear Mr. Lasprilla:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on October 17, 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. Al Grasso, Palm Beach County

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

Printed on recycled paper.

#0990521

p13 4. Old addiess for facility. Add County. 7. Add Pryanization/Firm and street dodgess and county for Responsible Official. 15 4 Existing large area source refrigerated condenser should not be murbed marbout and initial. 5. Choose one. (c) Not refused warbout ond initial P16 (top) Choose one of first is chosen, add permit #. Responsible Official sign and date for changes.

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):
RAFARL LASPRILLA
2. Site Name (For example, plant name or number):
FOUNTAIN CLEANERS
3. Hazardous Waste Generator Identification Number:
4. Facility Location:
Street Address:
City: 4602 Jog Rand County: LAKE Warth Zip Code: 33467
5. Facility Identification Number (DEP Use):
Responsible Official
6. Name and Title of Responsible Official:
MAPARL LASPAILLA PRAS.
7. Responsible Official Mailing Address: Organization/Firm:
Street Address:
City: 4602 for Boall County: LAKE was the Zip Code: 33467
8. Responsible Official Telephone Number:
Telephone: (56/) 968 - 3223 Fax: () -
Estility Contact /If different from Degrandish Official)
Facility Contact (If different from Responsible Official)
9. Name and Title of Facility Contact (For example, plant manager):
CANB-
10. Facility Contact Address:
Street Address:
City: County: Zip Code:
11. Facility Contact Telephone Number:
Telephone: () - Fax: () -
·

RECEIVED

OCT 17 1997

DEP Form No. 62-213.900(2) Effective: 6-25-96 Page 13 of 16.

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	l	Machine	Control
		Initially	Device		Initially	Device		Initially	Device
Type of Machine	, ID	Purchased	Installed	ID	Purchased	Installed	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-9
Dry-to-Dry Unit		120 T.	Ke -	9	- 1990	Bell			
(1) w/ ref. condenser	1	· • • • • • • • • • • • • • • • • • • •	<u> </u>	Ĭ ^		1			
(2) w/ carbon adsorber									
(3) w/ no controls							_		
Washer Unit						•		-	
(4) w/ ref. condenser									٠,,
(5) w/ carbon adsorber									
(6) w/ no controls									
Dryer Unit		•						•	
(7) w/ ref. condenser									
(8) w/ carbon adsorber									
(9) w/ no controls									
Reclaimer Unit				•	·			•	
(10) w/ ref. condenser									
(11) w/carbon adsorber									
(12) w/ no controls									
(b) Control devices are(c) No control devices	_		•						
2.(a) What was the total of	uant gallo	ity of perchic ons	oroethylene (perc)	purchased in	n the latest 12	l mon	iths?	
(b) If less than 12 mont Check why it is less					_] New store	: [] Did	not k	eep records:	
3. What is the facility's so (Indicate with an "X".					nitions found	d in section (3) of	Part II?	
Existing small ar	ea so	urce [Ne	w sn	nall area sour	ce [·	
Existing large are	a soi	urce []	Ne	w lar	ge area sour	ce []			

DEP Form No. 62-213.900(2)

Effective: 6-25-96

 What control technology is required on machines (Indicate with an "X".) 	pursuant to section (5) of F	art II of this notification form?
Existing large area source. Carbon adsorber []	Refrigerated condenser	
New small area source Refrigerated condenser		
New large area source Refrigerated condenser	· ·	
5.7 A facility which contains non-exempt emissions to Rule 62-213.300, F.A.C. Verify that all steam ar exemption criteria or that no such units exist on-site	nd hot water generating unit	
All steam and hot water generating units on-site (1) boiler HP or less), and (2) are fired exclusively by during which propane or fuel oil containing no more	natural gas except for perio	ds of natural gas curtailment
All steam and hot water generating units exempt- No such units on-site		
		•
Equipment Monitoring	and Recordkeeping Inform	nation
Check all logs which are required to be kept on-site	in accordance with the requ	irements of this general permit:
(a) Purchase receipts and solvent purchases	i	
(b) Leak detection inspection and repair		
(c) Refrigerated condenser temperature monitoring		
(d) Carbon adsorber exhaust perc concentration mo	nitoring	
(e) Instrument calibration		
(f) Start-up, shutdown, malfunction plan		

DEP Form No. 62-213.900(2) Effective: 6-25-96

Surrender of Existing Air Permit(s)

Please indicate	e 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)
نـــا	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
i.T	
this notifi statement maintain	dersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in action. I hereby certify, based on information and belief formed after reasonable inquiry, that the is 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 ith 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.
Jak.	10-8-97



Department of **Environmental Protection**

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

Virginia B. Wetherell Secretary

December 15, 1997

Mr. Rafael Lasprilla Fountain Cleaners 4602 Jog Road Lake Worth, Florida 33467

Dear Mr. Lasprilla:

The Bureau of Air Monitoring and Mobile Sources recently received your Perchloroethylene Dry Cleaning Notification Form and check (#2346) in the amount of \$50.00.

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 904/488-6140.

Sincerely,

Sandra Bowman

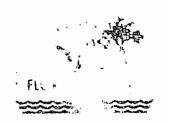
Environmental Manager

Mobile Source Control Section

Bureau of Air Monitoring and Mobile Sources

/SB

Enclosure



Department of Environmental Protection

The Property Charles For Big 1975 (1975) Sherriya ne Road (1975) Sherriya 1975 (1975) Sherriya 1975

Secretary

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DEC 1 2 1997

Bureau of Air Monitoring & Mobile Sources

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL CO	MPLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:55 TIME OUT: 2: TYPE OF FACILITY: Dry Cleanin FACILITY NAME: Fountain FACILITY LOCATION: 4602 Jo G Lake Woo RESPONSIBLE OFFICIAL: RAFAEL LASP? Based on the results of the compliance requirements evaluation compliance with DEP Rule 62-213.300, Florida Administration	trative Code (F.A.C.).
Based on the results of the compliance requirements evaludiscrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	-
COMMENTS:	·
	pproximate)
INSPECTION CONDUCTED BY: INSPECTOR'S SIGNATURE: (P)	Please Print) PHONE NUMBER: 355-307

MMM

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL

X

COMPLAINT/DISCOVERY

Best Available Copy

RE-INSPECTION

NO

I	DATE: 10-8-97 TIM		TIME OUT: 12:00
FACILITY NAME:	011101101	, - 8 -	
	4602 JOG		
	are worth,		33467
RESPONSIBLE OFFICIAL :	RAFAEL LASPI	RILLAHONE: _	968-3223
CONTACT NAME:		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 Failed last Year (1996

to Notify Tallahassee

PART II: CLASSIFICATION

Facility indicated on notification form that it is: (check appropriate box)

 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)

- 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)
- 5. This is a correct facility classification

- No notification form Helped them fill on Drop store/out of business/petroleum No tifical
- 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 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)
- Y

ΠN

Can not determine

If no, please check the appropriate classification:

- facility qualified for a general permit as number 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 _55 gallons.

1 of 5

Is the responsible official of the dry cleaning facility: (check appropriate boxes) ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? □N □N/A 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 □N □N/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN WNA 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? DY DN 2. Equipped dry-to-dry machines with a closed-loop vapor venting system? DY DN DN/A 3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door? OY ON ON/A 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis? OY ON 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F? DY DN DN/A 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged? DY DN

PART III: GENERAL CONTROL REQUIREMENTS

В.	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?	ΩY	□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	ПИ	□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?	ΩÝ	ПΝ	□N/A
	Is the perc concentration equal to or less than 100 ppm?-	ΠY	ΠИ	ŪN/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?	ΠY	ΠN	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	ΩY	ПN	□N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ПΝ	□N/A

PART V: RECORDKEEPING REQUIREMENTS	
Has the responsible official:	
(check appropriate boxes)	, .
1. Maintained receipts for perc purchased? as ked to keep ? Leeps 2. Maintained reling monthly overages of perc consumption?	Ø Y □N
2. Maintained rolling monthly averages of perc consumption?	DY X (N
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	🗚 un on/a
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	AY ON ON/A
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN X N/A
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON YON/A
6. Maintained startup/shutdown/malfunction plan?	X DN
7. Maintained deviation reports? Asked to keep any	DY DAN ON/A
7. Maintained deviation reports? Asked to keep any Problem corrected? Levi atten Pepo of	XY ON ON/A
8. Maintained compliance plan, if applicable?	A/NE NO YO

PART VI: LEAK DETECTION AND REPAIRS

1.	Does the responsible official conduct a	weekly (for small sources	s, bi-weekly) leak detection ar	
	inspection?			N□ Y
2.	Has the facility maintained a leak log?	asked to keep	more detail	pa(Y □N
3.	Does the responsible official check the	following areas for leaks?	?	
	Hose connections, fittings, couplings, and valves	AY ON ON/A	Muck cookers	OY ON TANA
	Door gaskets and seating	AVO ON ON/A	Stills	MY ON ON/A
	Filter gaskets and seating	AND ND YA	Exhaust dampers	AND NO YOU
	Pumps	VAY ON ON/A	Diverter valves	XY ON ON/A
	Solvent tanks and containers	DAY ON ON/A	Cartridge filter housings	MY ON ON/A
	Water separators	באמם מם אלם		
4.	Which method of detection is used by the	he responsible official?	•	
	Visual examination (condensed so	olvent on exterior surface	s)	
	Physical detection (airflow felt the	rough gaskets)		Z `
	Odor (noticeable perc odor)			
	Use of direct-reading instrumenta	ition (FID/PID/calorimetr	ric tubes)	
	Halogen leak detector	``		D A N/A
	If using direct-reading instr	umentation, is the equip	ment:	□N/A
	a. Capable of detecting	perc vapor concentrations	s in a range of 0-500 ppm?	מם עם
	b. Calibrated against a s (PID/FID only)?	standard gas prior to and	after each use	מם עם
	c. Inspected for leaks ar	nd obvious signs of wear o	on a weekly basis?	ОУ ОИ
	d. Kept in a clean and s	ecure area when not in us	se?	OY ON
	e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	מם עם

R.V. Chokshi

Inspector's Name (Please Print)

10-8-97

Date of Inspection

Inspector's Signature

10-8-98

Approximate Date of Next Inspection

·.		
ADDITIONAL SITE INFORMATION:		
Waste area Snotting area Sealed	ĭ∑i ĭ∑i	[`] [\]
They will seal spotting area by 11- per owner	-15-	97
2. Disposal of Water from Water Separator using approved evaporator or contracted Wastewater service	ĺΧΙ	[] [X]
They are Considering to buy FDEP approved evaporator for t	wast Was	e tel

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COMP	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 10:50 TIME OUT: 11:2	AIRS ID#: 0990521
TYPE OF FACILITY: Doy Cleaning	
FACILITY NAME: Town tain	leaners DATE: 8-7-98
	Road
Lake Worth	
RESPONSIBLE OFFICIAL: RAFAEL LASPRIL	LA PHONE NUMBER: 968-3223
Based on the results of the compliance requirements evaluate compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evaluate	ed during this inspection, the following compliance
discrepancies were noted:	Bureau of Air Monit
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUESED
* Poor Record Keeping	Will be se inspected in
Asked to keep record for	two fron the again
Perc Purchase, leak check et	
*Gave them FDEP Calender	
for Keeping	
	•
•	
	*.
• •	· ya
COMMENTS:	· ·
	· · · · · · · · · · · · · · · · · · ·
The Annual Compliance Certification form has been properly certif	ied and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	
. 6	oproximate)
INSPECTION CONDUCTED BY:	ease Print)
INSPECTOR'S SIGNATURE VE CLOSES	1 PHONE NUMBER: 355-3070

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST



TYPE OF INSPECTION:

ANNUAL

X

COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS 1D#: 099052 DATE: 8-7-98 TIME IN: 10:50 TIME OUT: 11:25
FACILITY NAME: Fountain cleaners
FACILITY LOCATION: 4602 JOG Road
Lake Worth, FL 32 467
RESPONSIBLE OFFICIAL: RAFAEL LASPAILLA PHONE: 968-3223

	_	7			•
CONTACT NAME:	 .	•	PHONE:	•	
CONTACT HAME.			zuone.		
	••••				

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: (check appropriate box)

- □ No notification form
- ☐ Drop store/out of business/petroleum

- 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 gal/yr transfer only, x < 200 gal/yr both types, x < 140 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
- DN | Can not determine

If no, please check the appropriate classification:

- facility qualified for a general permit as number _____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 65 gallons.

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?	AND ND YA		
2. Examining the containers for leakage?	MY ON ON/A		
3. Closing and securing machine doors except during loading/unloading?	PÝ □N		
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ZY ON ON/A		
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	אות מום אם אם		
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 refrige (complete A below).	gerated condenser		
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 refrience (complete A and B below).	gerated condenser		
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?	ĎΑ ПИ		
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	OY ON ON/A		
3. Equipped the condenser with a diverter valve st airflow will be directed away from the condenser upon opening the door?	OY ON ON/A		
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	DY DN		
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	DY DN DN/A		
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	ΟΥ. ΟΝ		

В.	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?	אם עם
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	OY ON ON/A
	Is the temperature differential equal to or greater than 20° F?	DY DN DN/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?	אומם מם צִׁם
	Is the perc concentration equal to or less than 100 ppin?	אואבו אם צם
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?	OY ON ON/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?	מאם אם עם

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes)			
1. Maintained receipts for perc purchased? Asked to Keep Records & Receipts	DY X		
2. Maintained rolling monthly averages of perc consumption?	DY XX		
3. Maintained leak detection inspection and repair reports for the following:	•		
a. documentation of leaks repaired w/in 24 hrs? or;	אואם אם צאַ		
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	ANO NO YO		
4. Maintained calibration data? (for applicable direct reading Instruments)	AINM NO YO		
5. Maintained exhaust duct monitoring data on perc concentrations?			
6. Maintained startup/shutdown/malfunction plan?			
7. Maintained deviation reports?			
Problem corrected?	MY ON ONIA		
8. Maintained compliance plan, if applicable?	DY ON ONIA		

THE THE BUILD BUIL				
1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair				
inspection?		1	Дагу Ои	
2. Has the facility maintained a leak log?	Agked to Keep	, Log.	□Y ρα Ń	
3. Does the responsible official check the	following areas for leaks?	U		
Hose connections, fittings, couplings, and valves	אום אם צאם A	Muck cookers	אואס אם אם	
Door gaskets and seating	אואם אם צען	Stills	אוחם אם צאק	
Filter gaskets and seating	אומם מם צאק	Exhaust dampers	אוא בע אם עם אם	
Pumps	אואם אם צאק	Diverter valves	ארם אם צעם אות	
Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	אואם אם אַעַ	
Water separators	DY ON ON/A	• • •		
4. Which method of detection is used by t	the responsible official?		/	
Visual examination (condensed solvent on exterior surfaces)				
Physical detection (airflow felt through gaskets)				
Odor (noticeable perc odor)				
Use of direct-reading instrument	ation (FID/PID/calorimetric	c tubes)	DIA)	
Halogen leak detector	;	•	D MIG	
If using direct-reading inst	rumentation, is the equipr	nent:	ØN/A	
a. Capable of detecting	g perc vapor concentrations i	in a range of 0-500 ppm?	מם עם	
b. Calibrated against a (PID/FID only)?	standard gas prior to and af	fter each use	מם עם	
c. Inspected for leaks a	and obvious signs of wear on	a a weekly basis?	DY DN	
d. Kept in a clean and	secure area when not in use	्री	DY DN	
e. Verified for accurac	y by use of duplicate sample	es (calorimetric only)?	DY DN	

Date of Inspection

ADDITIONAL SITE INFORMATION:

1.	Secondary Containment for:	Dry Cleaning Machine & Storage area	Yes NO
		Waste area	
		Spotting area Sealed	11

2. Disposal of Water from Water Separator using approved evaporator [] [] or contracted Wastewater service [] []

State (per Rafael)

Satety Kleen Pick up the

Worste as needed

A Gave Rafael's mother FDEP Calender

for Reard Keeping.

Perchase receipts on site, Record leak Perc lusages when purchase, Record leak Check, and Moniter temperature on FDEP Calender as required by law of state of Florida.

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

YPE OF INSPECTION:	ANNUAL	COMPLA	INT/DISCOVERY	RE-INSPECTION
IME IN: 10:45		1:15	AIRS 10#:	1990521
YPE OF FACILITY:	Doy Clean	ing		
ACILITY NAME: FO	untain c	lean	985	OATE: 5-13-99
ACILITY LOCATION:	4602 Jog	Rd		
	ake Word	h, F	-L 3346	7
ESPONSIBLE OFFICIAL: /	Rafael Las	prilla	PHONE NUMBER	1: 968-3223
	the compl <u>ia</u> nce requirement Rule 62-213.300, Florida A		during this inspection, the fa	scility is found to be in
Based on the results of discrepancies were not	-	nts evaluated	during this inspection, the fo	ollowing compliance
COMPLIANCE REQ	UIREMENT/PROBI	EM	FOLLOW-UP AC	TION REQUIRED
	•	1		
•			•	
	<u> </u>			
. •	•	-	P	^
	•		Sur VIN	· CL
		·	· Olig Vind	16 ₁₁
				
·	- •			
	· •			
COMMENTS:				
		•		
The Annual Compliance Certi	ification form has been pro	perly certified	eceni eti vi benimdue bns.	tor. YES NO
DATE OF NEXT INSPECT	A1 ac		00	
	D 19		oximate)	
INSPECTION CONDUCTE	ED BY: K. V.	<u> NOF</u>	-1/11	·
INSPECTOR'S SIGNATUR	REIQ. V. Ch	o with	se Print) PHONE NUMB	ER:355-3070

PERCHLOROETHYLENE DRY CLEANERS

ARMS

TITLE VIGENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:

ANNUAL



COMPLAINT/DISCOVERY

RE-INSPECTION

AIRS 10#: 099052 DATE: 5-13-	93 TIME IN: 10:45 TIME OUT: 11:15				
FACILITY NAME: Fountain Cleaners					
FACILITY LOCATION: 4602 Jog Rd					
Lake W	Lake Worth FL 33467				
	LASPAILIPHONE: 968-3223				
RESPONSIBLE OFFICIAL:	PHONE: 100 - 32-3				
CONTACT NAME:	PHONE:				
PART I: NOTIFICATION					
(check appropriate box)					
1. New facility notified DARM 30 days prior to star	tup				
2. Facility failed to notify DARM to use general per	mit 🗆				
PART II: CLASSIFICATION					
Facility indicated on notification form that it is:	☐ No notification form				
1	-				
(check appropriate box) A.	☐ Drop store/out of business/petroleum				
(check appropriate box) A. 1. Existing small area source	☐ Drop store/out of business/petroleum 2. New small area source ☐				
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr	☐ Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr				
(check appropriate box) A. 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	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr				
(check appropriate box) A. 1. Existing small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr				
(check appropriate box) A. 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) 3. Existing large area source	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source				
(check appropriate box) A. 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) 3. Existing large area source dry-to-dry only, 140 \le x \le 2,100 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr				
(check appropriate box) A. 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) 3. Existing large area source	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 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				
(check appropriate box) A. 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 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				
(check appropriate box) A. 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 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				
(check appropriate box) A. 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classific	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 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) Y \(\text{\text{Can}} \) \(\text{C				
(check appropriate box) A. 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a galification of the statement of the second of	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) Y □N □Can not determine				
(check appropriate box) A. 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) 3. Existing large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed before 12/9/91) 5. This is a correct facility classification If no, please check the appropriate classification facility qualified for a general facility exceeds above 15.	Drop store/out of business/petroleum 2. New small area source dry-to-dry only, x < 140 gal/yr transfer only, x < 200 gal/yr both types, x < 140 gal/yr (constructed on or after 12/9/91) 4. New large area source dry-to-dry only, 140 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 1,800 gal/yr (constructed on or after 12/9/91) Y □N □Can not determine cation: eneral permit as numberabove				

Is the responsible official of the dry cleaning facility: (check appropriate boxes). ON ON/A 1. Storing perchloroethylene in tightly sealed and impervious containers? ZY ON ON/A 2. Examining the containers for leakage? Closing and securing machine doors except during loading/unloading? 4. Draining cartridge filters in their housing or in sealed containers for at ZY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN ZYNA 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? DY DN DNA 3. Equipped the condenser with a diverter valve so airflow will be directed away from the DY DN DN/A condenser upon opening the door? 4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated DY DV condenser on a weekly/bi-weekly/basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the QY QN QN/A condenser exceeded 45° F? 5. Conducted all temperature monitoring after an appropriate cooldown period and after DY DX verifying that the coolant had been completely charged?

PART III: GENERAL CONTROL REQUIREMENTS

Β.	Has the responsible official of an existing large or new large area source also:			
ι.	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?	۵٧	ПN	
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	ΟY	ПΝ	□N/A
	Is the temperature differential equal to or greater than 20° F?	ΩY	ИП	□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?	QΥ	ΠN	□N/A
	Is the perc concentration equal to or less than 100 ppm?	ΩY	ПИ	_ □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?	ПY	ВИ	□N/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	[:] _Ф ү	□и	□N/A
6	. Routed airflow to the carbon adsorber (if used) at all times?	ΠY	ПИ	□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: DY ON ON/A 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 ZY ON ON/A and parts installed with 5 days of receipt? DY DN ZNA 4. Maintained calibration data? Gerapplicable direct reading instruments) DY DN DNA 5. Maintained exhaust duct monitoring data on perc concentrations? MY ON 6. Maintained startup/shutdown/malfunction plan? DY ON ONA 7. Maintained deviation reports? PY ON ONA Problem corrected? DY DN ZNA Maintained compliance plan, if applicable?

PART VI: LEAR DETECTION AND	REPAIRS			
1. Does the responsible official conduct :	weekly (for small sourc	es, bi-weekly) leak detection	and repair	
inspection?			DY ON	1
2. Has the facility maintained a leak log?			מי מא]
3. Does the responsible official check the	e following areas for leak	ss?		
Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	DY ON DAVA	
Door gaskets and seating	MY ON ON/A	Stills	AINO NO YE	
Filter gaskets and seating	MY ON ON/A	Exhaust dampers	DY DN PAN/A	•
Pumps	אותם מם פֿען	Diverter valves	MY ON ON/A	
Solvent tanks and containers	DY ON ONA	Cartridge filter housing	gs PY ON ON/A	<u></u>
Water separators	DY ON ON/A			÷
4. Which method of detection is used by	the responsible official?			
Visual examination (condensed	solvent on exterior surfa	ces)	₽ /	
Physical detection (airflow felt	through gaskets)			
Odor (noticeable perc odor)				, 53.
Use of direct-reading instrume	ntation (FID/PID/calorim	etric tubes)	DNA	
Halogen leak detector			PNIA	
If using direct-reading in	strumentation, is the equ	uipment:	DN/A	
a. Capable of detecting	ng perc vapor concentrati	ons in a range of 0-500 ppm?	OY ON	
b. Calibrated against (PID/FID only)?	a standard gas prior to an	id after each use	OY ON	
c. Inspected for leak	and obvious signs of we	ar on a weekly basis?	DY DN	
d. Kept in a clean an	d secure area when not in	use?	אם עם	
e. Verified for accur	acy by use of duplicate sa	imples (calorimetric only)?	מם עם	
RAFAEL ASP	RillA ame	Responsibile	ficial's Sig	natu
(Please Print) Q. V. ChokSh	i	5-13-99	7	
Inspector's Name (Please 2. V. Choky	r Priat)	Date of Inspession		
Inspector's Signature		Approximate Date	e of Next Inspection	-

<u></u>	·
ADDITIONAL SITE INFORMATION:	
1. Secondary Containment for: Dry Cleanin	Yes NO ag Machine & Storage area [] Waste area [] Spotting area Sealed []
	ted Wastewater service [][]
Safety Kleen pick MCF When	s up the waste

TYPE OF INSPECTION: (ANNUAL)	COMPLAINT/DISCOVERY RE-INSPECTION
TIME IN:TIME OUT:_	AIRS ID#: 0990 531
TYPE OF FACILITY: DLy cleaming	
FACILITY NAME: For when a	Cleamonss DATE: 12/26/00
	Rd Lake Work 33867
RESPONSIBLE OFFICIAL: Ruffeel Lugard	PHONE NUMBER: 968 3223
compliance with DEP Rule 62-213.300, Florida	ents evaluated during this inspection, the facility is found to be in Administrative Code (F.A.C.). ents evaluated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROB	LEM FOLLOW-UP ACTION REQUIRED
poralle/2001	
•	
OMMENTS:	
	•
ne Annual Compliance Certification form has been properly	certified and submitted to the inspector. YES NO
ATE OF NEXT INSPECTION:	12/01
	(Approximate)
SPECTION CONDUCTED BY:	(Please Print)
spector's signature:	Lubb PHONE NUMBER: 355 3070
Pe	age of . Revised 10/

PERCHLOROETHYLENE DRY CLEANERS

ANNUAL

TYPE OF INSPECTION:

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

COMPLAINT/DISCOVERY

RE-INSPECT	ION
a ·	TIME IN: TIME OUT:
FACILITY NAME:	Cleanory
FACILITY NAME: FOUR LOCATION: 4602	Jog hy Luke Worth 33467
RESPONSIBLE OFFICIAL: Rufuel 1	-usg Na PHONE: 968 3223
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to sta	artup 🚨
2. Facility failed to notify DARM to use general pe	ermit O
PART II: CLASSIFICATION	
Facility indicated on notification form that it is: (check appropriate box) A.	☐ No notification form ☐ Drop store/out of business/petroleum
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 gal/yr transfer only, x < 200 gal/yr both types, x < 140 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 □N □Can not determine
	ation: neral permit as number above nits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) pu facility was gallons.	rchased within the preceding 12 months by this dry cleaning

Is the responsible official of the dry cleaning facility:	2" .
(check appropriate boxes)	,
Storing perchloroethylene in tightly sealed and impervious containers?	AY ON ON/A
2. Examining the containers for leakage?	A/NO NO YE
3. Closing and securing machine doors except during loading/unloading?	DAY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	DY ON ON/A
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	אועם אם צם
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 refi (complete A below).	rigerated condenser
If classification 3 has been checked, the machine should be equipped with either condenser or a carbon adsorber (complete A and B below). Carbon adsorber m prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refr (complete A and B below).	rigerated condenser
A. Has the responsible official of all new sources and existing large area source (check appropriate boxes)	:s:
1. Equipped all machines with the appropriate vent controls?	DY DN
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	□Y □N □N/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON ON/A
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	OY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45° F?	OY ON ON/A
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	אם עם

PART III: GENERAL CONTROL REQUIREMENTS

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 located on dry-to-dry, reclaimer, and dryer machines on a weekly basis?	ם צי מ	אנ
2.	Measured and recorded the washer exhaust temperature at the condenser		
	inlet and outlet weekly?		IN □N/A
	Is the temperature differential equal to or greater than 20° F?		IN □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		IN DN/A
	Is the perc concentration equal to or less than 100 ppm?	OY C	IN □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 po other inlet?	OY 0	in □n/a
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	□Y □	N □N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY O	N □N/A

PART V: RECORDKEEPING REQUIREMENTS					
Has the responsible official: (check appropriate boxes)					
1. Maintained receipts for perc purchased?	אם עם				
2. Maintained rolling monthly total of perc consumption?	מט עוש				
3. Maintained leak detection inspection and repair reports for the following:					
a. documentation of leaks repaired w/in 24 hrs? or;	DAY ON ON/A				
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	אוחם חם צבא				
4. Maintained calibration data? (for applicable direct reading instruments)	AVAG NO YO				
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN ANA				
6. Maintained startup/shutdown/malfunction plan?	ØY ON				
7. Maintained deviation reports?	DY ON ON/A				
Problem corrected?	DY ON ON/A				
8. Maintained compliance plan, if applicable?	OY ON EQNIA				

ADD	ITIONAL SIT	re infori	MATION:						
1.	Secondary	Contain	ment for:	Dry	Cleaning	Waste an	& Storage area rea g area Sealed	Yes I	NO [] []
						·			·
2.	Disposal (of Water	from Wate				roved evaporato	. []	
	·		\ .	or c	contracted	1 Wastewa	ater service	, 1	الم
	<u> </u>		:	•					
	,								
						, · ,	vnojev		••
	;				·		**************************************		
						•			

1. Does the responsible official conduct	a weekly (for small source	ces, bi-weekly) leak detection	and repair
inspection?			NO Y
2. Has the facility maintained a leak log	?		DY ON
3. Does the responsible official check th	e following areas for leak	ss?	
Hose connections, fittings, couplings, and valves	AND NO YEA	Muck cookers	OY ON OWA
Door gaskets and seating	אוחם מם צ'פ	Stills	N/A
Filter gaskets and seating	אואם אם צום	Exhaust dampers	DY DN BALIA
Pumps	AY ON ON/A	Diverter valves	MY ON ON/A
Solvent tanks and containers	אוחם אם עם	Cartridge filter housings	MY ON ON/A
Water separators	MY ON ON/A		
4. Which method of detection is used by	the responsible official?		
Visual examination (condensed	solvent on exterior surfac	es)	ø ∣
Physical detection (airflow felt t	hrough gaskets)		ø
Odor (noticeable perc odor)	•	·	
Use of direct-reading instrument	ation (FID/PID/calorimet	ric tubes)	A NY
Halogen leak detector		•	Paur
If using direct-reading inst	rumentation, is the equi	pment:	ØN/A
a. Capable of detecting	perc vapor concentration	is in a range of 0-500 ppm?	מם עם
b. Calibrated against a (PID/FID only)?	standard gas prior to and	after each use	אם צם
c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	מם צם
d. Kept in a clean and s	secure area when not in us	se?	מם צם
e. Verified for accuracy	by use of duplicate samp	ples (calorimetric only)?	מם צם
PRAFAEL LASPRIC	H A	YMHX.	
ponsible Official's Nam (Please Print)	<u> </u>	Responsible offi	cial's Sign
Inspector's Name (Please Pr	int)	Date of Inspection	<i>₩</i>
har Lubba		12/01	
Inspector's Signature	······································	Approximate Date of	Next Inspection

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TIME IN: 11: 50 TIME OU	JT: /2: 25	AIRS ID#: Q \$	90521
TYPE OF FACILITY: DEN CLANING			
FACILITY NAME: TOUNTAIN COANE	25		DATE: 3/29/00
FACILITY LOCATION: 4602 JOG R			
LAKE Worth, 1			· .
RESPONSIBLE OFFICIAL: RATAR LASP	eilla	PHONE NUMBER:	968 - 3223
Based on the results of the compliance required compliance with DEP Rule 62-213.300, Floral Based on the results of the compliance required discrepancies were noted:	orida Administrativ	c Code (F.A.C.).	
COMPLIANCE REQUIREMENT/PR	OBLEM	FOLLOW-UP ACTIO	N REQUIRED
A		•	
			14 14 14 14 14 14 14 14 14 14 14 14 14 1
·	s	:	
		B	元
		APR 1 ?	
		Monitorin Sources	
OMMENTS:		<i>σ</i> υ.	
Annual Compliance Certification form has been pro	operly certified and	submitted to the inspector.	YES NO
TE OF NEXT INSPECTION:	Apeil 2 (Approxim		

Revised 10/96

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE OF INSPECTION:	ANNUAL)	COMPLAIN	T/DISCOVERY	
	RE-INSPECTIO	N C1			
AIRS ID#: 0990 521	DATE: 3/24/	/or TIM	E IN: 11: 50	TIME OUT: _	2:25
FACILITY NAME:	, ,				
FACILITY LOCATION:	4602 JOG RG	r J		,	
	LAKE WOLTH	, F/			
RESPONSIBLE OFFICIAL:	RASAL LASPE	eitha	PHONE:	68 - 3223	
CONTACT NAME:	······································	·	PHONE:		
Department of the specific partment of the second s					
PART I: NOTIFICATION		-			
(check appropriate box)					
1. New facility notified DARM:	30 days prior to startu	ıp			
2. Facility failed to notify DARN	A to use general perm	it		•	. 🗆
			Although the transfer and the territory of the territory		7.1:
PART II: CLASSIFICATION					
Facility indicated on notificatio	n form that it is:		210 2101,220		
(check appropriate box) A.			U Drop store/or	ut of business/peti	roleum
1. 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)	r d tr b	ry-to-dry only ansfer only, > oth types, x <		□	
3. Existing large area source dry-to-dry only, $140 \le x \le 2,10$ transfer only, $200 \le x \le 1,800$ both types, $140 \le x \le 1,800$ ga (constructed before $12/9/91$)	00 gal/yr di gal/yr tr. l/yr bo	ansfer only, 2 oth types, 140	area source y , 140 \leq x \leq 2,100 g 00 \leq x \leq 1,800 gal/yr $0 \leq$ x \leq 1,800 gal/yr or after 12/9/91)	•	. •
5. This is a correct facility class	sification 🗶	ÍY □N	□Can not determ	nine	
•	propriate classificatio qualified for a genera exceeds above limits	ıl permit as nı		oove ermit	
. The total quantity of perchlorographics facility was 60 gallons.			e preceding 12 mor	nths by this dry cl	eaning

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?	XY ON ONIA
2. Examining the containers for leakage?	XY ON ON/A
3. Closing and securing machine doors except during loading/unloading?	XY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	ጆ (Y □N □N/A
5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	איא' אַק אם אַם
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 ref (complete A below).	rigerated condenser
If classification 3 has been checked, the machine should be equipped with eithe condenser or a carbon adsorber (complete A and B below). Carbon adsorber m prior to September 22, 1993	
If classification 4 has been checked, the machine should be equipped with a refu (complete A and B below).	rigerated condenser
A. Has the responsible official of all new sources and existing large area source (check appropriate boxes)	s:
1. Equipped all machines with the appropriate vent controls?	מם צם
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	A/KO KO YO
B. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	OY ON ON/A
. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly/bi-weekly basis?	חא מי אם
. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	אואם אם צם
. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	□У □И

I	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?	O. C.	אנ	
2	. Measured and recorded the washer exhaust temperature at the condenser	 -		_
	inlet and outlet weekly?		IN (JN/A
	ls the temperature differential equal to or greater than 20° F?		ו או	⊒N/A
3.	. Measured and recorded the perc concentration in the exhaust stream weekly at the end of the final drying cycle while the magnine is venting to the adsorber,			
	if machines are equipped with a carbon adsorber?	OY O	N C	A/NC
	Is the perc concentration equal to of less than 100 ppm?	OY O	N C	IN/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?		N C	A/M[
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			j
	condenser coils?	OY O	4 D	N/A
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY O	4 🗆	N/A

PART V: RECORDKEEPING REQUIREMENTS	1
Has the responsible official: (check appropriate boxes)	
1. Maintained receipts for perc purchased?	M CA
2. Maintained rolling monthly total of perc consumption?	M Y DN
3. Maintained leak detection inspection and repair reports for the following:	
a. documentation of leaks repaired w/in 24 hrs? or;	AVNO NO Y
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days and parts installed w/in 5 days of receipt?	79 Y □N □N/A
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN XNA
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON 🕱 N/A
6. Maintained startup/shutdown/malfunction plan?	XY □N
7. Maintained deviation reports?	אאם אם ציאל
Problem corrected?	אואם אם צואל
8. Maintained compliance plan, if applicable?	DY DN X N/A

	•.•	•.		•		
1.	Cocondarar	Containment for	Dry Cleaning	g Machine & Storage area	Yes	1. VO
1.	Secondary	Contamient for:	my creaming	Waste area	[X]	
				Spotting area Sealed	[X] [V]	[]
				opoccasing and boards	17.7	r 1
			•			
	•					
			•	•		
		•		•	•	
		••		•		
2.	Disposal o	f Water from Water	Separator us	sing approved evaporator	[×]	r 1
	`.			Wastewater service	[]	[×]
		`\		\ -	` -	
		•				
		(A) MIF P	cks up the	JASte sludse .		
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	•		M	
inspection?			Α Υ	ПN
2. Has the facility maintained a leak log			χίΥ	ПИ
3. Does the responsible official check the	ne following areas for lead	ks?		
Hose connections, fittings, couplings, and valves	XY ON ON/A	Muck cookers	מם צם	A/Mİ X İN/A
Door gaskets and seating	AY DN DN/A	Stills	MY DY	N DN/A
Filter gaskets and seating	MY ON ON/A	Exhaust dampers		N/A
Pumps	AND ND YA	Diverter valves	XY ON	I □N/A
Solvent tanks and containers	AND NO YX	Cartridge filter housings	XY ON	ON/A
Water separators	MY ON ON/A			
4. Which method of detection is used by	the responsible official?			
Visual examination (condensed s	solvent on exterior surface	es)	×	
Physical detection (airflow felt the	rough gaskets)		M	
· Odor (noticeable perc odor)	· .	·	X	
Use of direct-reading instrumentation (FID/PID/calorimetric tubes)			X	
Halogen leak detector			X	
If using direct-reading instr	umentation, is the equip	oment:	XN/A	
-	perc vapor concentrations	,	OY ON	
b. Calibrated against a standard gas prior to and after each use (PID/FID only)?			OY ON	
c. Inspected for leaks an	d obvious signs of wear o	on a weekly basis?	\Box Y \Box N	j
d. Kept in a clean and se	cure area when not in use	?	□Y □N	}
e. Verified for accuracy	by use of duplicate samp	les (calorimetric only)?	ПА ПИ	
Onsible Official's Name (Please Print)	Up /	Responsible Office	cial's	Sign
Teffey Diwk Inspector's Name (Please Prin	t)	3/29/00 Date of Inspection		

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Fund: 20-2-035001 Obj.: 002273



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DEC 1 0 2000 Bureau of Air Monitoring & Mobile Sources

FOR GOVERNMENT USE

Fund: 20-2-035001 Obj.: 002273

Org.: 37550101000 EO: B1

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Fund: 20-2-035001 Obj.: 002273

Rafael Lasprilla 4602 Jog Rd. Lake Worth, FL 3346



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

FOU RAF 4602	US Postal Service Receipt for Certified Mail FOUNTAIN CLEANERS RAFAEL LASPRILLA 4602 JOG ROAD					
DAK	E WORTH FL 33467)			
	Postage	\$				
	Certified Fee		ĺ			
	Special Delivery Fee					
٠,	Restricted Delivery Fee					
1996	Return Receipt Showing to Whom & Date Delivered					
April	Return Receipt Showing to Whom, Date, & Addressee's Address		1			
800,	TOTAL Postage & Fees	\$				
PS Form 3800 , April 1995	Postmark or Date					

SSAIDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write 'Return Receipt Requested' on the mailpiece below the article. The Return Receipt will show to whom the article was delivered and delivered.	laso wish to receive the following services (for an extra fee): 1. □ Addressee's Address to number. 2. □ Restricted Delivery	
3. Article Addressed to: FOUNTAIN CLEANERS RAFAEL LASPRILLA 4602 JOG ROAD LAKE WORTH FL 33467	4a. Article Number Z 333 660 613 4b. Service Type Registered Express Mail Return Receipt for Merchandise COD 7. Date of Delivery 213/99	
5. Received By: (Print Name) 6. Signature: (Addressee or Agent)	8. Addressée's Address (Only if requested and fee is paid)	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
OFFICIAL		
Postage \$ Certified Fee	- L	
Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	Pastrary 1	
10 AIRS ID # 0990521001AG RAFAEL LASPRILLA FOUNTAIN CLEANERS 4602 JOG ROAD LAKE WORTH FL 33467		
	Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 10 AIRS ID # 099052100 RAFAEL LASPRILLA FOUNTAIN CLEANERS 4602 JOG ROAD LAKE WORTH FL	

PLACE STICKER AT TOP OF ENVELORE				
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. 	A. Received by (Please Print Clearly) B. Date of Delivery 7/29/02 C. Signature Agent Addressee D. Saelivery address efferent from item 1? Yes			
1. Article Addressed to: 10	If YES, enter delivery address below: □ No			
4602 JOG ROAD LAKE WORTH FL 33467	3. Service Type Certified Mail			
2. Article Number (Transfer from service label) 700016 7000133108 7028 i				
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