



Department of Environmental Protection

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

June 20, 1996

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. David Wall
Environmental Engineer
TPS Technologies, Inc.
1964 South Orange Blossom Trail
Apopka, Florida 32703

Dear Mr. Wall:

Re: Renewal of Operation Permits
AO48-197156 and AO48-197157

The Department has reviewed your applications to renew the referenced permits to operate two mobile soil thermal treatment facilities. Since these permits were originally issued in August, 1991, the Department adopted Rule 62-296.415, F.A.C., which requires the fumes from your kiln to be exposed to a minimum temperature of 1500°F for 1 second or 1600°F for 0.5 seconds. The rule also requires soil thermal treatment facilities to continuously monitor the carbon monoxide (CO) emissions from the unit. Your units must comply with this regulation.

According to your application, and the original permits to operate, these units operated at a minimum temperature of 1400°F with a 0.5 second retention time. An identical unit of yours operating in Palm Beach County has an afterburner temperature of 1600°F and a retention time of 0.5 seconds. Are these units capable of operating with an afterburner temperature of 1600°F and a 0.5 seconds retention time?

Your applications did not discuss CO emission monitoring from the units. How will CO emissions be continuously monitored during the operation of these units?

Mr. David Wall
TPS Technologies, Inc.
Page Two

The Department will resume processing your applications after receipt of the information requested above. If you have any questions on this matter, please call Willard Hanks at (904) 488-1344.

Sincerely,

A handwritten signature in cursive script, appearing to read "A. A. Linero", followed by the date "6/20".

A. A. Linero, P.E.
Administrator
New Source Review Section

AAL/wh/t

Fold at line over top of envelope to
 of the return address

Is your RETURN ADDRESS completed on the reverse side?	SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered.	I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
	3. Article Addressed to: David Wall, Enw. Eng. TPS Tech., INC 1964 S. Orange Bloss. Jr. Apopka, FL 32703	4a. Article Number P 339 251 112	Thank you for using Retn Receipt Service.
	5. Signature (Addressee)	4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured .. <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
	6. Signature (Agent) <i>[Signature]</i>	7. Date of Delivery	
PS Form 3811, December 1991 *U.S. GPO: 1993-352-714	8. Addressee's Address (Only if requested and fee is paid)		

DOMESTIC RETURN RECEIPT

P 339 251 112

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Recipient David Wall	
Street & Number TPS Tech	
Post Office, State, & ZIP Code Apopka, FL	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	Renewal
A048-197156 6-20-96 " " 157	

PS Form 3800 April 1995



Department of Environmental Protection

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

June 5, 1996

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. David Wall, Environmental Engineer
TPS Technologies Inc.
1964 S. Orange Blossom Trail
Apopka, Florida 32703

Dear Mr. Wall:

Re: Renewal of Permits to Operate
Permit Nos. AO 48-197155 through 197157

The Department recently notified TPS Technologies that the referenced permits to operate their mobile soil thermal treatment facilities would expire on July 1, 1996. Your May 28, 1996 letter requesting these permits be renewed, included a check of \$150.00 for the processing fee.

To renew a permit to operate a non-Title V source, you must submit an Application for Air Permit - Short Form (Form No. 62-210.900(2)), processing fee (\$1,000.00 per permit, Rule 62-4.050(4)(a)3.b., F.A.C.), and an emissions test report if the units operated under the previous permits to operate.

If you wish to proceed with the renewal of the permits to operate these three units, please submit the needed material. Your check for \$150.00 is being returned with this letter.

If you have any questions on this matter, please call Willard Hanks at (904)488-1344.

Sincerely,

A. A. Linero, P.E.
Administrator
New Source Review Section

AAL/wh/t

Enclosure: Application Form
Check No. 801067

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

Article Addressed to:
*David Wall, Emv. Eng.
 TPS Technologies
 19645. Orange Blossom Jr.
 Apopka, Fl 32703*

4a. Article Number
P 339 251 057

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
6-7-96

5. Signature (Addressee)
J. McKeown

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

P 339 251 057

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to	<i>David Wall</i>
Street & Number	<i>TPS Tech</i>
Post Office, State, & ZIP Code	<i>Apopka, Fl</i>
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	<i>6-5-96</i>

PS Form 3800, April 1995

Renewal