

Department of Environmental Protection

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

David B. Struhs Secretary

August 30, 2001

Mr. Ronald A. Seitz Carriage Cleaners 6995 West 12 Avenue Hialeah, Florida 33014

Dear Mr. Seitz:

Thank you for your submittal of the Perchloroethylene Dry Cleaners Air General Permit Notification Form. The Department received your submittal on August 28.

In reviewing your submittal, it was noted that Carriage Cleaners elected to surrender its existing Title V air general permit (AIRS ID 0250741). If your intention is to continue your dry cleaning operations, then your existing permit is not to be surrendered and the notification form will need to be corrected. To correct the form, please remove the checkmark next to the "I hereby surrender" statement and initial the change, resign the form on the back and date.

Please return the corrected form as quickly as possible to:

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

If you no longer wish to operate a dry cleaning facility under the Title V air general permit, then your permit may be surrendered. In this case, you need to do nothing and your form will continue to be processed as submitted.

Thank you for your attention to this matter and I apologize for the confusion with this portion of the form.

If you have any questions concerning the form or the corrections, please contact either Rick Butler at 850/921-9586 or me at 850/921-9583.

Sincerely,

Sandra Bowman

Bureau of Air Monitoring

and Mobile Sources

SB/jw Enclosure

cc: Ms. Mallika Muthiah, Dade County "More Protection, Less Process"

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Department of Environmental Protection

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

Virginia B. Wetherell Secretary

January 24, 1997

Mr. Ronald A. Seitz Carriage Cleaners 6995 West 12 Avenue Hialeah, Florida 33014

Re: Facility I.D. No. 0250741

Dear Mr. Seitz:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 3, 1996.

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, Florida 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"

TITLE V AIR QUALITY GENERAL PERMIT

SPECTION SUMMARY REPORT

TYPE OF INSPECTION:

ANNUAL COMPLAINT/DISCOVERY RE-INSPECTION

TIME IN: 1.00 TIME OUT: 1.30 AIRS ID#: 0250 741

TYPE OF FACILITY: PERC. DRY C/BONEL

FACILITY NAME: ARE CALLED DATE: 2/27 77

TIME IN: 1.00 TIME OUT: 1.30	AIRS ID#: 8050/41				
TYPE OF FACILITY: PERC. DRY CI	BONEL				
FACILITY NAME: CHRRIAGE CLE	DATE: 2/27/77				
FACILITY LOCATION: 6995 WEST	ave				
- Malenh , 33014					
RESPONSIBLE OFFICIAL: KONNO SE17-2	PHONE NUMBER: 82/1/8/				
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administr	ative Code (F.A.C.).				
Based on the results of the compliance requirements evaluated during this inspection, the following compliance discrepancies were noted:					
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED				
NO STARTUP/SHUT DOWN/MA/	GART MANTAMING RECORDS				
COMMENTS: ECJUIPHENT IN COMPC RECORD KEEPING VIOLATI	INNCO, DNE HINOR				
RECORD KEEPING VIOLATI					
The Annual Compliance Certification form has been properly certification.	fied and submitted to the inspector. YES NO				
DATE OF NEXT INSPECTION: 2/98	pproximate)				
INSPECTION CONDUCTED BY: AME NA	12 Alco lease Print)				
INSPECTOR'S SIGNATURE:	PHONE NUMBER: 3726977				
Page_/	/_of_/ Revised 10/96				

	#0250741
:	Carriage Cleaners
P.14	1 (a) add dates control devices
	3. Should be now large area
p.15	Source 4 Should be new large area 30urce W/refrig. con.
	Source W/refrig. con. 5.(d) not required, mark out
	"I and initial

•

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Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

	•	
1.	Facility Owner/Company Name (Name of corpora	ation, agency, or individual owner):
	ARL-RON CLEANING	CORP.
2.	Site Name (For example, plant name or number):	
	CARRIAGE CLEANERS	
3.	Hazardous Waste Generator Identification Number	r:
	50 DAD 130472	
4.	Facility Location:	
	City: HALEAH FL. County:	Zin Code:
	HIALEAH FL.	200 Zip Code: 33014
5.	Facility Identification Number (DEP Use):	
		0250741
	Responsi	ble Official
6.	Name and Title of Responsible Official:	·
	RONALD A. SEITZ	(PRESIDENT)
7.	Responsible Official Mailing Address:	i
	Organization/Firm: Street Address: 6895 w 12 AVE	
	City: Hig. FL. County	Zip Code: 330/4
	MA. PL.	Zip Code: 33014
8.	1 F	
	Telephone: (301) 821-1181	Fax: (301) 822 - 199/
	Facility Contact (If different	nt from Responsible Official)
9	Name and Title of Facility Contact (For example,	plant manager)
<u> </u>	The The Official Condition of Confidence	
		··
10.	Facility Contact Address:	
	Street Address:	
	City: County:	Zip Code:
11	Facility Contact Tolophore Number	
11.	Facility Contact Telephone Number: Telephone: () -	Fax: () -
		,

RECEIVED

SEP 3 1996

Facility Information

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.

(b) Control devices are required, but not yet installed ### GENERATION EQUIPM (c) No control devices are required to be installed ### HAS NEEDED CONTROLS 2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? 360] gallons (b) If less than 12 months, how many? [] months	-		Date	Date		Date	Date		Date	Date
Type of Machine ID Purchased Installed ID Purchased									_	
Example #1 03-OCT-93 12-NOV-93 #2 08-DEC-91 #3 02-MAR-92 02-MAR-92 Dry-to-Dry Unit #1 4-\$1.993 #2 4-\$1.093 #2 02-MAR-92 02-MAR-92 02-MAR-92 [(1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls	Turne of Markins	ID	1 -		ID	_	T	ID.	1 -	
Dry-to-Dry Unit	Type of Machine	עו	Purchased	Installed	ID	Purchased	Installed	עו	Purchased	installed
(1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls Washer Unit (4) w/ ref. condenser (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 required, but not yet installed	Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
(1) w/ ref. condenser (2) w/ carbon adsorber (3) w/ no controls Washer Unit (4) w/ ref. condenser (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 required, but not yet installed	Dry-to-Dry Unit	#FT	4-544	-1993	#	4-50	1LY-93	}·		
(2) w Carbon assorber (3) w/ no controls (4) w/ ref. condenser (5) w/ carbon adsorber (6) w/ no controls (7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (10) w/ ref. condenser (11) w/ carbon adsorber (12) w/ no controls (10) w/ ref. condenser (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ control devices are required, but not yet installed	(1) w/ ref. condenser	V	1		-					
Washer Unit (4) w/ ref. condenser (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 required, but not yet installed	` '	V								
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(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 required, but not yet installed										
Dryer Unit (7) w/ ref. condenser (8) w/ carbon adsorber (9) w/ no controls (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (12) w/ no controls (13) w/ carbon adsorber (14) w/ carbon adsorber (15) w/ no controls (16) w/ control devices are required, but not yet installed	<u> </u>									
(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 required, but not yet installed							L	<u> </u>		<u> </u>
(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 required, but not yet installed ### FENERATION EQUIPM (c) No control devices are required to be installed ### FENERATION EQUIPM (c) No control devices are required to be installed ### FENERATION EQUIPM (c) No control devices are required to be installed ### FENERATION EQUIPM (c) No control devices are required to be installed ### FENERATION EQUIPM (c) No control devices are required to be installed ### FENERATION EQUIPM (c) No control devices are required to be installed ### FENERATION EQUIPM (c) No control devices are required to be installed ### FENERATION EQUIPM (d) Helps with the latest 12 months? [360] gallons	•				·	The State of the S		% 4 <u>~ 1=</u>		4.4
(b) Control devices are required, but not yet installed HAS NEEDED CONTROLS (c) No control devices are required to be installed HAS NEEDED CONTROLS (b) If less than 12 months, how many? months	` '									
Reclaimer Unit (10) w/ ref. condenser (11) w/carbon adsorber (12) w/ no controls (b) Control devices are required, but not yet installed ### FENERATION EQUIPM (c) No control devices are required to be installed #### HAS NIEEDED CONTROLS 2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? 360 gallons (b) If less than 12 months, how many? months	• •									
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(b) Control devices are required, but not yet installed ### GENERATION EQUIPM (c) No control devices are required to be installed ### HAS NEEDED CONTROLS 2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? 360 gallons (b) If less than 12 months, how many? months		A. Salar	<u> </u>		1 2 2					
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2.(a) What was the total quantity of perchloroethylene (perc) purchased in the latest 12 months? [(12) w/ no controls									
Check why it is less than 12 months: New owner: [] New store: [] Did not keep records: []	(c) No control devices 2.(a) What was the total (assumption) (b) If less than 12 months	are requanting gallo	equired to be ity of perchlo ons ow many? [_	installed [_ proethylene (] months	perc)	purchased in	1 the latest 12	2 moi	nths?	
	y Existing small ar ₩	ea so	urce []	Ne	ew sm	nall area sour	ce []		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

(Indicate with an "X".)					
Existing large area source Carbon adsorber Refrigerated condenser					
New small area source Refrigerated condenser					
New large area source Refrigerated condenser []					
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:					
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 percent 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					
(d) Carbon adsorber exhaust perc concentration monitoring					
(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	with an "X" the appropriate selection:
Ľ.	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s).
	No air permits currently exist for the operation of the facility indicated in this notification form.
	Responsible Official Certification
this notific statements maintain t	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the smade in this notification are true, accurate and complete. Further, I agree to operate and the air pollutant emissions units and air pollution control equipment described above so as to the thin this notification form.
I will pron	nptly natify the Department of any changes to the information contained in this notification.

Date /

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

Signature

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TYPE	OF	INSP	EC.	\mathbf{r}	N

ANNUAL

COMPLAINT/DISCOVERY

 \Box

RE-INSPECTION

AIRS ID#: <u>025 074/</u> DATE: <u>2/27</u> FACILITY NAME: <u>OARL 1898</u>	7/47 TIME IN: / · / D TIME	E OUT:/: 30
FACILITY LOCATION: 6995 W	VEST 12 AVE	
HALEA	4 , FL 33014	
PART I: NOTIFICATION		
(check appropriate box)		-/
1. Existing facility notified DARM by 9/1/96		W
2. New facility notified DARM 30 days prior to s	startup	
3. Facility failed to notify DARM to use general	permit	
PART II: CLASSIFICATION		
Facility indicated on notification form that it is (check appropriate box)	S:	
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)	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)	a
3. Existing large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)="" a="" before="" both="" classification<="" correct="" facility="" gal="" is="" only,="" td="" this="" transfer="" types,="" yr=""><td>4. New large area source dry-to-dry only, 140<x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,></td></x<2,>	4. New large area source dry-to-dry only, 140 <x<2, (constructed="" 100="" 12="" 140<x<1,800="" 200<x<1,800="" 9="" 91)<="" after="" both="" gal="" on="" only,="" or="" td="" transfer="" types,="" yr=""><td></td></x<2,>	
If no, please check the appropriate classification	n:	
_	nd is not eligible for a general permit	
B. The total quantity of perchloroethylene (perchapity was 200) gallons	e) purchased within the preceding 12 month	s by this dry cleaning

Revised 10/28/96

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?	ON NO YO
2. Examining the containers for leakage?	DY DN MA
3. Closing and securing machine doors except during loading/unloading?	MY ON
4. Draining cartridge filters in their housing or in sealed containers for at least 24 hours prior to disposal?	מם אם
Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber beds according to the manufacturer's specifications?	אואם 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 refri (complete A below).	gerated 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 mu 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?	DY ON
2. Equipped dry-to-dry machines with a closed-loop vapor venting system?	MY ON ON/A
3. Equipped the condenser with a diverter valve so airflow will be directed away from the condenser upon opening the door?	אואם אם צבי
4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated condenser on a weekly basis?	GY ON
5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the condenser exceeded 45°F?	оу он №4
6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?	DY ON NA

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?	DY ON
2.	Measured and recorded the washer exhaust temperature at the condenser inlet and outlet weekly?	DY DN NA
	Is the temperature differential equal to or greater than 20° F?	OY ON
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 DN/A
	Is the perc concentration equal to or less than 100 ppm?	OY ON
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 NA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	AVA NO YO
6.	Routed airflow to the carbon adsorber (if used) at all times?	OY ON TANA
_	ART V: RECORDKEEPING REQUIREMENTS	
H	ART V: RECORDKEEPING REQUIREMENTS (as the responsible official: check appropriate boxes))
H (c	as the responsible official:	מע סא
H (c	as the responsible official: check appropriate boxes)	MY ON
H (c 1.	as the responsible official: theck appropriate boxes) Maintained receipts for perc purchased?	MY ON
H (c 1.	as the responsible official: check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption?	DY ON MA
H (c 1.	as the responsible official: check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? Maintained leak detection inspection and repair reports for the following:	MA ON
H (c 1. 2.	as the responsible official: check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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	א אם אם אַ
H (c 1. 2. 3.	as the responsible official: check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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?	אם אם א ן א אם צם א ן
H (c 1. 2. 3.	As the responsible official: theck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only)	DY ON MA
H (c 1. 2. 3.	As the responsible official: Sheck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations?	DY ON MA OY ON DANA OY ON DANA
H (c 1. 2. 3.	As the responsible official: check appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan?	DY ON MAL OY ON BON/A OY ON WAL
H (c 1. 2. 3.	As the responsible official: Sheck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports?	MY ON OY ON MA OY ON MA OY ON MA OY ON MA
H (c 1. 2. 3. 4. 5. 6. 7.	As the responsible official: theck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected? Maintained compliance plan, if applicable?	DY ON MALOY ON MALOY ON MALOY ON MALOY ON MALOY ON
H (c 1. 2. 3. 4. 5. 6. 7	in the responsible official: Sheck appropriate boxes) Maintained receipts for perc purchased? Maintained rolling monthly averages of perc consumption? 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? Maintained calibration data? (for direct reading instruments only) Maintained exhaust duct monitoring data on perc concentrations? Maintained startup/shutdown/malfunction plan? Maintained deviation reports? Problem corrected?	DY ON MALOY ON MALOY ON MALOY ON MALOY ON MALOY ON

Physical detection Odor (noticeatection)	nation (condensed solvetion (airflow felt through the percodor) reading instrumentation	ent on ex	sterior surfaces)	·	덕, 역	
Physical detection Odor (noticeatection)	ction (airflow felt thro		·		₫,	
Odor (noticea Use of direct-	ble perc odor)	ugn gask	ou)		_ ,	
Use of direct-	- '				7	
	reading metrumentation	on CEIDA	OM) (actorimatria t	uboa)	n	
		•		noes)	u	
•	ct-reading instrumen					
a. C	apable of detecting pe	rc vapor	concentrations in	a range of 0-500 ppm?		IN
	falibrated against a sta PID/FID only)?	ndard ga	s prior to and afte	r each use	OY C	M
c. Ir	spected for leaks and	obvious s	signs of wear on a	weekly basis?	OY C	M
d. K		OY C	M			
e. V	(calorimetric only)?	םאַ כ	М			
3. Has the facility maintained a leak log?						N
4. Does the responsib	le official check the fo	ollowing a	areas for leaks?			
Hose connect couplings, a		PA.	ПИ	Muck cookers	ΟY	d _N
Door gaskets	and seating	d _Y	ОИ	Stills	ŒΥ	ΠN
Filter gaskets	s and seating	ďΥ	ОИ	Exhaust dampers	ŒΥ	ПΝ
Pumps		dy	ПΝ	Diverter valves	CYY	ПΝ
Solvent tank	s and containers	dy	ΩИ	Cartridge filter housings	ΩÝ	ПΝ
Water separa	ators	ďΥ	ПИ		<u></u>	

Name of Responsible Official

IMME VAZALLO

Inspector's Name (Please Print)

2/99 Approximate Date of Next Inspection

BEST AVAILABLE COPY

TITLE V AIR QUALITY GENERAL PERMIT PECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL 🔀 COM	PLAINT/DISCOVERY RE-INSPECTION
TIME IN: 140 TIME OUT: 210	AIRS 10#: 025 07 24/
TYPE OF FACILITY: DETRY, DRY	CLEANEIL
FACILITY NAME: CHERIAGE	CHEANERS DATE: 2-3-95
FACILITY LOCATION: 6995 W357	1) AVE
TACIENT EDERMON. (7) 773	
RESPONSIBLE OFFICIAL: FOUNDED SEITE	PHONE NUMBER: 821-1181
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administration	
Based on the results of the compliance requirements evaluation discrepancies were noted:	ated during this inspection, the following compliance
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED
	70
	MAR 30 f Bureau of Air N & Mobile St
	Monitoring Sources
COMMENTS: FACILITY 15 IN C	emplimace
The Annual Compliance Certification form has been properly cert	ified and submitted to the inspector. YES NO
DATE OF NEXT INSPECTION:	
(A	approximate)
INSPECTION CONDUCTED BY:	MAZAKO
INSPECTOR'S SIGNATURE: Olympia (I	Please Print) PHONE NUMBER: 3726922
A A A A A A A A A A A A A A A A A A A	Paying 10/9

DRY CLEANER AIR QUALITY GENERAL PERMIT

ANNUAL COMPLIANCE CERTIFICATION FORM

AIRS ID#0250741 ARL-RON CLEANING CORP **RONALD A SEITZ** 6995 W 12 AVENUE HIALEAH FL 33014

	Do <u>NOT</u> Remove Label		
Annual Reporting Period:	19 <u>97</u> TO	12/27	19 <u>9</u> 7
Based on each term or condition of the Title V 62-213.300, Florida Administrative Code (F.A.			~~
If NO, complete the following:			:
#1. Term or condition of the general permit the	hat has not been in continuous complia	nce during the reportir	ng period stated above:
	RECEIVED		
Exact period of non-compliance: from	- KECLIVED	_ to	
Action(s) taken to achieve compliance:	JAN 2 2 1998		
Method used to demonstrate compliance:	Bureau of Air Monitoring & Mobile Sources		CE1// L R3
#2. Term or condition of the general permit the	hat has not been in continuous complian	nce during the reportin	ng period stated above:
Exact period of non-compliance: from	<u> </u>	to	
Action(s) taken to achieve compliance:	·		
Method used to demonstrate compliance:			
As the responsible official, I hereby certify, based notification are true, accurate and complete. Fur does not exceed 2,100 gallons per year for dry-to RESPONSIBLE OFFICIAL: Name	rther, my annual consumption of perchlor dry facilities or 1,800 gallons per year for	zeethylene solvent, based	l upon purchase receipts,

^{*}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.

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DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

			
FACILITY NAME:CAPR,	1AGE C/RANGE	SDATE: 4	7-3-98
FACILITY LOCATION: 6975	- WEST 12	1VE	
HINLEY	41(
Annual Reporting Period: 2	-27 19 <u>47</u> to	2-3	1998
Based on each term or condition of the Title		<u> </u>	—
62-213.300, Florida Administrative Code (F	A.C.), during the period covered by this	statement. XYES	⊔ио
If NO, complete the following:			
#1. Term or condition of the general permit	t that has not been in continuous complia	unce during the reporting perior	i stated above:
			Bu
			& 8 3 3
Exact period of non-compliance: from		_ to	<u> </u>
Action(s) taken to achieve compliance:		***	30 F Air
-		<u> </u>	1998 Monit
Method used to demonstrate compliance:		<u> </u>	rces
			ring
#2. Term or condition of the general permi	t that has not been in continuous complia	ance during the reporting perio	d 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, made in this notification are true, accurate			
upon rolling averages of purchase receipts, year for transfer or combination facilities.			
RESPONSIBLE OFFICIAL: X ROA	IND A. Soith V &	and the x	13/00
Na Na	ame (Please Print)	Signature	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.

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

AIRS ID#: 0250741

Revised 10/10/96

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME: X CARRIAGE CRANERS DATE: 8 0/27/97
FACILITY NAME: X CARRIAGE CRANERS DATE: Y 3/27/97 FACILITY LOCATION: X 6995 W 12 AVE HIA-FL 330/Y
Annual Reporting Period: $8/30$ 19 96 TO $2/27/97$ 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
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:
ONE MINOR PAPERWORK Scolagion
ONE MINOR PARRWORK SCOLATION Exact period of non-compliance: from 8/30/96 to 2/27/77 Action(s) taken to achieve compliance: 2MeJ MANTANNING PROPER RECORD
Action(s) taken to achieve compliance: That MANTAINING PROPER RECORD
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:
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 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: X ONALD A. Seignature Name (Please Print) Signature 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.

BEST AVAILABLE COPY

#0250741 Carriage Cleaners

	THE IM And dates now	tral devices.
1.	Fac p. 14 1.(a) add dates con installed	Air Quality Management Division
	1 3 should be noullas	
2.	3. Should be now lar	ge us tu
	Source	:
	Ha D.15 4 Should be new la 5 Source W/ refrig.	me ama
3.	Ha D. D. P. Showd be New W	190 M W .
	J Source W/refrig. C	on.
4.	Fa 5. d) not required,	markart
٦٠.	St J.	Trur N. OW
	ci "V" and Unitial"	
		3014
5.	H. T. C.	74/
125-226	144 St. 14	
6.	Na	
		•
7.	Res ·	
	Org	
	Stri	<i>y</i>
	Cit	33014
8.	Res	
	Tel	
9.	Name and Title of Facility Contact (For example, plant manage	r):
	,	
	•	
10.	Facility Contact Address:	
	Charles Address	
	Street Address:	7:- Codo:
	City: County:	Zip Code:
11.	Facility Contact Telephone Number:	-
	Telephone: () - Fax:	() -
	,	` '

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3 1996 SEP

Perchloroethylene Dry Cleaning Facility Notification

Facility Name and Location

l.	Facility Owner/Company Name (Name of corporation, agency, or individual owner):
2.	ARL- RON CLEANING CORP. Site Name (For example, plant name or number):
۷.	
3.	CARRIAGE CLEANERS Hazardous Waste Generator Identification Number:
3.	•
	50 DAD 130472
4.	Facility Location: Street Address: 6995 W 12 AVE.
	City: HIALEAH FL. County: DADE Zip Code: 33014
ind e (disc	
). 	Facility Identification Number (DEP Use):
	0250741
	Responsible Official
6.	Name and Title of Responsible Official:
	RONALD A. SEITZ (PRESIDENT)
7.	1
	Organization/Firm: Street Address: 6995 W 12 AVE
	City: HA. FL. County: DADE Zip Code: 33014
8.	Responsible Official Telephone Number:
	Telephone: (305) 821-1/81 Fax: (305) 822 - 199/
	Facility Contact (If different from Responsible Official)
9.	Name and Title of Facility Contact (For example, plant manager):
10.	Facility Contact Address:
	Course Additions
	Street Address: City: Zip Code:
11.	Facility Contact Telephone Number: Telephone: () - Fax: () -
	Telephone: () - Fax: () -

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SEP 3 1991

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

Bureau of Air Monitoring & Mebilo 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	ID	Purchased	Installed
Example	#1	03-OCT-93	12-NOV-93	#2	08-DEC-91		#3	02-MAR-92	02-MAR-92
Dry-to-Dry Unit	#1	4-544	-1993	#	4-50	111-92			
(1) w/ ref. condenser		1 2414	2/4/03			7/4/02	_		
(2) w/ carbon adsorber	V		1111-	1		1111			
(3) w/ no controls									1
Washer Unit						L			
(4) w/ ref. condenser									
(5) w/ carbon adsorber									1
(6) w/ no controls								_	
Dryer Unit				<u> </u>	.1	<u> </u>		•	
(7) w/ ref. condenser									T
(8) w/ carbon adsorber				<u> </u>					
(9) w/ no controls									
Reclaimer Unit	\vdash			I.		1			<u> </u>
(10) w/ ref. condenser		<u> </u>						_	
(11) w/carbon adsorber		<u> </u>	1						
(12) w/ no controls				<u> </u>	•	-			
(b) Control devices are (c) No control devices 2.(a) What was the total of the second of the secon	are requanting gallo	equired to be ity of perchlons ow many? [_	installed [_ proethylene (perc)	 purchased i		! mor	oths?	
3. What is the facility's so (Indicate with an "X". Existing small ar	Selec ea so	t one classifi	cation only.) Ne	ew sn	nall area sou	rce [3) of	Part II?	
Existing large are	≥a soi	urce [1	N€	ew lai	rge area sour	ce X]		

DEP Form No. 62-213.900(2)

Effective: 6-25-96

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 []					
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:					
All steam and hot water generating units on-site (1) have a total heat input of 10 million BTU/hr or less (298 poiler 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 percent sulfur is fired.					
All steam and hot water generating units exempt No such units on-site					
Equipment Monitoring and Recordkeeping Information					
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:					
Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:					
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					
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 d) Carbon adsorber exhaust perc concentration monitoring					
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					

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

Surrender of Existing Air Permit(s)

Please indicate	Please indicate with an "X" the appropriate selection:					
ı K i	I hereby surrender all existing air permits authorizing operation of the facility indicated in this notification form; specifically, permit number(s)					
	No air permits currently exist for the operation of the facility indicated in this notification form.					
	Responsible Official Certification					
this notific statement maintain	ersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in cation. I hereby certify, based on information and belief formed after reasonable inquiry, that the s made in this notification are true, accurate and complete. Further, I agree to operate and the 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.					
Signature						
7 \$	onald a fins × 2/27/97					



Lawton Chiles

Governor

Department of Environmental Protection

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

Virginia B. Wetherell Air Quality

Air Quality Management Division

January 24, 1997

Mr. Ronald A. Seitz Carriage Cleaners 6995 West 12 Avenue Hialeah, Florida 33014

Re: Facility I.D. No. 0250741

Dear Mr. Seitz:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on September 3, 1996.

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, Florida 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 CLEANERS

TITLE V GENERAL PERMIT COMPLIANCE INSPECTION CHECKLIST

TENTE	OB	TATCH	יייים א	CONT.
TYPE	Ur	TIAPLI	としょ	LON:

(BEST AVAIL	ABLE COPY	P
TITLE V	YLENE DRY CLEANERS GENERAL PERMIT NSPECTION CHECKLIST	BUILD MADE CE
TYPE OF INSPECTION: ANNUAL RE-INSPECTIO	COMPLAINT/DISCOVERY	Surgarios Alimon
AIRS ID#: <u>025074</u> DATE: 2-3-	98 TIME IN: 140 TIME OUT	r: 210 %
FACILITY NAME: CARRIAGE	CLEANERS	
FACILITY LOCATION: 699.5 W	EST 12 AVE-	
RESPONSIBLE OFFICIAL : <u>PONSE</u>	SE172 PHONE: 821-11	181
CONTACT NAME:	PHONE:	
PART I: NOTIFICATION		
(check appropriate box)	dun.	
1. New facility notified DARM 30 days prior to star	-	_
2. Facility failed to notify DARM to use general per	rmit	
PART II: CLASSIFICATION)
Facility indicated on notification form that it is: (check appropriate box) A.	☐ No notification form☐ Drop store/out of busines	ss/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)	ָ ק
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	•
If no, please check the appropriate classific	neral permit as number above nits and is not eligible for a general permit	is dry cleaning
facility was 550 gallons.	•	_

Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON MYA 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 DY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN DN/A 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) MY DN 1. Equipped all machines with the appropriate vent controls? DY DN DN/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 DY DN DN/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?

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?	MY ON
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?	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?	ол ои одују
	Is the perc concentration equal to or less than 100 ppm?	DY DN BN/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?	OY ON ONA
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual condenser coils?	DY ON ON/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?	מס אם
2. Maintained rolling monthly averages of perc consumption?	DAY DN
3. Maintained leak detection inspection and repair reports for the following:	/
a. documentation of leaks repaired w/in 24 hrs? or;	MY 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?	אַעם אם אַם
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN DNYA
5. Maintained exhaust duct monitoring data on perc concentrations?	DY DN DN/A
6. Maintained startup/shutdown/malfunction plan?	. ио у т
7. Maintained deviation reports?	OY ON MON/A
Problem corrected?	DY DN BYJA
8. Maintained compliance plan, if applicable?	איש אם עם אים

PA	PART VI: LEAK DETECTION AND REPAIRS						
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair						
	inspection?		DY DN				
2.	Has the facility maintained a leak log?			YY EN			
3.	Does the responsible official check the f	following areas for leaks	?				
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	DY DN DN/A			
	Door gaskets and seating	MY ON ON/A	Stills	A/NO NO YE			
	Filter gaskets and seating	MY ON ON/A	Exhaust dampers	DY ON ON/A			
	Pumps	AVIO NO YO	Diverter valves	DY ON ONA			
	Solvent tanks and containers	DY ON ON/A	Cartridge filter housings	DY ON ON/A			
	Water separators	DY ON ON/A					
4.	Which method of detection is used by the	ne responsible official?					
Visual examination (condensed solvent on exterior surfaces)							
	ब्						
Odor (noticeable perc odor)							
	Use of direct-reading instrumentar	tion (FID/PID/calorimet	ric tubes)				
	Halogen leak detector						
l Il	If using direct-reading instru	umentation, is the equip	pment:	□N/A			
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)?						
	c. Inspected for leaks and obvious signs of wear on a weekly basis? □Y □N						
	d. Kept in a clean and secure area when not in use?						
	e. Verified for accuracy	by use of duplicate samp	oles (calorimetric only)?	OY ON			

JAME NAZARIO	2-3-98
Inspector's Name (Please Print)	Date of Inspection
Tame Desan	2/99
Inspector's Signature	Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:			
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PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION CHECKLIST

MAY 1 9 1999

TYPE OF INSPECTION:

ANNUAL

Bureau of Air Monitoring COMPLAINT/DISCONTROBILE Sources

RE-INSPECTION

AIRS ID#: 0250741 DATE: 4/21	7/99 TIME IN: 230M TIME OUT: 300PM
FACILITY NAME: Carriage	Cleaners
FACILITY LOCATION: 6995	V 12th Ave
RESPONSIBLE OFFICIAL:	d Se: += PHONE: 821-1181
CONTACT NAME:	PHONE:
PART I: NOTIFICATION	
(check appropriate box)	
1. New facility notified DARM 30 days prior to st	artup 🗆 🗆
2. Facility failed to notify DARM to use general p	ermit
PART II: CLASSIFICATION	
Facility indicated on notification form that it is:	☐ No notification form
(check appropriate box)	☐ Drop store/out of business/petroleum
A. 1. Existing small area source □	2. New 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/yr
both 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, $140 < x < 2,100$ gal/yr	dry-to-dry only, $140 \le x \le 2{,}100 \text{ gal/yr}$
transfer only, $200 \le x \le 1,800$ gal/yr	transfer only, $200 \le x \le 1,800 \text{ gal/yr}$
both types, $140 \le x \le 1,800 \text{ gal/yr}$	both types, $140 \le x \le 1,800$ gal/yr
(constructed before 12/9/91)	(constructed on or after 12/9/91)
5. This is a correct facility classification	DY ON OCan not determine
If no, please check the appropriate classifi	cation:
	eneral permit as number above
facility exceeds above li	mits and is not eligible for a general permit
B. The total quantity of perchloroethylene (perc) p facility was 410 gallons.	urchased within the preceding 12 months by this dry cleaning

Mans May 6,1999

Revised 9/15/97

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY ON ZINA 1. Storing perchloroethylene in tightly sealed and impervious containers? DY DN DN/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 ZY ON ON/A least 24 hours prior to disposal? 5. Maintaining solvent-to-carbon ratios and steam pressure for carbon adsorber DY DN ZNA 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? DN DN/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 EY ON condenser on a weekly/bi-weekly basis? 5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the DY DN WA condenser exceeded 45° F? 6. Conducted all temperature monitoring after an appropriate cooldown period and after verifying that the coolant had been completely charged?

T-min-				
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?	ďΥ	ΟN	
2.	. Measured and recorded the washer exhaust temperature at the condenser			
	inlet and outlet weekly?	ΠY	ДΝ	DIN/A-
	Is the temperature differential equal to or greater than 20° F?	ΠY	Πи	ØN/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?	Пν	ПN	DIXIA-
	ii macinies are equipped with a carbon adsorber?	u i	C114	CINA
	Is the perc concentration equal to or less than 100 ppm?	ΩY	ΠИ	ØN/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	ПИ	ΔM/A
5.	Equipped transfer machines (dryers, reclaimers, and washers) with individual			,
	condenser coils?	, DY	ПN	□N/A
		`;	 :	
6.	Routed airflow to the carbon adsorber (if used) at all times?	ЦΥ	N	⊿N/A
_				

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official:			
(check appropriate boxes)			
1. Maintained receipts for perc purchased?	DY ON		
2. Maintained rolling monthly total of perc consumption?	NO Y		
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	אום אם אַב		
b. documentation of parts ordered to repair leak and leak repaired w/in 2 days			
and parts installed w/in 5 days of receipt?	ZY ON ON/A		
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN PN/A		
5. Maintained exhaust duct monitoring data on perc concentrations?	מאבם אם צם		
6. Maintained startup/shutdown/malfunction plan?	.ZY DN		
7. Maintained deviation reports?	DY DWA		
Problem corrected?	DY ON ON/A		
8. Maintained compliance plan, if applicable?	MY ON ON/A		

PA	PART VI: LEAK DETECTION AND REPAIRS					
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair					
	inspection?			ON ON		
2.	Has the facility maintained a le	ak log?		DY ON		
3.	Does the responsible official c	Does the responsible official check the following areas for leaks?				
	Hose connections, fitting couplings, and valves	s,	Muck cookers	OY ON ØN/A		
	Door gaskets and seating	MY ON ON/A	Stills	AND NO YE.		
	Filter gaskets and seating	S DY ON ON/A	Exhaust dampers	DY ON ON/A		
	Pumps	אחם אם ציבן	Diverter valves	DY ON ON/A		
	Solvent tanks and contain	ners ZY DN DN/A	Cartridge filter housings	DY ON ON/A		
	Water separators	DY ON ON/A				
4.	Which method of detection is a					
	Visual examination (cond					
	Physical detection (airflo					
	Odor (noticeable perc od	Ø				
	Use of direct-reading inst	trumentation (FID/PID/calori	metric tubes)			
	Halogen leak detector			<u> </u>		
	If using direct-readi	ng instrumentation, is the ed	quipment:	₽N/A		
	a. Capable of de	OY ON				
	b. Calibrated against a standard gas prior to and after each use (PID/FID only)?					
	c. Inspected for	leaks and obvious signs of w	ear on a weekly basis?	DY DN		
	d. Kept in a clea	an and secure area when not in	n use?	OY ON		
	e. Verified for accuracy by use of duplicate samples (calorimetric only)?					
			•			

Inspector's Name (Please Print)

Date of Inspection

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATI	ON:		
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TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	IPLAINT/DISCOVERY RE-INSPECTION					
TIME IN: 230PM TIME OUT: 33.	PmAIRS ID#: 0750741					
TYPE OF FACILITY: Leve Dry C/	lane					
FACILITY NAME: CArriage Cleanes	DATE: 2/28/89					
FACILITY LOCATION: 6995 W	17 Ane					
S H						
RESPONSIBLE OFFICIAL: Tonda Set	PHONE NUMBER: (305) 572-6922					
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administra						
Based on the results of the compliance requirements evaluated discrepancies were noted:	ated during this inspection, the following compliance					
COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED					
· · · · · · · · · · · · · · · · · · ·						
•						
						
-	· · · · · · · · · · · · · · · · · · ·					
	· ···					
COMMENTS: Tanger Inform to Colendar.	ation from Personal Log					
The Annual Compliance Certification form has been properly certified and submitted to the inspector. YES NO						
DATE OF NEXT INSPECTION: 4/2000 (Approximate)						
INSPECTION CONDUCTED BY: LEO SWART (Please Print)						
INSPECTOR'S SIGNATURE: # PHONE NUMBER: (305) 372-C922						

Page___of___.

Revised 10/96

AIRS 1D#: 0250741



DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

FACILITY NAME:	e Cleaner:	,	DA	ГЕ: <u>4/29/99</u>
facility location: 6995	w 12	Ave		•
Annual Reporting Period:	/	_19 <u>\$</u> 8 TO	April	19 <u>9</u> -9
Based on each term or condition of the Title 62-213.300, Florida Administrative Code (F.				DEP Rule
If NO, complete the following:				
#1. Term or condition of the general permit	that has not been in co	ntinuous compliance	during the reporting p	period stated above:
Exact period of non-compliance: from		tc		
Action(s) taken to achieve compliance:		•		
Method used to demonstrate compliance:				
#2. Term or condition of the general permit	that has not been in co	ontinuous compliance	e during the reporting p	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, is made in this notification are true, accurate a upon rolling averages of purchase receipts, year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name	and complete. Further does not exceed 2,100	, my annual consum _i	otion of perchloroethyl	ene 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.

AIRS 1D#: 0250741

Revised 10/10/96

Mail top 2 Copies to DERM

DRY CLEANER AIR QUALITY GENERAL PERMIT ANNUAL COMPLIANCE CERTIFICATION FORM

(),	100) _	80 ~	-12/00
FACILITY NAME: Cario	ige U	garens_	DECEMPA	TE:5/2/80
FACILITY LOCATION: 29	75 K) 12 AV-	die C	(/)))
Hia	loch	33014	MAY 0 5 2000	9
			Air	
Annual Reporting Period:	5	1999 TO	Management Division	5 3 PO
Based on each term or condition of the Title V 62-213.300, Florida Administrative Code (F.A.	•	, ,	· \ /	n DEP Rule
If NO, complete the following:			.	
#1. Term or condition of the general permit t	hat has not been	ı in continuous compl	iance during the reporting	period stated above:
Exact period of non-compliance: from		·	to	
Action(s) taken to achieve compliance:	·			·
Method used to demonstrate compliance:				
#2. Term or condition of the general permit t	hat has not beer	ı in continuous compl	iance during the reporting	period stated above:
Exact period of non-compliance: from		to_		· · · · · · · · · · · · · · · · · · ·
Action(s) taken to achieve compliance:				
Method used to demonstrate compliance:				<u> </u>
As the responsible official, I hereby certify, be made in this notification are true, accurate an upon rolling averages of purchase receipts, designed year for transfer or combination facilities. RESPONSIBLE OFFICIAL: Name	nd complete. Fi	urther, my annual con	sumption of perchloroethyl	ene 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.

BEST AVAILABLE COPY

:: 05/03/00 12:25 pm

in,dustrial APRIL 20, 2000 MARGIN ANALYSIS

DETAIL GROSS

Customer Name CARRINGE CLEANERS Invoe SM Inv Date Shipped

· GALLONS

6	13
	4

STREETS-PERCHLORETHYLENE

4.3		The state of the s			-
2699	*CARRIAGE CLEANERS	1	22931 04	07/30/07	19.50
:A699	CARRIAGE CLEANERS	1	24672 04	07/30/07	-19.50
2A699	*CARRIAGE CLEANERS	1 1	48131 04	06/08/98	39.00
CA699	*CARRIAGE CLEANERS	201	44198 DA	06/24/98	19.50
CAF99	CARRIAGE CLEAVERS	1	45991 04	07/28/98	19.50
CA599	ACARRIAGE CLEANERS		47426 04	88/19/88	19.50
CA699	CAPRIAGE CLEANERS	1	48736 04	09/11/98	39.00
CASSS	CARRIAGE CLEAVERS	1	50188 04	10/08/98	19.50
CAESS	*CARRIAGE CLEANERS	1	53002 04	11/24/88	39.00
CASSS	CARRIAGE CLEAVERS		54239 04		19.50
CASSS	CARRIAGE CLEANERS		84611 04		19.50
CA599	*CARRIAGE CLEANERS		55984 04,		39.00
CA699	. *CARRIAGE CLEANERS		58116 04		19.50
CA699	*CARRIAGE CLEANERS		E8701 04		
CAB93	*CARRIAGE CLEANERS		60081 04		
CA698	*CARRIAGE CLEANERS		61123 04		
CA699	*CARRIAGE CLEANERS		64047 04		19,50
CA699.		and the same of th	64504 04		19,50
CA699			65769 04		39.00
CA698	*CARRIAGE CLEANERS		67980 02		
CA699	CARRIAGE CLEANERS		68652 05		
CA699	*CARRIAGE CLEANERS		69177 02		19.50
CA699	*CARRIAGE CLEANERS	FF 557M x	172444 02		
CA699	CARRIAGE CLEANERS		174414 02		19.00
CA699	"CARRIAGE CLEANERS		175172 02		
CA699	CARRIAGE CLEANERS	2.7	176343 02		
CA699	CARRIAGE CLEAVERS		177073 02		39.00
CA699	CARRIAGE CLEANERS		178158 02		19.50
CA699	CARRIAGE CLEANERS		180578 02		19.50
CA599	*CARRIAGE CLEANERS	elect.	182900 02	03/17/00	39.00
CA695	CARRIAGE CLEANERS		183843 02	03/31/00	19.50
			· Selection	ģ(,	£4121-11125 .
	Product Total	The second secon	or we asking		780.00

CARRIAGE CLEANERS 6995 W. 12 AVE. HIALEAH, FL. 33014

12 Months AS (V) = 331/2 GAL

Product Total

Love d. Solo

TITLE V AIR QUALITY GENERAL PERMIT INSPECTION SUMMARY REPORT

TYPE OF INSPECTION: ANNUAL COM	1PLAINT/DISCOVERY RE-INSPECTION	
TIME IN: 230 pm TIME OUT: 300, TYPE OF FACILITY: Perc Dry Cleans FACILITY NAME: Carriage Clean FACILITY LOCATION: 1995 W 12 Average Responsible Official: Ronald Scitz	AIRS ID#: 0250741 LVS DATE: 5/2/00 20 3014 PHONE NUMBER: 1305) 821-1181	
Based on the results of the compliance requirements evaluated compliance with DEP Rule 62-213.300, Florida Administration Based on the results of the compliance requirements evaluated as the compliance requirements are complianced as the compliance requirements are complianced as the compliance requirements and compliance requirements are complianced as the compliance requirements are complianced as the compliance requirements are complianced as the compliance requirements and complianced as the compliance requirements are complianced as the compliance requirements are complianced as the compliance requirements are complianced as the complianc	ative Code (F.A.C.).	
discrepancies were noted: COMPLIANCE REQUIREMENT/PROBLEM	FOLLOW-UP ACTION REQUIRED	
COM DIANCE REQUIREMENTA ROBLEM	TODDOW-OF ACTION REQUIRED	
To inspection	readily available	
The Annual Compliance Certification form has been properly certification	ied and submitted to the inspector. YES NO	
DATE OF NEXT INSPECTION: 501 (Approximate) INSPECTION CONDUCTED BY: Phone Number: 305372-0934 Page of Revised 10/96		

PERCHLOROETHYLENE DRY CLEANERS

TITLE V GENERAL PERMIT
COMPLIANCE INSPECTION COMP

TYPE OF INSPECTIO	N	:
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ANNUAL



COMPLAINT/DISCOVERY

 \Box

RE-INSPECTION

AIRS ID#: <u>0250741</u> DATE: <u>512</u>]	,	-
FACILITY NAME: Carriage Co	earlys B	
FACILITY LOCATION: 1995	W 12 Ave se &	
Hialead	J 33014 8 5 5 7	
responsible official: Ronald	0 1 2	
CONTACT NAME:	PHONE:	_
<u> </u>		
PART I: NOTIFICATION		
(check appropriate box)		
1. New facility notified DARM 30 days prior to sta	rtup	
2. Facility failed to notify DARM to use general pe	rmit	
PART II: CLASSIFICATION		
Facility indicated on notification form that it is:	□ No notification form	
Facility indicated on notification form that it is: (check appropriate box)	□ No notification form □ Drop store/out of business/petroleum	
Facility indicated on notification form that it is: (check appropriate box) A.	☐ No notification form ☐ 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. I. 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. I. 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. I. 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 (constructed before 12/9/91)	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)	
(check appropriate box) A. I. 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. I. 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	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 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 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr	
(check appropriate box) A. I. 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	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 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 ≤ x ≤ 2,100 gal/yr transfer only, 200 ≤ x ≤ 1,800 gal/yr both types, 140 ≤ x ≤ 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	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 □ 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 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 $12/9/91$) $\square Y$ $\square N$ 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 classific facility qualified for a get	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 □ N Can not determine	
(check appropriate box) A. I. 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 ☐ facility qualified for a general facility exceeds above line	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 sation: neral permit as number above	

PART III: GENERAL CONTROL REQUIREMENTS Is the responsible official of the dry cleaning facility: (check appropriate boxes) DY DN XN/A 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? □N □N/A 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

A. Has the responsible official of all new sources and existing large area sources:

Equipped the condenser with a diverter valve so airflow will be directed away from the

4. Measured and recorded the temperature of the outlet exhaust stream of a refrigerated

5. Repaired or adjusted the equipment within 24 hours if the exhaust temperature of the

6. Conducted all temperature monitoring after an appropriate cooldown period and after

(complete A and B below).

condenser upon opening the door?

condenser exceeded 45° F?

condenser on a weekly/bi-weekly basis?

1. Equipped all machines with the appropriate vent controls?

verifying that the coolant had been completely charged?

2. Equipped dry-to-dry machines with a closed-loop vapor venting system?

(check appropriate boxes)

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
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?	OY ON ON/A
Is the perc concentration equal to or less than 100 ppm?	OA ON ONÍV
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?	OY ON ON/A

PART V: RECORDKEEPING REQUIREMENTS			
Has the responsible official: (check appropriate boxes)			
1. Maintained receipts for perc purchased?	XY ON		
2. Maintained rolling monthly total of perc consumption?	XY ON		
3. Maintained leak detection inspection and repair reports for the following:			
a. documentation of leaks repaired w/in 24 hrs? or;	DA DN XINVY		
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 XN/A		
4. Maintained calibration data? (for applicable direct reading instruments)	DY DN ZYN/A		
5. Maintained exhaust duct monitoring data on perc concentrations?	OY ON YONA		
6. Maintained startup/shutdown/malfunction plan?	XYY ON		
7. Maintained deviation reports?	OY ON XN/A		
Problem corrected?	OY ON XN/A		
8. Maintained compliance plan, if applicable?	אלא אם צם		

P	PART VI: LEAK DETECTION AND REPAIRS			
1.	1. Does the responsible official conduct a weekly (for small sources, bi-weekly) leak detection and repair			
	inspection?			MD ND
2.	Has the facility maintained a leak log?	?		ŹY □N
3.	Does the responsible official check the	e following areas for leaks	s?	Section 1
	Hose connections, fittings, couplings, and valves	DY ON ON/A	Muck cookers	אואלם אם אם
	Door gaskets and seating	אוחם חם אאב	Stills	אואם אם אוא
	Filter gaskets and seating	Y ON ON/A	Exhaust dampers	DY DN DXVA
	Pumps	Y ON ON/A	Diverter valves	DY DN MINA
	Solvent tanks and containers	ANU UU TINIA	Cartridge filter housin	gs XY ON ON/A
	Water separators	YDY ON ON/A		
4.	4. Which method of detection is used by the responsible official?			١.,
	Visual examination (condensed solvent on exterior surfaces)			×
	Physical detection (airflow felt to	hroug h gaskets)		X
	Odor (noticeable perc odor)			
	Use of direct-reading instrument	ation (FID/PID/calorimetr	ric tubes)	
	Halogen leak detector			\ <u></u>
	If using direct-reading inst	rumentation, is the equip	oment:	XN/A
	a. Capable of detecting	perc vapor concentration	s in a range of 0-500 ppm?	אם לם
	b. Calibrated against a (PID/FID only)?	standard gas prior to and a	after each use	מם עם
	c. Inspected for leaks a	nd obvious signs of wear	on a weekly basis?	אם אם
	d. Kept in a clean and s	secure area when not in us	e?	מס עם
	e. Verified for accuracy	y by use of duplicate samp	oles (calorimetric only)?	רם אם אם

Inspector's signature

d

Approximate Date of Next Inspection

ADDITIONAL SITE INFORMATION:

RO has his own recordkeeping form.

Needs to have all records available regardless of his presence at the facility. Machine not operating at time of inspeting.

Cypress Village Mall Miami Lakes Winmill Gate Mall Miami Lakes

RON SEITZ

Cleaners

6995 West 12th Avenue Hialeah, Florida 33014 Phone (305) 821-1181 Fax (305) 822-1991

300405

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

AIRS ID#0250741

ARL-RON CLEANING CORP RONALD A SEITZ 6995 W 12 AVENUE HIALEAH FL 33014 FOR GOVERNMENT USE ONLY

Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

CARRIAGE CLEANERS

16 Jan '98

1068

Licenses

DEPT. OF ENVIRONMENTAL PRPTECTION

50.00

EASTERN NATL.

AIRS I.D.30250741

*****50.00

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TOTAL AMOUNT DUE: \$50.00

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Org.: 37550101000 EO: B1

Fund: 20-2-035001 Obj.: 002273

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	
IO AIRS ID # 0250741001AG RONALD A SEITZ CARRIAGE CLEANERS 6995 W 12 AVENUE HIALEAH FL 33014	·

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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD ALDOLFFD'I WE	LETE 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) by Date of Delivery C. Signature Addressee Addressee		
1. Article Addressed to: 10 AIRS ID # 0250741001AG RONALD A SEITZ CARRIAGE CLEANERS	D is delivery address different if m item 1?		
6995 W 12 AVENUE HIALEAH FL 33014	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.		
	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number (Copy from service label), 2997			
PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-99-M-1789		

United States Postal Service

10



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AIRS ID # 0250741

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