

PERCHLOROETHYLENE DRY CLEANER,
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

RECEIVED
MAY 29 2001
Bureau of Air Monitoring
& Mobile Sources

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

Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner): <i>PAT'S Drycleaning INC.</i>
2. Site Name (For example, plant name or number): <i>One Price Dry Clean's</i>
3. Hazardous Waste Generator Identification Number: <i>FCR00005686</i>
4. Facility Location: <i>4275 A Okechobe Road</i> Street Address: City: <i>W.P.B.</i> County: <i>P.B.C.</i> Zip Code: <i>33409</i>
5. Facility Identification Number (DEP Use ONLY - do not fill in) <i>0990580-000</i>

Responsible Official

6. Name and Title of Responsible Official: Name: <i>PATEL Dinesh</i> Title: <i>Vice President</i>
7. Responsible Official Mailing Address: Organization/Firm: Street Address: <i>Same as above</i> City: County: Zip Code:
8. Responsible Official Telephone Number: Telephone: <i>(561) 276-2356</i> Fax: () -

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):
10. Facility Contact Address: Street Address: City: County: Zip Code:
11. Facility Contact Telephone Number: Telephone: () - Fax: () -

Facility Information

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

How many dry-to-dry machines do you have on-site? 2

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

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

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

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site? N/A

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

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

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

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

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

30 gallons (You must fill this in)

*New owner
4/15/01 (3-gal T. PIV machine)*

(b) If less than 12 months, how many? 1 months

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

New store: New machine

Unopened store (date of expected opening _____)

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

Small Area Source

- Dry-to-dry machines only on-site (used less than 140 gallons of perc per year)
- Transfer only on-site (used less than 200 gallons of perc per year)
- Both machine types on-site (used less than 140 gallons of perc per year)

Large Area Source

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

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

Existing machines at small area source
 (NONE REQUIRED)

New machines at small area source
 Refrigerated condenser

Existing machines at large area source
 Carbon adsorber
 Refrigerated condenser

New machines at 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 (see attached memo for the criteria).

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

How many boilers do you have on-site? /

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

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

6. Equipment Monitoring and Recordkeeping Information

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

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

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

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

Responsible Official Certification

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

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

PATRICIA DINEEN
Print name of responsible official


Signature

5/7/01
Date

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

RECEIVED
[JUL 20 2001]
Bureau of Air Monitoring
& Mobile Sources

Part III. Notification of Intent to Use General Permit

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Facility Name and Location

1. Facility Owner/Company Name (Name of corporation, agency, or individual owner):	PAT'S Drycleaning INC.		
2. Site Name (For example, plant name or number):	One Price Drycleaning		
3. Hazardous Waste Generator Identification Number:	FLR 00000 5686		
4. Facility Location: Street Address:	4275 A OKEECHOBEE RMC		
City:	County:	Zip Code:	
W-P.B.	PBC	FL 33409	
5. Facility Identification Number (DEP Use ONLY - do not fill in)	0990580-002		

Responsible Official

6. Name and Title of Responsible Official:	Name: Patel Dinesh Title: Vrc. President.		
7. Responsible Official Mailing Address: Organization/Firm:	3700 Palm DR.		
Street Address:	City: Delray Beach County: PBC Zip Code: FL 483 33		
8. Responsible Official Telephone Number:	Telephone: (561) 686-2212 Fax: (561) 276-2312		

Facility Contact (If different from Responsible Official)

9. Name and Title of Facility Contact (For example, plant manager):			
10. Facility Contact Address:	Street Address:		
City:	County:	Zip Code:	
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Facility Information

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

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

Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
1995	Existing/New	RC/CA/None required	Same
1993	Existing/New	RC/CA/None required	Same
_____	Existing/New	RC/CA/None required	_____

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

1.(b) TRANSFER MACHINES ONLY

How many washers do you have on-site? N/A

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

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_____	Existing/New	RC/CA/None required	_____
_____	Existing/New	RC/CA/None required	_____

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

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

125 gallons (You must fill this in)

(b) If less than 12 months, how many? 4 months

Ref. Fill Machine

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

Re New store: New machine

Reopen store Unopened store (date of expected opening _____)

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

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(NONE REQUIRED)

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Existing machines at large area source
Carbon adsorber
Refrigerated condenser

New machines at large area source
Refrigerated condenser

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What type of fuel do you use? propane natural gas
 No. 2 fuel oil No. 4 fuel oil
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- (d) Carbon adsorber exhaust perc concentration monitoring
- (e) Startup, shutdown, malfunction plan

7. Surrender of Existing DEP Air Permit(s)

Please indicate with an "X" the appropriate selection:

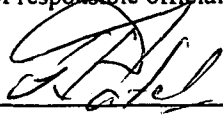
- I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are _____
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I will promptly notify the Department of any changes to the information contained in this notification.

PATEL Dinesh
Print name of responsible official


Signature

6/12/01
Date

6/8/01 Called + LM CRB

0990580-002

6/8/01

Spoke to Patel Dinesh and he stated that one machine was purchased in 1993 and the 2nd machine was purchased in 1995. Both machines contain built-in refrigerated condensers.

p15

(cc) Add Date initially purchased from manufacturer for both Dry cleaning machines.

Add date Control Device Installed for each machine. If same as purchase date, add "Same" for each machine

p16

(e) Required. Should be marked.

p17 Responsible official sign and date for changes made.



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

422004 JAN21 2003

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

TOTAL AMOUNT DUE: \$50.00

X
Bureau of Air Monitoring
& Mobile Sources

JAN 24 2003

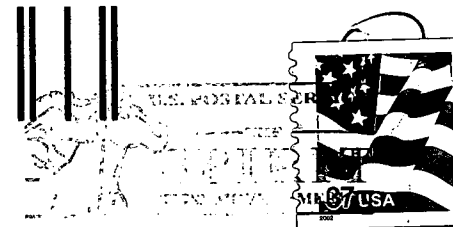
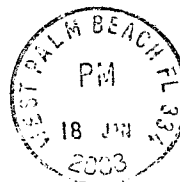
RECEIVED

Do NOT Remove Label

ONE PRICE DRY CLEANING PATEL DINESH 3100 PALM DRIVE DELRAY BEACH FL 33483	AIRS ID#0990580
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FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001 Obj.: 002273
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*Patel Dry Clean
4275 A Okobachman
WPA
FL 33409*



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

32315+3070 99





THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

412018 DEC21 2001

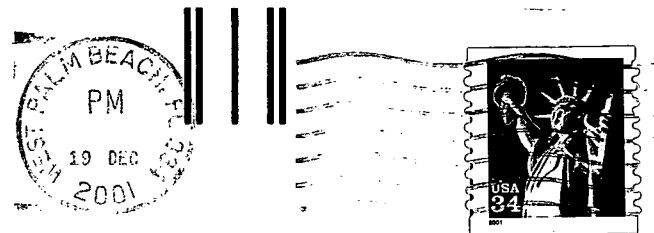
Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do **NOT** Remove Label

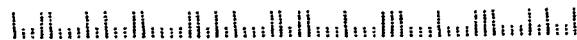
AIRS ID # 0990580
 ONE PRICE DRY CLEANING
 PATEL DINESH
 3100 PALM DRIVE
 DELRAY BEACH FL
 33483

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



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

32315+3070 93



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

443913 DEC29 2004

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

TOTAL AMOUNT DUE: \$50.00

RECEIVED

DEC 30 2004

Bureau of Air Monitoring
& Mobile Sources

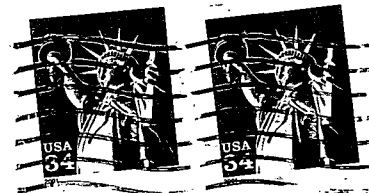
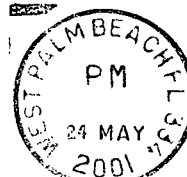
FOR GOVERNMENT USE ONLY
ORG.: 37550101000 PO: A1
FUND: 20-2-035001
OBJECT: 002273

Do NOT Remove Label

AIRS ID# 990580 10
ONE PRICE DRY CLEANING
4275 A Okeechobee Blvd
WEST PALM BEACH, FL 33409

Printed on recycled paper.

One Price Dry Cleaning
4275 A. OKEECHOBEE BLVD
W. P. B.
FL 33409



To: GENERAL Permit Section
Bureau of Air Monitoring & Mobile Sources
MS-5510
Dept of Environmental Protection
2600 Blair Stone RD
Tallahassee FL 32399-2400

