

## TECHNICAL SOLUTIONS NORTH AMERICA

February 28, 2006

Mr. Jim Byer Department of Environmental Protection Northwest District Office 160 Governmental Center Pensacola, FL 32501-5794

RE:

Annual Mercury Recovery and Reclamation Reports RY 2006 Veolia ES Technical Solutions, L.L.C.

342 Marpan Lane Tallahassee, FL 32305 EPA ID# FL0000207449

Dear Mr. Byer

We are submitting our annual mercury recovery and reclamation reports for RY 2006. The mercury recovery report contains phosphor powder and crushed lamps.

If you have any questions please call me at (850)-877-8299 or Mr. Greg Newton at (602)-233-2955

Sincerely,

Linda Dunwoody

Operations Manager

CC: Greg Newton



## Department of Environmental Protection

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

62-737.900(3)

Form Title

Mercury Recovery and Mercury

Reclamation Facility Annual

Effective Date

May 20, 1998

Mercury Recovery and Mercury	
<b>Reclamation Facility Annual Report and Instruction</b>	S
For Calendar Year 2006	

*If other than January 1, explain in "Other Notes of	*, through December 31, 2006 or Explanations," on Page 3.
Pursuant to Rule 62-737.600, Florida Administrative Code, mercury re to operate in the state of Florida must report their activities to the Departm	
Part I: Business Information:	
1. Business name: VEOLIA ES TECHNICAL Solutions, L	.L. C.EPA ID Number: FL 0000 207449
2. Mailing address: 342 MARPAN LANE, TALL	AHASSEE, FL. 32305
	Telephone No.:(850 ) 877- 8299
3. Street Address: SAME AS ABOVE	
4. Name of person preparing report (please print): GREG 5. A	
Title EH+S MgR.	Telephone No.: (602) 233-2955
	al report for each type of facility your business
☐ Mercury Recovery Mercury I	Reclamation
Part III: Materials Flow: Complete both Table 1 on Page 2 and Table 2 on	Page 3.
Part VI: Certification:	
To the best of my knowledge and belief, I certify under penalty of perjury accurate and correct. I have attached all documents that are required.  Print Name of Authorized Agent  Signalure of Authorized	2/2/07
Mail completed form to	

Mail completed form to: Florida Department of Environmental Protection Hazardous Waste Management Section MS 4555 2600 Blair Stone Road Tallahassee, Florida 32399-2400

Page 1 of 6

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NORTHWEST FLORIDA

Table 1: Materials Flow: All quatities in Kilgrams. If you report quatities on lines 10, 18, or 29, use the lines marked "Specify" below the table to describe the

material. Use the codes on page 5 to complete the "Destination Code" column.

	Material	Method	Beginning	Inventory	Quantity	Received	From Out of	Quantity	Shipped	Destination Code	Ending	Inventory
			Number	Kilograms	Number	Kilograms	State	Number	Kilograms		Number	Kilograms
1	LAMPS											
2	Straight Fluorescent 4Ft.											
3	Straight Fluorescent 8Ft.											
4	Straight Fluorescent Other Lenghts											
5	Total Straight Fluorescents											
6	Irregular Fluorescent U, Circular											
7	Irregular Fluorescent Compact											
8	Total Irregular Fluorescent											
9	High Intensity Discharge (HID)											
10	Other Whole Lamps (Specify Below)											
11	Unintentionally Broken Lamps		400000								Che all los	
12	Total Lamps											
13	Intentionally Crushed Lamps											
14	DEVICES											
15	Thermostats											1.
16	Mercury Column Devices											
17	Other Relays/Switches/Guages	200		2,800		5,986	50%		3,580	14		40
18	Other Devices (Specify Below)											
19	Unintentionally Broken Devices											
20	Total Devices			2,800		5,986	50%		3,580	14		40
21	Intentionally Crushed Devices										The second	
22	MISCELLANEOUS											
23	Separated Ampules							S. Despite				
24	Separated HID Arc Tubes											
25	Liquid Mercury			170		0			1,070	11	A COLUMN	48
26	Separated Glass	111011			TO MANUEL STATE OF THE PARTY OF							
27	Sparated Aluminum											
28	Phosphor Powder											
29	Other (Specify Below)							mally sa	4,490	14,15		1,46
30	Total Materials	Mary Mary		2,970		5,986			9,140		100000	2,35

**Specify:** Describe materials listed in Table 1 above on Line 10, Line 18, and Line 29. For example, laboratory test equipment lamps, filter material, floor sweepings, cardboard, plastic, personal protective equipment, etc.

Line 17 This includes all MCMA received by the facility (thermometers, thermostats, switches), material shipped offsite is retorted glass, metal and recoverables from processing Mercury Devices

Line 18	
Line 29 _PPE and Mercury Debris generated while processing Mercury containing devices	

Other Notes or Explanations: Use this space for other notes of explanations needed to charm, specify which line and column the note or explanation applies to. For example: "Line 27, Destination - Our facility shipped 20,000 Kg of separated lamp glass to an in-state recycling facility and 25 Kg of separated lamp glass to an in-state mercury reclamation
facility because the mercury content exceeded 3 ppm." Attach additional sheets if necessary.

Table 2: Rejected Materials: Use this space to list the descriptions, total amounts and disposition of <u>all incoming</u> materials which were <u>rejected</u> by your facility <u>and all outgoing</u> materials which were <u>rejected</u> by the destination facility. Attach additional sheets if necessary.

Material	Incoming (Kg)	Outgoing (Kg)	Reason Rejected	Disposition
				-
				-
· · · · · · · · · · · · · · · · · · ·				-



For reporting period from \_

## Department of Environmental Protection

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

62-737.900(3)

Form Title

Mercury Recovery and Mercury

Reclamation Facility Annual

Effective Date

May 20, 1998

\_\_\*, through December 31, 2006

## Mercury Recovery and Mercury **Reclamation Facility Annual Report and Instructions** For Calendar Year 2006

	ursuant to Rule 62-737.600, Florida Administrative Code, mercury recovery and mercury reclamation facilities permitted erate in the state of Florida must report their activities to the Department using this form. See instructions on pages 4-6.
Part I:	Business Information:
1. Bu	usiness name: Veclia Es Technical Solutions, L.L.C. EPAID Number: FL0000207449
2. M	lailing address: 342 MARPAN LANE, TALLAHASSEE, FL 32305
_	Telephone No.:(850) 877-8299
3. St	treet Address: SAME AS ABOVE
Ti Part II	ame of person preparing report (please print): GREG S. NEWTON  itle EH & S MANAGER  Telephone No.:(602) 233-2955  Type of Facility: (Check one only. Submit a separate annual report for each type of facility your business
operat	Mercury Recovery
Part II	II: Materials Flow: Complete both Table 1 on Page 2 and Table 2 on Page 3.
Part V	/I: Certification:
Lin	e best of my knowledge and belief, I certify under penalty of perjury that the information provided in this report is true, ate and correct. I have attached all documents that are required.  Indo Junior Harmond Junio

Tallahassee, Florida 32399-2400 Page 1 of 6

Mail completed form to: Florida Department of Environmental Protection Hazardous Waste Management Section MS 4555 2600 Blair Stone Road

Table 1: Materials Flow: All quatities in Kilograms. If you report quantities on lines 10, 18, or 29, use the lines marked "Specify" below the table to describe the

material. Use the codes on page 5 to complete the "Destination Code" column.

	Material Use the codes on page 5 to co	Method	Beginning		Quantity	Ou			From Out of		Shipped	Destination Code	Ending	Inventory
			Number	Kilograms	Number	Kilograms	State	Number	Kilograms		Number	Kilograms		
1	LAMPS													
2	Straight Fluorescent 4Ft.	04	14000	3508	672201	168154	0%	686201	171662	01	(			
3	Straight Fluorescent 8Ft.	04	3500	1758	68481	34262	0%	71981	36020	01	(			
4	Straight Fluorescent Other Lenghts	04	2700	653	13415	3144	0%	16115	3797	01	(			
5	Total Straight Fluorescents	04	20200	5919	754097	205560	0%	774297	211479	01	(			
6	Irregular Fluorescent U, Circular	04	800	200	37001	9256	0%	37801	9456	01	(			
7	Irregular Fluorescent Compact	04	75	18	57626	14415	0%	57701	14433	01	(			
8	Total Irregular Fluorescent	04	875	218	94627	23671	0%	95502	23889	01	(			
9	High Intensity Discharge (HID)	04	500	93	109249	20542	0%	109749	20635	01	(			
10	Other Whole Lamps (Specify Below)	04	0	0	763	191	0%	763	191	01	(			
11	Unintentionally Broken Lamps	21/20/2		0		3776	0%		3776	01				
12	Total Lamps	1000	21575	6230	958736	253740			259970	01	(			
13	Intentionally Crushed Lamps			408		7266	0%		7674	01				
14	DEVICES											reserve		
15	Thermostats		0	0			0%				-			
16	Mercury Column Devices		0	63			0%							
17	Other Relays/Switches/Guages					1224	0%	-	1224	01				
18	Other Devices (Specify Below)						0%							
19	Unintentionally Broken Devices						0%			-				
20	Total Devices		140	63	50	1224	0%	190	1287	01	(			
21	Intentionally Crushed Devices			0		0	0%	30 (48)	0					
22	MISCELLANEOUS									A STATE OF THE STA				
23	Separated Ampules			0		0	0%		0					
24	Separated HID Arc Tubes			0		0	0%		0					
25	Liquid Mercury			0		0	0%		0					
26	Separated Glass	PART		0		0	0%		0		7.5			
27	Sparated Aluminum	DAY OF		0	No contract	0	0%	AND DESCRIPTION OF THE PERSON NAMED IN	0					
28	Phosphor Powder	THE ST		0		0	0%		0		188			
29	Other (Specify Below)			0		0	0%		0		A VALUE			
30	Total Materials	Maccini		6701	HATE WALLES	262230	0%	The state of	268931					

**Specify:** Describe materials listed in Table 1 above on Line 10, Line 18, and Line 29. For example, laboratory test equipment lamps, filter material, floor sweepings, cardboard, plastic, personal protective equipment, etc.

Line 10 _	amps,
Line 18	
_	
Line 29	

Other Notes or Explanations: Use this space for other notes or explanations needed to clarify what you report in Table 1. Please specify which line and column the note or explanation applies to. For example: "Line 27, Destination - Our facility shipped 20,000 Kg of separated lamp glass to an in-state recycling facility and 25 Kg of separated lamp glass to an in-state mercury reclamation
facility because the mercury content exceeded 3 ppm." Attach additional sheets if necessary.

Table 2: Rejected Materials: Use this space to list the descriptions, total amounts and disposition of <u>all incoming</u> materials which were <u>rejected</u> by your facility <u>and all outgoing</u> materials which were <u>rejected</u> by the destination facility. Attach additional sheets if

necessary.

Material	Incoming (Kg)	Outgoing (Kg)	Reason Rejected	Disposition
INKNOWN lieuid	Incoming (Kg)	476	NON CONFORMING	RETURN TO GENERATO
INKNOWN liquid Kerosene	5	Outgoing (Kg) 476 5	NON CONFORMING	Disposition RETURN TO GENERATOR RETURN TO GENERATOR