

From: Greg.Newton@veoliaes.com

Sent: Monday, March 19, 2007 4:03 PM

To: Byer, James

Subject: Fw: Additional locations for the Universal Waste Lamp & Devices permit

Attachments: scanned_.pdf

Good Afternoon Jim, attached is the supporting documents that are to be overnighted to Laurie Tenace for our Tallahassee location. The corporate permit department was tasked with completing these permits and submitting them to your agency for renewal. I have not been able to find out if she received separate notices for renewal or if it came to her as one renewal notice for all locations. This is now something that I have added to my compliance calender which will alert me to check on this prior to expiration.

If you need anything else please let me know,

Thanks,

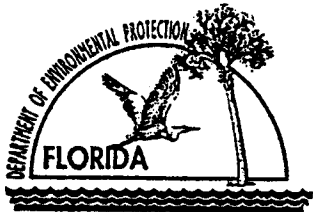
Greg S. Newton
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-----Forwarded by Greg S Newton/OSS/ONYX on 03/19/2007 01:57PM -----

To: Greg S Newton/OSS/ONYX@ONYX, Phil G Ditter/OSS/ONYX@ONYX
From: Denise Krous/OES/ONYX
Date: 03/19/2007 12:38PM
Subject: Additional locations for the Universal Waste Lamp & Devices permit

Good afternoon Greg. I have over-nighted the paperwork for the additional locations for the Universal Waste Lamp & Devices permit. (copy scanned below) Thanks, Denise

Denise Krous
Permits Administrator
Veolia ES Technical Solutions, L.L.C.
1 Eden Lane, Flanders, NJ 07836
Phone: 973/691-7321 Fax: 973/691-3978
Denise.Krous@VeoliaES.com
www.VeoliaES.com



Department of Environmental Protection

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

DEP Form # 62-737.900(1)
Form Mercury Containing Lamp/Device Transporter
and Storage Facility Registration Form
Effective Date May 20, 1998

Universal Waste Lamp and Device Transporter and Handler Facility Registration Form and Instructions

For registration period from January 1, 07 through December 31, 07

Pursuant to Rules 62-737.400 and 62-737.710, Florida Administrative Code (F.A.C.), persons/businesses that transport, store or sponsor a reverse distribution program for universal waste lamps or devices destined for recycling must register with the Department (DEP) using this form before transporting, storing or collecting such lamps or devices. (See "Who Must Register" on the back of this form.)

Part I: Registration Status: ☐ New ☒ Renewal

Registration No. NJD080631369

DEP/EPA ID No. (if applicable) FLR000124917

Part II: Business Information:

1. Business name: Veolia ES Technical Solutions, L.L.C. FEID Number: 36-4287998

2. D.B.A. (Doing Business As): _____ Telephone No.: (850) 878-2259

3. Mailing address: 1 Eden Lane
City Flanders State NJ Zip 07836

4. Street address: 4972 Woodville Highway
City Tallahassee County _____ State FL Zip 32311

5. Name of Installation's Legal Owner: Veolia ES Technical Solutions, L.L.C.
Mailing Address: 700 East Butterfield Rd
City Lombard State IL Zip 60148

Part III: Type of Activity. Check all boxes which apply to your universal waste lamp and device activity(ies).

1. ☒ Transporter: ☒ Lamps ☒ Devices

A 10-day transfer facility will also be operated at this location: ☒ Yes ☐ No Any storage off transport vehicle? ☐ Yes ☒ No

2. ☐ Handler Facility (Submit one form for each separate handler facility location): ☐ Lamps ☐ Devices
☐ Small Quantity (less than 2,000 kilograms of lamps (< 8,000) or 100 kilograms of devices)

☐ Large Quantity (2,000 kilograms or more of lamps ($\geq 8,000$) or 100 kilograms (kg) or more of devices)

Operational Plan Included: ☐ Yes ☐ No Closure Plan (with financial assurance mechanism) Included: ☐ Yes ☐ No

DEP Only: Registration Fee (\$1,000) Received ☐ Yes ☐ No ☐ NA Amount Received _____ Check # _____

3. ☐ Reverse Distribution (RD) Program (Attach program description including names/addresses of all participating facilities):
☐ Small Quantity (less than 5,000 kg of lamps (20,000) or devices) ☐ Large Quantity (5,000 kg or more of lamps or devices)

Part IV: Certification: I hereby affirm that (1) I understand the Chapter 62-737, F.A.C. provisions that apply to my operations; (2) I understand that spent lamps and devices that are stored at or transported to facilities not operating in accordance with Chapter 62-737, F.A.C., are subject to 40 CFR 262.11 and all other applicable state and federal regulations including Rule 62-701.300, F.A.C.; (3) employees handling or transporting lamps and devices are trained in the proper handling and emergency cleanup and containment procedures applicable to their transport or handling; and (4) emergency procedures will be kept at my business location and (for transporters only) on each transport vehicle, or (for reverse distribution programs only) as otherwise allowed under this Chapter. To the best of my knowledge and belief I certify, under penalty of perjury, that the information provided on this form is true, accurate, and correct. I have attached all documents and/or authorizations that are required.

Denise Krous, Permits Administrator

Print Name of Authorized Agent

Signature of Authorized Agent

3/19/07

Date



Department of
Environmental Protection

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

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Part I: Registration Status: ☐ New ☒ Renewal

Registration No. NID080631369

DEP/EPA ID No. (if applicable) FL0000207449

Part II: Business Information:

1. Business name: Velolia ES Technical Solutions, L.L.C. FEID Number: 36-4287998

2. D.B.A. (Doing Business As): _____ Telephone No.: (850) 878-2259

3. Mailing address: 1 Eden Lane

City Flanders State NJ Zip 07836

4. Street address: 342 Marpan Lane

City Tallahassee County _____ State FL Zip 32305

5. Name of Installation's Legal Owner: Veolia ES Technical Solutions, L.L.C.

Mailing Address: 700 East Butterfield Rd, Suite 201

City Lombard State IL Zip 60148

Part III: Type of Activity - Check all boxes which apply to your universal waste lamp and device activity(ies).

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Denise Krous, Permits Administrator

Print Name of Authorized Agent

Denise Krous
Signature of Authorized Agent

3/19/07

Date