



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blairstone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

07/23/2007

John Bosek,
Clean Harbors Florida LLC
170 Bartow Municipal Arprt
Bartow, FL 33830-9572

DEP/EPA ID: **FLD980729610**
LOCATION: **170 Bartow Municipal Arprt, Bartow.**

Based on information supplied by you, we have processed and accepted your request for the facility identified with the above DEP/EPA identification number. The status of your facility remains:

Treater/Storer/Disposer, Large Quantity Generator, HW Recycler, Used Oil Handler, Universal Waste Handler

Please notify us in writing if there is any change in your operations which would affect your status. For further assistance, please call the Hazardous Waste Notification Coordinator at (850)245-8760 or (850)245-8772.

Sincerely,

Michael X. Redig
Environmental Manager
Hazardous Waste Regulation Section

ME ID: 50782
Email Address: Bosek.John@cleanharbors.com

FACILITY NOTIFICATION DETAILS:

Notif ID: 950

CLEAN HARBORS FLORIDA LLC

City: Bartow County: Polk

EPAID: FLD980729610

Workflow: [Click Here to enter workflow data.](#)

Process	Start	Stop	Time_stamp	Author
Logged			7/11/2007 4:53:56 PM	Pandley_R
Xed Out HOPE	12:00:00 AM	12:00:00 AM	7/17/2007 8:33:48 AM	Thigpen_S
FDM data entered in Fiesta	12:00:00 AM	12:00:00 AM	7/20/2007 8:40:26 AM	Thigpen_S
Hanlder data Entered in CHAZ	12:00:00 AM	12:00:00 AM	7/20/2007 4:09:03 PM	Noland_T
Notification Letter Emailed	12:00:00 AM	12:00:00 AM	7/20/2007 4:09:39 PM	Noland_T

Comments [Click Here to enter new comment.](#)

Date	Comment	Author
7/23/2007 1:31:12 PM	still need the waste codes put in. Steve said that this may be something that Hazi can do so I got facility contact to send an excel and need to talk to Mike Redig about Hazi uplodaing to the database.	Noland_T

9. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes):

A. Hazardous Waste Activities:

For Items 2 through 7, check all that apply.

1. Generator of Hazardous Waste

(Choose only one of the following three categories.)

- ☒ a. Large Quantity Generator (LQG):
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of *non-acute* hazardous waste; or Greater than 1 kg (2.2 lbs) of *acute* hazardous waste
- ☐ b. Small Quantity Generator (SQG):
Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 lbs.) of *non-acute* hazardous waste and/or 1 kg (2.2 lbs) or less of *acute* hazardous waste
- ☐ c. Conditionally Exempt SQG (CESQG):
Generates in any calendar month 100 kg/mo or less (220 lbs.) of *non-acute* hazardous waste and/or 1 kg (2.2 lbs) or less of *acute* hazardous waste

In addition, indicate other generator activities (that apply).

- ☒ d. United States Importer of hazardous waste
- ☐ e. Mixed Waste (hazardous and radioactive) Generator

2. ☒ Treater, Storer, or Disposer of Hazardous Waste (at your facility) Note: A hazardous waste permit may be required for this activity.

3. ☒ Recycler of Hazardous Waste (at your facility)
Specify: ☒ Commercial; ☐ Non-Commercial.
Note: A hazardous waste permit may be required for this activity.

4. ☐ Exempt Boiler and/or Industrial Furnace
☐ a. Small Quantity On-site Burner Exemption
☐ b. Smelting, Melting, and Refining Furnace Exemption

5. ☐ Person Authorized to Manage Conditionally Exempt Waste generated at other facilities - Check this management activity ONLY if you attach EITHER a copy of your application for such authorization OR the authorization you received from FDEP.

6. ☐ Underground Injection Control

7. ☐ Transporter of Hazardous Waste Note: A Certificate of Liability Insurance is required along with this registration. Registration must be renewed annually. ☐ a. For own waste only; ☐ b. For Commercial Purposes.

c. Hazardous Waste Transporter Insurance Information:

Insurance Company _____

Address _____

Contact: _____

Telephone: _____

Policy Number: _____

Expiration date: _____

- d. Transportation Mode: ☐ Air; ☐ Rail; ☐ Highway; ☐ Water; ☐ Other - specify _____

- e. ☐ Hazardous Waste Transfer Facility: Storage Volume _____

B. Universal Waste (UW) Activities:

1. Indicate types of UW generated and/or accumulated at your facility (includes destination facilities). (check all boxes that apply)

	Generate/ Accumulate	Transport
a. Batteries	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Mercury Containing Thermostats	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Mercury Containing Lamps	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Mercury Containing Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Pharmaceuticals	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

2. Maximum quantity of UW handled/transported at any time

- ☒ a. 5,000 kg or more; Large Quantity Handler (LQH)
- ☒ b. More than 1 kg of acutely hazardous pharmaceutical waste ("P-listed") (LQH)
- ☐ c. Less than 5,000 kg (11,000 lbs); Small Quantity Handler (SQH)

3. ☒ Destination Facility for UW

Note: For this activity, a facility must treat, dispose or recycle a UW. A facility must either have a hazardous waste permit or recycle the UW without storing it.

4. ☐ Transporter of UW

9. Type of Regulated Waste Activity - continued (Mark 'X' in the appropriate boxes):**C. Used Oil Activities:****1. Used Oil Transporter - Indicate type(s) of activity(ies)**

- ☐ a. Transporter
☐ b. Transfer Facility

2. Used Oil Processor and/or Re-refiner - Indicate type(s) of activity(ies)

- ☐ a. Processor
☐ b. Re-refiner

3. ☐ Off-Specification Used Oil Burner**4. Used Oil Fuel Marketer - Indicate type(s) of activity(ies)**

- ☐ a. Marketer who directs shipment of off-specification used oil to off-specification used oil burner
☐ b. Marketer who first claims the used oil meets the specifications

5. ☐ Used Oil Generator**D. Other State Regulated Waste Activities:****1. ☐ Used Oil Filter Handler****2. ☐ PCW Handler**

These activities may require additional submissions.

10. Waste Codes for Federally Regulated Hazardous Wastes: List the waste codes of the Federal hazardous wastes handled at your facility. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112).

Hazardous waste transporters list codes routinely or usually transported. Use an additional page if more spaces are needed.

1	2	3	4	5	6	7
Attached						
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

11. Other Status Changes (Mark 'X' in the appropriate boxes):**A. Non-Handler of Regulated Waste at this facility**


- ☐ 1. Business no longer generates, transports, treats, stores, or disposes of hazardous waste.
☐ 2. Waste generated by business has been delisted.
☐ 3. Other (explain) _____

B. Facility Closed

- ☐ 1. Closed at this location and moved or moving to another - submit a new 8700-12FL for the new location if you will be handling regulated waste there.
- ☐ 2. Out of Business - Business closed on _____ (Date). Please provide a contact person, mailing address, and phone number where you can be reached after closing.
 Contact _____ Phone _____
 Address _____
 City, State, Zip _____

☐ **C. Property Tax Default**☐ **D. Petition for Bankruptcy Protection****12. Comments:**

13. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of owner, operator, or an authorized representative	Name and official title (type or print) of owner, operator, or an authorized representative	Date Signed (mm-dd-yyyy)
	John Bosek, General Mgr	06/28/07

14. Additional Comments

or optionally, include a map or sketch of the facility boundaries to aid in establishing an accurate Latitude/Longitude for your facility:

APPENDIX G

WASTE ACCEPTED, STORED AND PROCESSED BY CHF

	S01	S02	T50	T63	T40	T47
D001	5000	5000	3100	1000	3100	3100
D002	500	5	1	1	1	1
D003	100	5	0	1	0	0
D004	100	100	10	1	10	10
D005	100	100	10	1	10	10
D006	100	100	10	1	10	10
D007	100	100	10	1	10	10
D008	100	100	10	1	10	10
D009	100	100	10	1	10	10
D010	100	100	10	1	10	10
D011	100	100	10	1	10	10
D012	50	50	1	1	1	1
D013	50	50	1	1	1	1
D014	50	50	1	1	1	1
D015	50	50	1	1	1	1
D016	50	50	1	1	1	1
D017	50	50	1	1	1	1
D018	1000	1000	500	10	500	500
D019	1000	1000	500	10	500	500
D020	50	50	1	1	1	1
D021	1000	1000	500	10	500	500
D022	1000	1000	500	10	500	500
D023	1000	1000	500	10	500	500
D024	1000	1000	500	10	500	500
D025	1000	1000	500	10	500	500
D026	1000	1000	500	10	500	500
D027	1000	1000	500	10	500	500

D028	1000	1000	500	10	500	500
D029	1000	1000	500	10	500	500
D030	1000	1000	500	10	500	500
D031	50	50	1	1	1	1
D032	1000	1000	500	10	500	500
D033	1000	1000	500	10	500	500
D034	1000	1000	500	10	500	500
D035	1000	1000	500	10	500	500
D036	1000	1000	500	10	500	500
D037	50	50	1	1	1	1
D038	1000	1000	500	10	500	500
D039	1000	1000	500	10	500	500
D040	1000	1000	500	10	500	500
D041	1000	1000	500	10	500	500
D042	1000	1000	500	10	500	500
D043	1000	1000	500	10	500	500
F001	5000	5000	500	100	500	500
F002	5000	5000	500	100	500	500
F003	5000	5000	3100	100	3100	3100
F004	1000	1000	500	50	500	500
F005	5000	5000	3100	100	3100	3100
F006	1000	1000	10	1	10	10
F007	100	100	5	5	5	5
F008	100	100	5	5	5	5
F009	100	100	5	5	5	5
F010	100	100	5	5	5	5
F011	100	100	5	5	5	5
F012	100	100	5	5	5	5
F019	100	100	5	5	5	5
F020	10	10	1	1	1	1

F021	10	10	1	1	1	1
F022	10	10	1	1	1	1
F023	10	10	1	1	1	1
F024	100	100	10	1	10	10
F025	100	100	10	1	10	10
F026	100	100	10	1	10	10
F027	100	100	10	1	10	10
F028	100	100	10	10	10	10
F032	100	100	10	1	10	10
F034	100	100	10	1	10	10
F035	100	100	10	1	10	10
F037	100	100	10	1	10	10
F038	100	100	10	1	10	10
F039	100	100	10	1	10	10
K001	100	100	10	1	10	10
K002	100	100	10	1	10	10
K003	100	100	10	1	10	10
K004	100	100	10	1	10	10
K005	100	100	10	1	10	10
K006	100	100	10	1	10	10
K007	10	10	1	1	1	1
K008	100	100	10	1	10	10
K009	100	100	10	1	10	10
K010	100	100	10	1	10	10
K011	10	10	1	1	1	1
K013	10	10	1	1	1	1
K014	10	10	1	1	1	1
K015	100	100	10	1	10	10
K016	100	100	10	1	10	10
K017	100	100	10	1	10	10

K018	100	100	10	1	10	10
K019	100	100	10	1	10	10
K020	100	100	10	1	10	10
K021	100	100	10	1	10	10
K022	100	100	10	1	10	10
K023	100	100	10	1	10	10
K024	100	100	10	1	10	10
K025	100	100	10	1	10	10
K026	100	100	10	1	10	10
K027	100	100	10	1	10	10
K028	100	100	10	1	10	10
K029	100	100	10	1	10	10
K030	100	100	10	1	10	10
K031	100	100	10	1	10	10
K032	100	100	10	1	10	10
K033	100	100	10	1	10	10
K034	100	100	10	1	10	10
K035	100	100	10	1	10	10
K036	100	100	10	1	10	10
K037	100	100	10	1	10	10
K038	100	100	10	1	10	10
K039	100	100	10	1	10	10
K040	100	100	10	1	10	10
K041	100	100	10	1	10	10
K042	100	100	10	1	10	10
K043	100	100	10	1	10	10
K044	100	100	10	1	10	10
K045	100	100	10	1	10	10
K046	100	100	10	1	10	10
K047	100	100	10	1	10	10

K048	100	100	10	1	10	10
K049	100	100	10	1	10	10
K050	100	100	10	1	10	10
K051	100	100	10	1	10	10
K052	100	100	10	1	10	10
K060	100	10	1	1	1	1
K061	100	100	10	1	10	10
K062	100	100	10	1	10	10
K069	100	100	10	1	10	10
K071	100	100	10	1	10	10
K073	100	100	10	1	10	10
K083	100	100	10	1	10	10
K084	100	100	10	1	10	10
K085	100	100	10	1	10	10
K086	100	100	10	1	10	10
K087	100	100	10	1	10	10
K088	100	10	1	1	1	1
K093	100	100	10	1	10	10
K094	100	100	10	1	10	10
K095	100	100	10	1	10	10
K096	100	100	10	1	10	10
K097	100	100	10	1	10	10
K098	100	100	10	1	10	10
K099	100	100	10	1	10	10
K100	100	100	10	1	10	10
K101	100	100	10	1	10	10
K102	100	100	10	1	10	10
K103	100	100	10	1	10	10
K104	100	100	10	1	10	10
K105	100	100	10	1	10	10

K106	100	100	10	1	10	10
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K108	100	100	10	1	10	10
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K111	10	10	1	1	1	1
K112	100	100	10	1	10	10
K113	100	100	10	1	10	10
K114	100	100	10	1	10	10
K115	100	100	10	1	10	10
K116	10	10	1	1	1	1
K117	100	100	10	1	10	10
K118	100	100	10	1	10	10
K123	100	100	10	1	10	10
K124	10	10	1	1	1	1
K125	100	100	10	1	10	10
K126	100	100	10	1	10	10
K131	10	10	1	1	1	1
K132	100	100	10	1	10	10
K136	100	100	10	1	10	10
K141	100	100	10	1	10	10
K142	100	100	10	1	10	10
K143	100	100	10	1	10	10
K144	100	100	10	1	10	10
K145	100	100	10	1	10	10
K147	100	100	10	1	10	10
K148	100	100	10	1	10	10
K149	100	100	10	1	10	10
K150	100	100	10	1	10	10
K151	100	100	10	1	10	10

K156	100	100	10	1	10	10
K157	100	100	10	1	10	10
K158	100	100	10	1	10	10
K159	100	100	10	1	10	10
K161	100	100	10	1	10	10
K169	100	100	10	1	10	10
K170	100	100	10	1	10	10
K171	100	100	10	1	10	10
K172	100	100	10	1	10	10
K174	100	100	10	1	10	10
K175	100	100	10	1	10	10
K176	100	100	10	1	10	10
K177	100	100	10	1	10	10
K178	100	100	10	1	10	10
K181	100	100	10	1	10	10
P001	10	1	1	1	1	1
P002	10	1	1	1	1	1
P003	10	1	1	1	1	1
P004	10	1	1	1	1	1
P005	10	1	1	1	1	1
P006	10	1	1	1	1	1
P007	10	1	1	1	1	1
P008	10	1	1	1	1	1
P009	10	1	1	1	1	1
P010	10	1	1	1	1	1
P011	10	1	1	1	1	1
P012	10	1	1	1	1	1
P013	10	1	1	1	1	1
P014	10	1	1	1	1	1
P015	10	1	1	1	1	1

P016	10	1	1	1	1	1
P017	10	1	1	1	1	1
P018	10	1	1	1	1	1
P020	10	1	1	1	1	1
P021	10	1	1	1	1	1
P022	10	1	1	1	1	1
P023	10	1	1	1	1	1
P024	10	1	1	1	1	1
P026	10	1	1	1	1	1
P027	10	1	1	1	1	1
P028	10	1	1	1	1	1
P029	10	1	1	1	1	1
P030	10	1	1	1	1	1
P031	10	1	1	1	1	1
P033	10	1	1	1	1	1
P034	10	1	1	1	1	1
P036	10	1	1	1	1	1
P037	10	1	1	1	1	1
P038	10	1	1	1	1	1
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P041	10	1	1	1	1	1
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P045	10	1	1	1	1	1
P046	10	1	1	1	1	1
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P050	10	1	1	1	1	1
P051	10	1	1	1	1	1
P054	10	1	1	1	1	1
P056	10	1	1	1	1	1
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P066	10	1	1	1	1	1
P067	10	1	1	1	1	1
P068	10	1	1	1	1	1
P069	10	1	1	1	1	1
P070	10	1	1	1	1	1
P071	10	1	1	1	1	1
P072	10	1	1	1	1	1
P073	10	1	1	1	1	1
P074	10	1	1	1	1	1
P075	10	1	1	1	1	1
P076	10	1	1	1	1	1
P077	10	1	1	1	1	1
P078	10	1	1	1	1	1
P081	10	1	1	1	1	1
P082	10	1	1	1	1	1
P084	10	1	1	1	1	1
P085	10	1	1	1	1	1
P087	10	1	1	1	1	1

P088	10	1	1	1	1	1
P089	10	1	1	1	1	1
P092	10	1	1	1	1	1
P093	10	1	1	1	1	1
P094	10	1	1	1	1	1
P095	10	1	1	1	1	1
P096	10	1	1	1	1	1
P097	10	1	1	1	1	1
P098	10	1	1	1	1	1
P099	10	1	1	1	1	1
P101	10	1	1	1	1	1
P102	10	1	1	1	1	1
P103	10	1	1	1	1	1
P104	10	1	1	1	1	1
P105	10	1	1	1	1	1
P106	10	1	1	1	1	1
P108	10	1	1	1	1	1
P109	10	1	1	1	1	1
P110	10	1	1	1	1	1
P111	10	1	1	1	1	1
P112	10	1	1	1	1	1
P113	10	1	1	1	1	1
P114	10	1	1	1	1	1
P115	10	1	1	1	1	1
P116	10	1	1	1	1	1
P118	10	1	1	1	1	1
P119	10	1	1	1	1	1
P120	10	1	1	1	1	1
P121	10	1	1	1	1	1
P122	10	1	1	1	1	1

P123	10	1	1	1	1	1
P127	10	1	1	1	1	1
P128	10	1	1	1	1	1
P185	10	1	1	1	1	1
P188	10	1	1	1	1	1
P189	10	1	1	1	1	1
P190	10	1	1	1	1	1
P191	10	1	1	1	1	1
P192	10	1	1	1	1	1
P194	10	1	1	1	1	1
P196	10	1	1	1	1	1
P197	10	1	1	1	1	1
P198	10	1	1	1	1	1
P199	10	1	1	1	1	1
P201	10	1	1	1	1	1
P202	10	1	1	1	1	1
P203	10	1	1	1	1	1
P204	10	1	1	1	1	1
P205	10	1	1	1	1	1
U001	100	100	10	10	10	10
U002	500	500	500	10	500	500
U003	10	10	1	1	1	1
U004	100	100	10	10	10	10
U005	10	10	1	1	1	1
U006	10	10	1	1	1	1
U007	100	100	10	10	10	10
U008	10	10	1	1	1	1
U009	10	10	1	1	1	1
U010	100	100	10	10	10	10
U011	100	100	10	10	10	10

U012	100	100	10	10	10	10
U014	100	100	10	10	10	10
U015	100	100	10	10	10	10
U016	100	100	10	10	10	10
U017	100	100	10	10	10	10
U018	100	100	10	10	10	10
U019	100	100	10	10	10	10
U020	10	10	1	1	1	1
U021	100	100	10	10	10	10
U022	100	100	10	10	10	10
U023	100	100	10	10	10	10
U024	100	100	10	10	10	10
U025	100	100	10	10	10	10
U026	100	100	10	10	10	10
U027	100	100	10	10	10	10
U028	100	100	10	10	10	10
U029	100	100	10	10	10	10
U030	100	100	10	10	10	10
U031	100	100	10	10	10	10
U032	10	10	1	1	1	1
U033	10	10	1	1	1	1
U034	100	100	10	10	10	10
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