

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

October 30, 2007

Kelly Peli Seimens Water Technologies Transport Corp. 1657 Commerce Drive, Ste. 10B South Bend, IN 46628

Re: Florida Hazardous Waste Transporter Approval

Dear Mr. Peli:

Your Florida Hazardous Waste Transporter Approval Certificate for 2006-07 is enclosed. The terms and conditions of approval are specified in Sections 62-730.170 and 62-730.171, Florida Administrative Code (FAC), a copy of which is enclosed for your reference. Please note the following:

- 1. You must demonstrate proof of liability coverage on an annual basis, even if your insurance policy is issued on a multi-year basis. If no changes in status or insurance coverage have occurred, you can meet this requirement by submitting a certificate of liability coverage form along with the two copies of the Hazardous Waste Transporter Status Form, copies of which are available upon request from the Department of Environmental Protection (DEP).
- 2. A copy of your insurance policy, together with any endorsements, must be maintained at your principal place of business.
- 3. Your insurer cannot terminate your coverage until 30 days after filing written notice with DEP, by Certified Mail, that your policy has expired or has been canceled.
- 4. Any changes to the information specified on your approval certificate will render it null and void. It is your responsibility to advise DEP of any changes in liability coverage or status.
- 5. A copy of the Hazardous Waste Transporter Status Form, complete with the Department approval shall be carried in each vehicle transporting hazardous waste for the transportation company.

Mr. Kelly Peli October 30, 2007 Page Two

6. If you intend to operate a hazardous waste transfer facility, you must submit a Transfer Facility Notification Form 30 days before you use the facility as a storage location. If you are currently operating a transfer facility, you must maintain records of incoming and outgoing hazardous waste shipments. These records must include generator names and manifest numbers, and unless otherwise approved by DEP, must be maintained at the transfer facility. You need to be aware that the 1998 Florida Legislature adopted a new bill for transfer facilities. At the present time the Department is drafting new language for 62-730.171 to meet the criteria set forth in this legislation.

If you have any questions, please contact me at 850/245-8755.

Sincerely,

Richard C. Neves

**Environmental Specialist** 

Hazardous Waste Management Section

RCN/sp

**Enclosures:** 

Hazardous Waste Transporter Approval Certificate

Hazardous Waste Transporter Status Form (with insurance verification)

Sections 62-730.170 and 62-730.171, FAC



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Michael W. Sole Secretary

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#### HAZARDOUS WASTE TRANSPORTER

CERTIFICATE OF APPROVAL

\*

This is to certify that the carrier specified below has been approved as a hazardous waste transporter in Florida. The terms and conditions of this certificate require that the holder comply with all applicable portions of Chapter 62-730, Florida Administrative Code. This certificate shall be rendered null and void if any information contained within becomes obsolete. The certificate shall remain valid through the expiration date specified below.

TRANSPORTER:

SIEMENS WATER TECH TRANSPORT COPR.

FACILITY ID NO:

FLR000094383

**FACILITY ADDRESS:** 

5690 W MIDWAY ROAD

FORT PIERCE, FL 34981

**INSURANCE CARRIER:** 

LIBERTY MUTUAL FIRE INSURANCE CO.

**INSURANCE POLICY #** 

AS2-631-004334-127

EFFECTIVE DATE:

October 01, 2007

**EXPIRATION DATE:** 

October 01, 2008

APPROVED TRANSFER FACILITY:

NO

APPROVAL ISSUED BY:

DATE: October 30, 2007

Richard C. Neves

Hazardous Waste Management Section

850/245-8755

rev. 0 (Oct 91)

### STATE OF FLORIDA

### **HAZARDOUS WASTE TRANSPORTER STATUS FORM**

1.	Transporter Identification:	
	Transporter Name: Siemens Water Technologies Transport Corp Transporter EPA ID: FER 000 094 383	A
	Location Address: 5690 West Midway Road	
	Fort Pierce, FL 34931	
Contact	ct: Kelly Peli Telephone: 574-251-9220 ext	. 104
Mailing	g Address: 1657 Commerce Drive, Suite 10B	
	South Bend, IN 46628	20.000 CONTRACTOR OF CO.
II.	Insurance Information: Insurance Company See Attached Liberty Mutual Address	Fire
	Contact: Telephone:	POY
	Policy Number: AS-631-664.334-127	
	Expiration date: 10/01/08	
Ш.	Waste Information:	
	EPA Waste Codes for Waste Routinely or Usually Transported:	
	D018 D039 D040 F001 F002 F003 F004	F005
	Comments:	
		Andrew Company of the Angree State Company
IV.	Certification:	
of my k	I certify under penalty of law that the above information is true, correct, and knowledge.	complete to the best
Da	arrell Womack Asst. S	Sec.
	Type Name Title	
	WO XXX WILL THE ST	07
Signatu	ture Date Signe	ed
V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The forms submitted by the transporter show compliance with the financial responsibility through U 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
(		131107
Cinnal	ture of Florida Department of Environmental Protection Representative Date	e Signed

DEP Form 62-730.900(5)(d) Effective 1/5/95 HW Transporter Status Form Page 1 of 1



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

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

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#### HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF APPROVAL

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

This is to certify that the carrier specified below has been approved as a hazardous waste transporter in Florida. The terms and conditions of this certificate require that the holder comply with all applicable portions of Chapter 62-730, Florida Administrative Code. This certificate shall be rendered null and void if any information contained within becomes obsolete. The certificate shall remain valid through the expiration date specified below.

TRANSPORTER:

Siemens Water Technologies Transport Corp.

FACILITY ID NO:

INR000022798

**FACILITY ADDRESS:** 

1657 Commerce Dr., Ste. 10B

South Bend, IN 46628

INSURANCE CARRIER: LIBERTY MUTUAL

INSURANCE POLICY#: AS2-631-004334-127

**EFFECTIVE DATE:** 

October 01, 2007

**EXPIRATION DATE:** 

October 01, 2008

APPROVED TRANSFER FACILITY: NO

APPROVAL ISSUED BY:

DATE: October 30, 2007

Richard Neves

Hazardous Waste Management Section

850/245-8755

rev.0(Oct 91)

# STATE OF FLORIDA

# **HAZARDOUS WASTE TRANSPORTER STATUS FORM**

1.	Transporter Identification:
	Transporter Name: Siemens Water Technologies Transport Corp.  Transporter EPA ID: INR 000 022 798
	Location Address: 1657 Commerce Drive, Suite 10B
	South Bend, IN 46628
Contact	Kelly Peli Telephone: 574-251-9220 ext. 104  Address: 1657 Commerce Drive. Suite 10B
Mailing	Address: 1657 Commerce Drive, Suite 10B
	South Bend, IN 46628
II.	Insurance Information: Insurance Company See Attached hiberty Mutual Address
	Contact: Telephone:
	Contact: Telephone: Policy Number: AS2 - 631 · 664334 - 127
	Expiration date: /6/pb//69
III.	Waste Information:
	EPA Waste Codes for Waste Routinely or Usually Transported:
	D018 D039 D040 F001 F002 F003 F004 F005
	Comments:
	Commonic.
IV.	Certification:
of my k	I certify under penalty of law that the above information is true, correct, and complete to the bestowledge.
٨	11.1 11
Da	rel Womack ASSI. Sec.
Print/Ty	ype Name Title
Da	rrell Womack  Asst. Sec.  Title  1-17-07
Signatu	ure Date Signed
V.	The transporter identified above is in compliance with the financial responsibility requirements ardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The
forms s	submitted by the transporter show compliance with the financial responsibility $n = \{0 \mid 1 \mid 1 \mid 0 \mid 8\}$ .
	Date
	The trul Ma 10/30/07
Signatu	ure of Florida Department of Environmental Protection Representative Date Signed

DEP Form 62-730.900(5)(d) Effective 1/5/95

HW Transporter Status Form Page 1 of 1



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

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

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#### HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF APPROVAL

\*

This is to certify that the carrier specified below has been approved as a hazardous waste transporter in Florida. The terms and conditions of this certificate require that the holder comply with all applicable portions of Chapter 62-730, Florida Administrative Code. This certificate shall be rendered null and void if any information contained within becomes obsolete. The certificate shall remain valid through the expiration date specified below.

TRANSPORTER:

Siemens Water Technologies Transport Corp.

FACILITY ID NO:

FLR000094375

**FACILITY ADDRESS:** 

1280 NE 48th St Ste B

Pompano Beach, FL 33064-1146

INSURANCE CARRIER: LIBERTY MUTUAL

INSURANCE POLICY#: AS2-631-004334-127

**EFFECTIVE DATE:** 

October 01, 2007

**EXPIRATION DATE:** 

October 01, 2008

APPROVED TRANSFER FACILITY: NO

APPROVAL ISSUED BY:

\_\_ DATE: October 30, 2007

Richard Neves

Hazardous Waste Management Section

850/245-8755

rev.0(Oct 91)

# STATE OF FLORIDA

### **HAZARDOUS WASTE TRANSPORTER STATUS FORM**

1.	Transporter Identification: Transporter Name: Siemens Water Technologies Transport Corp.		
	Transporter EPA ID: FLR 000 094 375		
	Location Address: 1280 NE 48th Street Pompano Beach, FL 33064		
Contact	· Kelly Peli <b>Telephone</b> : 5/4-251-9220 ext. 104		
Mailing	Address: 1657 Commerce Drive, Suite 10B South Bend, IN 46628		
II.	Insurance Information: Insurance Company  See Attached Liberty Mutual?  Address		
	Contact: Telephone:		
	Contact: Telephone: Policy Number: 4.52 - 6.3 1 - 804334-127 Expiration date: 16/51/0 8		
Ш.	Waste Information:		
	EPA Waste Codes for Waste Routinely or Usually Transported:		
	D018 D039 D040 F001 F002 F003 F004 F005		
	Comments:		
IV.	Certification:		
of my k	I certify under penalty of law that the above information is true, correct, and complete to the best nowledge.		
Dar	rell Womack Asst. Sec.		
Print/Ty	rell Womack  Asst. Sec. Title  rell Womack  9-17-07		
Dar	rell Womack 9-17-07		
Signatu	re Date Signed		
V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The forms submitted by the transporter show compliance with the financial responsibility through 60/1/00.  Date			
	Buchel Cotto 10/3/107		
Signatu	re of Florida Department of Environmental Protection Representative Date Signed		

DEP Form 62-730.900(5)(d) Effective 1/5/95 HW Transporter Status Form Page 1 of 1

Waste 62-730.170 Standards Applicable to Transporters

(1) The Department adopts by reference 40 CFR Part 263

revised as of July 1, 1993.

(2) In addition to the requirement of paragraph (1) of this Section, no person shall transport a hazardoum whate within the state for which either a manifest is required under 40 CFR Part 262 or a reclamation agreement is entered between a generator and recycler pursuant to Part 263 20 unless compliance with the following special requirements has been demonstrated.

(a) The transporter shall have and maintain financial responsibility for sudden accidental occurrences in a minimum amount of \$1,000,000 per occurrence for combined coverage of injury to persons and for damage to property and the environment from the spillage of hazardous waste while such waster are being transported including the costs of cleaning up the spill. Such financial responsibility shall be issued by an agent or company authorized or licensed to transact business in the State of plorida. Such financial responsibility shall be maintained at all times, be exclusive of legal defenses outs, and be submittained by any one or a combination of the following:

1. Evidence of casualty/liability insurance on an occurrence basis with or without a deductible. With the deductible the Insured is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursument by the insurence of liability insurance or amended by attachment of an endorsement.

2. Surety bonds.

(b) Evidence of coverage shall include submittal of an originally signed copy of one or more of the following forms adopted in Rule 62-730.900(5), F.A.C.:

Insurance, Hazardous Waste Transporter Certificate of Liability

2. Hazardous Waste Transporter Liability Endorsement,
3. Hazardous Waste Transporter Liability Surety Bond.
(c) The insurance policy, including all endorsements, or liability surety bond must be maintained at the carrier's principal place of business. the

(d) Whenever requested by the Secretary(or designee) of the Florida Department of Environmental Protection, the Insurer agrees to furnish to the department a signed duplicate original of the

policy and all endorsements.

(e) The transporter shall annually submit to the Department two originally signed Transporter Status Forms (DEP Form 62-730.900(5)(d)). The Department shall complete the approval part of the form and return one of the originally signed forms to the transporter after verifying that the transporter is complying with the financial responsibility requirements of this section. A copy of this form complete with the Department approval shall be carried in each vehicle transporting hazardous waste for the transporter. This approval is non-transferrable and

(f) This subsection does not apply to any person who transports hazardous waste only on the site of a hazardous waste generator or a permitted hazardous waste treatment, storage, or disposal facility. non-assignable. (f) This s

(9) States and the federal government are exempt from the requirements of this subsection.

(3) Evidence of financial responsibility, updated for the current year, shall be verified annually by the submission of the appropriate DEP Form 62-730.900(5)(a) through (c) or by the nubminulum of a cortificate of insurance shall include a certification by the insurer that the original insurance policy and all endorsements are still in full formation of the policy and all endorsements are still in full formation. Specific Authority: 403.704, 403.721, 403.724, 403.8055, F.S. Law Implemented: 403.704, 403.721, 403.724, F.S. Illutory: New 11-8-01; Amonded 5-31-04, 9-13-84; Formerly 17-30.17; Amended 9-19-86, 3-31-87, 5-26-87; 6-28-88; Formerly 17-30.170; Amended 1-25-09, 0-11-90, 9-10-91, 10-14-92, 10-7-93; Formerly the Department. force and effect as evidenced on the original forms submitted to 17-730.170; Amended 1-5-95. the

62-730.171 Transfer Facilities.
(1) 40 CFR 263.12 as adopted by reference in Rule 62-730.170, F.A.C. provides that transporters who store manifested hazardous waste in proper containers at a transfer facility for ten (10) days or less are exempt from regulation as a hazardous waste facility. If the waste is stored for more than ten (10) days, the facility is subject to the permitting requirements for a hazardous waste facility is subject to the permitting requirements for a hazardous

(2) A transfer facility used for storage of hazardous wante for more than 24 hours but ten (10) days or less shall comply with the following requirements as adopted by reference in 62-730.180, F.A.C.:

comply with the requirements of 10 crie transfer lacility standards), C (preparedness and prevention), D (contingoncy and omergoncy plan), and (management of containers), with the exception of 265.13. The aisle space requirements for incompatible wastes described in 40 CFR 265.17(c) shall not apply at transfer facilities to containers described in 40 cFR 265.17(c) shall not apply at transfer facilities to containers described in 40 cFR 263.10. The 40 cFR 265.17(c) c) thall not apply at transfer facilities to containers described in 40 cFR 263.10. The 40 cFR 265 requirements for incompatible wastes described in 40 cFR 265.17(c) (2) c) The 40 cFR 265.17(c) (2) c) requirements described in 40 cFR 263.10. The 40 cFR 265 requirements of the transfer facility whall aubmit the continguery and corresponcy plan to the Department with their first Transfer Facility NotLification form (DFP Form 6.2-730.900(d)).

The 40 correct of the containers of the closure plan to show that the facility whill be closure part to show that the facility whill be closure part to show that the facility whill be closure part to show that the facility whill be closure plan to show that the facility whill be closure part to show that the facility whill be closure part to show that the facility whill be closure part to show that the containers of the cransfer facility shall submit the closure plan to the peraturent which their first Transfer Facility NotLification Form (DFP Form 6.2-730.900(d)). Within 60 days of completion of closure plan to the Department with their first Transfer Facility and an independent registered, professional engineer. The certification shall be signed by both the owner or operator of the transfer facility whill be available for inspection by the Department form and shall be available for inspection by the Department form and shall be available for inspection by the Department form and shall be available for inspection which is capable of preventing spills or releases to the ground.

(a) The owner or operator of a trans (a) The owner or operator of the transfer facility shall

quantity generators.
(3) The owner of

manifested shipments of hazardous waste for more than 24 hours but ten (10) days or loss shall notify the Department on Form 62-730.900(6). The owner or operator of a new facility shall submit a notification form at least 30 days before the storage of hazardous waste is to begin. The transfer facility Notification Form (DET FORM 62-730.900(6)) and send it to the Department with the transporter's evidence of financial responsibility as required under Rule 62-730.170(3), F.A.C.

(A) The owner or operator of a transfer facility shall obtain an EPA/DEP identification number for each transfer facility location may owner or operator who has not obtained an EPA/DEP identification number for each transfer facility location may obtain one by applying to the Department using EPA Form 8700-12. Inaw implemented: 403.704, 403.721, F.S.

Liaw implemented: 403.704, 403.721, F.S.

Liaw implemented: 403.704, 403.721, F.S.

Liaw implemented: 403.704, 403.721, F.S.