

# 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

July 25, 2008

Maria Perez - Leon Environmental Management Conservation PO Box 520882 Miami, FL 33152- 0882

### **BE IT KNOWN THAT**

Environmental Management Conservation 8470 NW 68th St Miami, FL 33166- 2661

#### IS HEREBY REGISTERED AS A USED OIL

Transporter, Transfer Facility, Marketer, Filter Transporter, Filter Transfer Facility

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C) The Department of Environmental Protection hereby issues Registration Number **FLR00000166** on July 25, 2008

#### This registration will expire on 06/30/2009

This certificate documents receipt of your annual registration and annual report. It shall be displayed in a prominent place at your facility. This certificate and your cancelled check are your receipts.

> Richard C.Neves Environmental Specialist III Hazardous Waste Regulation Permitting

## ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

$\frac{ACOND}{M} CERTIFICATE OF LIABILITTINSONANCE 8/15/2007$				
PRODUCER SEITLIN 6700 N. ANDREWS AVENUE SUITE 300	THIS CERTIFICATE IS ISSUED AS A MATTER O ONLY AND CONFERS NO RIGHTS UPON T HOLDER. THIS CERTIFICATE DOES NOT AME ALTER THE COVERAGE AFFORDED BY THE F	E CERTIFICATE		
FORT LAUDERDALE FL 33309 (954) 938-8566	INSURERS AFFORDING COVERAGE	NAIC #		
INSURED	INSURER A: Indian Harbor Ins. Co (XL)	36940		
Environmental Management Conservation Oil Corp	INSURER B: Greenwich Insurance Co. (XL)	22322		
P.O. BOX 520882 MIAMI FL 33152	INSURER C: Associated Industries INSURER D: INSURER E:	23140		

#### COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TR IN	ADD'L NSRD TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	s	
115 114	GENERAL LIABILITY	<u>,</u>			EACH OCCURRENCE	\$	1,000,000
в		GEC001475504	8/17/2007	8/17/2008	DAMAGE TO RENTED PREMISES (Ea occurence)	\$	100,000
	CLAIMS MADE X OCCUR				MED EXP (Any one person)	\$	5,000
	x xCu				PERSONAL & ADV INJURY	\$	1,000,000
					GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$	2,000,000
	X POLICY PRO-						
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$	
в	X ANY AUTO	AEC000499707	8/17/2007	8/17/2008	(Ea accident)	Ψ	1,000,000
	ALL OWNED AUTOS				BODILY INJURY	\$	
	SCHEDULED AUTOS				(Per person)	Ψ	
	HIRED AUTOS				BODILY INJURY (Per accident)	\$	
	NON-OWNED AUTOS	· ·			PROPERTY DAMAGE (Per accident)	\$	
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
					OTHER THAN EA ACC	\$	
Ì					AUTO ONLY: AGG	\$	
	EXCESS/UMBRELLA LIABILITY	<u> </u>			EACH OCCURRENCE	\$	
					AGGREGATE	\$	
						\$	
	DEDUCTIBLE					\$	
	RETENTION \$					\$	
c	WORKERS COMPENSATION AND	2007329358	3/31/2007	3/31/2008	X WC STATU- OTH- TORY LIMITS ER		
	EMPLOYERS' LIABILITY				E.L. EACH ACCIDENT	\$	100,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYE	≣\$	100,000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$	500,000
	OTHER				\$1,000,000 AGGREGATE \$1,000,000 EACH CLAIM		
1	POLLUTION LIABILITY	PEC000499807	8/17/2007	8/17/2008			
A	ENVIRONMENTAL						

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION
	DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN
	NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL
	IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR
	REPRESENTATIVES.
1	AUTHORIZED REPRESENTATIVE

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