



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

December 27, 2007

Ward Cathi
Cousins Waste Control Corporation
1701 E Matzinger Rd
Toledo, OH 43612-3841

Re: Florida Hazardous Waste Transporter Approval

Dear Ward Cathi:

Your Florida Hazardous Waste Transporter Approval Certificate 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.
2. A copy of your insurance policy, together with any endorsements, must be maintained at your principal place of business.
3. Your insurer can not 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 Hazardous Waste Transporter Status Form, complete with the Department approval shall be carried in each vehicle transporting hazardous waste for the transportation company.

Ward Cathi

December 27, 2007

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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 the legislation.

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

Sincerely,

Richard Neves

Hazardous Waste Management Section

RN

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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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: Cousins Waste Control Corporation

FACILITY ID NO: OHD981000557

FACILITY ADDRESS: 1701 E MATZINGER RD
TOLEDO, OH 43612

INSURANCE CARRIER: ACE AMERICAN INSURANCE

INSURANCE POLICY#: ISAH08240322

EFFECTIVE DATE: December 01, 2007

EXPIRATION DATE: December 01, 2008

APPROVED TRANSFER FACILITY: NO

APPROVAL ISSUED BY: _____ DATE: December 27, 2007

Richard Neves
Hazardous Waste Management Section
850/245-8755

RECEIVED

Are your services commercially available? YES

DEC 20 2007

STATE OF FLORIDA

BY: BSHWHAZARDOUS WASTE TRANSPORTER STATUS FORM

1. Transporter Identification: COUSINS WASTE CONTROL CORPORATION
Transporter Name: A WHOLLY OWNED SUBSIDIARY OF PSC
Transporter EPA ID: OH0 901 000 557
Location Address: 1701 E. MATZINGER RD.
TOLEDO OH 43612

Contact: CATHI WARD Telephone: 419-726-1500 X224

Mailing Address: SAME AS ABOVE

- II. Insurance Information:
Insurance Company: ACE AMERICAN INSURANCE CO.
Address: 1601 E. CHESTNUT ST
PHILADELPHIA, PA 19101
Contact: ANNE FEDERMAN Telephone: _____
Policy Number: ISAH 00240322
Expiration date: 12-1-08

III. Waste Information:

EPA Waste Codes for Waste Routinely or Usually Transported:

D001 D002 D003 F001 F002 _____

Comments: _____

IV. Certification:

I certify under penalty of law that the above information is true, correct, and complete to the best of my knowledge.


CATHI WARD PERMITS
Print/Type Name Title
Cathi Ward 12-12-07
Signature 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 12/01/08.

Date

APPROVED by Sebrina L. Bolton, changes approved by the Certifier by phone 12/27/2007

Signature of Florida Department of Environmental Protection Representative Date Signed

ACORD TM		CERTIFICATE OF INSURANCE		ISSUE DATE 12/18/2007	
PRODUCER MCGRIF, SEIBELS & WILLIAMS OF GEORGIA, INC. 5605 Glenridge Drive - Suite 300 Atlanta, GA 30342 404 497-7500			This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.		
			COMPANIES AFFORDING COVERAGE		
			Company A ACE American Insurance Company		
			Company B Lexington Insurance Company		
			Company C Illinois Union Insurance Co		
			Company D		
INSURED Cousins Waste Control Corporation 1701 East Matzinger Rd. Toledo, OH 43612			Company E		
This is to certify that the policies of insurance described herein have been issued to the Insured named herein for the policy period indicated. Notwithstanding any requirement, term or condition of 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, conditions and exclusions of such policies. Limits shown may have been reduced by paid claims.					
CO LT	TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE EXPIRATION	LIMITS OF LIABILITY	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occurrence <input type="checkbox"/> Owners' and Contractors' Protection <input type="checkbox"/> <input type="checkbox"/> General Aggregate Limit applies per: <input type="checkbox"/> Policy <input checked="" type="checkbox"/> Project <input type="checkbox"/> Location	XSLG23735714	12/01/2007 12/01/2008	EACH OCCURRENCE \$ 2,000,000 FIRE DAMAGE \$ 1,000,000 MEDICAL EXPENSE \$ 10,000 PERS. AND ADVERTISING INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS AND COMP. OPER. AGG. \$ 2,000,000	
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> Any Automobile <input type="checkbox"/> All Owned Automobiles <input type="checkbox"/> Scheduled Automobiles <input checked="" type="checkbox"/> Hired Automobiles <input checked="" type="checkbox"/> Non-owned Automobiles <input checked="" type="checkbox"/> MCS-90	ISAH08240322	12/01/2007 12/01/2008	COMBINED SINGLE LIMIT \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ COMPREHENSIVE COLLISION	
A	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	WLRC44478511 (AOS) SCFC44478559 (WI only) WCUC44478444 (WA only)	12/01/2007 12/01/2008	WC Statutory Limit <input checked="" type="checkbox"/> Other <input type="checkbox"/> EL EACH ACCIDENT \$ 1,000,000 EL DISEASE (Each employee) \$ 1,000,000 EL DISEASE (Policy Limit) \$ 1,000,000 EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000	
B	EXCESS LIABILITY <input checked="" type="checkbox"/> Occurrence <input type="checkbox"/> Claims Made Retention/Deductible 10,000	7703546	12/01/2007 12/01/2008	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000	
C	POLLUTION E&O Claims Made Includes Coverage for Contractor's Professional & Pollution Liability	CEOG20581955005	12/01/2007 12/01/2008	Per Claim \$ 5,000,000 All Claims \$ 5,000,000 \$ \$ \$	
The Certificate Holder is included as an Additional Insured on the General Liability, Auto Liability, and Excess Liability Policies and provided a Waiver of Subrogation on the General Liability, Auto Liability, Excess Liability, and Workers Compensation Policies when required by written contract as allowed by state law but limited to the operations of the insured under said contract and always subject to policy terms, conditions, and exclusions.					
CERTIFICATE HOLDER Florida Dept. of Environmental Protection Hazardous Waste Mgmt Section - MS4555 2600 BLAIR STONE ROAD TALLAHASSEE, FL 32399-2400			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.		
			Authorized Representative 		
			Page 1 of 1 Certificate ID # 0784221 K		

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 storage facility.

(2) A transfer facility used for storage of hazardous waste 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.:

(a) The owner or operator of the transfer facility shall comply with the requirements of 40 CFR 265 Subparts B (general facility standards), C (preparedness and prevention), D (contingency and emergency plan), and I (management of containers), with the exception of 265.13. The aisle space requirements described in 40 CFR 265.35 and the special requirements for incompatible wastes described in 40 CFR 265.177(c) shall not apply at transfer facilities to containers stored in trucks loaded in accordance with DOT regulations described in 40 CFR 263.10. The 40 CFR 265 requirements referenced above shall apply to transfer facilities notwithstanding 40 CFR Part 265.1(c)(12). The owner or operator of the transfer facility shall submit the contingency and emergency plan to the Department with their first Transfer Facility Notification Form (DEP Form 62-730.900(6)).

(b) The owner or operator of the transfer facility shall have a written closure plan to show that the facility will be closed in a manner which satisfies the requirements of the closure performance, notification, and decontamination standards of 40 CFR 265.111, 265.112, 265.114 and 265.115. The owner or operator of the transfer facility shall submit the closure plan to the Department with their first Transfer Facility Notification Form (DEP Form 62-730.900(6)). Within 60 days of completion of closure, the owner or operator of the transfer facility shall submit to the Department a certification that the facility has been closed in accordance with the specifications in the closure plan. The certification shall be signed by both the owner or operator of the transfer facility and an independent registered, professional engineer.

(c) Records required in this section shall be maintained in permanent form and shall be available for inspection by the Department. The records shall be kept at the facility unless the Department gives written approval to do otherwise.

(d) Hazardous waste stored in containers or vehicles at transfer facility shall be stored on a manmade surface which is capable of preventing spills or releases to the ground.

(e) The owner or operator of a transfer facility shall maintain a written record of when all hazardous waste enters and leaves the facility. This record shall include the generator's name, the generator's EPA/DEP identification number, and the manifest number. For conditionally exempt small quantity generators without an EPA/DEP identification number, the record shall include the name and address of the generator. This recordkeeping requirement applies to all hazardous wastes including hazardous waste generated by conditionally exempt small

quantity generators.

(3) The owner or operator of a transfer facility which stores manifested shipments of hazardous waste for more than 24 hours but ten (10) days or less 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 shall annually update the information on the Transfer Facility Notification Form (DEP 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.

(4) The owner or operator of a transfer facility shall obtain an EPA/DEP identification number for each transfer facility location. Any 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. Specific Authority: 403.704, 403.721, F.S.
Law Implemented: 403.704, 403.721, F.S.
History: New 3-2-86; Amended 6-28-88; Formerly 17-30.171; Amended 8-13-90; Amended 9-10-91, 10-14-92; Formerly 17-730.171; Amended 1-5-95.

62-730.170 Standards Applicable to Transporters of Hazardous Waste.

(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 hazardous waste 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 wastes 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 Florida. Such financial responsibility shall be maintained at all times, be exclusive of legal defense costs, and be established 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 insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the insured. Each insurance policy must be evidenced by a certificate 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.:

1. Hazardous Waste Transporter Certificate of Liability Insurance,

2. Hazardous Waste Transporter Liability Endorsement,

3. Hazardous Waste Transporter Liability Surety Bond.

(c) The insurance policy, including all endorsements, or the liability surety bond must be maintained at the carrier's principal place of business.

(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-transferable and non-assignable.

(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.

(g) 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 submission of a certificate of insurance. A certificate of insurance shall include a certification by the insurer that the original insurance policy and all endorsements are still in full force and effect as evidenced on the original forms submitted to the Department.

Specific Authority: 403.704, 403.721, 403.724, 403.8055, F.S.

Law Implemented: 403.704, 403.721, 403.724, F.S.

History: New 11-8-81; Amended 5-31-84, 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 1-25-89, 8-13-90, 9-10-91, 10-14-92, 10-7-93; Formerly

17-730.170; Amended 1-5-95.