

Florida Department of

Environmental Protection

Hazardous Waste Inspection Report

FACILITY INFORMATION:

Facility Name: FECC Inc

On-Site Inspection Start Date: 11/21/2008 On-Site Inspection End Date: 11/21/2008

ME ID#: 20542 **EPA ID#**: FLD981748015

Facility Street Address: 3652 Old Winter Garden Rd, Orlando, Florida 32805-1020

Contact Mailing Address: 3652 Old Winter Garden Rd, Orlando, Florida 32805-1020

County Name: Orange Contact Phone: (407) 296-9995

NOTIFIED AS: CURRENT STATUS:

SQG (100-1000 kg/month) Transporter

INSPECTION TYPE:

Routine Inspection for Transporter facility

INSPECTION PARTICIPANTS:

Principal Inspector: Janine Kraemer, Inspector

Other Participants: Dave Gushleff, Project Manager

LATITUDE / LONGITUDE: Lat 28° 32' 48.5722" / Long 81° 25' 25.9179"

SIC CODE: 4212 - Trans. & utilities - local trucking, without storage

TYPE OF OWNERSHIP: Private

Introduction:

See Project Close Letter

Process Description:

See Project Close Letter

Summary of Potential Violations and Areas of Concern:

Potential Violations

No Violations

Areas of Concern

No Areas of Concern

Conclusion:

See Project Close Letter

History:

Activity Closed Date: 12/08/2008

Inspection Date: 11/21/2008

Signed:

A hazardous waste compliance inspection was conducted on this date, to determine your facility's compliance with applicable portions of Chapters 403 & 376, F.S., and Chapters 62-710, 62-730, 62-737, & 62-740 Florida Administrative Code (F.A.C.). Portions of the United States Environmental Protection Agency's Title 40 Code of Federal Regulations (C.F.R.) 260 - 279 have been adopted by reference in the state rules under Chapters 62-730 and 62-710, F.A.C. The above noted potential items of non-compliance were identified by the inspector(s).

This is not a formal enforcement action and may not be a complete listing of all items of non-compliance discovered during the inspection.

Janine Kraemer PRINCIPAL INSPECTOR NAME NO SIGNATURE PRINCIPAL INSPECTOR SIGNATURE	PRINCIPAL INSPECTOR TITLE	
	Dave Gushleff	Project Manager
REPRESENTATIVE NAME	REPRESENTATIVE TITLE	
NO SIGNATURE	FECC	
REPRESENTATIVE SIGNATURE	ORGANIZATION	

NOTE: By signing this document, the Site Representative only acknowledges receipt of this Inspection Report and is not admitting to the accuracy of any of the items identified by the Department as "Not Ok" or areas of concern.