

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

March 05, 2009

Jan Barnes
Jacksonville Transflo Terminal
6735 Southpoint Dr S # J975
Jacksonville, FL 32216-6177

Re: Florida Hazardous Waste Transporter Approval

Dear Jan Barnes:

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.

- 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 occured, 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.

Jan Barnes March 05, 2009 Page Two

If you intend to operate a hazardous waste transfer facility, you must submit a Transfer Facility Form [Form 62-730.900(6)]. Notification also must include a contingency and emergency plan and a facility closure plan in accordance with Rule 62-730.171(3)(a), F.A.C. The owner or operator must also demonstrate to the satisfaction of the Department that the location complies with the relevant sitting requirements listed in section 403.7211(2) Florida Statues (F.S) before the location is used as a transfer facility.

If you are currently operating an authorized 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 the Department, must be maintained at the transfer facility in accordance with Rule 62-730.171(6), F.A.C.

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

Sincerely,

Richard Neves

Hazardous Waste Management Section

Buhund Wew

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: Jacksonville Transflo Terminal

FACILITY ID NO: FLD984253526

FACILITY ADDRESS: 116 Druid St

Jacksonville, FL 32254-3810

INSURANCE CARRIER: CSX INSURANCE COMPANY

INSURANCE POLICY#: AL0016

EFFECTIVE DATE: December 27, 2008

EXPIRATION DATE: December 25, 2009

APPROVED TRANSFER FACILITY: YES

APPROVAL ISSUED BY: ______ DATE: March 05, 2009

Richard Neves

Hazardous Waste Management Section

850/245-8755

FACILITY DOCUMENT LOG DETAILS:

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Document Log ID: 4325

City: Jacksonville ,County: Duval ,Login Name:

HWT: jbarnes@transflo.net UOP: jbarnes@transflo.net

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Process	Date	Author
Logged	1/20/2009 1:56:48 PM	Sullivan_TA
Waiting for information	2/20/2009 10:41:58 AM	Noland_T
Data processing	3/5/2009 12:00:47 PM	Noland_T
Notification Letter Emailed	3/5/2009 12:00:54 PM	Noland_T
Booked into Oculus	3/5/2009 12:01:00 PM or	
booked into Oculus		Add new process

Date	Comment	Author
2/13/2009 4:14:20 PM	Sent Tony Tripp an e-mail asking for their status	Noland_T
2/13/2009 4:52:29 PM	Left a message for Ms. Barnes - Need to make sure that they are really wanting to be a Transfer Facility	Noland_T
2/20/2009 10:41:58 AM	Waiting on Rick Neves to get with Shannan Camp and Tony Tripp and let me know what to do.	Noland_T
2/24/2009 3:16:55 PM	Rick said we can go ahead and process this.	Noland_T
3/4/2009 11:28:15 AM	Spoke with Camile, she said that they do need to send a Closure Plan, etc. for Jax-can't use Tampa for Jax.	Noland_T
3/4/2009 11:29:22 AM	Spoke with Jan, she e-mailed her Closure Plan but still waiting on her Contingency Plan and Emergency Plan, etc.	Noland_T
3/5/2009 12:00:46 PM	Received Closure and Emergency Plan on 3/4-09	Noland_T
Add new comment		Add comment

STATE OF FLORIDA

HAZARDOUS WASTE TRANSPORTER STATUS FORM

4	Tuesday to the state of the stat
1.	Transporter Identification:
	Transporter Name: TRANSFLO Terminal Services, Inc.
	Transporter EPA ID: FLD 984 253 526
	Location Address: 116 RR Druid Street
Contact	Jacksonville, FL 32254 Telephone: (904) 279-6323
waming	
	Jacksonville, FL 32216
11.	Insurance Information:
	Insurance Company CSX Insurance Company
	Address 134 Meeting Street
	Charleston, SC 29401
	Contact: Deborah Tauro Telephone: (904) 366-5088
	Policy Number: AL0016
	Expiration date: December 25,2009
Ш.	Waste Information:
	EPA Waste Codes for Waste Routinely or Usually Transported:
	D001; D008; D009; D010; D011; D035; F001; F002; F003; F004; F005
	Comments: These codes are representative of waste streams handled at other TRANSFLO
	terminals. They may vary based upon actual customer business requirements.
	They may vary based apon account to the same of the sa
IV.	<u>Certification</u> :
	The office of the first of the
-£ !-	I certify under penalty of law that the above information is true, correct, and complete to the best
or my k	nowledge.
Jan M	. Barnes Director - HSE & Quality
	/pe Name Title
Pilitory	
Ω	an M. Barrer 01/12/09
Signatu	
*******	ne-
V	
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
	submitted by the transporter show compliance with the financial responsibility
through	140.05.000
anougi	12-25-2009 Date

APPROVED by Tiffaney A. Noland, changes approved by the Certifier by phone 3/5/2009

Signature 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