

Florida Department of Environmental Protection

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

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

November 20, 2009

Harry Lux
Tropical Shipping & Construction Co Ltd
5 E 11th St
Riviera Beach, FL 33404-6920

Re: Florida Hazardous Waste Transporter Approval

Dear Harry Lux:

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.
- 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.

Harry Lux November 20, 2009 Page Two

If you intend to operate a hazardous waste transfer facility, please refer to Form 8700-12FL, page 2, item 7(e) for a list of all the required documents that must be submitted.

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, 7(6), F.A.C. Also, please review the attached letter of March 11, 2009 addressed to all hazardous waste transporters who have notified of existing transfer facilities, subject: Required Submittal of Supplemental Information.

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

Sincerely,

Aprilia Graves

Engineering Specialist IV

Aprila Traves

Hazardous Waste Regulation 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



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

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.

Tropical Shipping & Construction Co Ltd TRANSPORTER:

FACILITY ID NO: FLR000095737

FACILITY ADDRESS: 5 E 11th St

Riviera Beach, FL 33404-6920

Not required by State of Florida INSURANCE CARRIER:

(Federal Regulations apply)

INSURANCE POLICY#: N/A

EFFECTIVE DATE: N/A

EXPIRATION DATE: N/A

APPROVED TRANSFER FACILITY:

APPROVAL ISSUED BY:

Engineering Specialist IV

Hazardous Waste Regulation Section

850/245-8755

rev.0(Oct 91)

STATE OF FLORIDA

HAZARDOUS WASTE TRANSPORTER STATUS FORM

1.	Transporter Identification:
	Transporter Name: Tropical Shipping 4 Construction Co, LTD.
	Transporter EPA ID: FLR 000 095 737
	Location Address: 5 East 114h Street
	Riviera Reach . FL 33404
Contac	t: Harry Lux Telephone: (800) 367-6200 ext 22930
Mailing	Address: 5 East 11th 5 treet
_	Riviera Beach, FL 33404
	•
11.	Insurance Information:
	Insurance Company British Marine
	Address Walsington House 35 Seething Lane
	London Fraland UK ECAN 400
	Contact: Agent Telephone: +44 (0) 20 7488 1024
	Policy Number: 0032 000 0001
	Expiration date: 2/20/2010
III.	Waste Information:
	EPA Waste Codes for Waste Routinely or Usually Transported:
	KO48 KO49 KO50 KOSI KO52 KI69 KI70 KI71 KI72
	Hold Holl Hood Hood High Hills
	Comments:
IV.	Certification:
	I certify under penalty of law that the above information is true, correct, and complete to the best
of my k	knowledge.
	•
<i>+</i>	Jarry Lux Safety + Environmental Manager Title 11/20/2009 Date Signed
Print/T	vne Name
	ypo Hagno
	11/20/2009
Signati	Date Stoned
*****	***************************************
	(
V.	The transporter identified above is in compliance with the financial responsibility requirements
	cardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The
	submitted by the transporter show compliance with the financial responsibility
.511115	business by the transporter show compliance with the initialicial responsibility

APPROVED by Tiffaney A. Noland, changes approved by the Certifier by phone 11/20/2009

Signature of Florida Department of Environmental Protection Representative Date Signed

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

through_2/20/2010

HW Transporter Status Form Page 1 of 1



8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 (850) 245-8772

					W	200	883	te	me.	of Service		84	an.	1						
		. (fo	r	71)Ŧ	P	ľ	١f	ĥ.		al	1	Īs	e	C	In	ı	h	
			M															Ų	1	
			J15.		4					est.	*		٠.							
								ĸ,						H			W			
							ĺγ					V.		'n			N			
ý	L							٠.	er.	۸										
H	ŧ				ij.		H	М		ĸ	Q.		ji.	M				n	۱	

		(373) 2.15 3.12								
EPA ID				11.0		#RCRA				
Submitted	Reason for Cartect box: To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). To provide subsequent notification (to update status and facility identification information). Is this the final notification (see instructions) for the facility?									
2. Facility of 10% [2]	CLIVAI				FEID	No.				
Business Nanfe		nipping& Construction	n Company, LTD)	5	9 1 1	1 4 1 8 7			
3. Facility Operator (List additional Operators in the	Name of Operator Tropical SI	: nipping & Constructio	on Co. ,LTD		Opera	Operator: _C	06 _/ 23 _/ 1962 nm dd yy			
comments section).	Street or P.O. Box	5 East	11th Street		Phone	Number:	800-367-6200			
	City or Town:	Riviera Be	ach	State:	FL	Zip Code:	33404			
	Operator Type: [>		Municipal S	State [Other					
4. Facility Physical Location	Physical Street Ad	Physical Street Address: 5 East 11th Street								
Information	City or Town:	Riviera Bea	ach	State:	FL	Zip Code:	33404			
	County: Palm Be	each	If available, please attach a map or sketch of the facility boundaries.							
	Latitude: 2 6 4	4 6 1 8 . 9N Longi m m s s . ssss	tude: 8 0 0 3 d d m m	1 8. s s .		Method: Datum:	GPS			
5. Facility North Am	erican Industry	A. 4831	1	В.						
Classification Syst Code(s)	tem (NAICS)	C.		D.		· · · · · ·				
6. Facility or	Street Address or	P.O. Box:	5 Eas	t 11th	Stree	t				
Business Mailing Address	City or Town:	Riviera Be	ach	State:	FL	Zip Code:	33404			
7. Facility or Business Contact	First Name:	Harry	Last Name:	Lux			Safety &			
Person	Phone Number:	561-840-2930	Extension:	E-Mail:		hlux@trop	oical.com			
	Street or P.O. Box	:	5 East 11th Street							
	City or Town:	Riviera Bea	ach	State:	FL	Zip Code:	33404			
8. Real Property (Land) Owner of the Facility's		perty (Land) Owner: Port of Palm Beac	h	New Owner Date became Owner:// mm dd yy						
Physical Location (List additional	Street or P.O. Box	: PO Bo	ox 9935,		Phone	Number:	561-842-4201			
real property owners in the comments	City or Town:	Riviera Bea	ach	State:	FL	Zip Code:	33404			
section.)	Owner Type:	Private Federal	▼Municipal □ Sta	ite 🔲 (Other_	*				

l de literality to the first of the distribution of the distributi	EPA ID No.						
9. Type of Regulated Waste Activity (Mark 'X' in all tha	t apply):						
A. Hazardous Waste Activities:	For Items 2 through 7, mark 'X' in all that apply.						
(1) Generator of Hazardous Waste (Choose only one of the following three categories.) ☐ a. Large Quantity Generator (LQG): Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of non-acute hazardous waste; or Greater than 1 kg (2.2 lbs) of acute hazardous waste	(2) Treater, Storer, or Disposer of Hazardous Waste (at your facility) Note: A hazardous waste permit may be required for this activity. a. Operating Commercial TSD b. Operating Non-commercial TSD c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.)						
 □ b. Small Quantity Generator (SQG): Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste □ c. Conditionally Exempt SQG (CESQG): Generates in any calendar month 100 kg/mo or less (220 lbs.) of non-acute hazardous waste and 1 kg (2.2 lbs) or less of acute hazardous waste 	(3) Recycler of Hazardous Waste (at your facility) Specify: Commercial; Non-Commercial. A permit is required for storage prior to recycling. (4) Exempt Boiler and/or Industrial Furnace a. Small Quantity On-site Burner Exemption b. Smelting, Melting, and Refining Furnace Exemption (5) Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities - Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization OR the authorization you received from						
In addition, indicate other generator activities that apply. d. United States Importer of hazardous waste e. Mixed Waste (hazardous and radioactive) Generator	FDEP. (6) Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste.						
(7) Transporter of Hazardous Waste [Note: A Certificate of Liability Insurance is required along with this registration.] Registration must be renewed annually. a. For own waste only b. For commercial purposes c. Hazardous Waste Transporter Insurance Information Insurance Company TT Club Mutual Insur.,LTD / British Marine Address International House / Walsingham House 26 Creechurch Lane, London, UK, EC3A5BA / 35 Seething Lane, London, UK,							
Contact Policy Number T0625/2009/001	Telephone 12/31/2009						
d. Transportation Mode Air Rail Highway							
e. Hazardous Waste Transfer Facility:	Storage Volume N/A						
 ☐ Initial notification The following items are required to be submitted with the initial notification for a transfer facility [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]: ☐ Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.] ☐ Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.] ☐ A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.] ☐ A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.] ☐ A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.] ☐ Notification of changes in above items ☐ Annual update notification 							

et die glote des descripte die en de deur deur bestelle de la complete de deur de deur de deur de la complete La de de la side de la deur deur deur deur deur de deu La deur deur deur deur deur deur deur deur	EPA ID No.			
B. Universal Waste (UW) Activities (Mark 'X' in all that apply) ("				
Large Quantity Handler (LQH) = $5,000 \text{ kg}$ (11,000 lb) or more of	f any combination of UW accumulated			
Small Quantity Handler (SQH) = always less than 5,000 kg accur	mulated			
Mercury-containing devices LQH = 100 kg (220 lb) or more acc	numulated by for-hire handler			
Mercury-containing devices SQH = less than 100 kg accumulated				
Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lamp	os) or more accumulated by for-hire handler			
Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamp				
[Note: 4 lamps = 1 kg, 62-737.200(10)]				
Pharmaceuticals LQH = 5,000 kg or more of universal pharmaceuticals	utical waste (UPW) accumulated			
Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazard	dous ("P-listed") pharmaceutical waste accumulated			
Pharmaceuticals SQH = always less than 5,000 kg of UPW and a	lways 1 kg or less of acutely hazardous UPW accumulated			
If I I FOR THOSE WISHS OTHER I I Gee note in I	(2) Enter your esitmate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.			
a. Batteries	Based on shippers requirements			
b. Pesticides	Based on shippers requirements			
c. Pharmaceuticals	Based on shippers requirements			
d. Mercury Containing Devices	Based on shippers requirements			
e. Mercury Containing Lamps	Based on shippers requirements			
	Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]			
(4) Reverse Distributor of UW Pharmaceuticals	☐ Lamps ☐ Devices ☐			
storage prior to recy				
(1) Used Oil Transporter - indicate type(s) of activity(ies): X a. Transporter b. Transfer Facility (2) Collection Center (3) Used Oil Processor (A permit is required for this activity.) (4) Off-Specification Used Oil Burner (5) Used Oil Fuel Marketer (6) Used Oil Filter X a. Transporter b. Transfer Facility c. Processor	8) Specific Certification to be signed by all Used Oil Transporters I certify as a Used Oil Transporter that the training program and financial responsibility required under Section 62-710.600, F.A.C., are in place, current and being adhered to. If any modifications have been made to the originally approved training program, they are explained in attachments to this registration form. Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of Liability Insurance, DEP form 62-710.901(4), F.A.C. Signature of Authorized Person Harry Lux Print Name of Authorized Person			
1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 (9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one): ✓ our mailing (business) address 			

(1] (1) (1) (1) (2) (3) (3) (3)			o di esculto a dicue di condi Di recurso di di cuma de dicu		in an english Kabupatèn Kabu	EP A	A ID No.		
D. Other	State R	egulated Waste A	ctivities:					CW) Handler [Chanit may be required	upter 62-740, F.A.C.] for this activity.
your facilit	y. List	them in the order t	hey are presented is	n the	regulations (e	e.g., D0	001, D003, I		zardous wastes handled at are needed.
¹ K04	8	² K049	³ K050	4	K051	5	K052	⁶ K169	⁷ K170
⁸ K17	1	⁹ K172	10	11		12		13	14
15		16	17	18		19		20	21
22	-	23	24	25		26		27	28
11. Othe	r Statu	s Changes (Ma	rk 'X' in all that a	pply)	:				
B. Facil	(2) Waste generated by business has been delisted.								
	Contact	 			_Phone				
•	Address								
	City, Sta	ate, Zip							· · · · · · · · · · · · · · · · · · ·
	C. Pro	perty Tax Default	<u> </u>		D. Petition	n for I	Bankruptcy	Protection	
12. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. If I have notified as a transfer facility, I am aware that transfer facilities must comply with the requirements of Rule 62-730.171, FAC, and Rule 62-730.182, FAC.									
Signatur	e of ow	mer, operator, o representative	or an authorized		P	rint N	ame and	Γitle	Date Signed (mm-dd-yyyy)
1/2	27	2		Ha	arry Lux, S	Safet	y & Envir	onmental Mgr.	11-02-2009
				<u> </u>					
If the person who filled in this form is not the Facility Contact or Operator, please complete the information below:									
(Name of	person c	completing this for	m)	(Pho	one Number)			(E-mail Address))
13. Comments: Tropical Shipping & Construction Company, LTD, a foreign flagged vessel operator, is applying for an EPA Hazardous Waste Transporter ID# as a WATER CARRIER only. Please note that the British Marine insurance coverage handles all the ship issues, and the TT Club covers shore operations.									

Telephone: +44 (0)20 7488 1024 haesimile -44 (0)20 7481 1812 E-Mail: managers a/britishmarine.com

Societé Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Walsingham House 35 Seething Lane London EC3N 4DQ

PROTECTION & INDEMNITY
POLICY OF INSURANCE
No.: 00320000001

Period of Insurance: Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010.

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the Insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s).

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To: Tropical Shipping & Construction Company Limited (Owner)

SCHEDULE

Name of Ship	Gross Tonnage	Year of Build
TROPIC LURE	1,827	1983

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guarantor or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.





Telephone. +44 (0)20 7488 1024 Facsimile: +44 (0)20 7481 1812 F-Mail managers a britishmarine.com

Société Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Walsingham House 35 Seething Lane London EC3N 4DQ

British Marine Luxembourg S.A. PROTECTION & INDEMNITY POLICY OF INSURANCE No.: 00326000001

Period of Insurance, Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the Insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s).

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To: Tropical Shipping & Construction Company Limited (Owner)

SCHEDULE

Name of Ship	Gross Tonnage	Year of Build
TROPIC MIST	1,827	1983

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guarantor or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.





British Manne Luxembourg S. A. U.K. Branch • Registered office. Wasingham House, 35 Scettung Lane, London EC3N 41X0 VAI Registered No. GB 524723652 • Registered Company No. EC022505 • Branch No. BR603527 * **

Telephone +44 (0)20 7488 1024 Facsimile: +44 (0)20 7481 1812 E-Mail: managers @britishmarine com

Société Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Walsingham House 35 Seething Lane London EC3N 4DQ

British Marine Luxembourg S.A. PROTECTION & INDEMNITY POLICY OF INSURANCE No.: 00327000001

•

Period of Insurance: Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010.

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the Insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein.

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s).

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To: Tropical Shipping & Construction Company Limited (Owner)

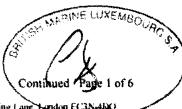
SCHEDULE

Name of Ship	Gross Tonnage	Year of Build				
TROPIC NIGHT	1,561	1976				

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guaranter or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.





Hritish Marine Luxembourg N.A. UK Branch • Registered office: Wakingham House, 35 Seething Land London EC3NADO VA I. Registered No. GB 524 723652 • Registered Company No. FC022505 • Branch No. BR005527

Telephone: -44 (0)20 7488 1024 Facsimile: -44 (0)20 7481 1812 E-Mail: managers à britishmarine com

Société Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Walsingham House 35 Seething Lanc London EC3N 4DQ

British Marine Luxembourg S.A. PROTECTION & INDEMNITY POLICY OF INSURANCE No.: 00328000001

Period of Insurance, Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010.

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein.

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s).

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To. Tropical Shipping & Construction Company Limited (Owner)

SCHEDULE

Name of Ship	Gross Tonnage	Year of Build
TROPIC OPAL	1,561	1979

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guarantor or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.





Telephone: +44 (0)20 7488 1024 Facsimile: +44 (0)20 7481 1812 F-Mail: managers a britishmarine.com

Société Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Wulsingham House 35 Scething Lane London EC3N 4DQ

PROTECTION & INDEMNITY POLICY OF INSURANCE No.: 00329000001

Period of Insurance, Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010.

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the Insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein.

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s)

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To: Tropical Shipping & Construction Company Limited (Owner)

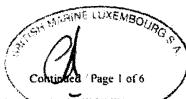
SCHEDULE

Name of Ship	Gross Tonnage	Year of Build				
TROPIC PALM	3,048	1978				
a company those at the plant of the	0,040	EW 2 W				

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guaranter or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.





Telephone: +44 (0)20 7488 1024 Facsimile: +44 (0)20 7481 1812 E-Mail: managers/a/britishmarine.com

Societe Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Walsingham House 35 Seething Lane London EC3N 4DQ

PROTECTION & INDEMNITY POLICY OF INSURANCE No.: 00330000001

Period of insurance. Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010.

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the Insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s)

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To: Tropical Shipping & Construction Company Limited (Owner)

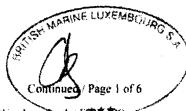
SCHEDULE

Name of Ship	Gross Tonnage	Year of Build				
TROPIC SUN	6,536	1992				

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guarantor or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.





Telephone: +44 (0)20 7488 1024 Facsimile: +44 (0)20 7481 1812 b-Mail, managers a britishmarine com

Société Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Walsingham House 35 Seething Lane London EC3N 4DQ

PROTECTION & INDEMNITY POLICY OF INSURANCE No.: 00331000001

Period of Insurance, Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010.

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the Insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein.

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s)

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To: Tropical Shipping & Construction Company Limited (Owner)

SCHEDULE

Name of Ship	Gross Tonnage	Year of Build
TROPIC TIDE	6,536	1993

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guarantor or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.

Continued Page 1 of 6



Telephone = 44 (0)20 7488 1024 Facsimile: = 44 (0)20 7481 1812 E-Mail: managers a britishmarine.com

Société Anonyme RCS 71026



British Marine Luxembourg S.A. UK Branch Walsingham House 35 Seething Lane London EC3N 4DQ

British Marine Luxembourg S.A. PROTECTION & INDEMNITY POLICY OF INSURANCE No.: 00332000001

Period of Insurance, Noon (GMT) on 20 February, 2009 to Noon (GMT) on 20 February, 2010.

In consideration of the premium payable in respect of this insurance, the Insurer undertakes to indemnify the Assured for all liabilities, losses, costs or expenses that the Assured, in the capacity agreed in respect of the Insured Vessel(s) named in this policy, is liable to pay, in respect of the liabilities, risks or events referred to, herein.

This insurance covers only liabilities, losses, costs or expenses which arise out of events which occur during the policy period, in respect of the Assured's interests in the Insured Vessel(s) and only in connection with the operation of the Insured Vessel(s).

THE ATTACHED CLAUSES AND ENDORSEMENTS FORM PART OF THIS POLICY

To: Tropical Shipping & Construction Company Limited (Owner)

SCHEDULE

Name of Ship	Gross Tonnage	Year of Build
TROPIC UNITY	10,857	2002

Evidence of Insurance Clause

The Policy of Insurance or any Endorsement hereto is evidence only of the contract of indemnity insurance between the above named Assured(s) and the Insurer and shall not be construed as evidence of any undertaking, financial or otherwise, on the part of the Insurer to any other party.

In the event that an Assured tenders this Policy/Endorsement as evidence of insurance under any applicable law relating to financial responsibility, including but not limited to the Oil Pollution Act 1990 or any similar Federal or State Laws, or otherwise shows or offers it to any other party as evidence of insurance, such use of the Policy/Endorsement by the Assured is not to be taken as any indication that the Insurer thereby consents to act as guarantor or to be sued directly in any jurisdiction whatsoever. The Insurer does not so consent.



Comminged | Page | of

British Marine Luxembourg S.A. UK Branch * Registered office: Walsingham House, 35 Sections VAI Registered No. OB 524.723652 * Registered Company No. FC022505 * Branch No.

Issue Date: 31 December 2008 This confirmation is issued as a matter of information only and confers no rights upon the holder, nor does it amend, extend or alter the insurance coverage afforded. Tropical Shipping & Construction Co. Ltd. Insurer ("The Association") Tropical Shipping USA, LLC and Birdsall, Inc. TT Club Mutual Insurance Ltd. 4 East Port Road, Suite 411 International House, 26 Creechurch Lane, Riviera Beach, FL 33404 London EC3A 5BA United Kingdom Assured's Policy of Insurance Number: T0825/2009/001 Issuer (on behalf of the Association) Through Transport Mutual Services (Americas) Harborside Financial Center Plaza Five, Suite 2710 Jersey City, NJ 07311 This is to confirm that the Assured is presently insured by the Association under the above mentioned Policy of Insurance in accordance with the standard insurance Clauses of the Association for the Cover stated below (a copy is available on request) and the terms and conditions of the Assured's insurance against the following principal risks: 1.12 Limit of Liability Risks insured under Cargo Handling Facility Cover (each Accident) D Clause/Paragraph USD 5,000,000 C1 Liabilities for Cargo and Customer's Ships or other property 1.1 Cargo 1.2 Customer's other Property 1.3 Customer's Ships USD 1,000,000 (annual aggregate) USD 5,000,000 C2 Errors and Omissions Liability C3 Third Party Liabilities Loss of Damage to Third Party Property 1.1 USD 5,000,000 USD 5,000,000 USD 5,000,000 USD 5,000,000 1.2 Death or Bodily injury of Third Parties other than Employees 1.3 Death or Bodily injury of Employees C4 Fines and Duty C5 Costs CA Handling Equipment Properly: Loss and Damage C17 Fire Legal USD 1,000,000 (Annual Aggregate) Tenants Legal Account Year: 1 January 2009 Policy Review Date: 31 December 2009 Confirmation Holder ("Holder") Cancellation: If it should become necessary to cancel the insurance before the Policy Review Date by reason of non payment of amounts due to the Association, the Association will endeavour to send 30 days written notice to the Holder, but failure to send such notice shall impose no obligation or liability of any kind upon the Association, its Managers or their agents or its correspondents XXXXXXXXXXXXXXXXXX Signed on behalf of the Insurer; The same the same of the same

Poor Original

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, 2007.
- (2) In addition to the requirements of subsection (1) of this rule, no person shall transport a hazardous waste within the state for which either a manifest is required under 40 CFR Part 262 [as adopted in subsection 62-730.160(1), F.A.C.] or a reclamation agreement is entered between a generator and recycler pursuant to 40 CFR 263.20 [as adopted in subsection 62-730.170(1), F.A.C.] unless compliance with the following special requirements have 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 Insurer. 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, which are hereby adopted and incorporated by reference:
 - 1. Hazardous Waste Transporter Certificate of Liability Insurance, Form 62-730.900(5)(a), effective date January 29, 2006.
 - 2. Hazardous Waste Transporter Liability Endorsement, Form 62-730.900(5)(b), effective date January 29, 2006
- 3. Hazardous Waste Transporter Liability Surety Bond, Form 62-730.900(5)(c), effective date January 29, 2006. Rule 62-730.900, F.A.C., contains information on obtaining a copy of these forms.
- (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, Form 62-730.900(5)(d), effective date January 5, 1995, which is hereby adopted and incorporated by reference. Rule 62-730.900, F.A.C., contains information on obtaining a copy of this form. 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 form described in paragraph (2)(b) of this section 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 FS. Law Implemented 403.704, 403.721, 403.724 FS. 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, 4-30-97, 8-19-98, 2-4-00, 12-20-00, 8-1-02, 10-1-04, 1-29-06, 4-6-06, 5-1-07, 4-25-08.

62-730.171 Transfer Facilities.

- (1) 40 CFR 263.12 [as adopted by reference in subsection 62-730.170(1), F.A.C.] provides that transporters who store manifested hazardous waste in proper containers at a transfer facility for 10 days or less are exempt from regulation as a hazardous waste facility. If the waste is stored for more than 10 days, the facility is subject to the permitting requirements for a hazardous waste storage facility.
- (2)(a) The transporter who is owner or operator of a transfer facility which stores manifested shipments of hazardous waste for more than 24 hours but 10 days or less (hereinafter referred to as "the transfer facility") shall obtain an EPA/DEP identification number for each transfer facility location and notify the Department using Form 62-730.900(1)(b), "8700-12FL Florida Notification of Regulated Waste Activity," effective date January 4, 2009 [adopted by reference in paragraph 62-730.150(2)(a), F.A.C.].
- (b) Notification pursuant to this subsection shall be submitted at least 30 days before the storage of hazardous waste is to begin at a transfer facility.
 - (c) The notification shall include the information and documentation required by subsection 62-730.171(3), F.A.C.
- (d) The transfer facility shall annually submit updated information on Form 62-730.900(1)(b), "8700-12FL Florida Notification of Regulated Waste Activity," effective date January 4, 2009, which is adopted and incorporated by reference at paragraph 62-730.150(2)(a), F.A.C.
 - (3)(a) The following items constitute initial transfer facility notification:
- 1. Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of Section 403.7211(2), F.S. The Certification shall state a factual basis for the conclusion that the location criteria are met, and how those facts were determined.
- 2. Completed Form 62-730.900(1)(b), "8700-12FL Florida Notification of Regulated Waste Activity," effective date January 4, 2009, which is adopted and incorporated by reference at paragraph 62-730.150(2)(a), F.A.C.
 - 3. Evidence of the transporter's financial responsibility as required under subsection 62-730.170(3), F.A.C.
- 4. A brief general description of the transfer facility operations, including customer base, anticipated waste codes, operating procedures, structures and equipment (with the maximum design capacity for storage), including engineering drawings or sketches if any.
- 5. A copy of a closure plan demonstrating that the transfer facility will be closed in a manner which satisfies the closure performance, notification, and decontamination standards of 40 CFR 265.111, 265.112, 265.114 and 265.115 [as adopted by reference in subsection 62-730.180(2), F.A.C.].
 - 6. A copy of the contingency and emergency plan required by paragraph 62-730.171(4)(a), F.A.C.
- 7. A map or maps of the transfer facility, depicting property boundaries, access control, buildings or other structures and pertinent features (such as recreation areas, runoff and stormwater control systems, access or internal roads, sanitary and process sewer systems, loading and unloading areas, and fire control equipment.)
- (b) A transporter who is operating a transfer facility must notify the Department prior to making changes in any of the items listed in paragraph 62-730.171(3)(a), F.A.C.
- (c) No person shall operate a transfer facility before receiving confirmation from the Department that the initial notification package is complete and technically adequate and receiving an EPA identification number for the transfer facility.
 - (4) A transfer facility shall comply with the following requirements:
- (a) 40 CFR Part 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, as adopted by reference in subsection 62-730.180(2), F.A.C.
- (b) 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 [as adopted by reference in subsection 62-730.170(1), F.A.C.].
- (5) Hazardous waste stored at transfer facilities in containers or vehicles shall be stored on a manmade surface which is capable of preventing spills or releases to the ground.
- (6) The transfer facility shall maintain a written record of the items listed below. This recordkeeping requirement applies to all hazardous waste that enters and leaves the transfer facility, including hazardous waste generated by CESQGs. Records required in this subsection shall be maintained in permanent form for at least three years 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.

- (a) Manifest number for each shipment that enters and leaves the facility, or, for a shipment from a CESQG without a manifest, an identifying number from the shipping document.
 - (b) The date when all hazardous waste enters and leaves the facility.
- (c) The generator's name and the EPA/DEP identification number. For CESQGs without an EPA/DEP identification number, the record shall include the name and address of the generator.
 - (d) Amounts of hazardous waste and hazardous waste codes associated with each shipment into and out of the facility.
- (7) Within 60 days of closure of the transfer facility, the transporter who is 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 the owner or operator of the transfer facility, by the owner of the real property where the transfer facility is located, and by a Florida-registered, professional engineer.
- (8) Construction, initial operation or substantial modification of a transfer facility which stores shipments of hazardous waste that are required to be manifested, and which does not comply with the location standards in Section 403.7211, F.S, is prohibited. A transporter operating a transfer facility is subject to the demonstration requirements of subsections 62-730.182(3)-(8), F.A.C., regarding substantial modification.

Specific Authority 403.0877, 403.704, 403.721 FS. Law Implemented 403.0877, 403.704, 403.721 FS. History—New 3-2-86, Amended 6-28-88, Formerly 17-30.171, Amended 8-13-90, 9-10-91, 10-14-92, Formerly 17-730.171, Amended 1-5-95, 1-29-06, 10-28-08, 1-4-09.