

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

01/20/2010

Sonny Watson, Owner Pensacola Recycling Inc 3185 Newton Dr Pensacola, FL 32503-5106

The Hazardous Waste Regulation Section has reviewed your application for a hazardous waste DEP/EPA Identification Number. Based on the information received you must use the following identification number for all manifests or reports for Pensacola Recycling Inc located at **195 E Fairfield Dr, Pensacola**.

FLR000136861

Your facility has been registered with the following requested status/activities:

Non-handler of Hazardous Waste Small Quantity Handler, Universal Batteries, Universal Lamps, Universal Lamp Transporter, Universal Devices, Universal Device Transporter

THIS LETTER IS NOT AN APPROVAL TO TRANSPORT HAZARDOUS WASTE OR USED OIL OR UNIVERSAL WASTE OR TO OPERATE A HAZARDOUS WASTE TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY OR A UNIVERSAL WASTE OR USED OIL PROCESSING FACILITY OR LARGE QUANTITY HANDLER. PLEASE CONTACT THE DEPARTMENT FOR COMPLETE REQUIREMENTS FOR HAZARDOUS WASTE OR USED OIL TRANSPORTERS, UNIVERSAL WASTE HANDLERS, USED OIL PROCESSING FACILITIES, AND TSDS.

You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status or contact information. For further assistance, please call the Notification Coordinator at (850)245-8760 or (850)245-8772 or (850)245-8706. Sincerely,

n Lu

for Michael Redig

Michael X. Redig Environmental Manager Hazardous Waste Regulation Section

ME ID: 78235 , Email Address: <u>prrecyclinginc@aol.com</u> Link: <u>http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLR000136861</u>

FLORIDA EPA ID		CFL - FLORIDA NOT CGULATED WASTE Vaste Management Division Blair Stone Rd. Tallahassee (850) 245-8772 6 8 6 8 6 8 7	-11 w K3, 1934300 c, FL 32399-2400	' JAN	¢ 7 20	IO RCRAH			
1. Reason for Submittal	Mark 'X' in correct box: Image: Correct box in the correct box					nber for hazar			
2. Facility or Business Name	PENSACOLA RECYCLING, INC.					FEID No. 5 9 3 5 5 2 9 1 8			
3. Facility Operator (List additional Operators in the	Name of Operator FRAN	SON III		New Operator Date became Operator: / / / mm dd yy					
comments section).	Street or P.O. Box	: 3185 NEV	VTON DRIVE	VTON DRIVE			Phone Number: (850) 432-7833		
	City or Town:	PENSACO	DLA	State:	FL	Zip Code:	32503		
	Operator Type: [Municipal	State	Othe	r			
4. Facility Physical Location	Physical Street Ad	dress:	195 EAST F	AIRFIE	LD D	RIVE			
Information	City or Town:	PENSACO	LA	State:	FL	Zip Code:	32503		
	^{County:} Escamb	via	lf available, ple boundaries.	ble, please attach a map or sketch of the facility ries.					
Intriats Dato	Latitude: d d	Longi mm s s . ssss	tude: _	_ Method: m s.s.sss Datum:					
5. Facility North Am Classification Syst	•	A 56179	90	В.					
Code(s)		С. у	D.						
6. Facility or	Street Address or P.O. Box: 3185 NEWTON DRIVE								
Business Mailing Address	City or Town:	PENSACC	DLA	State:	FL	Zip Code:	32503		
7. Facility or Business Contact	First Name:	SONNY	Last Name: W	ATSO	TSON Title: OWNER				
Person	Phone Number:	(850) 432-7833	Extension: E-Mail:			prrecyclinginc@aol.com			
n vare 2	Street or P.O. Box	3185 NEW	TON DRIVE						
:	City or Town:	PENSACO	DLA	State:	FL	Zip Code:	32503		
8. Real Property (Land) Owner of the Facility's					New Owner Date became Owner: / / mm dd yy				
Physical Location (List additional	Street or P.O. Box	195 EAST FAI	IRFIELD DRIVE		Phone	e Number: (8	50) 433 <u>-</u> 7638		
real property owners in the comments	City or Town:	PENSACO	State:	FL	Zip Code:	32503			
section.)	Owner Type: Private Federal Municipal State Other								

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 01-04-2009 Page 1 of 4

	EPA ID No. FLR000136861
9. Type of Regulated Waste Activity (Mark 'X' in all that	at apply):
 A. Hazardous Waste Activities: (1) Generator of Hazardous Waste (Choose only one of the following three categories.) a. Large Quantity Generator (LQG): 	 For Items 2 through 7, mark 'X' in all that apply. (2) Treater, Storer, or Disposer of Hazardous Waste (at your facility) Note: A hazardous waste permit may be required for this activity.
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of <i>non-acute</i> hazardous waste; or Greater than 1 kg (2.2 lbs) of <i>acute</i> hazardous waste	 a. Operating Commercial TSD b. Operating Non-commercial TSD c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.) (3) Pagealage of Haggardaug Weats (at your facility)
 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 <i>non-acute</i> hazardous waste and/or 1 kg (2.2 lbs) or less of <i>acute</i> 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
 c. Conditionally Exempt SQG (CESQG): Generates in any calendar month 100 kg/mo or less (220 lbs.) of <i>non-acute</i> hazardous waste and 1 kg (2.2 lbs) or less of <i>acute</i> hazardous waste 	(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 FDEP.
 In addition, indicate other generator activities that apply. d. United States Importer of hazardous waste e. Mixed Waste (hazardous and radioactive) Generator 	(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 Registration must be renewed annually. a. For own c. Hazardous Waste Transporter Insurance Information Insurance Company	on
	77 11
Contact Policy Number	Telephone Expiration date
	Water Other - specify
e. Hazardous Waste Transfer Facility:	Storage Volume
Initial notification The following items are required to be submitted w Florida Administrative Code (F.A.C.)]:	with the initial notification for a transfer facility [Rule 62-730.171(3),
Certification by a responsible corporate officer of t criteria of Section 403.7211(2), Florida Statutes (the transporter that the proposed location satisfies the (F.S.) (Bule 62-730 171(3)(a)) $\mathbf{F} \in \mathbf{C}$
Evidence of the transporter's financial responsibility	
\Box A brief general description of the transfer facility of	
\square A copy of the facility closure plan [Rule 62-730.17]	
A copy of the contingency and emergency plan [R	
A map or maps of the transfer facility [Rule 62-73]	0.171(3)(a)7., F.A.C.]
 Notification of changes in above items Annual update notification 	

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 01-04-2009 Page 2 of 4

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B. Universa	al Waste (UW)	Activities (M	Mark 'X' in	all that apply) ("accumula	ted" means at an	ny one time):	
Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more of					of any combination of UW accumulated			
Sm Sm	Small Quantity Handler (SQH) = always less than 5,000 kg accumulated							
	noum: containing .	daviaas I OH	-100 kg (2)	(201b) or more as	oumulated	hu fan hina handla		
Lance d	Mercury-containing devices LQH = 100 kg (220 lb) or more accumulated by for-hire handler							
	Mercury-containing devices SQH = less than 100 kg accumulated by for-hire handler							
Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler								
Me								
	[Note: 4 lamps = 1 kg, $62-737.200(10)$]							
Pha	Pharmaceuticals LQH = 5,000 kg or more of universal pharmaceutical waste (UPW) accumulated							
	-	_					tical waste accumulated	
	-						y hazardous UPW accumul	ated
			T	·····				
(1) For those	e Managing	Generate/	Transport (see note in	Handle at Transfer Facility		•	the maximum amount (in	• •
		Accumulate	instructions)	Facility	or each ty	pe of Uw on site	or transported at any on	e time.
a. Batteries						600 lbs.		
b. Pesticides								
c. Pharmaceut	icals							
	ontaining Devices					100 lbs.		
						132,280 ea.		
	ontaining Lamps							
(3) Mercury	Recovery and/o 2-737, F.A.C.]	r Reclamatio	n Facility		Note: A haza F.A.C.]		required for this activity. [Rule 6	2-737.800,
(3) Mercury [Chapter 62	Recovery and/o			Pharmaceuticals	F.A.C.]	rdous waste permit is	Devices	······································
(3) Mercury [Chapter 62 (4) Reverse	Recovery and/o 2-737, F.A.C.]	w 🗆			F.A.C.]	rdous waste permit is		······································
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				EPA ID No.	FLRC	000136861
D. Öthe	r State Regulated Was	te Activities:			CW) Handler [Cha it may be required	pter 62-740, F.A.C.] for this activity.
your facil	10. Waste Codes for Federally Regulated Hazardous Wastes: List the waste codes of the Federal hazardous wastes handled at your facility. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Hazardous waste transporters list codes routinely or usually transported. Use an additional page if more spaces are needed.					
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
11. Oth	er Status Changes	(Mark 'X' in all that a	apply):			
B. Fac	 (i) Declares in trapp grant provide a provi					
	Address City, State, Zip				<u> </u>	
	C. Property Tax De			for Bankruptcy]	Protection	
in accord informati for submi facility, I	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.					
Signatu	re of owner, operato		l Pr	int Name and T	itle	Date Signed (mm-dd-yyyy)
7	ant H Jula	tomt	FRA	NK H WATSC	DN III	1/5/2010
\square						
If the person who filled in this form is not the Facility Contact or Operator, please complete the information below: FRANK H WATSON III 850-432-7833 prrecyclinginc@aol.com						
(Name of	person completing this	form)	(Phone Number)	·····	(E-mail Address)	
13. Con	nments:		<u></u>			

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DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 01-04-2009 Page 4 of 4



PENSACOLA RECYCLING, INC.

3185 NEWTON DR. PENSACOLA, FL 32503 PH. 850-432-7833 FAX: 850-432-2442 DEP. FACILITY ID# FLR000027342



Plan of Operation for Pensacola Recycling. January 5, 2010

Pensacola Recycling has a call list and this list has each month, 90 days, 6 months, one year and will call. This depends on how the account is set up. We call the customer or the customer will call us for a pick up. We schedule a day to go pick the up and we ask them how many bulbs they have, and are they loose or in boxes. Some of our company's we give 150 Count Fiber drum to put there 4 Ft. bulbs in for storage and other use them for the U- shaped bulbs for storage.

Every Job is different. Some customer don't know how many Bulbs they have on hand and they will tell us maybe 100 bulbs and when we get there they have about 1,000 or more and ballast. We had that happen several time.

Went we go to a job and fine a few bulbs broken we sweep the broken bulb up and put it into a DOT bucket. If there is a full box of 30 count bulbs broken, we tape all opening and we put the box into a 150 count Fiber drum for safety.

If customers call about a mercury spill we refer them to Southern Waste Services and let them handle it from there until they need us to come get the material already contained in a five gallon bucket or larger container.

In 1999 we had a customer call us and tell me that they had some manufacture Mercury containing article in two 55 Gal steel drum, The first thing I ask the customer was any of the article broken and they told me no, they we all intact. When I got to the Job, I open the first drum and found several articles that were broken. I closed the drum and resealed the drum. I call the customer and told him what I had found and told him we would have to ship it out hazard waste and he would



PENSACOLA RECYCLING, INC. 3185 NEWTON DR. PENSACOLA, FL 32503 PH. 850-432-7833 FAX: 850-432-2442 DEP. FACILITY ID# FLR000027342



have to let the DEP for that month that his company generated Hazard waste.

I called Southern waste service to see if they had and Plastic bags and any 85 gal drums on hand, which they did and two bags of absorbent material.

When we got back to the job we weighed the 55 gallon drum and the 85 gallon drum and the 2 bags of absorbent material. Then we weighted the 55 gallon drums that contained the mercury articles. We took the fork lift and lifted the 55 gallon drum and slid the plastic bags on the drum and lined the 85 gallon drum with absorbent material and then put the 55 gallon drum into the 85 gallon for shipping. After the 55 gallon drum was in the 85 gallon drum we weighed both together to get an accurate weight for the BOL with Veolia Technical Solutions. Once everything was contained we then called our recycling facility we use out of Tallahassee and set up the date and time for them to come and pick up the mercury articles.

If you should have any other questions about our Plan of Operations that we may have missed, please call us at 850-432-7833.

Sincerely,

Sonny Watson Jennifer W. Zam



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

UNIVERSAL WASTE LAMP AND DEVICE TRANSPORTER AND TRANSFER FACILITY INFORMATION CHECKLIST

The Department requires that all universal waste lamp and device transporters and transfer facilities registered under Rule 62-737.400, F.A.C., complete and sign this Information Checklist. This information will be used to evaluate compliance with subparagraph 62-737.400(1)(b), F.A.C. Your transporter registration will not be issued until you complete and return the checklist. Handlers that are not engaging in transport activities need not complete this form.

Pensarola,	Recycline, Inc.	3185 Newton	Dr. Pensacola, H 32503 City and State
Facility Name	Street Addres	5S	City and State
			<u>clingine@abl.com</u>
Phone	Fax	E-mail	5
Complete all	porters and transfer facil l sections and check all b	oxes that apply.	
1. Estimated <u>number</u> of Types: Flue	of LAMPS handled durin uorescent X	g the last calendar HID <u>کر</u> 3/	year. <u>132,2801</u> a. 1,080 ₂ a.
2. Estimated <u>number</u> of Types: Th Thermon	of DEVICES handled dur nermostats X Electri neters X Manor	ing the last calenda c Switches/Relays neters 🛛 Othe	r year. <u>20 11</u> r <u>X 25.50 165 Liquid</u> year. <u>24.50</u> 16. Mercury Mercury Containing neck the boxes for hard lines
3. Estimated weight of	f DEVICES handled duri	ng the last calenda	year. <u>34.50</u> lb. Metarg
1. 2000000000000000000000000000000000000	of lamps or devices each : D). Give the facility name		HHICKS
132,280 Ve	olia Lechnical,	Solutions: Ta	<u>llahasser</u> H; 18668778299 Phone
Number LXD□ Fa	icility Name	City/State	Phone
_526 Ve	rotia Jechinial S	d; Tallahas	see, H; 18468778299 Phone
Number L□DX Fa	icility Name	City/State	Phone
	·	· .	
Number L D D Fa <u>Frank H</u> Wat Print Name of Authorize	tson III hand	H Sity/State	Phone 1/5/20/0 Date
	"More Protection,	Less	
	www.dep.state		

Section 2: For out-of-state transporters and transfer facilities only

1. Is any environmental agency in your state aware of your activities as a transporter or transfer facility for universal waste lamps and devices in Florida?

Yes____

No

2. If you have not already done the following in previous years, please enclose some written verification from that environmental agency that they are aware of your activities as a transporter for universal waste lamps and devices in Florida and in your state. This verification can be in the form of a letter to you or to the Department, a registration, a permit, etc.

Submitted Previously Submitted in What Year? Print Name of Authorized Agent Signature of Authorized Agent

Complete, sign and return this checklist along with your registration form to:

Laurie Tenace, MS 4555 Hazardous Waste Management Section Florida Department of Environmental Protection 2600 Blair Stone Road Tallahassee, Florida 32399-2400

Your transporter registration will not be issued until you complete and return this checklist.

QUESTIONS OR COMMENTS?

If you have any questions or comments, please contact Laurie Tenace at (850) 245-8759 or via e-mail at <u>laurie.tenace@dep.state.fl.us</u>.

Thank you for your cooperation in providing this information.

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