

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

02/04/2010

George Fery, President E-Scrap Inc 2220 E 11th Ave Hialeah, FL 33013-4310

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 E-Scrap Inc located at **2220 E 11th Ave**, **Hialeah**.

FLR000128199

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

Non-handler of Hazardous Waste Small Quantity Handler, Universal Battery Transporter, Universal Lamp Transporter, 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,

fin n ge

for Michael Redig

Michael X. Redig Environmental Manager Hazardous Waste Regulation Section

ME ID: 71296 , Email Address: <u>gfery@escrapusa.com</u> Link: <u>http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLR000128199</u>



February 1st, 2010

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

DEP Waste Management Division - HWRS, MS4560 2600 Blair Stone Road Tallahassee, FL 32399-2400

Attn: Ms Theresa Sullivan Bureau of Solid and Hazardous Waste

Dear Ms Sullivan,

Further to your January 27, 2010 e-mail regarding the renewal of our regulated waste activity, please find attached form 8700-12FL - Florida Notification of Regulated Waste Activity, duly completed.

Also attached for your records:

- FDEP facility ID # FLR000128199 for both obsolete electronic equipment and spent fluorescent lamps, batteries and devices,
- Floor plans of our three warehouses
- Google terrain maps of our facility location
- Flyers presenting our services.

Do feel free to call the undersigned for any question or clarification.

Sincerely

George J. Fery President

FLORIDA EPA ID 0 0 0	DEP W	FL - FLORIDA NOT GULATED WASTE Vaste Management Division- Blair Stone Rd. Tallahassee (850) 245-8772	-HWRS, MS4560	FED 0 FED 0		Date Rec or FDEP Offic RCRAIn	ial Use Only)
1. Reason for Submittal	Mark 'X' in correct box: To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). X To provide subsequent notification (to update status and facility identification information). Is this the final notification (see instructions) for the facility?						
2. Facility or Business Name		E-Scrap, Inc.			FEID	No. 5 1 1 2	7 6 1 7
3. Facility Operator (List additional Operators in the comments section).	Name of Operator Street or P.O. Box City or Town:	E-Scrap, Inc.	t 11th Avenue า	Date be	came	Operator: 05 mm	
	Operator Type: [State	Othe	r	
4. Facility Physical Location	Physical Street Address: 2220 East 11th Avenue						
Information	City or Town:	Hialeah		State:	FL	Zip Code:	33013
	^{County:} Dade		If available, ple boundaries.	ase attac	h a ma	p or sketch of	the facility
	Latitude: d d	mm ss.ssss	tude: _ d d m m	_ s s .	ssss	Method: Datum:	
5. Facility North Am Classification Syst	critean maastry	A. 56292 c.	20	В. D.			
Code(s) 6. Facility or	Street Address or	P.O. Box:	2220 Ea	et 11th	Δυοι	2110	
Business Mailing	City or Town:	Hialeah			FL	Zip Code:	33013
Address 7. Facility or	First Name:	George	Last Name:	Fery		Titler	esident
Business Contact Person	Phone Number:	305 636 1911	Extension:	E-Mail:		I gfery@escrap	ousa.com
	Street or P.O. Box: 2220 East 1			11th Avenue			
	City or Town:	Hialeah		State:	FL	Zip Code:	33013
8. Real Property (Land) Owner of the Facility's		oerty (Land) Owner: JTP REALTY, LLC). 0		came	Owner: // mm	
Physical Location (List additional	Street or P.O. Box	: P. O. Bo	ox 431833		Phon	e Number: 30	05 836 0156
real property owners in the comments	City or Town:	Miami		State:	FL	Zip Code:	33143
section.)	Owner Type: 🛛 I	Private Federal	Municipal Sta	ite 🔲 (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. 000128199
9. Type of Regulated Waste Activity (Mark 'X' in all the	at 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): UW HAW) LOUDN 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 	 (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	
Contact	Telephone
Policy Number	Expiration date
d. Transportation Mode 🗌 Air 🗌 Rail 🗋 Highway	Water Other - specify
e. Hazardous Waste Transfer Facility:	Storage Volume
Florida Administrative Code (F.A.C.)]:	with the initial notification for a transfer facility [Rule 62-730.171(3),
criteria of Section 403.7211(2), Florida Statutes	The transporter that the proposed location satisfies the $(E S)$ [Pule 62,730,171(3)(a)] = E A C I
Evidence of the transporter's financial responsibili	
A brief general description of the transfer facility	
A copy of the facility closure plan [Rule 62-730.1	
A copy of the contingency and emergency plan [R	tule 62-730.171(3)(a)6., F.A.C.]
A map or maps of the transfer facility [Rule 62-73	30.171(3)(a)7., F.A.C.]
 Notification of changes in above items Annual update notification 	

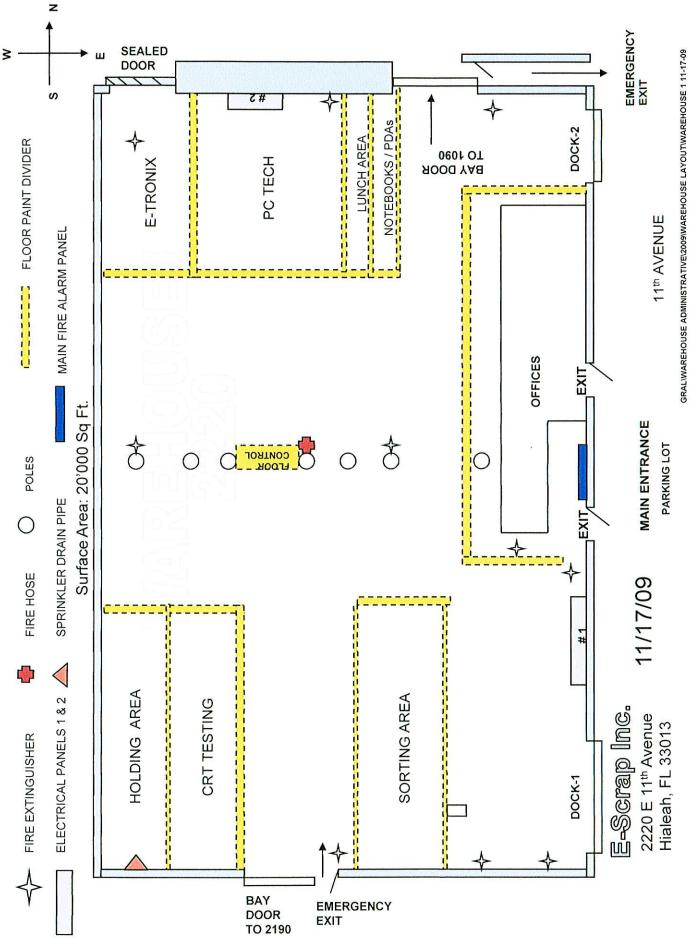
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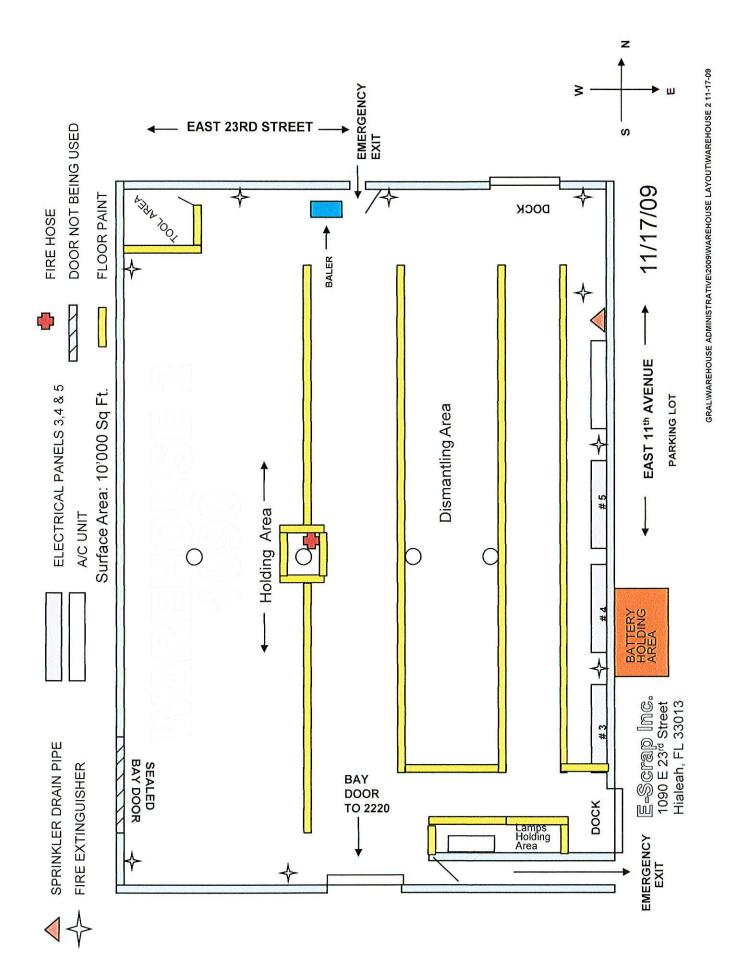
	EPA ID No. 000128199
B. Universal Waste (UW) Activities (Mark 'X' in all that apply)	
Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more	
Small Quantity Handler (SQH) = always less than 5,000 kg acc	cumulated
Mercury-containing devices LQH = 100 kg (220 lb) or more a	ccumulated by for-hire handler
Mercury-containing devices SQH = less than 100 kg accumula	ted by for-hire handler
Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lat	mps) or more accumulated by for-hire handler
Mercury-containing lamps SQH = less than 2,000 kg (8,000 land	mps) accumulated by for-hire handler
[Note: $4 \text{ lamps} = 1 \text{ kg}, 62-737.200(10)$]	
Pharmaceuticals $LQH = 5,000 \text{ kg or more of universal pharmaceuticals}$	
Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely haze Pharmaceuticals SQH = abusy less than 5 000 kg of UBW are	
Pharmaceuticals SQH = always less than 5,000 kg of UPW and	
Accumulate (see note in instructions) Facility	(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	500+ lbs.
b. Pesticides	
c. Pharmaceuticals	
d. Mercury Containing Devices	100+ lbs.
e. Mercury Containing Lamps X	5500 lbs.
(3) Mercury Recovery and/or Reclamation Facility [Chapter 62-737, F.A.C.]	Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]
(4) Reverse Distributor of UW Pharmaceuticals	s Lamps Devices
storage prior to re	vity, a facility must treat, dispose or recycle a UW. A permit is required for cycling.
 C. Used Oil Activities: (1) Used Oil Transporter - indicate type(s) of activity(ies): 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 a. Transporter 	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 orginally 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.
 a. Transporter b. Transfer Facility c. Processor d. End User 	Signature of Authorized Person
 (7) Used Oil Transporters, Transfer Facilities, Collection Centers, Off-Specification Burners and Marketers must pay an annual \$100 registration fee. Used Oil Processors are exempt from this fee. If applicable, enclose a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection. 	 Print Name of Authorized Person (9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one): Our mailing (business) address

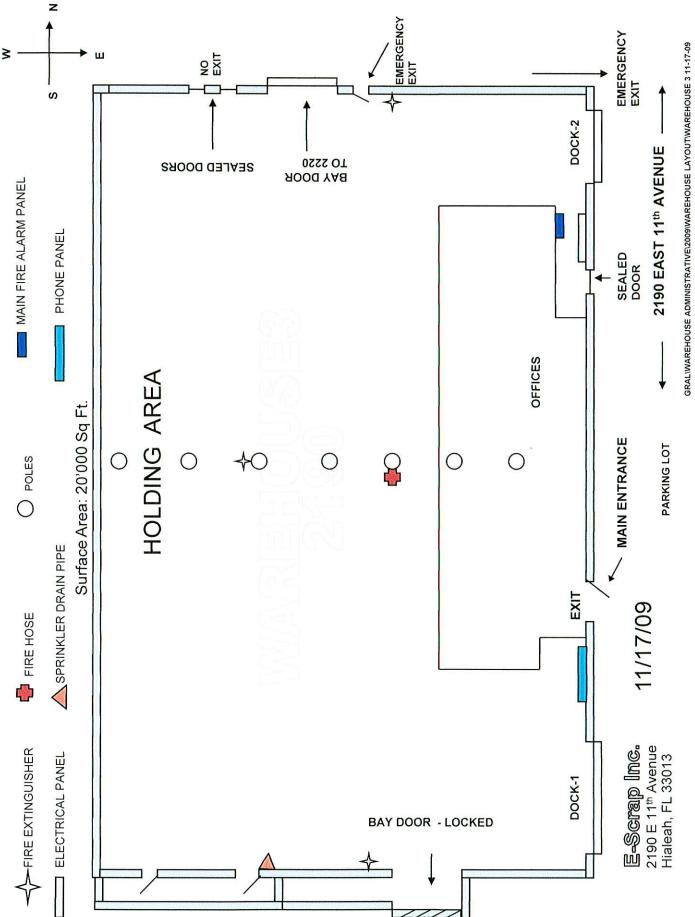
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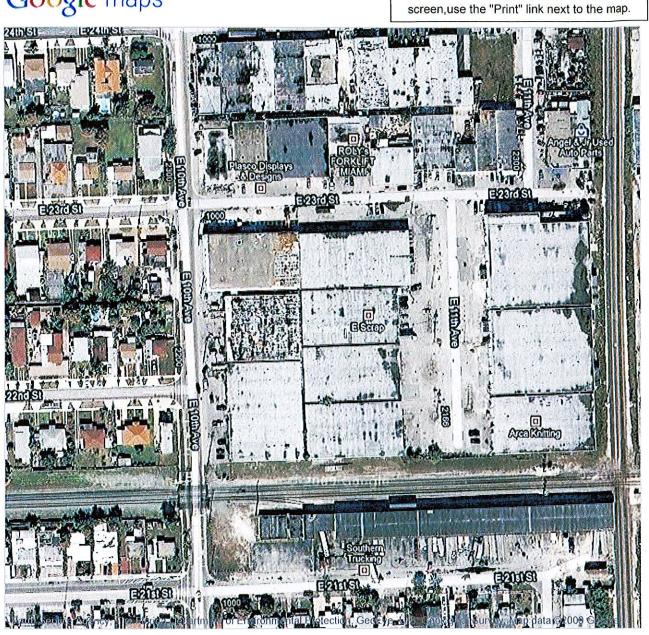
D. Other State Reg	ulated Waste Ac	tivities:	Petroleum C	EPA ID No.	CW) Handler	[Chapter 62-740, F.A.C.]
						uired for this activity.
10. Waste Codes your facility. List the Hazardous waste tran	em in the order th	ey are presented in	n the regulations (e	.g., D001, D003, I	007, U112).	al hazardous wastes handled at aces 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. Other Status	Changes (Mar	k 'X' in all that aj	pply):			
(2) Waste	ess no longer generated by bus	erates, transports, i iness has been del	reats, stores, or dis			
be ha		waste there.				r the new location if you will a contact person, mailing
			n be reached after	closing.		a contact person, maning
Contact						-
Address						
-			-			
C. Prope	rty Tax Default		D. Petition	for Bankruptcy	Protection	
in accordance with a information submitte for submitting false i facility, I am aware t Signature of own	system designed d is, to the best o nformation, inclu hat transfer facili er, operator, on	to assure that qual f my knowledge a iding the possibilit ties must comply w r an authorized	ified personnel pro nd belief, true, acco y of fine and impri with the requirement	perly gather and e trate, and complete sonment for know	valuate the in e. I am aware ing violations 171, FAC, ar	nder my direction or supervisi formation submitted. The that there are significant penal . If I have notified as a transfe d Rule 62-730.182, FAC. Date Signed
	epresentative	1				(mm-dd-yyyy)
r	1111		Georg	e J. Fery - Pr	esident	02/01/2010
r E	1001					
	Day				the second s	
r If the person who f	illed in this form	i is not the Facilit	y Contact or Ope	rator, please com	plete the info	rmation below:
7			y Contact or Ope (Phone Number)	rator, please com	plete the info	
If the person who f				rator, please com		
If the person who f				rator, please com		

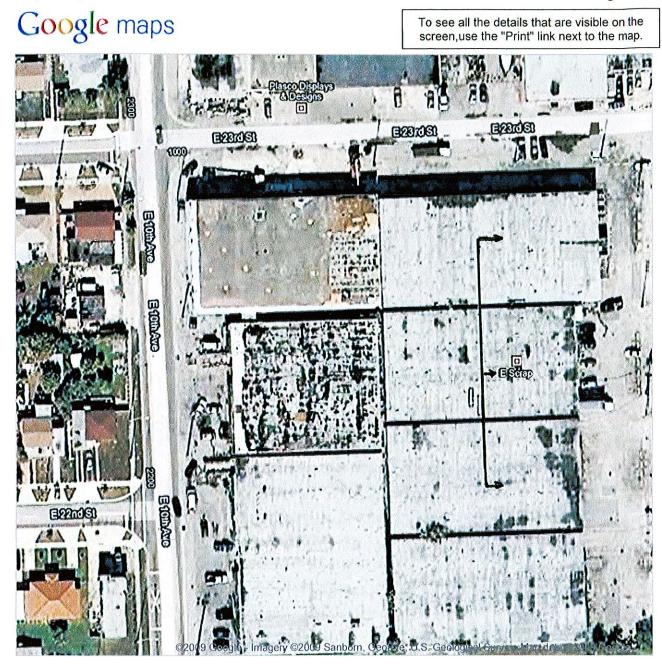






To see all the details that are visible on the







Florida Department of Charlie Crist Governor Environmental Protectio RECEIVED If Kottkamp Lt. Governor

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

JEC 28 200 Michael W. Sole Secretary

BY: BSHW 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.

		Scrap, Inc.		00012	المحمد المرجع والمحمد والمرجع والمحمد والمحمد والمحمد والمحمد والمحمد والمحمد والمحمد والمحمد والمحمد والم
		Cacility Name)		FL	(EPA id) 33013
	2220 East 11th Aven	ue	Hialeah	·	
	(Street Address)	196	(City)	(State)	(Zip)
(305) 63 (Phone)	<u>6 1911 (305) 694 5</u>		gfery@escrapus	a.com	
		1 4		(
	For <u>all</u> transporters and Complete all sections a				_
1. Estimate	ed <u>number</u> of LAMPS	handled during the l	ast calendar year.	3157	3
Тур		•			
2. Estimate	ed <u>number</u> of DEVICE	S handled during th	e last calendar year.	<u></u>	
Тур	es: Thermostats	Electric Switche	es/Relays 🗖		
	Thermometers	Manometers	Other		
3. Estimate	ed weight of DEVICES	S handled during the	last calendar year.	16254	lb.
	ed <u>number</u> of lamps or amps (L) or devices (D				
Number	L D Fac	ility Name	City	State	Phone
24931		onmental Services	Tallahassee	FL	(850) 877 8299
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		$\langle \rangle$			
	George J. Fery		the	12/	21/2009
Prin	t Name of Authorized Age	ent Signature	of Authorized Agent	[Date



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

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	X	No
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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?	
George J. Fery	e fill	12/21/2009
Print Name of Authorized Agent	Signature of Authorized Agent	Date

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

EPA ID Notification Coordinator Hazardous Waste Regulation Section MS 4560 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 laurie.tenace@dep.state.fl.us.

Thank you for your cooperation in providing this information.

TransChkl.doc



Florida Department of Environmental Protection

Bob Martinez Center 2600 Blairstone Road Tallahassee, Florida 32399-2400

04/07/2009

George Fery E-Scrap Inc 2220 E 11th Ave Hialeah, FL 33013-4310

The Florida Department of Environmental Protection has reviewed your application for registration as a transporter or handler for universal waste lamps and devices destined for recycling. Based on the information received, the facility located at 2220 E 11th Ave, Hialeah, FL 33013-4310 has been registered through March 1, 2010 with the following status:

Facility ID # FLR000128199

Transporter of Universal Waste Lamps and Devices Transfer Facility for Universal Waste Lamps Transfer Facility for Universal Waste Devices Small Quantity Handler Facility for Universal Waste Lamps and Devices (Less than 2,000kg of Lamps (8,000) and/or 100kg of Devices for 1 Year)

The registration form for the year 2010 will be sent to the contact person on your application.

Chapter 62-737, Florida Administrative Code (F.A.C.), (copy enclosed) specifies several other requirements including packaging, training and record keeping for transporters and handlers of and reverse distribution programs for universal waste lamps or devices destined for recycling. These requirements are simple, flexible and make good business and environmental sense (summarized on enclosed fact sheets).

This registration does not allow you to transport or handle universal waste lamps or devices which are destined for landfill or other disposal. The transportation or handling of universal waste lamps or devices destined for disposal is subject to our hazardous waste management regulations under Chapter 62-730, F.A.C.

If any of your facility's information on the Universal Waste Lamp and Device Transporter and Handler Registration Form changes, please notify me at Mail Stop 4555 at the address above. I can also be contacted at (850) 245-8759 or at Laurie.Tenace@dep.state.fl.us.

Sincerely,

Laurie Tenace Environmental Specialist Hazardous Waste Management Section

Enclosures

Charlie Crist Governor

Jeff Kottkamp

Michael W. Sole Secretary