

Florida Department of Environmental Protection

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

JeffKottkamp Lt. Governor

Michael W. Sole Secretary

03/04/2010

Joseph Stearns FedEx Ground 1000 Fed Ex Dr Moon Township, PA 15108-

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 **3000 Directors Row**, **Orlando**, **FL 32809-5674** has been registered through **March 1**, **2011** with the following status:

Facility ID # FLR000030817 Transporter of Universal Waste Lamps and 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 **2011** 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,

Luni Eran

Laurie Tenace Environmental Specialist Hazardous Waste Management Section

Enclosures



Florida Department of Environmental Protection

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

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03/04/2010

Nancy Beaumont FedEx Ground 1000 Fed Ex Dr Moon Township, PA 15108-9373

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Luni Gran

Laurie Tenace Environmental Specialist Hazardous Waste Management Section

Enclosures



CERTIFIED MAIL

February 16, 2010

Florida Department of Environmental Protection Hazardous Waste Section 2600 Blair Stone Road Tallahassee, FL 32399-2400

Re: FedEx Ground 3000 Directors Row Orlando, FL 32809 EPA ID Number – FLR000030817

To Whom It May Concern:

Please find enclosed the following documentation regarding the above:

- Filled out and signed 8700-12FL Florida Notification of Regulated Waste Activity.
- Filled out and signed *Universal Waste Lamp and Device Transporter And Transfer Facility Information Checklist* with attached list of all our feeder. facilities in the State of Florida.

If you have any further questions, please contact me.

Thank you.

Sincerely,

Joseph E. Stearns, Jr., Senior Environmental Compliance Specialist FedEx Ground

Cc: Senior Managers – ORLA, TALA, and COCO

Enclosures



Structure 8700-12FL - FLORIDA NOTIFICATION OF Date Received REGULATED WASTE ACTIVITY (for FDEP Official Use Only) DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 1 (850) 245-8772 1 2					
EPAID FLD	$\frac{\text{EPA ID}}{\text{FL}} FL 2 \emptyset \emptyset \emptyset \emptyset 3 0 8 1 7 $ $MTS \qquad \text{RCRAInto}$				
1. Reason for Submittal	Mark 'X' in correct box: To provide initial notification (to obtain an EPA ID Number for hazardous vaste, 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 or Business Name	FROEX GROUND	FEID No.			
3. Facility Operator (List additional Operators in the comments section).	Name of Operator: FEDEX GUIND PACLIGGE SYSTEM, J Street or P.O. Box: Street or P.O. Box: ISOD FEDEX DRUE City or Town: MOON TOWASHIP Operator Type: Private Federal Munic	Phone Number: (412)262-7347 State: PA Zip Code: 15108			
4. Facility Physical	Physical Street Address: 3000 DINECTORS				
Location Information	City or Town: OMLANOO	State: FL Zip Code: 32819			
	County: Choose Alas / a If ava	ilable, please attach a map or sketch of the facility daries.			
Latitude: $28 2 7 4 4 . 98$ Longitude: $8 1 2 5 3 7 . 65$ Method: d d m m s s . ssss d d m m s s . ssss Datum:					
5. Facility North American Industry Classification System (NAICS) Code(s) A. 492110 C.		В. D.			
6. Facility or Business Mailing	Street Address or P.O. Box: 1000 FEDEX DUV	£			
Address	City or Town: MOON TOWNSHIP	State: PA Zip Code: 15/08			
7. Facility or Business Contact Person	Phone Number: Z A N LEXTension	E-Mail: bas Handla Dalar			
	Street or P.O. Box: 1000 FEDEX DUNC; ATTA: ENUMERAL SEALICES				
	City or Town: MOON TOWNSHIP	State: State: A State:			
8. Real Property (Land) Owner of the Facility's	roperty Name of Real Property (Land) Owner: Image: Comparison of the comparis				
Physical Location (List additional	Street or P.O. Box:	WMONMELIAL Phone Number: 111-7217			
real property owners in the comments section.)	City or Town: MOSH TWHS HIP Owner Type: Private Federal Municipa	State: Zip Code: Image: A state Image: A state Image: A state Image: A state			

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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 1 of 4

	ΕΡΑ ID No. FUR ΦΦΦΦ 3Ø817				
9. Type of Regulated Waste Activity (Mark 'X' in all that apply):					
 A. Hazardous Waste Activities: (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 <i>non-acute</i> hazardous waste; or Greater than 1 kg (2.2 lbs) of <i>acute</i> hazardous waste ▶ 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 □ 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 	 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. a. Operating Commercial TSD b. Operating Non-commercial TSD c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.) (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					
Contact Policy Number	Telephone				
	Expiration date				
e. Hazardous Waste Transfer Facility:	Storage Volume				
Initial notification The following items are required to be submitted v Florida Administrative Code (F.A.C.)]:	with the initial notification for a transfer facility [Rule 62-730.171(3), The transporter that the proposed location satisfies the (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.] ity [Rule 62-730.171(3)(a)3., F.A.C.] operations [Rule 62-730.171(3)(a)4., F.A.C.] 71(3)(a)5., F.A.C.] Rule 62-730.171(3)(a)6., F.A.C.]				

	EPA ID No. FCR QQQ 030817				
B. Universal Waste (UW) Activities (Mark 'X' in all that apply) ("accumulated" means at any one time):					
Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more of any combination of UW accumulated Small Quantity Handler (SQH) = always less than 5,000 kg accumulated					
Mercury-containing devices LQH = 100 kg (220 lb) or more acc Mercury-containing devices SQH = less than 100 kg accumulated					
Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lam	ps) or more accumulated by for-hire handler				
Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamp	ps) accumulated by for-hire handler				
[Note: 4 lamps = 1 kg, $62-737.200(10)$]					
$\square Pharmaceuticals LQH = 5,000 kg or more of universal pharmace$	utical waste (UPW) accumulated				
Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazar					
Pharmaceuticals SQH = always less than 5,000 kg of UPW and a	always 1 kg or less of acutely hazardous UPW accumulated				
I(I) HOP those Monoging I I (connot 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	2 00				
b. Pesticides					
c. Pharmaceuticals					
d. Mercury Containing Devices	<100				
e. Mercury Containing Lamps	<u> </u>				
	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				
(5) Destination Facility for UW	ty, a facility must treat, dispose or recycle a UW. A permit is required for ccling.				
	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.				
D a Transporter	Signature of Authorized Person Print Name 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. A check is enclosed. 	 (9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one): Our mailing (business) address The site (facility) address 				

				E	PA ID No.	FIRSOOD	30817
D. Other State I	Regulated Waste A	ctivities:					Chapter 62-740, F.A.C.] ed for this activity.
your facility. Lis	t them in the order t	Regulated Hazan hey are presented in les routinely or usua	n the regula	ations (e.g.,	D001, D003,	F007, U112).	hazardous wastes handled at es are needed.
Døø I	2 Døø2	3 D007	+ UØ4	p3 5	U154	" DO21	⁷ U239
* Doors	9	10 -1-1	11	12		13	14
15	16	17	18	19		20	21
22	23	24	25	26		27	28
11. Other Stat	us Changes (Ma	rk 'X' in all that a	pply):				
$ \begin{array}{c c} \hline & (1) Bu: \\ \hline & (2) Wa \end{array} $	siness no longer gei	aste at This Facili nerates, transports, t siness has been del	reats, store	es, or dispos	es of hazardo	us waste	
be	osed at this location handling regulated t of Business - Busi				(Date).		ne new location if you will contact person, mailing
Contac	.t		Pho	ne			
Addres	SS						
City, S	tate, Zip					<u> </u>	
C. Pro	operty Tax Default	t	□ D.	Petition fo	r Bankrupte	y Protection	
in accordance wit information subm for submitting fal	th a system designer hitted is, to the best se information, incl	d to assure that qual of my knowledge a luding the possibilit	lified perso nd belief, t y of fine a	onnel proper rue, accurat nd imprison	ly gather and e, and comple ment for know	evaluate the infor ete. I am aware that wing violations. I	ler my direction or supervision mation submitted. The at there are significant penalties f I have notified as a transfer Rule 62-730.182, FAC.
Signature of owner, operator, or an authorized		Print Name and Title			Title	Date Signed (mm-dd-yyyy)	
AME SE	Und		JOSEP	HE.S	RAPINSC	2	02/15/10
	<i>v</i>		Se. Es	windowik	outre Com	Minut SDECK	rust
	no filled in this for STEANUS J	m is not the Facilit	7. \	or Operation		- , ,	ution below:
(Name of person completing this form) (Phone Number) (E-mail Address)							
13. Comments	:						



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.

FEDEX	Grano	(000 F	boex On	WE MOON	TOWNSHIP, PH	15108
Facility N	Jame	Sta	eet Addre	SS	City and State	2
(412) 262	-7306	(4n) 859-2	232	Joseph. STE	ARMS @ feder	. Com
Phone		Fax		E-mail		
	Section 1: For <u>all</u> transporters and transfer facilities (in-state and out-of-state). Complete all sections and check all boxes that apply.					
1. Estima Ty	ated <u>numb</u> pes:	er of LAMPS han Fluorescent 🔽	dled duri	ng the last calendar HID 🔽	year. 643, 44	<u>ع</u>
2. Estima Ty	vpes:	er of DEVICES has the two sets of DEVICES has the two sets of two	Electr	ring the last calend ic Switches/Relays meters 🗆 Othe		IBALUNY DEACES
3. Estima	ated <u>weigh</u>	<u>t</u> of DEVICES ha	ndled dur:	ing the last calenda	r year. <u>615</u>	lb.
4. Estimated <u>number</u> of lamps or devices each facility received. Check the boxes for lamps (L) or devices (D). Give the facility name, location, and contact information.						
598,6	50	FEDEX GROUND	7	AUAHASSEE, F	モ (412)は	142-7386
Number	LIDI	Facility Name		City/State		Phone
45,76 Nymber		FEOFX HOUNC Facility Name		COCOA <u>P</u> City/State	(412)2	262-7366 Phone
tetobre	- 1 V - 1 C - 1 C - 2		x Gland			212-7366
JUSEPH	L 🗆 D 🗆 <u>E. STEAR</u> ame of Autho	Facility Name	dies	City/State	2/15/10	Phone
FILLIN	and of Autho		gigilature o	Autonzeu Ayent	Late	

"More Protection, Less www.dep.state.fl.us 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 in What Year? _____ Submitted Previously ____ + B. STRAMAS JN. Print Name 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.

TransChkl01282009.doc

IMAGE QUALITY

AS YOU VIEW THE NEXT PAGE(S), PLEASE NOTE THAT THE ORIGINAL DOCUMENT WAS OF POOR QUALITY

FedEx Ground Florida Facilities

<u>Hub</u>:

FedEx Ground 3000 Directors Row Orlando, FL 32809

Terminals (Feeders):

FedEx Ground 2045 High Ridge Road Boynton Beach, FL 33426

FedEx Ground 5731 Premier Park Drive West Palm Beach, FL 33407

FedEx Ground 3155 Grissom Parkway Cocoa, FL 32926

FedEx Ground 2700 NW 25th Street Pompano Beach, FL 33069

FedEx Ground 2670 Colonial Blvd. Ft. Myers, FL 33907

FedEx Ground 2480 N. Lane Ave Jacksonville, FL 32254

FedEx Ground 100 Chapman Road Big Pine Key, FL 33043

FedEx Ground 11401 NW 100 Rd Medley, FL 33178

FedEx Ground Florida Facilities (Continued)

FedEx Ground 4160 SW 13th St. Ocala, FL 34474

FedEx Ground

408 Brookmeade Drive Crestview, FL 32539

FedEx Ground 132-2 Hamilton Park Drive Tallahassee, FL 32304

FedEx Ground 8411 Florida Mining Blvd. Tampa, FL 33634

FedEx Ground 1177 Blue Heron Drive, Suite B102-50 Riviera Beach, FL 33404