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June 18, 2010

Michael J. Fitzsimmons, Administrator
Waste Program
Florida Department of Environmental Protection
Northeast District Office
7825 Baymeadows Way, Suite 200B
Jacksonville, FL 32256-7590

Re: Heritage Crystal Clean LLC
11643 103rd St. Jacksonville, FL
Response to Warning Letter WL09-2447HWSNY16NED
EPS/DEP ID: FLR 00154278

Dear Mr. Fitzsimmons:

This letter is written on behalf of Heritage Crystal Clean, LLC and responds to the above-referenced Warning Letter dated January 13, 2010. This letter follows up a telephone conference held on Monday, March 10, 2010, between Jenna Perry and Ashwin Patel of the DEP and Catherine McCord of Crystal Clean and its outside counsel Philip L. Comella.

Specific responses to the "Potential Violations" follow:

Alleged Potential Violation 1

"The facility failed to provide adequate security that includes 24-hour surveillance or fence which completely surrounds the active portion of the facility and a means to control entry to the active portion at all times."

Response

Crystal Clean believes it is exempt from this regulation because it temporarily holds closed containers of small quantities of waste materials that are unlikely to result in physical contact causing injury or a disturbance causing a violation. See 40 C.F.R. § 265.14(a)(1)-(2). Even though the landlord has now completed the installation of a perimeter fence and hence satisfied the Department's concern, the facility previously provided adequate security by locking the trailers

whenever they were unattended, which itself made it unlikely that anyone would come in physical contact with the containerized waste materials in accordance with the referenced exemption.

Alleged Potential Violation 2

“The facility failed to post signs that indicate only authorized personnel are allowed and that entry to the area may be dangerous.”

Response

Crystal Clean has installed the requested signs at all entrances at the facility and near the trailers.

Alleged Potential Violation 3

“The facility failed to develop an inspection schedule for areas subject to spills when hazardous waste is present at the facility. In addition, the inspection checklists did not identify the name of the inspector in the log.”

Response

Crystal Clean maintains the inspection schedule on a computer program and will make sure that the local Crystal Clean site representative is able to print out the schedule during an inspection.

Alleged Potential Violation 4

“The facility failed to post “No Smoking” signs in the area where it parks the trailer it uses to store and transport hazardous waste.”

Response

Crystal Clean has posted the “No Smoking” signs as requested.

Alleged Potential Violation 5

“At the time of the inspection, the facility had not made emergency arrangements with local authorities.”

Response

Through letter dated November 18, 2009, Crystal Clean submitted its additional information to the DEP, which included emergency arrangement letters sent to local authorities on August 28, 2009.

Alleged Potential Violation 6

“The facility’s storage and waste trailers do not appear to be within the property lines, according to the Duval County Property Appraiser’s website.”

Response

Crystal Clean has reconfigured the location of the trailers so that they are at least 50 feet within the property lines. The trailers were always within the property boundary.

Alleged Potential Violation 7

“The facility failed to place the generator’s EPA ID number on its new waste log sheet and failed to place the generator’s EPA ID number and name on log sheets prior to May 21, 2009.”

Response

Crystal Clean maintains the requested information on a computer program and will ensure that its site representatives are able to print out the requested information during an inspection.

Alleged Potential Violation 8

“The facility is operating a 10-day transfer station without receiving confirmation from the DEP that the initial notification package is complete and technically adequate.”

Response

In accordance with the DEP’s requested corrective action, attached as Exhibit A is an updated closure plan reflecting the DEP’s comments.

Alleged Potential Violation 9

“The facility failed to provide records showing the type and amount of hazardous waste training given to facility employees.”

Response

Crystal Clean had this information in the computer at the time of the inspection. At any moment, a Crystal Clean manager or anyone in the EHS department can run a report on the status of an individual’s or facility’s training. The training is all web-based and the documentation is automatic.

Alleged Potential Violation 10

“The facility failed to keep used oil acceptance and delivery records on DEP Form 62-710.901(2) or on a substantially equivalent form.”

Response

Crystal Clean maintains the information on a substantially equivalent form as allowed by the regulation. All information is in its networked computer system.

Alleged Potential Violation 11

“The facility stores used oil on-site for longer than 24 hours and failed to register as a used oil transfer facility as a used oil transfer facility.”

Response

Crystal Clean submitted the updated form on February 21, 2010. An extra copy is attached as Exhibit B.

Alleged Potential Violation 12

“The facility failed to mark the results of a Chlor-D-Tect test for one used oil acceptance record dated 5/27/09.”

Response

As explained during the conference call, this was an anomaly. Heritage Crystal Clean does comply with the record retention requirement of 40 C.F.R. § 279.44(d). There is no regulatory requirement that the Chlor-D-tect test be marked on any particular piece of paper.

Alleged Potential Violation 13

“The following deficiencies were noted in the facility’s Contingency Plan:

1. The facility did not have a copy of the Plan on-site during the inspection.
2. The facility failed to include in the Plan a list of all emergency equipment at the facility and an evacuation plan including signals.
3. Failure to distribute the Plan to local authorities.
4. The alternative emergency coordinator list in the Plan is located in South Carolina, which means he is not available to respond to an emergency by reaching the facility within a short time.”

Response

Per the DEP's request, Crystal Clean has changed the assistant emergency coordinator in the updated Emergency & Evacuation Procedures, which is attached as Exhibit C. Please note that there is no requirement that the emergency coordinator or alternate live in state. The Regional Manager routinely visits within the state and Crystal Clean is experienced in handling emergency incidents through its management structure and emergency response provider.

If you have any further questions, please let us know.

Very truly yours,


Philip L. Comella

PLC/sld

Enclosures

cc: Catherine A. McCord

EXHIBIT A

**HERITAGE-CRYSTAL CLEAN, LLC
CLOSURE COST ESTIMATE AND CLOSURE PLAN**

Jacksonville, Florida
10-day transfer operation

The 10-day transfer regulations in Florida link closure requirements to these operations.

40 CFR 265.111 states:

§ 265.111 Closure performance standard.

The owner or operator must close the facility in a manner that:

- (a) Minimizes the need for further maintenance, and
- (b) Controls, minimizes or eliminates, to the extent necessary to protect human health and the environment, post-closure escape of hazardous waste, hazardous constituents, leachate, contaminated run-off, or hazardous waste decomposition products to the ground or surface waters or to the atmosphere, and
- (c) Complies with the closure requirements of this subpart, including, but not limited to, the requirements of §§ 265.197, 265.228, 265.258, 265.280, 265.310, 265.351, 265.381, 265.404, and 265.1102.

Crystal Clean operates its 10-day transfer facility by collecting containerized hazardous waste, conditionally exempt waste, non-hazardous waste, and solvent product from its customers. Containers are transported from customers to the branch on small route trucks. At the branch, containers are moved from route trucks to a semi-trailer (tail gate to tail). No containers are opened.

The Closure performance requires closure to minimize further maintenance and minimize contamination and migration of contamination. 40 CFR 165.111(c) specifically references certain interim status waste management units. 10-day transfer facilities are not included in these unit specific standards.

In order to meet the closure performance requirements of 40 CFR 265.111 (a) and (b), Crystal Clean will address any soil (and possible groundwater) contamination at the time of any spill event, where material leaked from a container and went beyond the secondary containment systems found in both our route trucks and box trailers. At the time of closure, there will be a visual inspection of the facility to determine if any staining from site operations has occurred, as well as a review of any spill and spill clean-up history. If either evaluation reveals unremediated staining resulting from site activities, Crystal Clean will take appropriate action. This approach would also allow for the targeting of specific constituents of concern from a specific container, since all containers are labeled as to their contents.

This approach minimizes the possibility of migration of contamination by addressing contaminants at the time of the release, not later at the time of closure.

§ 265.112 Closure plan; amendment of plan.

Crystal Clean will notify FL DEP at least 180 days prior to the date it expects to start closure. There may be circumstances where the notification will be less because of changes in lease or business needs would require moving to another location. Crystal Clean will submit a notification and closure plan at least 60 days prior to closure.

§ 265.114 Disposal or Decontamination of Equipment, Structures, or Soil

No disposal or decontamination is anticipated by closure of this truck-to-truck transfer operation. The closure plan will be modified if circumstances warrant a change during closure.

§ 265.115 Certification of Closure

Crystal Clean will certify closure upon completion of removal of the transfer containers from the location.

Closure Cost Estimates

No waste is ever treated, stored, or disposed at the Port Everglades 10-day transfer facility. The waste is transferred from truck-to-truck. Closure activities would include removal of all waste from the 10-day trailer. An estimate of these costs are provided below. No verification sampling is required. If there would ever be a spill at the 10-day transfer location, any resulting contamination would be dealt with as part of that spill response. Crystal Clean would notify the FL DEP if another situation would arise.

Current RCRA hazardous waste inventory is approximately 2 55-G drums every 10-days. To accommodate business growth, we are basing the closure cost estimate on 40 55-gallon drums of hazardous waste at the 10-day facility at one time. This is a very conservative estimate of the volume.

40 55-gallon drums

Breakdown

5 incinerates

\$400/drum = \$ 2,000

30 fuel blending

\$75/drum = \$ 2,250

5 wastewater treatment or neutralization

\$130/drum = \$ 650

Transportation

\$ 4,900

\$ 3,000

Total

\$ 7,900

Revised 3-19-09 CAM

Revised 6-14-10 MW

EXHIBIT B



**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

EPA ID **F L R 0 0 0 1 5 4 2 7 8**

**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).
- ☒ 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**

HERITAGE-CRYSTAL CLEAN, LLC

FEID No.

3 5 2 0 8 3 1 5 0

3. Facility Operator
(List additional
Operators in the
comments section).

Name of Operator:
HERITAGE-CRYSTAL CLEAN, LLC

☐ New Operator

Date became Operator: ____/____/____
mm dd yy

Street or P.O. Box: 2175 POINT BLVD., SUITE 375

Phone Number: (847) 836-5670

City or Town: ELGIN

State: IL

Zip Code: 60123

Operator Type: ☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other _____

**4. Facility Physical
Location
Information**

Physical Street Address: 11643 103RD ST.

City or Town: JACKSONVILLE

State: FL

Zip Code: 32221

County: Duval

If available, please attach a map or sketch of the facility boundaries.

Latitude: **3 0 1 4 5 2 . 03** Longitude: **8 1 5 1 2 9 . 34** 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. 423830

B. 562112

C.

D.

**6. Facility or
Business Mailing
Address**

Street Address or P.O. Box: 2175 POINT BLVD., SUITE 375 - EHS

City or Town: ELGIN

State: IL

Zip Code: 60123

**7. Facility or
Business Contact
Person**

First Name: CATHERINE

Last Name: MCCORD

Title: VP-EHS

Phone Number: (847) 783-5949

Extension:

E-Mail: CATHERINE.MCCORD@
CRYSTAL-CLEAN.COM

Street or P.O. Box: 2175 POINT BLVD., SUITE 375

City or Town: ELGIN

State: IL

Zip Code: 60123

**8. Real Property
(Land) Owner
of the Facility's
Physical Location**
(List additional
real property owners
in the comments
section.)

Name of Real Property (Land) Owner:
GROUP IV CECIL, INC.

☐ New Owner

Date became Owner: ____/____/____
mm dd yy

Street or P.O. Box: 10751 ALTA DR.

Phone Number: 904-757-5331

City or Town: JACKSONVILLE

State: FL

Zip Code: 32226

Owner Type: ☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other _____

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 *non-acute* hazardous waste; or Greater than 1 kg (2.2 lbs) of *acute* hazardous waste
- ☐ 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

In addition, indicate other generator activities that apply.

- ☐ d. United States Importer of hazardous waste
- ☐ e. Mixed Waste (hazardous and radioactive) Generator

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 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 _____

Address _____

Contact _____

Telephone _____

Policy Number _____

Expiration date _____

d. **Transportation Mode** ☐ Air ☐ Rail ☐ Highway ☐ Water ☐ Other - specify _____**e. ☒ Hazardous Waste Transfer Facility:**

Storage Volume _____

☐ **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.]
- ☐ A map or maps of the transfer facility [Rule 62-730.171(3)(a)7., F.A.C.]
- ☐ Notification of changes in above items
- ☒ Annual update notification

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 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
- ☐ Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler
- [Note: 4 lamps = 1 kg, 62-737.200(10)]
- ☐ Pharmaceuticals LQH = 5,000 kg or more of universal pharmaceutical waste (UPW) accumulated
- ☐ Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste accumulated
- ☐ Pharmaceuticals SQH = always less than 5,000 kg of UPW and always 1 kg or less of acutely hazardous UPW accumulated

(1) For those Managing	Generate/ Accumulate	Transport (see note in instructions)	Handle at Transfer Facility	(2) Enter your estimate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.	
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	LESS THAN 1,000 lbs.	
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
c. Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
d. Mercury Containing Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	LESS THAN 1,000 lbs.	
e. Mercury Containing Lamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	LESS THAN 1,000 lbs.	
(3) Mercury Recovery and/or Reclamation Facility			<input type="checkbox"/>	Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]	
[Chapter 62-737, F.A.C.]					
(4) Reverse Distributor of UW		<input type="checkbox"/>	Pharmaceuticals <input type="checkbox"/>	Lamps <input type="checkbox"/>	Devices <input type="checkbox"/>
(5) Destination Facility for UW		<input type="checkbox"/>	Note: for this activity, a facility must treat, dispose or recycle a UW. A permit is required for storage prior to recycling.		

C. Used Oil Activities:**(1) Used Oil Transporter - indicate type(s) of activity(ies):**

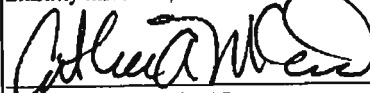
- ☐ a. Transporter
- ☒ b. Transfer Facility

(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
- ☒ b. Transfer Facility
- ☐ c. Processor
- ☐ d. End User

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

CATHERINE A. MCCORD

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

EPA ID No.

FLR000154278

D. Other State Regulated Waste Activities:☐ **Petroleum Contact Water (PCW) Handler** [Chapter 62-740, F.A.C.]

Note: A water facility permit may be required for this activity.

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. Other Status Changes (Mark 'X' in all that apply):**A. Non-Handler of Regulated Waste at This Facility**

- ☐ (1) Business no longer generates, transports, treats, stores, or disposes of hazardous waste
- ☐ (2) Waste generated by business has been delisted.
- ☐ (3) Other (explain) _____

B. Facility Closed

- ☐ (1) Closed at this location and **moved or moving** to another - submit a new Form 8700-12FL for the new location if you will be handling regulated waste there.
- ☐ (2) Out of Business - Business closed on _____ (Date). Please provide a contact person, mailing address, and phone number where you can be reached after closing.

Contact _____ Phone _____

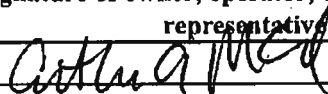
Address _____

City, State, Zip _____

☐ **C. Property Tax Default**☐ **D. Petition for 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.

Signature of owner, operator, or an authorized representative



Print Name and Title

CATHERINE A. MCCORD
VICE PRESIDENT - EHSDate Signed
(mm-dd-yyyy)

2/21/10

If the person who filled in this form is not the Facility Contact or Operator, please complete the information below:

(Name of person completing this form)

(Phone Number)

(E-mail Address)

13. Comments:

USE ILR 000 130 062 AS TRANSPORTER EPA ID#.

EXHIBIT C

Emergency & Evacuation Procedures for Heritage Crystal Clean Jacksonville

Emergency Telephone Numbers	
CHEMTREC	800-424-9300 “1”
Medical Emergencies Shands Jacksonville Hospital	911 (local) 904-244-0411
Police Emergencies City of Jacksonville Police	911 (local) 904-630-0500
Fire Emergencies City of Jacksonville, Fire and Rescue Dept.	911 (local) 904-630-3473
Emergency Coordinator	Tom Sands 904-625-1690
Assistant Emergency Coordinator	Chad Holt 904-718-5024
EHS Dept	(847) 836-5670

It is the responsibility of each employee to know the location of each exit. Identify your primary exit along with secondary exits in the event your primary exit is unavailable.