



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

February 15, 2010

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.

1. 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 occurred, 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.
5. 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
February 15, 2010
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,

A handwritten signature in black ink that reads "Aprilia Graves". The signature is written in a cursive, flowing style.

Aprilia Graves
Engineering Specialist IV
Hazardous Waste Regulation Section

AG

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.

TRANSPORTER: Tropical Shipping & Construction Co Ltd

FACILITY ID NO: FLR000095737

FACILITY ADDRESS: 5 E 11th St
Riviera Beach, FL 33404-6920

INSURANCE CARRIER: STATE GOVERNMENT EXEMPT

INSURANCE POLICY#: 00320000001

EFFECTIVE DATE: February 20, 2010

EXPIRATION DATE: February 20, 2011

APPROVED TRANSFER FACILITY: NO

APPROVAL ISSUED BY: Aprilia Graves DATE: February 15, 2010
Aprilia Graves
Engineering Specialist IV
Hazardous Waste Regulation Section
850/245-8755

Are your services commercially available? Yes

STATE OF FLORIDA

HAZARDOUS WASTE TRANSPORTER STATUS FORM

I. Transporter Identification:
Transporter Name: Tropical Shipping + Construction Co., LTD
Transporter EPA ID: FLR 000 095 737
Location Address: 5 East 11th Street
Riviera Beach, FL 33404
Contact: Harry Lux Telephone: 1-561-840-2930
Mailing Address: 5 East 11th Street
Riviera Beach, FL 33404

II. Insurance Information:
Insurance Company: British Marine
Address: Walsington House 35 Seething Lane
London, England, UK EC3N 4DG
Contact: Agent Telephone: +44 (0) 20 7488 1024
Policy Number: 0032 000 0001
Expiration date: 02/20/2011

III. Waste Information:

EPA Waste Codes for Waste Routinely or Usually Transported:

K048 K049 K050 K051 K052 K169 K170 K171 K172

Comments: _____

IV. Certification:

I certify under penalty of law that the above information is true, correct, and complete to the best of my knowledge.

Harry Lux Safety + Environmental Manager
Print/Type Name Title
[Signature] 1-20-10
Signature Date Signed

V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The forms submitted by the transporter show compliance with the financial responsibility through 02/20/2011.
Date

APPROVED by Theresa A. Sullivan, changes approved by the Certifier by phone 02/15/2010

Signature of Florida Department of Environmental Protection Representative Date Signed



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

Date Received
(for DEP Official Use Only)

EPA ID

FLR000095737

MTS

RCRA Info

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?

JAN 27 2008

BY: BSHW

2. Facility or Business Name

Tropical Shipping & Construction Company, LTD

FEID No.

591114187

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

Name of Operator:

Tropical Shipping & Construction Company, LTD

☐ New Operator

Date became Operator: 06 / 23 / 1962
mm dd yy

Street or P.O. Box:

5 East 11th Street

Phone Number:

800-367-6200

City or Town:

Riviera Beach

State:

FL

Zip Code:

33404

Operator Type: ☒ Private

☐ Federal

☐ Municipal

☐ State

☐ Other

4. Facility Physical Location Information

Physical Street Address:

5 East 11th Street

City or Town:

Riviera Beach

State:

FL

Zip Code:

33404

County:

Palm Beach

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

Latitude: 26 46 18.9N Longitude: 80 03 18.3W Method: GPS
dd mm ss.ssss dd mm ss.ssss Datum:

5. Facility North American Industry Classification System (NAICS) Code(s)

A.

48311

B.

C.

D.

6. Facility or Business Mailing Address

Street Address or P.O. Box:

5 East 11th Street

City or Town:

Riviera Beach

State:

FL

Zip Code:

33404

7. Facility or Business Contact Person

First Name:

Harry

Last Name:

LUX

Title:

Safety & Environmental

Phone Number:

1-561-840-2930

Extension:

-

E-Mail:

hlux@tropical.com

Street or P.O. Box:

5 East 11th Street

City or Town:

Riviera Beach

State:

FL

Zip Code:

33404

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:

Port of Palm Beach

☐ New Owner

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

Street or P.O. Box:

P.O. Box 9935

Phone Number:

1-561-842-4201

City or Town:

Riviera Beach

State:

FL

Zip Code:

33404

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 TT Club Mutual Insurance, LTD / British MarineAddress International House / Walsingham House26 Creechurch Lane, London, UK, EC3A5BA / 35 Seething Lane, London, UK,Contact Telephone Policy Number T0625/2010/001 Expiration date 12-31-2010d. Transportation Mode ☐ Air ☐ Rail ☐ Highway ☒ Water ☐ Other - specify 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.]
- ☐ 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Based on Shipper Requirements
b. Pesticides	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Based on Shipper Requirements
c. Pharmaceuticals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Based on Shipper Requirements
d. Mercury Containing Devices	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Based on Shipper Requirements
e. Mercury Containing Lamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Based on Shipper Requirements
(3) Mercury Recovery and/or Reclamation Facility [Chapter 62-737, F.A.C.]			<input type="checkbox"/>	Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]
(4) Reverse Distributor of UW		<input type="checkbox"/>	Pharmaceuticals <input type="checkbox"/>	Lamps <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

(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.

(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

(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.

FLR000095737

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	K048	2	K049	3	K050	4	K051	5	K052	6	K169	7	K170
8	K171	9	K172	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

Date Signed
(mm-dd-yyyy)

Harry Lux, Safety & Environmental

01/20/2010

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)

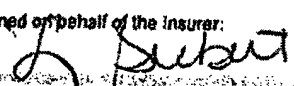
(Phone Number)

(E-mail Address)

13. Comments:

Tropical Shipping & Construction Company, LTD, a foreign flagged vessel operator, is renewing the EPA Hazardous Waste Transporter ID# FLR000095737, and renewing Used Oil Transporter Registration FLR000095737, as a WATER CARRIER only.

Please note: British Marine Insurance coverage handles all ship issues and, the TT Club covers shore operations.

Confirmation of Insurance		Issue Date: 08 January 2010	
Assured Tropical Shipping & Construction Co. Ltd. Tropical Shipping USA, LLC and Birdsall, Inc. 4 East Port Road, Suite 411 Riviera Beach, FL 33404 Assured's Policy of Insurance Number: T0625/2010/001		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. Insurer ("The Association") TT Club Mutual Insurance Ltd. International House, 90 Fenton Street, London EC3A 5BA United Kingdom 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:			
VALID	Risks insured under Cargo Handling Facility Cover		Limit of Liability (each Accident)
	Clause/Paragraph		
X	C1	Liabilities for Cargo and Customer's Ships or other property	USD 5,000,000
	1.1	Cargo	
	1.2	Customer's other Property	
	1.3	Customer's Ships	
	C2	Errors and Omissions Liability	USD 1,000,000 (annual aggregate)
	C3	Third Party Liabilities	USD 5,000,000
	1.1	Loss of Damage to Third Party Property	
	1.2	Death or Bodily Injury of Third Parties other than Employees	
	1.3	Death or Bodily Injury of Employees	
	C4	Fines and Duty	USD 5,000,000
	C5	Costs	USD 5,000,000
	C6	Handling Equipment	USD 5,000,000
	C8	Property: Loss and Damage	USD 5,000,000
	C17	Fire Legal	USD 1,000,000 (annual aggregate)
	C18	Tenants Legal	USD 1,000,000 (annual aggregate)
Confirmation Holder is named as a Supplier Joint Assured on the above referenced Policy of Insurance		Account Year: 1 January 2010 Policy Review Date: 31 December 2010	
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 Signed on behalf of the Insurer: 	

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

Societe 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.: 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)

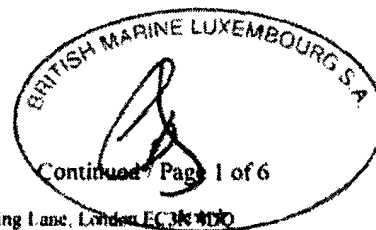
SCHEDULE

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.



British Marine Luxembourg S.A. UK Branch • Registered office: Walsingham House, 35 Seething Lane, London EC3N 4DQ
VAT 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@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)

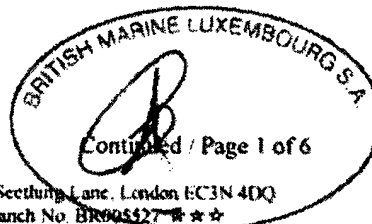
SCHEDULE

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.



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)

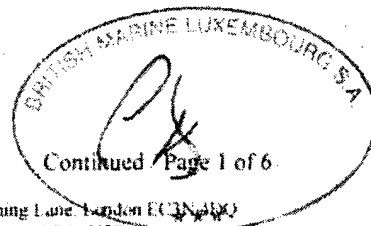
SCHEDULE

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 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
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.: 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)

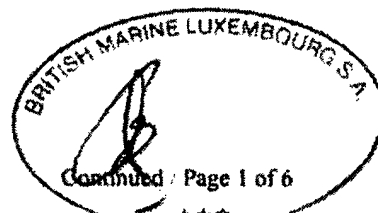
SCHEDULE

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.



British Marine Luxembourg S.A. UK Branch • Registered office: Walsingham House, 35 Seething Lane, London EC3N 4DQ
VAT Registered No. GB 524 723652 • Registered Company No. EC022505 • Branch No. BR005527

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.: 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

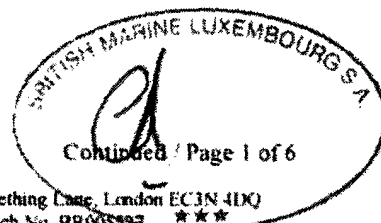
Evidence of Insurance Clause

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 Marine Luxembourg S.A. UK Branch • Registered office: Walsingham House, 35 Seething Lane, London EC3N 4DQ
VAT Registered No. GB 524 723652 • Registered Company No. FC 022505 • Branch No. BR005593 ***



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

Societe 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.: 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)

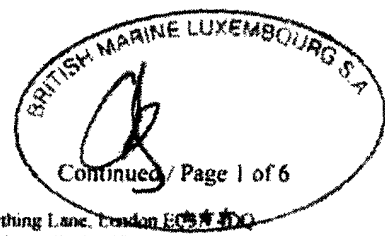
SCHEDULE

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
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.: 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)

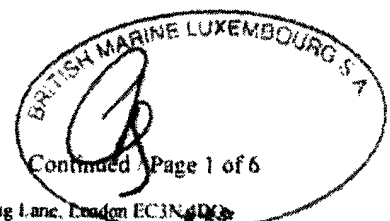
SCHEDULE

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.



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.: 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

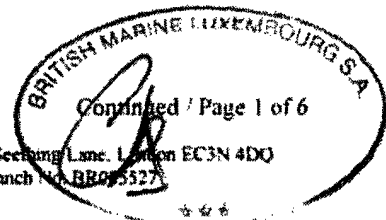
Evidence of Insurance Clause

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.



British Marine Luxembourg S.A. UK Branch • Registered office: Walsingham House, 35 Seething Lane, London EC3N 4DQ
VAT Registered No. GB 524 723652 • Registered Company No. FC023505 • Branch No. BB05527



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.