



THE ENVIRONMENTAL QUALITY COMPANY

EQ FLORIDA, INC. • 7202 E. 8TH AVENUE • TAMPA, FLORIDA 33619 • TEL 800-624-5302 • FAX 813-628-0842

July 22, 2010

Environmental Administrator
Hazardous Waste Regulation Section M.S. 4560
Department of Environmental Protection
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Attn: Anthony Tripp, PhD., P.E.

Re: Permit Renewal
EPA I.D. No.: FLD 981 932 494
Permit No.34875-HO-009

Dear Mr. Tripp:

This letter and information attached is for the Hazardous Waste Operations located at 2002 N. Orient Road, Tampa Florida, EQ Florida, Inc. has completed DEP Form 62-730.900(2)(a), (2)(c), and (2)(d) as per Hazardous Waste facility Application Instructions guidance dated 5/15/1996. EQ requests that the department complete a renewal permit for the existing hazardous Waste Facility at 2002 N. Orient Road. At this time EQ certifies that there has not been any regulatory or facility changes and that we have operated according to all Federal, State, and Local Permits. The facility has not had any releases to the environment that may have the potential to harm human health and the environment.

Please call me at 813-319-3423 if you require further information or have any questions.

Sincerely,

Stuart Stapleton
EHS Manager

Cc: Bob Mulholland (EQFL)
Steve Morgan (SWDEP)
Ron Cope (HEPC)

VERIFY THE AUTHENTICITY OF THIS MULTI-TONE SECURITY DOCUMENT.

CASHIER'S CHECK

000177010

9.9
720

Comerica Bank

DATE

7/12/10

*****10,000 DOLLARS AND 00 CENTS

Dollars

PAY TO THE ORDER OF

F D E P

00169/23401

000177010

000177010

*****10,000.00

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*****10,000.00

Drawer: Comerica Bank

Authorized Signature

MP

Comerica Bank

REMITTER

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0720000961

1852538441

Comerica Bank

CASHIER'S CHECK

Purchaser's Receipt

000177010

9.9
720

DATE

7/12/10

*****10,000 DOLLARS AND 00 CENTS

Dollars

PAY TO THE ORDER OF

F D E P

00169/23401

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000177010

*****10,000.00

Drawer: Comerica Bank

NON NEGOTIABLE

MP

Revision Number	00
Date	7/22/10
Page	1 of 4

APPLICATION FOR A HAZARDOUS WASTE FACILITY PERMIT CERTIFICATION
TO BE COMPLETED BY ALL APPLICANTS

Signature and Certification

Facility Name EQ Florida, Inc.

EPA/DEP I.D. No. FLD981932494

The following certifications must be included with the submittal of an application for a hazardous waste authorization. The certifications must be signed by the owner of a sole proprietorship; or by a general partner of a partnership; or by a principal executive officer of at least the level of vice president of a corporation or business association, or by a duly authorized representative of that person. If the same person is a facility operator, facility owner, and real property owner, that person can cross out and initial the signature blocks under "1. Facility Operator" and "2. Facility Owner," and add the words "Facility Owner and Operator" at the line "Signature of the Land Owner or Authorized Representative."

1. Facility Operator

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 gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, 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. Further, I agree to comply with the provisions of Chapter 403, Florida Statutes, and all rules of the Department of Environmental Protection. It is understood that the permit is only transferable in accordance with Chapter 62-730, F.A.C., and, if granted a permit, the Department of Environmental Protection will be notified prior to the sale or legal transfer of the permitted facility.



Signature of the Operator or Authorized Representative*

Scott Maris, VP Regulatory Affairs
Name and Title (Please type or print)

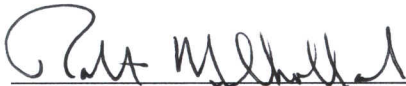
Date 7/22/10

Telephone (734) 329-8000

- **Attach a letter of authorization**

2. Facility Owner

This is to certify that I understand this application is submitted for the purpose of obtaining a permit to construct, operate, or conduct remedial activities at a hazardous waste management facility on the property as described. As owner of the facility, I understand fully that the facility operator and I are jointly responsible for compliance with the provisions if Chapter 403, Florida Statutes, and all rules of the Department of Environmental Protection.



Signature of the Facility Owner or Authorized Representative*

Robert Mulholland, General Manager
Name and Title (Please type or print)

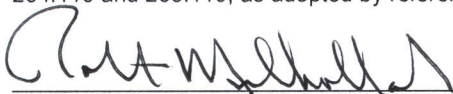
Date 7/22/10

Telephone (813) 623-5302

* Attach a letter of authorization

3. Land Owner

This is to certify that I, as land owner, understand that this application is submitted for the purpose of obtaining a permit for the construction, operation or postclosure of a hazardous waste management facility on the property as described. For hazardous waste facilities that close with waste in place, I further understand that I am responsible for providing the notice in the deed to the property required by 40 CFR 264.119 and 265.119, as adopted by reference in Chapter 62-730, F.A.C.



Signature of the Land Owner or Authorized Representative*

Robert Mulholland, General Manager
Name and Title (Please type or print)

Date 7/22/10

Telephone (813) 623-5302

* Attach a letter of authorization

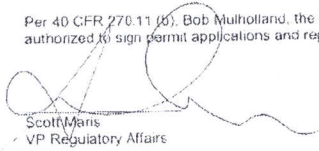


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Letter of Authorization

Per 40 CFR 270.11 (b), Bob Mulholland, the General Manager of EQ Florida, Inc., is authorized to sign permit applications and reports.


Scott Mann
VP Regulatory Affairs

7/22/10

EQ-Florida Orient Rd.

Revision Number	00
Date	7/22/10
Page	3 of 4

4. **Professional Engineer Registered in Florida**

Complete this certification when required to do so by Chapter 471, F.S., or when not exempted by Rule 62-730.220(7), F.A.C.

This is to certify that the engineering features of this hazardous waste management facility have been designed or examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgement, this facility, when properly constructed, maintained and operated, or closed, will comply with all applicable statutes of the State of Florida and rules of the Department of Environmental Protection.

R2/Ex
Signature

Robert W. Fox
Name (please type)

Florida Registration Number 40980

Mailing Address Environmental Resources Management
5909 Hampton Oaks Pkwy, Ste. D
Tampa, FL 33610
city state zip

Date 7/21/10

Telephone (813) 622-8727

(PLEASE AFFIX SEAL)



5. **Professional Geologist Registered in Florida**

Complete this certification when required to do so by Chapter 492, F.S., or when not exempted by Rule 62-730.220(8), F.A.C.

This is to certify that the interpretations of geology at this hazardous waste management facility have been examined by me, and the interpretations conform to sound geological principles. In my professional judgement, this facility, when properly constructed, maintained and operated, or closed, will comply with all applicable statutes of the State of Florida and the rules of the Department of Environmental Protection.

N/A

Signature

N/A

Name (please type)

Florida Registration Number N/A

Mailing Address N/A

street or P.O. Box

N/A

city state zip

Date N/A

Telephone () N/A

(PLEASE AFFIX SEAL)

APPLICATION FOR A HAZARDOUS WASTE PERMIT
PART I – GENERAL
TO BE COMPLETED BY ALL APPLICANTS

Please Type or Print

A. General Information

1. Type of Facility in accordance with Part 270.13(a)
- ☐ DISPOSAL
- ☐ Landfill ☐ Land Treatment ☐ Surface Impoundment
- ☐ Miscellaneous Units Type of Unit _____
- ☐ STORAGE
- ☒ Containers ☐ Tanks ☐ Piles
- ☐ Surface Impoundment ☒ Containment Building
- ☐ Miscellaneous Unit Type of Unit _____
- ☒ TREATMENT
- ☐ Tanks ☐ Piles ☐ Surface Impoundment
- ☐ Incineration ☐ Containment Building
- ☐ Boiler / Industrial Furnace Type of Unit _____
- ☒ Miscellaneous Unit Type of Unit Filter Press
2. Type of application:
- ☐ Temporary Operation Permit (TOP)
- ☐ Construction Permit
- ☒ Operation Permit
- ☐ Construction & Operation Permit
- ☐ Research, Development & Demonstration (RD&D) Permit
- ☐ Postclosure Permit
- ☐ Clean Closure Plan
- ☐ Subpart H Remedial Action Plan
- ☐ Equivalency Demonstration
3. Revision Number: 00
4. Date current operation began, or is expected to begin: July / 01 / 1990
5. Facility Name EQ Florida, Inc.
6. EPA/DEP I.D. No. FLD981932494

7. Facility location or street address 2002 North Orient Road
8. Facility mailing address 7202 East 8th Avenue
Tampa FL 33619
city state zip
9. Contact person Stuart Stapleton Telephone (813) 319-3423
Title EHS Manager
Mailing address 7202 East 8th Avenue
Tampa FL 33619
city state zip
E-mail address stuart.stapleton@eqonline.com
10. Operator's name EQ Florida, Inc Telephone (813) 623-5302
Mailing address 7202 East 8th Avenue
Tampa FL 33619
city state zip
11. Facility owner's name EQ Holding Company Telephone (734) 329-8000
Mailing address 36225 Michigan Avenue
Wayne MI 48184
city state zip
12. Legal structure
☒ Corporation ☐ Non-profit corporation ☐ Partnership ☐ Individual
☐ Local government ☐ State government ☐ Federal government ☐ Other
13. If an individual, partnership, or business is operating under an assumed name, specify the county and state where the name is registered.
County N/A State N/A
14. If the legal structure is a corporation, indicate the state of incorporation.
State of incorporation Michigan
15. If the legal structure is an individual or partnership, list the owners.
Name N/A
Address N/A
Street or P.O. Box city state zip
Name N/A
Address N/A
Street or P.O. Box city state zip

4. Attach a topographic map which shows all the features indicated in the instructions for this part.
5. Is the facility located in a 100-year flood plain? ☐ Yes ☒ No
6. The facility complies with the wellhead protection requirements of Rule 62-730.521, F.A.C. ☒ Yes ☐ No

C. Land Use Information

1. The present zoning of the site is IH Industrial heavy (Attachment 10.3).
2. If a zoning change is needed, what should the new zoning be? N/A.

D. Operating Information

1. Is waste generated on-site? ☒ Yes ☐ No
2. List the NAICS codes (5 to 6 digits) 562211 _____

3. Use the codes and units provided in the instructions to complete the following table.
Specify:
- a. Each process used for treating, storing or disposing of hazardous waste (including design capacities) at the facility, and
- b. The hazardous waste(s) listed or designated in 40 CFR Part 261, including the annual quantities, to be treated, stored, or disposed by each process at the facility.

PROCESS CODE	PROCESS DESIGN CAPACITY AND UNITS OF MEASURE	HAZARDOUS WASTE CODE	ANNUAL QUANTITY OF HAZARDOUS WASTE AND UNITS OF MEASURE
See Att. 2 in Part B App.			

P. Information Requirements Regarding Potential Releases From Solid Waste Management Units

Facility Name EQ Florida, Inc

EPA/DEP I.D. No. FLD981932494

Facility location Tampa FL

city state

1. Are there any of the following solid waste management units (existing or closed) at your facility? A solid waste management unit (SWMU) is a discernable unit at which solid wastes have been placed at any time, irrespective of whether the unit was intended for the management of solid or hazardous waste. Such units include all areas at a facility where solid wastes have been routinely and systematically released, as described in the July 27, 1990 Federal Register (55 FR 30798).

DO NOT INCLUDE HAZARDOUS WASTE UNITS CURRENTLY SHOWN IN YOUR PART B APPLICATION.

landfill	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
surface impoundment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
land farm	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
waste pile	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
incinerator	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
storage tank	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
container storage area	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
injection wells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
wastewater treatment units	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
transfer station	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
waste recycling operations	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
land treatment facility	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
boiler/industrial furnace	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
other (units not listed above)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

2. If there is a "yes" answer to any of the items in 1. above, on separate sheet(s) of paper, provide a description of the wastes that were stored, treated or disposed of in each unit. In particular, focus on whether or not the wastes would be considered hazardous wastes or hazardous constituents under RCRA. (Hazardous wastes are those identified in 40 CFR Part 261. Hazardous constituents are those listed in Appendix VIII of 40 CFR Part 261.) Include any available data on quantities or volumes of wastes disposed of and the dates of disposal. Provide a description of each unit and include capacity, dimensions, and location at the facility. Provide a site plan, if available, and the dates of operation of the unit [40 CFR 270.14(d)(1)].

Revision Number	00
Date	07/22/2010
Page	2 of 2

3. On separate sheet(s) of paper, describe all data available on all prior or current releases of hazardous wastes or constituents to the environment that may have occurred in the past or may still be occurring, for each unit noted in 1. above and also for each hazardous waste unit in your Part B application [40 CFR 270.14(d)(1)].

Provide the following information for each SWMU:

- a. Date of release.
 - b. Specifications of all wastes managed at the unit, to the extent available.
 - c. Quantity or volume of waste released.
 - d. Describe the nature of the release (i.e., spill, overflow, ruptured pipe or tank, etc.)
 - e. Location of the unit on the topographic map provided under 40 CFR 270.14(b)(19).
 - f. Designate the type of unit.
 - g. General dimensions and structural description (supply any available drawings).
 - h. Dates of operation.
4. On separate sheet(s) of paper, provide for each unit all analytical data that may be available which would describe the nature and extent of the environmental contamination that exists as a result of the prior releases described in 3. above. Focus on the concentrations of hazardous wastes or constituents present in contaminated soil or groundwater [40 CFR 270.14(d)(3)].