

2003 BIENNIAL HAZARDOUS WASTE REPORT (BR) SUBMISSION DATA ENTRY/ QUALITY CONTROL CHECKLIST

Site EPA ID		FL 0000596866		Site Name Univar USA, Inc		New Site Contact? Clarence Taylor Phone: 904-783-7902		
		form	recv pages	Submission Paper Disk	Quality Control initial date	QC error pages	Data Entry initial date	Transfer Initial Date
Receipt and Data Entry	SI		X		CM 3/1	NO	CM 3/25	G/L 4/20
	GM	23	X		1 1		1 1	
	WR							
	OI		X			OKay		
	form	page sub pg	Action Item	QC init date	Site Contact date	Corrective Action	data entry initial date	DE Comment
Data entry or Basic edit errors	No OI				RXD 3/25			Email
	SI 1		NAICS	CM 3/25		424690	CM 3/25	
	GM 1		H076	1 1	OK			
	GM 16		W30	1 1	OK			
			Bad Waste Code	BAD TSP	OK			
	GM 18		Bad OI	1 1	Corrected		CM 3/25	
	GM 20		Bad OI	1 1			1 1	
	GM 15,16		H040		OK	Delete		
Rest of Bmt corrected								
Advanced Edit Errors	NAICS		Other Chemical + Allied Products Wholesaler					
	GM 20		no haz waste code check TSD#	CM 5/6	Clarence Taylor			left mess.
	" "			" "				" "
	need to advise about chronic errors throughout report: typos + UDM + unnecessary MM codes for G25.							
	transferred							
				Clarence Taylor + Bob	5/1	advised errors		spoke w/
DATA ENTRY/FILING ASSIGNMENT: Check NAICS								

SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		
1. Reason for Submittal (See instructions on page 9) MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) <input type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report		
2. Site EPA ID Number (page 10)	EPA ID Number: MAR 01 2004 <u>FL0000596866</u> HAZARDOUS WASTE		
3. Site Name (page 10)	Name: <u>UNIVAR USA, INC.</u>		
4. Site Location Information (page 10)	Street Address: <u>155 ROAD SOUTH.</u> City, Town, or Village: <u>JACKSONVILLE</u> State: <u>FLORIDA</u> County Name: <u>DUVAL</u> Zip Code: <u>32254</u>		
5. Site Land Type (page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 10)	A. <u>424690</u> <u>#493 - 42269</u> B. C. D.		
7. Site Mailing Address (page 11)	Street or P. O. Box: <u>155 ELLIS ROAD SOUTH.</u> City, Town, or Village: <u>JACKSONVILLE, FL.</u> State: <u>FLORIDA</u> Country: <u>DUVAL</u> Zip Code: <u>32254</u>		
8. Site Contact Person (page 11)	First Name: <u>CLARENCE</u> MI: Last Name: <u>TAYLOR.</u> Phone Number: <u>(904) 783-7902</u> Extension: Email address: <u>CLARENCE.TAYLOR@UNIVARUSA.COM.</u>		
9. Operator and Legal Owner of the Site (pages 11 and 12)	A. Name of Site's Operator: <u>UNIVAR USA</u> Date Became Operator (mm/dd/yyyy): <u>01-18-2001</u> Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other B. Name of Site's Legal Owner: <u>UNIVAR USA</u> Date Became Owner (mm/dd/yyyy): <u>01-18-2001</u> Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P. O. Box:	6100 CARILLON POINT	
	City, Town, or Village:	KIRKLAND	
	State:	WASHINGTON	
	Country:	USA	Zip Code:

10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 12 to 16.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

Y ☒ N ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

☒ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)
of non-acute hazardous waste; or☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)
of non-acute hazardous waste; or☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)
of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☒ d. United States Importer of Hazardous WasteY ☐ N ☒ e. Mixed Waste (hazardous and radioactive) **HAZARDOUS WASTE**Y ☒ N ☐ 2. Transporter of Hazardous WasteY ☐ N ☒ 3. Treater, Storer, or Disposer of
Hazardous Waste (at your site) Note:
A hazardous waste permit is required for
this activity.Y ☐ N ☒ 4. Recycler of Hazardous Waste (at your
site)Y ☐ N ☒ 5. Exempt Boiler and/or Industrial
Furnace

If "Yes", mark each that applies.

☐ a. Small Quantity On-site Burner
Exemption☐ b. Smelting, Melting, and Refining
Furnace ExemptionY ☐ N ☒ 6. Underground Injection Control

B. Universal Waste Activities

Y ☐ N ☒ 1. Large Quantity Handler of Universal Waste (accumulate
5,000 kg or more) [refer to your State regulations to
determine what is regulated]. Indicate types of universal
waste generated and/or accumulated at your site. If "Yes",
mark all boxes that apply:

	Generate	Accumulate
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

Y ☐ N ☒ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

Y ☐ N ☒ 1. Used Oil Transporter
If "Yes", mark each that applies.☐ a. Transporter
☐ b. Transfer FacilityY ☐ N ☒ 2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.☐ a. Processor
☐ b. Re-refinerY ☐ N ☒ 3. Off-Specification Used Oil BurnerY ☐ N ☒ 4. Used Oil Fuel Marketer

If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of
Off-Specification Used Oil to
Off-Specification Used Oil Burner
☐ b. Marketer Who First Claims the
Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 16.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001	D002	D003	D007	U002	U020	U056
U154	U239					

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 16.)

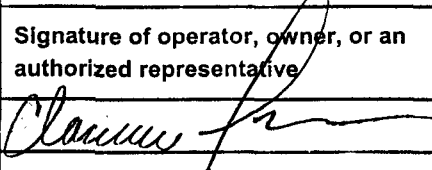
RECEIVED

MAR 01 2004

HAZARDOUS WASTE

13. 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. 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.

(See instructions on page 16.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	CLARENCE TAYLOR UNIVAR USA OPS MGR-JAX FL	02/24/2004

U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENT

RECEIVED

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 Ellis Road S., JACKSONVILLE, FL 32254EPA ID NO: FL101010151916181616FORM
GM

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

MAR 01 2004

Sec. 1 A. Waste description

SODIUM NITRITE, 5.1, UN1500, PG II, HAZARDOUS WASTEB. EPA hazardous waste code 01013

C. State hazardous waste code

D. Source code

01111

Management Method code for Source code G25

E. Form code

W1409

F. Quantity generated in 2003

000000440.0

G. UOM

☒

Density

 ☐ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

- ☐
- 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
-
- ☒
- 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 200301111

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 200301111

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

- ☒
- 1 Yes (CONTINUE TO BOX B)
- ☐
- 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND0000772186C. Off-site Management Method
code Shipped to01076

D. Total quantity shipped in 2003

000000440.0

Site 2

B. EPA ID No. of facility to which waste
was shipped C. Off-site Management Method
code Shipped to01111

D. Total quantity shipped in 2003

Site 3

B. EPA ID No. of facility to which waste
was shipped C. Off-site Management Method
code Shipped to01111

D. Total quantity shipped in 2003

 Comments: OUT OF DATE FCC-FOOD GRADE MATERIAL.

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

U.S. ENVIRONMENTAL
PROTECTION AGENCYSITE NAME: UNIVAR USA

2003 Hazardous Waste Report

155 Ellis Road S., Jacksonville, FL 32254FORM
GMWASTE GENERATION
AND MANAGEMENTEPA ID NO: FL101010151968166

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

PHOSPHORIC ACID, 6, UN1805, PG IIIB. EPA hazardous waste code D002

C. State hazardous waste code

D. Source code

G111

Management Method code for Source code G25

E. Form code

W1119

F. Quantity generated in 2003

000000440.0

G. UOM

☒ lb

Density

1.610☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

- ☐
- 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
-
- ☒
- 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H111000000000.0

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H111000000000.0

Sec. 3 A: Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

- ☒
- 1 Yes (CONTINUE TO BOX B)
- ☐
- 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 0000 772 186C. Off-site Management Method
code Shipped toH1121

D. Total quantity shipped in 2003

000000440.0

Site 2

B. EPA ID No. of facility to which waste
was shipped000000000.0C. Off-site Management Method
code Shipped toH111

D. Total quantity shipped in 2003

000000000.0

Site 3

B. EPA ID No. of facility to which waste
was shipped000000000.0C. Off-site Management Method
code Shipped toH111

D. Total quantity shipped in 2003

000000000.0

Comments:

OFF SPEC MATERIAL

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

U.S. ENVIRONMENTAL
PROTECTION AGENCYSITE NAME: UNIVAR LISA

2003 Hazardous Waste Report

155 Ellis Road S., Jacksonville, FL 32254FORM
GMWASTE GENERATION
AND MANAGEMENTEPA ID NO: FL101010151916181616

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description BLEACH + BLEACH LINE FLUSH.WASTE HYPOCHLORITE SOLUTIONS, 8, UN1791, PG IIB. EPA hazardous waste code D002

C. State hazardous waste code

D. Source code

G113

E. Form code

W1110

F. Quantity generated in 2003

10101012840.0

G. UOM

2

Management Method code for Source code G25

Density

8.00☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H111

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H111

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND0000772186C. Off-site Management Method
code Shipped toH1121

D. Total quantity shipped in 2003

12840.0

Site 2

B. EPA ID No. of facility to which waste
was shipped1111111111111111C. Off-site Management Method
code Shipped toH1111

D. Total quantity shipped in 2003

1111111111111111

Site 3

B. EPA ID No. of facility to which waste
was shipped1111111111111111C. Off-site Management Method
code Shipped toH1111

D. Total quantity shipped in 2003

1111111111111111

Comments:

OFF SPEC BLEACH - LINE FLUSH - TANK RINSE

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: UNIVAR USA155 Ellis Road S., Jacksonville, FL 32254EPA ID NO: FL101010151916181616FORM
GMU.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1	A. Waste description <u>LINE FLUSH</u> <u>MURIATIC ACID - HYDROCHLORIC ACID, 8, UN1789, PGII</u>		
B. EPA hazardous waste code <u>D1002</u>		C. State hazardous waste code	
D. Source code <u>G109</u> Management Method code for Source code G25		E. Form code <u>W1105</u>	F. Quantity generated in 2003 <u>4920.0</u>
G. UOM <u>B</u> Density <u>8.00</u> <input checked="" type="checkbox"/> lbs/gal <input type="checkbox"/> sg			

Sec. 2	Was any of this waste managed on site? (pages 17 to 25)			
<input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. 3)				
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2		
On-site Management Method code	Quantity treated, disposed or recycled on site in 2003	On-site Management Method code	Quantity treated, disposed, or recycled on site in 2003	
<u>H</u>	<u>1105</u>	<u>H</u>	<u>1105</u>	

Sec. 3	A: Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)		
<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility to which waste was shipped <u>TND 0000 772 186</u>	C. Off-site Management Method code Shipped to <u>H1121</u>	D. Total quantity shipped in 2003 <u>4920.0</u>
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2003
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2003

Comments: LINE FLUSH FROM DRUM FILL OPERATION

U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENTBEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 Ellis Road S., JACKSONVILLE, FL 32254EPA ID NO: FL101010159618166FORM
GM

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1	A. Waste description <u>LINE FLUSH - TANK CLEANING.</u> <u>SULFURIC ACID, 8, UN1830, PG II</u>		
B. EPA hazardous waste code <u>D002</u>		C. State hazardous waste code	
D. Source code <u>G113</u> Management Method code for Source code G25		E. Form code <u>W1119</u>	F. Quantity generated in 2003 <u>000004528.0</u>
G. UOM <u>P</u> Density <u>8.00</u> <input checked="" type="checkbox"/> lbs/gal <input type="checkbox"/> sg			

Sec. 2	Was any of this waste managed on site? (pages 17 to 25)	
<input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. 3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2
On-site Management Method code	Quantity treated, disposed or recycled on site in 2003	On-site Management Method code
<u>H111</u>	<u>0000000000</u>	<u>H111</u>

Sec. 3	A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)		
<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility to which waste was shipped <u>TND 0000772186</u>	C. Off-site Management Method code Shipped to <u>H1121</u>	D. Total quantity shipped in 2003 <u>000004528.0</u>
Site 2	B. EPA ID No. of facility to which waste was shipped <u>0000000000</u>	C. Off-site Management Method code Shipped to <u>H111</u>	D. Total quantity shipped in 2003 <u>0000000000</u>
Site 3	B. EPA ID No. of facility to which waste was shipped <u>0000000000</u>	C. Off-site Management Method code Shipped to <u>H111</u>	D. Total quantity shipped in 2003 <u>0000000000</u>

Comments: LINE FLUSH - TANK CLEANING

WASTE GENERATION AND MANAGEMENT

EPA ID NO: FL0000596866

FORM
GM

OFF SPEC MATERIAL

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 Ellis Road S., JACKSONVILLE, FL 32254EPA ID NO: FL0000596866U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description LINE FLUSH.FLAMMABLE LIQUIDS, N.O.S., XYLENE, ACETONEB. EPA hazardous waste code D001 4239U002

C. State hazardous waste code

D. Source code

G111

Management Method code for Source code G25

H

E. Form code

W203

F. Quantity generated in 2003

000002030.0G. UOM ☒

Density

8.00☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeHQuantity treated, disposed or
recycled on site in 200300000000.0

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeHQuantity treated, disposed, or
recycled on site in 20030

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 000 772 186C. Off-site Management Method
code Shipped toH 040

D. Total quantity shipped in 2003

000002030.0

Site 2

B. EPA ID No. of facility to which waste
was shipped00000000.0C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

00000000.0

Site 3

B. EPA ID No. of facility to which waste
was shipped00000000.0C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

00000000.0

Comments:

LINE FLUSH - FROM DRUM FILLING LINE

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 ELLIS ROAD S., JACKSONVILLE, FL 32254EPA ID NO: FL0000596866FORM
GMU.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

MISC. HAZARDOUS POWDERSB. EPA hazardous waste code D002

C. State hazardous waste code

D. Source code

G111

Management Method code for Source code G25

E. Form code

W319

F. Quantity generated in 2003

000005500.0G. UOM lb

Density

 ☐ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeH Quantity treated, disposed or
recycled on site in 2003

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeH Quantity treated, disposed, or
recycled on site in 2003

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☐ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)Site 1 B. EPA ID No. of facility to which waste
was shippedTND 000 772 186C. Off-site Management Method
code Shipped toH 112

D. Total quantity shipped in 2003

000005500.0Site 2 B. EPA ID No. of facility to which waste
was shipped C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

 Site 3 B. EPA ID No. of facility to which waste
was shipped C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Comments:

BAG MATERIAL - DAMAGED IN WARE OR TRANSIT.
HIGH PURITY OR FOOD GRADE MATERIAL. DAMAGED BAGS
COULD NOT BE SOLD. OXALIC ACID, SULFAMIC ACID, CITRIC
ACID

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 Ellis Road S., Jacksonville, FL 32254EPA ID NO: FL00000596866FORM
GM

2003 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

Isopropyl Alcohol, 3, UN1219, PGIIB. EPA hazardous waste code 0001

C. State hazardous waste code

D. Source code

0113

Management Method code for Source code G25

E. Form code

W203

F. Quantity generated in 2003

000000800.0

G. UOM

P

Density

8.00☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 20030113000000800.0

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 20030113000000800.0

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 0000772186C. Off-site Management Method
code Shipped to040

D. Total quantity shipped in 2003

000000800.0

Site 2

B. EPA ID No. of facility to which waste
was shipped0000000000C. Off-site Management Method
code Shipped to0000

D. Total quantity shipped in 2003

0000000000

Site 3

B. EPA ID No. of facility to which waste
was shipped0000000000C. Off-site Management Method
code Shipped to0000

D. Total quantity shipped in 2003

0000000000

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: UNIVAR USA155 Ellis Road S., Jacksonville, FL 32254EPA ID NO: FL0000596866U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

Sodium Hydroxide, Solution, 8, UN1824, PGIIB. EPA hazardous waste code 0002

C. State hazardous waste code

D. Source code

G113

Management Method code for Source code G25

E. Form code

W110

F. Quantity generated in 2003

000053894.0

G. UOM

lb

Density

8.00☐ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 000 772 186C. Off-site Management Method
code Shipped toH121

D. Total quantity shipped in 2003

000053894.0

Site 2

B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Site 3

B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: UNIVAR USA155 Ellis Road S., Jacksonville, FL 32254EPA ID NO: FL00005916866**FORM
GM**

2003 Hazardous Waste Report

**WASTE GENERATION
AND MANAGEMENT**

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste descriptionWASTE HFS - WASTE FLUOROSILICIC ACID 25-27%, 8, UN1770, P6.11B. EPA hazardous waste code D002

C. State hazardous waste code

D. Source code

G113

Management Method code for Source code G25

E. Form code

W105

F. Quantity generated in 2003

0000000440.0

G. UOM

☒ P

Density

8.00☒ lbs/gal ☐ sg**Sec. 2 Was any of this waste managed on site? (pages**☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)**ON-SITE PROCESS SYSTEM 1**On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H**ON-SITE PROCESS SYSTEM 2**On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H**Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)**☐ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)Site 1 B. EPA ID No. of facility to which waste
was shippedTIND 000 772 186C. Off-site Management Method
code Shipped toH121

D. Total quantity shipped in 2003

0000000440.0Site 2 B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Site 3 B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: UNIVAR USA155 ELLI Road S., JACKSONVILLE, FL 32254EPA ID NO: FL00000596866U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

CAUSTIC POTASH- WASTE POTASSIUM HYDROXIDE SOLUTION, 8, UN1814, PGIIB. EPA hazardous waste code D002

C. State hazardous waste code

D. Source code

G13

Management Method code for Source code G25

E. Form code

W110

F. Quantity generated in 2003

000000880.0

G. UOM

L

Density

08.00☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H000000000.0

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H000000000.0

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 000 772 186C. Off-site Management Method
code Shipped toH121

D. Total quantity shipped in 2003

000000880.0

Site 2

B. EPA ID No. of facility to which waste
was shipped000000000.0C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

000000000.0

Site 3

B. EPA ID No. of facility to which waste
was shipped000000000.0C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

000000000.0

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 ELLIS ROAD S., JACKSONVILLE, FL 32254EPA ID NO: FL0000596866U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

ALUMINUM SULFATE - WASTE CORROSIVE LIQUID, N.O.S., ACIDIC, INORGANIC, 8 UN3264, PG IIIB. EPA hazardous waste code D002

C. State hazardous waste code

D. Source code

G111

Management Method code for Source code G25

E. Form code

W105

F. Quantity generated in 2003

000001320.0

G. UOM

☒ P

Density

8.00☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 000 772 186C. Off-site Management Method
code Shipped toH121

D. Total quantity shipped in 2003

000001320.0

Site 2

B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Site 3

B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 ELLIS ROAD S., JACKSONVILLE, FL 32254EPA ID NO: FL0000596866U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

GLYCOL EB- WASTE FLAMMABLE LIQUID N.O.S., UN1993, 3,B. EPA hazardous waste code D001

C. State hazardous waste code

D. Source code

G13

Management Method code for Source code G25

E. Form code

W203

F. Quantity generated in 2003

000001125.0

G. UOM

P

Density

8.00☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeHQuantity treated, disposed or
recycled on site in 20030000000000

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeHQuantity treated, disposed, or
recycled on site in 20030000000000

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 000 772 186C. Off-site Management Method
code Shipped toH061

D. Total quantity shipped in 2003

000001125.0

Site 2

B. EPA ID No. of facility to which waste
was shipped0000000000C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

0000000000

Site 3

B. EPA ID No. of facility to which waste
was shipped0000000000C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

0000000000

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 ELLIS ROAD S., JACKSONVILLE, FL 32254EPA ID NO: FL000059168166U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1	A. Waste description <u>TANK RINSE - HAZARDOUS WASTE LIQUID, N.O.S., (METHANOL), 9, NA3082</u> PG III		
B. EPA hazardous waste code <u>U1154</u>		C. State hazardous waste code	
D. Source code <u>G114</u> Management Method code for Source code G25		E. Form code <u>W203</u>	F. Quantity generated in 2003 <u>0002001600.0</u>
		G. UOM <u>P</u> Density <u>0.8133</u> <input checked="" type="checkbox"/> lbs/gal <input type="checkbox"/> sg	

Sec. 2	Was any of this waste managed on site? (pages 17 to 25)	
<input type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. 3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2
On-site Management Method code	Quantity treated, disposed or recycled on site in 2003	On-site Management Method code
<u>H1111</u>	<u>0000000000</u>	<u>H1111</u>

Sec. 3	A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)		
<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)			
Site 1	B. EPA ID No. of facility to which waste was shipped <u>TIND00007721126</u>	C. Off-site Management Method code Shipped to <u>H1040</u>	D. Total quantity shipped in 2003 <u>0002001600.0</u>
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2003
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code Shipped to	D. Total quantity shipped in 2003

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 Ellis Road S, Jacksonville, FL 32254EPA ID NO: FL0000596866U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

FORM
GMWASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

Ammonium PERSulfate, 51, UN1444, P&IIIB. EPA hazardous waste code 0003

C. State hazardous waste code

D. Source code

011

E. Form code

W319

F. Quantity generated in 2003

6463.0

G. UOM

P

Management Method code for Source code G25

H040

Density

 ☐ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeHQuantity treated, disposed or
recycled on site in 2003

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeHQuantity treated, disposed, or
recycled on site in 2003

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTND 0000772126C. Off-site Management Method
code Shipped toH040

D. Total quantity shipped in 2003

6463.0

Site 2

B. EPA ID No. of facility to which waste
was shipped C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Site 3

B. EPA ID No. of facility to which waste
was shipped C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: UNIVAR USA155 Ellis Road S., Jacksonville, FL 32254EPA ID NO: FL00005916866**FORM
GM**

2003 Hazardous Waste Report

**WASTE GENERATION
AND MANAGEMENT**

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste descriptionRinse Water - Sodium Hydroxide Solution, 8, UN1824B. EPA hazardous waste code 0002

C. State hazardous waste code

D. Source code

G13

E. Form code

W110

F. Quantity generated in 2003

000196812.0

G. UOM

P

Management Method code for Source code G25

H111

Density

1.0 0.0lbs/gal ☐ sg**Sec. 2 Was any of this waste managed on site? (pages**☐ 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)☒ 2 No (SKIP TO SEC. 3)**ON-SITE PROCESS SYSTEM 1**On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H**ON-SITE PROCESS SYSTEM 2**On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H**Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)**☒ 1 Yes (CONTINUE TO BOX B) ☐ 2 No (FORM IS COMPLETE)Site 1 B. EPA ID No. of facility to which waste
was shippedIND 073217013C. Off-site Management Method
code Shipped toH121

D. Total quantity shipped in 2003

000196812.0Site 2 B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Site 3 B. EPA ID No. of facility to which waste
was shippedC. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR USA155 Ellis Road S., Jacksonville, FL 32254EPA ID NO: FL0000596866FORM
GM

2003 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENT

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

HEXANE - WASTE FLAMMABLE LIQUIDS, N.O.S., (HEXANE) 3, UN1993, P6IIB. EPA hazardous waste code 0001 0036

C. State hazardous waste code

D. Source code

G111

Management Method code for Source code G25

H1061

E. Form code

W203

F. Quantity generated in 2003

000000320.0

G. UOM

lb

Density

8.00☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

- ☐
- 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
-
- ☒
- 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeH1111Quantity treated, disposed or
recycled on site in 2003000000000.0

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeH1111Quantity treated, disposed, or
recycled on site in 2003000000000.0

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

- ☐
- 1 Yes (CONTINUE TO BOX B)
- ☐
- 2 No (FORM IS COMPLETE)

Site 1 B. EPA ID No. of facility to which waste
was shippedTND 0000772186C. Off-site Management Method
code Shipped toH1061

D. Total quantity shipped in 2003

420.0Site 2 B. EPA ID No. of facility to which waste
was shipped000000000.0C. Off-site Management Method
code Shipped toH1111

D. Total quantity shipped in 2003

000000000.0Site 3 B. EPA ID No. of facility to which waste
was shipped000000000.0C. Off-site Management Method
code Shipped toH1111

D. Total quantity shipped in 2003

000000000.0

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

U.S. ENVIRONMENTAL
PROTECTION AGENCYSITE NAME: UNIVAR USA

2003 Hazardous Waste Report

155 Ellis Road S., Jacksonville, FL 32254FORM
GMWASTE GENERATION
AND MANAGEMENTEPA ID NO: FL0000591681616

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

VERSENEK 80 - WASTE CORROSIVE LIQUID (SODIUM HYDROXIDE) 8, UN1824B. EPA hazardous waste code
 C. State hazardous waste code
 D. Source code
G132
Management Method code for Source code G25E. Form code
W1110F. Quantity generated in 2003
 440.0G. UOM P
Density
8.00
☒ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

- ☐
- 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
-
- ☒
- 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management Method code
H111Quantity treated, disposed or recycled on site in 2003

ON-SITE PROCESS SYSTEM 2

On-site Management Method code
H111Quantity treated, disposed, or recycled on site in 2003

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

- ☐
- 1 Yes (CONTINUE TO BOX B)
- ☐
- 2 No (FORM IS COMPLETE)

Site 1 B. EPA ID No. of facility to which waste was shipped
TIND0000772104C. Off-site Management Method code Shipped to
H1121D. Total quantity shipped in 2003
000000440.0Site 2 B. EPA ID No. of facility to which waste was shipped
 C. Off-site Management Method code Shipped to
H111D. Total quantity shipped in 2003
 Site 3 B. EPA ID No. of facility to which waste was shipped
 C. Off-site Management Method code Shipped to
H111D. Total quantity shipped in 2003

Comments:

Non-reg.?Data entered by
Jeff M. Hal. Wst Lake
0002. (?) (BJ)

WASTE GENERATION AND MANAGEMENT

FORM
GM

Page 21 of 22

U.S. ENVIRONMENTAL
PROTECTION AGENCY

2003 Hazardous Waste Report

WASTE GENERATION
AND MANAGEMENTBEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:SITE NAME: UNIVAR LISA155 Ellis Road S., Jacksonville, FL 32254EPA ID NO: FL10 01010 15916 81616FORM
GM

Instructions: Please see the detailed instructions on pages 17 to 25 of this booklet before completing this form.

Sec. 1 A. Waste description

Sulfuric Acid / Soda AshB. EPA hazardous waste code 01012

C. State hazardous waste code

D. Source code

G113

Management Method code for Source code G25

E. Form code

W519

F. Quantity generated in 2003

000002000.0G. UOM ☒

Density

8.00☐ lbs/gal ☐ sg

Sec. 2 Was any of this waste managed on site? (pages

- ☐
- 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1)
-
- ☒
- 2 No (SKIP TO SEC. 3)

ON-SITE PROCESS SYSTEM 1

On-site Management
Method codeQuantity treated, disposed or
recycled on site in 2003H0000000000

ON-SITE PROCESS SYSTEM 2

On-site Management
Method codeQuantity treated, disposed, or
recycled on site in 2003H0000000000

Sec. 3 A. Was any of this waste shipped off site in 2003 for treatment, disposal, or recycling? (pages 25 and 26)

- ☒
- 1 Yes (CONTINUE TO BOX B)
- ☐
- 2 No (FORM IS COMPLETE)

Site 1

B. EPA ID No. of facility to which waste
was shippedTIND 01010 7721816C. Off-site Management Method
code Shipped toH1121

D. Total quantity shipped in 2003

000002000.0

Site 2

B. EPA ID No. of facility to which waste
was shipped0000000000C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

0000000000

Site 3

B. EPA ID No. of facility to which waste
was shipped0000000000C. Off-site Management Method
code Shipped toH

D. Total quantity shipped in 2003

0000000000Comments: CLEANUP OF CONTAINMENT AREA DURING & AFTER TANK
CLEANING.

WASTE GENERATION AND MANAGEMENT

EPA ID NO: F L 0 0 0 0 5 9 6 8 6 6

FORM
GM

Page 22 of 23

RECEIVED

MAR 01 2004

HAZARDOUS WASTE

February 24, 2004

To: Florida Department Of Environmental Protection
Hazardous Management Section MS-4555
2600 Blair Stone Road
Tallahassee, Florida 32399-2400
Attn: Jack Griffith
Phone: 904-245-8748

From: UNIVAR USA INC
155 Ellis Road South
Jacksonville, FL 32254
Attn: Clarence Taylor
Phone: 904-783-7902

Re: Biennial Hazardous Waste Report calendar year 2003

Dear: Jack Griffith

As required this report is being collected under the authority of Sections 3002 and 3004 of the Resource Conservation and Recovery Act of 1976 (RCRA) as amended by the Hazardous and Solid Waste Amendments of 1984 (HSWA), Section 403.721 of the Florida Statutes (F.S.), and by Sections 62-730.160 and 62-730.180 of the Florida Administrative Code (F.A.C.).

Attached are the following forms:

RCRC Subtitle C Site Identification Forms pages 1 thru 3
Form GM EPA Form 8700-13 A/B (Revised 10/2003 Pages 1 thru 22)

If I can be of any further assistance please call Clarence Taylor Branch Operations Manager at Univar USA, Inc at 904-783-7902

Sincerely,



Clarence Taylor
Branch Operations Manager
Univar USA, Inc.
Jacksonville, FL

Cc: Regional / Regulatory Manager – Southeast Region, Greensboro, SC
Operations Support, Kirkland WA

March 22, 2004

To: Florida Department Of Environmental Protection
Hazardous Management Section MS-4555
2600 Blair Stone Road
Tallahassee, Florida 32399-2400
Attn: Jack Griffith
Phone: 904-245-8748

From: UNIVAR USA INC
155 Ellis Road South
Jacksonville, FL 32254
Attn: Clarence Taylor
Phone: 904-783-7902

Re: Biennial Hazardous Waste Report calendar year 2003

Dear: Jack Griffith

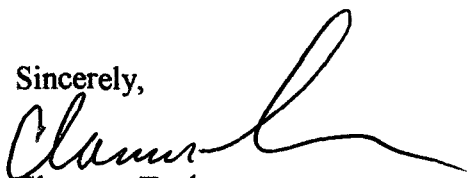
As required this report is being collected under the authority of Sections 3002 and 3004 of the Resource Conservation and Recovery Act of 1976 (RCRA) as amended by the Hazardous and Solid Waste Amendments of 1984 (HSWA), Section 403.721 of the Florida Statutes (F.S.), and by Sections 62-730.160 and 62-730.180 of the Florida Administrative Code (F.A.C.).

Attached are the following forms:

OI (OFF SITE IDENTIFICATION-HANDLER AND TRANSPORTERS)

If I can be of any further assistance please call Clarence Taylor Branch Operations Manager at Univar USA, Inc at 904-783-7902

Sincerely,


Clarence Taylor
Branch Operations Manager
Univar USA, Inc.
Jacksonville, FL

RECEIVED

MAR 22 2004

HAZARDOUS WASTE

Cc: Regional / Regulatory Manager – Southeast Region, Greensboro, SC
Operations Support, Kirkland WA

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL
OR ENTER:U.S. ENVIRONMENTAL
PROTECTION AGENCYSITE NAME: UNIVAR USA INC.155 ELLIS ROAD SOUTH, JACKSONVILLE, FL 32254EPA ID NO: FL0000596866

FORM

OI

2003 Hazardous Waste Report

OFF-SITE
IDENTIFICATION

Instructions: Please read the detailed instructions on the reverse side before completing this form.

Site 1	A. EPA ID No. of off-site installation or transporter <u>TND0000772186</u>	B. Name of off-site installation or transporter <u>POLLUTION CONTROL MILLINGTON</u>
C. Handler type (MARK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR facility		D. Address of off-site installation Street <u>5485 TAYLOR DRIVE</u> City <u>MILLINGTON</u> State <u>TN</u> Zip <u>381053</u>

Site 2	A. EPA ID No. of off-site installation or transporter <u>IND0932190112</u>	B. Name of off-site installation or transporter <u>HERITAGE ENVIRONMENTAL SVC. LLC</u>
C. Handler type (MARK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR facility		D. Address of off-site installation Street <u>7901 W. MORRIS ST.</u> City <u>INDIANAPOLIS</u> State <u>IN</u> Zip <u>462311</u>

Site 3	A. EPA ID No. of off-site installation or transporter <u>MID0000724831</u>	B. Name of off-site installation or transporter <u>EQ-MICHIGAN DISPOSAL WASTE TREATMENT</u>
C. Handler type (MARK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR facility		D. Address of off-site installation Street <u>49350 N I-94 SVC DRIVE</u> City <u>BELLEVILLE</u> State <u>ME</u> Zip <u>481111</u>

Site 4	A. EPA ID No. of off-site installation or transporter <u>NJD054126164</u>	B. Name of off-site installation or transporter <u>FREEHOLD CARTAGE, INC.</u>
C. Handler type (MARK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR facility		D. Address of off-site installation Street <u>175 BARTON MUNICIPAL AIRPORT</u> City <u>BARTON</u> State <u>FL</u> Zip <u>33830</u>

Comments:

RECEIVED

MAR 23 2004

HAZARDOUS WASTE

February 24, 2004

To: Florida Department Of Environmental Protection
Hazardous Management Section MS-4555
2600 Blair Stone Road
Tallahassee, Florida 32399-2400
Attn: Jack Griffith
Phone: 904-245-8748

From: UNIVAR USA INC
155 Ellis Road South
Jacksonville, FL 32254
Attn: Clarence Taylor
Phone: 904-783-7902

Re: Biennial Hazardous Waste Report calendar year 2003

Dear: Jack Griffith


As required this report is being collected under the authority of Sections 3002 and 3004 of the Resource Conservation and Recovery Act of 1976 (RCRA) as amended by the Hazardous and Solid Waste Amendments of 1984 (HSWA), Section 403.721 of the Florida Statutes (F.S.), and by Sections 62-730.160 and 62-730.180 of the Florida Administrative Code (F.A.C.).

Attached are the following forms:

RCRC Subtitle C Site Identification Forms pages 1 thru 3
Form GM EPA Form 8700-13 A/B (Revised 10/2003 Pages 1 thru 22

If I can be of any further assistance please call Clarence Taylor Branch Operations Manager at Univar USA, Inc at 904-783-7902

Sincerely,


Clarence Taylor
Branch Operations Manager
Univar USA, Inc.
Jacksonville, FL

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MAR 23 2004

HAZARDOUS WASTE

Cc: Regional / Regulatory Manager – Southeast Region, Greensboro, SC
Operations Support, Kirkland WA

Clarence Taylor

To: McGriff, Jeff A.

Subject: RE: 2003 BIENNIAL HAZARDOUS WASTE REPORT

-----Original Message-----

From: McGriff, Jeff A. [mailto:Jeff.A.McGriff@dep.state.fl.us]

Sent: Friday, March 19, 2004 11:14 AM

To: Clarence Taylor

Cc: Griffith, John

Subject: 2003 BIENNIAL HAZARDOUS WASTE REPORT

UNIVAR USA, INC.
ATTN: CLARENCE TAYLOR

THANK YOU FOR YOUR SUBMITTAL OF THE 2003 BRS REPORT.

IN ORDER TO COMPLETE YOUR REPORT, WE NEED THE FORM OI (OFF-SITE IDENTIFICATION—HANDLERS AND TRANSPORTERS), FILLED OUT AND SENT TO US. YOU MAY MAIL IT TO THE SAME ADDRESS AS THE ORIGINAL, C/O JACK GRIFFITH.

THANKS AND HAVE A GREAT WEEKEND.

JEFF MCGRIFF
2003 BIENNIAL HAZARDOUS WASTE REPORT
FL DEPT OF ENVIRONMENTAL PROTECTION
850.245.8752
EMAIL: MCGRIFF_JA@DEP.STATE.FL.US

RECEIVED

MAR 23 2004

HAZARDOUS WASTE

3/22/2004