



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

September 02, 2010

Kurt Fogleman
Perma - Fix of Orlando Inc
10100 Rocket Blvd
Orlando, FL 32824-8565

Re: Florida Hazardous Waste Transporter Approval

Dear Kurt Fogleman:

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.

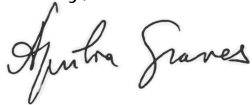
Kurt Fogleman
September 02, 2010
Page Two

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



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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: Perma - Fix of Orlando Inc

FACILITY ID NO: FLD980559728

FACILITY ADDRESS: 10100 Rocket Blvd
Orlando, FL 32824-8565

INSURANCE CARRIER: CHARITIS SPECIALTY INSURANCE

INSURANCE POLICY#: EG3112895

EFFECTIVE DATE: September 01, 2010

EXPIRATION DATE: September 01, 2011

APPROVED TRANSFER FACILITY: YES

APPROVAL ISSUED BY: Aprilia Graves DATE: September 02, 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

1. Transporter Identification:

Transporter Name: Perma-Fix of Orlando

Transporter EPA ID: FLD 980 559 728

Location Address: 10100 Rocket Blvd.

Orlando, FL 32824

Contact: Kurt Fogleman Telephone: (352) 395-1356

Mailing Address: 1940 NW 67th Place

Gainesville, FL 32653

II. Insurance Information:

Insurance Company Chartis Specialty Insurance Company

Address 175 Water Street

New York, NY 10038

Contact: Kerma Parrett Telephone: (404) 531-5476

Policy Number: EG 311-28-95

Expiration date: 09/01/2011

III. Waste Information:

EPA Waste Codes for Waste Routinely or Usually Transported:

D001 - D011

F001 - F006

Comments: _____

IV. Certification:

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

Kurt Fogleman

Environmental Health and Safety Manager

Print/Type Name

Title

Signature

8/31/2010

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 9/1/2011.

Date

APPROVED by Tiffaney A. Noland, changes approved by the Certifier by phone 9/2/2010

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) 245-8772Date Received
(for FDEP Official Use Only)

EPA ID		F L D 9 8 0 5 5 9 7 2 8										MTS		RCRAInfo	
1. Reason for Submittal		Mark 'X' in correct box:		<input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input checked="" type="checkbox"/> To provide subsequent notification (to update status and facility identification information). <input type="checkbox"/> Is this the final notification (see instructions) for the facility?											
2. Facility or Business Name		Perma-Fix of Orlando, Inc.										FEID No.		3 1 1 0 1 7 4 6 6	
3. Facility Operator (List additional Operators in the comments section).		Name of Operator: Perma-Fix of Orlando, Inc.										<input type="checkbox"/> New Operator		Date became Operator: ____/____/____ mm dd yy	
		Street or P.O. Box: 10100 Rocket Blvd.										Phone Number:		(407) 859-4441	
		City or Town: Orlando										State: FL		Zip Code: 32824	
		Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> Federal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other _____													
4. Facility Physical Location Information		Physical Street Address: 10100 Rocket Blvd.													
		City or Town: Orlando										State: FL		Zip Code:	
		County: Orange										If available, please attach a map or sketch of the facility boundaries.			
		Latitude: 2 8 2 4 5 8 6 Longitude: 8 1 2 3 1 5 9 Method: dd mm ss.ssss dd mm ss.ssss Datum:													
5. Facility North American Industry Classification System (NAICS) Code(s)		A. 562111										B. 562112			
		C.										D.			
6. Facility or Business Mailing Address		Street Address or P.O. Box: 10100 Rocket Blvd.													
		City or Town: Orlando										State: FL		Zip Code: 32824	
7. Facility or Business Contact Person		First Name: Kurt										Last Name: Fogleman		Title: EH&S Manager	
		Phone Number: (352) 395-1356										Extension:		E-Mail: kfogleman@perma-fix.com	
		Street or P.O. Box: 1940 NW 67th Place													
		City or Town: Gainesville										State: FL		Zip Code: 32653	
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: Perma-Fix of Orlando, Inc.										<input type="checkbox"/> New Owner		Date became Owner: ____/____/____ mm dd yy	
		Street or P.O. Box: 10100 Rocket Blvd.										Phone Number:		(407) 859-4441	
		City or Town: Orlando										State: FL		Zip Code: 32824	
		Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> Federal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> 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 Chartis Specialty Insurance CompanyAddress 175 Water Street, New York, NY 10038Contact Kerma Parrett Telephone (404) 531-5476Policy Number EG 311-28-95 Expiration date 9/1/2011d. **Transportation Mode** ☐ Air ☐ Rail ☒ Highway ☐ Water ☐ Other - specify _____e. ☒ **Hazardous Waste Transfer Facility:** Storage Volume 59,106 gallons☐ **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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3,000 lbs.
b. Pesticides	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3,000 lbs.
c. Pharmaceuticals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3,000 lbs.
d. Mercury Containing Devices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3,000 lbs.
e. Mercury Containing Lamps	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8,000 lbs.

(3) Mercury Recovery and/or Reclamation Facility ☐
[Chapter 62-737, F.A.C.]

Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]

(4) Reverse Distributor of UW ☐ Pharmaceuticals ☐ Lamps ☐ Devices ☐

(5) Destination Facility for UW ☐ Note: for this activity, a facility must treat, dispose or recycle a UW. A permit is required for storage prior to recycling.

C. Used Oil Activities:

(1) Used Oil Transporter - indicate type(s) of activity(ies):

- ☒ a. Transporter
- ☒ b. Transfer Facility

(2) ☐ Collection Center

(3) ☐ Used Oil Processor (A permit is required for this activity.)

(4) ☐ Off-Specification Used Oil Burner

(5) ☒ Used Oil Fuel Marketer

(6) Used Oil Filter

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

(8) Specific Certification to be signed by all Used Oil Transporters

I certify as a Used Oil Transporter that the training program and financial responsibility required under Section 62-710.600, F.A.C., are in place, current and being adhered to. If any modifications have been made to the originally approved training program, they are explained in attachments to this registration form. Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of Liability Insurance, DEP form 62-710.901(4), F.A.C.


Signature of Authorized Person

Kurt Fogleman, EH&S Manager

Print Name of Authorized Person

(7) Used Oil Transporters, Transfer Facilities, Collection Centers, Off-Specification Burners and Marketers must pay an annual \$100 registration fee. Used Oil Processors are exempt from this fee. If applicable, enclose a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection.

☒ A check is enclosed.

(9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one):

- ☐ our mailing (business) address
- ☒ The site (facility) address

EPA ID No.

FLD980559728

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	D001	2	D002	3	D003	4	D004	5	D005	6	D006	7	D007
8	D008	9	D009	10	D010	11	D011	12	F001	13	F002	14	F003
15	F004	16	F005	17	F006	18	F007	19	F009	20	F019	21	P005
22	P012	23	U002	24	U003	25	U154	26	U220	27	U219	28	U404

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)

Kurt Fogleman, EH&S Manager

8/31/2010

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

Kurt Fogleman

(352) 395-1356

kfogleman@perma-fix.com

(Name of person completing this form)

(Phone Number)

(E-mail Address)

13. Comments:

See attached list of additional waste codes handled at the facility. This updated submittal includes current policy information for the Hazardous Waste Transporter section. An updated certificate of liability insurance is included.

**TABLE I.D.3
WASTE TABLE FOR PERMA-FIX OF ORLANDO**

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Ignitable Liquid	D001	500,000
S01	Corrosive	D002	500,000
S01	Reactive Liquids & Solids	D003	5,000
S01, T21	Arsenic	D004	200,000
S01, T21	Barium	D005	5,000
S01, T21	Cadmium	D006	200,000
S01, T21	Chromium	D007	200,000
S01, T21	Lead	D008	200,000
S01, T21	Mercury	D009	5,000
S01, T21	Selenium	D010	5,000
S01, T21	Silver	D011	50,000
S01	Endrin	D012	5,000
S01	Lindane	D013	5,000
S01	Methoxychlor	D014	5,000
S01	Toxaphene	D015	5,000
S01	2,4-D	D016	5,000
S01	2,4,5-TP (Silvex)	D017	5,000
S01	Benzene	D018	20,000
S01	Carbon Tetrachloride	D019	200,000
S01	Chlordane	D020	5,000
S01	Chlorobenzene	D021	50,000
S01	Chloroform	D022	50,000
S01	O-Cresol	D023	5,000
S01	M-Cresol	D024	5,000
S01	P-Cresol	D025	5,000
S01	Cresol	D026	5,000
S01	1,4-Dichlorobenzene	D027	5,000
S01	1,2-Dichloroethane	D028	5,000
S01	1,1-Dichloroethylene	D029	5,000
S01	2,4-Dinitrotoluene	D030	5,000
S01	Heptachlor	D031	5,000
S01	Hexachlorobenzene	D032	5,000
S01	Hexachlorobutadiene	D033	5,000
S01	Hexachloroethane	D034	5,000
S01	Methyl Ethyl Ketone	D035	50,000
S01	Nitrobenzene	D036	5,000
S01	Pentachlorophenol	D037	5,000
S01	Pyridine	D038	5,000
S01	Tetrachloroethylene	D039	50,000

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Trichloroethylene	D040	50,000
S01	2,4,5-Trichlorophenol	D041	5,000
S01	2,4,6-Trichlorophenol	D042	5,000
S01	Vinyl Chloride	D043	5,000
S01	Spent Halogenated Solvents	F001	100,000
S01	Spent Halogenated Solvents	F002	100,000
S01	Spent Non-Halogenated Solvents	F003	500,000
S01	Spent Non-Halogenated Solvents	F004	5,000
S01	Spent Non-Halogenated Solvents	F005	500,000
S01	Electroplating Sludges	F006	200,000
S01	Spent Cyanide Plating Solvents	F007	50,000
S01	Plating Bath Residues	F008	50,000
S01	Spent Stripping Solutions	F009	50,000
S01	Quenching Bath Residues	F010	50,000
S01	Spent Cyanide Solutions	F011	50,000
S01	Quench Wastewater Sludge	F012	50,000
S01	Wastewater Treatment Sludge	F019	100,000
S01	Discarded Unused Formulations of Chlorophenols	F027	5,000
S01	Chlorophenolic Residuals	F032	500
S01	Crosote Residuals	F034	500
S01	Arsenic/Chromium Residuals	F035	500
S01	Petroleum Refinery Primary Sludge	F037	500
S01	Petroleum Refinery Secondary Sludge	F038	500
S01	Leachate From Wastes	F039	500
S01	Bottom Sediment Sludge	K001	500
S01	Dissolved Air Float	K048	500
S01	Stop Oil Emulsion Solids	K049	500
S01	Heat Exchanger Sludge	K050	500
S01	API Separator Sludge	K051	500
S01	Petroleum Tank Bottoms	K052	500
S01	Emission Control Dust/Sludge	K061	500
S01	Spent Pickle Liquor	K062	500
S01	Solvent Washes & Sludge	K086	5,000
S01	Organic Wastes	K156	500
S01	Wastewaters	K157	500
S01	Baghouse Dusts & Filter Separator Solids	K158	500
S01	Organics From Treatment of Thiocarbamate Wastes	K159	500
S01	Solids	K160	500
S01	Purification Solids	K161	500
S01	Warfarin & Salts when >0.03%	P001	500
S01	Acetamide, N-(Aminothioxomethyl)	P002	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Acrolein	P003	500
S01	Aldrin	P004	500
S01	Allyl Alcohol	P005	500
S01	Aluminum Phosphide	P006	500
S01	5-(Aminomethyl)-3-Isoxazolol	P007	500
S01	Aminopyridine	P008	500
S01	Arsenic Acid (H ₃ AsO ₄)	P010	500
S01	Arsenic Oxide (As ₂ O ₅)	P011	500
S01	Arsenic Oxide (As ₂ O ₃)	P012	500
S01	Barium Cyanide	P013	500
S01	Benzenethiol	P014	500
S01	Beryllium	P015	500
S01	Dichloromethylether	P016	500
S01	Bromoacetone	P017	500
S01	Brucine	P018	500
S01	Dinoseb	P020	500
S01	Calcium Cyanide	P021	500
S01	Carbon Disulfide	P022	500
S01	Acetaldehyde, Chloro-	P023	500
S01	Benzenamine, 4-Chloro-	P024	500
S01	1-(o-Chlorophenyl)thiourea	P026	500
S01	3-Chloropropionitrile	P027	500
S01	Benzene, Chloromethyl	P028	500
S01	Copper Cyanide	P029	500
S01	cyanides	P030	500
S01	2-Cyclohexyl-4,6-dinitrophenol	P034	500
S01	Arsonous Dichloride, Phenyl	P036	500
S01	Dieldrin	P037	500
S01	Arsin, Diethyl-	P038	500
S01	Disulfoton	P039	500
S01	O,O-Diethyl O-pyrazinyl Phosphorothioate	P040	500
S01	Diethyl-p-nitrophenyl Phosphate	P041	500
S01	Epinephrine	P042	500
S01	Diisopropylfluorophosphate	P043	500
S01	Dimethoate	P044	500
S01	Thiofanox	P045	500
S01	Benzeneethanamine, alpha, alpha-dimethyl-	P046	500
S01	4,6-Dinitro-o-cresol & Salts	P047	500
S01	2,4-Dinitrophenol	P048	500
S01	Dithiobiuret	P049	500
S01	Endosulfan	P050	500
S01	Endrin	P051	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Aziridine	P054	500
S01	Acetamide, 2-Fluoro-	P057	500
S01	Acetic Acid, Fluoro-, Sodium Salt	P058	500
S01	Heptachlor	P059	500
S01	Isodrin	P060	500
S01	Hexaethyl Tetraphosphate	P062	500
S01	Hydrogen Cyanide	P063	500
S01	Methyl isocyanate	P064	500
S01	Methomyl	P066	500
S01	Aziridine, 2-methyl	P067	500
S01	Methyl Hydrazine	P068	500
S01	2-Methylactonitrile	P069	500
S01	Aldicarb	P070	500
S01	Methyl Parathion	P071	500
S01	alpha-Naphthylthiourea	P072	500
S01	Nickel Carbonyl	P073	500
S01	Nickel Cyanide	P074	500
S01	Nicotine & Salts	P075	500
S01	Benzenamine, 4-Nitro-	P077	500
S01	Nitroglycerin	P081	500
S01	N-Nitrosodimethylamine	P082	500
S01	N-Nitrosomethylvinylamine	P084	500
S01	Octamethylpyrophosphoramide	P085	500
S01	Osmium Tetroxide	P087	500
S01	Endothall	P088	500
S01	Parathion	P089	500
S01	Phenylmercury Acetate	P092	500
S01	Phenylthiourea	P093	500
S01	Phorate	P094	500
S01	Famphur	P097	500
S01	Potassium Cyanide	P098	500
S01	Argentate(1-), bis (Cyano-C)-, Potassium	P099	500
S01	Ethyl Cyanide	P101	500
S01	Propargyl Alcohol	P102	500
S01	Selenourea	P103	500
S01	Silver Cyanide	P104	500
S01	Sodium Azide	P105	500
S01	Sodium Cyanide	P106	500
S01	Strychnine & Salts	P108	500
S01	Tetraethyldithiopyrophosphate	P109	500
S01	Tetraethyl Lead	P110	500
S01	Tetraethyl Pyrophosphate	P111	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Thallic Oxide	P113	500
S01	Thallium (1) Selenide	P114	500
S01	Thallium (1) Sulfate	P115	500
S01	Thiosemicarbazide	P116	500
S01	Trichloromethanethiol	P118	500
S01	Ammonium Vanadate	P119	500
S01	Vanadium Pentoxide	P120	500
S01	Zinc Cyanide	P121	500
S01	Zinc Phosphide	P122	500
S01	Toxaphene	P123	500
S01	Carbofuran	P127	500
S01	Mexacarbate	P128	500
S01	Tirpate	P185	500
S01	Physostigmine Salicylate	P188	500
S01	Carbosulan	P189	500
S01	Metocarb	P190	500
S01	Dimetilan	P191	500
S01	Isolan	P192	500
S01	Oxamyl	P194	500
S01	Manganese Dimethyldithiocarbamate	P196	500
S01	Formparanate	P197	500
S01	Formetanate Hydrochloride	P198	500
S01	Methiocarb	P199	500
S01	Promecarb	P201	500
S01	m-Cumenyl Methylcarbamate	P202	500
S01	Aldicarb Sulfone	P203	500
S01	Physostigmine	P204	500
S01	Ziram	P205	500
S01	Acetaldehyde (I)	U001	500
S01	Acetone (I)	U002	500
S01	Acetonitrile (I,T)	U003	500
S01	Acetophenone	U004	500
S01	2-Acetylaminofluorene	U005	500
S01	Acetyl Chloride	U006	500
S01	Acrylamide	U007	500
S01	Acrylic Acid	U008	500
S01	Acrylonitrile	U009	500
S01	Mitomycin C	U010	500
S01	Amitrole	U011	500
S01	Aniline (I,T)	U012	500
S01	Auramine	U014	500
S01	Azaserine	U015	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Benz(c)acridine	U016	500
S01	Benzal Chloride	U017	500
S01	Benz(a)anthracene	U018	500
S01	Benzene	U019	500
S01	Benzenesulfonyl Chloride	U020	500
S01	Benzidine	U021	500
S01	Benzo(a)pyrene	U022	500
S01	Benzotrichloride	U023	500
S01	Dichloromethoxy Ethane	U024	500
S01	Dichloroethyl Ether	U025	500
S01	Chlornaphazine	U026	500
S01	Dichloroisopropyl Ether	U027	500
S01	Diethylhexyl Phthalate	U028	500
S01	Methyl Bromide	U029	500
S01	4-Bromophenyl Phenyl Ether	U030	500
S01	n-Butyl Alcohol (I)	U031	500
S01	Calcium Chromiate	U032	500
S01	Chloral	U034	500
S01	Chlorambucil	U035	500
S01	Chlordane, alpha & gamma isomers	U036	500
S01	Chlorobenzene	U037	500
S01	Chlorobenzilate	U038	500
S01	p-Chloro-m-cresol	U039	500
S01	Epichlorohydrin	U041	500
S01	2-Chloroethyl Vinyl Ether	U042	500
S01	Vinyl Chloride	U043	500
S01	Chloroform	U044	500
S01	Methyl Chloride (I,T)	U045	500
S01	Chloromethyl Methyl Ether	U046	500
S01	beta-Chlornaphthalene	U047	500
S01	o-Chlorophenol	U048	500
S01	4-Chloro-o-toluidine, hydrochloride	U049	500
S01	Chrysene	U050	500
S01	Creosote	U051	500
S01	Cresol	U052	500
S01	Crotonaldehyde	U053	500
S01	Cumene (I)	U055	500
S01	Cyclohexane	U056	500
S01	Cyclohexanone (I)	U057	500
S01	Cyclophosphamide	U058	500
S01	Daunomycin	U059	500
S01	DDD	U060	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	DDT	U061	500
S01	Diallate	U062	500
S01	Dibenz(a,h)anthracene	U063	500
S01	Dibenzo(a,i)pyrene	U064	500
S01	1,2-Dibromo-3-chloropropane	U066	500
S01	Ethane, 1,2-dibromo-	U067	500
S01	Methylene Bromide	U068	500
S01	Dibutyl phthalate	U069	500
S01	o-Dichlorobenzene	U070	500
S01	m-Dichlorobenzene	U071	500
S01	p-Dichlorobenzene	U072	500
S01	3,3-Dichlorobenzidine	U073	500
S01	1,4-Dichloro-2-butene (I,T)	U074	500
S01	Dichloro Difluoro Methane	U075	500
S01	Ethane, 1,1-dichloro-	U076	500
S01	Ethane, 1,2-dichloro-	U077	500
S01	1,1-Dichloroethylene	U078	500
S01	1,2-Dichloroethylene	U079	500
S01	Methylene Chloride	U080	25,000
S01	2,4-Dichlorophenol	U081	500
S01	2,6-Dichlorophenol	U082	500
S01	Propylene Dichloride	U083	500
S01	1,3-Dichloropropene	U084	500
S01	1,2:3,4-Diepoxybutane	U085	500
S01	N,N'-Diethylhydrazine	U086	500
S01	O,O-Diethyl S-methyl Dithiophosphate	U087	500
S01	Diethyl Phthalate	U088	500
S01	Diethylstilbesterol	U089	500
S01	Dihydrosafrole	U090	500
S01	3,3'-Dimethoxybenzidine	U091	500
S01	Dimethylamine (I)	U092	500
S01	p-Dimethylaminoazobenzene	U093	500
S01	7,12-Dimethylbenz(a)anthracene	U094	500
S01	3,3'-Dimethylbenzidine	U095	500
S01	Dimethylcarbamoyl Chloride	U097	500
S01	1,1-Dimethylhydrazine	U098	500
S01	1,2-Dimethylhydrazine	U099	500
S01	2,4-Dimethylphenol	U101	500
S01	Dimethyl Phthalate	U102	500
S01	Dimethyl Sulfate	U103	500
S01	2,4-Dinitrotoluene	U105	500
S01	2,6-Dinitrotoluene	U106	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Di-n-Octyl Phthalate	U107	500
S01	1,4-Dioxane	U108	500
S01	1,2-Diphenylhydrazine	U109	500
S01	Dypropylamine	U110	500
S01	Di-n-propylnitrosoamine	U111	500
S01	Ethyl Acetate (I)	U112	500
S01	Ethyl Acrylate (I)	U113	500
S01	Ethylenebisdithiocarbamic Acid, Salts & Esters	U114	500
S01	Ethylene Oxide (I,T)	U115	500
S01	Ethylenethiourea	U116	500
S01	Ethyl Ether (I)	U117	500
S01	Ethyl Methacrylate	U118	500
S01	Ethyl Methanesulfonate	U119	500
S01	Fluoranthene	U120	500
S01	Trichloromonofluoromethane	U121	25,000
S01	Formaldehyde	U122	500
S01	Formic Acid (C, T)	U123	500
S01	Furan (I)	U124	500
S01	Furfural (I)	U125	500
S01	Glycidylaldehyde	U126	500
S01	Hexachlorobenzene	U127	500
S01	Hexachlorobutadiene	U128	500
S01	Lindane	U129	500
S01	Hexachlorocyclopentadiene	U130	500
S01	Hexachloroethane	U131	500
S01	Hexachlorophene	U132	500
S01	Hydrazine (R, T)	U133	500
S01	Hydrofluoric Acid (C,T)	U134	500
S01	Hydrogen Sulfide	U135	500
S01	Cacodylic Acid	U136	500
S01	Indeno[1,2,3-cd]pyrene	U137	500
S01	Methyl Iodide	U138	500
S01	Isobutyl Alcohol (I,T)	U140	500
S01	Isosafrole	U141	500
S01	Kepone	U142	500
S01	Lasiocarpine	U143	500
S01	Lead Acetate	U144	500
S01	Lead Phosphate	U145	500
S01	Lead Subacetate	U146	500
S01	Maleic Anhydride	U147	500
S01	Maleic Hydrazide	U148	500
S01	Malononitrile	U149	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Melphalan	U150	500
S01	Mercury	U151	500
S01	Methacrylonitrile	U152	500
S01	Methanethiol	U153	500
S01	Methanol (I)	U154	25,000
S01	Methapyrilene	U155	500
S01	Methyl Chlorocarbonate	U156	500
S01	3-Methylcholanthrene	U157	500
S01	4,4'-Methylenebis(2-Chloaniline)	U158	500
S01	Methyl Ethyl Ketone (I,T)	U159	25,000
S01	Methyl Ethyl Ketone Peroxide (R, T)	U160	500
S01	Methyl Isobutyl Ketone	U161	500
S01	Methyl Methacrylate (I,T)	U162	500
S01	N-Methyl-N'-Nitro-N-Nitrosoguanidine	U163	500
S01	Methylthiouracil	U164	500
S01	Naphthalene	U165	500
S01	1,4-Naphthalenedione	U166	500
S01	alpha-Naphthylamine	U167	500
S01	beta-Naphthylamine	U168	500
S01	Nitrobenzene (I,T)	U169	500
S01	p-Nitrophenol	U170	500
S01	Nitropropane (I,T)	U171	500
S01	N-Nitrosodi-n-butylamine	U172	500
S01	N-Nitrosodiethanolamine	U173	500
S01	N-Nitrododiethylamine	U174	500
S01	N-Nitroso-N-ethylurea	U176	500
S01	N-Nitroso-N-methylurea	U177	500
S01	N-Nitroso-N-methylurethane	U178	500
S01	N-Nitrosopiperidine	U179	500
S01	N-Nitrosopyrrolidine	U180	500
S01	5-Nitro-o-toluidine	U181	500
S01	Paraldehyde	U182	500
S01	Pentachlorobenzene	U183	500
S01	Pentachloroethane	U184	500
S01	Pentachloronitrobenzene	U185	500
S01	1,3-Pentadiene (I)	U186	500
S01	Phenacetin	U187	500
S01	Phenol	U188	500
S01	Phosphorus Sulfide	U189	500
S01	Phthalic Anhydride	U190	500
S01	2-Picoline	U191	500
S01	Pronamide	U192	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	1,3-Propane Sultone	U193	500
S01	n-Propylamine (I,T)	U194	500
S01	Pyridine	U196	500
S01	p-Benzoquinone	U197	500
S01	Reserpine	U200	500
S01	Resorcinol	U201	500
S01	Saccharin & Salts	U202	500
S01	Safrole	U203	500
S01	Selenium Dioxide	U204	500
S01	Selenium Sulfide	U205	500
S01	Streptozotocin	U206	500
S01	1,2,4,5-Tetrachlorobenzene	U207	500
S01	1,1,1,2-Tetrachloroethane	U208	500
S01	1,1,2,2-Tetrachloroethane	U209	500
S01	Tetrachloroethylene	U210	500
S01	Carbon Tetrachloride	U211	5,000
S01	Tetrahydrofuran (I)	U213	500
S01	Thallium (I) Acetate	U214	500
S01	Thallium (I) Carbonate	U215	500
S01	Thallium (I) Chloride	U216	500
S01	Thallium (I) Nitrate	U217	500
S01	Thioacetamide	U218	500
S01	Thiourea	U219	500
S01	Toluene	U220	25,000
S01	Toluenediamine	U221	500
S01	o-Toluidine Hydrochloride	U222	500
S01	Toluene Diisocyanate	U223	25,000
S01	Bromoform	U225	500
S01	Methyl Chloroform	U226	25,000
S01	1,1,2-Trichloroethane	U227	25,000
S01	Trichloroethylene	U228	25,000
S01	Tris(2,3-dibromopropyl)phosphate	U235	500
S01	Trypan Blue	U236	500
S01	Uracil Mustard	U237	500
S01	Ethyl Carbamate (urethane)	U238	500
S01	Xylene (I)	U239	25,000
S01	2,4-D Salts & Esters	U240	500
S01	1-Propene, 1,1,2,3,3,3-hexachloro-	U243	500
S01	Thiram	U244	500
S01	Cyanogen Bromide	U246	500
S01	Methoxychlor	U247	500
S01	Warfarin & Salts	U248	500

Process Code	Waste Description	Hazardous Waste Code	Annual Quantity (gallons)
S01	Zinc Phosphide	U249	500
S01	Benomyl	U271	500
S01	Sulfallate	U277	500
S01	Bendiocarb	U278	500
S01	Carbaryl	U279	500
S01	Barban	U280	500
S01	o-Toluidine	U328	500
S01	p-Toluidine	U353	500
S01	Ethylene Glycol Monoethyl Ether	U359	500
S01	Bendiocarb Phenol	U364	500
S01	Molinate	U365	500
S01	Dazomet	U366	500
S01	Carbofuran Phenol	U367	500
S01	Carbendazim	U372	500
S01	Propham	U373	500
S01	3-Iodo-2-propynyl n-butylcarbamate	U375	500
S01	Selenium, tetrakis (dimethyldithiocarbamate)	U376	500
S01	Potassium n-methyldithiocarbamate	U377	500
S01	Potassium n-hydroxymethyl-n-methyldithiocarbamate	U378	500
S01	Sodium Dibutyldithiocarbamate	U379	500
S01	Sodium Diethyldithiocarbamate	U381	500
S01	Sodium Dimethyldithiocarbamate	U382	500
S01	Potassium Dimethyldithiocarbamate	U383	500
S01	Metam-sodium	U384	500
S01	Vernolate	U385	500
S01	Cycloate	U386	500
S01	Prosulfocarb	U387	500
S01	Triallate	U389	500
S01	EPTC	U390	500
S01	Pebulate	U391	500
S01	Butylate	U392	500
S01	Copper Dimethyldithiocarbamate	U393	500
S01	A2213	U394	500
S01	Diethylene Glycol, Dicarbamate	U395	500
S01	Ferbam	U396	500
S01	Bis(pentamethylene) Thiuram Tetrasulfide	U400	500
S01	Tetramethylthiuram Monosulfide	U401	500
S01	Tetrabutylthiuram Disulfide	U402	500
S01	Disulfiram	U403	500
S01	Triethylamine	U404	500
S01	Ethyl Ziram	U407	500

STATE OF FLORIDA
HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY
INSURANCE

1. Chartis Specialty Insurance Company
(Name of Insurer)

(the "Insurer"), of 175 Water Street, New York, NY 10038
(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

Perma-Fix Environmental Services, Inc.
(Name of Insured)

(the "Insured"), of 8302 Dunwoody Place, Ste. 250, Atlanta, GA 30350
(Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-730.170. The coverage applies at:

<u>EPA/DEP I.D. No.</u>	<u>Name</u>	<u>Location</u>
FLD 980559728	Perma-Fix of Orlando	10100 Rocket Blvd., Orlando, FL 32824

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$ 4,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number FC 311-28-95, issued on 8/30/2010.
(date)

The effective date of said policy is 9/1/2010 and the expiration date of said policy is 9/1/2011.
(date)

This insurance is excess and the company shall not be liable for amounts in excess of \$ _____ for each accident in excess of the underlying limit of \$ _____ for each accident, exclusive of legal defense costs. The coverage is provided under policy number _____, issued on _____. The effective date of said policy is _____ and the expiration date of said policy is _____.
(date) (date)

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

(a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.

- (b) 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.
- (c) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the Insured and any other termination of the insurance (e.g., expiration, non-renewal), will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Secretary of the FDEP as evidenced by certified mail return receipt.
- (e) The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgment or judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one of more States including Florida.


(Signature of Authorized Representative of Insurer)

David Haas
(Typed name)

Regional Manager - Environmental Casualty Division
(Title)

Authorized Representative of

Chartis Specialty Insurance Company
(Name of Insurer)

1200 Abernathy Road, Atlanta, GA 30328
(Address of Representative)

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.