



Florida Department of Environmental Protection

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Mimi A. Drew
Secretary

September 22, 2010

Brandon Dow
Raider Environmental Services Inc
4103 northwest 132nd st
Opa Locka, FL 33054

BE IT KNOWN THAT

Raider Environmental Services Inc
10407 US Highway 41 N
Palmetto, FL 34221- 8724

IS HEREBY REGISTERED AS A USED OIL

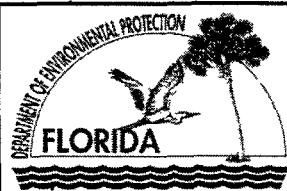
Transporter, Transfer Facility, Filter Transporter, Filter Transfer Facility

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C)
The Department of Environmental Protection hereby issues
Registration Number **FLR000167023** on September 22, 2010
Insurance Carrier: **ACE AMERICAN INSURANCE**

This registration will expire on 06/30/2011

This certificate documents receipt of your annual registration
and annual report. It shall be displayed in a prominent place
at your facility. This certificate and your cancelled check
are your receipts.

Aprilia Graves
Engineering Specialist IV
Hazardous Waste Regulation Permitting



8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS MS4560
2600 Blair Stone Rd Tallahassee FL 32399 2400
(850) 245 8772

Date Received
(for FDEP Official Use Only)

Received

SEP 07 2010

EPA ID

F L R 0 0 0 1 6 7 0 2 3

MTS

BSHW

1 Reason for
Submittal

Mark 'X' in
correct box

- ☐ To provide initial notification (to obtain an EPA ID Number for hazardous waste universal waste or used oil activities)
- ☒ To provide subsequent notification (to update status and facility identification information)
- ☐ Is this the final notification (see instructions) for the facility?

2 Facility or
Business Name

Raider Environmental Services, Inc

EPA ID No.

6 5 1 1 2 5 3 0 6

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

Name of Operator

Raider Environmental Services Inc

☐ New Operator

Date became Operator 04 / 06 / 10
mm dd yy

Street or P O Box

4103 Northwest 132nd Street

Phone Number

(305) 994-9949

City or Town

Opa-Locka

State

FL

Zip Code

33054

Operator Type

☒ Private

☐ Federal

☐ Municipal

☐ State

☐ Other

4 Facility Physical
Location
Information

Physical Street Address

10407 US Highway 41

City or Town

Palmetto

State

FL

Zip Code

34421

County

Manatee

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

Latitude 2 7 3 6 2 9 03N
d d m m s s ssss

Longitude 8 2 3 2 2 5 19W
d d m m s s ssss

Method
Datum

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

A

562910

B

562219

C

924110

D

6 Facility or
Business Mailing
Address

Street Address or P O Box

4103 Northwest 132nd Street

City or Town

Opa-Locka

State

FL

Zip Code

33054

7 Facility or
Business Contact
Person

First Name

Brandon

Last Name

Dow

Title

General Manager

Phone Number

(305) 994-9949

Extension

E-Mail

brandon@raiderenvironmental.com

Street or P O Box

4103 Northwest 132nd Street

City or Town

Opa-Locka

State

FL

Zip Code

33054

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

GSI Holdings LLC

☐ New Owner

Date became Owner 12 / 30 / 04
mm dd yy

Street or P O Box

10415 US Highway 41 North

Phone Number

(941) 729-2292

City or Town

Palmetto

State

FL

Zip Code

34221

Owner Type

☒ Private

☐ Federal

☐ Municipal

☐ State

☐ Other

9 Type of Regulated Waste Activity (Mark 'X' in all that apply)**A Hazardous Waste Activities****(1) Generator of Hazardous Waste**

(Choose only one of the following three categories)

- ☐ a Large Quantity Generator (LQG)
Generates in any calendar month 1 000 kilograms or greater per month (kg/mo) (2 200 lbs) of *non-acute* hazardous waste **or** Greater than 1 kg (2 2 lbs) of *acute* hazardous waste
- ☐ b Small Quantity Generator (SQG)
Generates in any calendar month greater than 100kg/mo but less than 1 000 kg/mo (>220 to <2 200 lbs) of *non-acute* hazardous waste and/or 1 kg (2 2 lbs) or less of *acute* hazardous waste
- ☐ c Conditionally Exempt SQG (CESQG)
Generates in any calendar month 100 kg/mo or less (220 lbs) of *non-acute* hazardous waste and 1 kg (2 2 lbs) or less of *acute* hazardous waste

In addition, indicate other generator activities that apply

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

For Items 2 through 7, mark 'X' in all that apply**(2) Treater, Storer, or Disposer of Hazardous Waste**

(at your facility) Note A hazardous waste permit may be required for this activity

- ☐ a Operating Commercial TSD
- ☐ b Operating Non commercial TSD
- ☐ c Non operating Postclosure or Corrective Action Permit or Consent Order (HSWA etc)

(3) Recycler of Hazardous Waste (at your facility)Specify ☐ Commercial ☐ Non Commercial

A permit is required for storage prior to recycling

(4) Exempt Boiler and/or Industrial Furnace

- ☐ a Small Quantity On site Burner Exemption
- ☐ b Smelting Melting and Refining Furnace Exemption

(5) Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities - Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization OR the authorization you received from FDEP**(6) Underground Injection Control - Mark an X even if the UIC well at your facility does not receive hazardous waste****(7) Transporter of Hazardous Waste [Note A Certificate of Liability Insurance is required along with this registration]**Registration must be renewed annually ☐ a For own waste only ☐ b For commercial purposes**c Hazardous Waste Transporter Insurance Information**

Insurance Company _____

Address _____

Contact _____

Telephone _____

Policy Number _____

Expiration date _____

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

Storage Volume _____

☐ **Initial notification**

The following items are required to be submitted with the initial notification for a transfer facility [Rule 62 730 171(3) Florida Administrative Code (F A C)]

- ☐ Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of Section 403 7211(2) Florida Statutes (F S) [Rule 62 730 171(3)(a)1 F A C]
- ☐ Evidence of the transporter s financial responsibility [Rule 62-730 171(3)(a)3 F A C]
- ☐ A brief general description of the transfer facility operations [Rule 62-730 171(3)(a)4 F A C]
- ☐ A copy of the facility closure plan [Rule 62 730 171(3)(a)5 F A C]
- ☐ A copy of the contingency and emergency plan [Rule 62 730 171(3)(a)6 F A C]
- ☐ A map or maps of the transfer facility [Rule 62 730 171(3)(a)7 F A C]
- ☐ Notification of changes in above items
- ☐ Annual update notification

B Universal Waste (UW) Activities (Mark 'X' in all that apply) ("accumulated" means at any one time)

- ☐ Large Quantity Handler (LQH) = > 1000 kg (11 000 lb) or more of any combination of UW accumulated
- ☐ Small Quantity Handler (SQH) = always less than 1000 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 = 2000 kg (4400 lbs/8 000 lamps) or more accumulated by for-hire handler
- ☐ Mercury containing lamps SQH = less than 2000 kg (8 000 lamps) accumulated by for-hire handler
- [Note 4 lamps = 1 kg 62-737 200(10)]
- ☐ Pharmaceuticals LQH = 5000 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 5000 kg of UPW and always 1 kg or less of acutely hazardous UPW accumulated

(1) For those Managing	Generate/ Accumulate	Transport (see note in instructions)	Handle at Transfer Facility	(2) Enter your estimate of the maximum amount (in pounds) of each type of UW on site or transported at any one time
a Batteries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
b Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
c Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
d Mercury Containing Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
e Mercury Containing Lamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

(3) Mercury Recovery and/or Reclamation Facility ☐ Note A hazardous waste permit is required for this activity [Rule 62 737 800 F A C]
[Chapter 62 737 F A C]

(4) Reverse Distributor of UW ☐ 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

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

☒ A check is enclosed

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

I certify as a Used Oil Transporter that the training program and financial responsibility required under Section 62 710 600 F A C are in place current and being adhered to If any modifications have been made to the originally approved training program they are explained in attachments to this registration form Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of Liability Insurance DEP form 62 710 901(4) F A C


Signature of Authorized Person

Brandon G Dow

Print Name of Authorized Person

(9) The records required under the provisions of Rule 62 710 510 F A C are kept at (check one)

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

EPA ID No

FLR000167023

D Other State Regulated Waste Activities☒ **Petroleum Contact Water (PCW) Handler** [Chapter 62 740 F A C]

Note A water facility permit may be required for this activity

10 Waste Codes for Federally Regulated Hazardous Wastes List the waste codes of the Federal hazardous wastes handled at your facility List them in the order they are presented in the regulations (e g D001 D003 F007 U112)

Hazardous waste transporters list codes routinely or usually transported Use an additional page if more spaces are needed

1	2	3	4	5	6	
8	9	10	11	12	13	14
15	16	17	18	19	20	21
	22	23	24	25	26	27

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)

Brandon G Dow - General Manager

8/31/2010

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

(Name of person completing this form)

(Phone Number)

(E-mail Address)

13 Comments

This Facility will only be transporting Used Oil Products



Department of Environmental Protection
FDEP MS 4550 2600 Blair Stone Road Tallahassee, Florida 32399-2400

DEP Form #62-710.901(4)
Form Title Certificate of Liability Insurance
Used Oil Transporters
Effective Date June 9, 2005

Certificate of Pollution Liability Insurance Used Oil Transporters

Please Print or Type Form

1. ACE American Insurance Company (the Insurer), 500 Colonial Parkway, Suite 400
(Name of the Insurer) Roswell, GA 30076
(Address of the Insurer)

hereby certifies that it has issued pollution liability insurance to: Inc. (the Insured),
10407 US Highway 41
Palmetto, FL 34221
(Name of the Insured)

(Address of the Insured) whose EPA Identification number is FLR 000 167 023.

This insurance complies with the insured's obligation to demonstrate the financial responsibility required by Florida
Administrative Code Rule 62-710.600(2)(e). [See page 2 on the back side of this Form]

The insurance is primary and the company shall be liable for amounts up to \$1,000,000. less the deductible or
retention of \$ for each accident exclusive of legal defense costs. If a deductible or retention is applied,
its amount may not exceed 10% of the equity of the Insured.

This coverage is provided under policy number H08451990 001, issued on 07/11/2010
(Date)

The expiration date of said policy is 07/11/2010 or the annual renewal date is
(Date) (Date)

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

- Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under this policy.
- 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.
- 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.
- Cancellation of the insurance, whether by the Insurer or the Insured or by any other termination of the insurance (e.g. expiration or 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.
- 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 judgments resulting from accidents which occur during the time the policy is in effect.

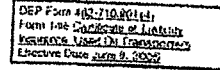
I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess
or surplus lines insurer in one or more States, including Florida.

Rita Emig
(Signature of Insurer or Authorized Representative)

Rita Emig, Senior Underwriter
(Type Name)

Authorized Representative of

ACE American Insurance Company
(Name of Insurer)



Chapter 62-710.600(2)(e), Florida Administrative Code
Certification Program for Used Oil Transporters

(e) Have, verify, and maintain vehicle insurance with a combined single limit of no less than \$1,000,000. Such insurance, or additional policy, must in no way exclude pollution coverage for sudden and accidental alleged or threatened discharge, dispersal, seepage, migration, release or escape of used oil, and must include any cost or expense relating to pollution damage for which the transporter is legally liable. Such insurance must be maintained at all times and be exclusive of legal defense costs.

1. The insurance required in this paragraph may be established by:

a. Evidence of liability insurance, either on a claim made or an occurrence basis, with or without a deductible (with the deductible, if any, to be on a per occurrence or per accident basis and not to exceed ten percent of the equity of the business), using DEP Form 62-710.901(4). The insurance policy shall be issued by an agent or company authorized or licensed to transact business in the State of Florida. An ACORD form will only be accepted for renewal of a policy with the same carrier; or

b. For business entities registered in Florida, evidence of self-insurance provided by the chief financial officer of the business entity.

2. States and the federal government are exempt from the requirements of this paragraph.

Any questions concerning this form may be referred to the Used Oil Coordinator, MS 4556, Department of Environmental Protection 2600 Blair Stone Road, Tallahassee, FL 32399-2400, Phone (850) 245-8754, email: sabrina.peck@dep.state.fl.us . OR Phone (850) 245-3755, email: richard.neves@dep.state.fl.us