

# Florida Department of Environmental Protection

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

Jennifer Carroll Lt. Governor

Herschel T. Vinyard, Jr. Secretary

March 21, 2011

Russell Landry Coal City Cob Company Inc PO Box 597 Waxahachie, TX 75168-597

Re: Florida Hazardous Waste Transporter Approval

Dear Russell Landry:

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 occured, 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.
- <sup>5.</sup> 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.

Russell Landry March 21, 2011 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,

Aprilia Graves

Aprilia Graves Engineering Specialist IV Hazardous Waste Regulation Section

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Enclosures: Hazardous Waste Transporter Approval Certificate Hazardous Waste Transporter Status Form (with insurance verification) Sections <u>62-730.170</u> and <u>62-730.171</u>, FAC



# Florida Department of Environmental Protection

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

Jennifer Carroll Lt. Governor

Herschel T. Vinyard, Jr. Secretary

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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:	Coal City Cob Company Inc
FACILITY ID NO:	TXR000079839
FACILITY ADDRESS:	4300 I-35E North Waxahachie, TX 75165
INSURANCE CARRIER:	XL INSURANCE AMERICA INC
INSURANCE POLICY#:	AEC001575007
EFFECTIVE DATE:	January 16, 2011
EXPIRATION DATE:	January 16, 2012
APPROVED TRANSFER FACILITY	(: NO

APPROVAL ISSUED BY:

DATE: March 21, 2011

Aprilia Graves Engineering Specialist IV Hazardous Waste Regulation Section 850/245-8755

rev.0(Oct 91)

Are your services commercially available? <u>V+5</u>

# STATE OF FLORIDA

## HAZARDOUS WASTE TRANSPORTER STATUS FORM

1. <u>Transporter Identification</u> : Transporter Name: <u>Coal City Cob Con Dawy TN C</u>
Transporter EPA ID: $TxR = 0000 -748 -34$
Location Address: 4300 I-35E North
Waxebachie, TX 75165
Contact: RUSSell LANDRY Telephone: 972-923-7500
Mailing Address: POBOX
Waxahachie, Tx 75165
II. Insurance Information: Insurance Company <u>GREENWICH INSURGINCE (C) XLIWS</u> Address <u>Wayse House 70 Fatries Aue</u> <u>Stanford, CT (BRO2-6040</u> Contact: Richard Savaiens Telephone: <u>9-8004483496</u> Policy Number: <u>AEC001575007</u> Expiration date: <u>1/16/2012</u>
III. <u>Waste Information</u> :
EPA Waste Codes for Waste Routinely or Usually Transported:
FUDI FODZ FOD3 FODY FODG DOD 1
Comments:
IV. <u>Certification</u> :
I certify under penalty of law that the above information is true, correct, and complete to the best
of my knowledge.
Dussell LANDRY Safet + Director
Print/Type Name Title
Juse 11/3/11
Signature Date Signed
V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The

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 <u>1/16/2012</u>.

APPROVED by Tiffaney A. Noland, changes approved by the Certifier by phone 3/15/2011

Signature of Florida Department of Environmental Protection Representative Date Signed

DEP Form 62-730.900(5)(d) Effective 1/5/95 HW Transporter Status Form Page 1 of 1

FLORIDA	RI DEP V	<b>2FL - FLORIDA NOT</b> <b>CGULATED WASTE</b> Vaste Management Division Blair Stone Rd. Tallahassee (850) 245-8772 9 8 3 9	<b>ACTIVITY</b> HWRS, MS4560 2, FL 32399-2400			MAR 1	<b>81/90</b> 0nly) 5 2011
1. Reason for Submittal	Mark 'X' in correct box:               To provide <u>initial notification</u> (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).             X         To provide <u>subsequent notification</u> (to update status and facility identification information).             Is this the <u>final notification</u> (see instructions) for the facility?						
2. Facility or Business Name		AL CITY COB COMF	PANY IMC		FEID 3	No. 6 2 7 5	5 6 1 1 6
<b>3. Facility Operator</b> (List additional Operators in the	Name of Operator: COAL CITY COB COMPANY INC			New Operator Date became Operator: 01 / 31 / 72 mm dd yy			
comments section).	Street or P.O. Box: 4300 I-35E NORTH				Phon	e Number:	972-923-7500
	City or Town:	WAXAHAC	CHIE	State:	ТΧ	Zip Code:	75165
	Operator Type: [			State	Othe	r	
4. Facility Physical Location	Physical Street Address: 4300 I-35E NORTH						
Information	City or Town:	WAXAHACI	HIE	State:	тх	Zip Code:	75165
	County: Choose	·	If available, please attach a map or sketch of the facility boundaries.				
	Latitude:   Longitude:   Longitude: Method: d mm s s .ssss d d mm s s .ssss Datum:						
5. Facility North Am Classification Syst Code(s)		A. 48412 C.	21	В. D.			
6. Facility or	Street Address or	P.O. Box:	P.C	.BOX	597		
Business Mailing Address	City or Town:	WAXAHAC	HIE	State:	ТΧ	Zip Code:	75168
7. Facility or Business Contact	First Name:	RUSSELL	Last Name: L	ANDR	(		
Person	Phone Number:	972-923-7508	Extension:	E-Mail:		r.landry@co	
	Street or P.O. Box: 4300 I-35E NORTH						
	City or Town:	WAXAHAC	HIE	State:	ТΧ	Zip Code:	75165
8. Real Property (Land) Owner of the Facility's	Name of Real Property (Land) Owner: micahael o cloonen			New Owner Date became Owner: 01 / 31 / 72 mm dd yy			
Physical Location (List additional	Street or P.O. Box	4300 1-35	5E NORTH		Phon	e Number:	
real property owners in the comments	City or Town: WAXAHACHIE Sta			State:	ТХ	Zip Code:	75165
section.)	Owner Type: Private Federal Municipal State Other						

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DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 01-04-2009 Page 1 of 4

ndar Standard yn dy'r mae'n a far a fallan a san yn a darf a synaffan a'r ar ar a synaff an ar ar yn a synaff men yn ar ar yn ar yn Mae'n yn ar yn a	EPA ID No. TXR000079839
9. Type of Regulated Waste Activity (Mark 'X' in all the	at apply):
<ul> <li>9. Type of Regulated Waste Activity (Mark 'X' in all that A. Hazardous Waste Activities: <ul> <li>(1) Generator of Hazardous Waste</li> <li>(Choose only one of the following three categories.)</li> <li>a. Large Quantity Generator (LQG): Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of <i>non-acute</i> hazardous waste; or Greater than 1 kg (2.2 lbs) of <i>acute</i> hazardous waste</li> <li>b. Small Quantity Generator (SQG): Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (&gt;220 to &lt;2,200 lbs.) of <i>non-acute</i> hazardous waste and/or 1 kg (2.2 lbs) or less of <i>acute</i> hazardous waste</li> </ul> </li> </ul>	<ul> <li>For Items 2 through 7, mark 'X' in all that apply.</li> <li>(2) Treater, Storer, or Disposer of Hazardous Waste <ul> <li>(at your facility) Note: A hazardous waste permit</li> <li>may be required for this activity.</li> <li>a. Operating Commercial TSD</li> <li>b. Operating Non-commercial TSD</li> <li>c. Non-operating: Postclosure or Corrective Action</li> <li>Permit or Consent Order (HSWA, etc.)</li> </ul> </li> <li>(3) Recycler of Hazardous Waste (at your facility) <ul> <li>Specify: Commercial; Non-Commercial.</li> <li>A permit is required for storage prior to recycling.</li> </ul> </li> <li>(4) Exempt Boiler and/or Industrial Furnace <ul> <li>a. Small Quantity On-site Burner Exemption</li> <li>b. Smelting, Melting, and Refining Furnace Exemption</li> </ul> </li> </ul>
<ul> <li>c. Conditionally Exempt SQG (CESQG): Generates in any calendar month 100 kg/mo or less (220 lbs.) of <i>non-acute</i> hazardous waste and 1 kg (2.2 lbs) or less of <i>acute</i> hazardous waste</li> </ul>	<ul> <li>(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.</li> </ul>
<ul> <li>In addition, indicate other generator activities that apply.</li> <li>d. United States Importer of hazardous waste</li> <li>e. Mixed Waste (hazardous and radioactive) Generator</li> </ul>	(6) Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste.
	waste only 🗵 b. For commercial purposes
	Water Other - specify
Florida Administrative Code (F.A.C.)]:	ty [Rule 62-730.171(3)(a)3., F.A.C.] operations [Rule 62-730.171(3)(a)4., F.A.C.] 71(3)(a)5., F.A.C.] tule 62-730.171(3)(a)6., F.A.C.]

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B. Universal Waste (UW) Activities (Mark 'X' in all that apply) ('	'accumulated'' means at any one time):
Large Quantity Handler (LQH) = $5,000 \text{ kg}$ (11,000 lb) or more c	
$\square Small Quantity Handler (SQH) = always less than 5,000 kg accu$	mulated
Mercury-containing devices LQH = 100 kg (220 lb) or more act Mercury-containing devices SQH = less than 100 kg accumulate	-
Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lam	ps) or more accumulated by for-hire handler
Mercury-containing lamps SQH = less than 2,000 kg (8,000 lam	ps) accumulated by for-hire handler
[Note: 4 lamps = $1 \text{ kg}$ , 62-737.200(10)]	
Pharmaceuticals LQH = 5,000 kg or more of universal pharmace	eutical waste (UPW) accumulated
Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazar	dous ("P-listed") pharmaceutical waste accumulated
Pharmaceuticals SQH = always less than 5,000 kg of UPW and a	always 1 kg or less of acutely hazardous UPW accumulated
1(1) Korthose Monaging 1 I (see note in 1	(2) Enter your esitmate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.
a. Batteries	
b. Pesticides	
c. Pharmaceuticals	
d. Mercury Containing Devices	
e. Mercury Containing Lamps	
· · · · · · · · · · · · · · · · · · ·	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	ty, a facility must treat, dispose or recycle a UW. A permit is required for cling.
<ul> <li>(1) Used Oil Transporter - indicate type(s) of activity(ies): <ul> <li>a. Transporter</li> <li>b. Transfer Facility</li> </ul> </li> <li>(2) Collection Center</li> <li>(3) Used Oil Processor (A permit is required for this activity.)</li> </ul>	<ul> <li>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 orginally 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. </li> <li>Signature of Authorized Person Print Name of Authorized Person</li></ul>
<ul> <li>(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.</li> <li>A check is enclosed.</li> </ul>	<ul> <li>(9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one):</li> <li>☑ Our mailing (business) address</li> <li>☐ The site (facility) address</li> </ul>

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). Other State	Regulated Waste	e Activities:			r (PCW) Handler [( permit may be requir	Chapter 62-740, F.A.C.] ed for this activity.
our facility. Li	st them in the orde	er they are presente	d in the regulations (	e.g., D001, D0		hazardous wastes handled at es are needed.
F001	<sup>2</sup> D002	<sup>3</sup> F003	<sup>≁</sup> F004	<sup>5</sup> F006	o D001	7
	9	10	11	12	13	14
	16	17	18	19	20	21
,	23	24	25	26	27	28
1. Other Sta	tus Changes (N	lark 'X' in all tha	 t apply):			
□ (1) Bu □ (2) W □ (3) Ot B. Facility Cl □ (1) Cl b □ (2) Ou add Contac Addre City, S	usiness no longer g aste generated by her (explain) osed osed at this location e handling regulat at of Business - Bu ldress, and phone ct ss	business has been of on and <b>moved or n</b> red waste there. usiness closed on _ number where you	ts, treats, stores, or d delisted. noving to another - s can be reached after Phone	NON-HANI ubmit a new Fo (Date closing.	DLER orm 8700-12FL for th c). Please provide a c	ne new location if you will contact person, mailing
2. Certificati accordance wi	<b>ion:</b> I certify und th a system design nitted is, to the be	er penalty of law th ned to assure that q st of my knowledg	nat this document an ualified personnel pr e and belief, true, acc	d all attachment operly gather a curate, and com	nd evaluate the infor plete. I am aware that	mation submitted. The at there are significant penaltic
2. Certificati n accordance wi nformation subm or submitting fa acility, I am awa	ion: I certify und ith a system design nitted is, to the be lse information, ir are that transfer fa	er penalty of law the ned to assure that q st of my knowledg neluding the possib cilities must compl	hat this document and ualified personnel pr e and belief, true, acc ility of fine and impr ly with the requirement	d all attachment operly gather a curate, and com isonment for ki ents of Rule 62-	ts were prepared und nd evaluate the infor plete. I am aware tha nowing violations. I 730.171, FAC, and I	mation submitted. The at there are significant penaltie f I have notified as a transfer Rule 62-730.182, FAC.
2. Certification n accordance with accordance accordance accordance with accordance with accor	ion: I certify und ith a system design nitted is, to the be lse information, ir are that transfer fa	er penalty of law the ned to assure that q st of my knowledg neluding the possib cilities must complete , or an authorized	hat this document and ualified personnel pr e and belief, true, acc ility of fine and impr ly with the requirement	d all attachment operly gather a curate, and com isonment for ku	ts were prepared und nd evaluate the infor plete. I am aware tha nowing violations. I 730.171, FAC, and I	at there are significant penaltie f I have notified as a transfer
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2. Certificati a accordance wi formation subm or submitting fa accility, I am awa	ion: I certify und th a system design nitted is, to the be lse information, in are that transfer fa	er penalty of law the ned to assure that q st of my knowledg neluding the possib cilities must complete , or an authorized	nat this document and ualified personnel pr e and belief, true, acc ility of fine and impr ly with the requirement ed	d all attachment operly gather a curate, and com isonment for ki ents of Rule 62- <b>rint Name ar</b>	ts were prepared und nd evaluate the infor plete. I am aware tha nowing violations. I 730.171, FAC, and I nd Title	mation submitted. The at there are significant penaltic f I have notified as a transfer Rule 62-730.182, FAC. Date Signed (mm-dd-yyyy)

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Received

JAN 18 2011

**BSHW** 

DEP Form # 17-730.900(5)(a) Form Title: HWF Transporter Certificate of Liability Insurance Effective Date: 1-29-06 DEP Application #

# STATE OF FLORIDA HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY INSURANCE

1. <u>XL INSURANCE AMERICA, INC.</u>

(Name of Insurer)

#### (the "Insurer"), of <u>SEAVIEW HOUSE, 70 SEAVIEW AVENUE, STAMFORD, CT</u> 06902-6040 (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

2. <u>COAL CITY COB COMPANY, INC.</u> (Name of Insured)

> (the "Insured"), of <u>P.O. BOX 597, WAXAHACHIE, TX 75165</u> (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:

EPA/DEP I.D. No. TXR000079839 Name

Location

COAL CITY COB COMPANY, INC. 4300 I-35E NORTH WAXAHACHIE, TX 75168

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

This insurance is <u>primary</u> and the company shall not be liable for amounts in excess of  $\frac{1,000,000 \text{ CSL}}{1,000,000 \text{ CSL}}$  for each accident, exclusive of legal defense costs. The coverage is provided under policy number <u>AEC001575007</u>, issued on <u>January 16, 2011</u>.

#### (date)

The effective date of said policy is <u>January 16, 2011</u> and the expiration date of said policy (date)

is January 16, 2012. (date)

3.

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

(date)

said policy is \_\_\_\_\_and the expiration date of said policy is \_\_\_\_\_ (date)

(date)

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.

Page 1 of 2 DEP FORM 62-730.900(5)(a) effective 1-29-06

- The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with (b) 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 (c) 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 and any other termination of the (d) 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.
- The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for (e) 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

JOSEPH CATANESE (Typed name)

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VICE PRESIDENT (Title)

Authorized Representative of

XL INSURANCE AMERICA, INC. (Name of Insurer)

505 EAGLEVIEW BLVD., EXTON, PA 19341 (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.