

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

Jennifer Carroll Lt. Governor

Herschel T. Vinyard, Jr. Secretary

March 30, 2011

Denise Krous Veolia ES Technical Solutions LLC 1 Eden Lane Flanders, NJ 07836- 8950

BE IT KNOWN THAT

Veolia ES Technical Solutions LLC 1 Eden Lane Flanders, NJ 7836

IS HEREBY REGISTERED AS A USED OIL

Transporter

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C)
The Department of Environmental Protection hereby issues
Registration Number **NJD080631369** on March 30, 2011

Insurance Carrier: **NEW HAMPSHIRE INSURANCE**Insurance Policy #: **GL457-27-00**Insurance Ex. Date: **07/01/2011**Transporter Type: **FH**

This registration will expire on 06/30/2012

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)

FED 110 on 1

EPA ID N J D	0 8 0 6 3	1 3 6 9	MTS			RCRA	nfo , , ,
1. Reason for Submittal	Mark 'X' in correct box:	waste, universal wa	otification (to obtain ste, or used oil activit sent notification (to offication)	ies). update sta	tus and	I facility ident	
2. Facility or Business Name	Veolia	a ES Technical Solut	ions, L.L.C.		FEID 3	No. 6 4 2 8	7 9 9 8
3. Facility Operator (List additional Operators in the	Name of Operator: Veolia E	S Technical Solution	ns, L.L.C.	□ New Date be	came (Operator:	_// m dd yy
comments section).	Street or P.O. Box:	[:] 1 Ed	en Lane		Phone	Number: (973/691-7321
	City or Town:	Flander	S	State:	NJ	Zip Code:	07836
	Operator Type:	Private Federal	Municipal S	State [Other		
4. Facility Physical Location	Physical Street Add	dress:	1 Ed	len Lan	е		
Information	City or Town:	Flanders		State:	NJ	Zip Code:	07836
	County: Choose		If available, ple boundaries.	lable, please attach a map or sketch of the facility aries.			
		3 8 10 4 . 25 Longi m m ss.sss	tude: ⁷ 4 6 9 d d m m	1 ⁷ 6.		Method: Datum:	
5. Facility North Am Classification Syst Code(s)	crican muustry	A. 5622 c.	11	B. D.			
6. Facility or	Street Address or P.O. Box:		den La	ne			
Business Mailing Address	City or Town:	Flander	S	State:	NJ	Zip Code:	07836
7. Facility or Business Contact	First Name:	Denise	Last Name:	Krous		Title: Peri	mits Admin
Person	Phone Number:	973/691-7321	Extension:	E-Mail:	der	nise.krous@	veoliaes.com
	Street or P.O. Box		1 Ede	n Lane			
:	City or Town:	Flanders	3	State:	NJ	Zip Code:	07836
8. Real Property (Land) Owner of the Facility's	Veolia	perty (Land) Owner: ES Technical Solution	ons, L.L.C.	□ New Date be	came (Owner:	**
Physical Location (List additional	Street or P.O. Box	700 Butterfiel	d Rd, Suite 201		Phone	e Number: 6	30/218-1647
real property owners in the comments	City or Town:	Lombare	d	State:	IL	Zip Code:	60148
section.)	Owner Type: 🛛 F	Private Federal	Municipal Sta	ite 🔲 🤇	Other_	•	

	EPA ID No. NJD080631369
9. Type of Regulated Waste Activity (Mark 'X' in all that	apply):
Generates in any calendar month 100 kg/mo or less (220 lbs.) of <i>non-acute</i> hazardous waste and 1 kg	For Items 2 through 7, mark 'X' in all that apply. (2) Treater, Storer, or Disposer of Hazardous Waste
(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	FDEP. (6) Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste.
Address c/o Mar 1000 Main Street, Suite 300, Houston, TX 77002 Contact Melissa Hardie Policy Number CA 4576281	waste only b. For commercial purposes n ompany of The State of PA sh USA, Inc
e. Hazardous Waste Transfer Facility: Initial notification The following items are required to be submitted with Florida Administrative Code (F.A.C.)]:	Storage Volume Storage Volume Ith the initial notification for a transfer facility [Rule 62-730.171(3), where transporter that the proposed location satisfies the F.S.) [Rule 62-730.171(3)(a)1., F.A.C.] The facility [Rule 62-730.171(3)(a)4., F.A.C.] Storage Volume Storage Volume 1 (3)(a)5., F.A.C.] Storage Volume 1 (3)(a)1., F.A.C.] Storage Volume 1 (3)(a)2., F.A.C.] Storage Volume 1 (3)(a)3., F.A.C.] Storage Volume 1 (3)(a)4., F.A.C.] Storage Volume 1 (3)(a)5., F.A.C.] Storage Volume 1 (3)(a)5., F.A.C.] Storage Volume 1 (3)(a)6., F.A.C.]

	EPA ID No. NJD080631369
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 o	f any combination of UW accumulated
Small Quantity Handler (SQH) = always less than 5,000 kg accur	nulated
Mercury-containing devices LQH = 100 kg (220 lb) or more acc Mercury-containing devices SQH = less than 100 kg accumulated	-
Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lamp	oc) or more accumulated by for-hire handler
Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamp	· · · ·
[Note: 4 lamps = 1 kg, 62-737.200(10)]	no parametrical de la constanti de la constant
Pharmaceuticals LQH = 5,000 kg or more of universal pharmace	utical waste (UPW) accumulated
Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazard	
Pharmaceuticals SQH = always less than 5,000 kg of UPW and a	
(1) For those Managing Generate/ (see note in	(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	40,000 lbs
b. Pesticides	10,000 lbs
c. Pharmaceuticals	25,000 lbs
d. Mercury Containing Devices	10,000 lbs
e. Mercury Containing Lamps	40,000 lbs
· · · · · · · · · · · · · · · · · · ·	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 storage prior to recycle.	y, a facility must treat, dispose or recycle a UW. A permit is required for cling.
(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	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.
(6) Used Oil Filter a. Transporter b. Transfer Facility c. Processor	Signature of Authorized Person Denise Krous, Permits Administrator Print Name of Authorized Person
applicable, enclose a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection.	 (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.	NJD0	80631369
D. Othe	r State Regulate	d Waste Activities:	_	-	PCW) Handler [Chamit may be required to	-
your faci	lity. List them in	rederally Regulated I the order they are prese ers list codes routinely of	nted in the regulation	ns (e.g., D001, D003,	F007, U112).	ardous wastes handled at re needed.
Ī	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
11. Oth	er Status Char	iges (Mark 'X' in all t	hat apply):			
	(1) Business no (2) Waste gener (3) Other (expla	gulated Waste at This longer generates, transparted by business has beautin)	oorts, treats, stores, o en delisted.			
в. гас	be handling (2) Out of Busin address, and Contact Address	is location and moved of gregulated waste there. ness - Business closed of phone number where y	npou can be reached at	(Date).	Please provide a cont	·
	C. Property T	ax Default	D. Pet	ition for Bankruptc	y Protection	
in accord informati for subm facility, I	ance with a syste on submitted is, t itting false inforn am aware that tra	m designed to assure that to the best of my knowle	at qualified personne edge and belief, true, sibility of fine and in mply with the require	I properly gather and accurate, and complemprisonment for knownents of Rule 62-73	evaluate the informate ete. I am aware that the wing violations. If I b 0.171, FAC, and Rule	ere are significant penalties nave notified as a transfer
		septative ,		Print Name and	Title 	(mm-dd-yyyy)
	we g	Ven	Denise	Krous, Permits	Administrator	2/18/2011
		7				
If the po	erson who filled	in this form is not the l	Facility Contact or	Operator, please co	mplete the informati	on below:
(Name o	f person completi	ng this form)	(Phone Numb	per)	(E-mail Address)	
13. Co	mments:					



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

DEP Form #82-710.901(4)
Form Title Certificate of Liability Insurance
Used Oil Transporters
Effective Date June 9, 2005

Certificate of Liability Insurance Used Oil Transporters Please Print or Type Form

New Hampshire Insurance Compa	ny , (the Insurer)	70 Pine St., New	York, NY 10270
(Name of the Insurer)	,	(Address of the Insurer)	
hereby certifies that it has issued liability in	surance to: Veolia	ES Technical Solut	ions (the Insured),
1 Eden Lane, Flanders, NJ 07 (Address of the Insur	836	whose EPA Identification nu	NJD 080 631 369
(Address of the Insur	ed)		
This insurance complies with the insured's	obligation to demons	trate the financial responsibi	ility 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 am	ounts up to \$5,000,000	less the deductible or
retention of \$ 250,000 for e	ach accident exclusive	e of legal defense costs. If a	a deductible or retention is applied,
its amount may not exceed 10% of the equ	ity of the Insured.		
This coverage is provided under policy pur	ober GL4572700	issued on	07/01/2010
	01/2011	, 1000000 011	(Date)
This coverage is provided under policy number The expiration date of said policy is07/	(Date)	the annual renewal date is _	(Date)
2. The Insurer further certifies the following w	ith respect to the insu	rance described in Paragrap	oh 1:
a. Bankruptcy or insolvency of the insured	shall not relieve the li	nsurer of its obligations unde	er this policy.
b. The Insurer is liable for the payment of by the Insured for any such payment made		eductible applicable to the po	olicy, with a right of reimbursement
c. Whenever requested by the Secretary (Insurer agrees to furnish to the Departmen			
d. Cancellation of the insurance, whether expiration or non-renewal), will be effective of such written notice is received by the Se	only upon written not	tice and only after the expira	ition of thirty (30) days after a copy
e. The Insurer shall not be liable for the pa accidents which occur after the termination the Insurer for the payment of any such jud	of the insurance des	cribed herein, but such term	ination shall not affect the liability of
I hereby certify that the Insurer is licensed surplus lines insurer, in one or more States		ss of insurance, or eligible to	o provide insurance as an excess o
Signature of Insurer or Authorized Represent	ative)	Authorized Repres	entative of
,		Note Homochine	e Insurance Company
Laura M. Oliver (Type Name)		(Name of Insurer)	5 Insurance Company
Assistant Vice President	1000	Main St., Suite 3000	O, Houston, TX 77002
Title)	(Address	of Representative)	

Page 1 of 2

DEP Form #62-710,901(4)
Form Title Cartificate of Liability
Insurance, Used Oil Transporters
Effective Date June 9, 2005

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 4555, Department of Environmental Protecti on 2600 Blair Stone Road, Tallahassee, FL 32399-2400, Phone (850) 245-8754, email: sebrena.bolton@dep.state.fl.us, OR
Phone (850) 245-8755, email: richard.neves@dep.state.fl.us



FDEP, MS 4555, 2600 Blair Stone Road Tallahassee, Florida 32399-2400

DEP Form #62-710.901(3)
Form 11tle Annual Record by Used Oil
and Used Oil Filler Handlers
Effective Data June 9, 2005

Annual Report by Used Oil and Used Oil Filter Handlers*
(*Handlers are any persons subject to the registration requirements of rule 62-710.500 and 62-710.850, F.A.C. [See Section A, Box 5 below])
for reporting period January 1, 2008 through December 31, 2008
Use the information recorded in your Record Keeping Form (62-710.901(2)) or equivalent) to complete this document

SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS			
. Company Name:	2. Te	lephone No. ()_	
Site Address:			·
	3.	EPA ID No	
o Check box if any of the above items (1-3) have changed	since your last registration		
Name of person preparing report (please print) <u>Jane</u>			
Title Technical Service Representative Pho		n #2. above) (409.) (25-3206
5. Type of operation (check as many as apply to your operation of the contemporation of	er/Aggregation Point o Prod		
SECTION B USED OIL (TO BE COMPLETED BY ALL REGISTERED	USED OIL HANDLERS. USE	OIL FILTER HANDLERS	SEE SECTION C)
Amount (in gallons) of Used Oil and Oily Wastes collected a. In Florida	770 1865	Mixed	a 855
b. From out of state			
d. Total (sum of totals fr	rom Lines a + b + c)	 	
		In State	Out of State
Amount (in gallons) of Used Oil and Oily Wastes Managed		_	
N - Not an end use, transferred to another facility for	storage or processing	0	2855
O - Marketed as an on-specification used oil fuel		0	
F - Marketed as an off-specification used oil fuel	••••••		
i - Marketed for an industrial process	***************************************		
B - Burned as an off-specification used oil fuel	••••••	. 0	
D - Disposed of Landfilled Treated at a wastewater treatment u		. 0	
I reated at a wastewater treatment u			
3. Total amount (in gallons) of used oil managed			2855
4. End of year, on hand estimate (Difference between Lines	1D and Line 3)		

DEP Form #82-710.901(3))
Form Title Annual Report by Used Oil
and Used Oil Filter Handlers
Effective Date June 9, 2005

SECTION C USED OIL FILTERS (OPTIONAL) (USE TABLE BELOW FOR CONVERSIONS	CHECK COLUMN IF OUT OF STATE
Number of filters on hand from previous year	
2. Number of used oil filters collected	
3. Total number of used oil filters to manage (1 plus 2)	
Disposition of used oil filters collected: a. Transferred to another registered facility	0
b. Burned for energy recovery at a Waste-To-Energy facilit	
c. Transferred directly to a metal foundry for recycling	
d. TOTAL	
5. End of year, on had estimate (Difference between Lines 3 and Line 4d)	
6. Gallons of used oil collected as a result of filter processing	
7. Gallons of used oil transferred to a used oil handler (transporter or processor)	
8. Volume of oily waste collected and managed as a result of filter processing	
9. Description of oily waste management	\sim

DIRECTIONS FOR SECTION C

Conversion Table

One 55-gallon drum of <u>crushed</u> used oil filters = approximately <u>400</u> used oil filters

One 55 gallon drum of <u>uncrushed</u> used oil filters = approximately <u>250</u> used oil filters

One ton of drained used oil filters = approximately <u>2,350</u> used oil filters

- 1. Enter the number of Used Oil Filters on hand, from previous year's inventory.
- 2. Enter the number of Used Oil Filters collected.
- 3. Enter the sum of Line 1 + Line 2.
- 4. Enter the number of filters managed by your facility in blocks 4a-c. Enter the sum of 4a-c in block 4d.
- 5. Enter the number of filters on hand at your site as of December 31, last year.
- 6. Fill in the number of gallons of used oil collected by your filter operation.
- 7. Enter the number of gallons transferred to a used oil transporter or processor.
- 8. List the volume (gallons or cubic yards) of the oily wastes collected through your filter handling. Oily wastes are identified in Chapter 62-710.201(1) of the Florida Administrative Code and include bottom sludges, sorbents, wipes etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

Any questions concerning this form may be referred to the Used Oil Coordinator, MS 4560, Department of Environmental Protection 2600 Blair Stone Road, Tallahassee, FL 32399-2400, Phone (850) 245-8754, email: sebrena.bolton@dep.state.fl.us, OR Phone (850) 245-8755, email: aprilia.graves@dep.state.fl.us

Page 2 of 2



Twin Towers Office Bidg. 2600 Blair Stone Road Tailahassea, Florida 32399-2400

DEP Form MSZ-710,801/2)
Form Tibe Ligad Oil and Mend Oil Filler
Recoive Date June 9, 2005

Used Oil and Used Oil Filter Record Keeping Form

Rule 62-710.510 of the Florida Administrative Code requires each registered person to maintain records on either this or a substantially equivalent form which contains the same information. This information must be kept on-site for three (3) years and be available for inspection by DEP during normal business hours. Used Oil Filter information is optional (but recommended), the Used Oil from filter management must be recorded and reported.

Mark "X" if not Florida State Name, Street Address, City, State, Zip Code, **Destination of Used Oil Alsed Oil Filters** Balor EPA ID Number, if applicable Huy 73, 3.5 m: ks w. of Taylou's Port Arthur, TX 77640 Veolia Es Technical Solutions 2 1 =_ = = 1XD000838896 = = = 1 = = = = **Se** 000 0000 \geq \geq \geq \geq ₹ 2 2 178 088 889 ųì 4 H H H H **Gallons of** No pesn 0 N 55 011 011 55 220 58 0 N Number of 01/4/10 01/5/50 FLD984239013 05/11/10 06/2/10 0/16/9 03/1/10 0/6/90 01/11/10 Name, Street Address, City, State, Zip Code, 33605 FUD984171470 FLD982141137 Tampa FL 33605 FLD 004097945 FLD112 360441 FLD982160822 FCD 000631721 FLR000119677 FLR 00007 3122 EPA ID Number, if applicable Broward Collision of Sunsise 10301 NW 50th Street Bay #108 FLD982169682 The clorox Products MFg. Co. The Clorex Resolucts Mfg. Co. 1222 St. Johns Ind. Proy N 6200 Enternational Dride Used Oil Source 3601 E. Columbus Drive From de Power and Light 3702 E. Columbus Torive Thomas Imeson Port Charlotte, FL 33952 Norm's Body and Frame 1855 63rd Avenue East 3138 W. Tharpe Street Bradenton FL 32403 Roslunds Paint & Body Jacksony. 1/e, FL 32346 L-3 Communications allahassec, Fl 32303 19888 Veterans Hwy Delta Airlines Jackie's Auto Body Suncise FL 33351 32927 L PWH CD IN COGT Wet N Wild Orlando FL lampa FL Cocoa Fr 13906

Jacksonville FL 32218	2 8		00147100			1	//					
I. TOTAL COLLECTED		Automotive Ind	Industrial	Mixed	J. TOTAL END USED	USED	End Use Code	Z	0	L	<u> </u>	 ٥
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	Out of State				Page 1 of 2		Out of State	220				



Twin Towers Office Bidg. 2800 Blair Stone Road Tallahassee, Florida 32399-2400

Used Oil and Used Oil Filter Record Keeping Form

Rule 62-710.510 of the Florida Administrative Code requires each registered person to maintain records on either this or a substantially equivalent DEP Form #82-710,801(2)
Form Title Lisad Oil and lisad Oil Filler
Record Kestrino Form
Effective Date June 9, 2005

form which contains the same information. This information must be kept on-site for three (3) years and be available for inspection by DEP during normal business hours. Mark "X" # not Florida State Port Arthur, TX 77440 TYD000838896 Name, Street Address, City, State, Zip Code, **Destination of Used Oil /Used Oil Filters** Veolia Es Technical Solutions Huy 73, 3,5 miles W Taylors Bayou Used Oil Filter information is optional (but recommended), the Used Oil from filter management must be recorded and reported. EPA ID Number, if applicable = = -= Code **8** Ľ H 14 **Gallons of** Used O 0= 0// 5 Number of 12/8/10 きてで 1 m/kl 01/68/10 Date on FLD984257097 Name, Street Address, City, State, Zip Code, FLD 112360441 BOLLOOALOO COA allahassee, Fr. 32304 ELD984 EPA ID Number, if applicable Universal Collision Center 2751 W. Tennesser Street Used Oil Source 33764 13350 USHWY 19, North 13906 Thomas Imeson 32218 BecKman Coulter 11800 SW 14715 Ave Miam: ,FL 33196 Delte Airlines Jacksonville, Pe Clearwater FL 11つのかいの1

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-	Out of State				Page 1 of 2	Out of State	345						

I. TOTA



Twin Towers Office Bidg. 2800 Blair Stone Road Tallahassee, Florida 32399-2400

Used Oil and Used Oil Filter Record Keeping Form

Rule 62-710.510 of the Florida Administrative Code requires each registered person to maintain records on either this or a substantially equivalent form which contains the same information. This information must be kept on-site for three (3) years and be available for inspection by DEP during normal business hours. Used Oil Filter information is optional (but recommended), the Used Oil Filter information is optional (but recommended), the Used Oil filter information is optional (but recommended).

DEP Form #82-710.801(2)
Form Title Lisas Oil and Used Oil Filter
Record Kessins Form
Effective Date Aure 9, 2005

¥	B,	ij	O	'n	e.	A. B. C. D. E. F. G.	Ŧ
Used Oil Source Name. Street Address. City. State, Zip Code,	Oafe Oafe	Number of Filters	Gallons of Used Oil	2 8 8	End	Destination of Used Oil Assed Oil Filters Name, Street Address, City, State, Zip Code.	State
EPA ID Number, if applicable					Code	EPA ID Number, if applicable	Mark "X" if not Florida
13-4 Auto Body by Craftmaster 135 Palmetto Avenue				l	,,,	Veolia Es Technical Solutions Huy 73, 3.5 miles W Taylors Payou	
merci++ Island Fe 32952 FCRO001502207121/10	ط ابداره		0	1	>	Port Arthur, TX 77640	
Braman Collision Center						[1]	
	- 100		χv	<u></u>	/ *		
Miam: FL 33137 FLR 000105478	2 2 2 2 3		00	7	2		
1875 Sw 4th Avenue, C-1	08/12/10		55	4	2	,,	
Lockherd Martin Coro FUD981473861					•	11	
100 East 17th Street	•		100		•		
Riviera Beach Fr. 33404	श राष्ट्रि	,	385	7	5		
Prayair 401 W. Government Street	08/16/16		011	14	3	11	
TO 0140							
2330 Commerce Park Dr. Palm Bay, FC 33905	क कि वि		35	H	\sim	11	
Lockheed Martin Corp 100 East 17th Street 13. 13. 05 Beach FL FUD 481473861 11 3/10	11 3/10		550	H	3	11	
the house	11/30/10		110	7	N	11	
Jackie's Auto Body Fr. Robo 073122 19888 Veteras HWY PARTEHACHAME, FL 33952	01/08/11		110	T	N		

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VEOLIA ES TECHNICAL SOLUTIONS, L.L.C.

Denise Krous, Permits Administrator 1 Eden Lane Flanders, NJ 07836 (973)691-7321, Fax (973)691-3978 E-mail: Denise.Krous@VeoliaES.com

Memorandum:

DATE:

2/25/2011

TO:

Florida Department of Environmental Protection

FROM:

Denise Krous

RE:

Used Oil Transporter Training Manual submittal of

2010

To Whom It May Concern:

Veolia ES Technical Solutions, L.L.C. submitted our Used Oil Transporter Training Manual with the renewal submittal of 3/1/2010.

There has been no changes made to this manual or training program in place at this time.

Denise Krous, Permits Administrator