

# 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

May 09, 2011

Wes Pace Landstar Express America Inc 13410 Sutton Park Dr. S Jacksonville, FL 32224

Re: Florida Hazardous Waste Transporter Approval

Dear Wes Pace:

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.
- 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.

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

**Engineering Specialist IV** 

Aprila Junes

Hazardous Waste Regulation Section

ΑG

Enclosures: Hazardous Waste Transporter Approval Certificate

Hazardous Waste Transporter Status Form (with insurance verification)

Sections  $\underline{62-730.170}$  and  $\underline{62-730.171}$  , FAC



# Florida Department of Environmental Protection

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

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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: Landstar Express America Inc

FACILITY ID NO: FLR000099945

FACILITY ADDRESS: 13410 Sutton Park Dr S # C

Jacksonville, FL 32224-5270

INSURANCE CARRIER: NATIONAL UNION FIRE

INSURANCE POLICY#: CA294-67-33

EFFECTIVE DATE: May 01, 2011

EXPIRATION DATE: May 01, 2012

APPROVED TRANSFER FACILITY:

APPROVAL ISSUED BY:

\_\_\_\_\_\_ DATE: May 09, 2011

Aprilia Graves

**Engineering Specialist IV** 

Hazardous Waste Regulation Section

850/245-8755

## STATE OF FLORIDA

Received

APR 29 2011

### **HAZARDOUS WASTE TRANSPORTER STATUS FORM**

	Transporter Identification: Transporter Name: LANdstar Express America INC
	Transporter EPA ID: <u>F1R</u> <u>000</u> <u>699</u> <u>945</u>
	Location Address: 13410 Sutton Park Dr. S.  JACKSONVIlle FL 32224
Contact	
	Address: 13410 Sutton Park Dr. S.
	JACKSONVIlle, FL 32224
	Insurance Information: Insurance Company Nationa Union Fire Insurance Company of Rets burgs, PA
	Address 175 Water St., 184 Floor
	Contact: Telephone:
	Policy Number: <u>CA 294 · 67 · 33</u> Expiration date: <u>5 - 1 - 2012</u>
III.	Waste Information:
	EPA Waste Codes for Waste Routinely or Usually Transported:
1	DO01 D002 D003
	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 ki	nowledge.
W	pe Name DIRECTOR, HAZMAT & TRAde Compliance Title  4-27-11
Print/Ty	pe Name / Title
11	4-27-11
Signatu	
*****	**************************************
V.	The transporter identified above is in compliance with the financial responsibility requirements
	ardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The

APPROVED by Tiffaney A. Noland, changes approved by the Certifier by phone 5/1/2011

Signature of Florida Department of Environmental Protection Representative Date Signed

DEP Form 62-730.900(5)(d) Effective 1/5/95

through

HW Transporter Status Form Page 1 of 1

Landstar Transportation Logistics, Inc. 13410 Sutton Park Drive, South Jacksonville, FL 32224 904 398 9400

LANDSTAR EXPRESS AMERICA, INC.

Received

APR 29 2011

**BSHW** 

April 12, 2011

Dept. of Environmental Protection DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

Dear Ms Aprilia,

Enclosed please find the Hazardous Waste Transporter Status Form & the Florida Notification of Regulated Waste Activity form. As requested, we have also attached the Certificate of Liability Insurance & copy of our MCS-90 to renew Landstar Express America, Inc.'s license for the year 2011-2012.

Please e-mail our new license to wpace@landstar.com & jroszel@landstar.com and mail the original to:

Landstar Express America, Inc. 13410 Sutton Park Dr. S. Jacksonville, FL 32224-5720 Attn: Dianna White

If you should have any questions concerning this application, please call me at 1-800-872-9430 or send an e-mail to the above address.

Respectfully,

Jeri Roszel

Legalization Representative



# 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 FDDP Official Use Only)

EPA ID F L R	000099945	MIS		Keres ImpAA		
1. Reason for		otification (to obtain	an EPA ID Num	ber for hazardous		
Submittal						
	information).					
	☐ Is this the <b>final noti</b>	fication (see instruction	ons) for the facili	ity?		
2. Facility or			FEID	No.		
and the second s	LANdstar Express Amer Name of Operator:	ICA INC.	50	61687151		
3. Facility Operator	Name of Operator:		☐ New Opera			
(List additional				Date became Operator://		
Operators in the	FINASUNI PIPICOS I MICITALISMO			mm dd yy		
comments section).	Street or P.O. Box: 13410 Sutton Park	Dr. S.	8	Number: 00-872-9400		
	City or Town: JACKSON VIlle		State: FL	Zip Code: 32224		
	Operator Type: Private Federal	Municipal S	State Other			
4. Facility Physical	Physical Street Address:	tou D. V	7) (			
Location	City or Town	SON TAKK	State: EI	7in Code:		
Information	City or Town: JACKSONVIII		FL	Zip Code: 32224		
	Choose Duval  If available, please attach a map or sketch of the facility boundaries.					
	Latitude:           .   Longitude:           .   Method:  d d m m s s . ssss d d m m s s . ssss Datum:					
5. Facility North Am		1	В.			
Classification Syst	tem (NAICS)		D.			
Code(s)						
6. Facility or Business Mailing	Street Address or P.O. Box: 13410 S	utton Park	Dr. S.			
Address	City or Town: JACKSONVI /	the state of the s	State: FL	Zip Code: 32224		
7. Facility or	The second secon					
<b>Business Contact</b>	First Name: Wes		e	Title: DIRECTOR HAZMAY		
Person	First Name: Wes  Phone Number: 800 - 872 - 9400	The state of the s	E-Mail:	DIRECTOR, HAZMAT		
	Wes Phone Number: 800 - 872 - 9400 Street or P.O. Box:	Extension: 4815	E-Mail:			
	We.s Phone Number: 800 - 812 - 9400	Extension: 4815 Park Dr.	E-Mail:	DIRECTOR, HAZMAT		
	Wes  Phone Number:  800-872-9400  Street or P.O. Box:  13410 Satton	Extension: 4815 Park Dr.	E-Mail:  WPACE@./A  S.  State:  FL  New Owner	DIRECTOR, HAZMAT  ANDSTAT. COM  Zip Code:  32224		
Person  8. Real Property (Land) Owner	Phone Number: 800-872-9400  Street or P.O. Box:  13410 Satton  City or Town:  Sack sonuille  Name of Real Property (Land) Owner:	Extension: 4815  Park Dr.	E-Mail:  WPACE@./A  S.  State:  FL  New Owner	DIRECTOR, HAZMAT  ANDSTAY. COM  Zip Code:  32224		
Person  8. Real Property (Land) Owner of the Facility's	Phone Number: 800-872-9400  Street or P.O. Box:  13410 Satton  City or Town:  Sack sonville  Name of Real Property (Land) Owner:  Landstar System Holdings	Extension: 4815  Park Dr.	E-Mail:    WPACE@.   A     State:   FL   New Owner   Date became	DIRECTOR, HAZMAT  ANDSTAY. COM  Zip Code:  32224  Owner: 3   15   10  mm dd yy		
8. Real Property (Land) Owner of the Facility's Physical Location	Phone Number: 800-872-9400  Street or P.O. Box:  13410 Satton  City or Town:  Sack sonville  Name of Real Property (Land) Owner:  Landstar System Holdings  Street or P.O. Box:	Extension: 4815  Park Dr.	E-Mail:  WPRCE@.   A  State:  FL  New Owne  Date became	Diesctor, HazMat  Andstar. Com  Zip Code:  3222 4  er  Owner: 3   15   10  mm dd yy  e Number:		
8. Real Property (Land) Owner of the Facility's Physical Location (List additional	Phone Number: 800-872-9400  Street or P.O. Box: 13410 Satton  City or Town:  Sacksonville  Name of Real Property (Land) Owner:  Landstar System Holdings  Street or P.O. Box: 13410 Sutton Park	Extension: 4815  Park Dr.	E-Mail:    WPRCS@.         State:   FL   New Owner   Date became       Phon-   90	Diesctor, HazMat  2Ndstar. Com  Zip Code:  3222 4  21  Owner: 3   15   10  mm dd yy  e Number: 4-398-9400		
8. Real Property (Land) Owner of the Facility's Physical Location	Phone Number: 800-872-9400  Street or P.O. Box:  13410 Satton  City or Town:  Sack sonville  Name of Real Property (Land) Owner:  Landstar System Holdings  Street or P.O. Box:	Extension: 4815  Park Dr.	E-Mail:  WPRCE@.   A  State:  FL  New Owne  Date became	Diesctor, HazMat  Andstar. Com  Zip Code:  3222 4  er  Owner: 3   15   10  mm dd yy  e Number:		

NAC	EPA ID No. FLR 000 099 945			
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	For Items 2 through 7, mark 'X' in all that apply.  (2) Treater, Storer, or Disposer of Hazardous Waste			
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	(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.			
In addition, indicate other generator activities that apply.  d. United States Importer of hazardous waste  e. Mixed Waste (hazardous and radioactive)  Generator	(6) Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste.			
(7) K 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 National National Fire. Fivsurance Company of Pitts burgh, Ph  Address				
Florida Administrative Code (F.A.C.)]:	ity [Rule 62-730.171(3)(a)3., F.A.C.] operations [Rule 62-730.171(3)(a)4., F.A.C.] 171(3)(a)5., F.A.C.] Rule 62-730.171(3)(a)6., F.A.C.]			

	EPA ID No. FLR 000 099 945		
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 Small Quantity Handler (SQH) = always less than 5,000 kg accum			
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 pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazard	at 15 at 15		
Pharmaceuticals SQH = always less than 5,000 kg of UPW and al	ways 1 kg or less of acutely hazardous UPW accumulated		
	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  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.)	[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.		
a. Transporter b. Transfer Facility c. Processor	Signature of Authorized Person  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.	FLR OOD	099 945
D. Other	r State Regulated Waste A	Activities:			CW) Handler [Chanit may be required	apter 62-740, F.A.C.] for this activity.
your facil	ste Codes for Federally lity. List them in the order is waste transporters list co	they are presented i	n the regulations (e	e.g., D001, D003, I	F007, U112).	
' Doo	1 2002	32003	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 Changes (Ma	ark 'X' in all that a	pply):			
	(1) Business no longer go (2) Waste generated by b (3) Other (explain)	nusiness has been de low - HANDLE n and moved or mored waste there.	ving to another - su	ıbmit a new Form	8700-12FL for the	
	address, and phone n				en Constitution (Constitution of the Constitution of the Constitut	
	Contact					
	Address					
П	C. Property Tax Defau		D. Petitio	n for Bankruptcy	Protection	
in accord informat for subm	lance with a system designation submitted is, to the best	ed to assure that quant of my knowledge a cluding the possibili	alified personnel pr and belief, true, acc ity of fine and impr	operly gather and curate, and comple isonment for known	evaluate the inform te. I am aware that ving violations. If	there are significant penalties have notified as a transfer
Signatu	re of owner, operator,		P	rint Name and	Title	Date Signed (mm-dd-yyyy)
1	lle Ver		Wes Pace	: DIRECTOR	HAZMAT	4-27-11
0	The last of the la		1000 7000	) FIRECTOR	THE PORT	
	erson who filled in this fo	rm is not the Facil	800-872-9		The state of the s	tion below: Andstar.com
	of person completing this for	orm)	(Phone Number)		E-mail Address	
13. Co	mments:					

Received

DEP Form # 17-730.900(5)(a) Form Title: HWF Transporter Certificate of

Liability Insurance Effective Date: 1-29-06 DEP Application #

1.

MAR 25 2011

**BSHW** 

## STATE OF FLORIDA HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY

INSURANCE

Primary: N Excess: T	ational Union Fire Insurance Company of Pittsburgh, Pennsylva he Insurance Company of the State of Pennsylvania
	(Name of Insurer)
(the "Imaxima") .	of 70 Pine Street, New York, N.Y. 10270
(the insurer), o	(Address of Insurer)
	(Address of insurer)
	that it has issued liability insurance covering bodily injury and property damage including estoration for sudden accidental occurrences to
TANDOTAD E	EXPRESS AMERICA, INC.
LANDSTAK E	(Name of Insured)
	(Name of insured)
(the "Insured").	of 13410 Sutton Park Dr. South, Jacksonville, FL 32224
, ,,,	(Address of Insured)
in connection wi	ith the insured's obligation to demonstrate financial responsibility under Florida
	Code Rule 62-730.170. The coverage applies at:
EPA/DEP I.D. N	No. Name Location
FLR00009994	Landstar Express America, Inc. 13410 Sutton Park Dr. South jacksonville, FL 32224
	Judition III .
(If coverage is for	or multiple facilities, identify each facility insured.)
	or multiple facilities, identify each facility insured.)
This insurance is	or multiple facilities, identify each facility insured.) s primary and the company shall not be liable for amounts in excess of
This insurance is \$1,000,000	or multiple facilities, identify each facility insured.)  s primary and the company shall not be liable for amounts in excess of for each accident, exclusive of legal defense costs. The coverage is provided
This insurance is \$1,000,000	or multiple facilities, identify each facility insured.)  s primary and the company shall not be liable for amounts in excess of for each accident, exclusive of legal defense costs. The coverage is provided mber CA 294-67-33, issued on 5/1/11.
This insurance is \$\frac{1,000,000}{under policy number 1.000 to 1	or multiple facilities, identify each facility insured.)  s primary and the company shall not be liable for amounts in excess of  for each accident, exclusive of legal defense costs. The coverage is provided mber CA 294-67-33, issued on 5/1/11  (date)
This insurance is \$\_1,000,000\\ under policy nur\ The effective da	s primary and the company shall not be liable for amounts in excess of  for each accident, exclusive of legal defense costs. The coverage is provided mber CA 294-67-33, issued on 5/1/11  (date)  (date)  (date)
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This insurance is \$\frac{1,000,000}{0.000} under policy number feetive date is \$\frac{5/1/12}{1.000,000}.	or multiple facilities, identify each facility insured.)  s primary and the company shall not be liable for amounts in excess of  for each accident, exclusive of legal defense costs. The coverage is provided mber CA 294-67-33, issued on 5/1/11  (date)  the of said policy is 5/1/11 and the expiration date of said policy (date)  (date)  (date)  (date)  (s excess and the company shall not be liable for amounts in excess of for each accident in excess of the underlying limit of
This insurance is \$\frac{1,000,000}{0.000}\$ under policy number of the effective date is \$\frac{5/1/12}{1,000,000}\$ This insurance is \$\frac{4,000,000}{1,000,000}\$	or multiple facilities, identify each facility insured.)  s primary and the company shall not be liable for amounts in excess of  for each accident, exclusive of legal defense costs. The coverage is provided mber CA 294-67-33, issued on 5/1/11  (date)  ite of said policy is 5/1/11  (date)  (date)  (date)  (date)  (date)  (s 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
This insurance is \$\frac{1,000,000}{0.000}\$ under policy number of the effective date is \$\frac{5/1/12}{1,000,000}\$ This insurance is \$\frac{4,000,000}{1,000,000}\$	or multiple facilities, identify each facility insured.)  s primary and the company shall not be liable for amounts in excess of  for each accident, exclusive of legal defense costs. The coverage is provided mber CA 294-67-33, issued on 5/1/11  (date)  (date)  (date)  (date)  (s 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 mber CA 294-67-36, issued on 5/1/11. The effective date of
This insurance is \$\frac{1,000,000}{1,000,000}\$  The effective date is \$\frac{5/1/12}{1,000,000}\$  This insurance is \$\frac{4,000,000}{1,000,000}\$  under policy number 1000.	or multiple facilities, identify each facility insured.)  s primary and the company shall not be liable for amounts in excess of  for each accident, exclusive of legal defense costs. The coverage is provided mber CA 294-67-33, issued on 5/1/11  (date)  the of said policy is 5/1/11 and the expiration date of said policy  (date)  (date)  (date)  (s 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 mber CA 294-67-36, issued on 5/1/11  (date)  The effective date of (date)
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- 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.

Grant a Dans	
(Signature of Adthorized Representative of Insurer)	
Joseph A. Davide	
(Typed name)	
Authorized Representative (Title)	
Authorized Representative of	
National Union Fire Insurance Company of Pittsburgh, Insurnace Company of the State of Pennsylvania	Pennsylvania
(Name of Insurer)	
70 Pine Street, New York, N.Y. 10270	
(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.