



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

05/17/2011

Greg Williams, Corporate Waste Compliance Manager

Eagle-SWS

901 McClosky Blvd

Tampa, FL 33605-6717

The Florida Department of Environmental Protection has reviewed your form 8700-12FL notification for a new hazardous waste DEP/EPA Identification Number or status/information change. Based on the information received you must use the following identification number for all manifests or reports for **Eagle-SWS** located at **6900 NW 12th Ave, Fort Lauderdale , FL33309-1103**

FLD099077257

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not require a separate submission: Conditionally Exempt SQG; Small Quantity Handler, Universal Waste Batteries, Universal Waste Battery Transporter, Universal Waste Pesticide Transporter, Universal Waste Lamps.**

Your facility is **currently registered** for the following activities: **UW Lamp Transporter, UW Device Transporter (reg exp on 03/01/12); HW Transporter (reg exp on 05/05/12) ; Used Oil Transporter, Used Oil Filter Transporter (reg exp on 06/30/2012).**

Your facility is **currently permitted** as: **No Active Hazardous Waste Treatment, Storage, or Disposal Permit.**

If you have pending program registrations/certifications or permits, these will be mailed separately. You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status, activity or contact information. The form is found here:

<http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm>.

To review the details of your status, visit:

http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLD099077257.

For further assistance, please e-mail a Notification Coordinator at EPOST_HWreg@dep.state.fl.us or call us at (850)245-8707.

Sincerely,


FOR

Glen Perrigan
Environmental Manager
Hazardous Waste Regulation Section

ME ID: 58751 , Email Address: greg.williams@eaglesws.com



A "Progressive Environmental" Company

Alabama | Florida | Georgia | Illinois | Indiana | Kentucky
Louisiana | North Carolina | Ohio | Tennessee | Texas

Received

MAY 05 2011

BSHW

May 4, 2011

Aprilia Graves – Used Oil & Hazardous Waste Transportation Coordinator
FDEP Bureau of Solid & Hazardous Waste, MS 4550
Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, Florida 32399-4550

RE: Florida Hazardous Waste Transporter Certificate Renewal Application Submission(s)
(2011-2012) Covering:
Eagle-SWS - Tampa Bay Service Center (FLR-000-012-823)
Eagle-SWS - Largo Service Center (FLR-000-122-796)
Eagle-SWS - Panama City Beach Service Center (FL0-000-936-831)
Eagle-SWS - Ft. Lauderdale Service Center (FLD-099-077-257)

Dear Aprilia:

Enclosed please find the completed and executed Hazardous Waste Transporter Status Forms (DEP Form 62-730.900(5)(d) and 62-730.900(1)(b) [aka 8700-12FL] for our four (4) Florida Eagle-SWS Service Center locations; referenced above.

The Certificate of Insurance renewal documents have been sent directly to your office by our insurance carrier; which names the FDEP as a Certificate Holder; a copy has been provided in this mailing.

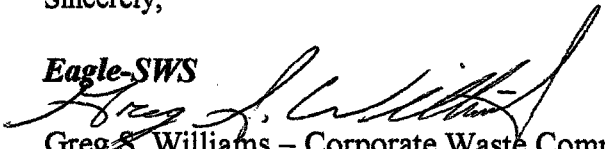
Please note that the FDEP - Used Oil & Used Oil Filter Transporter renewal applications were submitted in back March, 2011, along with our Used Oil & Oil Filter Transporter annual reports; this included payment at that time for \$100.00 for each of the four (4) applications.

We have been waiting on our insurance renewals to be completed. I have provided a copy of our Certificate of Liability Insurance – Used Oil Transporters and the original has been sent directly to you office by our insurance carrier. Please review, approve, and issue our Used Oil & Oil Filter Transporter permits at your earliest convenience.

If you have any questions in this matter, please contact me during normal business hours at (813) 241-0282 or anytime at (727) 638-0049.

Sincerely,

Eagle-SWS


Greg S. Williams – Corporate Waste Compliance Manager
enclosures



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)

EPA ID FL0099077257

MIS

RCRA Info

1. Reason for
Submittal

Mark 'X' in
correct box:

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

2. Facility or
Business Name

Eagle-SWS

FEID No.

263604581

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

Name of Operator:

Eagle-SWS

☐ New Operator

Date became Operator: 1/1/
mm dd yy

Street or P.O. Box:

6900 NW 12th Avenue

Phone Number:

City or Town:

Ft. Lauderdale

State:

FL

Zip Code:

33309

Operator Type: ☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other

4. Facility Physical
Location
Information

Physical Street Address:

6900 NW 12th Avenue

City or Town:

Ft. Lauderdale

State:

FL

Zip Code:

33309

County:

Choose

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

Latitude: 26^{dd} 12^{mm} 34^{ss} ^{ssss}

Longitude: 80^{dd} 19^{mm} 35^{ss} ^{ssss}

Method:

Datum: Google map

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

A.

562998

B.

562910

C.

562112

D.

6. Facility or
Business Mailing
Address

Street Address or P.O. Box:

901 ME Chesley Blvd.

City or Town:

Tampa

State:

FL

Zip Code:

33605-6717

7. Facility or
Business Contact
Person

First Name:

Greg

Last Name:

Williams

Title:

corp. waste compliance mg.

Phone Number:

(813) 241-0282

Extension:

E-Mail:

greg.williams@Eagle-SWS.com

Street or P.O. Box:

City or Town:

State:

Zip Code:

8. Real Property
(Land) Owner
of the Facility's
Physical Location
(List additional
real property owners
in the comments
section.)

Name of Real Property (Land) Owner:

Amston Investments, LLC

☐ New Owner

Date became Owner: 1/1/
mm dd yy

Street or P.O. Box:

1420 SW 28th Avenue

Phone Number:

(954) 979-0707

City or Town:

Pompano

State:

FL

Zip Code:

33069

Owner Type: ☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other

9. Type of Regulated Waste Activity (Mark 'X' in all that apply):

A. Hazardous Waste Activities:

For Items 2 through 7, mark 'X' in all that apply.

(1) Generator of Hazardous Waste

(Choose only one of the following three categories.)

- ☐ a. Large Quantity Generator (LQG):
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of *non-acute* hazardous waste; or Greater than 1 kg (2.2 lbs) of *acute* hazardous waste

- ☐ b. Small Quantity Generator (SQG):
Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 lbs.) of *non-acute* hazardous waste and/or 1 kg (2.2 lbs) or less of *acute* hazardous waste

- ☒ c. Conditionally Exempt SQG (CESQG):
Generates in any calendar month 100 kg/mo or less (220 lbs.) of *non-acute* hazardous waste and 1 kg (2.2 lbs) or less of *acute* hazardous waste

In addition, indicate other generator activities that apply.

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

(2) Treater, Storer, or Disposer of Hazardous Waste

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

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

(3) ☐ Recycler of Hazardous Waste (at your facility)Specify: ☐ Commercial; ☐ Non-Commercial.

A permit is required for storage prior to recycling.

(4) ☐ Exempt Boiler and/or Industrial Furnace

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

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

c. Hazardous Waste Transporter Insurance Information

Insurance Company Commercial & Industry Insurance CompanyAddress 175 Water StreetNew York, NY 10038Contact John Harold Telephone (800) 243-6899Policy Number CA 765-38-39 Expiration date 05/05/2012d. Transportation Mode ☐ Air ☐ Rail ☒ Highway ☐ Water ☐ Other - specify _____e. ☐ Hazardous Waste Transfer Facility: Storage Volume _____☐ Initial notification

The following items are required to be submitted with the initial notification for a transfer facility [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:

- ☐ Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]
- ☐ Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.]
- ☐ A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.]
- ☐ A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]
- ☐ A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.]
- ☐ A map or maps of the transfer facility [Rule 62-730.171(3)(a)7., F.A.C.]
- ☐ Notification of changes in above items
- ☐ Annual update notification

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

- ☐ Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more of any combination of UW accumulated
- ☐ Small Quantity Handler (SQH) = always less than 5,000 kg accumulated
- ☐ Mercury-containing devices LQH = 100 kg (220 lb) or more accumulated by for-hire handler
- ☐ Mercury-containing devices SQH = less than 100 kg accumulated by for-hire handler
- ☐ Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler
- ☐ Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler
- [Note: 4 lamps = 1 kg, 62-737.200(10)]
- ☐ Pharmaceuticals LQH = 5,000 kg or more of universal pharmaceutical waste (UPW) accumulated
- ☐ Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste accumulated
- ☐ Pharmaceuticals SQH = always less than 5,000 kg of UPW and always 1 kg or less of acutely hazardous UPW accumulated

(1) For those Managing	Generate/ Accumulate	Transport (see note in instructions)	Handle at Transfer Facility	(2) Enter your estimate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.
a. Batteries	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>500</u>
b. Pesticides	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>2500</u>
c. Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Mercury Containing Devices	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>2500</u>
e. Mercury Containing Lamps	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>2500</u>

(3) Mercury Recovery and/or Reclamation Facility ☐ Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]
[Chapter 62-737, F.A.C.]

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

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

C. Used Oil Activities:

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

- ☒ a. Transporter
- ☐ b. Transfer Facility

(2) ☐ Collection Center

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

(4) ☐ Off-Specification Used Oil Burner

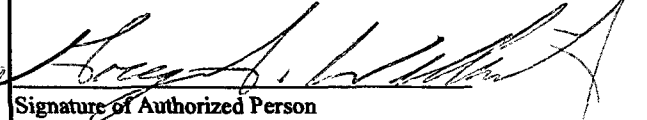
(5) ☐ Used Oil Fuel Marketer

(6) Used Oil Filter

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

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

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



Signature of Authorized Person

Greg S. Williams

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. paid in march w/ Annual Regt & Renewal Application

(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.

FLD099077257

D. Other State Regulated Waste Activities:☐ **Petroleum Contact Water (PCW) Handler** [Chapter 62-740, F.A.C.]

Note: A water facility permit may be required for this activity.

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

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

1 D-001	2 D-002	3 D-004	4 D-005	5 D-007	6 D-008	7 D-009
8 D-018	9 D-040	10 F-001	11 F-002	12 F-003	13 F-005	14 "Per A" listed
15	16	17	18	19	20	21 ***
22	23	24	25	26	27	28

11. Other Status Changes (Mark 'X' in all that apply):**A. Non-Handler of Regulated Waste at This Facility**

- ☐ (1) Business no longer generates, transports, treats, stores, or disposes of hazardous waste
- ☐ (2) Waste generated by business has been delisted.
- ☐ (3) Other (explain) _____

B. Facility Closed

- ☐ (1) Closed at this location and moved or moving to another - submit a new Form 8700-12FL for the new location if you will be handling regulated waste there.
- ☐ (2) Out of Business - Business closed on _____ (Date). Please provide a contact person, mailing address, and phone number where you can be reached after closing.

Contact _____ Phone _____

Address _____

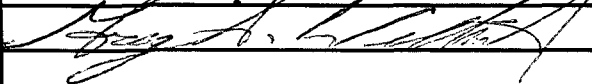
City, State, Zip _____

☐ **C. Property Tax Default**☐ **D. Petition for Bankruptcy Protection**

12. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. If I have notified as a transfer facility, I am aware that transfer facilities must comply with the requirements of Rule 62-730.171, FAC, and Rule 62-730.182, FAC.

Signature of owner, operator, or an authorized representative

Print Name and Title

Date Signed
(mm-dd-yyyy)Greg S. Williams - Corp. Waste
Compliance Manager

05/04/2011

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

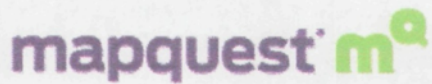
(Name of person completing this form)

(Phone Number)

(E-mail Address)

13. Comments:

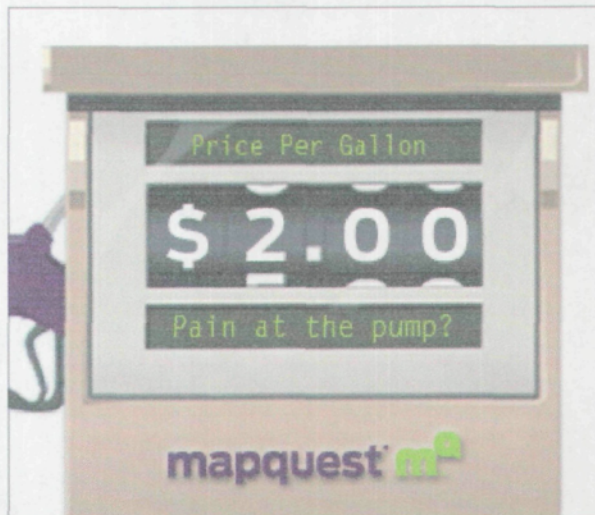
*** other waste codes may be transported as necessary for Emergency spill clean-ups (ie, TSCA PCB-soil/oil/media).



Map of:

6900 NW 12th Ave
Fort Lauderdale, FL 33309-1103

Notes



Sponsored Links

[Greater fort lauderdale](#)

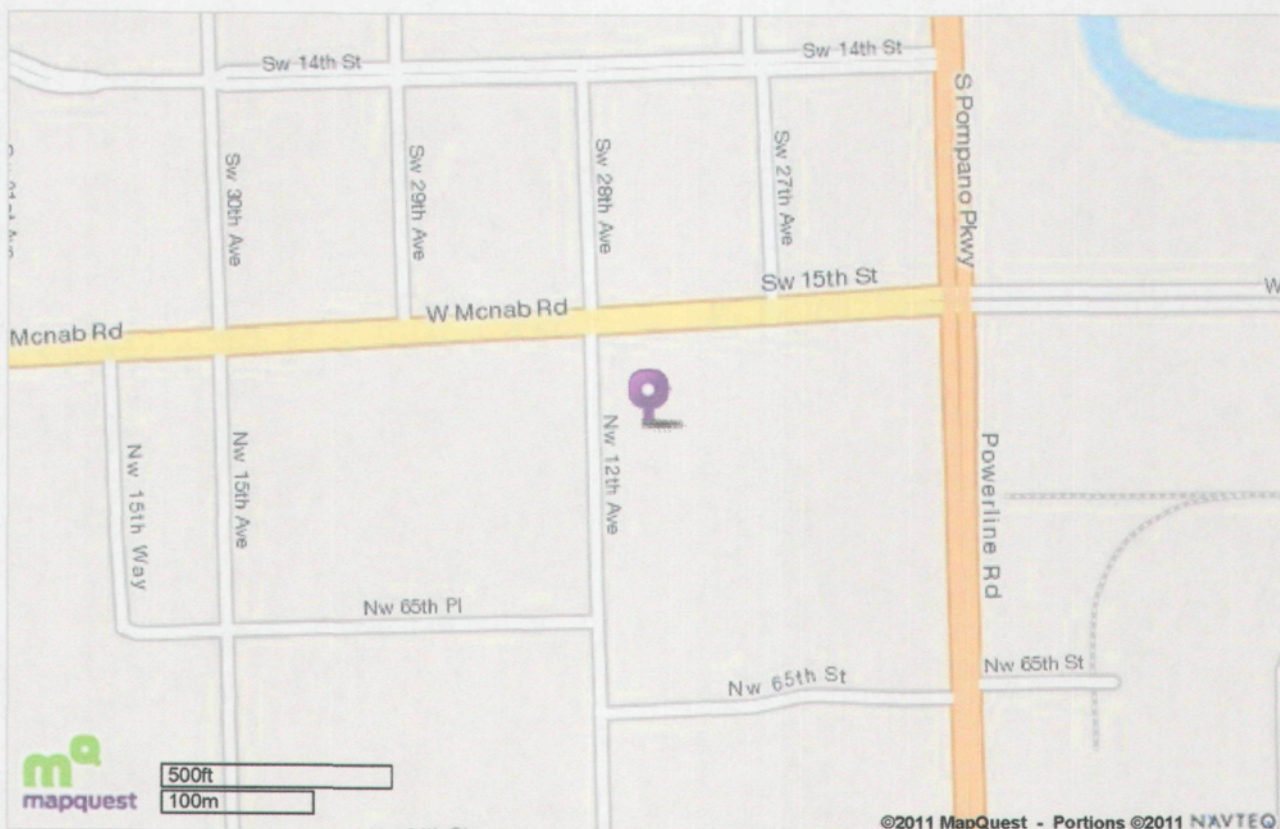
Looking to Relocate Your Business?
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www.gflalliance.org/

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