September 19, 2011

Florida Department of Environmental Protection Hazardous Waste Regulation Section 2600 Blair Stone Road Tallahassee, Florida 32399-2400

Re: Revised Application for Transfer of Permit No. 26916-HO-006; Operation of a Hazardous Waste Storage Unit:

Dear Sir/Madam:

At your request enclosed is a revised application requesting the transfer of Permit No. 26916-HO-006 from Perma-Fix of Orlando, Inc. to Triumvirate Environmental (Florida), Inc. (TEFI). The purchase of this facility by TEFI is anticipated to take place on or about October 11, 2011.

This permit is for Operation of a Hazardous Waste Container Storage Unit, authorizing the storage of hazardous waste within the capacity of the permitted storage unit, and allowing for consolidation of compatible hazardous wastes. This permit also includes operation as a transfer facility holding waste for a period of ten days or less. TEFI intends to operate the facility in compliance with the terms and conditions of the existing permit.

The revised forms, listed below, have been signed and notarized by company officials as required.

- Application for a Hazardous Waste Permit Part 1 General DEP Form 62-730.900(2)(a)
- Application for Hazardous Waste Facility Permit Certification Form 62-730.900(2)(d)

Demonstration of Financial Assurance for facility closure is being submitted by TEFI under separate cover FL DEP Financial Assurance Coordinator in accordance with permit and regulatory requirements.

Please contact James Green, Vice President at 617.413.3639 if there are any questions. Thank you for your assistance.

Sincerely;

Jøhn F. McQuillan, Jr., President/CEO Triumvirate Environmental (Florida), Inc.

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## APPLICATION FOR A HAZARDOUS WASTE PERMIT PART I – GENERAL TO BE COMPLETED BY ALL APPLICANTS

Please Type or Print

A.	General Information
1.	Type of Facility in accordance with Part 270.13(a)  DISPOSAL
	Landfill Land Treatment Surface Impoundment  Miscellaneous Units Type of Unit
	STORAGE
	Containers Tanks Piles
	Surface Impoundment Containment Building
	Miscellaneous Unit  Type of Unit  Type of Unit
	TREATMENT
	Tanks Piles Surface Impoundment
	Incineration Containment Building
	Boiler / Industrial Furnace Type of Unit
	Miscellaneous Unit Type of Unit
2.	Type of application:
	Temporary Operation Permit (TOP)
	Construction Permit
	Operation Permit
	Construction & Operation Permit
	Research, Development & Demonstration (RD&D) Permit  Postclosure Permit
	Clean Closure Plan
	Subpart H Remedial Action Plan
	Equivalency Demonstration
	그들이 사용을 하는 이를 입니다면 그리고 하는 사람들이 되었다.
3.	Revision Number: 2
4.	Date current operation began, or is expected to begin: 03 / 27 / 1987
5.	Facility Name Triumvirate Environmental (Florida), Inc. (Orlando location)
6.	EPA/DEP I.D. NoFLD 980 559 728

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7.	Facility location or s	treet address 10100	Rocket Bouleva	ard, Orlando, Fl	
8.	Facility mailing addr	ess 10100 Rocket Bo	oulevard		
		Orlando	street or	P.O. Box FL	32824
9.	Contact person Jan	city nes Green		state Telephone (4	zip
	Title Vice President				
	Mailing address	10100 Rocket Bo	ulevard		
		Orlando	street or	P.O. Box FL	32824
		city		state	zip
	E-mail address	jgreen@triumvira	te.com		
10.	Operator's name Tr	iumvirate Environmen	tal(Florida), l	Telephone (4	07 )859-4441
	Mailing address	10100 Rock Boul	evard		
		Orlando	street or	P.O. Box FL	32824
11.	Facility owner's nam	city e Triumvirate Enviror	nmental(Floride	state Telephone (40	zip 07 )859-4441
	Mailing address	10100 Rocket Bo	ulevard		
		Orlando	street or	P.O. Box FL	32824
12.	Legal structure	city		state	zip
12.	Corporation	Non-profit corpora	ation Part	nership	Individual
	Local governme			ederal governr	
13.	If an individual, partr the county and state	nership, or business i where the name is r	s operating und egistered.	der an assume	ed name, specify
	County		State		
14.		is a corporation, indic		f incorporation	
	State of incorporatio	n Florida			
15.	If the legal structure	is an individual or pa	rtnership, list th	e owners.	
	Name				
	Address				
	Stree	t or P.O. Box	city	state	zip
	Name				
	Address				
	Stree	t or P.O. Box	city	state	zip

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16.	Site owner	ship status			10			
		d To be pure						
	Prese	ntly leased; the exp	piration date of	of the leas	se is/	/		
	If leased, i	ndicate land owner	's name Rocl	kett Boule	vard Prop	erties, L	LC	
		0100 Rocket Boule		lando		FL	32824	
		Street or P.O. Bo	OX .	city	U W	state		zip
17.	Name of e	ngineer	Schreiber Jr.	R	Registration	No. 46	126	
	Address 1	6252 Westwoods I	Business F El	lisville		мо	63021	
		Street or P.O. Bo	x	city		state		zip
	Associated	with Schreiber, You	onley, & Asso	oc.				
40	la Alan Caretti			1 5	7			
18.	is the facili	ty located on Indiar	land? [_	」Yes ∑	∐ No			
19.	Existing or	pending environme	ental permits	(attach a	separate s	heet if n	ecessary	)
NAM	E OF PERMIT	AGENCY	PERMIT NU	MBER	DATE ISS	SUED	EXPIRAT	ION DATE
Se	e attached							
							0.74	
				1 3				
В.	Site Inform	nation						
			Orange					
1.	The facility	is located in		Coun				
	The neares	t community to the	facility is		Т	aft		
	Latitude	28 25' 04"	N	Longitud	ie	81 23	' 10" W	
	Method and	datum Google Ear				E		
2.		the facility site is _		acres				
3.								
<b>.</b>	present, and	ale drawing and pho d future treatment, s ic pattern including	storage and o	disposal a	reas. Also	tne locat show ti	tion of all he hazard	past, lous

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4.	Atta this	ch a topographic map which shows all the features indicated in the instructions for part.
5.	Is th	e facility located in a 100-year flood plain? Yes No
6.	The F.A.	facility complies with the wellhead protection requirements of Rule 62-730.521,  C. Yes No
C.	Lan	d Use Information
1.	The	present zoning of the site is Industrial (IND-4)
2.		Not needed; existing facility, n coning change is needed, what should the new zoning be? change in business operations
D.	Ope	rating Information
1.	ls wa	aste generated on-site? X Yes No
2.	List t	he NAICS codes (5 to 6 digits) 562211
3.	Use Spec	the codes and units provided in the instructions to complete the following table.
	a.	Each process used for treating, storing or disposing of hazardous waste (including design capacities) at the facility, and
	b.	The hazardous waste(s) listed or designated in 40 CFR Part 261, including the annual quantities, to be treated, stored, or disposed by each process at the facility.

PROCESS CODE	PROCESS DESIGN CAPACITY AND UNITS OF MEASURE	HAZARDOUS WASTE CODE	ANNUAL QUANITY OF HAZARDOUS WASTE AND UNITS OF MEASURE
Permit transfer only	Original listing in Table	I.D.3 from 8/14/08	Attached

Permit Transfer Application A.19. Attachment Sept. 22, 2011

Registration as Transporter, Transfer Facility and Small Quantity Handler Facility for Universal Waste Lamps and Devices; Registration as a Transporter of Hazardous Wastes
Hazardous Wastes Storage Tank Registration

Permit Transfer Application A.19. Attachment Sept. 22, 2011

	Perma-Fix of	Perma-Fix of Orlando, Inc.		
	Environme	Environmental Permits		
#	Permit	Agency	Number	Expiration Date
9	DOT Haz Mat Certificate of Registration	DOT	060189 004 008R	6/30/2012
7.	DOT Hazardous Materials Safety Permit (HMSP)	DOT/FMCSA	US-231590- FL- HMSP	10/31/2011
∞	Orange County Biomedical Waste Transporter	FL DPH/ Orange County	48-64-02749	9/30/2011
6	Orange County License to Operate Biomedical Waste Storage Facility	FL DPH/ Orange County	48-64-02750	9/30/2011
10	Broward County Hazardous Waste Transporter License (also solid and biomedical)	Broward County	WT-08-0071	7/31/2012
=	Restricted Drug Distributor/Destruction Facility	FL DPH – Division of Medical Quality Assurance	53 6	2/28/2013
12	Stormwater Discharge Permit	FL DEP	FLR05C179	2/6/2016

Permit Transfer Application A.19. Attachment Sept. 22, 2011

	Perma-Fix of Environment	Perma-Fix of Orlando, Inc. Environmental Permits		
#	Permit	Agency	Number	Expiration Date
13	Registration as Used Oil Transporter, Transfer Facility, Processor, Marketer, Filter Transporter, Filter Transfer Facility, Filter Processor	FL DEP	FLD980559728 6/30/2012	6/30/2012

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4. Professional Engineer Registered in Florida

Complete this certification when required to do so by Chapter 471, F.S., or when not exempted by Rule 62-730.220(7), F.A.C.

This is to certify that the engineering features of this hazardous waste management facility have been designed or examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgement, this facility, when properly constructed, maintained and operated, or closed, will comply with all applicable statutes of the State of Florida and rules of the Department of Environmental Protection.

ANI	nel plas	1	
Signature	1 000		-
Robert J.	Schreiber, Jr.		
Name (please type	pe)		-
Florida Registrati	on Number 46126		_
Mailing Address	16252 Westwoods	Business	Park Drive
	stre	et or P.O. Box	
	Ellisville	MO	63021
2.50	city	sta	ate zip
Date 9/	19/2011		

(PLEASE AFFIX SEAL)

Telephone (636) 256-7200

## **CERTIFICATION**

As required by FAC 62-730.290, the undersigned hereby certifies that no changes are to be made by the Facility bearing EPA ID No. FLD980559728, located at 10100 Rocket Boulevard, Orlando, FL 32824 upon transfer of said facility from Perma-Fix of Orlando, Inc. to Triumvirate Environmental (Florida), Inc. which would require modification of the authorization or a proposal for modification.

IN WITNESS WHEREOF, I, undersigned have executed this Certification as of the date Indicated below.

Triumvirate Environmental (Florida), Inc.

By John F. McQuillan, President

Date

## **COMMONWEALTH OF MASSACHUSETTS**

Middlesex ,ss.

On this day of 2011, before me, the undersigned notary public, personally appeared John F. McQuillan, and proved to me through satisfactory evidence of identification, which was €photographic identification with signature issued by a federal or state governmental agency, €oath or affirmation of a credible witness, £ personal knowledge of the undersigned, to be the person whose name is signed on the preceding document and who acknowledged to me that he signed it voluntarily for its stated purpose.

Notary Public

My commission expires

MARGARET T. MARCUS

AND THE PROPERTY OF MASSACHUSETTS

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