



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

10/07/2011

John Lennon, General Manager
Triumvirate Environmental Florida Inc
3701 SW 47th Ave #109
Davie, FL 33314-2830

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 **Triumvirate Environmental Florida Inc** located at **3670 SW 47th Ave #109, Davie , FL33314**

FLD981018773

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 Battery Transporter; Petroleum Contact Water Management.**

Your facility is **currently registered** for the following activities: **UW Lamp Transporter, UW Device Transporter, UW Lamp Transfer Facility, UW Device Transfer Facility, UW Lamp SQH, UW Device SQH (reg exp on 03/01/12); HW Transporter, HW Transfer Facility (reg exp on 12/31/11) ; Used Oil Transporter, Used Oil Transfer Facility, Used Oil Marketer, Used Oil Filter Transporter, Used Oil Filter Transfer Facility (reg exp on 06/30/2012); Used Oil Filter Processor (reg exp on 06/30/2012).**

Your facility is **currently permitted** as: **Used Oil Processor (exp on 11/19/12).**

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=FLD981018773.

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: 50649 , Email Address: jlennon@perma-fix.com

Received

AUG 31 2011

BSHW

August 24, 2011

Florida Department of Environmental Protection
Waste Management Division - HWRA, MS4560
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Re: Renewal of Hazardous Waste Transporter Certificate of Approval; FLD981018773

Dear Sir/Madam;

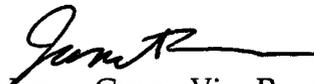
Enclosed are the completed forms required by the Florida Department of Environmental Protection (FL DEP) for renewal of the Hazardous Waste Transporter Certificate of Approval for facility EPA ID# FLD9810188773. Please be advised that the certificate holder, Perm-Fix of Fort Lauderdale, Inc. has changed its name to Triumvirate Environmental (Florida), Inc. as part of a stock purchase of the corporation by Triumvirate Environmental Inc., headquartered in Somerville, Massachusetts.

Per FL DEP regulations for renewal of this certificate, below are the original, completed and signed forms enclosed with this request for certificate renewal:

1. Form 62-730.900(1)(b), 8700-12FL Florida Notification of Regulated Waste Activity
2. Form 62-730.900(5)(d), Hazardous Waste Transporter Status Form
3. Form 62-730.900(5)(c), Hazardous Waste Transporter Certificate of Liability Insurance

Please contact James Green, Vice President at 617.413.3639 or John (Shawn) Lennon at 954.583.3795 if there are any questions. Thank you.

Sincerely;



James Green, Vice President
Triumvirate Environmental (Florida), Inc.



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)

AUG 12 2011

EPA ID **F L D 9 8 1 0 1 8 7 7 3**

MTS

RCRAInfo

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 Triumvirate Environmental (Florida), Inc. (formerly Perma-Fix of Ft. Lauderdale, Inc. **FEID No.** **5 9 2 4 8 0 3 7 7**

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

Name of Operator: Triumvirate Environmental (Florida), Inc. New Operator
 Date became Operator: 08 / 12 / 2011
 Name Change mm dd yy

Street or P.O. Box: 3670 SW 47th Avenue Phone Number: 954-583-3795

City or Town: Davie State: FL Zip Code: 33314

Operator Type: Private Federal Municipal State Other

4. Facility Physical Location Information

Physical Street Address: Same

City or Town: Same State: FL Zip Code: 33314

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

Latitude: 28 04 34 Longitude: 80 12 37 Method: Google Maps
 d d m m s s . ssss d d m m s s . ssss Datum:

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

A. 562111 B. 562112
 C. D.

6. Facility or Business Mailing Address

Street Address or P.O. Box: 3701 SW 47th Ave. #109
 City or Town: Davie State: FL Zip Code: 33314

7. Facility or Business Contact Person

First Name: John Last Name: Lennon Title: General Manager
 Phone Number: 954-583-3795 Extension: E-Mail: jlennon@triumvirate.com

Street or P.O. Box: 3701 SW 47th Ave., #109
 City or Town: Davie State: FL Zip Code: 33314

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: Same New Owner
 Date became Owner: / / mm dd yy

Street or P.O. Box: Same as above Phone Number:

City or Town: State: Zip Code:

Owner Type: Private Federal Municipal State Other

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
- 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

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

(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 _____ See attached certificate of insurance _____

Address _____

Contact _____ Telephone _____

Policy Number _____ Expiration date _____

d. **Transportation Mode** Air Rail Highway Water Other - specify _____e. **Hazardous Waste Transfer Facility:**Storage Volume 300 drums **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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<5000 kg
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Pharmaceuticals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<5000 kg
d. Mercury Containing Devices	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<5000 kg
e. Mercury Containing Lamps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<5000 kg

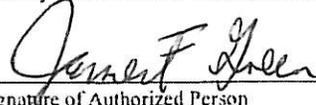
(3) Mercury Recovery and/or Reclamation Facility Note: A hazardous waste permit is required for this activity [Rule 62-737.800, F.A.C.]
[Chapter 62-737, F.A.C.]

(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
James F Green
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.

FLD981018773

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 D001	² D002	³ D008	⁴ D018	⁵ F001	⁶ F002	⁷ F003
⁸ F005	⁹ D035	¹⁰ D007	¹¹ D003	¹² D006	¹³ D039	¹⁴ D011
¹⁵ P012	¹⁶ P075	¹⁷ P001	¹⁸ U035	¹⁹ U058	²⁰ U059	²¹ U132
²² U010	²³ See	²⁴ attached	²⁵ additional	²⁶ codes.	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 _____

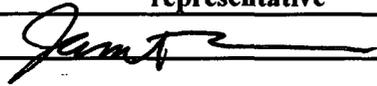
Address _____

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

James Green, Vice President

Date Signed
(mm-dd-yyyy)

08/24/2011

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:

Perm-Fix of Fort Lauderdale, Inc. has changed its name to Triumvirate Environmental (Florida), Inc. as part of a stock purchase of the corporation by Triumvirate Environmental Inc., headquartered in Somerville, Massachusetts.



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Florida Profit Corporation

TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC.

Filing Information

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Effective Date 01/15/1985
Last Event AMENDED AND RESTATED ARTICLES
Event Date Filed 08/12/2011
Event Effective Date NONE

Principal Address

3701 SW 47TH AVE.
SUITE 109
DAVIE FL 33314 US

Changed 05/01/1996

Mailing Address

3701 SW 47TH AVE.
SUITE 109
DAVIE FL 33314 US

Changed 05/01/1996

Registered Agent Name & Address

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301 US

Name Changed: 10/06/1997

Address Changed: 05/27/2002

Officer/Director Detail

Name & Address

Title PD

MCQUILLAN, JOHN F JR
61 INNER BELT RD
SOMERVILLE MA 02143

Title COAS