NOTICE OF POTENTIAL HAZARDOUS WASTE NON-COMPLIANCE – Page 1 of 2

FACILITY NAME	TYPE OF INSPECTION:		
SWS Environmental	CAV: ☐ CEI: ☒ CI: ☐ OTHER: ☐		
ADDRESS	CITY	STATE	ZIP CODE
6900 NW 12th Ave	Ft. Lauderdale	FL	33309
EPA ID NUMBER	DATE OF INSPECTION	PAGE	OF
FLD 099 077 257	1/10/12	1	2
FOLLOW UP CAV INSPECTION WITHIN 120 DAYS:	☐ YES	☒ NO	

A hazardous waste/used oil compliance inspection was made this date, under the authority of Section 403.091, Florida Statutes (F.S.), to determine your facility's compliance with Chapter 403, F.S. and Chapters 62-730 and 62-710, Florida Administrative Code (F.A.C.). Provisions of Title 40 Code of Federal Regulations (C.F.R.) Parts 260 through 268 and 279, which are cited on this form, have been adopted by reference as the state hazardous waste and used oil rules in Chapter 62-730 and 62-710, F.A.C. The following potential items of non-compliance were identified by the inspector(s). ***This is not a formal enforcement action and may not be a complete listing of all items of non-compliance which exist at the time of this inspection.***

GENERAL REQUIREMENTS:

- ☐ Failure to ensure delivery of HW to proper HW facility § 261.5
- ☐ Failure to provide hazardous waste determination § 262.11
- ☐ Failure to notify as generator § 262 12
- ☐ Failure to use a manifest or reclamation agreement § 262.20
- ☐ Failure to provide personnel training § 265.16, 262.34
- ☐ Evidence of release(s) of waste § 265.31
- ☐ Facility exceeds 90/180 day time limit § 262.34

USED OIL VIOLATIONS:

- ☐ Failure to label containers § 279.22
- ☐ Failure to respond to releases § 279.22
- ☐ Failure to document used oil disposal § 279.10

CONTAINER MANAGEMENT:

- ☐ Unlabeled containers § 262.34
- ☐ Undated containers § 262.34
- ☐ Leaking or bulging containers § 262.34
- ☐ Open containers § 265.173
- ☐ Inadequate aisle space § 62-730.160

RECORDKEEPING REQUIREMENTS:

- ☐ Manifests § 262.40, § 262.44
- (1) ☒ Training records § 262.34
- ☐ Contingency Plan § 262.34
- ☐ Weekly Inspection records § 62-730.160
- ☐ Information not posted by phone § 262.34
- ☐ Authorities not notified § 262.37

MATERIALS PROVIDED to assist in accomplishing corrective actions (2) 2nd containment for used oil

- ☐ DEP Small Quantity Generator Handbook
- ☐ EPA *Understanding the Hazardous Waste Rules*
- ☐ EPA *Notification of Regulated Waste Activity*
- ☐ Florida Automotive Recyclers Handbook
- ☐ EPA *Managing Used Oil*
- ☐ Environmental Yellow Pages
- ☐ List of HW/Used Oil Transporters
- ☐ Antifreeze Recycling Vendors
- ☐ Mercury Lamp Recyclers
- ☐ Other _____
- ☐ Other _____
- ☐ Other _____

Florida Fact Sheets

- ☐ Antifreeze for Recycling / Waste Antifreeze
- ☐ Summary of Hazardous Waste Regulations
- ☐ Summary of Used Oil/Used Oil Filter Regulations
- ☐ Other: _____
- ☐ Other: _____
- ☐ Other _____
- ☐ Other: _____
- ☐ Other: _____

ITEMS REQUESTED OR RECOMMENDATIONS BY THE *"INSPECTOR"*:

(1) No driver training records were available for review. Please obtain and keep on file all appropriate training records. Please fax/e-mail copies of training records to the Department within 7 days.

(2) Secondary containment for used oil drum was not provided. Violation was corrected during the inspection.

SWS ENVIRONMENTAL SERVICES

Butch Potts
Assistant Service Center Manager
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C: 813.299.6215 | O: 954.957.7271 | F: 954.957.7807
24-Hour Emergency Response @ 877.742.4215

OWNER/OPERATOR COMMENTS:

The owner/operator is hereby requested to submit in writing, within 7 days of this inspection, 1) a description of all corrective actions taken, 2) a schedule for completion of corrective actions to be taken and 3) a description of efforts to prevent recurrence of the above items to the person signing as ***"INSPECTOR"***, Florida Department of Environmental Protection, 400 North Congress Avenue, Suite 200, West Palm Beach, FL 33401. The actions taken within __ days of this notice will be considered in determining whether enforcement, including the assessment of penalties, should be initiated.

IF YOU HAVE QUESTIONS, contact: Mattie Gierczak *at (561) 681-6600.*

***"INSPECTOR"* (signature):** _____ **Date:** 1/10/12

The undersigned person hereby acknowledges that he/she received a copy of this notice and has read and understands the same.

SIGNATURE:	PRINTED NAME:
	Allen Potts
TITLE:	**DATE:**
ASST. Manager	1-10-12