



MARYLAND DEPARTMENT OF THE ENVIRONMENT

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Martin O'Malley
Governor

Robert M. Summers, Ph.D.
Secretary

Anthony G. Brown
Lieutenant Governor

January 3, 2012

Dept. of Environmental Protection
Bob Martinez Center
Attn: Tim Bahr, MS 4560
Hazardous Waste Regulations Section
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

RE: Quality Carriers, Inc.
4041 Park Oaks Ave. Suite 200
Tampa FL 33610

Dear Mr. Bahr:

In accordance with Maryland regulations, COMAR 26.13.04 Standards Applicable to Transporters of Hazardous Waste, a person may not transport a Controlled Hazardous Substance (CHS) to a facility within the State or from a source within the State unless the person obtains a certificate from the Department. When our Department receives an application from a person who intends to transport wastes to a facility outside of Maryland or an out-of-state transporter who wishes to deliver waste to a Maryland facility, it is our policy to notify that State before issuing a permit.

We would appreciate your review of the attached application and, if your Department has any objections to the applicant being issued a permit by the Maryland Department of the Environment, that you notify us in writing or via telephone at (410) 537-3350 within ten (10) days.

Thank you for your cooperation.

Sincerely,

Jennifer Hopper, Acting Section Head
Hazardous Waste Certification
Operational Services Program

Enclosure: Cited

cc: Mr. Horacio Tablada
MD CHS Hauler File HWH 068

Received

JAN 09 2012

BSHW

RECEIVED
RCRA

JAN 09 2012

Hazardous Waste Regulation



JAN 09 2012

Hazardous Waste Regulation

OPERATIONAL SERVICES PROGRAM

APPLICATION FOR CERTIFICATION AS A CONTROLLED HAZARDOUS SUBSTANCES HAULER

INCOME TAX IDENTIFICATION NUMBER
PRINT NUMBER HERE
36-2590063

(PLEASE PRINT OR TYPE - ATTACH ADDITIONAL SHEETS IF NECESSARY)

1. Name of Business Quality Carriers, Inc.
 - a. Mailing Address 211 Welsh Pool Road, Suite 100
City Exton State PA Zip 19341
 - b. Site Address 4041 Park Oaks Blvd., Suite 200
City Tampa State FL Zip 33610
 - c. E-mail Address jrakitsky@qualitydistribution.com
 - d. FAX Number 813-628-6854
 - e. US DOT and/or ICC Number 76600
2. Maryland Resident Agent: (requirement of all out-of-state companies)
Name: CSC Lawyers Incorporatin Service Co Telephone: 410-962-7316
Address 7 St. Paul Street, Suite 1660
City Baltimore State MD Zip 21202
3. EPA ID No. FLR 000 057 414 4. MD Hauler No. HWH-068
5. Telephone Number 813-569-7273
6. Business Owner(s) Quality Distribution, Inc.
7. Number of vehicles involved in CHS Transportation 61
8. Is Business subject to 49 CFR 387? (If yes, include a copy of MCS-90; if no, you must include a \$50,000 surety bond with application)
9. a. Check the type(s) of waste that will be transported:
Bulk Solid _____ Containerized _____
Bulk Liquid X _____ Other _____
Sludge _____
b. Check the hazard class(es) (as defined in 49 CFR Part 173) which will be transported:
1 - Explosives _____ 6 - Poisons X _____
2 - Compressed Gases _____ 7 - Radioactive _____
3 - Flammable liquids X _____ 8 - Corrosives X _____
4 - Flammable Solids/Spontaneously Combustible/Dangerous When Wet X _____ 9 - Miscellaneous Hazardous Materials X _____
5 - Oxidizer/Organic Peroxides X _____ 10 - Combustible Liquids X _____
11- Other (Specify) X _____



10. Quantity (estimated) of CHS to be transported per month _____
 35,000 gallons _____ curies _____ pounds/tons
11. Sources of CHS (include customer list)(new applicants, list types of industries that you will be targeting) _____
 CIBA Specialty Chemicals Corp.
12. Destination of shipments (include facility name, address, EPA ID Number and telephone number for each site) _____
 See ATTACHMENT 12.
- Attach additional sheets, if necessary.
13. Are you certified to transport hazardous waste in any other state? Yes
 If "yes", identify state, certification numbers, and years permitted.
 Attach additional sheets, if necessary. _____
 See ATTACHMENT 13.
14. Have you ever had a hazardous waste permit or certificate revoked or suspended in Maryland? No If yes, please explain _____
15. Have you ever been penalized for violation of any federal or state environmental law or regulation? Yes If yes, please explain _____
 See ATTACHMENT 15.
16. Are you in compliance with Maryland's Motor Fuel Tax regulations found in COMAR, Title 03, Subtitle 03, Chapter 04 and IFTA? Yes
17. Complete the enclosed application(s) for each vehicle used to transport CHS.

CONDITIONS FOR ISSUANCE

As a condition of this certification, I agree to comply with the provisions of the Environment Article, Section(s) 7-249 through 7-252, Annotated Code of Maryland and COMAR 26.13 and agree to: (1) secure a bond of not less than \$50,000 according to the provisions of the regulation COMAR 26.13.04.04 for the purpose of indemnifying the State for abatement of pollution resulting from the improper transportation or spill of CHS or provide a copy of MCS-90; (2) provide a copy of the manifest supplied by the waste generator to the operator of the facility; (3) demonstrate and comply with the Department of Transportation regulations for vehicles and containers, COMAR 11.16 and 11.21; 49 CFR, Parts 100-180 and 350-399 as applicable; (4) allow the Director of the Land Management Administration and his authorized representatives upon the presentation of credentials to enter and inspect vehicles, contents of containers, and all records relating to the transportation of CHS; (5) transport CHS from a source within the State or to a facility in the State only in certified vehicles operated by a certified driver; (6) report periodically, on a form prescribed by the Program, the source, disposal destination, volume, and nature of the CHS transported; (7) pay a yearly fee for certification of \$50.00 per vehicle used for hauling CHS; and (8) not transport any low-level nuclear waste unless the receiving low-level nuclear waste facility has been notified and has indicated its capability and willingness to take the low-level nuclear waste.

I certify that the above-referenced information is correct and complete to the best of my knowledge. Additionally, I will notify the Department within 30 days of any changes in the information contained within this application.

NAME James A. Rakitsky TITLE V.P., Environmental Services

SIGNATURE James A. Rakitsky DATE 12-14-11