

## 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

03/13/2012

Stephen Berman Clean Harbors Florida LLC 170 Bartow Municipal Arprt Bartow, FL 33830-9572

The Florida Department of Environmental Protection has reviewed your application for registration as a transporter or handler for universal waste lamps and devices destined for recycling. Based on the information received, the facility located at **170 Bartow Municipal Arprt**, **Bartow**, **FL 33830-9572** has been registered through **March 1**, **2013** with the following status:

Facility ID # FLD980729610

Transfer Facility for Universal Waste Lamps
Transfer Facility for Universal Waste Devices
Large Quantity Handler Facility for Universal Waste Lamps and Devices

The registration form for the year **2013** will be sent to the contact person on your application.

Chapter 62-737, Florida Administrative Code (F.A.C.), (copy enclosed) specifies several other requirements including packaging, training and record keeping for transporters and handlers of and reverse distribution programs for universal waste lamps or devices destined for recycling. These requirements are simple, flexible and make good business and environmental sense (summarized on enclosed fact sheets).

This registration does not allow you to transport or handle universal waste lamps or devices which are destined for landfill or other disposal. The transportation or handling of universal waste lamps or devices destined for disposal is subject to our hazardous waste management regulations under Chapter 62-730, F.A.C.

If any of your facility's information on the Universal Waste Lamp and Device Transporter and Handler Registration Form changes, please notify me at Mail Stop 4555 at the address above. I can also be contacted at (850) 245-8759 or at <a href="mailto:Laurie.Tenace@dep.state.fl.us">Laurie.Tenace@dep.state.fl.us</a>.

Sincerely,

Laurie Tenace

**Environmental Specialist** 

Hazardous Waste Management Section

**Enclosures** 



## 8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 (850) 245-8760 Date Received (for FDER OF GOUSE Aly)

FEB 1 0 2012

		(550) =			•				
EPA ID FLD980	0729610					BSHW			
Submittal	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 site identification information).  As a component of the Hazardous Waste Report.  Is this the final notification (see instructions) for the facility?								
2. Facility or Business Name	CLEAN HARBOF	S FLORIDA			F	EID No. 04-3667165			
3. Facility Operator	A. Name of Ope	erator:			DN-	Operator			
(List additional Operators in the	JOHN BOSEK				☐ New Operator  Date Became Operator: 09/06/2002  mm dd yy				
comments section)	Street or P.O. Box: 170 BARTOW MUNICIPAL AIRPORT				Phone Number: (863) 533-6111				
	City or Town: BARTOW State: FL Zip Code: 33830-9572  Operator Type: X Private    Federal    Municipal								
4. Facility Physical Location Information		Physical Street Address: 170 BARTOW MUNICIPAL AIRPORT							
mormation	City or Town:	City or Town: BARTOW			State: FL Zip Code: 33830-9572				
County: POLK  If available, please attach a map or sket boundaries.						ap or sketch of the facility			
	Latitude: 27 95 58.0000 Longitude: 81 77 91.0000 Method: dd mm ss.ssss dd mm ss.ssss Datum:								
5. Facility North Am Classification System Code(s)		<b>A.</b> 562211 <b>C.</b>			3. ).				
6. Facility Mailing Address	Street or P.O. Box: 170 BARTOW MUNICIPAL AIRPORT								
Audiess	City or Town:BARTOW				State: FL	<b>Zip Code:</b> 33830-9572			
7.Facility Contact Person	First Name: Last Name: STEPHEN BERMAN		·	Title: SENIOR COMPLIANCE					
	Phone Number: (863) 519-6319 Extension: Email: berman.stephen@cleanharbors.com								
	Street or P.O. Box: BARTOW MUNICIPAL AIRPORT								
	City or Town: BARTOW				State: FL	<b>Zip Code:</b> 33830-9572			
8. Real Property Owner of the Facility's	Name of Real Property Owner:  CITY OF BARTOW			New Owner  Date Became Owner: 01/01/1980 mm dd yy					
Physical Location	Street or P.O. Box: P.O. BOX 650					<b>Phone Number:</b> (863) 533-1195			
(List additional real property owners	City or Town: BARTOW				State: FL	Zip Code: 33831-			
in the comments section).	Owner Type: Private Federal Municipal State Other US								

Hazardous Waste Activities	For Items 2 through 7, mark 'X' in all that apply.			
Generator of Hazardous Waste	2. Treater, Storer, or Disposer of Hazardous Waste			
(Choose only one of the following three categories.)	(at your facility) Note: A hazardous waste permit may be required for this activity			
X a. Large Quantity Generator (LQG):	a. Operating Commercial TSD			
Generates in any calendar month 1,000 kilograms or	b. Operating Non-commercial TSD			
greater per month (kg/mo) (2,200 lbs.) of nonacute	c. Non-operating: Postclosure or Corrective Action			
hazardous waste; or Greater than 1 kg (2.2 lbs)	Permit or Consent Order (HSWA, etc.)  3.  Recycler of Hazardous Waste (at your facility)			
of acute hazardous waste  D. Small Quantity Generator (SQG):	Specify: Commercial; Non-Commercial.			
Generates in any calendar month greater than	A permit is required for storage prior to recycling.  4.  Exempt Boiler and/or Industrial Furnace			
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	a. Small Quantity On-site Burner Exemption			
c. Conditionally Exempt SQG (CESQG):	b. Smelting, Melting, and Refining Furnace Exemption			
Generates in any calendar month 100 kg/mo or less	5. Person Authorized to Manage Conditionally			
(220 lbs.) of non-acute hazardous waste and/or 1 kg	Exempt Waste generated at other facilities - Check this			
(2.2 lbs) or less of acute hazardous waste	management activity ONLY if you attach EITHER a copy of			
n addition, indicate other generator activities (that apply)	your application for such authorization OR the authorization			
_	you received from FDEP.			
	aste only;  b. For Commercial Purposes			
e. Mixed Waste (hazardous and radioactive) Generator  Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually.  a. For own waste C. Hazardous Waste Transporter Insurance Informations.  Insurance Company	UIC well at your facility does not receive hazardous waste.  f Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:			
e. Mixed Waste (hazardous and radioactive) Generator  Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually.  a. For own waste C. Hazardous Waste Transporter Insurance Informations Insurance Company  Address	UIC well at your facility does not receive hazardous waste.  f Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:			
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e. Mixed Waste (hazardous and radioactive) Generator  Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually.  a. For own waste Transporter Insurance Informations Insurance Company Address  Contact: Policy Number:  d. Transportation Mode:  Air; Rail; Highway; Waste Transporter Insurance Company	UIC well at your facility does not receive hazardous waste.  f Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:  Telephone:  Expiration date: / /  ater;  Other - specify			
e. Mixed Waste (hazardous and radioactive) Generator  Transporter of Hazardous Waste Registration must be renewed annually.  a. For own waste  C. Hazardous Waste Transporter Insurance Informs Insurance Company Address  Contact: Policy Number:	UIC well at your facility does not receive hazardous waste.  f Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:  Telephone:			
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□ e. Mixed Waste (hazardous and radioactive) Generator  Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually. □ a. For own waste. Hazardous Waste Transporter Insurance Informational Insurance Company Address  Contact: □ Policy Number: □ Air; □ Rail; □ Highway; □ Waste. ☑ Hazardous Waste Transfer Facility: □ Initial notification	UIC well at your facility does not receive hazardous waste.  If Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registration.  Instead of Liability Insurance is required along with this registrati			
□ e. Mixed Waste (hazardous and radioactive) Generator  Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually. □ a. For own waste Transporter Insurance Informations. Insurance Company Address  Contact: □ Policy Number: □ Air; □ Rail; □ Highway; □ Waste Transfer Facility: □ Initial notification  The following items are required to be submitted Florida Administrative Code (F.A.C.)]:	UIC well at your facility does not receive hazardous waste.  f Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:  Telephone:  Expiration date: / /  ater;  Other - specify  Storage Volume 0.00  with the initial notification for a transfer facility [Rule 62-730.171(			
□ e. Mixed Waste (hazardous and radioactive) Generator  □ Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually. □ a. For own waste. Hazardous Waste Transporter Insurance Informationsurance Company    Address	UIC well at your facility does not receive hazardous waste.  If Liability Insurance is required along with this registration.  Instead only;  b. For Commercial Purposes  Instead of the transporter that the proposed location satisfies the initial notification for a transfer facility [Rule 62-730.171(3)(a)1., F.A.C.]			
□ e. Mixed Waste (hazardous and radioactive) Generator  □ Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually. □ a. For own waste. Hazardous Waste Transporter Insurance Informationsurance Company Address  □ Contact: □ Policy Number: □ Air; □ Rail; □ Highway; □ Waste. ☑ Hazardous Waste Transfer Facility: □ Initial notification  □ The following items are required to be submitted Florida Administrative Code (F.A.C.)]: □ □ Certification by a responsible corporate officer or criteria of Section 403.7211(2), Florida Statutes □ Evidence of the transporter's financial responsible corporate.	UIC well at your facility does not receive hazardous waste.  If Liability Insurance is required along with this registration.  Instead only;  b. For Commercial Purposes  Instead only;  b. For Commercial Purposes  Instead only;  c. For Comme			
□ e. Mixed Waste (hazardous and radioactive) Generator    Transporter of Hazardous Waste   Note: A Certificate of Registration must be renewed annually. □ a. For own waste   C. Hazardous Waste Transporter Insurance Informationsurance Company   Address   Contact:   Policy Number: □ Air; □ Rail; □ Highway; □ Waste   Mazardous Waste Transfer Facility: □ Initial notification   The following items are required to be submitted   Florida Administrative Code (F.A.C.)]: □   Certification by a responsible corporate officer   Certification   Cert	UIC well at your facility does not receive hazardous waste.  f Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:  Telephone:  Expiration date: / /  ater;  Other - specify  Storage Volume 0.00  with the initial notification for a transfer facility [Rule 62-730.171( of the transporter that the proposed location satisfies the initial facility [Rule 62-730.171(3)(a)1., F.A.C.]  bility [Rule 62-730.171(3)(a)3., F.A.C.]  ty operations [Rule 62-730.171(3)(a)4., F.A.C.]			
Transporter of Hazardous Waste Note: A Certificate of Registration must be renewed annually. ☐ a. For own waste Insurance Company  Address  Contact: Policy Number:  d. Transportation Mode: ☐ Air; ☐ Rail; ☐ Highway; ☐ Waste Insurance Transfer Facility: ☐ Initial notification  The following items are required to be submitted Florida Administrative Code (F.A.C.)]: ☐ Certification by a responsible corporate officer or criteria of Section 403.7211(2), Florida Statutes ☐ Evidence of the transporter's financial responsible ☐ A brief general description of the transfer facility	UIC well at your facility does not receive hazardous waste.  I Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:  Telephone:  Expiration date: / /  ater;  Other - specify  Storage Volume 0.00  with the initial notification for a transfer facility [Rule 62-730.171( of the transporter that the proposed location satisfies the separation (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]  bility [Rule 62-730.171(3)(a)3., F.A.C.]  ty operations [Rule 62-730.171(3)(a)4., F.A.C.]			
□ e. Mixed Waste (hazardous and radioactive) Generator    Transporter of Hazardous Waste   Note: A Certificate of Registration must be renewed annually. □ a. For own waste   Lazardous Waste Transporter Insurance Informationsurance Company   Address	UIC well at your facility does not receive hazardous waste.  f Liability Insurance is required along with this registration.  aste only;  b. For Commercial Purposes  ation:  Telephone:  Expiration date: / /  ater; Other - specify  Storage Volume 0.00  with the initial notification for a transfer facility [Rule 62-730.171( of the transporter that the proposed location satisfies the (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]  bility [Rule 62-730.171(3)(a)3., F.A.C.]  ty operations [Rule 62-730.171(3)(a)4., F.A.C.]  [Rule 62-730.171(3)(a)6., F.A.C.]			

	<b>EPA ID No.</b> FLD980729610						
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	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 accur	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 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 = 5,000 kg or more of universal pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazard							
Pharmaceuticals SQH = always less than 5,000 kg of UPW and a							
I namaceuteas 5Q11 - always less than 3,000 kg of 01 w and a							
(1) For those Managing  Generate/ Accumulate  Transport  Handle at Trans Facility	fer (2) Enter your esitmate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.						
a. Batteries	498000.00						
b. Pesticides	252000.00						
c. Pharmaceuticals	252000.00						
	252000.00						
e. Mercury Containing Lamps	252000.00						
(3) Mercury Recovery and/or Reclamation Facility  [Chapter 62-737, F.A.C.]  Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, 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:	(8) Specific Certification to be signed by all Used Oil Transporters						
(1) Used Oil Transporter - Indicate type(s) of activity(ies)	I certify as a Used Oil Transporter that the training program and financial						
a. Transporter	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						
(2)   Used Oil Collection Center	orginally approved training program, they are explained in attachments to this registration form. Evidence of financial responsibility is						
(3) Used Oil Processor (A permit is required for this activity.)	demonstrated by the attached Used Oil Transporter Certificate of						
	Liability Insurance, DEP form 62-710.901(4), F.A.C.						
(4) Unit-Specification Used Oil Burner							
(5) Used Oil Fuel Marketer  (6) Used Oil Filter	013.1						
a. Transporter	Signature of Authorized Person						
b. Transfer Facility	JOHN BOSEK						
☐ c. Processor ☐ d. End User	Print Name of Authorized Person						
(7) Used Oil Transporters, Transfer Facilities, Collection Centers, Off-	Print Name of Addionized Person						
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,	(9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one):						
payable to Florida Department of Environmental Protection.	Our mailing (business) address						
A check is enclosed.  The site (facility) address							

<u> </u>					EPA I	D No. FLD	980729610	
D. Other Sta	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 Wastest ist 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., DOO1, DOO3, FOO7, U112). Hazardous waste transporters list codes routinely or usually transported. Use an additional page if more spaces are needed.								
D001	D002	D003	D004	D00		D006	D007	
D008	D009	D010	D011	D01	12	D013	D014	
D015	D016	D017	D018	D01	19	D020	D021	
D022	D024	D026	D027	D02	28	D029	D035	
11. Other S	tatus Changes (Mark 'X	(' in the appropri	ate boxes):					
1. Business no longer generates, transports, treats, stores, or disposes of hazardous waste.   2. Waste generated by business has been delisted.   3. Other (explain)								
•	owner, operator, or zed representative		ne and offic perator, or	cial title (type an authorized	or print) o l represent	of owner, ative	Date Signed (mm-dd-yyyy)	
		JOHN E				· <u></u>	02/09/2012	
- M E	Bul	FACII	JITY GENE	RAL MANAGER	· · · · · · · · · · · · · · · · · · ·			
Contact: STEPHEN BERMAN (863)519-6319 berman.stephen@cleanharbors.com								
13. Comments  Land Type: Private Federal Municipal State								
P105 P106 P10 0036 U037 U03 0088 U089 U10 0147 U149 U15	08 F009 F01 222 P024 P030 P037 F 8 P119 P120 P122 P1 8 U044 U047 U048 U0 11 U108 U109 U112 U1 10 U151 U154 U155 U1 11 U213 U218 U219 U2	9 F027 2039 P042 P044 23 P127 P188 1 551 U052 U053 1 113 U114 U115 1 59 U160 U161 1	F034 P048 P050 P204 U002 U U056 U058 U U117 U121 U U162 U165 U	003 0005 0006 059 0061 0066 122 0123 0124 169 0170 0185	2 P001 66 P070 P075 6 U007 U008 6 U068 U070 6 U129 U131 6 U187 U188	5 P081 P087 F 0009 0010 00 0071 0072 00 0132 0133 01 0190 0196 01	F005 F006  2089 P092 P097 P098 212 U019 U029 U031 U035 275 U077 U079 U080 U084 234 U135 U138 U140 U144 297 U200 U201 U205 U206 248 U249 U271 U278 U279	