

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

05/18/2012

Wes Pace, Director Hazmat Trade Compliance Landstar Ranger Inc 13410 Sutton Park Drive S Jacksonville, FL 32224

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 Landstar Ranger Inc located at 13410 Sutton Park Dr S, Jacksonville, FL32224-5270

FLR000067157

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not require a separate submission: Non-Handler of Hazardous Waste**.

Your facility is **currently registered** for the following activities: **HW Transporter** (reg exp on 05/01/13).

Your facility is currently permitted/active as: No Active Hazardous Waste Treatment, Storage, or Disposal Permit.

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.

Intr.//www.dep.state.n.us/waste/categories/nwkegulation/pages/Notificationkegulation/

To review the details of your status, visit:

http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLR000067157. For further assistance, please e-mail a Notification Coordinator at EPOST_HWreg@dep.state.fl.us or call us at (850)245-8707.

Sincerely,

Glen Perrigan

Environmental Manager

Hazardous Waste Regulation Section

Liver FOR My

ME ID: 56962, Email Address: wpace@landstar.com



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)

RSHW

EPA ID FLR	000067	1157	MTS		RCRAInfo		
1. Reason for Submittal	Mark 'X' in						
2. Facility or Business Name	LANdstap	RANGER	INC	FEID	No. 2 1 3 0 8 1 9 9		
3. Facility Operator (List additional Operators in the comments section).	Name of Operator: LANdstur Street or P.O. Box:	RANGER	INC	New Oper Date became			
	134/0 Su City or Town: —	tton PARK JACKSONVILL		State: FL	70-872-9400 Zip Code: 32224		
4. Facility Physical Location Information	Operator Type: Physical Street Addi City or Town:	ress:	Municipal [State Othe	Zip Code:		
	County: State Zip Code: 3224						
5. Facility North An	nerican Industry	n m ss.ssss	gitude: _ _	s s . ssss B.	Method: Datum:		
Classification System (NAICS) Code(s)					D.		
6. Facility or Business Mailing Address	Street Address or P. City or Town:	134/0	Sutton	PARK State:	Vr. 5. Zip Code: 2222		
7. Facility or Business Contact Person	First Name:	JACKSONI Wes	Last Name:	ACE B Mall	Title: DIRECTOR; HAZI YTRADE Complian		
	Phone Number: 800-87 Street or P.O. Box:	12-9400 13410 Suti	ton PARK	E-Mail: wpace	S. LANDSTAR. com		
	City or Town: JACKSONUI //e			State:	Zip Code: 32224		
8. Real Property (Land) Owner of the Facility's	Name of Real Property (Land) Owner: LANdstar System Holdings INC			New Owner Date became Owner: 3 15 10 mm dd yy			
(List additional real property owners	Street or P.O. Box: 134/0 Sutton PARK Dr. S. City or Town: ACKSONVILLE				le Number: 04-398-9400 Zip Code:		
in the comments section.)	Owner Type: Pr		1				

Sittle result from the representation of the result of the							
9 Type of Regulated Waste Activity (Mark 'X' in all that apply)							
(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	For Items 2 through 7, mark 'X' in all that apply (2) Treater, Storer, or Disposer of Hazardous Waste						
(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 (7) Iransporter of Hazardous Waste Note A Certificate Registration must be renewed annually a For own	FDEP (6) Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste of Liability Insurance is required along with this registration.						
Contact	Telephone						
d Transportation Mode Air Rail R Highway	☐ Water ☐ Other - spccify						
Horida Administrative Code (FAC)	ny [Rulc 62-730 171(3)(a)3 FAC] operations [Rulc 62-730 171(3)(a)4 , FAC] 71(3)(a)5 FAC] Rulc 62-730 171(3)(a)6 , FAC]						

	EPAID No. F-LR 000067157							
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 acc	cumulated by for-hire handler							
Mercury-containing devices EQH = 100 kg (220 lb) or more accumulated by for-line 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								
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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 pharmaceuticals	eutical 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								
	(2) Enter your esitmate of the maximum amount (in pounds)							
(1) For those Managing Generate/ (see note in Facility	of each type of UW on site or transported at any one time.							
a. Batteries								
b. Pesticides								
c. Pharmaceuticals								
d. Mercury Containing Devices								
e. Mercury Containing Lamps								
(A) P. J. (J. P. 19)								
(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.]							
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[Chapter 62-737, F.A.C.] (4) Reverse Distributor of UW Pharmaceuticals	F.A.C.] Lamps Devices Ut, a facility must treat, dispose or recycle a UW. A permit is required for							
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[Chapter 62-737, F.A.C.] (4) Reverse Distributor of UW	ty, a facility must treat, dispose or recycle a UW. A permit is required for yeling. 8) Specific Certification to be signed by all Used Oil Transporters 1 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 orginally 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 Print Name of Authorized Person (9) The records required under the provisions of Rule 62-710.510.							

				EPA ID No.	FLR DOOL	0 67157		
D. Other	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.								
D00	1 2002	3003	J	5	6	7		
8	9	10	11	12	13	14		
15	16	17	18	19	20	21		
22	23	24	25	26	27	28		
11. Oth	er Status Changes (Ma	rk 'X' in all that a	oply):					
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) Non - Handler								
 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. 								
ļ	Contact _	•	Phone	_				
	Address							
į	City, State, Zip							
	C. Property Tax Defaul	t	D. Petition	for Bankruptcy l	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			Date Signed (mm-dd-yyyy)		
W	& for	· 	Wes Pace	DIRECTUR:	HAZMAT	411-12		
			<u> </u>	, 				
If the person who filled in this form is not the Facility Contact or Operator, please complete the information below: Solution								
13. Comments:								
!								