

# 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

07/20/2012 Brenda Hassler, Authorized Agent Safety-Kleen Systems Inc 3003 W Breezewood Lane Neenah, WI 54957-0368

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 **Safety-Kleen Systems Inc** located at **5610 Alpha Dr**, **Boynton Beach**, **FL33426-8329** 

#### FLD984167791

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not** require a separate submission: Large Quantity Generator; Small Quantity Handler, Universal Waste Batteries, Universal Waste Battery Transporter, Universal Waste Pesticide Transporter, Universal Waste Lamps.

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 03/01/13); HW Transporter, HW Transfer Facility (reg exp on 09/01/12); Used Oil Transporter, Used Oil Transfer Facility, Used Oil Marketer, Used Oil Filter Transporter, Used Oil Filter Transfer Facility (reg exp on 06/30/2013).

Your facility is currently permitted/active as: Operating Commercial TSD (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: <u>http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm</u>.

To review the details of your status, visit:

http://appprod.dep.state.fl.us/www\_RCRA/Reports/handler\_results.asp?epaid=FLD984167791. For further assistance, please e-mail a Notification Coordinator at <u>EPOST\_HWreg@dep.state.fl.us</u> or call us at (850)245-8707.

Sincerely,

River FOR Shin

Glen Perrigan Environmental Manager Hazardous Waste Regulation Section

ME ID: 48680 , Email Address: <u>bhassler@jjkeller.com</u>

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FLORIDA	RE DEP V	FL - FLORIDA NOT GULATED WASTE Vaste Management Division Blair Stone Rd. Tallahassee (850) 245-8772	ACTIVITY -HWRS, MS4560			
EPA ID F L D	98416	7 7 9 1				
<ol> <li>Reason for Submittal</li> <li>Facility or Business Name S</li> </ol>	Mark 'X' in correction Ceived To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). FEB 2 0 2012 To provide <u>subsequent notification</u> (to update status and facility identification information). BSHW Is this the <u>final notification</u> (see instructions) for the facility? FEID No.					
Dusiness Name 5		·······		3	96090019	
<b>3. Facility Operator</b> (List additional Operators in the		: N SYSTEMS INC		New Oper Date became	rator Operator: <u>10 / 10 / 89</u> mm dd yy	
comments section).	Street or P.O. Box 5610 ALPHA D			1	<b>ne Number:</b> 51-736-1339	
	City or Town: BOYNTON BEA			State: FL	Zip Code: 33426	
	Operator Type:		Municipal	State Oth	er	
4. Facility Physical Location	Physical Street Ad 5610 ALPHA D					
Information	City or Town:			State: FL	<b>Zip Code:</b> 33426	
			If available, ple boundaries.	If available, please attach a map or sketch of the facility		
	Latitude: L Longitude: L Longitude: L Method:				Method: Datum:	
5. Facility North Am Classification Syst Code(s)	-	<b>A</b> 562112 <b>C</b> .		В. D.		
6. Facility or	Street Address or	P.O. Box:				
Business Mailing Address	City or Town: NEENAH	OOD LANE PO BOX 36	δ	State: WI	Zip Code: 54957-0368	
7. Facility or Business Contact	First Name: BRENDA		<b>Last Name:</b> HASSLER		Title: AUTH AGENT	
Person			Extension: 7351	E-Mail: bhassler@jjkeller.com		
	Street or P.O. Box: 3003 BREEZEWOOD LANE					
· · · · · · · · · · · · · · · · · · ·	City or Town: NEENAH			State: WI	<b>Zip Code:</b> 54957	
8. Real Property (Land) Owner of the Facility's	SAFETY-KLEE	perty (Land) Owner: N SYSTEMS INC	· · · · · · · · · · · · · · · · · · ·	New Own Date became	er Owner: <u>10 / 10 / 89</u> mm dd yy	
<b>Physical Location</b> (List additional	100000000000000000000000000000000000000	CRIVE BLDG 2 SUITE 1	00		<b>ne Number:</b> 0-669-5840	
real property owners in the comments	City or Town: PLANO			State: TX	Zip Code: 75024	
section.)	Owner Type:	Private Federal (	Municipal Sta			

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DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 01-04-2009 Page 1 of 4

EPA ID No. FLD984167791 9. Type of Regulated Waste Activity (Mark 'X' in all that apply): A. Hazardous Waste Activities: For Items 2 through 7, mark 'X' in all that apply. (1) Generator of Hazardous Waste (2) Treater, Storer, or Disposer of Hazardous Waste (at your facility) Note: A hazardous waste permit (Choose only one of the following three categories.) may be required for this activity. a. Large Quantity Generator (LOG): Generates in any calendar month 1,000 kilograms or a. Operating Commercial TSD greater per month (kg/mo) (2,200 lbs.) of non-acute b. Operating Non-commercial TSD hazardous waste; or Greater than 1 kg (2.2 lbs) c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.) of acute hazardous waste (3) **Recycler of Hazardous Waste** (at your facility) b. Small Quantity Generator (SOG): Specify: Commercial: Non-Commercial. Generates in any calendar month greater than A permit is required for storage prior to recycling. 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 (4) **Exempt Boiler and/or Industrial Furnace** lbs.) of non-acute hazardous waste and/or 1 kg a. Small Quantity On-site Burner Exemption (2.2 lbs) or less of acute hazardous waste П b. Smelting, Melting, and Refining Furnace Exemption (5) Person Authorized to Manage Conditionally Exempt Waste c. Conditionally Exempt SQG (CESQG): Generated at Other Facilities - Choose this management Generates in any calendar month 100 kg/mo or less activity ONLY if you attach EITHER a copy of your application (220 lbs.) of non-acute hazardous waste and 1 kg for such authorization OR the authorization you received from (2.2 lbs) or less of acute hazardous waste FDEP. In addition, indicate other generator activities that apply. d. United States Importer of hazardous waste (6) Underground Injection Control - Mark an 'X' even if the e. Mixed Waste (hazardous and radioactive) UIC well at your facility does not receive hazardous waste. Generator (7) X Transporter of Hazardous Waste [Note: A Certificate of Liability Insurance is required along with this registration.] Registration must be renewed annually.  $\Box$  a. For own waste only  $\Box$  b. For commercial purposes c. Hazardous Waste Transporter Insurance Information Insurance Company ACE AMERICAN INSURANCE CO Address C/O 26 CENTURY BLVD. PO BOX 305191 NASHVILLE ТΧ 37230-5191 Contact WILLIS OF TEXAS, INC 877-945-7378 Telephone Policy Number ISAH08692397 Expiration date 9/1/12 d. Transportation Mode 🗌 Air 🗌 Rail 🖾 Highway 🗌 Water 🗋 Other - specify e. Hazardous Waste Transfer Facility: Storage Volume 13200 GALLONS 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  $\mathbf{X}$ Annual update notification

			EPA ID No. FLD984167791		
B. Universal Waste (UW)	Activities (Mark '	X' in all that apply) (	("accumulated" means at any one time):		
<ul> <li>Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more of any combination of UW accumulated</li> <li>Small Quantity Handler (SQH) = always less than 5,000 kg accumulated</li> </ul>					
<ul> <li>Mercury-containing devices LQH = 100 kg (220 lb) or more accumulated by for-hire handler</li> <li>Mercury-containing devices SQH = less than 100 kg accumulated by for-hire handler</li> </ul>					
Mercury-containing l	amps LQH = 2,000	kg (4400 lbs/8,000 lar	nps) or more accumulated by for-hire handler		
Mercury-containing l	amps SQH = less that	un 2,000 kg (8,000 lan	nps) accumulated by for-hire handler		
[Note: 4 lan	nps = 1 kg, 62-737.2	00(10)]			
Pharmaceuticals LQI	H = 5,000 kg or more	of universal pharmac	ceutical waste (UPW) accumulated		
Pharmaceuticals LQF	I = more than 1 kg (	2.2 lb) of acutely haza	rdous ("P-listed") pharmaceutical waste accumulated		
Pharmaceuticals SQI	I = 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 Generate/ Accumulate Generate/ Accumulate Facility Generate/ Generate/ Accumulate Generate/ Sec note in instructions) Facility Generate/ Facility Generate/ Facility Generate/ Facility Generate/ Generate/ Facility Generate/ Generate/ Facility Generate/ Generate/ Facility Generate/ Generate/ Generate/ Generate/ Sec note in instructions) Facility Generate/ Genera					
a. Batteries			550		
b. Pesticides			500		
c. Pharmaceuticals					
d. Mercury Containing Devices			150		
e. Mercury Containing Lamps			1000		
(3) Mercury Recovery and/or Reclamation Facility Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]					
(4) Reverse Distributor of UV	w 🗆	Pharmaceuticals	Lamps Devices		
(5) Destination Facility for U	w 🗆	Note: for this activ storage prior to rec	vity, a facility must treat, dispose or recycle a UW. A permit is required fo cycling.		
C. Used Oil Activities:	· ·		(8) Specific Certification to be signed by all Used Oil Transporters		
(1) Used Oil Transporter	<ul> <li>indicate type(s) of</li> </ul>	activity(ies):	I certify as a Used Oil Transporter that the training program and financial		
<b>a.</b> Transporter <b>b.</b> Transfer Faci	lity		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) Collection Center	-		orginally approved training program, they are explained in attachments to		
	or (A permit is require	d for this activity.)	this registration form. Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of		
(4) Off-Specification		· · · · ·	Liability Insurance, DEP form 62-710.901(4), F.A.C.		
(5) 🛛 Used Oil Fuel Ma (6) Used Oil Filter	arketer		1 AL		
a. Transporter			Alm Moor JJ Keller Anthe Agot		
<b>b.</b> Transfer Facility			Signature of Aythorized Person		
C. Processor d. End User			Adam Hooyman/JJ Keller/Auth Agent		
d. End User			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			(9) The records required under the provisions of Rule 62-710.51		
applicable, enclose a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection.			F.A.C., are kept at (check one):		
A check is enclosed.			<ul> <li>Our mailing (business) address</li> <li>The site (facility) address</li> </ul>		

	E	PA ID No. FI	LD984167791	
D. Other State Regulated Waste Activities:			C <b>W) Handler</b> [Char nit may be required f	· –
10. Waste Codes for Federally Regulated Haza your facility. List them in the order they are presented in Hazardous waste transporters list codes routinely or usual	n the regulations (e.g.,	D001, D003, I	F007, U112).	
1 D001 2 D004 3 D005	4 D006 5	D007	ہ D008	7 D009
8 9 10	11 D019 12		13 D022	14 D023
D010 D011 D018 15 D024 D025 D026	18 D027 19	D021 D028		D023
22 D032 $23 D033$ $24 D034$	25 D035 26	D028		28 D038
11. Other Status Changes (Mark 'X' in all that a		D030		
<ul> <li>(1) Business no longer generates, transports, (2) Waste generated by business has been del</li> <li>(2) Waste generated by business has been del</li> <li>(3) Other (explain)</li> </ul> B. Facility Closed <ul> <li>(1) Closed at this location and moved or move be handling regulated waste there.</li> <li>(2) Out of Business - Business closed onaddress, and phone number where you can ContactAddress</li></ul>	ving to another - submi un be reached after closi	t a new Form (Date). H ing.	8700-12FL for the no Please provide a cont	
City, State, Zip				
C. Property Tax Default	D. Petition for	Bankruptcy	Protection	
12. Certification: I certify under penalty of law that in accordance with a system designed to assure that qual information submitted is, to the best of my knowledge a for submitting false information, including the possibilit facility, I am aware that transfer facilities must comply y	lified personnel properl and belief, true, accurate ty of fine and imprisonr with the requirements o	y gather and e , and complet nent for know	evaluate the informative. I am aware that the ing violations. If I h	ion submitted. The ere are significant penalties ave notified as a transfer
Signature of owner, operator, or an authorized representative	Print Name and Title			Date Signed (mm-dd-yyyy)
Ad Atras 155 Kelled Ants Arent	Adan Hoomaal	JT Kelled	Auth Agent	1/25/2012
		- 3 1001111	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·			
If the person who filled in this form is not the Facilit	y Contact or Operato	r, please com	plete the informatio	on below:
Adam Hooyman/JJ Keller/Auth Agent         800-558-5011 EXT 7062         ahooyman@jjkeller.com				
(Name of person completing this form)	(Phone Number)		(E-mail Address)	
<b>13. Comments:</b> #10 (CON'T) D039, D040, D041, D042, D043, F002, F	<sup>2</sup> 003, F005			

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## Department of Environmental Protection

FDEP, MS 4560, 2600 Blair Stone Road Tallahassee, Florida 32399-2400

**Print Form** 

Form Title Annual Report by Used Oil
and Used Oil Filter Handlers
Effective Date June 9, 2005
Keceived

DEP Form #62-710,901(3)

### Annual Report by Used Oil and Used Oil Filter Handlers<sup>EEB</sup> 21 2012 ("Handlers are any persons subject to the registration requirements of rule 62-710.500 and 62-710.850, F.A.C. [See Section A, Box 5 below]) for reporting period January 1, 2011 through December 31, 2011 Use the information recorded in your Record Keeping Form [62-710.901(2)] or equivalent] to complete this document SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS NC. 2. Telephone No. (80)669.5840 1. Company Name: BOYNTON BEACH 33426 Site Address: 3. EPA ID No. FLD 984 167791 Check box if any of the above items (1-3) have changed since your last registration BEN Smith 4. Name of person preparing report (please print) Title MIGE- REGULATION 4 CompLIGNCE Phone number (if different from #2, above) (847) 468.672.5 5. Type of operation (check as many as apply to your operations) Used Oil: Transporter Transfer Facility Collection Center/Aggregation Point Processor Burner (of off-specification used oil) Transfer Facility Used Oil Filter: Transporter Processor End User

SECTION B USED OIL (TO BE COMPLETED BY ALL REGISTERED USED OIL HANDLERS. USED OIL FILTER HANDLERS SEE SECTION C).

1. Amount (in gallons) of Used Oil and Oily Wastes collected a. In Florida	Automotive 2165477	Industrial 98253	Mixed	Total 226 37 30
<b>b.</b> From out of state				
c. Beginning Inventory				7080
<b>d.</b> Total (sum of totals from Lines <b>a</b> + <b>b</b> + <b>c</b> )				
			In State	Out of State
2. Amount (in gallons) of Used Oil and Oily Wastes Managed				
N - Not an end use, transferred to another facility for s	torage or proc	cessing	1922108	339195
O - Marketed as an on-specification used oil fuel				
F - Marketed as an off-specification used oil fuel				
I - Marketed for an industrial process				
B - Burned as an off-specification used oil fuel				
D - Disposed of Landfilled Treated at a wastewater treatment un Incinerated	it			
			1922108	339195
3. Total amount (in gallons) of used oil managed				75.113
4. End of year, on hand estimate (Difference between Lines 1	D and Line 3)	•••••	9507	

Page 1 of 2

	Form Title <u>Annual Report</u> <u>and Used Oil Filt</u> Effective Date <u>June 9, 2009</u>	r Handlers
SECTION C USED OIL FILTERS (OPTIONAL) (USE TABLE BELOW FOR CONVERSIONS)	CHECK COLUMN IF OUT OF ST	
1. Number of filters on hand from previous year	14476	
2. Number of used oil filters collected	1923 844	
3. Total number of used oil filters to manage (1 plus 2)	1938320	
<ul> <li>4. Disposition of used oil filters collected:</li> <li>a. Transferred to another registered facility</li> </ul>	1921776	
<b>b</b> . Burned for energy recovery at a Waste-To-Energy facility		ļ
c. Transferred directly to a metal foundry for recycling		
<b>d.</b> TOTAL	1921776	
5. End of year, on had estimate (Difference between Lines 3 and Line 4d)	16 544	
6. Gallons of used oil collected as a result of filter processing		
7. Gallons of used oil transferred to a used oil handler (transporter or processor)		
8. Volume of oily waste collected and managed as a result of filter processing	and the second sec	
9. Description of oily waste management	2000 - 100 -	<u>I</u> .

DEP Form #62-710.901(3))

## **DIRECTIONS FOR SECTION C**

Conversion Table

One 55-gallon drum of <u>crushed</u> used oil filters = approximately <u>400</u> used oil filters One 55 gallon drum of <u>uncrushed</u> used oil filters = approximately <u>250</u> used oil filters One ton of drained used oil filters = approximately <u>2,350</u> used oil filters

- 1. Enter the number of Used Oil Filters on hand, from previous year's inventory.
- 2. Enter the number of Used Oil Filters collected.
- 3. Enter the sum of Line 1 + Line 2.
- 4. Enter the number of filters managed by your facility in blocks 4a-c. Enter the sum of 4a-c in block 4d .
- 5. Enter the number of filters on hand at your site as of December 31, last year.
- 6. Fill in the number of gallons of used oil collected by your filter operation.
- 7. Enter the number of gallons transferred to a used oil transporter or processor.
- 8. List the volume (gallons or cubic yards) of the oily wastes collected through your filter handling. Oily wastes are identified in Chapter 62-710.201(1) of the Florida Administrative Code and include bottom sludges, sorbents, wipes etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing; etc.).

Any questions concerning this form may be referred to the Used Oil Coordinator, MS 4560, Department of Environmental Protection 2600 Blair Stone Road, Tallahassee, FL 32399-2400, Phone (850) 245-8755, email: <u>aprilia.graves@dep.state.fl.us</u>,