



Sent To Jib 133

October 13, 1992

Sent Via Certified Mail
P383-205-869
Return Receipt Requested

Mr. Tim Gray
Hazardous Waste Section
Florida Department of Environmental
Regulation - Southeast District
1900 South Congress Ave
West Palm Beach, Florida 33406

Subject: Unmanifested Waste Report

Medley Facility
FLD 984 171 694

RECEIVED
OCT 19 1992
HAZARDOUS WASTE
PERMITTING

Dear Mr. Gray:

Pursuant to 40 CFR 264.76, the following information is being submitted for an unmanifested waste shipment. Enclosed is information provided in lieu of a completed Form 8700-13B.

We tried to obtain this form from your office and EPA Region IV but a copy was not available. There are no forms in the booklet pertaining to filling an unmanifested waste report.

Hazardous waste was transported from 1 customer without a manifest. Enclosed is Appendix A, B, C, D, and E. The appendix provides information required under 40 CFR 264.76 for each customer.

Your cooperation and understanding in this regard is requested. If you have any questions, please call me at (813)682-8094.

Sincerely,

Juan M. Formoso

Juan M. Formoso
Branch Facility Manager
Miami Branch

cc; Mike Redig H.W.S. Tallahassee
Dave Deming Fuchs Bakeries
Victor L. San Agustin, P.E.

Appendix A -
Unmanifested Waste from Holsum/Fuchs Baking Co.

A. EPA ID Number, Name, and Address of Facility:

Safety-Kleen Corporation
8755 NW 95 Street
Medley, Florida 33178
EPA ID # FLD 984 171 694

B. Date Facility Received Waste:

October 1, 1992

C. EPA ID Number, Name, and Address of Generator and Transporter:

Generator: Holsum/Fuchs Baking Co.
 8700 NW 77 CT.
 Medley, Florida 33166
 EPA ID # FLD 004 118 303

Transporter: Safety-Kleen Corporation
 777 Big Timber Road
 Elgin, IL 60123
 EPA ID # ILD 051 060 408

D. Description and Quantity of Each Unmanifested Hazardous Waste and Facility Received:

Waste
Description: RQ Waste Paint Related Material
 Flammable Liquid UN1263
 Hazardous Waste Nos. F005, F003, D001, D006, D007, D008

Quantity: One 16 Gallon Drum
 Total Weight-96 pounds

Facility
Received: Safety-Kleen Corporation
 8755 NW 95 Street
 Medley, Florida 33178

E. Method of Treatment, Storage, and Disposal:

Waste was stored at the Medley facility in a RCRA permitted Container Storage Area. Waste was then shipped to Safety-Kleen's Recycle Center in Lexington, South Carolina. Waste is recycled back to recover the energy.

F. Explanation of Why Waste Was Unmanifested:

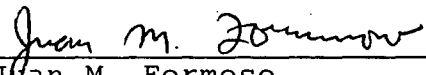
The waste was transported from Holsum last October 1, 1992. Holsum is located at 8700 NW 77 Ct. Medley, Florida 33166. Wastes had been manifested properly since Dec. 1991 until the October 1 pick-up. Branch personnel discovered last October 2 that a manifest was not used. Safety-Kleen Personnel inspected the paperwork that same day and confirmed that a manifest was not used.

Our transportation document (also known as a pre-print) shows the customer as a small quantity generator. Furthermore, the customer initialed on our preprint as conditionally exempt small quantity generator so the sales rep felt the information on the preprint was correct. Enclosed is a copy of the preprint. The rep who serviced Holsum was new to the paint refinishing division. He has been advised that these mistakes are intolerable. He is under close supervision and agreed that this won't happen again.

There is no excuse for this incident specially after more than 10 months of correctly manifesting Holsum waste. Disciplinary action has been taken internally to ensure this incident does not occur again.

G. Certification Signed by Authorized Representative:

This is to certify that the above information is true and correct to the best of my knowledge:



Juan M. Formoso
Branch Facility Manager



PAINT REFINISHING SERVICE

777 Big Timber Road • Elgin, Illinois 60123

DUNS NO. 05106-0408

FED. ID NO. 39-6090019

FOR SERVICE CALL
TRANSPORTER

LDR NOT RECD 220-2200

305-484-0123 GEORGE CARVAJAL

FL 33166

3-097-42-4038-3

HOLSUM

FUCHS BAKING CO

8700 NW 77 CT

MEDLEY

DEPT.	SCHEDULED SERVICE WEEK	SCHEDULED SERVICE TERRITORY	REFERENCE NUMBER
	92-4		396879

MANIFEST
NUMBER

96879

REQ=6P

SERVICE DATE		SALESMAN'S NO.		SALES SPECIALIST		SALES TAX EXEMPTION NUMBER		HANDLING CODE	CREDIT CODE	PAD P/S	PROD. P/S	PREVIOUS BALANCE	PORTION OVER 60 DAYS		
10/1/92		5969		XXXX				7	C	001	001	.00	.00		
BUSINESS TYPE	CHAIN	CUSTOMER P.O. NUMBER				GENERATOR/CUSTOMER PHONE #		O.C.	PAD TAX		SVS TAX	PRODUCT TAX	NEXT SVS PAD/PROD.	SERVICE INTERVAL	CHANGE SERVICE
09	NQ					(312) 806-1441			06500		06500	06500		04	

PAD TYPE	CONSIGNED	CLEAN	DIRTY	LOST/DAM	TOTAL	+/-	NEW INVENTORY	PADS ON/OFF	PRICE	DIRTY QUANTITY	SALES AMOUNT
5000	10	10	0		10						
5002	0				0						
5003	0				0						
5100	0				0						
5102	0				0						
TOTAL	10	10	0		10						

PAD TYPE	2 PRIOR	PRIOR 3	LAST	SUG. INV.	REMARKS	TAX	TOTAL PAD CHARGE
5000	3						
5002							
5003							
5100							
5102							

MACHINE NUMBER	SERVICE CHARGE	SALES TAX	TOTAL CHARGE	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)	CHANGE SCHEDULE DATE (Y Y W W)	REMARKS	MACHINE INSPECTION SECTION (PLEASE CHECK BOXES)
								MACHINE CONDITION & CLEANLINESS <input type="checkbox"/> YES <input type="checkbox"/> NO
								DECALS IN PLACE AND LEGIBLE <input type="checkbox"/> YES <input type="checkbox"/> NO
								LOCAL PHONE NO. STICKER AFFIXED TO MACHINE <input type="checkbox"/> YES <input type="checkbox"/> NO
								EMERGENCY CLOSING OF LID UNOBSTRUCTED <input type="checkbox"/> YES <input type="checkbox"/> NO
								MACHINE PROPERLY GROUNDED <input type="checkbox"/> YES <input type="checkbox"/> NO
								FUSIBLE LINK INSTALLED <input type="checkbox"/> YES <input type="checkbox"/> NO
								SPENT SOLVENT MEETS ACCEPTANCE CRITERIA <input type="checkbox"/> YES <input type="checkbox"/> NO
TOTAL SERVICE SECTION								
GENERATOR USA EPA NO. FLDC04118303								
GENERATOR STATE ID NO.								

HAZARDOUS WASTE INFORMATION	I certify that my total waste streams are within one of the following categories:
"This is to certify that the below named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation."	0 to 220 LBS./MONTH
CONTAINERS NO. TYPE TOTAL QUANTITY	220 LBS. to 2,200 LBS./MONTH
1 16GD 96	GREATER THAN 2,200 LBS./MONTH
US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	
HQ WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID, UN1263 (EPA F005, F003, D001, D006, D007, D008) (E1G #26) NO'S 5820-2 1/2 GALS., 5825-5 GALS.	
HQ WASTE PAINT RELATED MATERIAL FLAMMABLE LIQUID, UN1263 (EPA F005, F003, D001, D006, D007, D008) (E1G #26) NO. 6801-16 GALS.	
Total Quantity = Number of Drums x Ave. Wt/Drum of: 5 Gal. 27, 16 Gal. 96	

DESIGNATED FACILITY NAME AND ADDRESS:		SAFETY-KLEEN CORP.	USA EPA ID NO.	FLD984171694
8755 NW 95TH ST		MEDLEY	FL 33178	STATE ID NO.

SOLD ON PREVIOUS SERVICES	PRODUCT NUMBER	DESCRIPTION	MSDS GIVEN	PRICE	U/M	QUANTITY DELIVERED	INV CODE	SALES AMOUNT
2 PRIOR PRIOR LAST	1 400	MAX	<input type="checkbox"/>	17.50	EA			
	1 425	CLEANER, 10	<input type="checkbox"/>	7.50	PT	1		7.50
	1 3362	DRUM, 16 CL	<input type="checkbox"/>	59.00	EA	1		59.00
	1 6801	THINNER, 10	<input type="checkbox"/>	84.00	DR	1		84.00
	1 83362	DRUM, 16 CL	<input type="checkbox"/>	1.00	EA	1		1.00
		CAB. SALES	<input type="checkbox"/>	66.85		2		66.85
NAME TITLE SIGN NAME (CHANGE) TITLE SIGN								
1 EMILIO Y								
2								
PRODUCT TOTALS 217.35								
PRODUCT TAX 14.82								

PAYMENT RECEIVED SECTION			CHANGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. I HAVE ALSO NOTED THE NUMBER OF PADS CONSIGNED BY SAFETY-KLEEN CORP. ABOVE AND ACKNOWLEDGE THAT THEY ARE IN MY POSSESSION. THE ABOVE AMOUNT IS SUBJECT TO AN INTEREST CHARGE OF THE LESSER OF 1 1/2% PER MONTH (18% PER ANNUM) OR THE MAXIMUM RATE ALLOWED BY LAW ON ANY UNPAID INVOICES THAT ARE NOT PAID WITHIN 30 DAYS. VASIES THAT DO NOT CONFORM TO THE FOLLOWING SPECIFICATIONS WILL BE SUBJECT TO ADDITIONAL CHARGES: 1. LIQUID PUMPABLE AUTOMOTIVE 2. 0" OR LESS OF SOFT REFINISH PAINT RELATED MATERIALS. PENETRABLE SETTLING. IN THE EVENT OF DEFAULT, SAFETY-KLEEN SHALL BE ENTITLED TO RECOVER COSTS OF COLLECTION INCLUDING REASONABLE ATTORNEY'S FEES.	TOTAL SERVICE CHARGE (FROM ABOVE)	0166
CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:		TOTAL PAD CHARGE (FROM ABOVE)	
CHECK NUMBER	<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS			TOTAL DUE	231.97
INV #	AMOUNT \$				
INV #	AMOUNT \$				

IN EVENT OF EMERGENCY, CALL 1-800-669-5740 or 1-708-888-4660 (24 hours)

X John R. Burke PRINT NAME John R. Burke