



Sent Via Federal Express
P383 205 876

March 26, 1993

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APR 1 1993

ED

PERMITTING

Mr. Vivek Kamath
Division Of Waste Management
Florida Dept. Of Environmental Regulation
Southeast District
1900 S. Congress Ave., Suite A
West Palm Beach, FL 33406

Re: 8 Gallons Spill Last March 13, 1993
Sears Roebuck & Co. #8065 Opa-Locka, FL.
CESQG

Dear Mr. Kamath,

The following information is being submitted for an incident
at the referenced facility pursuant to 40 CFR 263.30.

Facility Operator: Safety-Kleen Corp.
777 Big Timber Rd.
Elgin, IL 60123

Facility Location: Safety-Kleen Corp. FL 8984171696
8755 NW 95th Street
Medley, FL. 33178

Location of Incident: Sears Roebuck & Co. #8065
13350 N.W. 42 Ave
Opa-Locka, FL 33054

EPA I.D. Number: CESQG

1. Report Date: March 26, 1993
2. Person Making Report: Juan Formoso
3. Date and Time of Incident: March 13, 1993 At 10:45 A.M.
4. Description of Incident: After servicing the customer, the sales representative was loading his handtruck into the storage compartment of the truck. Accidentally, he struck the 16 gallon drum with the handtruck and the material spilled on to the asphalted parking lot.

5. Extent of Personnel Injuries: None
6. Extent of Property Damage: None
7. Description and Estimated Quantity of Any Materials Released: Approximately 8 gallons of waste 105 solvent.
8. Human Health and Environmental Impact Assessment: None
9. Remedial Action Taken: Quickly the rep got absorbent pads from his truck to contain and absorb the spill. The waste was put back in the 16 gallon drum. No sewer or soil contact occurred. Waste generated was transported to our Medley Service Center and placed in one of our satellite accumulation drums and shipped to our Tampa Accumulation Center on March 24, 1993 under manifest number 00309, then it will be shipped to our Hebron, Ohio Recycle Center.
10. Estimated Quantity of Clean-Up Residue for Treatment of Disposal: 1-16 gallon drum containing approximately 8 gallons of absorbent materials and mineral spirits.

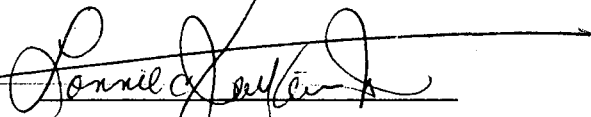
This letter also serves as notification that the spill has been cleaned up, and that all emergency equipment is again ready for use. Please contact me at (305) 884-0123 if you have any questions.

Sincerely,

Juan M. Formoso

Juan M. Formoso
Safety-Kleen Corp.
Branch Facility Manager

This is to acknowledge that I am aware of the spill as described above and that the information is true and correct to the best of my knowledge.



Lonnie C. Jenkins Jr
Authorized Representative
for Sears Roebuck & Co.

777 Big Timber Road
Elgin, Illinois 60123



FOR SERVICE CALL
TRANSPORTER

DUNS NO. 05106-0408 FED. ID NO. 39-6090019

305-834-6123 - JORGE CARVAJAL

FOR INFO

220-2200 pf

6-049-01-0240

SEARS ROEBUCK & CO.

ATTN DALLAS ACCTS PAY CTR

PO BOX 660200

DALLAS

18 75460

3-097-02-3034-8
SEARS ROEBUCK & CO 48065
13350 NW 42 AVE
OPALOCKA

FL 33034

BILL

SERVICE DATE 3/13/02		SALES MAN'S NO. 3455		SALES SPECIALIST XXXX		SALES TAX EXEMPTION NUMBER		HANDLING CODE N		CREDIT CODE N		PREVIOUS BALANCE 367.42		PORTION OVER 60 DAYS					
ISSINITY TYPE Q3		CHAIN 002300		CUSTOMER P.O. NUMBER		GENERATOR/CUSTOMER PHONE # 305-688-3371		O.C. NU		SVC P/S 804		PROD. P/S 028		SERVICE TAX .065		C.O.M.S. TAX .065		PRODUCT TAX .065	

MACHINE SERVICE SECTION

MACHINE INSPECTION SECTION

MACHINE NUMBER	SERVICE CHARGE	SALES TAX	TOTAL CHARGE	SERVICE TERM	CHANGE SERVICE TERM		CHANGE SCHEDULE DATE (YY WW)	REMARKS	PLEASE CHECK APPROPRIATE BOXES		
					(WEEKS)	(INITIAL)			GOOD	POOR	
71-34778	52.50	3.41	55.91	09				TYPewriter SHOP	MACHINE CONDITION & CLEANLINESS	<input type="checkbox"/>	<input type="checkbox"/>
									LAMP ASSEMBLY CONDITION	<input type="checkbox"/>	<input type="checkbox"/>
										YES	NO
									DECALS IN PLACE AND LEGIBLE	<input type="checkbox"/>	<input type="checkbox"/>
									FUSIBLE LINK INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>
									EMERGENCY CLOSING OF LID UNOBSTRUCTED	<input type="checkbox"/>	<input type="checkbox"/>
									MACHINE PROPERLY GROUNDED	<input type="checkbox"/>	<input type="checkbox"/>
									LOCAL PHONE NO. STICKER AFFIXED TO MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
									SPENT SOLVENT MEETS ACCEPTANCE CRITERIA	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL SERVICE SECTION	52.50	3.41	55.91	GENERATOR USA EPA ID NO.			GENERATOR STATE ID NO.		10-005-0120		

HAZARDOUS WASTE INFORMATION:

"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."

I certify that my total waste streams are within one of the following categories:

CONTAINERS				US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	USEPA TRANSPORTER ID# ILD051060408	the following categories:
'A/LB C. DM	SSPW TANKS OF	16 GAL. NO. DM	30 GAL. NO. DM	TOTAL LBS. OR GAL.		
		1		8	Waste Combustible Liquid, N.O.S. (Mineral Spirits) NA1620 PGI (EPA, D001, D018, D039) (ERG #27) 111 GALLONS	0 to 220 lbs./month Initials
					Waste Compounds, Cleaning Liquid, (Monoethanolamine) 8, NA1760 PGI (EPA, D008, D007, D008, D018, D021, D027, D039, D040) (ERG #80)	220 lbs. to 2,200 lbs./month Initials
						Greater than 2,200 lbs./month Initials

Total Quantity = Number of Drums x Ave. Wt/Drum of: Pails

DESIGNATED FACILITY: NAME AND ADDRESS:

SAFARI-ALLEN CORP.

8755 NW 95TH ST.

MEDLEY

FL 33175

USA EPA ID NO

FL0004171094

STATE ID NO

PRODUCT SALES SECTION

[illegible]

PAYMENT RECEIVED SECTION

CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:
CHECK NUMBER		<input type="checkbox"/> TODAYS SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS

IV. # _____	AMOUNT \$ _____
IV. # _____	AMOUNT \$ _____
IV. # _____	AMOUNT \$ _____

TOTAL PRODUCT AMOUNTS

CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. ALSO I HAVE NOTED THE MACHINE INSPECTION SECTION ABOVE AND THE PRESENCE OF MACHINE, SOLVENT AND RECLAMATION AGREEMENT INFORMATION ON THE REVERSE SIDE. THE ABOVE AMOUNT IS SUBJECT TO AN INTEREST CHARGE OF THE LESSOR OF 1 1/2% PER MONTH. THE MAXIMUM MONTHLY PAYMENT RATE ALLOWED BY LAW ON ANY UNPAID INVOICES THAT ARE NOT PAID WITHIN 30 DAYS.

**TOTAL SERVICE AMOUNT
(FROM ABOVE)**

TOTAL DUE

IN THE EVENT OF DEFAULT, SAFETY-KLEEN SHALL BE ENTITLED TO RECOVER COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES.

IN EVENT OF EMERGENCY CALL

Print
Name: _____

BRANCH - TSD

SERVICE/SALES ACKNOWLEDGEMENT

CPM INC 7000 12 BSV 1023