

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

BOB MARTINEZ CENTER 2600 BLAIRSTONE ROAD TALLAHASSEE, FLORIDA 32399-2400 RICK SCOTT GOVERNOR

CARLOS LOPEZ-CANTERA LT. GOVERNOR

HERSCHEL T. VINYARD JR. SECRETARY

03/10/2014 Jason Muhlenkamp, Facility Manager Lighting Resources LLC 1007 SW 16th Ln Ocala, FL 34471

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 **Lighting Resources LLC** located at **1007 SW 16th Ln, Ocala , FL34474**

FLR000070565

Your facility notified FDEP requesting the following hazardous waste status/activities which do not require a separate submission: Large Quantity Generator; Universal Waste Lamps, Universal Waste Devices, Large Quantity Handler; Commercial HW Recycler.

Your facility is currently registered for the following activities: UW Lamp Transporter, UW Device Transporter, UW Lamp LQH, UW Device LQH (reg exp on 03/01/2015); HW Transporter (reg exp on 11/30/2014).

Your facility is currently permitted/active as: Operating Commercial TSD (exp on 07/06/2017); Mercury Recovery/Reclamation Facility (exp on 07/06/2017).

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.

To review the details of your status, visit:

http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLR000070565. For further assistance, please contact me at (850) 245-8749 or email at Glen.Perrigan@dep.state.fl.us

Sincerely,

Glen Perrigan

Environmental Manager

Kobin K. Pandley

Hazardous Waste Regulation Section

ME ID: 40403 , Email Address: jason.muhlenkamp@lightingresourcesinc.com

FLORIDA

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 (850) 245-8707 Date Received

RECEIVED

(for FDEP Official Use Only)
ENTRONMENTAL PROTECTION

FEB 202014

PERMITTING & COMPLIANCE

EPA ID: F L	RODDO	7056	5	Please us	e the instru	ctions	document to dompi	ARAMIE PROGRAM	<u> </u>	
Reason for Submittal (all submitters must	Mark 'X' in the correct box: To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, used oil activities, or PCW activities). (must choose one To provide subsequent notification (to update status and facility identification information).									
complete pages 1 and 2 and sign page 5.	if a notification) To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5)									
Pages 3 and 4, - complete as applicable)	FL Registration(s)									
2. Facility or Business Name	Lightin	y Resource	25 L	LC						
3. Facility Operator (List additional Opera-	Name of Operator: Lighting Resources LLC					Date became Operator:// New Operator mm dd yy				
tors in the comments	Street or P.O. Box: 1007 5 W 16th Lane					Phone Number: 352-509-3001				
section).	City or Town: Ocala State: FL					L	Zip Code: Country (if not USA):			
	Operator Type: Private Federal Municipal State County Other									
4. Facility Physical	Physical Street Address: Vessel									
Location Information (No P.O. Boxes)	City or Town: Ocala					1 -	Code: 34471			
Same address as #3 above or:	Country (if not USA):									
5. Facility North An Classification Sys		A. 1516	<u> 2 1</u>	11	(required) B.	1 <u>5 6 2</u>	11131		
Code(s) (at least 5		c. <u> </u>	<u> </u>	_		D.	<u> _ _ </u>			
6. Facility or	Same address as #_ above or: Street or P.O. Box: 1007 Sw 16th Lane									
Business Mailing Address		iala			te: FL		ostal Code:	Country (if not USA):		
7. Facility or Business	First Name: Jase	on	Last Na	ame:	enkamp		Title: Facilit	Manager		
RCRA Contact Person		09-3001	Extens	ion:	E-Mail:	leakan	Pelighting resource	Fax: 352-509-30	DI3	
☐ Same address as	Successification I And Constitution									
#above or:	City or Town:				State: FL		Zip Code: 34471	Country (if not USA):		
8. Real Property (FL Land) Owner	yner Lighting Resources LL			7			Date became Owner://_ New Owner mm dd yy			
of the Facility's Physical Location				7 350		P	hone Number: 805-634-3050			
(List additional owners in the comments section.)	City or Town:	Valley	State:			- 1	Zip Code: Country (if not USA):			
Same address as # above or:	Owner Type: Private Pederal Municipal State County Other									

RCRA Hazardous Waste Status Notification or Out of Business Notification				EPA ID No.						
9.	9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):									
(<i>A</i>	A) (1)Generator	of Hazardous '	Waste	For Ite	ns 2 through	17, mark 'X' in all	that apply.			
	Yes 🗆 No	(Do not include	le Universal Waste or Used O	(2) T	eater, Store	er, or Disposer of H	lazardous Waste			
		only one of the	following three categories		(at your faci	lity) Note: A hazar may be	dous waste permit required for this activity.			
	Genera greater hazardo	tes in any calend per month (kg/r ous waste; or Gr	ator (LQG): dar month 1,000 kilograms no) (2,200 lbs.) of non-act eater than 1 kg (2.2 lbs) te (at least once a year)		□ b. O ₁ □ c. No	perating Commercia perating Non-Common-Operating: Poste permit or Order (HSV	nercial TSD losure or Corrective Action			
	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				(3) Recycler of Hazardous Waste (at your facility) Specify: Commercial Non-Commercial. Note: A permit is required for storage prior to recycling.					
	lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste (at least once a year)			(4) [(4) Exempt Boiler and/or Industrial Furnace a. Small Quantity On-site Burner Exemption b. Smelting, Melting, and Refining Furnace Exemption					
	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 (2.2 lbs) or less of acute hazardous waste			(6)	(5) Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization					
	_		rator activities that apply	-	OR the authorization you received from FDEP.					
d. Short-Term Generator (one-time, not on-going) e. Episodic: Not more than one-time per year:SQGLQG f. United States Importer of hazardous waste g. Mixed Waste (hazardous and radioactive) Generator			_LQG (7) [(6) ☐ Receives Hazardous Waste from Off-Site (7) ☐ Underground Injection Control 						
10	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, K019, P012, U112).									
1		<u> </u>	12	T.	15	ents or an additional	l page if more spaces are needed.			
8	0009	² Doob		11 UISI	12	13	14			
15		<i>1</i> 6	17	18	19	20	21			
11	. Other Statu	L	(If no longer handling was	te or closed, section	9 and 10 sh	ould be blank and s	kip Section 12-16):			
	(A) Non-Handle	r of Regulated	Waste at This Facility (S	Sections 9, 10 and 12	-16 should b	e blank.)				
	(1) Business no longer generates, transports, treats, stores, disposes of, or otherwise handles any regulated waste.									
	(B) Facility Closed (Complete this section only if <u>all</u> business activities at this facility have ceased.)									
	(1) Closed at this location and moved or moving to another - Submit a new Form 8700-12FL for the new location if you will									
	(2) Out of Business - Business closed on (date)									
☐ (C) Property Tax Default ☐ (D) Petition for Bankruptcy Protection										
12-14 — Registration Activities Contact Information (only if this submission is a registration or registration information update):										
	Same as Facility Contact on page 1	or enter:	Jason		luhlenk	amp	Title: Facility Manager			
C.	ntact for		Number: 553-509-3601	Extension:	E-Mail:	. Mulkakamp@ 1	ighting resources inc. com			
		Street	or P.O. Boy:	SW 16th L.	J	a transference & age (1. 1			
	Used Oil Handler Universal Waste	City o	r Town:		State:(C		Zip Code:			

Universal \	Vaste Notification and Mercury Transported Handler Registration EPA ID No.							
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply):								
A. Federal Notification Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 lb) or more of any combination of UW accumulated (at any one time)								
	Accumulates: 🖀 a. UW Batteries 🔲 b. Pesticides 🖵 c. Pharmacet	ıticals						
	d. Mercury Containing Devices e. Mercury Contai	ning Lamps						
	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.							
B. Florida	Universal Pharmaceutical Waste (UPW): one-time registration							
☐ Pha	maceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)							
☐ Pha	maceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated						
☐ Rev	erse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])						
☐ Flor	da Universal Pharmaceutical Waste (UPW) Transporter							
C. Florida	Annual Mercury Handler Registration:							
(1) This fo	If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below. (1) This form is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-hire Activities First time registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH registration is attached							
For	-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices							
For	-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual						
	rcury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Registration Required						
Me	Mercury-Containing Devices LOH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler Annual Registration							
Me	rcury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	one- time \$1,000 fee+ More Requirements (contact FDEP)						
	y Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) First time registering Renewal	Annual Registration Required						
Briefly Describe your Universal Waste Activities:								
	tate Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transpo							

Hazardoue Wa	ste and Used Oil Transporter Registrati	one	EPA ID No.			
		-				
14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities)						
Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. Generators of hazardous waste who transport waste only within the boundaries of their facility should not register.						
A. HW Transporter Registration Information (must be completed annually and when this information changes)						
This facility is a registered transporter of hazardous waste.						
This form is: 🔲 Initial Registration 🛛 Renewal 🚨 Notification of changes 🚨 Cancel Registration						
1. For own waste only 2. For commercial purposes 3. Both commercial and own waste						
4. Transportation Mode Air Rail Highway Water Other - specify						
B. HW Transfer Facility Registration Information (must be completed annually and when this information changes)						
☐ This facility is a Hazardous Waste Transfer Facility: (at this location) Storage Volume						
This form is: 🔲 Initial Registration 🔲 Renewal 🚨 Notification of changes 🚨 Cancel Registration						
Note: Hazardo	ous Waste transfer facilities must comply with the	requirements of Ru	le 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.			
The Transfer Facility records required under the provisions of Rule 62-730.171(6), F.A.C., are kept at (check one): Our mailing (business) address The site (facility) address						
Please enter the EPA	ID Number of the HW Transporter who carries the	insurance for this Tra	nsfer Facility:			
Please see the top of page 5 for additional items that must be submitted in addition to the above registration for Hazardous Waste Transfer Facilities [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:						
15. Used Oil an	d Oil Filter Activities: : (Mark 'X' and com	plete all that apply if	you need to register your used oil activities),			
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facilities, processors, off-specification burners, and/or marketers must annually register with the Department using this form. All except Florida used oil (UO) Processors and collection centers must pay an annual \$100 registration fee.						
This form	is: 🔲 Initial Registration 🚨 Renewal 🧵	Notification of	changes 🔲 Cancel Registration			
☐ If applic	able, a check or money order, in the amount of \$100	, payable to Florida D	epartment of Environmental Protection is enclosed.			
(1) Used Oil Trans	porter - mark activities: (occurring in Florida)	(6) Used Oil Filte	r Management (must annually register)			
🗖 a. Tra	nsporter (off-site) and noncontiguous locations	a. Transpo	orter			
🗖 b. Tra	nsfer Facility	🚨 b. Transfe	•			
(2) Collection Shipment)	n Center (From businesses, <u>no more than</u> 55 gal per	d. End Us	sor (Annual Report Required)			
(3) Used Oil	Processor (A permit is required.)		quired under the provisions of Rule 62-710.510,			
_	ification Used Oil Burner		at (check one):			
(5) Used Oil Fuel	Marketer ☐ On-Spec ☐ Off-Spec	Uur mailir	ng (business) address			
		L				
Please see the top of page 5 for additional items that must be submitted in addition to the above registration and fees required for non-exempt Used Oil Transporters.						

Transfer Facility and Used Oil Transporter requirem	ents and required signature page	EPA ID No.				
(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [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					
* **	es (F.S.) [Rule 62-730.171(3)(a)1., F.A	-				
Evidence of the transporter's financial responsil	-					
A brief general description of the transfer facili A copy of the facility closure plan [Rule 62-730]	• •	F.A.C.J				
_A copy of the contingency and emergency plan _A map or maps of the transfer facility [Rule 62-						
A map of maps of the transfer facility [Kute 02-	-730.171(3)(a)7.,1.A.C.]					
(15 cont.) Used Oil Transporters: (Exemptions in						
In addition to the requirements on Page 4 Secti			. 4			
 ALL registered UO Handlers must submit their own company. 	an annual report except generators tran	isporting OO from noncor	nnguou	is operations within		
UO transporters transporting off-site over	public highways only within their own	company must submit pro	of of i	nsurance.		
UO transporters transporting more than 50		= -				
submission as a certified used oil transpor	ter in section 17 (except those exempted b	y Rule 62-710.600(1), F.A.C	.):.	-		
The used oil annual report is attached	Evidence of Liability Insurance pure	suant to 62-710.600(2)(e).	, F.A.C	. is attached.		
17. Certification: I certify under penalty of law that accordance with a system designed to assure that qu submitted is, to the best of my knowledge and belief false information, including the possibility of fine and the control of	alified personnel properly gather and e f, true, accurate, and complete. I am aw nd imprisonment for knowing violation	valuate the information sul are that there are significants.	bmitted nt pena	The information alties for submitting		
I certify as a Used Oil Transporter that I am familiar with the applicable Florida and Federal laws and rules governing used oil transportation and have an annual and new employee training program in place covering the applicable used oil rules. Evidence of financial responsibility is demonstrated by the Used Oil Transporter Certificate of Liability Insurance, DEP form 62-730.900(5)(a), F.A.C						
Signature of owner, operator, or an authorized representative	Print Name and '	Fitle	Used Oil	Date Signed (mm-dd-yyyy)		
Jason Mullenland	Joson Muhlenkamp, B	ranch Manager		2/10/14		
				, , ,		
	-			 		
If the person that filled in this form is not the Facilit	y Contact or Operator, please comple	ete the information below	v:			
(Name of person completing this form)	(Phone Number)	(E-mail Address)				