Winston, Kathy

From: Steve Collins <SCollins@cliffberryinc.com>

Sent: Monday, July 21, 2014 3:12 PM

To: Winston, Kathy

Subject: FW: FDEP inspection of CBI Miami Facility

Attachments: doc06975820140630162539.pdf; doc06975920140630162617.pdf;

doc06976220140630162715.pdf; doc06976320140630162751.pdf;

doc06976620140630162837.pdf; 9 SPCC Plan - Miami Facility Emergency 9.pdf

FYI

Best regards,

Steve

Steve Collins, CHMM Manager of Health & Safety and Regulatory Affairs Cliff Berry, Inc. (954) 763-3390



From: Steve Collins

Sent: Monday, June 30, 2014 4:33 PM

To: 'Winston, Kathy'

Subject: FW: FDEP inspection of CBI Miami Facility

- 1. Scans of the return receipts are attached.
- 2. The Emergency Plan pages have been modified to note the Facility Manager and Deputy Facility Manager as the Primary and Secondary contacts.

Best regards,

Steve

Steve Collins, CHMM Manager of Health & Safety and Regulatory Affairs Cliff Berry, Inc. (954) 763-3390



From: Steve Collins

Sent: Tuesday, June 17, 2014 4:43 PM

To: 'Winston, Kathy'

Subject: RE: FDEP inspection of CBI Miami Facility

All of the discrepancies mentioned in the earlier report have been taken care of so I should be able to get back to you without any problems. Good luck next fortnight.

Best regards,

Steve

Steve Collins, CHMM



From: Winston, Kathy [mailto:Kathy.Winston@dep.state.fl.us]

Sent: Tuesday, June 17, 2014 12:56 PM

To: Steve Collins

Subject: RE: FDEP inspection of CBI Miami Facility

Here is the inspection report you requested. I found a few other issues when I went through my field notes but they were minor and were addressed during the inspection. I hope to get my response letter out to you soon. My field schedule is pretty heavy for the next week and a half; as EPA is coming for joint inspections, I have a request from another program to look at a site for them, and I am accompanying one of my newer inspectors on her first transporter inspection. Nonetheless, you will be hearing from me soon and I should be able to get the report for the Port Everglades inspection in April out soon, as well, as I have templates for that facility.

From: Steve Collins [mailto:SCollins@cliffberryinc.com]

Sent: Monday, June 16, 2014 10:16 AM

To: Winston, Kathy

Steve

Steve Collins, CHMM Manager of Health & Safety and Regulatory Affairs Cliff Berry, Inc. (954) 763-3390



Subject: FDEP inspection of CBI Miami Facility

Is there a copy of the inspection report (CBI Miami) that I may have?

Best regards,



FACILITY EMERGENCY

Name of Facility: Miami Facility

Type of Facility: Oily Wastewater Processing Facility

Location of Facility: 3033 N.W. North River Drive

Miami, FL 33142

Name and Address of Owner or Operator:

Name: Cliff Berry, Inc.

Address: PO Box 13079

Fort Lauderdale, FL 33316

Person accountable for spill prevention, emergency procedures, reporting and employee training.

Name: Cliff Berry, II
Title: President

MANAGEMENT APPROVAL

The individuals designated as Primary Emergency Coordinator, or in the absence of the Primary Emergency Coordinator the Back-up Emergency Coordinators, are authorized to commit the resources needed to carry out this plan.

Signature

Name: Cliff Berry, II Title: President

Review and Update

This contingency plan will be reviewed, and immediately amended, if necessary, whenever:

- 1. Applicable regulations are revised,
- 2. The plan fails in an emergency,
- 3. The facility changes in its design, construction, operation, maintenance, or other circumstances in a way that materially increases the potential for fires, explosions, or releases of used oil, or changes the response capability in an emergency,
- 4. The list of emergency coordinators changes, or
- 5. The list of emergency equipment changes.

Emergency Response Arrangements

Fire Department: Miami-Dade County Fire Department
 Police Department: Miami-Dade County Sheriff's Office
 Hospital: Jackson Memorial Medical Center
 Emergency Response Contractor: Cliff Berry, Inc.

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EMERGENCY COORDINATORS

1. Primary Emergency Coordinator

Name: Leroy Arce

Title: Facility Manager

Address: 14070 S.W. 33rd Court

Davie, FL 33330

Phone: Office: (954) 763-3390

Home: (954) 472-2735 Cell: (954) 325-7395

2. Secondary Emergency Coordinator

Name: Pedro Stiassni

Title: Plant Operations

Address: 3220 NW 94th Terrace

Sunrise, Florida 33351

Phone: Office: (954) 763-3390

Home: (954) 348-3838 Cell: (954) 348-3838

3. Back-up Emergency Coordinator

Name: Cliff Berry II

Title: President

Address: 1119 N.E. 18th Avenue

Fort Lauderdale, FL 33304

Phone: Office: (954) 763-3390

Home: (954) 524-3994 Cell: (954) 325-7392

Miami Facility Fax Number: (305) 638-0610

24 Hour Emergency Number: (800) 899-7745

Emergency Procedures – Responsibilities of the Emergency Coordinator or Designee

- 1. <u>Activate</u> the Facility alarm/communication system to notify all facility personnel by:
 - a. Announce the emergency situation using Nextell radio system.
 - b. Notify facility personnel by word of mouth.
- 2. <u>Notify</u> appropriate State and Local Agencies with designated response roles if their help is needed. In the case of fire or explosion:
 - a. Call 911 to notify the fire department.
- 3. <u>Identify</u> the character, exact source, amount and extent of any released materials. This may be done by observation, review of facility records or chemical analysis.
- 4. <u>Assess</u> possible hazards to human health of the environment that may result from the release, fire, or explosion. This assessment must consider both direct and indirect effects of the release, fire or explosion. If assessment indicates that evacuation of local areas may be advisable, immediately notify appropriate local authorities. Be available to help local authorities to decide whether local area should be evacuated.
- 5. <u>Notify</u> immediately the government official designated as the On Scene Coordinator (OSC) of the National Response Center using their twenty-four (24) hour toll free number (800) 424-8802. The report must include:
 - a. Name and telephone number of person reporting,
 - b.Name and address of the facility
 - c. Time and type of incident (release, fire, etc.),
 - d.Name and quantity of the material(s) involved,
 - e. The extent of injuries, if any, and
 - f. The possible hazards to human health or the environment outside the facility.
- 6. <u>Take</u> all reasonable actions necessary to ensure that releases, fires and explosions do not occur, recur, or spread to other used oil or waste at the facility.
- 7. <u>After</u> the emergency is over, provide for the recycling, storing or disposal of recovered material or material that results from a release, fire or explosion. In the affected area(s) of the facility make sure that no waste o used oil that may be incompatible with the release material is recycled, treated, stored or disposed of until clean-up procedures are completed. All emergency equipment listed in the contingency plan need to be cleaned and fit for its intended use before operations are resumed.

- 8. <u>Notify</u> the Regional Administrator and appropriate State and Local Authorities that the facility is in compliance with 40 CFR part 279.52 before resuming operations in the affected area(s) of the facility.
- 9. <u>Note</u> in the operating record the time, date and detail of the incident that requires implementing the contingency plan.
- 10. <u>Submit</u> a written report within fifteen (15) days after the incident to the Regional Administrator. The report must include:
 - a. Name, address and telephone number of the owner or operator,
 - b. Name, address and telephone number of the facility,
 - c. Date, time and type of incident (release, fire, etc.),
 - d. Name and quantity of materials involved,
 - e. The extent of injuries, if any,
 - f. An assessment of actual or potential hazards to human health or the environment, where applicable, and
 - g. Estimated quantity and disposition of recovered material that resulted from the incident.

Requirements for Notification

- 1. Name and telephone number of person making the notification
- 2. Name and address of the facility
- 3. Type and time of incident
- 4. Name and quantity of the material involved
- 5. The extent of injuries, if any
- 6. The possible hazards to human health or the environment outside the facility

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- 7. The name and telephone number of the person or persons to be contacted for more information. See list of Emergency Coordinators in this section.
- 8. Wait for the other party to hang up <u>do not hang up first.</u>

Emergency Contact Phone Numbers

1. Primary Emergency Contact Person – Office Phone: (954) 325-7395	Leroy Arce(954) 325-7395
Office Address: 3033 N.W. North	n River Drive, Miami, FL
Home Address: 14070 S.W. 33 rd	
Secondary Emergency Contact Person	- Pedro Stiassni(954) 348-3838
Office Phone: (954) 763-3390 ex	t. 2002
Office Address: 3033 N.W. North	
Home Address: 3220 NW 94 th Te	errace, Sunrise, FL
2 Fire	911
	t(786) 331-5000
Whamii-Dade County I he Department	(760) 331-3000
3. Police	911
Miami-Dade County Sheriff's Office.	(305) 326-3333
4 4 1 1	011
4. Ambulance	911
5. Nearest Emergency Medical Facility	
Jackson Memorial Hospital Center	
*	FL(305) 585-1111
6. Nearest Hospital	
Jackson Memorial Hospital Center	
•	FL(305) 585-1111
7. National Response Center	
8. Federal – U.S. EPA, Region IV	
9. State – Florida DEP	
Emergency Response	
10. Local – Miami-Dade Permitting, En	vironment and Pagulatory Affairs
•	(305) 372-6955
701 NW 1 Court, Whalin, TL	(303) 372-0933
11. Chemtrec	
12. U.S. Coast Guard	
13. 3E Company	