

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

07/25/2014 Gerry McCormick, VP Diversified Environmental Services Inc 1201 N 22nd St Tampa, FL 33605-5314

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 **Diversified Environmental Services Inc** located at **1201 N 22nd St # 200, Tampa , FL33605-5314**

FLD984183566

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not** require a separate submission: Non-Handler of Hazardous Waste.

Your facility is **currently registered** for the following activities: **HW Transporter (reg exp on 06/30/2015)**; **Used Oil Transporter, Used Oil Transfer Facility, Used Oil Filter Transporter (reg exp on 06/30/2015)**.

Your facility is currently permitted/active as: No Active Hazardous Waste Treatment, Storage, or Disposal Permit.

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=FLD984183566. For further assistance, please contact me at (850) 245-8749 or email at Glen.Perrigan@dep.state.fl.us .

Sincerely,

Glen Perrigan

Environmental Manager

Robin K. Pandley

Hazardous Waste Regulation Section

ME ID: 49178, Email Address: desdmtgerry@gmail.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 RECEIVED RECEIVED IN THE PROPERTY OF THE PROPE

PERMITTING & COMPLIANCE ASSISTANCE PROGRAM

EPA ID: F L	D 9 8 4 1	8 3	5 6	6	Please t	ise the instru	ections	documen	it to co	mplete	this fo	m	E ALL SALES
1. Reason for Submittal (all submitters must complete pages 1 and 2 and sign page 5.	Mark 'X' in the correct box: (must choose one if a notification)	the correct box: waste, universal waste, used oil activities, or PCW activities). (must choose one To provide subsequent notification (to update status and facility identification information).											
Pages 3 and 4, - complete as applicable)	FL Registration(s)	To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5) FL Registration(s) UW Mercury (see page 3) HW Transporter (see page 4) Used Oil (see page 4)											
2. Facility or Business Name	Diversified Environmental Services Inc.												
3. Facility Operator (List additional Opera-	Name of Operator: Diversified E	Enviro	onme	ntal S	ervic	es Inc.			w Ope	rator		/ ⁰¹ m d	/ ⁹³ d yy
tors in the comments section).	Street or P.O. Box: PO Box 535	57						Phone 1 813-	248	-325			
	City or Town: Tampa				_	State: FL		Zip Coc 33675			ountry (if not	USA):
		Privat	e 🖵 Fee	leral 🗆	Munici	ipal 🗆 Sta	te 🗆	County	Oth	er			
4. Facility Physical	•	Physical Street Address: Uvessel 1201 North 22nd St.											
Location Information (No P.O. Boxes)	City or Town: Tampa						State: Zip Code: FL 33605						
Same address as #3 above or:	Country: Country (if not USA): Hillsborough												
5. Facility North An Classification Sys		Α.	<u>p</u> <u>2</u>	<u>1 3</u>	<u> 1 C</u>	(required) B.	. <u> </u> _	_ _	_	_	<u> </u>	
Code(s) (at least 5	digits)	C.	<u> _</u>	<u> </u>			D	. <u> </u>				<u> </u>	
6. Facility or Business	Same address as # above or: Street or P.O. Box:												
Mailing Address	City or Town:				S	tate:	Zip/I	Postal Cod	le:		ountry (i	if not	JSA):
7. Facility or Business	First Name: Gerry			Last Nat		ck	Vice President						
RCRA Contact Person	Phone Number: 813-248-32			Extension		E-Mail: Fax: desdmtgerry@gmail.com 813-24			 247-{	5453			
☐ Same address as	Street or P.O. Box:	1201	N 22ı	nd St.	•								
#above or:	City or Town: Tampa		·			State: FL		Zip Cod 33605			Countr	y (if n	ot USA):
8. Real Property (FL Land) Owner of the Facility's	Name of Owner: Diversified E	Enviro	onmei	ntal S	ervic	es Inc.		Date bed	came C New C)1 /9 im d	93 ld yy
Physical Location (List additional	Street or P.O. Box: 1201 N 22nd St.							Phone Nun 13-248-3					
owners in the com- ments section.)	City or Town: Tampa					State: FL		Zip Cod 3360			Countr	y (if n	ot USA):
Same address as # above or:	Owner Type:	Private	Feder	al 🗆	Municip	al State		County [Other				

	A Hazardous Waste	Status No	tification or Out of	Busi	ness Notificat	lion	EPA ID No.	FLD98418	33566
9. R	CRA Hazardous	Waste Act	ivities at this Fac	cility	: (Mark 'X'	in all that	apply):		
(A) ((1)Generator of Haza	rdous Waste	e		For Items	2 through 7	, mark 'X' i	in all that apply.	
_z	Yes 🗖 No (Done	ot include Univ	versal Waste or Used Oil	1)	(2) Tres	ter, Storer,	or Disposer	r of Hazardous W	Vaste
If Y	YES, Choose only one		-	,	(a	t your facilit		hazardous waste p ay be required for	
_	a. Large Quantity Generates in an		(LQG): onth 1,000 kilograms	or		a. Oper	rating Comm	_	•
			2,200 lbs.) of non-acut than 1 kg (2.2 lbs)	te			-	Commercial TSD	
			least once a year)					Postclosure or Cor (HSWA, etc.)	rrective Action
	b. Small Quantity	Generator (SQG):		(3)			(HSWA, etc.) Waste (at your fa	acility)
	Generates in an	y calendar me	onth greater than	200	S	Specify:	Commerci	al Non-Con	nmercial.
			0 kg/mo (>220 to <2,2 waste and/or 1 kg	200		=	=	for storage prior to	
	(2.2 lbs) or less (at least once a		ardous waste		(4)			Industrial Furna On-site Burner Exc	
	·	•				_	•		urnace Exemption
	c. Conditionally E		(CESQG): onth 100 kg/mo or les	_	· 🗖		-	_	_
	(220 lbs.) of no	n-acute hazar	dous waste and 1 kg	is	(5)			Aanage Condition Other Facilities	nally Exempt
	(2.2 lbs) or less	of acute haza	ırdous waste			Choose thi	s manageme	nt activity ONLY	
Ins	addition, indicate oth	er generator	activities that apply	7.				r application for s ou received from l	
	d. Short-Term Gener	_			(6)		-	aste from Off-Si	
	-		me per year:SQG_	_LQC	3 ~ □	T7 3	T T 242	O 41	
	f. United States Impe				(7)	Undergrou	nd Injection	a Control	
_	g. Mixed Waste (naz	ardous and r	adioactive) Generator	· 	T				
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).									wastes handled at
3	•		they are presented in	the re	gulations (e.g.,	D001, D003,	, F007, K019	9, P012, U112).	
1	•		_	the re	gulations (e.g.,	D001, D003,	, F007, K019	9, P012, U112).	
	Hazardous waste		they are presented in list codes routinely or	the re	gulations (e.g.,	D001, D003, Jse commen	, F007, K019 ts or an addi	9, P012, U112). tional page if mor	e spaces are needed.
1	Hazardous waste		they are presented in list codes routinely or	the reusuall	gulations (e.g.,	D001, D003, Jse commen	, F007, K019 ts or an addi	9, P012, U112). tional page if mor	re spaces are needed.
1	Hazardous waste		they are presented in list codes routinely or 3	the re usuall	gulations (e.g.,	D001, D003, Jse commen 5	, F007, K019 ts or an addi 6	9, P012, U112). tional page if mor	re spaces are needed. 7
1 8 15	Hazardous waste	transporters l	they are presented in list codes routinely or 3 10 17	the reusuall	egulations (e.g., ly transported. U	D001, D003, Jse commen 5 12	, F007, K019 ts or an addi 6 13	9, P012, U112). tional page if mor	re spaces are needed. 7 14 21
1 8 15 11. (Hazardous waste 2 9 16	rransporters l	they are presented in list codes routinely or 3 10 17 longer handling wast	the result and the re	egulations (e.g., ly transported. U	D001, D003, Jse commen 5 12 19 and 10 show	, F007, K019 ts or an addi 6 13 20 ald be blank :	9, P012, U112). tional page if mor	re spaces are needed. 7 14 21
1 8 15 11. (A)	Hazardous waste 2 9 16 Other Status Chai	nges (If no	they are presented in list codes routinely or 3 10 17 longer handling waste at This Facility (Sec. 1985)	the resusually 4 11 18 18 te or cleections	egulations (e.g., ly transported. Use transported. Use losed, sections 9 s 9, 10 and 12-1	Jse commen 5 12 19 and 10 should be 1	ts or an addi 6 13 20 ald be blank a	9, P012, U112). tional page if mor	re spaces are needed. 7 14 21
1 8 15 11. (A)	Hazardous waste 2 9 16 Other Status Char Non-Handler of Reg	nges (If no ulated Wast	they are presented in list codes routinely or 3 10 17 longer handling wast e at This Facility (Settes, transports, treats,	the reusuall 4 11 18 te or cl	egulations (e.g., ly transported. Use transported losed, sections 9 s 9, 10 and 12-1 s, disposes of, or	D001, D003, Jse commen 5 12 19 and 10 should be lotherwise has	ts or an addi 6 13 20 ald be blank a blank.)	9, P012, U112). tional page if mor	re spaces are needed. 7 14 21
1 8 15 11. (A) (B)	Hazardous waste 2 9 16 Other Status Char Non-Handler of Reg (1) Business no left facility Closed (Confidence of Confidence o	nges (If no rulated Wast onger general nplete this see	they are presented in list codes routinely or 3 10 17 longer handling wast e at This Facility (Settes, transports, treats,	the re usuall 4 11 18 te or cl stores, sess act	egulations (e.g., ly transported. Used, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this factorial transported.	Jse commen 5 12 19 and 10 should be to otherwise have callity have continued to the cont	ts or an addi 6 13 20 ald be blank : blank.) andles any receased.)	p, P012, U112). tional page if more	7
1 8 15 11. (A) (B)	Hazardous waste 2 9 16 Other Status Char Non-Handler of Reg (1) Business no le Facility Closed (Con (1) Closed at this	nges (If no ulated Wast onger general nplete this see a location and	they are presented in list codes routinely or 3 10 17 longer handling waste at This Facility (Setes, transports, treats, ction only if all busined moved or moving to	the re usuall 4 11 18 te or cl stores, sess act	egulations (e.g., ly transported. Used, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this factorial transported.	Jse comments 12 19 and 10 should be lotherwise had cility have comments we Form 8700	ts or an addi 6 13 20 ald be blank : blank.) andles any receased.) 0-12FL for the	p, P012, U112). tional page if more	7
1 8 15 11. (A) (B)	Hazardous waste 2 9 16 Dther Status Chan Non-Handler of Reg (1) Business no le Facility Closed (Con (1) Closed at this (2) Out of Busin	nges (If no ulated Wast onger general nplete this see a location and ness - Busines	they are presented in list codes routinely or 3 10 17 longer handling waste at This Facility (Setes, transports, treats, ction only if all busined moved or moving to	the re usuall 4 11 18 te or cl stores, sess act	losed, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this far	D001, D003, Jse commen 5 12 19 and 10 should be lotherwise have common strong stro	ts or an addi 6 13 20 ald be blank ablank.) andles any receased.) 0-12FL for the	p, P012, U112). tional page if more and skip Section 1 egulated waste. he new location if	7
1 8 15 11. (A) (B)	Hazardous waste 2 9 16 Other Status Char Non-Handler of Reg (1) Business no le Facility Closed (Con (1) Closed at this (2) Out of Busin (C) Property Tax De	nges (If no ulated Wast onger general nplete this set is location and ness - Busines efault	they are presented in list codes routinely or 3 10 17 longer handling waste at This Facility (Settes, transports, treats, ction only if all busined moved or moving to see closed on	the resusuall 4 11 18 te or clections stores, aess actualled another	losed, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this facer - Submit a ne	D001, D003, Jse commen 5 12 19 and 10 should be lotherwise has cility have common serior	ts or an addi 6 13 20 ald be blank ablank.) andles any reseased.) 0-12FL for the	p, P012, U112). tional page if more and skip Section 1 egulated waste. he new location if	re spaces are needed. 7 14 21 12-16):
1 8 15 11. (A) (B)	Hazardous waste 2 9 16 Dther Status Chan Non-Handler of Reg (1) Business no le Facility Closed (Con (1) Closed at this (2) Out of Busin	nges (If no ulated Wast onger general nplete this see a location and less - Busines efault	they are presented in list codes routinely or 3 10 17 longer handling waste at This Facility (Setes, transports, treats, ction only if all busined moved or moving to see closed on	the resusuall 4 11 18 te or clections stores, aess actualled another	losed, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this facer - Submit a ne	D001, D003, Jse commen 5 12 19 and 10 should be lotherwise has cility have common serior	ts or an addi 6 13 20 ald be blank ablank.) andles any reseased.) 0-12FL for the	p, P012, U112). tional page if more and skip Section 1 egulated waste. he new location if cotection or registration info	re spaces are needed. 7 14 21 12-16):
1 8 15 11. (A) (B) 12-14	Hazardous waste 2	nges (If no ulated Wast onger general nplete this set is location and ness - Busines efault	they are presented in list codes routinely or 3 10 17 longer handling waste at This Facility (Setes, transports, treats, ction only if all busined moved or moving to see closed on	the resusuall 4 11 18 te or clections stores, aess actualled another	losed, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this facer - Submit a ne	D001, D003, Jse commen 5 12 19 and 10 should be lotherwise has cility have common serior	ts or an addi 6 13 20 ald be blank ablank.) andles any reseased.) 0-12FL for the	p, P012, U112). tional page if more and skip Section 1 egulated waste. he new location if	re spaces are needed. 7 14 21 12-16):
1 8 15 11. (A) (B) 12-14 Sa Con	Hazardous waste 2	nges (If no ulated Wast onger general nplete this see a location and less - Busines efault	they are presented in list codes routinely or 3 10 17 longer handling waste at This Facility (Setes, transports, treats, ction only if all busined moved or moving to see closed on	the resusuall 4 11 18 te or clections stores, aess actualled another	losed, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this facer - Submit a ne	D001, D003, Jse commen 5 12 19 and 10 should be lotherwise has cility have common serior	ts or an addi 6 13 20 ald be blank ablank.) andles any reseased.) 0-12FL for the	p, P012, U112). tional page if more and skip Section 1 egulated waste. he new location if cotection or registration info	re spaces are needed. 7 14 21 12-16):
1 8 15 11. (A) (B) 12-14 Sa Contact	Hazardous waste 2	nges (If no rulated Waste onger general nplete this sees location and less - Busines efault Activities	they are presented in list codes routinely or 10	the resusuall 4 11 18 te or clections stores, aess actualled another	losed, sections 9 s 9, 10 and 12-1 disposes of, or tivities at this facer - Submit a ne (D) Pet (only if this sub Last Name:	D001, D003, Jse commen 5 12 19 and 10 should be lootherwise have come some some some some some some some s	ts or an addi 6 13 20 ald be blank ablank.) andles any reseased.) 0-12FL for the	p, P012, U112). tional page if more and skip Section 1 egulated waste. he new location if cotection or registration info	re spaces are needed. 7 14 21 12-16):

Universal V	Vaste Notification and Mercury Transporter/Handler Registration EPA ID No.FLD98	4183566				
12. Unive	12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply):					
A. Federal Notificatio	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	uticals				
	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 U A permit is required for storage prior to recycling.	JW.				
B. Florida	Universal Pharmaceutical Waste (UPW): one-time registration					
☐ Phan	maceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)	l				
☐ Phai	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 Hear	lth [DOH])				
☐ Flor	da Universal Pharmaceutical Waste (UPW) Transporter					
C. Florida	Annual Mercury Handler Registration:					
	generate lamps and/or devices or manage pharmaceuticals, do not register or complete the interest of the inter					
☐ Fi	st time registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH re	gistration 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 Registration				
☐ Me	rcury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required				
☐ Me	rcury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler					
☐ Me	recury-Containing Devices LQH = 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)				
1 ` ′	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:	Γop Bulb Crusher(s).				
B.	tate Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transposte: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to R					

Hazardous Waste and Used Oil Transporter Registra	tions	EPA ID No.FLD984183566				
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 hazar	dous waste.					
This form is: 🔲 Initial Registration 🚨 Renewal	Notification of	changes Cancel Registration				
1. For own waste only 2. For commercia	l purposes 3. I	Both commercial and own waste				
4. Transportation Mode Air Rail Highw	vay Water O	ther - specify				
B. HW Transfer Facility Registration Information (must be completed as	nnually and when this information changes)				
☐ This facility is a Hazardous Waste Transfer Facility	acility: (at this location	on) Storage Volume				
This form is: 🔲 Initial Registration 🔲 Renewal	Notification of c	changes				
Note: Hazardous Waste transfer facilities must comply with t	he 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 provisi	ons of Rule 62-730.17	1(6) , F.A.C., are kept at (check one):				
Our mailing (business) address	☐ The site (facility) a					
Please enter the EPA ID Number of the HW Transporter who carries the	e insurance for this Tra	nsfer Facility:				
Please see the top of page 5 for additional items that must be s	uhmitted in addition t	o the above registration for Hazardous Waste				
Transfer Facilities [Rule 62-730.171(3), Florida Administrative		· · · · · · · · · · · · · · · · · · ·				
45 H. 102 - 102 P. 102						
15. Used Oil and Oil Filter Activities: : (Mark 'X' and col	mplete all that apply 11	you need to register your used oil activities),				
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer faction annually register with the Department using this form. All except F \$100 registration fee.						
This form is: 🔲 Initial Registration 🔳 Renewal	■ Notification of	changes				
If applicable, a check or money order, in the amount of \$10	00, payable to Florida D	Department of Environmental Protection is enclosed.				
(1) Used Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filte	er Management (must annually register)				
a. Transporter (off-site) and noncontiguous locations	a. Transpo	orter				
■ b. Transfer Facility	☐ b. Transfe	er Facility				
(2) Collection Center (From businesses, no more than 55 gal per	_	sor (Annual Report Required)				
(2) Collection Center (From businesses, no more than 55 gal per shipment)	d. End U	ser				
(3) Used Oil Processor (A permit is required.)	1 ' '	quired under the provisions of Rule 62-710.510,				
(4) Gff-Specification Used Oil Burner	l <u>—</u>	at (check one): ng (business) address The site (facility) address				
(5) Used Oil Fuel Marketer						
	1					
Please see the top of page 5 for additional items that must be sub exempt Used Oil Transporters.	mitted in addition to t	he above registration and fees required for non-				

Transfer Facility and Used Oil Transporter requirem	ents and required signature page	EPA ID No.F	LD9841	83566	
(14 cont.) Hazardous Waste Transfer Facilities: following items are required to be submitted with the init subsequent submission [Rule 62-730.171(3), Florida Adm	tial notification for a transfer facility a	d for Transfer Fac nd any changed it	ems must be s	4, Section 14, the ubmitted with any	
Certification by a responsible corporate officer of Section 403,7211(2), Florida Statute	of the transporter that the proposed loces (F.S.) [Rule 62-730.171(3)(a)1., F.A		1	3 1 2014	
Evidence of the transporter's financial responsib	7,7,7	-	I		
A brief general description of the transfer facilit		_	PERMITTIN ASSISTA	NG & COMPLIANCE NCE PROGRAM	
A copy of the facility closure plan [Rule 62-730	0.171(3)(a)5., F.A.C.]	•	713510		
_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.]				
 (15 cont.) Used Oil Transporters: (Exemptions in In addition to the requirements on Page 4 Section ALL registered UO Handlers must submit their own company. UO transporters transporting off-site over the UO transporters transporting more than 50 	on 15: an annual report except generators tra public highways only within their own	n company must su	ubmit proof of	insurance.	
submission as a certified used oil transport		•	•		
The used oil annual report is attached	Evidence of Liability Insurance pur	rsuant to 62-710.6	00(2)(e)., F.A.	.C. is attached.	
17. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					
I certify as a Used Oil Transporter that I am fatation and have an annual and new employee training bility is demonstrated by the Used Oil Transporter Communication.	g program in place covering the applica	able used oil rules	. Evidence of	ng used oil transpor- financial responsi-	
Signature of owner, operator, or an authorized representative	Print Name and	Title	Used Oil	Date Signed (mm-dd-yyyy)	
authorized representative		k Jr. V.P.		02/06/2014	
anthorized representative /	Gerry McCormic			03/06/2014	
anthorized representative /	Gerry McCormic			03/06/2014	
antionized representative	Gerry McCormic			03/06/2014	

MyFDEP

Florida Department of Environmental Protection



Welcome, Tiffaney Noland. You are logged on with a role of CHAZ_USER. [Sign Out]

[Pending List]

[Pending List - this DocLog] [Edit DocLog] [Document Checkout]

Pending Document Details

NATIVE DIVERSIFIED ENVIRONMENTAL SERVICES

NAME: INC

DOC LOG ID: 26778 **CHAZ ID:** FLD984183566

CITY: TAMPA COUNTY: HILLSBOROUGH

View email records

HWG Email Template Notification Approvals RHWT Email Template RHWT Approvals RUOH Email Template RUOH Approvals

Document Types

Document Type	Primary Type	Discontinued On
HWG	Υ	
RHWT	N	
RUOH	N	

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
256405	UOP	desdmtgerry@gmail.com	FLD984183566	Diversified Environmental Services Inc
295162	HWR	desdmtgerry@gmail.com	FLD984183566	Diversified Environmental Services Inc
312750	HWT	desdmtgerry@gmail.com	FLD984183566	Diversified Environmental Services Inc
Child Deaumen	4-			

Child Documents

DocLog-ID	Preindex#	Received Date	Action Item
<u>27017</u>	1304461	03/31/2014	Other information Change
<u>26199</u>	1277564	02/25/2014	Certificate Of Liability Insurance
<u>26483</u>	1284704	02/28/2014	Certificate Of Liability Insurance
<u>27695</u>	1340987	05/30/2014	Certificate Of Liability Insurance

Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	03/14/2014	SIMMONS_JLS	×
HWG	Completeness Review	07/25/2014	NOLAND_T	×
HWG	Ready for Data Entry	07/25/2014	NOLAND_T	×
HWG	Data Entry Completed	07/25/2014	NOLAND_T	×
HWG	FDM Facility Created	07/25/2014	NOLAND_T	×
RHWT	Logged	03/14/2014	SIMMONS_JLS	×
RHWT	Completeness Review	04/08/2014	HORLICK_S	

RHWT	Waiting for information	04/08/2014	HORLICK_S	×
RHWT	Ready for Data Entry	04/10/2014	HORLICK_S	×
RHWT	Data Entry Completed	06/04/2014	OUTLEY_D	×
RHWT	Final Review	06/12/2014	HORLICK_S	×
RHWT	Notification Letter Emailed	06/12/2014	HORLICK_S	×
RHWT	Booked into Oculus	06/12/2014	THURSBY_K	×
RUOH	Logged	03/14/2014	SIMMONS_JLS	×
RUOH	Completeness Review	03/18/2014	ASHWOOD_J	×
RUOH	Waiting for information	03/18/2014	ASHWOOD_J	×
RUOH	Ready for Data Entry	04/03/2014	ASHWOOD_J	×
RUOH	Data Entry Completed	04/04/2014	SIMMONS_JLS	×
RUOH	Final Review	04/08/2014	ASHWOOD_J	×
RUOH	Waiting for information	05/29/2014	ASHWOOD_J	×
RUOH	Final Review	06/04/2014	ASHWOOD_J	×
RUOH	Notification Letter Emailed	06/11/2014	ASHWOOD_J	×
RUOH	Booked into Oculus	06/11/2014	THURSBY_K	×

Add A New Process

Document Type	Process	Date	
Hazardous Waste Generator (HWG) ▼	Final Review	07/25/2014	Add Process

Comments

Document Type	Date	Comment	Author
General Comment	03/14/2014	Notification was not signed. Sent to Gerry McCormick Jr.	SIMMONS_JLS
HWG	03/31/2014	Received signed page 5.	SIMMONS_JLS
RHWT	04/08/2014	Email to Gerry McCormick: In reviewing your registration records, we notice that you have maintained a Hazardous Waste Transporter registration in the past. Facilities that are Hazardous Waste Transporter (HWT) and registered Used Oil Handler (UOH) in the State of Florida now use a combined registration process, with yearly notification due March 1st and expiration of June 30th the following year. To renew your HW transporter registration please submit a revised page 4 of the 8700-12FL Florida Notification of Regulated Waste Activity form that includes all transporter activities that apply. Blank forms are attached for your convenience. Since this is not a signature page you may email the corrected page, or mail the required page to: DEP Waste Management Division2HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 Let me know if you have any questions or comments. Thanks	HORLICK_S
RHWT	04/10/2014	Updated Page 4 of 8700-12FL received.	HORLICK_S
RUOH	03/18/2014	Received 8700 form w/o signature, registration fee, training manual statement, and Annual Report.	ASHWOOD_J
RUOH	03/18/2014	Email sent to Gerry McCormick Jr:In reviewing your submittal, we noticed additional information is needed. Please make the necessary corrections on Page 1 to your 2013 Annual Report (see attached). As soon as possible, please email the revised form to me since it does not required an original signature. Let me know if you have any questions.	ASHWOOD_J
RUOH	04/03/2014	Received revised Page 5 and Annual Report.	ASHWOOD_J
RUOH	05/29/2014	Email sent to Gerry: I need an updated Insurance to continue processing your renewal (see attached). As soon as possible, please mail the required form with original (hand signed) signatures to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any questions.	ASHWOOD_J
RUOH	06/10/2014	Received original revised Combined HWT/UO Insurance form.	ASHWOOD_J
RUOH	06/11/2014	Changes permission granted by Gerry McCormick Jr to Annual Report.	ASHWOOD_J