

FLORIDA DEPARTMENT OF

Environmental Protection

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

CARLOS LOPEZ-CANTERA LT. GOVERNOR

JONATHAN P. STEVERSON SECRETARY

03/03/2015

Tony Cellucci Clean Harbors Environmental Services Inc 42 Longwater Dr Norwell, MA 02061-1612

The Florida Department of Environmental Protection has reviewed your application for registration as a transporter or handler for universal waste lamps and devices destined for recycling. Based on the information received, the facility located at **42 Longwater Drive, Norwell, MA 02061-9149** has been registered through **March 1, 2016** with the following status:

Facility ID # MAD039322250

Transporter of Universal Waste Lamps and Devices

The registration form for the year **2016** will be sent to the contact person on your application.

Chapter 62-737, Florida Administrative Code (F.A.C.), (copy enclosed) specifies several other requirements including packaging, training and record keeping for transporters and handlers of universal waste lamps or devices destined for recycling. These requirements are simple, flexible and make good business and environmental sense (summarized on enclosed fact sheets).

This registration does not allow you to transport or handle universal waste lamps or devices which are destined for landfill or other disposal. The transportation or handling of universal waste lamps or devices destined for disposal is subject to our hazardous waste management regulations under Chapter 62-730, F.A.C.

If any of your facility's information on the Florida Notification of Regulated Waste Activity [form 62-730.900(1)(b)] changes, please notify the Department using that form. I can also be contacted at (850) 245-8759 or at Laurie. Tenace@dep.state.fl.us.

Sincerely,

Laurie Tenace Environmental Specialist Waste Reduction Section

Enclosures

FLORIDA 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

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(for PDBP Official Use Only) ON

MAR 0 2 2015

PERMITTING & COMPLIANCE ASSISTANCE PRO UNITED NO.

EPA ID: M A	D 0 3 9 3	2 2 2 5	0	Please	use the instru	ctions	document to com	plete this form	
1. Reason for Submittal (all submitters must complete pages 1 and 2 and sign page 5. Pages 3 and 4, - complete as applicable)	the correct box: waste, universal waste, used oil activities, or PCW activities). (must choose one if a notification) To provide subsequent notification (to update status and facility identification information). To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5)								
2. Facility or Business Name	Clean Harbors Env. Services, Inc.								
3. Facility Operator (List additional Operators in the comments section).	Name of Operator: Clean Harbors Env. Services, Inc. Street or P.O. Box: PO Box 9149 City or Town: Norwell State: MA					Date became Operator:// New Operator mm dd yy Phone Number: 781-792-5000 Zip Code: Country (if not USA): 02061			
4. Facility Physical Location	Operator Type: Private Private Municipal State County Other Physical Street Address: Vessel 42 Longwater Drive City or Town: State: Zip Code:								
Information (No P.O. Boxes) Same address as #3 above or:	Norwell County: Plymouth Country (if not USA): Country (if not USA):								
5. Facility North At Classification Sys Code(s) (at least 5	tem (NAICS)	A. <u>5 6</u> c. <u> </u>	<u> 2 2</u> _	<u> 1 </u> 	1 (required) B. D.	<u> </u>		-
6. Facility or Business Mailing Address	Same address as City or Town:	#3_ above or: Str	eet or P.C		State:	Zip/P	ostal Code:	Country (If not USA	ı).
7. Facility or Business RCRA Contact Person	Anthony			Last Name: Cellucci Extension: E-Mail: cellucci.anthony		thony		Fax: 781-792-100	16
Same address as #3_above or:	City or Town: Newton			State:		Zip Code:	Country (if not U	JSA) [.]	
8. Real Property (FL Land) Owner of the Facility's Physical Location (List additional owners in the comments section.)	Name of Owner: REIT Management & Reseaution P.O. Box: 400 Center Street City or Town: Newton				State:	Phone Number: State: Zip Code: Country			yy SA)
Same address as # above or:									

RCRA Hazardous Waste Status Notification or Out of Business Notification					EPA ID No. MAD039322250				
9.	RCRA Hazardous	Waste Act	ivities at this Fac	cility:	(Mark 'X' i	n all tha	t apply):		
(/	(1)Generator of Haz	ardous Waste			For Items 2	2 through	7, mark 'X' in all	that apply.	
	Yes No (Do	not include Univ	ersal Waste or Used Oil	l)	(2) Treat	ter, Store	r, or Disposer of H	azardous W	/aste
	If YES, Choose only o		_		(at	your faci	lity) Note: A hazaro may be		ermit this activity.
	Generates in a greater per mo hazardous was	ny calendar mo onth (kg/mo) (2 ste; or Greater t	onth 1,000 kilograms, 200 lbs.) of non-acuthan 1 kg (2.2 lbs) least once a year))))	□ b. O_I□ c. No	perating Commercia perating Non-Common-Operating: Postclermit or Order (HSW	I TSD nercial TSD losure or Cor	·
	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 lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste (at least once a year)			(3) Recycler of Hazardous Waste (at your facility) Specify: Commercial Non-Commercial. Note: A permit is required for storage prior to recycling (4) Exempt Boiler and/or Industrial Furnace a. Small Quantity On-site Burner Exemption					
	_	•			(_	nelting, Melting, and		•
	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			(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					
	In addition, indicate of	=		'•	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 			 (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). Hazardous waste transporters list codes routinely or usually transported. Use comments or an additional page if more spaces are needed.								
1.	Hazardous wast	e transporters I	ist codes routinely or	usually		se commo	ents or an additional	page if mor	re spaces are needed.
8	9		10	11		12	13		14
15	16		17	18		19	20		21
11	. Other Status Ch	anges (If	1 11 11	l				l.: C4: 1	13.16):
	(A) Non-Handler of Ro							Kip Section i	2-10).
	•	0	tes, transports, treats,				·	ted waste	
	—		•		•			ied 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)								
Ē	☐ (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 RCRA Contact on page 1 or enter:				Last Name:				Title:	
C	ontact for:	Phone Num	ber:		Extension:	E-Mail:			
HW Transporter Street or P.O. Box:					-				
9	Used Oil Handler Universal Waste	City or Tow	'n:			State:(C	Country):	Zip Code:	

Universal Was	ste Notification and Mercury Transporter/Handler Registration EPA ID No. MAD03	9322250						
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply):								
A. Federal Notification	Tederally Defined Dange Quantity Handler (EQ11) Generates recumulate. Stood Rg (111000 10) or more							
	Accumulates: 🗖 a. UW Batteries 🗖 b. Pesticides 🗖 c. Pharmaceu	ticals						
	d. Mercury Containing Devices e. Mercury Contain	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 U	niversal Pharmaceutical Waste (UPW): one-time registration							
☐ Pharma	ceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)							
☐ Pharma	ceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated						
Reverse	e Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Healt	th [DOH])						
☐ Florida	Universal Pharmaceutical Waste (UPW) Transporter							
C. Florida An	nual Mercury Handler Registration:							
Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). 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-hi	re Transporter of Universal Waste Mercury-Containing Lamps or Devices							
☐ For-hi	re Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration						
☐ Mercu	ry-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required						
Мегси	ry-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	,						
☐ Mercu	ry-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration +						
	ry-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)						
	Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) st time registering Renewal	Annual Registration Required						
Briefly Describe your Universal Waste Activities:								
Transporter of Universal Waste in all counties in the state of Florida								
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.] Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]								

Hazardous Waste and Used Oil Transporter Registration	s	EPA ID No. MAD039322250				
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 Facil	ity: (at this location	on) Storage Volume				
This form is: 🚨 Initial Registration 🚨 Renewal 🚨	Notification of	changes 🗖 Cancel Registration				
Note: Hazardous Waste transfer facilities must comply with the re	equirements of Ru	tle 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.				
The Transfer Facility records required under the provisions Our mailing (business) address	of Rule 62-730.17 The site (facility) a					
Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer 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 and Oil Filter Activities: : (Mark 'X' and comple	ete all that apply i	f 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 applicable, a check or money order, in the amount of \$100, payable to Florida 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. Transp					
 a. Transporter (off-site) and noncontiguous locations b. Transfer Facility 	a. Transp					
b. Transfer Facility		ssor (Annual Report Required)				
(2) Collection Center (From businesses, no more than 55 gal per shipment)	d. End U	ser				
• '	7) The records re	equired under the provisions of Rule 62-710.510,				
(4) Off-Specification Used Oil Burner	-	t at (check one):				
(5) Used Oil Fuel Marketer On-Spec Off-Spec	Our maili	ng (business) address				
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. MAD0393	322250
(14 cont.) Hazardous Waste Transfer Facilities: following items are required to be submitted with the insubsequent submission [Rule 62-730.171(3), Florida Ad	itial notification for a transfer facility a		
Certification by a responsible corporate officer Section 403.7211(2). Florida Statut	of the transporter that the proposed loctes (F.S.) [Rule 62-730.171(3)(a)1., F.A		
Evidence of the transporter's financial responsi			
A brief general description of the transfer facili	· · · · · · · · · · · · · · · · ·		
A copy of the facility closure plan [Rule 62-73		•	
_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	1 40 CFR 279.40(a)(1-4))		
In addition to the requirements on Page 4 Sect			
 ALL registered UO Handlers must submitheir own company. 	t an annual report except generators tra	nsporting UO from noncontigu	ous operations within
UO transporters transporting off-site over	public highways only within their own	n company must submit proof o	f insurance.
 UO transporters transporting more than 50 submission as a certified used oil transport 	-	· · · · · · · · · · · · · · · · · · ·	n and certify this
The used oil annual report is attached	■ Evidence of Liability Insurance pur	rsuant 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 question submitted is, to the best of my knowledge and belief alse information, including the possibility of fine a	nalified personnel properly gather and of true, accurate, and complete. I am av	evaluate the information submit vare that there are significant pe	ted. The information
I certify as a Used Oil Transporter that I am tation and have an annual and new employee trainin bility is demonstrated by the Used Oil Transporter (ng program in place covering the applic	cable used oil rules. Evidence of	financial responsi-
Signature of owner, operator, or an authorized representative	Print Name and	Title Used Oil	Date Signed (mm-dd-yyyy)
16PC	Anthony P. C	ellucci	2/23/15
		٥	
If the person that filled in this form is not the Facilit	ty Contact or Operator, please comp	lete the information below:	
Rita Powers 7	81-792 - 5764 pow	ersr@cleanharbors.co	m
(Name of person completing this form)	(Phone Number)	(E-mail Address)	



Clean Harbors Environmental Services, Inc.
PO Box 9149
42 Longwater Drive
Norwell, MA 02061-9149
781-792-5000
www.cleanharbors.com

February 27, 2015

Florida Department of Environmental Protection 2600 Blair Stone Rd. Hazardous Waste Management Section, MS 4555 Tallahassee, FL 32399-3000

To Whom It May Concern:

Please find attached application for renewal of transporter and transfer facility authority for Universal Waste Lamp & Device and Handler Facility Registration in the state of Florida from Clean Harbors Environmental Services, Inc.

I have included applications on behalf of our transportation authority, which is based at the corporate address in Massachusetts. (MAD039322250)

Payment & reporting were submitted under separate cover.

Should you have any questions please contact me at (781) 792-5764.

Sincerely,

Rita Powers

Transportation Compliance Supervisor