

FLORIDA DEPARTMENT OF

ENVIRONMENTAL PROTECTION

BOB MARTINEZ CENTER

ACCORDINATE STONE BOAD

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

CARLOS LOPEZ-CANTERA LT. GOVERNOR

JONATHAN P. STEVERSON SECRETARY

03/05/2015

Michelle Walper Heritage-Crystal Clean LLC 2175 Point Blvd Ste 375 Elgin, IL 60123-9211

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 **9940 Currie Davis Dr #A44, Tampa, FL 33619-2669** has been registered through **March 1, 2016** with the following status:

Facility ID # **FLR000170431**

Transfer Facility for Universal Waste Lamps
Transfer Facility for Universal Waste 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



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

(for FDEP official Use Only)

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MAR 0 2 2015

Please use the instructions document to complete this form CF PR R 0 0 0 To provide initial notification (to obtain an EPA ID Number for hazardous 1. Reason for Mark 'X' in waste, universal waste, used oil activities, or PCW activities). the correct box: Submittal (all submitters must (must choose one To provide subsequent notification (to update status and facility identification information). complete pages 1 and 2 if a notification) and sign page 5. 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) UW Mercury (see page 3) ☐ HW Transporter (see page 4) ☐ Used Oil (see page 4) 2. Facility or HERITAGE-CRYSTAL CLEAN, LLC **Business Name** Name of Operator: Date became Operator: 07 99 3. Facility HERITAGE-CRYSTAL CLEAN, LLC Operator New Operator mm dd уу List additional Opera-Street or P.O. Box: Phone Number: tors in the comments 2175 POINT BLVD., SUITE 375 (847) 836-5670 section). City or Town: Zip Code: Country (if not USA): State: **ELGIN** 60123 Operator Type: Private Federal Municipal State County Other Physical Street Address: 4. Facility ☐ Vessel 9940 CURRIE DAVIS DR A44 **Physical** Location City or Town: State: Zip Code: Information FL TAMPA 33619 (No P.O. Boxes) County: Country (if not USA): ☐ Same address as #3 above or: HILLSBOROUGH 5. Facility North American Industry 3 10 21 B. (required) Classification System (NAICS) Code(s) (at least 5 digits) D. C 6. Facility or -Same address as #3 above or: Street or P.O. Box: **Business** Country (if not USA): City or Town: Zip/Postal Code: State: **Mailing Address** Last Name: First Name: 7. Facility or **MICHELLE** WALPER COMPLIANCE MANAGER **Business** E-Mail: **RCRA** Extension: Phone Number: (847) 783-5355 (847) 836-6169 michelle.walper@crystal-clean.com Contact Person Street or P.O. Box: Same address as Country (if not USA): City or Town: Zip Code: State: #<u>3</u> above or: ŠT. PAUL Name of Owner: 8. Real Property Date became Owner: ST. PAUL FIRE & MARINE INSURANCE (FL Land) Owner New Owner mm dd уу of the Facility's Street or P.O. Box: Phone Number: **Physical Location** 385 WASHINGTON ST (651) 221-7911 (List additional Country (if not USA): owners in the com-City or Town: State: Zip Code: ments section.) ST. PAUL MN 55102 Same address as

☐Municipal ☐State

County Other

Private

Owner Type:

above or:

Federal

RCR	A Haz	zardous	s Waste	Status No	tification or Out of	í Busi	ness Notificat	ion	EPA ID No. FL	R000170	0431	
9. R	CRA	Hazaı	rdous \	Waste Act	tivities at this Fac	cility	: (Mark 'X' i	n all that	apply):			
(A)	(1)Ger	nerator	of Hazai	rdous Waste	è		For Items	2 through	7, mark 'X' in all	that apply.		
<u></u>	Yes No (Do not include Universal Waste or Used Oil)				(2) Trea	ter, Storer,	, or Disposer of H	lazardous W	/aste			
If	f YES, Choose only one of the following three categories. a. Large Quantity Generator (LQG):			(at your facility) Note: A hazardous waste permit may be required for this activity.								
_		Generat	tes in any	y calendar mo	onth 1,000 kilograms		!	☐ a. Ope	erating Commercia	al TSD		
	greater per month (kg/mo) (2,200 lbs.) of non-acute hazardous waste; or Greater than 1 kg (2.2 lbs)			[b. Operating Non-Commercial TSD							
		of acute hazardous waste (at least once a year)				l	 c. Non-Operating: Postclosure or Corrective Action Permit or Order (HSWA, etc.) 					
	b. Small Quantity Generator (SQG):			(3)	(3) Recycler of Hazardous Waste (at your facility) Specify: Commercial Non-Commercial.							
	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				Note: A permit is required for storage prior to recycling. (4) Exempt Boiler and/or Industrial Furnace							
) or less of once a y		rdous waste			_	oner and/or maus all Quantity On-sit			
		` ~			:====		Ţ	_			urnace Exemption	
				xempt SQG v calendar mo	· (CESQG): onth 100 kg/mo or les	ss	(5) □ 1	_				
		(220 lbs	s.) of non	n-acute hazar	dous waste and 1 kg		(3)	(5) Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities				
	•	(2.2 IDS)) or less (of acute haza	.rdous waste			Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization				
In:	additic	on, indic	cate othe	er generator	activities that apply	у.	OR the authorization you received from FDEP.					
				•	ne, not on-going)		• •	(6) Receives Hazardous Waste from Off-Site				
	-	-			ime per year:SQG_	_LQC		(7) Underground Injection Control				
ם			-	orter of hazar ardous and ra	rdous waste radioactive) Generator	r	(/) —	Ondergrea	ma injection co.	iti vi		
<u> </u>					•		XX74					
				•	Regulated Hazar of they are presented in						wastes handled at	
. <u> </u>					list codes routinely or						e spaces are needed.	
¹ D00			² D002		³ D004	⁴ D005		⁵ D006	⁶ D007		⁷ D008	
⁸ D00			⁹ D010		^{I0} D011	¹¹ D018		¹² D019	¹³ D02		¹⁴ D022	
¹⁵ DC)23		¹⁶ D02	<u>2</u> 4	¹⁷ D025	¹⁸ D026		¹⁹ D027	²⁰ D02	28	²¹ D029*	
11. (_ Other	- Statu	s Char	iges (If no	longer handling wast	te or c	losed, sections 9	and 10 sho	uld be blank and s	kip Section 1	12-16):	
(A)	Non-	Handler	r of Regi	ulated Wast	e at This Facility (S	ection	s 9, 10 and 12-10	should be	blank.)			
	(1	l) Busin	iess no la	onger genera	tes, transports, treats,	stores	, disposes of, or	otherwise h	andles any regulat	ted waste.		
(B)	Facili	ity Close	ed (Com	plete this se	ction only if all busin	ess act	tivities at this fac	ility have c	eased.)			
	(1	1) Close	d at this	location and	I moved or moving to	anoth	er - Submit a nev	v Form 870	00-12FL for the ne	w location if	you will	
	П (O) Out	of Busin	aa Rucines	as aloged on			(dat	· ·			
 	(2) Out of Business - Business closed on											
					C40 of Inform				<u> </u>			
12-14 — Registration Activities Contact Information (only if this submission is a registration or registration information update) Title:							ormation update):					
Same as Facility RCRA Contact on page 1 or enter:		Last I taille.										
		. 1-0-	, 	Phone Num	ber:		Extension:	E-Mail:		•		
Contac		4	•	Street or P.(O Roy							
_	HW Transporter Used Oil Handler Street or P.O. Box:											
Universal Waste				City or Town:				State:(Country):		Zip Code:		

Universal Waste Notification and Mercury Transporter/Handler Registration EPAID No. FLR000170431							
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. Pharmac	euticals						
d. Mercury Containing Devices e. Mercury Cont	aining Lamps						
Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a A permit is required for storage prior to recycling.	Ų W ,						
B. Florida Universal Pharmaceutical Waste (UPW): one-time registration							
Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time	e)						
Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UP	W) accumulated						
Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of He	ealth [DOH])						
Florida Universal Pharmaceutical Waste (UPW) Transporter							
C. Florida Annual Mercury Handler Registration: For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Contai							
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							
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						
Mercury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required						
Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler							
Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration + one-time \$1,000 fee+						
Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)						
(2) Mercury 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: We use Drum Top Bulb Crusher(s).							
Transfer Facility - Transport under ILR 000 130 062 Not "for hire"	*						
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)]							

			·						
Hazar	dous Waste and Used Oil Transporter Registrati	ons	EPA ID No. FLR000170431						
14. HW	V Transporter Activities: (Mark 'X' and complete all t	hat apply if you need	l to register your HW Transporter activities)						
renew Transf change	sporters of and Transfer Facilities for Hazardous Was v their registration. Evidence of casualty/liability insurance fer facilities must submit several additional documents as detaile es. Registered transporters and transfer facilities may only begin rators of hazardous waste who transport waste only within t	e pursuant to 62-730.17 led on page 5 the first ti n operations after recei	70(2)(a) is required in addition to this registration. time they register and when the information iving approval from the Department.						
A. H	W Transporter Registration Information (must be	e completed annually	y 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								
В. Н	IW Transfer Facility Registration Information (n	nust be completed as	nnually and when this information changes)						
	This facility is a Hazardous Waste Transfer Fa	cility: (at this location	on) Storage Volume						
This form is: 🔲 Initial Registration 🚨 Renewal 🔲 Notification of changes 🚨 Cancel Registration									
Not	e: Hazardous Waste transfer facilities must comply with the	e requirements of Ru	ile 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									
Please en	nter the EPA ID Number of the HW Transporter who carries the	e insurance for this Tra	ansfer Facility:						
Plea	ase see the top of page 5 for additional items that must be su	rhmitted in addition t	to the above registration for Hazardous Waste						
	nsfer Facilities [Rule 62-730.171(3), Florida Administrative C		o the above registration to annual contract						
15. Us	ed Oil and Oil Filter Activities: : (Mark 'X' and com	enlete all that apply j	f you need to register your used oil activities).						
		piete an enac agra-y	you need to register your about or account,						
<u>annua</u>	porters (exemptions in 40 CFR 279.40(a)(1-4), transfer facially register with the Department using this form. All except Floregistration fee.								
	This form is: 🔲 Initial Registration 🔳 Renewal	☐ Notification of	f changes 🔲 Cancel Registration						
	If applicable, a check or money order, in the amount of \$100	0, payable to Florida D	Department of Environmental Protection is enclosed.						
(1) Use	ed Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filte	er Management (must annually register)						
	\square a. Transporter (off-site) and noncontiguous locations	a. Transpo							
	■ b. Transfer Facility	b. Transfe	•						
(2)	Collection Center (From businesses, <u>no more than 55 gal per shipment)</u>	d. End Us	ssor (Annual Report Required) (ser						
(3)	Used Oil Processor (A permit is required.)		equired under the provisions of Rule 62-710.510,						
(4)	Off-Specification Used Oil Burner	- I	at (check one): ng (business) address The site (facility) address						
(5) Use	ed Oil Fuel Marketer		16 (nanuson) and 150						
	· · · · · · · · · · · · · · · · · · ·	<u></u>	·						
	see the top of page 5 for additional items that must be subn t Used Oil Transporters.	nitted in addition to t	he above registration and fees required for non-						

Transfer Facility and Used Oil Transporter requireme	nts and required signature page	EPA ID No. FLR00	015	4278					
(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 Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]									
Evidence of the transporter's financial responsibil	· · · · ·	-							
A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.]									
A one general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.] A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]									
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 4	40 CFR 279.40(a)(1-4))								
In addition to the requirements on Page 4 Section									
 ALL registered UO Handlers must submit an annual report except generators transporting UO from noncontiguous operations within their own company. 									
UO transporters transporting off-site over p	=	• •							
	• UO transporters transporting more than 500 gallons/year must submit proof of insurance annually, and must sign and certify this submission as a certified used oil transporter in section 17 (except those exempted by Rule 62-710.600(1), F.A.C.):								
•	_ Evidence of Liability Insurance pur	•	•	C. is attached.					
16. Comments (attach a page if more space is needed									
* Question 10 continued - D035, D038,		F003 F005 U15	1. U	239 U002.					
others including D003 are handled but r		, 1 000, 1 000,	1, -	200, 000_,					
-									
Transport under ILR 000 130 062									
				,					
	_								
17. Certification: I certify under penalty of law that t									
accordance with a system designed to assure that qual submitted is, to the best of my knowledge and belief,									
false information, including the possibility of fine and			***						
I certify as a Used Oil Transporter that I am fa	miliar with the applicable Florida and	d Federal laws and rules go	vernin	g used oil transpor-					
tation and have an annual and new employee training bility is demonstrated by the Used Oil Transporter Ce	program in place covering the applic	cable used oil rules. Eviden	ce of f						
Signature of owner, operator, or an	Print Name and	Title	Used	Date Signed					
authorized representative			Oil	(mm-dd-yyyy)					
Anche Pendus	Anita Pendry, I	Director		0/27/2015					
If the person that filled in this form is not the Facility	Contact or Operator, please compl	ete the information below	<u></u>						
Michelle Walper (84									
who have a valper	17) 783-5355	nelle.walper@crysta	l-cle	an.com					