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Completed Document Details

FLAGLER CONSTRUCTION **NATIVE**

EQUIPMENT NAME:

DOC LOG

29399 FLR000007708 ID: ID:

CITY: FORT LAUDERDALE **COUNTY: BROWARD**

View email records

HWG Email Template Notification Approvals RUOH Email Template RUOH Approvals

Document Types

Discontinued On	Primary Type	Document Type
	Υ	HWG
	N	RUOH

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native N	lame
406209	HWR	ccawthorn@flaglerce.com	FLR000007708	Flagler Constructi	on Equipment
406210	UOP	ccawthorn@flaglerce.com	FLR000007708	Flagler Constructi	on Equipment
Processes					
Document T	уре	Process	Date	Author	Delete
HWG		Logged	12/09/2014	SIMMONS_JLS	×
HWG		Withdrawn 🎉	03/25/2015	SIMMONS_JLS	×
RUOH		Logged	12/09/2014	SIMMONS_JLS	×
RUOH	C	Completeness Review	12/11/2014	ASHWOOD_J	×
RUOH	W	aiting for information	12/11/2014	ASHWOOD_J	×

RUOH	Waiting for information	01/28/2015	ASHWOOD_J	×
RUOH	Waiting for information	02/11/2015	ASHWOOD_J	×
RUOH	Waiting for information	02/25/2015	ASHWOOD_J	×
RUOH	Ready for Data Entry	03/17/2015	ASHWOOD_J	×
RUOH	Data Entry Completed	03/18/2015	SIMMONS_JLS	×
RUOH	Final Review	03/18/2015	ASHWOOD_J	×
RUOH	Notification Letter Emailed	03/26/2015	ASHWOOD_J	×
RUOH	Booked into Oculus	03/27/2015	THURSBY_K	×

Comments

Document Type	Date	Comment	Author
General Comment	12/09/2014	Notification has an original signature, insurance form is incomplete.	SIMMONS_JLS
HWG	12/11/2014	Email from Lisa Hawthorne states that she put in a request to the CFO in regards to the ownership dates. Will forward as soon as she receives them.	SIMMONS_JLS
HWG	03/25/2015	Using doclog ID 29721 to complete HWG registration.	SIMMONS_JLS
RUOH	12/11/2014	Email sent to Chance Cawthorn: In reviewing your submittal, we noticed additional information is needed (see attached). Your EPA ID # is FLR000007708. Please use this number on all document where indicated. The Name of the Insurer, as listed on the Insurance form, is not registered with the Florida Department of Insurance website http://www.floir.com/companysearch. Go to this website and see. The Name of the Insurer must be listed exactly as it is registered. Please submit the following to continue to processing your registration (see attached blank form for your convenience): Revised 8700 form with original (hand signed) signature, Revised Combined HWT/UO Certificate of Liability Insurance form, and Registration fee of \$100 payable to Florida Department of Environmental Protection via check or money order. As soon as possible, please mail the required forms with original (hand signed) signature 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	01/28/2015	Received revised original 8700 form and revised Annual Report.	ASHWOOD_J
RUOH	01/28/2015	Email sent to Chance Cawthorn: In reviewing your latest submittal, we noticed additional information is needed. Check certification box Item 17 and we do not accept stamped signatures on Certificate of Liability Insurance form (see attached). Please submit the following to continue to processing your registration (see attached blank form for your convenience): Revised Page 5 of 8700 form with original (hand signed) signature, Revised Combined HWT/UO Certificate of Liability Insurance form, and Registration fee of \$100 payable to Florida Department of Environmental Protection via check or money order. As soon as possible, please mail the required forms with original (hand signed) signature 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	02/11/2015	Received registration fee.	ASHWOOD_J
RUOH	02/25/2015	Received revised original Insurance form - Good.	ASHWOOD_J
RUOH	02/25/2015	Still waiting for revised Page 5 of 8700 form.	ASHWOOD_J
RUOH	03/17/2015	Received revised original Page 5 of 8700 form.	ASHWOOD_J

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