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NATIVE NAME: VEOLIA ES TECHNICAL SOLUTIONS LLC**DOC LOG ID:** 30055**CHAZ ID:** FL0000207449**CITY:** TALLAHASSEE**COUNTY:** LEON[View email records](#)
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Document Types


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

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
232553	HWR	linda.dunwoody@veolia.com	FL0000207449	Veolia ES Technical Solutions LLC
290200	MP	linda.dunwoody@veolia.com	FL0000207449	Veolia ES Technical Solutions LLC
353450	HWT	linda.dunwoody@veolia.com	FL0000207449	Veolia ES Technical Solutions LLC
382364	UOP	linda.dunwoody@veolia.com	FL0000207449	Veolia ES Technical Solutions LLC

Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	02/26/2015	SIMMONS_JLS	✕
HWG	Completeness Review	03/25/2015	SIMMONS_JLS	✕
HWG	Ready for Data Entry	03/25/2015	SIMMONS_JLS	✕
HWG	Data Entry Completed	03/25/2015	SIMMONS_JLS	✕
RHWT	Logged	02/26/2015	SIMMONS_JLS	✕
RHWT	Completeness Review	02/27/2015	HORLICK_S	✕
RHWT	Ready for Data Entry	03/05/2015	HORLICK_S	✕
RHWT	Data Entry Completed	03/09/2015	SIMMONS_JLS	✕
RHWT	Final Review	03/27/2015	HORLICK_S	✕
RHWT	Notification Letter Emailed	04/14/2015	HORLICK_S	✕
RUOH	Logged	02/26/2015	SIMMONS_JLS	✕
RUOH	Completeness Review	03/05/2015	ASHWOOD_J	✕
RUOH	Ready for Data Entry	03/05/2015	ASHWOOD_J	✕

RUOH	Data Entry Completed	03/09/2015	SIMMONS_JLS	✕
RUOH	Final Review	03/10/2015	ASHWOOD_J	✕
RUOH	Notification Letter Emailed	04/14/2015	ASHWOOD_J	✕
RUOH	Booked into Oculus 	04/15/2015	THURSBY_K	✕


Add A New Process

Document Type	Process	Date	
Please select 	--- 	04/15/2015	Add Process

Comments

Document Type	Date	Comment	Author
General Comment	02/26/2015	Notification has an original signature, insurance is a copy.	SIMMONS_JLS
HWG	03/25/2015	Non-handler per Tiffaney.	SIMMONS_JLS
RHWT	02/27/2015	HWT/UOH Certificate of Liability is under a different facility name than that given on 8700-12FL Notification.	HORLICK_S
RHWT	03/05/2015	8700-12FL Notification form received. Updated HWT/UOH Certificate of Liability insurance form received HWT registration package is complete.	HORLICK_S
RHWT	03/27/2015	Updated HWT/UOH Certificate of Liability insurance form received.	HORLICK_S
RUOH	03/05/2015	Received original 8700 form, registration fee, and training manual statement.	ASHWOOD_J
RUOH	03/05/2015	Received revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J
RUOH	03/05/2015	Email sent to Linda Dunwoody on 1/6/15: In reviewing your submittal, we noticed additional information is needed. The policy number on the ACORD form does not match the policy number on the Certificate of Liability Insurance form we have on file (see attached). The Insurance carrier and policy number must be exactly the same in order to use the ACORD form to update your Insurance. Please submit a Combined HWT/Used Oil Certificate of Liability Insurance form (see attached blank form for your convenience). 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	03/16/2015	Email sent to Denise: Per our conversation this morning. Attached is what was submitted to us last year. Please review the org chart and make sure it's correct. If not, please forward a revised org chart. Let me know if you have any further questions.	ASHWOOD_J
RUOH	04/13/2015	Received revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J

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