

**Fw: DEP**

Dave Strickland to: Bridget Lindsey

05/21/2015 03:46 PM

FYI

----- Forwarded by Dave Strickland/Jax/Ring Power/RPC on 05/21/2015 09:40 AM -----

From: Dave Strickland/Jax/Ring Power/RPC  
To: Bridget Lindsey/Ring Power/RPC@RPC,  
Date: 05/19/2015 03:17 PM  
Subject: DEP

In response to your request for information please see below.

**A. Used Oil Violations- Used Oil Transporter/Used Oil Transfer Facility:**

1. **Employee Training on UOT FDEP Used Oil Management Training:** Please provide to FDEP a copy of training log, certificates and training presentation of your employees (for 2013, 2014, 2015) according to requirements of F.A.C 62-710.600(2). Plans are being made to get all necessary personnel trained in the handling of used oil on May 21 2015. We have a training department with certified trainers who will conduct the training.
2. **US DOT Certification and Liability Insurance** - Please provide a copy of these documents. The insurance documents are at the branch. They will be posted on the employee bulletin board. Copies are included.
3. **FDEP Registration form** displayed or held in the use oil trucks/vans/fleet [F.A.C 62-710.500(4)] – Please provide a photo of compliance that demonstrate a copy of the registration is display or hold in the trucks/vans/fleet. This document is at the branch and will be posted on the bulletin board.
4. **Contingency Plan** – Please provide a copy of your facility contingency plan, including the information of emergency coordinators, drawings of evacuation plans, location of fire extinguishers and hazardous wastes/used oil in case of emergency. This has been prepared and a copy is included.
5. **Disposal records/Manifests** – Please provide a copy of your disposal/recycling records of used oil filters, used oil, oily rags, oily water, used antifreeze) These records are at the branch. Copies are attached.
6. **Acceptance and delivery records for used oil transporting.** – Any invoice or document that Ring Power use to receive or delivery used oil for their clients. We do not accept used oil from customers. We only transport used oil that is generated by our field service technicians when on service calls. There is never more than 10 gallons of used oil on a service truck at any time. Oil we remove from equipment in brought back to the branch and deposited in the used oil tank on site. The tank capacity is 500 gal. Synergy a state approved and licensed used oil transporter removes the oil on a regular schedule as needed. They also remove and dispose of soiled rags and used oil filters. Synergy is a new vender with us. They replaced FCC Environmental and their designated sub contractors. Bills of lading for the removal of the used oil from the site are keep on site. Copies are included in this e mail.

**B. Hazardous wastes: According to your notification to the Department, your facility is a Small Quantity Generator of hazardous wastes. Please provide the following documentation:**

7. **Disposal Records** –Please provide a copy of your disposal records of hazardous wastes at least 3

years. (solvent rags, petroleum naphtha wastes and spent aerosol cans) All disposal oil rags are picked up by our used oil carrier. We have a laundry service for re useable rags. We have a new company policy concerning Solvent Rags that has not been implemented in all of our shops at this time. A copy is included.

8. **Employee Training:** Please provide to the FDEP a copy of the certificate of completion of the RCRA 101 Training. See attachment. This will be included in the training on May 21.
9. **Emergency Information posted by phone:** Please provide a photo of compliance that includes emergency contact numbers and your Emergency Coordinator. Please include the State Warning Point 1-800-320-0519. See photo for guidance. A copy of this is enclosed in the Contingency plan.
10. **Notification to Local Authorities:** Please provide to the FDEP a copy of the notification letter to local authorities and evidence of submittal/proof of delivery. (40 CFR Subpart C 265.30 to 265.37) See sample letter. Please include in the same letter a copy of your site plan and location of hazardous wastes. Copies of letters are included with mailing dates indicated.
11. **Weekly Inspection Log:** The facility must comply with weekly inspection log for hazardous wastes. Please provide a copy of the inspection logs at least 2 weeks. We do not have any Hazardous Waste which requires an inspection on site.
12. **Spent mercury lamps :** Please provide a copy of your recycling receipts of these spent lamps. We use Safety Kleen for disposal of light bulbs. A copy of the purchase order for the recycle boxes is enclosed.

Remember your facility has **15** days to be back in compliance. If you have any questions or need more days, feel free to contact me.

Biol. Norva H. Blandin, MSEM  
Environmental Specialist II  
Compliance Assurance Program- Hazardous Wastes  
Florida Department of Environmental Protection  
3301 Gun Club Road  
MSC 7210-1  
West Palm Beach, FL 33406  
561-681-6728 phone  
561-6

Client#: 145697

ACORD™

10SYNERGYREC

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/28/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  
**J Smith Lanier & Co of Albany**  
 611 POINTE NORTH BLVD  
 Albany, GA 31721  
 229 883-2424

CONTACT NAME: **Nancy Klunder**  
 PHONE (A/C, No, Ext): **229 883-2424**  
 E-MAIL ADDRESS: **nklunder@jsmithlanier.com**  
 FAX (A/C, No): **229 436-7788**

INSURED  
**Synergy Recycling, LLC**  
**Synergy Recycling of Central Florida, LLC**  
 P.O. Box 669295  
 Miami, FL 33166-9430

INSURER(S) AFFORDING COVERAGE  
 INSURER A: **Indian Harbor Ins. Co.** NAIC 36940  
 INSURER B: **XL Specialty Insurance** 37885  
 INSURER C: **XL Insurance America Inc.** 24554  
 INSURER D:  
 INSURER E:  
 INSURER F:

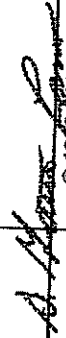
COVERAGES  
 CERTIFICATE NUMBER:  
 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOG OTHER:		GEC002043109	05/01/2015	05/01/2016	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COM/POP AGG \$2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> CA 9948 1013 <input checked="" type="checkbox"/> MCS - 90 <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> RETENTION \$10,000 <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CLAIMS-MADE		AEC003293505	05/01/2015	05/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$8,000,000 AGGREGATE \$8,000,000
A	POLLUTION LIAB Aggregate SIR		UEC002043008	05/01/2015	05/01/2016	PER STATUTE E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
			PEC001679803	05/01/2013	05/01/2016	EACH OCCURRENCE \$10,000,000 AGGREGATE \$5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Insured has Blanket Additional Insured & Blanket Waiver of Subrogation Endorsements on the General Liability & Commercial Auto policies as required by written contract or agreement with named insured.  
 Umbrella policy is follow form coverage.

CERTIFICATE HOLDER  
 Ring Power Corporation  
 500 World Commerce Parkway  
 Saint Augustine, FL 32092

CANCELLATION  
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE  




# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Rick Scott  
Governor

Herschel T. Vinyard Jr.  
Secretary

David Strickland  
Ring Power Corp  
500 World Commerce Pkwy

Saint Augustine, FL 32092 3788

February 05, 2015

BE IT KNOWN THAT

Ring Power Corp  
3400 NW 77th Ct

Doral, FL 33122 1118

*2/10/15 Jmarrubio to B. March  
Dennis*

**IS HEREBY REGISTERED AS A USED OIL**

Transporter for Hire, Transfer Facility, Filter Transporter, Filter Transfer Facility

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C)  
The Department of Environmental Protection hereby issues  
Registration Number **FLR000199034** on **February 05, 2015**  
Insurance Carrier: **TRAVELERS INDEMNITY**  
Insurance Policy #: **HC2ECAP475M5399TCT14**  
Insurance Ex. Date: **04/01/2015**  
Transporter Type: **For-Hire Transporter**

**This registration will expire on 06/30/2016**

This certificate documents receipt of your annual registration and annual report. It shall be displayed in a prominent place at your facility. This certificate and your on-line payment receipt are your receipts.

STATE OF FLORIDA  
CERTIFICATE OF LIABILITY INSURANCE  
HAZARDOUS WASTE TRANSPORTER AND USED OIL HANDLER

1. Travelers Indemnity Company of Connecticut

(Name of Insurer)

(the "Insurer"), of 100 Windward Concourse, Alpharetta, GA 30005

(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

Ring Power Corporation

(Name of Insured)

(the "Insured"), of 500 World Commerce Parkway, St. Augustine, FL 32092

(Physical Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-710.600(2) and 62-730.170. The coverage applies at:

EPA/DEP I.D. No.

Name

Physical Address

FLR000199034 Ring Power Corp., 3400 NW 77th Ct., Doral, FL 33122

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number HC2EAP475M5399TCT15, issued on 04/01/2015 (date)

The effective date of said policy is 04/01/2015 and the expiration date of said policy is 04/01/2016 (date)

This insurance is excess and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident in excess of the underlying limit of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number N/A, issued on N/A (date). The effective date of said policy is N/A and the expiration date of said policy is 04/01/2016 (date)

Mail original completed form to: Department of Environmental Protection For assistance call: 850-245-8707  
2600 Blair Stone Road, Mail Station 4560  
Tallahassee, Florida 32399-2400

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:
- (a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.
  - (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer.
  - (c) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
  - (d) Cancellation of the insurance, whether by the Insurer or the Insured and any other termination of the insurance (e.g., expiration, non-renewal), will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Secretary of the FDEP as evidenced by certified mail return receipt.
  - (e) The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgment or judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one of more States including Florida.



(Signature of Authorized Representative of Insurer)

**L. Kipp Minter**

(Typed name)

**Agent**

(Title)

Authorized Representative of

**Travelers Indemnity Company of Connecticut**

(Name of Insurer)

**P.O. Box 4927, Orlando, FL 32802**

(Address of Representative)

**EMERGENCY CONTINGENCY PLAN**

**FOR**

**RING POWER CORPORATION**

**3400 77<sup>TH</sup> Court**

**Miami, FL 33122**

**(305) 828-5900**

**Revised**

**May 2015**





## Corporate Emergency Coordinator

Dave Strickland  
Environmental Manager  
Home phone: (904) 998-8020  
Cellular: (904) 591-8802  
Home address: 11720 Glacier Bay Drive, Jax FL 32256

## Corporate Alternate Emergency Coordinators

Rick Ooley  
Safety Manager  
Home phone: (813) 689-5704  
Cellular: (813) 917-0540  
Home address: 1201 Croydonwood Circle Brandon FL 33510

Ryan Sparrell  
Security Manager  
Cellular: (407) 619-5236  
Home Address: 146780 Bulow Creek Dr Jacksonville, FL 32258

Whenever notifying emergency response agencies, give the following information:

- Your name and phone number
- Time and type of incident
- Name and quantity of material in incident
- Extent of injuries
- If condition will affect outside environment

Miami Fire Department.....911

Palm Spring General Hospital..... Non-Emergency (786) 331-5000  
Address: 1475 W 49<sup>th</sup> Pl Hialeah FL 33012 (305) 558 2500

Miami Police Department.....911  
Ambulance.....Dispatch (305) 417-1780  
STATE CONTACTS.....911

Florida Department of Environmental Protection  
Miami.....(561) 681-6600  
Tallahassee (business hours).....(850) 488-4805  
State Warning Point.....1-800-320-0519

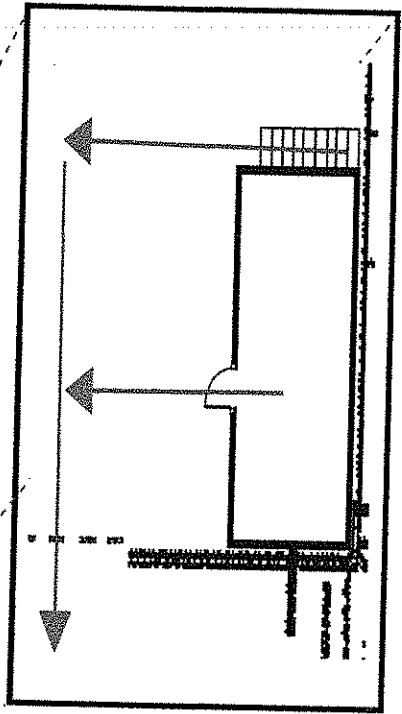
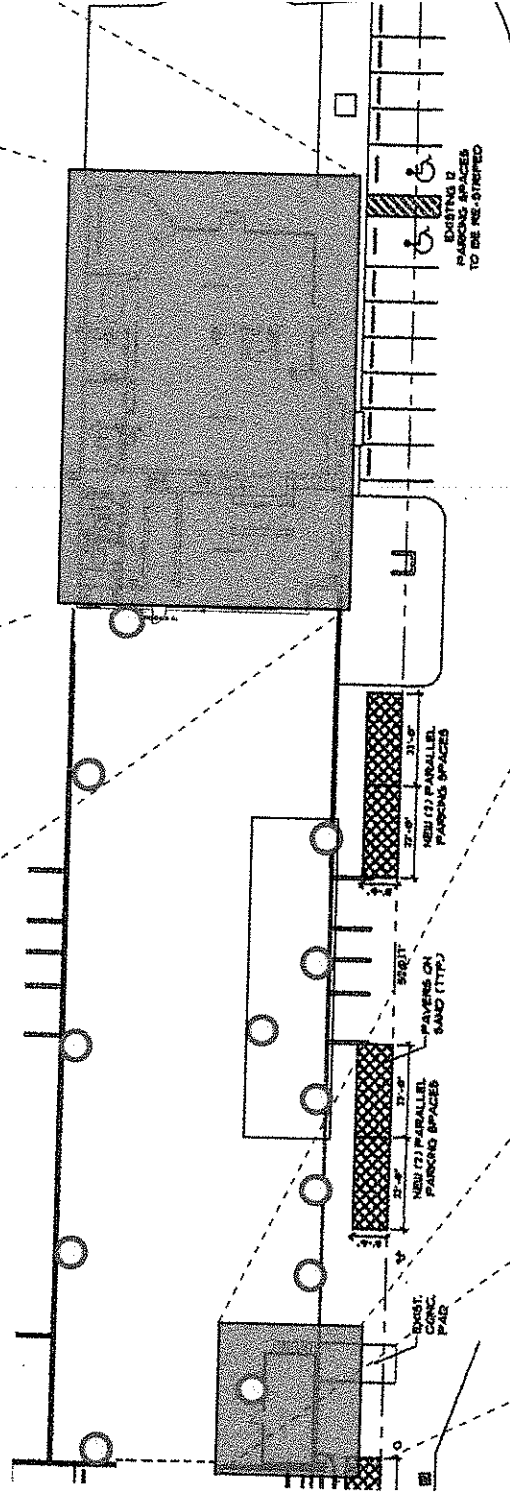
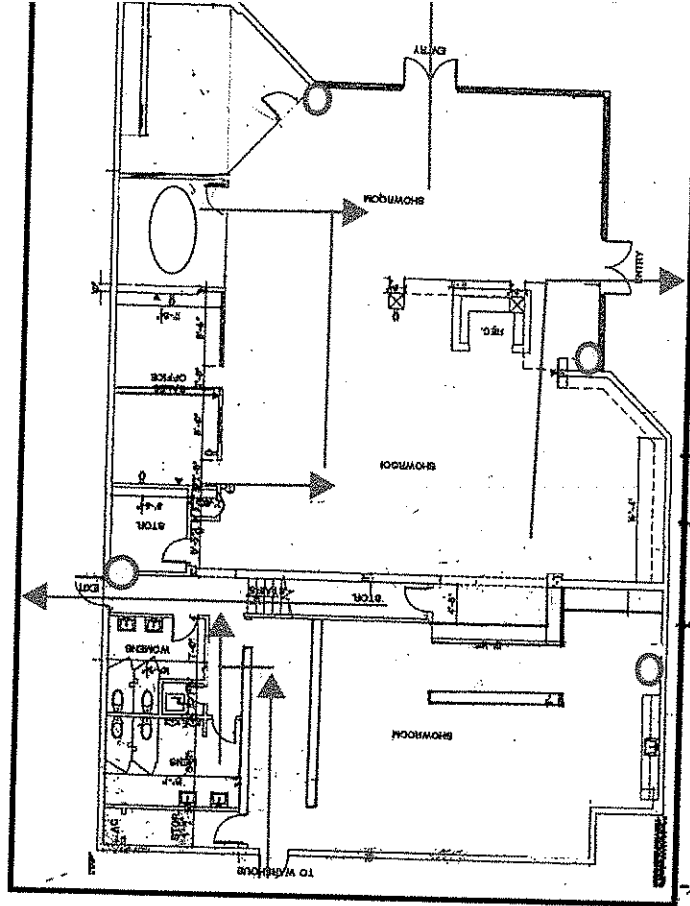
FEDERAL CONTACTS

National Response Center.....1-800-424-8802  
U.S. Coast Guard.....305-415-6800

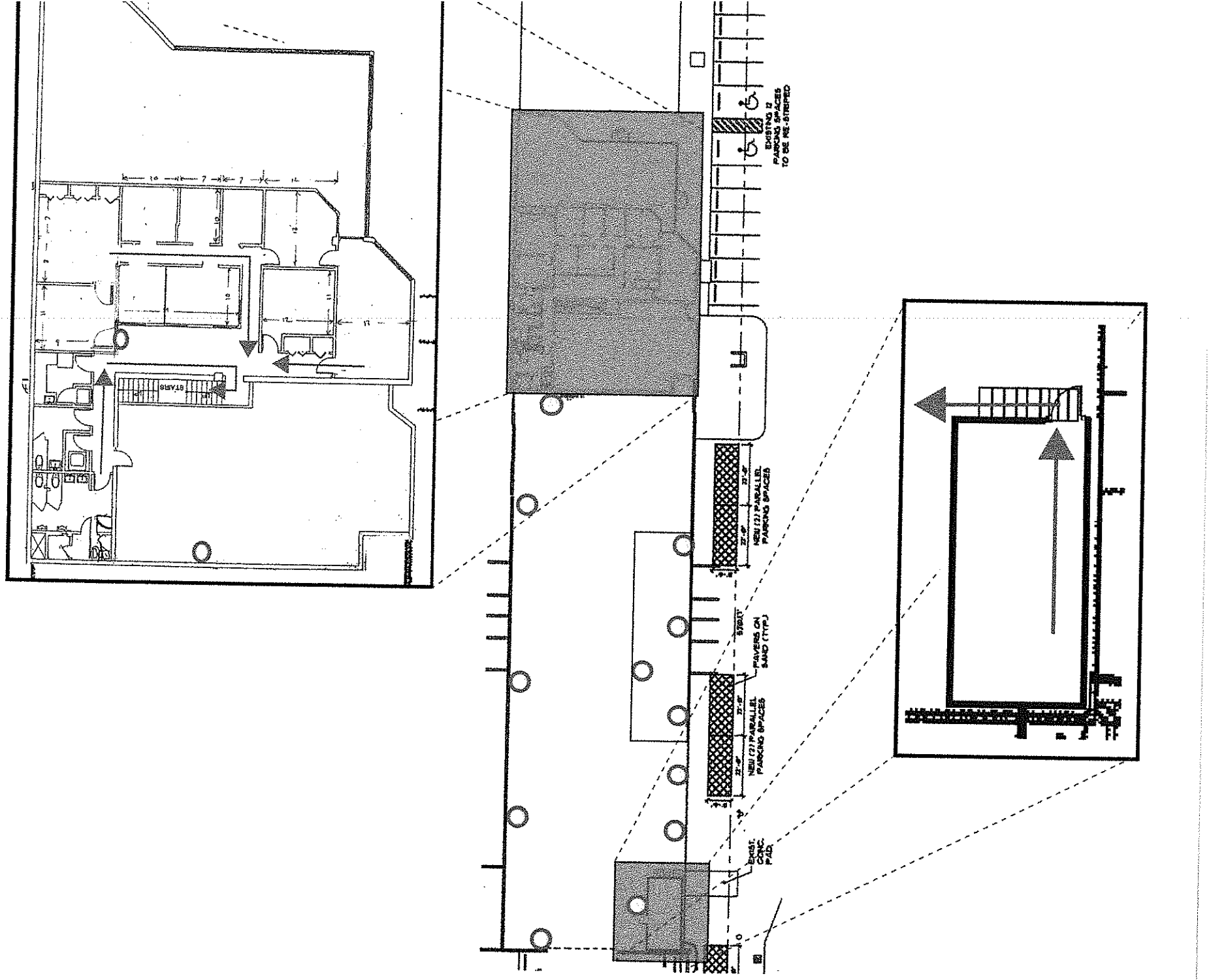
PRIVATE CONTACTS

Safety Kleen, Larry Rodriguez.....305-884-0123  
Synergy, Garry Allen.....866-495-6789  
American Compliance Technologies Inc(Emergency Response).....800-226-0911

Ring Power Miami Florida Evacuation Plan - 1st floor

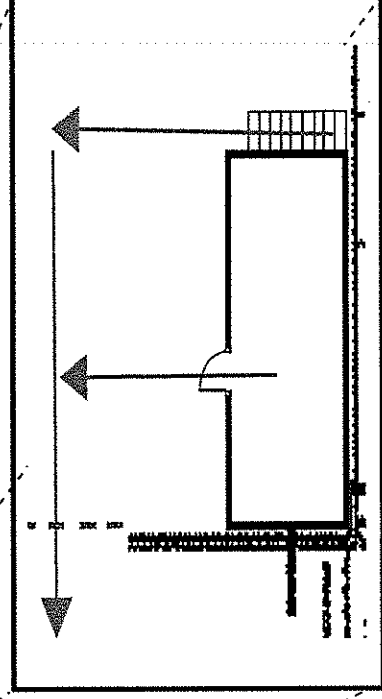
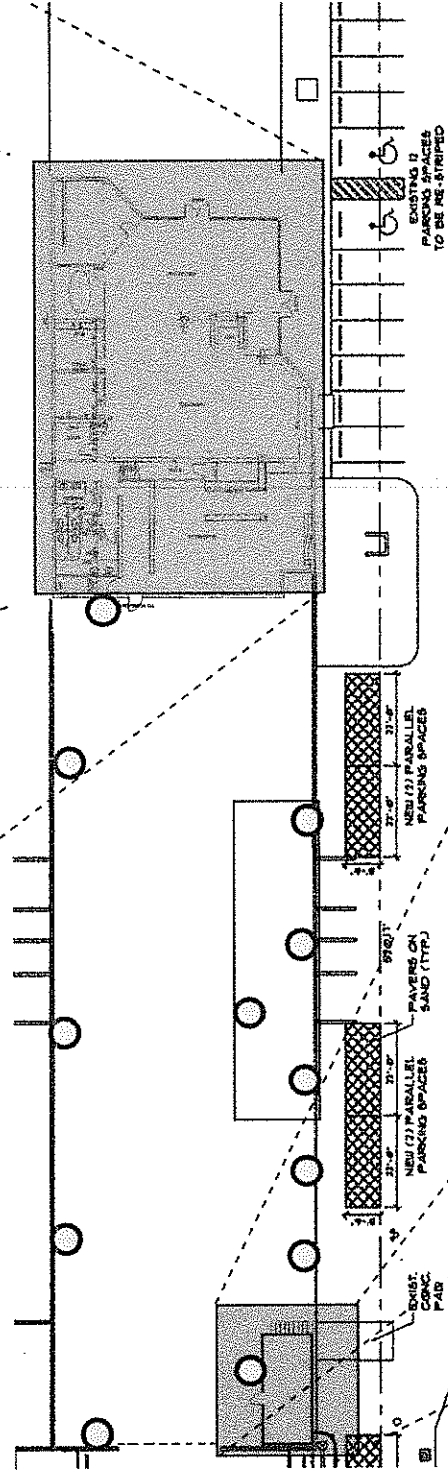
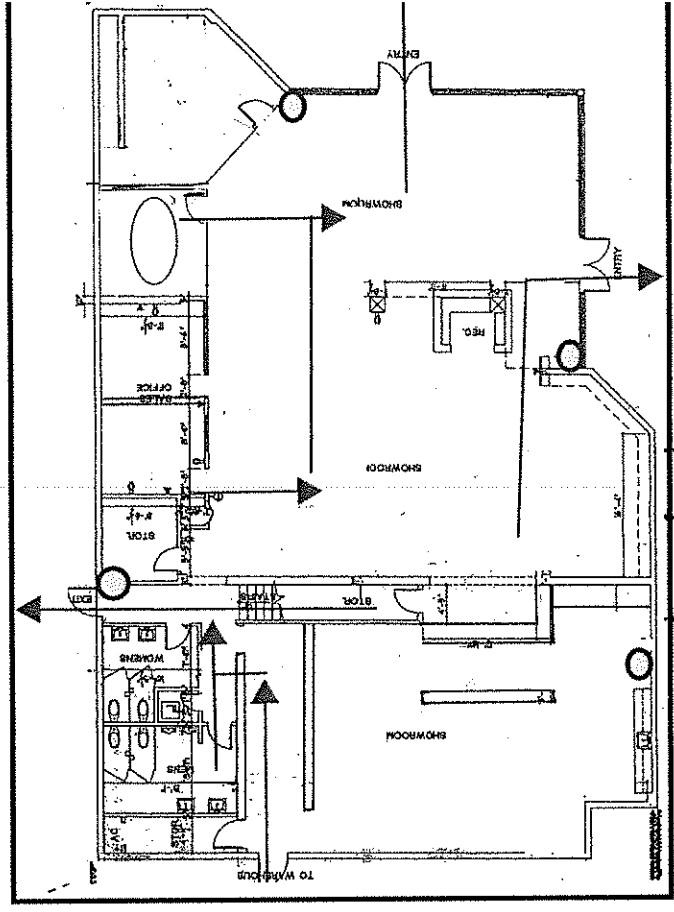


# Ring Power Miami Florida Evacuation Plan - 2nd floor

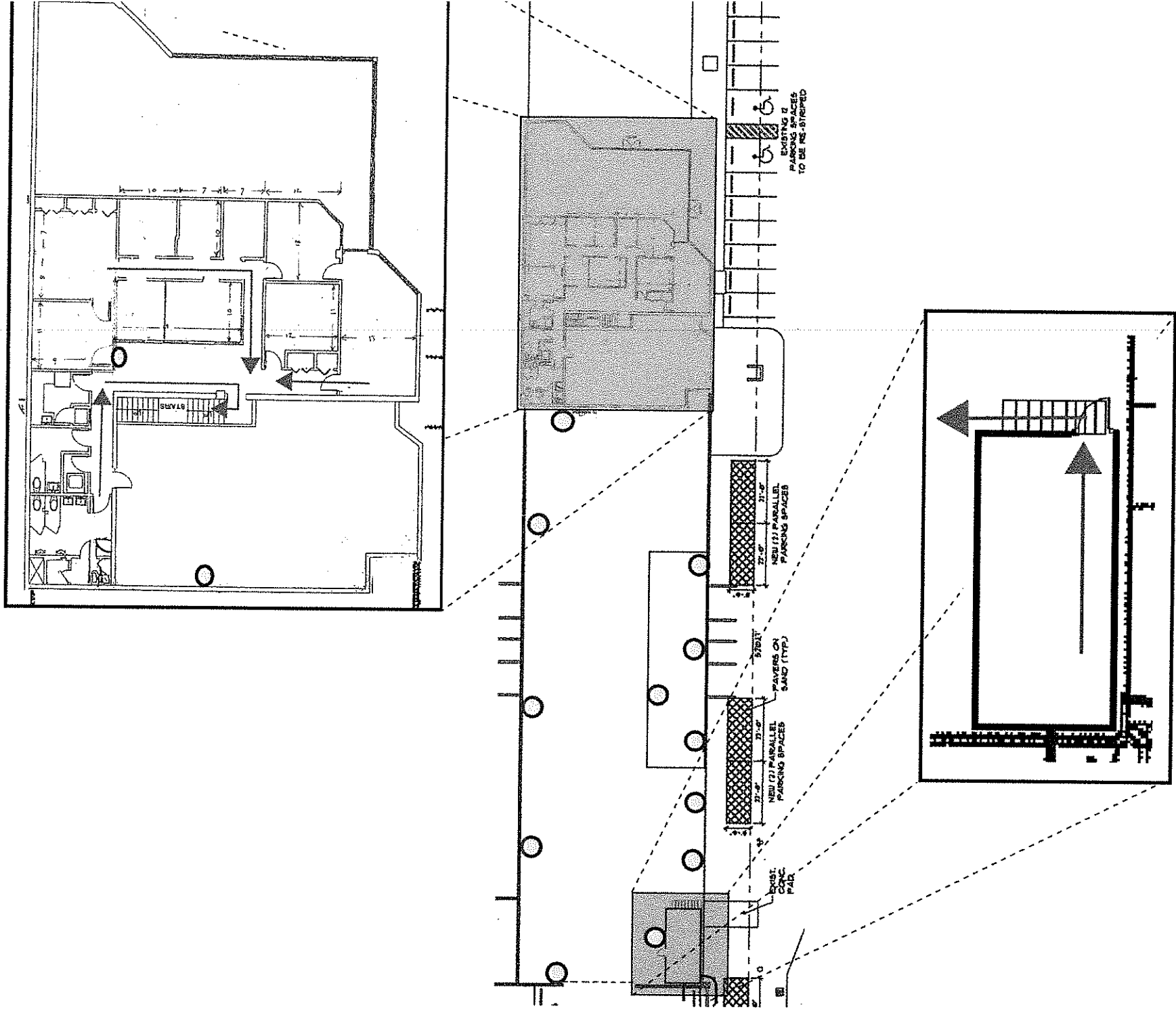


Ring Power Miami Florida Evacuation Plan - 1st floor

○ - FIRE EXTINGUISHERS  
➔ - EXIT ROUTE

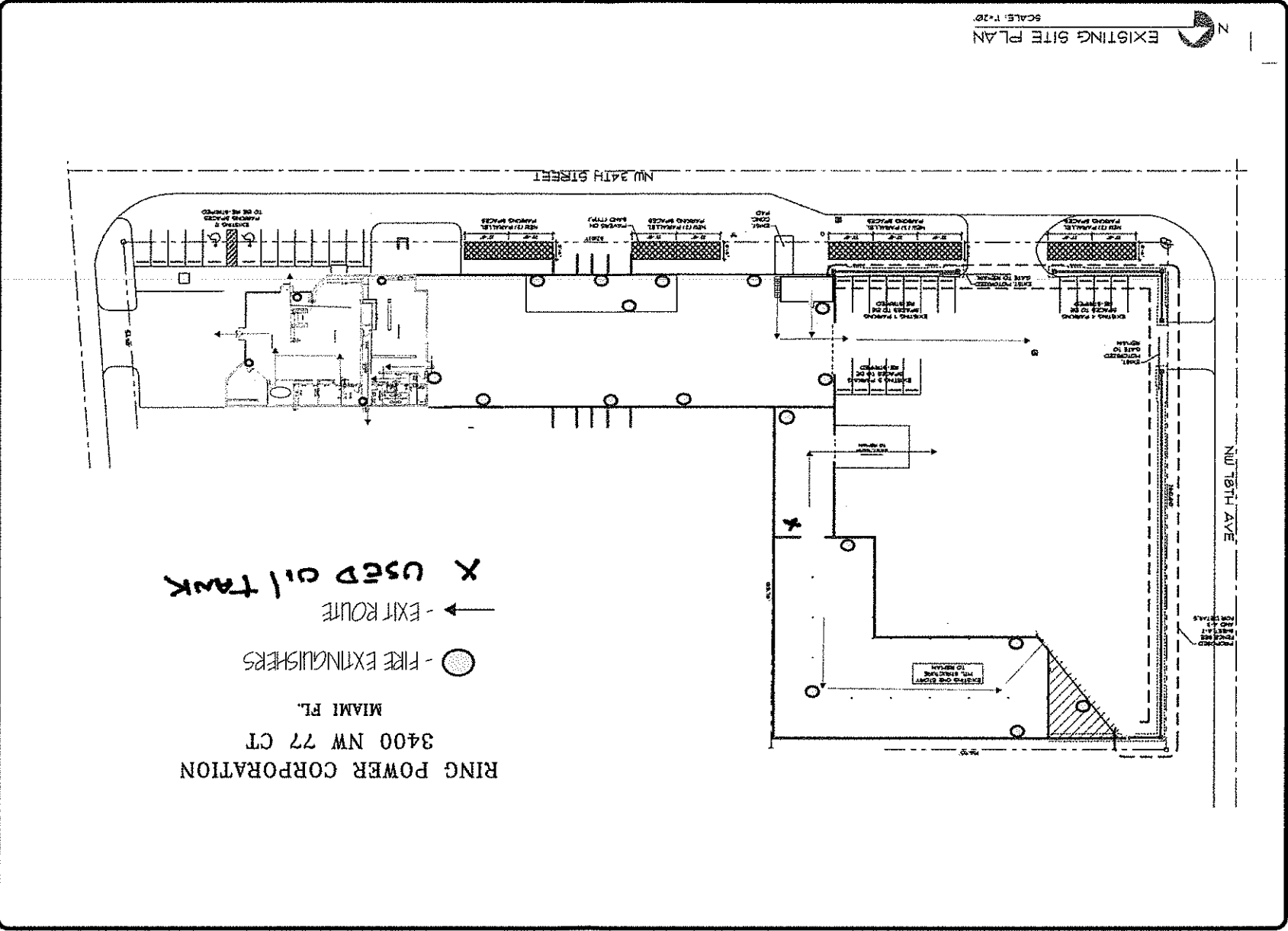


Ring Power Miami Florida Evacuation Plan- 2nd floor



DATE	
DESIGNED BY	
CHECKED BY	
SCALE	
A-1	

RING POWER CORPORATION  
 3400 NW 77 CT  
 MIAMI FL.



RING POWER CORPORATION  
 3400 NW 77 CT  
 MIAMI FL.

○ - FIRE EXTINGUISHERS  
 → - EXIT ROUTE  
 X USED OIL TANK

EXISTING SITE PLAN  
 SCALE: 1/4" = 1'-0"