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Florida Department of Environmental Protection



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Pending Document Details

NATIVE NAME: MARINE INDUSTRIAL SERVICES INC**DOC LOG ID:** 30250**CHAZ ID:** FLD032383945**CITY:** JACKSONVILLE**COUNTY:** DUVAL[View email records](#)
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[📁 Notification Approvals](#)
[📁 RUOH Email Template](#)
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Document Types


Document Type	Primary Type	Discontinued On
HWG	Y	
RUOH	N	

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
191434	HWR	mistjs@bellsouth.net	FLD032383945	Marine Industrial Services Inc
281094	UOP	mistjs@bellsouth.net	FLD032383945	Marine Industrial Services Inc

Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	03/06/2015	SIMMONS_JLS	✕
HWG	Completeness Review	04/13/2015	SIMMONS_JLS	✕
HWG	Ready for Data Entry	04/13/2015	SIMMONS_JLS	✕
HWG	Data Entry Completed	04/21/2015	SIMMONS_JLS	✕
HWG	Final Review	05/26/2015	NOLAND_T	✕
HWG	Notification Letter Emailed	05/26/2015	NOLAND_T	✖
RUOH	Logged	03/06/2015	SIMMONS_JLS	✕
RUOH	Completeness Review	03/11/2015	ASHWOOD_J	✕
RUOH	Waiting for information	03/11/2015	ASHWOOD_J	✕
RUOH	Waiting for information	03/26/2015	ASHWOOD_J	✕
RUOH	Ready for Data Entry	04/13/2015	ASHWOOD_J	✕
RUOH	Data Entry Completed	04/13/2015	SIMMONS_JLS	✕
RUOH	Final Review	04/14/2015	ASHWOOD_J	✕

RUOH	Waiting for information	06/17/2015	ASHWOOD_J	✕
RUOH	Notification Letter Emailed	06/22/2015	ASHWOOD_J	✕
RUOH	Booked into Oculus 	06/23/2015	THURSBY_K	✕

Add A New Process

Document Type	Process	Date	
Hazardous Waste Generator (HWG) <input type="button" value="v"/>	Booked into Oculus (T) <input type="button" value="v"/>	06/23/2015	<input type="button" value="Add Process"/>

Comments

Document Type	Date	Comment	Author
General Comment	03/06/2015	Notification has an original signature, insurance does not.	SIMMONS_JLS
HWG	04/13/2015	Opr date in data. New owner 2/20/2015.	SIMMONS_JLS
RUOH	03/11/2015	Received original 8700 form, registration fee, training manual statement, and Annual Report.	ASHWOOD_J
RUOH	03/11/2015	Email sent to Thomas Sween: In reviewing your submittal, we noticed additional information is needed. The Certificate of Liability Insurance form submitted does not have an original signature (see attached). Please submit the following to continue processing your renewal registration (see attached blank forms for your convenience): Revised Combined HWT/VO Certificate of Liability Insurance form. As soon as possible, please mail the required form 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	03/26/2015	Email sent to Thomas Sween: In reviewing your latest submittal, we noticed additional information is needed. The Certificate of Liability Insurance form submitted does not have an original signature (see attached). Please submit the following to continue processing your renewal registration (see attached blank forms for your convenience): Revised Combined HWT/VO Certificate of Liability Insurance form. As soon as possible, please mail the required form 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	04/13/2015	Received revised original Combined HWT/VO Insurance form - Good.	ASHWOOD_J
RUOH	04/15/2015	Spoke with Thomas Sween concerning the automobile liability insurance for used oil. He will check with his Insurance carrier and get back with me concerning the policy number that covers the vehicles transporting used oil.	ASHWOOD_J
RUOH	06/17/2015	Email sent to Thomas Sween: In reviewing your latest submittal, we noticed additional information is needed. The EPA ID number is incorrect and the Name of Insurer must be listed exactly as it is registered with the Department of Insurance - http://www.flair.com/companysearch (see attached). Please submit the following to continue processing your renewal registration (see attached blank forms for your convenience): Revised Combined HWT/VO Certificate of Liability Insurance form. As soon as possible, please mail the required form 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	06/22/2015	Received revised Combined HWT/VO Insurance form - Good.	ASHWOOD_J

Add A New Comment

Document Type	Comments	
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