# **MyFDEP**

Florida Department of Environmental Protection



Welcome, Kim Thursby. You are logged on with a role of CHAZ\_USER. [Sign Out]

[Pending List]

[Pending List - this DocLog] [Edit DocLog] [Document Checkout]

## **Pending Document Details**

**NATIVE NAME:** SAFETY-KLEEN SYSTEMS INC

**DOC LOG ID:** 30141 **CHAZ ID:**FLR000060301

CITY: OCALA COUNTY: MARION

View email records

HWG Email Template Notification Approvals RHWT Email Template RHWT Approvals RUOH Email Template RUOH Approvals

## **Document Types**

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

#### **Email Addresses**

Affiliation-ID	Interest Type	Email	Native ID	Native Name
369998	HWR	cellucci.anthony@cleanharbors.com	FLR000060301	Safety-Kleen Systems Inc
370305	HWT	cellucci.anthony@cleanharbors.com	FLR000060301	Safety-Kleen Systems Inc
406662	UOP	desha.david@cleanharbors.com	FLR000060301	Safety-Kleen Systems Inc

#### **Processes**

Document Type	Process	Date	Author	Delete
HWG	Logged	03/03/2015	SIMMONS_JLS	×
RHWT	Logged	03/03/2015	SIMMONS_JLS	×
RHWT	Completeness Review	05/26/2015	HORLICK_S	×
RHWT	Waiting for information	05/26/2015	HORLICK_S	×
RUOH	Logged	03/03/2015	SIMMONS_JLS	×
RUOH	Completeness Review	03/05/2015	ASHWOOD_J	×
RUOH	Waiting for information	03/05/2015	ASHWOOD_J	×
RUOH	Ready for Data Entry	03/25/2015	ASHWOOD_J	×
RUOH	Data Entry Completed	03/26/2015	OUTLEY_D	×
RUOH	Final Review	03/30/2015	ASHWOOD_J	×
RUOH	Waiting for information	04/22/2015	ASHWOOD_J	×
RUOH	Waiting for information	06/17/2015	ASHWOOD_J	×
RUOH	Notification Letter Emailed	06/25/2015	ASHWOOD_J	×
RUOH	Booked into Oculus	06/25/2015	THURSBY_K	×

## Add A New Process

Document Type	Process	Date
Please select	<b>v</b>	06/25/2015 Add Process

## Comments

Document Type	Date	Comment	Author
General Comment	03/03/2015	Notification has an original signature.	SIMMONS_JLS
RHWT	05/26/2015	Spoke with a woman at Richardson, TX Safety Kleen on 5/15. She said Suite 400 was correct. Spook with Jeff Curtis on 5/18. He said Suite 200 is correct.	HORLICK_S
RUOH	03/05/2015	Received original 8700 form, training manual statement, and Annual Report. UO Processor- no registration fee required.	ASHWOOD_J
RUOH	03/05/2015	Email sent to Jeff Curtis/David DeSha: In reviewing your submittal, we noticed additional information is needed. The 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/UO Certificate of Liability Insurance Form. 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	03/25/2015	Received revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J
RUOH	04/22/2015	Email sent to Jeff Curtis: In reviewing your submittal, we see that the Richardson, Texas is the transporter so we need the Insurance form to reflect the transporter physical address of Insured at 2600 N. Central Expressway, Suite 200 Richardson, TX 75080 instead of the 42 Longwater Drive, Norwell MA 02061 (see attached). Please submit the following to continue processing your renewal registration (see attached blank forms for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance Form for all facilities. As soon as possible, please mail the required forms with original (hand signed wet) 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	06/17/2015	Email sent to Jeff/Anthony: In reviewing your latest submittal, we see that the Richardson, Texas physical address is 2600 N. Central Expressway, Richardson, TX 75080 but is it Suite 200 or Suite 400 (see attached). Please submit the following to continue processing your renewal registration (see attached blank forms for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance Form for all facilities. As soon as possible, please mail the required forms with original (hand signed wet) 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 original Combined HWT/UO Insurance form - Good.	ASHWOOD_J

## Add A New Comment



<u>DEP Home</u> | <u>About DEP</u>