

## FLORIDA DEPARTMENT OF

Environmental Protection

BOB MARTINEZ CENTER 2600 BLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400 RICK SCOTT GOVERNOR

CARLOS LOPEZ-CANTERA LT. GOVERNOR

JONATHAN P. STEVERSON SECRETARY

06/02/2015 Kelly Brandenburg, Mgr Regulatory Affairs Cliff Berry Inc - Canaveral Facility PO Box 13079 Fort Lauderdale, FL 33316-0100

The Florida Department of Environmental Protection has reviewed your form 8700-12FL notification for a new hazardous waste DEP/EPA Identification Number or status/information change. Based on the information received you must use the following identification number for all manifests or reports for Cliff Berry Inc - Canaveral Facility located at 5855 Industrial Dr, Cocoa , FL32927-4608

## FLR000119792

Your facility notified FDEP requesting the following hazardous waste status/activities which do not require a separate submission: Conditionally Exempt SQG; Universal Waste Batteries, Universal Waste Lamps, Universal Waste Devices, Universal Pharmaceuticals; Petroleum Contact Water Management.

Your facility is currently registered for the following activities: UW Lamp Transporter, UW Device Transporter, UW Lamp SQH, UW Device SQH (reg exp on 03/01/2016); HW Transporter (reg exp on 06/30/2016); Used Oil Transporter, Used Oil Transfer Facility, Used Oil Filter Transporter, Used Oil Filter Transfer Facility (reg exp on 06/30/2015).

Your facility is currently permitted/active as: Used Oil Processor (exp on 02/05/2018).

If you have pending program registrations/certifications or permits, these will be mailed separately. You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status, activity or contact information. The form is found here: <a href="http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm">http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm</a>.

To review the details of your status, visit:

http://appprod.dep.state.fl.us/www RCRA/Reports/handler results.asp?epaid=FLR000119792. For further assistance, please contact me at (850) 245-8749 or email at Glen.Perrigan@dep.state.fl.us .

Sincerely,

Glen Perrigan Environmental Manager

Hazardous Waste Regulation Section

ME ID: 42543, Email Address: kbrandenburg@cliffberryinc.com

## FLORIDA

## 8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 Date Received
(for FDEP Official Use Only)

RECEILED
ENVIRONMENTAL PROTECTION

(850) 245-8707 2015 Please use the instructions document to complete this form EPA ID: 0 0 0 1 1 9 OMPLIANCE To provide initial notification (to obtain an EPA ID Number for hazardous Mark 'X' in 1. Reason for ASSISTANCE ROGRAM waste, universal waste, used oil activities, or PCW activities). the correct box: Submittal (all submitters must To provide subsequent notification (to update status and facility identification information). (must choose one complete pages 1 and 2 if a notification) and sign page 5. To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5) Pages 3 and 4, - complete as applicable) FL Registration(s) UW Mercury (see page 3) HW Transporter (see page 4) Used Oil (see page 4) 2. Facility or Cliff Berry, Inc. - Canaveral Facility **Business Name** Name of Operator: 2005 Date became Operator: 3. Facility Cliff Berry Inc. (CBI) Operator New Operator mm dd уу (List additional Opera-Street or P.O. Box: Phone Number: tors in the comments P.O. Box 13079 (954) 763-3390 section). City or Town: Zip Code: Country (if not USA): State: Fort Lauderdale FL 33316 ☐State ☐County ☐Other ☐ Federal ☐ Municipal Operator Type: Private Physical Street Address: □ Vessel 4. Facility 5855 Industrial Drive Physical Location City or Town: Zip Code: State: Information Cocoa FL 32927 (No P.O. Boxes) County: Country (if not USA): Same address as #3 above or: 2 11 11 21 (required) 5. Facility North American Industry В. Classification System (NAICS) Code(s) (at least 5 digits) D. C. Same address as #3\_ above or: Street or P.O. Box: 6. Facility or **Business** City or Town: State: Zip/Postal Code: Country (if not USA): Mailing Address First Name: Last Name: 7. Facility or Steve Collins **ESOH Director Business** Extension: Phone Number: (954) 763-3390 E-Mail: Fax: **RCRA** 1007 scollins@cliffberryinc.com (954) 763-8375 **Contact Person** Street or P.O. Box: Same address as Country (if not USA): City or Town: State: Zip Code: #3 above or: Name of Owner: 8. Real Property / 2005 Date became Owner: (FL Land) Owner C-2 Holdings, Inc. New Owner mm dd of the Facility's Street or P.O. Box: Phone Number: **Physical Location** P.O. BOX 350123 (954) 763-3390 (List additional owners in the com-ments section.) Zip Code: Country (if not USA): City or Town: State: FL Fort Lauderdale 33335 Same address as ☐Municipal ☐State ☐County ☐Other\_ Private Federal Owner Type: # above or:

RCRA Hazardous Waste Status Notification or Out of Business Notification						n	EPA ID No. FLF	₹000119	9792			
9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):												
(A) (1)Generator of Hazardous Waste					For Iten	For Items 2 through 7, mark 'X' in all that apply.						
☐Yes ☐ No (Do not include Universal Waste or Used Oil)				(2) Treater, Storer, or Disposer of Hazardous Waste								
If YES, Choose only one of the following three categories.				(at your facility) Note: A hazardous waste permit may be required for this activity.								
<ul> <li>a. Large Quantity Generator (LQG):         Generates in any calendar month 1,000 kilograms or         greater per month (kg/mo) (2,200 lbs.) of non-acute         hazardous waste; or Greater than 1 kg (2.2 lbs)         of acute hazardous waste (at least once a year)</li> </ul>					b. Op	perating Commercial perating Non-Common-Operating: Postcl permit or Order (HSW	I TSD hercial TSD losure or Cor					
b. Small Quantity Generator (SQG): Generates in any calendar month greater than				200	(3)	(3) Recycler of Hazardous Waste (at your facility)  Specify: Commercial Non-Commercial.						
100kg/mo but less than 1,000 kg/mo (>220 to <2,200 lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste				200	(4)	Note: A permit is required for storage prior to recycling.  Exempt Boiler and/or Industrial Furnace  a. Small Quantity On-site Burner Exemption						
`	st once a y	,	(CDCCC)					nall Quantity On-site nelting, Melting, and		•		
c. Conditionally Exempt SQG (CESQG):  Generates in any calendar month 100 kg/mo or less (220 lbs.) of non-acute hazardous waste and 1 kg (2.2 lbs) or less of acute hazardous waste  In addition, indicate other generator activities that apply.				(5)	V C E	Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization OR the authorization you received from FDEP.						
d. Short-T	erm Gener	ator (one-tin	ne, not on-going)		(6)	] R	eceives	Hazardous Waste	from Off-Si	ite		
		•	me per year:SQG_	_LQC	;	_						
		orter of hazar			(7) Underground Injection Control							
g. Mixed V	Vaste (haz	ardous and r	adioactive) Generator	·					<u> </u>			
10. Waste Codes for Federally Regulated Hazardous Wastes: List the waste codes of the Federal hazardous wastes handled at your facility. List them in the order they are presented in the regulations (e.g., D001, D003, F007, K019, P012, U112). Hazardous waste transporters list codes routinely or usually transported. Use comments or an additional page if more spaces are needed.												
		ransporters i										
<sup>I</sup> All D 8	<sup>2</sup> All F	· · · · · · · · · · · · · · · · · · ·	<sup>3</sup> Rarely K <sup>4</sup> All				All U	<sup>6</sup> No ex	plos	<sup>7</sup> ives		
15	16		17	18		19		20		21		
15	10		17	10		17		20		21		
			longer handling wast						kip Section 1	12-16 ):		
(A) Non-Handler of Regulated Waste at This Facility (Sections 9, 10 and 12-16 should be blank.)  (1) Business no longer generates, transports, treats, stores, disposes of, or otherwise handles any regulated waste.  (B) Facility Closed (Complete this section only if all business activities at this facility have ceased.)  (1) Closed at this location and moved or moving to another - Submit a new Form 8700-12FL for the new location if you will  (2) Out of Business - Business closed on(date)												
☐ (C) Property Tax Default				(D) F	(D) Petition for Bankruptcy Protection							
12-14 — Regis	tration	Activities	Contact Informa	ition	(only if this s	ubmi	ission is	a registration or reg	sistration inf	ormation update):		
Same as Facility RCRA Contact on page 1 or enter:		First Name:			Last Name:				Title:			
Contact for:		Phone Num	iber:		Extension:		E-Mail:					
HW Transporter		Street or P.O. Box:										
Used Oil Handl Universal Wast		City or Town:					State:(C	Country):	Zip Code:			

Universal Waste Notification and Mercury Transporter/Handler Registration EPA ID No. FLR000	0119792							
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply):								
A. Federal Notification  Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 lb) or more of any combination of UW accumulated (at any one time)								
Accumulates: 🛅 a. UW Batteries 🗖 b. Pesticides 🛅 c. Pharmace	uticals							
d. Mercury Containing Devices e. Mercury Conta	ining Lamps							
Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a UW.  A permit is required for storage prior to recycling.								
B. Florida Universal Pharmaceutical Waste (UPW): one-time registration								
Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)	)							
Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPV	/) accumulated							
Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Hea	lth [DOH])							
☐ Florida Universal Pharmaceutical Waste (UPW) Transporter								
C. Florida Annual Mercury Handler Registration:								
Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first).  If you <u>only</u> generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.  (1) This form is being submitted as a Florida Registration of Universal Waste Transporter/Handler <u>for-hire</u> Activities								
First time registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH re								
For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices								
For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration							
Mercury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required							
Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler								
Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration +							
Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	one- time \$1,000 fee+ More Requirements (contact FDEP)							
(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity)  □ First time registering □ Renewal	Annual Registration Required							
Briefly Describe your Universal Waste Activities:   We use Drum Top Bulb Crusher(s).								
For hire transporter and handler of universal waste (UW).								
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.]  Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]								

Hazardous Waste and Used Oil Transporter Registration	EPA ID No. FLR000119792						
14. HW Transporter Activities: (Mark 'X' and complete all the	nat apply if you need to register your HW Transporter activities)						
Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. Generators of hazardous waste who transport waste only within the boundaries of their facility should not register.							
A. HW Transporter Registration Information (must be	completed annually and when this information changes)						
This facility is a registered transporter of hazard	ous waste.						
This form is: 🔲 Initial Registration 🗶 Renewal	☐ Notification of changes ☐ Cancel Registration						
1. For own waste only 2. For commercial purposes 3. Both commercial and own waste							
4. Transportation Mode Air Rail Highwa	y Water Other - specify						
B. HW Transfer Facility Registration Information (m	ust be completed annually and when this information changes)						
This facility is a Hazardous Waste Transfer Face	cility: (at this location) Storage Volume						
This form is:   Initial Registration Renewal Notification of changes Cancel Registration							
Note: Hazardous Waste transfer facilities must comply with the requirements of Rule 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.							
The Transfer Facility records required under the provision  Our mailing (business) address	ns of Rule 62-730.171(6), F.A.C., are kept at (check one):  The site (facility) address						
Please enter the EPA ID Number of the HW Transporter who carries the	insurance for this Transfer Facility:						
Please see the top of page 5 for additional items that must be sul Transfer Facilities [Rule 62-730.171(3), Florida Administrative Co	bmitted in addition to the above registration for Hazardous Waste ode (F.A.C.)]:						
15. Used Oil and Oil Filter Activities: : (Mark 'X' and com	plete all that apply if you need to register your used oil activities),						
annually register with the Department using this form. All except Flo \$100 registration fee.	lities, processors, off-specification burners, and/or marketers must orida used oil (UO) Processors and collection centers must pay an annual						
This form is: 🔲 Initial Registration 🔳 Renewal	☐ Notification of changes ☐ Cancel Registration						
If applicable, a check or money order, in the amount of \$100	), payable to Florida Department of Environmental Protection is enclosed.						
(1) Used Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filter Management (must annually register)						
a. Transporter (off-site) and noncontiguous locations	a. Transporter						
<b>b</b> . Transfer Facility	■ b. Transfer Facility						
(2) Collection Center (From businesses, no more than 55 gal per shipment)	☐ c. Processor (Annual Report Required) ☐ d. End User						
(3) Used Oil Processor (A permit is required.)	(7) The records required under the provisions of Rule 62-710.510,						
(4) Gff-Specification Used Oil Burner	FAC, are kept at (check one):  Our mailing (business) address  The site (facility) address						
(5) Used Oil Fuel Marketer	Our mailing (business) address   The site (facility) address						
Please see the top of page 5 for additional items that must be subn exempt Used Oil Transporters.	nitted in addition to the above registration and fees required for non-						

Transfer Facility and Used Oil Transporter requirem	ents and required signature page	EPA ID No.							
(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:									
	Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of								
	es (F.S.) [Rule 62-730.171(3)(a)1., F.A								
Evidence of the transporter's financial responsib	Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.]								
_A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.]									
_A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]									
A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.]									
_A map or maps of the transfer facility [Rule 62-730.171(3)(a)7., F.A.C.]									
(15 cont.) Used Oil Transporters: (Exemptions in	40 CFR 279.40(a)(1-4))								
In addition to the requirements on Page 4 Secti	on 15:								
<ul> <li>ALL registered UO Handlers must submit an annual report except generators transporting UO from noncontiguous operations within their own company.</li> </ul>									
I	public highways only within their own	n company must submit pro	oof of	insurance.					
<ul> <li>UO transporters transporting off-site over public highways only within their own company must submit proof of insurance.</li> <li>UO transporters transporting more than 500 gallons/year must submit proof of insurance annually, and must sign and certify this submission as a certified used oil transporter in section 17 (except those exempted by Rule 62-710.600(1), F.A.C.):.</li> </ul>									
The used oil annual report is attached	Evidence of Liability Insurance pur	rsuant to 62-710.600(2)(e).	., F.A.0	C. is attached.					
<ul> <li>17. Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</li> <li>I certify as a Used Oil Transporter that I am familiar with the applicable Florida and Federal laws and rules governing used oil transportation and have an annual and new employee training program in place covering the applicable used oil rules. Evidence of financial responsi-</li> </ul>									
bility is demonstrated by the Used Oil Transporter C Signature of owner, operator, or an	Print Name and		Used	Date Signed					
authorized representative			Oil	(mm-dd-yyyy)					
	Richard E. Gathright, Pi	resident & COO		02-16-2015					
If the person that filled in this form is not the Facility Contact or Operator, please complete the information below:									
	<u> </u>	lins@cliffberryinc.	com						
(Name of person completing this form) (Phone Number) (E-mail Address)									