

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 Interim Secretary

07/20/2015 Mark Cardamone, Vice President ViaTek Solutions 11399 47th Street N Clearwater, FL 33762

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 **ViaTek Solutions** located at **11399 47th St N, Clearwater , FL33762-4963**

FLR000020214

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not** require a separate submission: Small Quantity Generator; Universal Waste Batteries, Universal Waste Lamps, Universal Waste Devices, Large Quantity Handler.

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).**

Your facility is currently permitted/active as: No Active Hazardous Waste Treatment, Storage, or Disposal Permit.

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: http://www.dep.status, activity or contact information. The form is found here: http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm. **To review the details of your status**, visit: https://fldeploc.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLR000020214. For further assistance, please contact me at (850) 245-8749 or email at Glen.Perrigan@dep.state.fl.us.

Sincerely,

Kobin K. Pandley For

Glen Perrigan Environmental Manager Hazardous Waste Regulation Section

ME ID: 43768 , Email Address: mcardamone@viateksolutions.com

8700-12FL - FLORIDA NOTIFICATION OF									
FLORIDA		ASTE ACTIVITY Division–HWRS, MS4560			FDER Official Use Only)				
	-	Rd. Tallahassee, FL 32399-2400			JUN 292015				
S FLORIDA	350) 245-8707			PI "	TING & COMPLETE T				
EPA ID: F L R 0 0 1 2 1 7 7 2 Please use the instructions document to complete this form									
1. Reason for	Mark 'X' in To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, used oil activities, or PCW activities).								
Submittal (all submitters must	(must choose one and 2 if a notification) To provide subsequent notification (to update status and facility identification information) To provide the final notification (closing) for the facility. (see instructions—must complete pages 1.2.5)								
complete pages 1 and 2 and sign page 5.									
Pages 3 and 4, - complete as applicable)	FL Registration(s)		ury (see page 3)		Fransporter (see pa		Used Oil (see page 4)		
2. Facility or Business Name	V	/iaTeK \$	Solutio	ns (IN	S Broke	ers.	Inc.)		
Business Name 3. Facility	Name of Operator:						tor: ⁰⁷ / ⁰¹ / ²⁰⁰⁵		
Operator	ViaTeK S	Solutions				New Operator mm dd yy			
(List additional Opera- tors in the comments section).	Street or P.O. Box: 11399 N 47th Street				Phone Num 888-83		21		
section _j .	City or Town: Clearwater		<u> </u>	State: FL	Zip Code [.] 33762	C	Country (1f not USA).		
	Operator Type:								
4. Facility Physical	Physical Street Address:						□Vessel		
Location Information (No P.O. Boxes)	City or Town:	n:			State:	Zip C	Code:		
Same address as #3 above or:	County: Country (if not USA).								
5. Facility North An		А. Б б	2 9 2 0	<u>)</u> (required)	B. _	_11_			
Classification Sys Code(s) (at least 5	· ,	C.			D.				
6. Facility or	Same address as	· · · · · · · · · · · · · · · · · · ·	eet or P O. Box:		1.000				
Business Mailing Address	City or Town:		5	State: 2	Z1p/Postal Code.	C	Country (if not USA).		
7. Facility or Business	First Name: Mark	İ	Last Name.	ne	Vice P	resid	ent		
RCRA Contact Person	Phone Number: 888-835-3721Extension.E-Mail: mcardamone@viateksolutions.comFax: 813-217-4650								
	Street or P.O. Box:								
Same address as #above or:	City or Town:	<u> </u>		State: Zip Code: Country (if not U			Country (if not USA):		
8. Real Property	Name of Owner. Date became Owner [.] <u>3</u> / <u>25</u> / <u>2015</u>					. 3 /25 /2015			
(FL Land) Owner of the Facility's	Golfish Investment, LLC								
Physical Location (List additional	Street or P.O. Box. 16613 Ashton Gree	en Drive		Phone Number: 813-468-7577					
owners in the com- ments section.)	City or Town:			State: FL	Zip Code: 33558		Country (if not USA)		
Same address as #above or:	Owner Type Private Federal Municipal State County Other								

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710 500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 04-23-2013 Page 1 of 5

RCRA Hazardous Waste Status Notification or Out of Business Notification EPA ID No. FLR000121772				R000121772				
9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):								
(A) (1)Generator	(A) (1)Generator of Hazardous Waste For Items 2 through 7, mark 'X' in all that apply.							
🛛 Yes 🗖 No	(Do not include Uni	versal Waste or Used Oil	I)	(2) Treat	er, Store	r, or Disposer of H	azardous Waste	
	•	wing three categories.		(at	your faci	lity) Note: A hazaro may be	dous waste permit required for this activity.	
Genera greater hazard	arge Quantity Generator (LQG): enerates in any calendar month 1,000 kilograms or reater per month (kg/mo) (2,200 lbs.) of non-acute azardous waste; or Greater than 1 kg (2.2 lbs) f acute hazardous waste (at least once a year)			 a. Operating Commercial TSD b. Operating Non-Commercial TSD c. Non-Operating: Postclosure or Corrective Action Permit or Order (HSWA, etc.) 				
Genera 100kg/	 b. Small Quantity Generator (SQG): Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 			 (3) Recycler of Hazardous Waste (at your facility) Specify: Commercial Non-Commercial. Note. A permit is required for storage prior to recycling. 				
lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste (at least once a year)					a. Sn	-	e Burner Exemption	
 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 b. Smelting, Melting, and Refinir Waste Generated to Manage Condi Waste Generated at Other Facilitie Choose this management activity on EITHER a copy of your application 				ge Conditionally Exempt Facilities tivity ONLY if you attach				
	In addition, indicate other generator activities that apply.EITHER a copy of your application for such authorization OR the authorization you received from FDEP.I d. Short-Term Generator (one-time, not on-going)(6) I Receives Hazardous Waste from Off-Site					ceived from FDEP.		
e. Episodic f. United S	Not more than one-t tates Importer of haza	ime per year:SQG_		ř		ound Injection Cor		
your facility.	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.							
¹ D006	² D008	³ D009	4	j transported. 0		6	7	
8	9	10	11	1	12	13	14	
15	16	17	18		19	20	21	
11. Other Status Changes (If no longer handling waste or closed, sections 9 and 10 should be blank and skip Section 12-16):								
、 <i>,</i>	8	te at This Facility (S						
(1) Business no longer generates, transports, treats, stores, disposes of, or otherwise handles any regulated waste.								
 (B) Facility Closed (Complete this section only if <u>all</u> 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) Petition for Bankruptcy Protection 								
12-14 — Registration Activities Contact Information (only if this submission is a registration or registration information update):								
Same as Facility RCRA Contact on page 1 or enter:			Last Name:	Title:		Title:		
	Phone Nun	iber:		Extension:	E-Mail:			
Contact for: HW Transporter Lised Oil Handle		O. Box:	I		L	<u></u>		
Used Oil Handler Universal Waste City or Town:					State:(C	State:(Country): Zip Code:		

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710 500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 04-23-2013 Page 2 of 5

Universal Waste Notification and Mercury Transporter/Handler Registration EPA ID No. FLR0001217			0121772					
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply)								
	A. Federal Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 lb) or more Notification of any combination of UW accumulated (at any one time)							
	Accumulates:	a. UW Batteries 🛛 b. Pesticides	c . Pharmace	uticals				
	l I	d. Mercury Containing Devices	e. Mercury Contai	ning 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. Flor	da Universal Pharmaceutical	Waste (UPW): one-time registration						
	narmaceuticals LQH = 5,000 kg or mo	re of Universal Pharmaceutical Waste (UPW) accu	mulated (at any one time))				
D F	narmaceuticals Acute LQH = more that	an 1 kg (2.2 lb) of acutely hazardous ("P-listed") pl	narmaceutical waste (UPW	/) accumulated				
	everse Distributor of Universal Phar	maceutical Waste (UPW) (must be registered with th	e Florida Department of Hea	lth [DOH])				
D F	orida Universal Pharmaceutical Waste	(UPW) Transporter						
C Florid	a Annual Mercury Handler R	agistration	· · · · ·					
	-	andlers, reclamation and recovery facilities						
(1) This		s or manage pharmaceuticals, do not regis rida Registration of Universal Waste Tran al One-time \$1,000 fee for Mercury :	sporter/Handler <u>for-1</u>	<u>nire</u> Activities				
	or-hire Transporter of Universal Wa	ste Mercury-Containing Lamps or Devices						
	or-hire Transfer Facility of Universa	I Waste Mercury-Containing Lamps or Devices		Annual Registration				
	Mercury-Containing Devices (thermost	ats, etc) $SQH = less than 100 kg accumulated by for$	or-hire handler	Required				
	Mercury-Containing Lamps SQH = les	s than 2,000 kg (8,000 lamps) accumulated by for-	hire handler					
	Mercury-Containing Devices LQH = 1	00 kg (220 lb) or more accumulated at any one tim	e by for-hire handler	Annual Registration +				
	, <u> </u>	000 kg (4400 lbs/8,000 lamps) or more accumulated	-	one- time \$1,000 fee+ More Requirements (contact FDEP)				
	Cury Recovery and/or Reclamation H First time registering C Renewal	Facility (A hazardous waste permit is required for	this activity)	Annual Registration Required				
Briefly Describe your Universal Waste Activities: Electronics Recycling company that manually takes apart IT gear, generating lamps, devices and batteries. For some clients we transport and consolidate their spent lamps, passing them on weekly to Veolia in Tallahassee for final processing.								
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) C 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)]								

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730 150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date 04-23-2013 Page 3 of 5

Hazardous Waste and Used Oil Transporter Registrati	ons	EPA ID No. FLR000121772					
14. HW Transporter Activities: (Mark 'X' and complete all t	14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities)						
Transporters of and Transfer Facilities for Hazardous Was renew their registration. Evidence of casualty/liability insurance Transfer facilities must submit several additional documents as detail changes. Registered transporters and transfer facilities may only begin Generators of hazardous waste who transport waste only within t	e pursuant to 62-730.1 ed on page 5 the first t n operations after rece	70(2)(a) is required in addition to this registration. time they register and when the information iving approval from the Department.					
A. HW Transporter Registration Information (must be	e completed annuall	y and when this information changes)					
This facility is a registered transporter of hazard	dous waste.						
This form is: 🗖 Initial Registration 🛛 Renewal	Notification of	changes 🛛 Cancel Registration					
□ 1. For own waste only □ 2. For commercial	purposes 3.1	Both commercial and own waste					
4. Transportation Mode 🗖 Air 🗖 Rail 🗖 Highwa	ay 🛛 Water 🗔 O	ther - specify					
B. HW Transfer Facility Registration Information (n	nust be completed a	nnually and when this information changes)					
This facility is a Hazardous Waste Transfer Face	cility: (at this location	on) Storage Volume					
This form is: 🔲 Initial Registration 🛛 🛛 Renewal	Notification of c	changes 🛛 Cancel Registration					
Note: Hazardous Waste transfer facilities must comply with the	e requirements of Ru	le 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.					
The Transfer Facility records required under the provisio	ns of Rule 62-730.17						
Please enter the EPA ID Number of the HW Transporter who carries the	e insurance for this Tra	unsfer Facility:					
Please see the top of page 5 for additional items that must be su Transfer Facilities [Rule 62-730.171(3), Florida Administrative C		to the above registration for Hazardous Waste					
15. Used Oil and Oil Filter Activities: : (Mark 'X' and com	plete all that apply i	f you need to register your used oil activities),					
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer faci <u>annually register</u> with the Department using this form. All except Flo \$100 registration fee. This form is: Initial Registration Renewal		ocessors and collection centers must pay an annual					
_							
If applicable, a check or money order, in the amount of \$100	0, payable to Florida E	Department of Environmental Protection is enclosed.					
(1) Used Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filte	er Management (must annually register)					
a. Transporter (off-site) and noncontiguous locations	a. Transp	orter					
🖵 b. Transfer Facility	b. Transf	-					
(2) Collection Center (From businesses, <u>no more than 55 gal per</u> shipment)	C. Proces	sor (Annual Report Required) ser					
(3) Used Oil Processor (A permit is required.)		equired under the provisions of Rule 62-710.510,					
(4) Gff-Specification Used Oil Burner	FAC, are kept at (check one):						
(5) Used Oil Fuel Marketer 🛛 On-Spec 🖵 Off-Spec		ng (business) address The site (facility) address					
		•					
Please see the top of page 5 for additional items that must be subr exempt Used Oil Transporters.	mitted in addition to	the above registration and fees required for non-					

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Transfer Facility and Used Oil Transporter requirem	ents and required signature page	EPA ID No.FLR00	012	21772
(14 cont.) Hazardous Waste Transfer Facilities: following items are required to be submitted with the ini subsequent submission [Rule 62-730.171(3), Florida Adu	tial notification for a transfer facility a			
Certification by a responsible corporate officer Section 403.7211(2), Florida Statut	of the transporter that the proposed loc es (F.S.) [Rule 62-730.171(3)(a)1., F.A			
Evidence of the transporter's financial responsil	bility [Rule 62-730.171(3)(a)3., F.A.C.]		
A brief general description of the transfer facili	ty operations [Rule 62-730 171(3)(a)4.	, F.A.C.]		
A copy of the facility closure plan [Rule 62-730	0.171(3)(a)5., F.A.C.]			
A copy of the contingency and emergency plan				
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 In addition to the requirements on Page 4 Secti ALL registered UO Handlers must submit their own company. UO transporters transporting off-site over 	ion 15: t an annual report except generators tra public highways only within their own	n company must submit proo	ofofi	nsurance.
 UO transporters transporting more than 50 submission as a certified used oil transport 		•	-	and certify this
The used oil annual report is attached	Evidence of Liability Insurance pu	rsuant to 62-710.600(2)(e)., 1	F.A C	C. is attached.
 17. Certification: I certify under penalty of law that accordance with a system designed to assure that question of the system designed to assure the system designed	alified personnel properly gather and e	valuate the information subr	mittee	1. The information
submitted is, to the best of my knowledge and belief false information, including the possibility of fine ar	nd imprisonment for knowing violation	IS.		
☐ I certify as a Used Oil Transporter that I am f tation and have an annual and new employee trainin bility is demonstrated by the Used Oil Transporter C	g program in place covering the applic	able used oil rules. Evidence	e of fi	
Signature of owner, operator, or an	Print Name and		Jsed Oil	Date Signed
authorized representative				(mm-dd-yyyy)
	Mark B Cardan	none VP	⊒≬	06/24/2015
		 r	┓┤	
				•
If the person that filled in this form is not the Facility	y Contact or Operator, please compl	ete the information below:		

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C Effective Date 04-23-2013 Page 5 of 5