

# MyFDEP

Florida Department of Environmental Protection



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## Completed Document Details

**NATIVE NAME:** DART TRUCKING COMPANY INC

**DOC LOG ID:** 32012

**CHAZ ID:** OHR000159129

**CITY:** NORTH LIMA

**COUNTY:** ALL FL CNTYS

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### Document Types

**Document Type**

RHWT

**Primary Type**

Y

**Discontinued On**

### Email Addresses

**Affiliation-ID**

376843

**Interest Type**

HWT

**Email**

[bjoy@dartamerica.com](mailto:bjoy@dartamerica.com)

**Native ID**

OHR000159129

**Native Name**

Dart Trucking Company Inc

### Processes

**Document Type**

**Process**

**Date**

**Author**

**Delete**

RHWT

Logged

09/22/2015

SIMMONS\_JLS



RHWT

Completeness Review

10/02/2015

HORLICK\_S



RHWT

Waiting for information

10/02/2015

HORLICK\_S



RHWT

Ready for Data Entry

10/13/2015

HORLICK\_S



RHWT

Data Entry Completed

10/14/2015

SIMMONS\_JLS



RHWT

Final Review

10/15/2015

HORLICK\_S



RHWT

Notification Letter Emailed

10/16/2015

HORLICK\_S



RHWT

Booked into Oculus

10/19/2015

THURSBY\_K



**Comments**

<b>Document Type</b>	<b>Date</b>	<b>Comment</b>	<b>Author</b>
General Comment	09/22/2015	Notification has an original signature, insurance form is a copy.	SIMMONS_JLS
RHWT	10/02/2015	<p>Email to Barbara Joy: In reviewing your submittals, we notice additional information is needed. Please submit the following to continue processing your Florida Hazardous Waste Transporter registration. ¿ The 8700-12FL Notification form is incomplete (see attached with highlighted Items). Please submit updated pages 1, 2 &amp; 3 of the 8700-12FL Florida Notification of Regulated Waste Activity. Since these are not signature pages you may email the corrected pages to me at email below. (Blank forms are attached for your convenience). ¿ Please revise the Certificate of Liability Insurance Hazardous Waste Transporter and Used Oil Handler form. The document must be hand signed (original ¿wet¿ signature) by an authorized agent of the insurance provider on file with the Florida Office of Insurance Regulation, not a copy or a stamp (see attached). As soon as possible, please mail the required form to: DEP Waste Management Division¿HWPP, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 Let me know if you have any questions or comments.</p> <p>Thanks</p>	HORLICK_S
RHWT	10/13/2015	Updated Notifications pages received 10/6.	HORLICK_S
RHWT	10/13/2015	Updated HWT/UOH Certificate of Liability insurance form with original signature received.	HORLICK_S

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