Winston, Kathy

From: Curtis, Jeffery S <Jeff.Curtis@safety-kleen.com>
Sent: Monday, November 9, 2015 4:21 PM
To: Winston, Kathy
Cc: Cruz, William
Subject: "Safety-Kleen Boynton Beach"
Attachments: 2015 Hazwoper Training Sheets Boynton Beach.pdf; 2015 RCRA Refresher Training Boynton Beach.pdf

Hi Kathy,

Attached are the 2015 RCRA refresher training, and Hazwoper training docs requested from your inspection last week. Let Bill or I know if you have any questions, or need anything additional. In addition, please advise when the Department makes a decision on what action will be taken regarding the 10-day container(s) violation found during inspection. Thanks again!

Jeff

Jeff Curtis EHS Manager | Safety-Kleen | A Clean Harbors Company | Boynton Beach, FL | jeff.curtis@safety-kleen.com
561.600.3076 (o) | 561.523.4719 (c) | 561.731.1696 (f) | safety-kleen.com

Safety Starts With Me! Live it 3-6-5

safety-kleen.

TRAINING ATTENDANCE/CERTIFICATE SHEET

Course Code: HS1041 and HS1042 — 9/03/15

HAZCOM with Global Harmonization STANDARD — HS1041 — 7:00AM - 8:00AM

Medical Surveillance - Blood Borne Pathogens — HS1042 — 8:00AM - 8:30 AM

City, State: Boynton Beach, FL — Time: 7:00am

	PRINTED NAME	SIGNATURE	CH EMPLOYEE ID #
1.	S. Blankenship		050329
2.	C. Hagin		076976
3.	R. Hickman		051677
4.	R. Hoehmann		051729
5.	T. Johnson		051941
6.	S. Kilgore	Stephen Kilgore	052049
7.	J. LaBelle		052149
8.	W. Polykronis		053044
9.	M. Trautman		053923
10.	N. Vitale		054027
11.	D. Zahner		054284
12.	R. Lott		080016
13.	S. Fischer		051185
14.	J. Romero		081557
15.	J Barber		082987
16.	H. Robinson	Hakeem Robinson	088808
17.			
18.			
19.			
20.			

e above listed employees have demonstrated satisfactory performance and comprehension of the course named above.

Trainer's Name: Bill Cruz_____ Trainer's Name: _____

Company: **Safety-Kleen**_____ Company: _____

Address: 5610 Alpha Dr.,Boynton Beach, FL___ Address: _____

Phone #: 561-736-1339 _____ Phone #: _____

Version June 26, 2008

safety-kleen.

TRAINING ATTENDANCE/CERTIFICATE SHEET

Course Code: HS1043

9/09/15

Respiratory Refresher Module HS1043

City, State: Boynton Beach, FL

Time: 7:00am – 8:00 AM
1 HR.

	PRINTED NAME	SIGNATURE	CH EMPLOYEE ID #
1.	S. Blankenship		050329
2.	C. Hagin		076976
3.	R. Hickman		051677
4.	R. Hoehmann		051729
5.	T. Johnson		051941
6.	S. Kilgore	Stephen Kilgore	052049
7.	J. LaBelle		052149
8.	W. Polykronis		053044
9.	M. Trautman		053923
10.	N. Vitale		054027
11.	D. Zahner		054284
12.	R. Lott		080016
13.	S. Fischer		051185
14.	J. Romero		081557
15.	J Barber		082987
16.	H. Robinson	Wilkean Robinson	088808
17.			
18.			
19.			
20.			

The above listed employees have demonstrated satisfactory performance and comprehension of the course named above.

Trainer's Name: Bill Cruz

Company: **Safety-Kleen**

Address: 5610 Alpha Dr.,Boynton Beach, FL

Phone #: 561-736-1339

Trainer's Name:

Company:

Address:

Phone #:

Version June 26, 2008

safety-kleen

TRAINING ATTENDANCE/CERTIFICATE SHEET

Course Code: HS1044

Confined Space / Heat Stress HS1044

9/10/15

City, State: Boynton Beach, FL

Time: 7:00am – 8:00 AM

	PRINTED NAME	SIGNATURE	CH EMPLOYEE ID #
1.	S. Blankenship		050329
2.	C. Hagin		076976
3.	R. Hickman		051677
4.	R. Hoehmann		051729
5.	T. Johnson		051941
6.	S. Kilgore	Stephen Kilgore	052049
7.	J. LaBelle		052149
8.	W. Polykronis		053044
9.	M. Trautman		053923
10.	N. Vitale		054027
11.	D. Zahner		054284
12.	R. Lott		080016
13.	S. Fischer		051185
14.	J. Romero		081557
15.	J Barber		082987
16.	H. Robinson	Wilson Robinson	088808
17.			
18.			
19.			
20.			

The above listed employees have demonstrated satisfactory performance and comprehension of the course named above.

Trainer's Name: Bill Cruz

Company: **Safety-Kleen**

Address: 5610 Alpha Dr.,Boynton Beach, FL

Phone #: 561-736-1339

Trainer's Name:

Company:

Address:

Phone #:

safety-kleen.

TRAINING ATTENDANCE/CERTIFICATE SHEET

Course Code: HS 1045 / HS1046 9/15/15

PPE & Hearing Conservation HS 1045
Decontamination HS 1046

City, State: Boynton Beach, FL

Time: 7:00am - 800AM
800AM - 900AM

	PRINTED NAME	SIGNATURE	CH EMPLOYEE ID #
1.	S. Blankenship		050329
2.	C. Hagin		076976
3.	R. Hickman		051677
4.	R. Hoehmann		051729
5.	T. Johnson		051941
6.	S. Kilgore	Stephen Kilgore	052049
7.	J. LaBelle		052149
8.	W. Polykronis		053044
9.	M. Trautman		053923
10.	N. Vitale		054027
11.	D. Zahner		054284
12.	R. Lott		080016
13.	S. Fischer		051185
14.	J. Romero		081557
15.	J Barber		082987
16.	H. Robinson	Hilean Robinson	088808
17.			
18.			
19.			
20.			

e above listed employees have demonstrated satisfactory performance and comprehension of the course named above.

Trainer's Name: Bill Cruz

Company: **Safety-Kleen**

Address: 5610 Alpha Dr.,Boynton Beach, FL

Phone #: 561-736-1339

Trainer's Name:

Company:

Address:

Phone #:

safety-kleen.

TRAINING ATTENDANCE/CERTIFICATE SHEET

Course Code: HS 1047 / HS1048 9/18/15

EMERGENCY Response / Site H&S PLAN HS1047

Drum Handling HS1048

City, State: Boynton Beach, FL

Time: 7:00am 1 HOUR PART 1

1 HOUR 8:00AM PART 2

	PRINTED NAME	SIGNATURE	CH EMPLOYEE ID #
1.	S. Blankenship		050329
2.	C. Hagin		076976
3.	R. Hickman		051677
4.	R. Hoehmann		051729
5.	T. Johnson		051941
6.	S. Kilgore	Stephen Kilgore	052049
7.	J. LaBelle		052149
8.	W. Polykronis		053044
9.	M. Trautman		053923
10.	N. Vitale		054027
11.	D. Zahner		054284
12.	R. Lott		080016
13.	S. Fischer		051185
14.	J. Romero		081557
15.	J Barber		082987
16.	H. Robinson	Hileen Robinson	088808
17.			
18.			
19.			
20.			

The above listed employees have demonstrated satisfactory performance and comprehension of the course named above.

Trainer's Name: Bill Cruz Trainer's Name:

Company: **Safety-Kleen** Company:

Address: 5610 Alpha Dr.,Boynton Beach, FL Address:

Phone #: 561-736-1339 Phone #:

Review Session Summary

Course Code:	ET140	**Course Name:**	RCRA SK Site Specific Training
Session Number:	00010709	**Status:**	Complete
Start Date:	11/09/2015	**End Date:**	11/09/2015
Language:		**Facility:**	SK Boynton Beach, Florida

Session Summary

Personalize | Find | View 10 | | First 1-16 of 16 Last

Employee ID	Name	Status	Grade
050329	Scott Carter Blankenship	Completed	
050817	William Cruz	Completed	
051185	Steve M Fischer	Completed	
051677	Robert Lee Hickman	Completed	
051729	Ronald S Hoehmann	Completed	
052049	Stephen M Kilgore	Completed	
052149	Jeffrey Paul Labelle	Completed	
053044	William R Polykronis	Completed	
053923	Mark Trautman	Completed	
054027	Nicole M Vitale	Completed	
054284	Donald I Zahner	Completed	
076976	Canaan K Hagin	Completed	
080016	Regina Lott	Completed	
081557	Jimmy A Romero	Completed	
082987	Jerel V Barber	Completed	
088808	Hikean Robinson	Completed	

Return to Search Notify

SAFETY-KLEEN SYSTEMS
TRAINING ATTENDANCE /CERTIFICATION SHEET

Date: 11/9/2015 Training Location: Safety-Kleen Boynton Beach, Florida

Course Name: RCRA Refresher/Contingency Plan/SPCC Plan SAP Event/Class Number: N/A

Course Code: ET 140 Time:7:00 am - 8:30 AM Duration: 1.5 hrs.

	PRINTED NAME	SIGNATURE	EMPLOYEE #	FACILITY (CITY, STATE)
1.	Bill Cruz		050817	Boynton Beach, FL
2.	Stephen Kilgore	Stephen Kilgore	052049	Boynton Bch
3.	Bill Polykronis		053044	Boynton Beach
4.	Rob Hickman		051677	Boynton Beach
5.	Steven Fischer		051185	4
6.	Jeff LaBelle		052149	Boynton
7.	M Trautman		058923	Boynton Bch
8.	Dan Zahnen		054284	" "
9.	Jimmy Romano	Romano	061557	Boynton Beach
10.	Scott Blankenship		1952329	Boynton Beach, FL
11.	Regina Cott		080016	
12.	RON HOEHMANN		051729	Boynton Beach, FL
13.	HIKEAN ROBINSON		088808	Boynton Bch, FL
14.	NICOK Vitale	Nicholas Vitale	054027	Boynton Bch, FL
15.	Jared Barbey		087987	Boynton Bch, FL
16.	Corran Hagin		076976	Boynton Beach FL
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				

I certify that the above listed employees have satisfactorily passed associated tests and, demonstrated satisfactory performance and comprehension of this training.

Trainer: Jeff Curtis – EHS Manager
(Please Print Name)

Trainer's Signature: _____

Trainer's Location: Boynton Beach, Florida

Trainer: _____
(Please Print Name)

Trainer's Signature: _____

Trainer's Location: _____