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Completed Document Details

NATIVE NAME: RINECO TRANSPORTATION LLC

DOC LOG ID: 31941

CHAZ ID: ARR000016733

CITY: BENTON

COUNTY: ALL FL CNTYS

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[RHWT Email Template](#) [RHWT Approvals](#) [RUOH Email Template](#) [RUOH Approvals](#)

Document Types











Document Type	Primary Type	Discontinued On
RHWT	Y	
RUOH	N	

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
381071	MP	kerry.haley@rineco.com	ARR000016733	Rineco Transportation LLC
382362	UOP	kerry.haley@rineco.com	ARR000016733	Rineco Transportation LLC
382784	HWT	kerry.haley@rineco.com	ARR000016733	Rineco Transportation LLC

Processes

Document Type	Process	Date	Author	Delete
RHWT	Logged	09/10/2015	SIMMONS_JLS	
RHWT	Completeness Review	09/15/2015	HORLICK_S	
RHWT	Waiting for information	09/15/2015	HORLICK_S	
RHWT	Ready for Data Entry	09/29/2015	HORLICK_S	
RHWT	Data Entry Completed	09/30/2015	SIMMONS_JLS	
RHWT	Final Review	09/30/2015	HORLICK_S	
RHWT	Notification Letter Emailed	09/30/2015	HORLICK_S	
RHWT		10/01/2015	THURSBY_K	

	Booked into Oculus 			
RUOH	Logged	09/10/2015	SIMMONS_JLS	
RUOH	Completeness Review	09/10/2015	ASHWOOD_J	
RUOH	Waiting for information	09/10/2015	ASHWOOD_J	
RUOH	Waiting for information	10/13/2015	ASHWOOD_J	
RUOH	Waiting for information	01/06/2016	ASHWOOD_J	
RUOH	Waiting for information	01/07/2016	ASHWOOD_J	
RUOH	Withdrawn 	01/07/2016	ASHWOOD_J	

Comments

Document Type	Date	Comment	Author
RHWT	09/15/2015	The ACORD insurance carrier does not match the Certificate of Liability form on file.	HORLICK_S
RHWT	09/29/2015	Updated page 2 of 8700-12FL Notification form received.	HORLICK_S
RUOH	09/10/2015	Email sent to Kerry Haley: In reviewing your submittal, we noticed additional information is needed. The Insurance carrier on the ACORD form submitted does not match the Certificate of Liability Insurance form on file (see attached). Please submit the following to continue processing your registration (see attached blank form for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance form. As soon as possible, please mail the required form with original (hand signed) signatures 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	10/13/2015	Received revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J
RUOH	10/13/2015	Disregard above comment incorrect facility.	ASHWOOD_J
RUOH	01/06/2016	Need Insurance form for updated Insurance carrier AIG). On file is past (Commerce) carrier for vehicle liability insurance. Hold until new Insurance form for renewal registration period.	ASHWOOD_J
RUOH	01/07/2016	Email sent to Kerry Haley: We need an updated Certificate Liability Insurance form for Insurance carrier AIG Specialty Insurance Company for your automobile liability for used oil. We could not use the submitted ACORD form. According to Rule 62-710.600, Florida Administrative Code, used oil transporters are required to maintain vehicle insurance at all times when transporting used oil. Handling used oil or used oil filters without liability insurance and a valid registration is a violation of the law, subject to penalty. Please submit a revised Insurance form as soon as possible. Let me know if you have any further questions.	ASHWOOD_J

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