

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

01/29/2016

Dennis Stropko Regency Technologies 1831 E Highland Rd Twinsburg, OH 44087-

The Florida Department of Environmental Protection has reviewed your application for registration as a transporter or handler for universal waste lamps and devices destined for recycling. Based on the information received, the facility located at **2005 Broad St, Brooksville, FL 34604-6817** has been registered through **March 1, 2017** with the following status:

Facility ID # **FLR000217687**

Transporter of Universal Waste Lamps
Small Quantity Handler Facility for Universal Waste Lamps

(Less than 2,000kg of Lamps (8,000) and/or 100kg of Devices for 1 Year)

The registration form for the year **2017** will be sent to the contact person on your application.

Chapter 62-737, Florida Administrative Code (F.A.C.), (copy enclosed) specifies several other requirements including packaging, training and record keeping for transporters and handlers of universal waste lamps or devices destined for recycling. These requirements are simple, flexible and make good business and environmental sense (summarized on enclosed fact sheets).

This registration does not allow you to transport or handle universal waste lamps or devices which are destined for landfill or other disposal. The transportation or handling of universal waste lamps or devices destined for disposal is subject to our hazardous waste management regulations under Chapter 62-730, F.A.C.

If any of your facility's information on the Florida Notification of Regulated Waste Activity [form 62-730.900(1)(b)] changes, please notify the Department using that form. I can also be contacted at (850) 245-8759 or at Laurie.Tenace@dep.state.fl.us.

Sincerely,

Laurie Tenace

Environmental Specialist Waste Reduction Section

Enclosures



8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

(850) 245-8707 LAT CASSISTANCE PROGRAM Please use the instructions document to complete this form FLR000217687 EPA ID: 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). 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 RSR Partners, LLC, dba Regency Technologies **Business Name** Date became Operator: 08 3. Facility RSR Partners, dba Regency Technologies Operator List additional Opera-Street or P.O. Box: Phone Number: tors in the comments 1831 E. Highland Rd. 440-287-7216 section). Country (if not USA): City or Town: State: Zip Code: Twinsburg OH 44087 ☐ Federal ☐ Municipal State County Other Operator Type: Private Physical Street Address: □ Vessel 4. Facility 2005 Broad Street Physical Location City or Town: Zip Code: State: Information **Brooksville** FL 34604 (No P.O. Boxes) County: Country (if not USA): Same address as Hernando #3 above or: 5. Facility North American Industry В. (required) Classification System (NAICS) Code(s) (at least 5 digits) Same address as #_above or: Street or P.O. Box: 1831 E. Highland Rd. 6. Facility or **Business** Zip/Postal Code: Country (if not USA): City or Town: State: **Mailing Address** 1831 E. Highland Rd. OH 44087 Last Name: First Name: 7. Facility or **HSE Manager** Dennis Stropko **Business** Extension: E-Mail: Fax: **RCRA** Phone Number: 7216 dennisstropko@reserve-group.com 440-848-8633 **Contact Person** Street or P.O. Box: 1831 E. Highland Rd. Same address as City or Town: Twinsburg State: Zip Code: Country (if not USA): # above or: OH 44087 Name of Owner: 8. Real Property Date became Owner: 09 /11 /2015 Tampa Land Holdings, LLC (FL Land) Owner New Owner mm dd уу of the Facility's Street or P.O. Box: Phone Number: **Physical Location** 1831 E. Highland Rd. 440-287-7219 (List additional Country (if not USA): City or Town: Zip Code: State: owners in the com-44087 OH Twinsburg Same address as

☐ Municipal

State

County Other

Federal

■ Private

Owner Type:

above or:

RCRA Hazardous Waste Status Notification or Out of Business Notification 3 EPA ID No.											
9.	RCRA Haz	ardous '	Waste Act	ivities at this Fac	cility:	: (Mark 'X' i	n all that apply):	:			
(A) (1)Generator of Hazardous Waste 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				
I F	f YES, Choose only one of the following three categories. a. Large Quantity Generator (LQG):				(at	(at your facility) Note: A hazardous waste permit may be required for this activity.					
•	Gener	rates in any	y calendar mo	onth 1,000 kilograms		(a. Operating C	Commercia	d TSD	ĺ	
				2,200 lbs.) of non-acut than 1 kg (2.2 lbs)	te	[b. Operating Non-Commercial TSD				
		of acute hazardous waste (at least once a year)			c. Non-Operating: Postclosure or Corrective Action Permit or Order (HSWA, etc.)						
	b. Small	Ouantity '	Generator (S	SOG):		(3)	(3) Recycler of Hazardous Waste (at your facility) Specify: Commercial Non-Commercial.				
	Gener	rates in any	y calendar mo	onth greater than	100	S					
	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 (at least once a year)					Note: A permit is required for storage prior to recycling.					
					(4) Exempt Boiler and/or Industrial Furnace						
(at least office a year)							 a. Small Quantity On-site Burner Exemption b. Smelting, Melting, and Refining Furnace 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				(5) Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities				ally Exempt		
			of acute haza				Choose this manag	gement act	tivity ONLY		
 	n addition, inc	dicate oth	er generator	activities that apply	r.		EITHER a copy of your application for such authorization OR the authorization you received from FDEP.				
_	_		-	ne, not on-going)	•	(6)					
1 -	_		-	me per year:SQG_	_LQG	;	_				
	_ •		orter of hazar		_		(7) Underground Injection Control				
	g. Mixed V	Waste (haz	ardous and ra	adioactive) Generator							
10.	Waste Cod	des for F	ederally F	Regulated Hazard	dous	Wastes: List	the waste codes of	the Federa	al hazardous	wastes handled at	
	your facility.	. List them	n in the order	they are presented in	the re	gulations (e.g., I	D001, D003, F007, I	K 019, P01	12, U112).		
<u> </u>	Hazarde		transporters 1	ist codes routinely or					l page if mor	re spaces are needed.	
1		2		3	4		5	6			
8		9		10	11		12	13		14	
15		16		17	18		19	20		21	
11.	Other Stat	tus Char	nges (If no	longer handling wast	e or cl	osed, sections 9	and 10 should be b!	lank and s	kip Section 1	12-16):	
(A	A) Non-Hand	ler of Reg	ulated Wast	e at This Facility (Se	ections	s 9, 10 and 12-16	should be blank.)				
	(1) Bus	siness no le	onger generat	tes, transports, treats,	stores,	, disposes of, or	otherwise handles a	ny regulat	ted waste.		
(I	— 3) Facility Cle	osed (Con	nplete this see	ction only if all busine	ess act	ivities at this fac	ility have ceased.)				
	(1) Clo	sed at this	location and	moved or moving to	anothe	er - Submit a nev	v Form 8700-12FL	for the ne	w location if	you will	
	J										
<u> </u>	(2) Ou	it of Busine	ess - Busines	s closed on			(date)				
	(C) Proper						tion for Bankrupt				
12-	14 — Regis	tration .		Contact Informa		•	nission is a registra	tion or reg		ormation update):	
	Same as Facility		First Name:		ŀ	Last Name:			Title:		
Ľ	Contact on page	1 or enter:	Phone Num	ber:	\dashv	Extension:	E-Mail:		<u> </u>		
Con	tact for:	I									
	HW Transporte		Street or P.0	D. Box:							
Used Oil Handler City or Town:						State:(Country):		Zip Code:			
ľ	Universal Wast	e	Ĭ				` ''		1 -		

Unive	ersal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No.					
12.	Univers	al 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 Contain	ining Lamps				
		Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	J W .				
B. F	lorida U	niversal 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 (UPW) accumulated						
	Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Health [DOH])						
C. F	Florida A	nnual Mercury Handler Registration:					
Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.							
(1) T	_	is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-lime registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH registering					
	For-hir	e Transporter of Universal Waste Mercury-Containing Lamps or Devices					
	For-hir	e Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration				
	Mercui	y-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required				
	Mercui	y-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler					
Q	Mercu	y-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration +				
	Mercu	y-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)				
(2)		ecovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) t time registering Renewal	Annual Registration Required				
RSR P commo lamps	Partners dba odities. Bat and bulbs a	Tuniversal Waste Activities: Regency Technologies de-manufactures and separates e-scrap from private accounts for downstream recovers are removed/sorted/taped by chemistries and shipped to downstream battery recyclers for processing, are collected from equipment as well and are shipped to appropriate lamp recyclers. There is no actual process reakdown/separation and accumulation/packaging for shipment to off-site downstream recycling entities.	On rare occasions,				
13. O		e Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to R	-				

Hazardous Waste and Used Oil Transporter Registration	ons	EPA ID No.					
14. HW Transporter Activities: (Mark 'X' and complete all t	hat 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 hazardous 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 Highway Water Other - specify							
B. HW Transfer Facility Registration Information (must be completed annually and when this information changes)							
☐ This facility is a Hazardous Waste Transfer Fac	cility: (at this locatio	on) Storage Volume					
This form is: Initial Registration Renewal	Notification of ch	anges					
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 provis Our mailing (business) address	sions of Rule 62-730.1 The site (facility)						
Please enter the EPA ID Number of the HW Transporter who carries th	ne insurance for this Tr	ransfer Facility:					
Please see the top of page 5 for additional items that must be Transfer Facilities [Rule 62-730.171(3), Florida Administrativ		on to the above registration for Hazardous Waste					
15. Used Oil and Oil Filter Activities: : (Mark 'X' and com	plete all that apply if	you need to register your used oil activities),					
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer faciling annually register with the Department using this form. All except Flows 100 registration fee.	orida used oil (UO) Pro	ocessors and collection centers must pay an annual					
_	■ Notification of						
If applicable, a check or money order, in the amount of \$100), payable to Florida D	repartment 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. Transpo	orter					
☐ b. Transfer Facility	b. Transfe	-					
(2) Collection Center (From businesses, no more than 55 gal per shipment)	c. Process d. End Us	sor (Annual Report Required) ser					
(3) Used Oil Processor (A permit is required.)	(7) The records rec	quired under the provisions of Rule 62-710.510,					
(4) Gff-Specification Used Oil Burner	1	at (check one):					
(5) Used Oil Fuel Marketer	Our mailir	ng (business) address					
Please see the top of page 5 for additional items that must be subn exempt Used Oil Transporters.	l nitted in addition to t	he 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 Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]								
Evidence of the transporter's financial responsib		_						
	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								
 ALL registered UO Handlers must submit their own company. 	an annual report except generators tran	nsporting UO from noncor	ıtiguoı	as operations within				
UO transporters transporting off-site over	public highways only within their own	company must submit pro	oofofi	insurance.				
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.):.								
The used oil annual report is attached	Evidence of Liability Insurance pur			C. is attached.				
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.								
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 responsibility is demonstrated by the Used Oil Transporter Certificate of Liability Insurance, DEP form 62-730.900(5)(a), F.A.C								
			ice of f					
Signature of owner, operator, or an authorized representative		form 62-730.900(5)(a), F.A	ice of f					
7	Certificate of Liability Insurance, DEP i	form 62-730.900(5)(a), F Title	ice of f A.C Used	financial responsi-				
7	Certificate of Liability Insurance, DEP	form 62-730.900(5)(a), F Title	Ce of f A.C Used Oil	Date Signed (mm-dd-yyyy)				
7	Certificate of Liability Insurance, DEP i	form 62-730.900(5)(a), F Title	Used Oil	Date Signed (mm-dd-yyyy)				
authorized representative If the person that filled in this form is not the Facility	Print Name and Dennis V. Jhopko, y Contact or Operator, please comple	form 62-730.900(5)(a), F.A Title 1 + 5 E Mgr	Used Oil	Date Signed (mm-dd-yyyy)				
authorized representative If the person that filled in this form is not the Facility	Print Name and Dennis V. Stropko,	form 62-730.900(5)(a), F.A Title 1 + 5 E Mgr	Used Oil	Date Signed (mm-dd-yyyy)				