

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

02/11/2016

Mark Larsen Aerc Com Inc 1921 Jacques Dr Melbourne, FL 32940-

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 **4317 Fortune PI Ste J, West Melbourne, FL 32904-1509** has been registered through **March 1, 2017** with the following status:

Facility ID # **FLD984262782**

Transporter of Universal Waste Lamps and Devices

Large Quantity Handler Facility for Universal Waste Lamps and Devices

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

FLORIDA

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

DRERELEIVER (TO: FDEMOTHELINOSE GTIS)

FEB 09 2016

PERMITTING & COMPLIANCE ASSISTANCE PROGRAM

ASSISTANCE ROOMAN										
EPA ID: F L	: F L D 9 8 4 2 6 2 7 8 2 Please use the instructions document to complete this form									
1. Reason for Submittal	Mark 'X' in the correct box: To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, used oil activities, or PCW activities).									
(all submitters must complete pages 1 and 2 and sign page 5.	(must choose one 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)									
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 Business Name	AERC.COM, Inc.									
3. Facility Operator	AERC.COM, Inc.						/ 90			
(List additional Operators in the comments section).	Street or P.O. Box: 4317 Fortune	Place Su	ite J				321-95	Phone Number: 321-952-1516		
	City or Town: West Melbourne				State: FL		Zip Code: 32904		Country (if no	et USA).
	Operator Type:	■Private □	Federal	Mun	icipal Sta	te 🗖	County 🗖	Other		
4. Facility Physical	Physical Street Address:									
Location Information (No P.O. Boxes)	City or Town:					State:	Zip	Code:		
Same address as #3 above or:	Country: Country (if not USA): Brevard									
5. Facility North Au Classification Sys		A. 5_	6 2	2 1	1 (required) B.				
Code(s) (at least 5 digits)		c.	_ _			D.		_ _		
6. Facility or Business	Same address as #3 above or: Street or P.O. Box:									
Mailing Address	City or Town:				State:	Zip/F	Postal Code:		Country (if not	t USA):
7. Facility or Business	First Name: Mark			Last Name: Larsen			Operations Manager			
RCRA Contact Person	Phone Number: 321-952-151	6	Ext. 742	ension: 23	E-Mail: mlarsen(@aero	c.com		Fax: 321-952	-1060
Same address as	Street or P.O. Box: 1921 JACQUES DR									
#above or:	r: City or Town: State: Zip Code: Country (i					not USA):				
8. Real Property (FL Land) Owner of the Facility's	Name of Owner: CIA, Inc.					Date became Owner: 01 /01 /90 ☐ New Owner mm dd yy				
Physical Location (List additional	Street or P.O. Box: 4320 WOODLAND PARK DR Phone Number: 321-723-3400									
owners in the comments section.) Same address as	n the com- cition.) City or Town: Zip Code: Zip Code					Country (if	not USA):			
#above or:	Owner Type:	Private Fe	deral	Munic	ipal 🗖 State		County DO	ther		

RCRA Hazardous Waste Status Notification or Out of Business Notification					EPA ID I	No. FLI	D984262	2682	
9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):									
(A) (1)Generator	r of Hazardous Was	te		For Items	2 through	7, mark '	X' in all	that apply.	
🗖 Yes 🚨 No	(Do not include Un	niversal Waste or Used Oi	il)	(2) Trea	ater, Store	r, or Dispo	ser of H	azardous W	Vaste
_	-	owing three categories.		(a	ıt your facil	lity) Note:		dous waste p required for	permit this activity.
Genera greater hazardo		nonth 1,000 kilograms (2,200 lbs.) of non-acu r than 1 kg (2.2 lbs)			□ b. Op□ c. No	_	mmercia on-Comm ng: Postcl	of TSD nercial TSD losure or Con	prective Action
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 lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste (at least once a year) 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 In addition, indicate other generator activities that apply.			(4)	 (3) Recycler of Hazardous Waste (at your facility) Specify: Commercial Non-Commercial. Note: A permit is required for storage prior to recycling. (4) Exempt Boiler and/or Industrial Furnace a. Small Quantity On-site Burner Exemption b. Smelting, Melting, and Refining Furnace Exemption 				nmercial. recycling. ace emption	
			(5)	(5) Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization OR the authorization you received from FDEP.					
 d. Short-Term Generator (one-time, not on-going) e. Episodic: Not more than one-time per year:SQGLQG f. United States Importer of hazardous waste g. Mixed Waste (hazardous and radioactive) Generator 				 (6) ☐ Receives Hazardous Waste from Off-Site (7) ☐ Underground Injection Control 					
your facility. I	List them in the order	Regulated Hazard r they are presented in list codes routinely or	the reg	gulations (e.g., l	D001, D00	3, F007, K	019, P01	2, U112).	
	² D002	³ D003	⁴ D00		⁵ D008		⁶ D009		⁷ D011
	⁹ U026	¹⁰ U035	¹¹ UO:		¹² U059		¹³ U15		14
15	16	17	18		19		20		21
11. Other Statu	s Changes (If no	longer handling wast	te or clo	sed, sections 9	and 10 sho	ould be blan	nk and sl	kip Section 1	12-16):
(A) Non-Handler of Regulated Waste at This Facility (Sections 9, 10 and 12-16 should be blank.) (1) Business no longer generates, transports, treats, stores, disposes of, or otherwise handles any regulated waste. (B) Facility Closed (Complete this section only if all 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									
(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 R Contact on page 1 o	RCRA First Name:			Last Name:				Title:	
	Phone Num	ber:	F	Extension:	E-Mail:				
Contact for: HW Transporter Used Oil Handler	Street or P.O	O. Box:							
Used Oil Handler Universal Waste	City or Tow	m:			State:(Co	ountry):		Zip Code:	

Universal Waste Notification and Mercury Transporter/Handler Registration	EPA ID No. FLD984	PA ID No. FLD984262682				
12. Universal 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. Pharmaceu	rticals				
d. Mercury Containing Devices	e. Mercury Contain	ning Lamps				
Destination Facility for UW Note: For this activity, a facility must tree A permit is required for storage		W.				
B. Florida Universal Pharmaceutical Waste (UPW): one-time registration	·					
Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accur	nulated (at any one time)					
Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceuticals	armaceutical waste (UPW) accumulated				
Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the	Florida Department of Heal	th [DOH])				
C. Florida Annual Mercury Handler Registration:						
For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Containing Lamps and 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) This form is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-hire Activities □ First time registering □ Renewal □ One-time \$1,000 fee for Mercury for-hire first time LQH registration is attached						
For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices		· '				
For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices		Annual Registration				
☐ Mercury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for	-hire handler	Required				
Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-h	ire handler					
Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time	by for-hire handler	Annual Registration + one- time \$1,000 fee+				
Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated	by for-hire handler	More Requirements (contact FDEP)				
(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for First time registering Renewal	this activity)	Annual Registration Required				
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).						
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.]						
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Note: A water facility permit may be required for this activity. An annual report is required for a rec	-					

Hazardous Waste and Used Oil Transporter Registrat	EPA ID No. FLD984262782					
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 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	•	y and when this information changes)				
This facility is a registered transporter of hazard						
This form is: 🔲 Initial Registration 🗎 Renewal						
1. For own waste only 2. For commercial	purposes 4 3. I	Both commercial and own waste				
4. Transportation Mode Air Rail Highwa	ay Water O	ther - specify				
B. HW Transfer Facility Registration Information (r.	nust be completed ar	nnually and when this information changes)				
☐ This facility is a Hazardous Waste Transfer Fa	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 provisions of Rule 62-730.171(6), F.A.C., are kept at (check one): Our mailing (business) address The site (facility) address						
Please enter the EPA ID Number of the HW Transporter who carries the	ne insurance for this Tr	ansfer 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 faci annually register with the Department using this form. All except Flo \$100 registration fee.						
This form is: 🔲 Initial Registration 🚨 Renewal	☐ Notification of	changes Cancel Registration				
If applicable, a check or money order, in the amount of \$100), payable to Florida D	pepartment of Environmental Protection is enclosed.				
(1) Used Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filte	r Management (must annually register)				
a. Transporter (off-site) and noncontiguous locations	a. Transpo					
☐ b. Transfer Facility	☐ b. Transfe	•				
(2) Collection Center (From businesses, no more than 55 gal per shipment)	d. End Us	sor (Annual Report Required)				
(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	i	at (check one):				
(5) Used Oil Fuel Marketer On-Spec Off-Spec Our mailing (business) address The site (facility) address						
Please see the top of page 5 for additional items that must be subnexempt Used Oil Transporters.	l nitted in addition to t	he above registration and fees required for non-				

Transfer Facility and Used Oil Transporter requiren	nents and required signature page	EPA ID No. FLD984	426	2682			
(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 responsibility [Rule 62-730.171(3)(a)3., F.A.C.] 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 62-73		,					
A copy of the contingency and emergency plan							
A map or maps of the transfer facility [Rule 62							
(15 cont.) Used Oil Twonsportors: (Franctions is	- 40 CED 270 40(a)(1 4))						
(15 cont.) Used Oil Transporters: (Exemptions in In addition to the requirements on Page 4 Sect							
ALL registered UO Handlers must submit		ansporting UO from noncont	iguou	is operations within			
their own company.				•			
 UO transporters transporting off-site over 	public highways only within their ow	n company must submit proc	of of i	nsurance.			
 UO transporters transporting more than 5 	00 gallons/year must submit proof of it	nsurance annually, and must	sign a	and certify this			
submission as a certified used oil transpor	ter 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 pu	rsuant to 62-710.600(2)(e).,	F.A.C	. is attached.			
				-			
17. Certification: I certify under penalty of law tha accordance with a system designed to assure that quesubmitted is, to the best of my knowledge and belie false information, including the possibility of fine and the control of the possibility of the accordance with a system.	alified personnel properly gather and of true, accurate, and complete. I am av	evaluate the information sub- vare that there are significant	mitted	d. The information			
I certify as a Used Oil Transporter that I am tation and have an annual and new employee trainin bility is demonstrated by the Used Oil Transporter O	g program in place covering the appli-	cable used oil rules. Evidence form 62-730.900(5)(a), F.A.	e of fi .C				
Signature of owner, operator, or an	Print Name and		Jsed Oil	Date Signed			
authorized representative				(mm-dd-yyyy)			
Work Spriser	Mark Lars	sen [01/11/15			
		[
		1					
If the person that filled in this form is not the Facilit	y Contact or Operator, please comp	lete the information below:	<u>_</u>				
		nnerberg@aerc.com					
(Name of person completing this form)	(Phone Number)	(E-mail Address)		<u> </u>			



AERC COM Inc.

Florida Department of **Environmental Protection**

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Rick Scott Governor

Jennifer Carroll Lt. Governor

Herschel T. Vinyard Jr. Secretary

UNIVERSAL WASTE LAMP AND DEVICE TRANSPORTER AND TRANSFER FACILITY INFORMATION CHECKLIST

The Department requires that all universal waste lamp and device transporters and transfer facilities registered under Rule 62-737.400, F.A.C., complete and sign this Information Checklist. This information will be used to evaluate compliance with subparagraph 62-737.400(1)(b), F.A.C. Your transporter registration will not be issued until you complete and return the checklist. Handlers that are not engaging in transport activities need not complete this form.

AERC.COM, Inc	. 4317 Fortu	ne Pl., Suite J	V. Melbourne, FL
Facility Name	Street Addre	ss C	City and State
321-952-1516	321-952-1060	mlarsen@ae	erc.com
Phone	Fax	E-mail	
Complete	ansporters and transfer facil all sections and check all b	oxes that apply.	
Types:	er of LAMPS handled durin Fluorescent 🗹	HID 🗌	
Types:		ing the last calendar y c Switches/Relays ☐ neters ☑ Other ☐	
3. Estimated <u>weigh</u>	<u>t</u> of DEVICES handled duri	ng the last calendar ye	ear. <u>6310</u> lb.
	<u>er</u> of lamps or devices you s lamps (L) or devices (D). G ation.		• •
2400	AERC.COM, Inc.	Allentown, PA 6	310-797-7608
Number L□D☑		City/State	Phone
Number L D	Facility Name	City/State	Phone
Number L□D□ Mark Larsen	Facility Name Moul	Gity/State	Phone 01/11/16
Print Name of Autho	rized Agent Signature o	Authorized Agent	Date

Section 2: For <u>out-of-state</u> transporters and transfer facilities <u>only</u>

	in your state aware of your actives the lamps and devices in Florida	
Yes _	No	
written verification from that er activities as a transporter for un	the following in previous years, nvironmental agency that they are liversal waste lamps and devices the form of a letter to you or to the	e aware of your in Florida and in your
Submitted Previously X	Submitted in Wh	at Year?
Mark Larsen	Work Lausen	01/11/16
Print Name of Authorized Agent	Signature of Authorized Agent	Date

Complete, sign and return this checklist along with your registration form 8700-12FL to:

HWRS, MS 4560 Florida Department of Environmental Protection 2600 Blair Stone Road Tallahassee, Florida 32399-2400

Your transporter registration will not be issued until you complete and return this checklist.

QUESTIONS OR COMMENTS?

If you have any questions or comments, please contact Laurie Tenace at (850) 245-8759 or via e-mail at laurie.tenace@dep.state.fl.us.

Thank you for your cooperation in providing this information.