

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

02/26/2016

Kyle Lapic Triumvirate Environmental Inc 10100 Rocket Blvd Orlando, FL 32824-

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 **10100 Rocket Blvd, Orlando, FL 32824-8565** has been registered through **March 1, 2017** with the following status:

Facility ID # **FLD980559728**

Transporter of Universal Waste Lamps and Devices
Transfer Facility for Universal Waste Lamps
Transfer Facility for Universal Waste Devices
Small Quantity Handler Facility for Universal Waste Lamps and
Devices

(Less than 2,000kg of Lamps (8,000) and/or 100kg of Devices at any one time)

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

FEB 1 6 2016

Date Received
RECEIVED
(for FDER Official Use Only)

(850) 245-8707 PERMITTING & COMPLIANCE ASSISTANCE PROGRAM

EPA ID: F L	D 9 8 0 5	5 9 7 2	8 Pleas	e use the instru	ctions	document to c	ompiete	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	(must choose one To provide subsequent notification (to update status and facility identification information).								
and sign page 5. Pages 3 and 4, - com-	if a notification)	To provide th	ride the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5)						
plete as applicable)	FL Registration(s) UW Mercury (see page 3) UHW Transporter (see page 4) Used Oil (see page 4)								page 4)
2. Facility or Business Name	Triumvirate Environmental (Florida), Inc.								
3. Facility Operator	Name of Operator: Triumvirate Environmental (Florida), Inc. Date became Operator: 10 /14 / 2011							11	
(List additional Operators in the comments section).	Street or P.O. Box: 10100 Rock	et Blvd		<u> </u>		Phone Number: 407-859-4441			
	City or Town: Orlando			State: FL		Zip Code: 32824	C	Country (if not USA)	ı:
	Operator Type:	■Private □Fed	deral	icipal 🗖 Stat	te 🔲	County 🗖 Ot	her		
4. Facility Physical	Physical Street Addr	ess:							Vessel
Location Information (No P.O. Boxes)	City or Town: State: Zip Code:								
Same address as #3 above or:	Country (if not USA):								
5. Facility North Ar		A. 5 6	2 1 1	1 (required) B.			_ _ _	
•	Classification System (NAICS) Code(s) (at least 5 digits) C.		C. D						
6. Facility or	■ Same address as	#3 above or: Str	eet or P.O. Box	κ:					
Business Mailing Address	City or Town:				ostal Code:	C	ountry (if not USA)	:	
7. Facility or Business	First Name: Last Name: Kyle Lapic					Title: EHS & Transportation Compliance Specialis			
RCRA Contact Person	Phone Number 407-85	Extension: 104	E-Mail: klapic@tr	iumv	irate.com		Fax: 407-218-6703		
	Street or P.O. Box:								
Same address as #_3_above or:	City or Town:			State:		Zip Code:		Country (if not US	SA):
8. Real Property (FL Land) Owner	Name of Owner: Rockett F	Roulevar	rd Properties			Date became Owner: 10 / 14 / 2011 New Owner mm dd yy			
of the Facility's Physical Location	Rockett Boulevard Properties Street or P.O. Box:					Phone Number:			
(List additional owners in the comments section.)	City or Town:		,, <u>,</u> , ,	State:		Zip Code: Country (if not USA):			
Same address as #3 above or:	Owner Type:	Private Feder	ral Munic	ipal State		County Othe	er		

RCRA Hazardous	s Waste	Status No	tification or Out o	f Busi	ness Notifica	tion	EPA ID	No. FL	.D9805	59728
9. RCRA Hazai	rdous V	Waste Act	ivities at this Fa	cility	: (Mark 'X'	in all tha				
(A) (1)Generator	of Hazaı	rdous Waste	:		For Items	2 through	17, mark	'X' in all	that apply.	
■Yes □ No	(Do no	t include Univ	versal Waste or Used O	il)	(2) Trea	iter, Store	r, or Disp	oser of H	azardous V	Vaste
	-		wing three categories	•	(a	t your faci	lity) Note		lous waste prequired for	permit this activity.
General greater hazardo	tes in any per mont ous waste	h (kg/mo) (2 ; or Greater	onth 1,000 kilograms 2,200 lbs.) of non-act than 1 kg (2.2 lbs) least once a year)			b. O ₁		on-Comm ng: Postcl	ercial TSD losure or Co	orrective 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			 (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 					nmercial. recycling.		
(at least	once a y	^r ear) xempt SQG		ss	_	a. Sn b. Sn	nall Quanti nelting, Mo	ity On-site	e Burner Ex I Refining F	
(220 lbs)	s.) of non) or less o	-acute hazar of acute haza	dous waste and 1 kg		(3)	Waste G Choose t EITHER	Generated this manage a copy of	at Other ement act your appl	Facilities ivity ONLY	if you attach such authorization
d. Short-Ter e. Episodic: f. United Sta	m Genera Not more ites Impo	ator (one-time than one-ti orter of hazar	ne, not on-going) me per year:SQG	_LQC			Hazardou ound Injec		from Off-Si trol	ite
your facility.]	List them	in the order	Regulated Hazar they are presented in	ı the re	gulations (e.g.,	D001, D00	03, F007, k	C 019, P01	2, U112).	wastes handled at
¹ D001	² D002		³ D003	⁴ DC		⁵ D005		6 D006		⁷ D007
⁸ D008	⁹ D009		¹⁰ D010	11 D		¹² D012		¹³ D01		¹⁴ D014
¹⁵ D015	¹⁶ D0		¹⁷ D017		018	¹⁹ D01		²⁰ D02		²¹ SEE ATTACHED
			longer handling was					•		
(1) Busin (B) Facility Clos	ness no loed (Comed at this	onger genera	e at This Facility (Stes, transports, treats, ction only if all busing moved or moving to	stores	, disposes of, or	otherwise cility have w Form 87	handles ar			f you will
☐ (2) Out		·	s closed on		(D) Pet	`	Bankrupte	v Protect	tion	
			Contact Informa	ation	``					ormation update):
Same as Facility I Contact on page 1	RCRA	First Name:			Last Name:				Title:	
Contact for:		Phone Num			Extension:	E-Mail:				
HW Transporter Used Oil Handler		Street or P.								
Universal Waste		City or Tow	vn:			State:(C	Country):		Zip Code:	

Universal W	aste Notification and Mercury Transporter/Handler Registration EPA ID No. FLD98	0559278
12. Univer	sal 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 of any combination of UW accumulated (at any one time)	lb) or more
	Accumulates: 🖪 a. UW Batteries 🕒 b. Pesticides 🖳 c. Pharmacet	ıticals
	d. Mercury Containing Devices e. Mercury Contai	ning 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.	W.
B. Florida	Universal Pharmaceutical Waste (UPW): one-time registration	
Pharm	acceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)	
Pharm	acceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated
Reve	se Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])
C. Florida	Annual Mercury Handler Registration:	
form [Chapt of Mercury-(If you <u>only</u>	rating in the State of Florida are required to register annually with the Department using this er 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quanti Containing Lamps and Devices as detailed in 62-737,400(3)(a)3. (please contact FDEP first). generate lamps and/or devices or manage pharmaceuticals, do not register or complete the in	ty for-hire Handler
	n is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-handler registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH registering	
For-	ire Transporter of Universal Waste Mercury-Containing Lamps or Devices	
For-	ire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration
Mere	ury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required
☐ Mer	ury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	
☐ Mer	ury-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+
☐ Mer	ury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)
	Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) irst time registering Renewal	Annual Registration Required
Triumvirate	our Universal Waste Activities: Be Environmental (Florida), Inc. Orlando is a transporter of universal waste a vaste in the operating portion of the Part B facility.	
	ate Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport Et 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 Registrati	ons	EPA ID No. FLD980559728			
4. 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 Was renew their registration. Evidence of casualty/liability insurance Transfer facilities must submit several additional documents as detailed changes. Registered transporters and transfer facilities may only begin Generators of hazardous waste who transport waste only within the second control of the second control o	pursuant to 62-730.17 ed on page 5 the first ti a operations after receive	70(2)(a) is required in addition to this registration. ime they register and when the information ving approval from the Department.			
A. HW Transporter Registration Information (must be	completed annually	and when this information changes)			
This facility is a registered transporter of hazard	lous waste.				
This form is: 🔲 Initial Registration 🖬 Renewal	☐ Notification of c	changes 🔲 Cancel Registration			
☐ 1. For own waste only ☐ 2. For commercial	purposes 3. B	Both commercial and own waste			
4. Transportation Mode Air Rail Highwa	y Water Ot	ther - specify			
B. HW Transfer Facility Registration Information (m This facility is a Hazardous Waste Transfer Facility form is: Initial Registration Renewal	cility: (at this locatio	on) Storage Volume 824 Drums			
Note: Hazardous Waste transfer facilities must comply with the	requirements of Rul	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		171(6) , F.A.C., are kept at (check one):			
Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer 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	orida used oil (UO) Pro	ocessors and collection centers must pay an annual			
If applicable, a check or money order, in the amount of \$100), payable to Florida D	Department 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□ b. Transfer Facility	□ a. Transpo □ b. Transfe □ c. Process				
(2) Collection Center (From businesses, <u>no more than 55 gal per shipment)</u>	d. End Us				
(3) Used Oil Processor (A permit is required.)	• ' '	quired under the provisions of Rule 62-710.510,			
(4) Off-Specification Used Oil Burner	<u> </u>	at (check one):			
(5) Used Oil Fuel Marketer	Uur mann	ng (business) address			
Please see the top of page 5 for additional items that must be submexempt Used Oil Transporters.	nitted in addition to t	he above registration and fees required for non-			

Transfer Facility and Used Oil Transporter requires	ments and required signature page	EPA ID No. FLDS	980	559728			
(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 facil	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	n [Rule 62-730.171(3)(a)6., F.A.C.]						
_A map or maps of the transfer facility [Rule 62	2-730.171(3)(a)7., F.A.C.]						
(15 cont.) Used Oil Transporters: (Exemptions i	n 40 CFR 279.40(a)(1-4))			· · · · · · · · · · · · · · · · · · ·			
In addition to the requirements on Page 4 Sect	tion 15:						
 ALL registered UO Handlers must subm their own company. 	it an annual report except generators tra	nsporting UO from nonco	ntigue	ous operations with			
 UO transporters transporting off-site over 	r public highways only within their own	company must submit pro	oof of	insurance,			
 UO transporters transporting more than 5 submission as a certified used oil transpo 	· ·	=	-	and certify this			
The used oil annual report is attached	Evidence of Liability Insurance pur	suant to 62-710.600(2)(e)	., F.A.	C. is attached.			
16. Comments (attach a page if more space is need	ded):						
							
17. Certification: I certify under penalty of law that accordance with a system designed to assure that que	t this document and all attachments wer	e prepared under my direct	ction c	or supervision in			
submitted is, to the best of my knowledge and belie	f, true, accurate, and complete. I am awa	are that there are significa-	nt pen	alties for submittin			
false information, including the possibility of fine a	nd imprisonment for knowing violations	S.	•				
☐ I certify as a Used Oil Transporter that I am	familiar with the applicable Florida and	Federal laws and rules go	vernir	ng used oil transpor			
tation and have an annual and new employee training	ng program in place covering the applica	ible used oil rules. Eviden	ce of	financial responsi-			
bility is demonstrated by the Used Oil Transporter (Certificate of Liability Insurance, DEP 1	orm 62-730.900(3)(a), F.7		,			
Signature of owner, operator, or an	Print Name and 3	Title	Used Oil	Date Signed			
authorized representative			:	(mm-dd-yyyy)			
	Charles Buckley, Opera	tions Manager		2/4/2016			
If the person that filled in this form is not the Facilit	y Contact or Operator, please comple	te the information below	l /:				
		@triumvirate.con					
Tame of person completing this form) (Phone Number) (E-mail Address)							
(manie of person completing this form)	(1 Hone Humber)	(3)(a)2., F.A.C. Effective Dat					



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.

Triumvirate Enviornmenta	al (Florida), Inc. 10100 Rocket E	Blvd Orlando, FL	-
Facility Name	Street Address	City and Sta	ate
407-859-4441	407-218-6703	klapic@triumvirate.com	
Phone	Fax	E-mail	
	ansporters and transfer facilities (e all sections and check all boxes t		
1. Estimated <u>numb</u> Types:	er of LAMPS handled during the Fluorescent 🗹	last calendar year. 16, 96 HID 🗹	<u> 55</u>
Types:	er of DEVICES handled during th Thermostats	tches/Relays 🗹	0
3. Estimated weigh	nt of DEVICES handled during the	e last calendar year	lb.
	er of lamps or devices you shippe r lamps (L) or devices (D). Give th ation.		
16,965	AERC Recycling Solutions	West Melbourne, FL (321) 952-1516	
Number LDD	Facility Name	City/State	Phone
420	AERC Recycling Solutions	West Melbourne, FL (321) 952-1516	
Number L□D☑	Facility Name	City/State	Phone
Number L D	Facility Name	City/State	– Phone
Print Name of Author	orized Agent Signature of Autho	rized Agent Date	_

Section 2: For <u>out-of-state</u> transporters and transfer facilities <u>only</u>
occurred to the state transporters and transfer facilities only
1. Is any environmental agency in your state aware of your activities as a transporter or transfer facility for universal waste lamps and devices in Florida?
Yes No
2. If you have not already done the following in previous years, please enclose some written verification from that environmental agency that they are aware of your activities as a transporter for universal waste lamps and devices in Florida and in your state. This verification can be in the form of a letter to you or to the Department, a registration, a permit, etc.
Submitted Previously Submitted in What Year?
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.