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Completed Document Details

NATIVE NAME: RINECO TRANSPORTATION LLC

DOC LOG ID: 33281

CHAZ ID: ARR000016733

CITY: BENTON

COUNTY: ALL FL CNTYS

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

Document Types


Document Type	Primary Type	Discontinued On
RHWT	Y	
RMH	N	
RUOH	N	

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
382362	UOP	kerry.haley@rineco.com	ARR000016733	Rineco Transportation LLC
424425	MP	jackie.hamilton@rineco.com	ARR000016733	Rineco Transportation LLC
425957	HWT	kerry.haley@rineco.com	ARR000016733	Rineco Transportation LLC

Processes

Document Type	Process	Date	Author	Delete
RHWT	Logged	02/25/2016	SIMMONS_JLS	✕
RHWT	Completeness Review	02/26/2016	HORLICK_S	✕
RHWT	Waiting for information	03/21/2016	HORLICK_S	✕
RHWT	Ready for Data Entry	03/23/2016	HORLICK_S	✕
RHWT	Data Entry Completed	03/23/2016	SIMMONS_JLS	✕
RHWT	Final Review	03/24/2016	HORLICK_S	✕

RHWT	Notification Letter Emailed	03/25/2016	HORLICK_S	✕
RHWT	Booked into Oculus 	03/25/2016	THURSBY_K	✕
RMH	Logged	02/25/2016	SIMMONS_JLS	✕
RMH	Completeness Review	02/26/2016	TENACE_L	✕
RMH	Ready for Data Entry	02/26/2016	TENACE_L	✕
RMH	Data Entry Completed	02/26/2016	SIMMONS_JLS	✕
RMH	Final Review	02/29/2016	TENACE_L	✕
RMH	Notification Letter Emailed	02/29/2016	TENACE_L	✕
RMH	Booked into Oculus 	02/29/2016	TENACE_L	✕
RUOH	Logged	02/25/2016	SIMMONS_JLS	✕
RUOH	Completeness Review	03/01/2016	ASHWOOD_J	✕
RUOH	Waiting for information	03/01/2016	ASHWOOD_J	✕
RUOH	Ready for Data Entry	03/21/2016	ASHWOOD_J	✕
RUOH	Data Entry Completed	03/23/2016	SIMMONS_JLS	✕
RUOH	Final Review	03/23/2016	ASHWOOD_J	✕
RUOH	Notification Letter Emailed	03/24/2016	ASHWOOD_J	✕
RUOH	Booked into Oculus 	03/25/2016	THURSBY_K	✕

Comments

Document Type	Date	Comment	Author
General Comment	02/25/2016	Notification has an original signature.	SIMMONS_JLS
RHWT	02/26/2016	ACORD insurance expired in September.	HORLICK_S
RHWT	02/26/2016	Email to Jackie Hamilton: In reviewing your submittals, we notice additional information is needed. Please submit the following to continue processing your Hazardous Waste Transporter renewal registration. Your proof of insurance expired in September, 2015. Please provide a Certificate of Liability Insurance Hazardous Waste Transporter and Used Oil Handler form. The document must be hand signed (original "wet" signature) by an authorized agent of the insurance provider on file with the Florida Office of Insurance Regulation. A blank Insurance form is attached for your convenience. As soon as possible, please mail the required form to: DEP Waste Management Division/HWPP, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 Let me know if you have any questions or comments. Thanks	HORLICK_S
RHWT	03/02/2016	Updated HWT/UOH Certificate of Liability received.	HORLICK_S
RHWT	03/21/2016	Second 8700-12FL Notification form received.	HORLICK_S
RHWT	03/23/2016	Updated 8700-12FL Notification form and HWT/UOH Certificate of Liability received.	HORLICK_S
RHWT	03/24/2016		HORLICK_S

Facility is not a permitted Transfer Facility location. Corrections made to 8700-12FL on behalf of the facility.

RMH	02/26/2016	Please process as a transporter only of lamps and devices. OOS	TENACE_L
RUOH	03/01/2016	Received original 8700 form and training manual statement.	ASHWOOD_J
RUOH	03/01/2016	Email sent to Jackie Hamilton: In reviewing your submittal, we noticed additional information is needed. Please submit the following to continue processing your UO renewal registration (see attached blank forms for your convenience): Annual Report and Registration fee of \$100 made payable to the Florida Department of Environmental Protection via check or money order. As soon as possible, please mail the required forms with original (hand signed) signature to us at: 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	03/21/2016	Received revised original 8700 form, registration fee, training manual statement, Combined HWT/UO Insurance form and Annual Report.	ASHWOOD_J

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