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Florida Department of Environmental Protection



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Completed Document Details

NATIVE NAME: TRIUMVIRATE ENVIRONMENTAL FLORIDA INC

DOC LOG ID: 33118 CHAZ ID: FLD981018773 CITY: DAVIE COUNTY: BROWARD

View email records

HWG Email Template Notification Approvals RHWT Email Template RHWT Approvals RMH Email Templates RMH Approvals RUOH Email Template RUOH Approvals

Document Types

| Document Type | Primary Type | Discontinued On |
|---------------|--------------|-----------------|
| HWG | Υ | |
| RHWT | N | |
| RMH | N | |
| RUOH | N | |

Email Addresses

| Affiliation-ID | Interest Type | Email | Native ID | Native Name |
|----------------|---------------|------------------------|--------------|---------------------------------------|
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Processes

| Document Type | Process | Date | Author | Delete |
|---------------|-------------------------|------------|-------------|--------|
| HWG | Logged | 02/16/2016 | SIMMONS_JLS | × |
| HWG | Completeness Review | 03/10/2016 | NOLAND_T | × |
| HWG | Ready for Data Entry | 03/10/2016 | NOLAND_T | × |
| HWG | Booked into Oculus | 04/05/2016 | SIMMONS_JLS | × |
| | | | | |
| RHWT | Logged | 02/16/2016 | SIMMONS_JLS | × |
| RHWT | Completeness Review | 02/17/2016 | HORLICK_S | × |
| RHWT | Waiting for information | 02/17/2016 | HORLICK_S | × |
| RHWT | Ready for Data Entry | 04/01/2016 | HORLICK_S | × |
| RHWT | Data Entry Completed | 04/04/2016 | SIMMONS_JLS | × |
| RHWT | Final Review | 04/08/2016 | HORLICK_S | × |

| RHWT | Notification Letter Emailed | 04/08/2016 | HORLICK_S | × |
|------|-----------------------------|------------|-------------|---|
| RHWT | Booked into Oculus | 04/08/2016 | THURSBY_K | × |
| RMH | Logged | 02/16/2016 | SIMMONS_JLS | × |
| RMH | Completeness Review | 02/23/2016 | TENACE_L | × |
| RMH | Ready for Data Entry | 02/23/2016 | TENACE_L | × |
| RMH | Data Entry Completed | 02/26/2016 | SIMMONS_JLS | × |
| RMH | Final Review | 02/26/2016 | TENACE_L | × |
| RMH | Notification Letter Emailed | 02/26/2016 | TENACE_L | × |
| RMH | Booked into Oculus | 02/26/2016 | TENACE_L | × |
| RUOH | Logged | 02/16/2016 | SIMMONS_JLS | × |
| RUOH | Completeness Review | 02/17/2016 | ASHWOOD_J | × |
| RUOH | Waiting for information | 02/17/2016 | ASHWOOD_J | × |
| RUOH | Waiting for information | 03/23/2016 | ASHWOOD_J | × |
| RUOH | Ready for Data Entry | 04/05/2016 | ASHWOOD_J | × |
| RUOH | Data Entry Completed | 04/05/2016 | SIMMONS_JLS | × |
| RUOH | Final Review | 04/07/2016 | ASHWOOD_J | × |
| RUOH | Notification Letter Emailed | 04/07/2016 | ASHWOOD_J | × |
| RUOH | Booked into Oculus | 04/08/2016 | THURSBY_K | × |

Comments

| Document Type | Date | Comment | Author |
|--------------------|------------|---|-------------|
| General Comment | 02/16/2016 | Notification has an original signature. | SIMMONS_JLS |
| HWG | 04/05/2016 | Using Doclog ID 33920 to complete HWG. | SIMMONS_JLS |
| RHWT | 02/17/2016 | HWT/UOH Certificate of Liability to be mailed directly from insurance provider. | HORLICK_S |
| RHWT | 04/01/2016 | Updated HWT/UOH Certificate of Liability received for 3 facility locations. | HORLICK_S |
| RMH | 02/23/2016 | Please process as a SQH, transporter and transfer facility for lamps and devices. | TENACE_L |
| RUOH | 02/17/2016 | Received original 8700 form. No registration fee required - UO Processor. | ASHWOOD_J |
| RUOH | 02/17/2016 | Email sent to Kyle Lapic: 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):Revised Page 5 of 8700 form, Annual Report and Revised Combined HWT/UO Certificate of Liability Insurance form. As soon as possible, please mail the required form with original (hand signed) signature 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 | 03/23/2016 | Received revised 8700 form and Annual Report. | ASHWOOD_J |
| RUOH | 03/23/2016 | Email sent to Kyle Lapic: In reviewing your submittal, we noticed additional information is needed. The Insurance form submitted does not have an original signature (see attached). Please submit the following to continue processing your UO renewal registration (see attached blank forms 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) 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 | 04/05/2016 | Refund request #24845 \$100 was generated. | SIMMONS_JLS |
| RUOH | 04/05/2016 | Received updated original Combined HWT/UO Insurance form - Good. | ASHWOOD_J |

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