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Pending Document Details

NATIVE NAME: UNIVAR USA INC

DOC LOG ID: 34060 **CHAZ ID:** GAD980845077 **CITY:** NORCROSS **COUNTY:** ALL FL CNTYS

View email records

RHWT Email Template RHWT Approvals RUOH Email Template RUOH Approvals

Document Types

 Document Type
 Primary Type
 Discontinued On

 RHWT
 Y

 RUOH
 N

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
383448	UOP	jeff.young@univarusa.com	GAD980845077	Univar USA Inc
384253	MP	ieff.young@univarusa.com	GAD980845077	Univar USA Inc
428254	HWT	lee.iarrett@univarusa.com	GAD980845077	Univar USA Inc

Processes

Document Type	Process	Date	Author	Delete
RHWT	Logged	03/31/2016	SIMMONS_JLS	×
RHWT	Completeness Review	04/01/2016	HORLICK_S	×
RHWT	Ready for Data Entry	04/29/2016	HORLICK_S	×
RHWT	Data Entry Completed	04/29/2016	SIMMONS_JLS	×
RUOH	Logged	03/31/2016	SIMMONS_JLS	×
RUOH	Completeness Review	04/05/2016	ASHWOOD_J	×
RUOH	Waiting for information	04/05/2016	ASHWOOD_J	×
RUOH	Ready for Data Entry	04/28/2016	ASHWOOD_J	×
RUOH	Data Entry Completed	04/28/2016	SIMMONS_JLS	×
RUOH	Final Review	04/28/2016	ASHWOOD_J	×
RUOH	Booked into Oculus	05/02/2016	THURSBY_K	×

Add A New Process

Document Type	Process	Date	
Registered Hazardous Waste Transporter (RHWT)	Facility Created	05/02/2016	Add Process

Document Type	Date	Comment	Author
General Comment	03/31/2016	Insurance form has an original signature.	SIMMONS_JLS
RHWT	04/01/2016	Updated HWT/UOH Certificate of Liability received.	HORLICK_S
RHWT	04/29/2016	Second Updated HWT/UOH Certificate of Liability received.	HORLICK_S
RUOH	04/05/2016	Email sent to Lee Jarrett: In reviewing your submittal, we noticed additional information is needed. The Name of the Insurer, as listed on the form, is not registered with the Florida Department of Insurance website http://www.floir.com/companysearch. The Name of the Insurer must be listed exactly as it is registered (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 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	04/28/2016	Received updated Combined HWT/UO Insurance form - Good.	ASHWOOD_J

Add A New Comment

Document Type	Comments	
Registered Hazardous Waste Transporter (RHWT)		Add Comment
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