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NATIVE NAME: SWS ENVIRONMENTAL INC

DOC LOG ID: 34673

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Document Types

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

Email Addresses


Affiliation-ID	Interest Type	Email	Native ID	Native Name
311965	HWR	greg.williams@swsenvironmental.com	FLD099077257	SWS Environmental Inc
311969	HWT	greg.williams@swsenvironmental.com	FLD099077257	SWS Environmental Inc
313982	UOP	greg.williams@swsenvironmental.com	FLD099077257	SWS Environmental Inc
321680	MP	greg.williams@swsenvironmental.com	FLD099077257	SWS Environmental Inc

Child Documents

DocLog-ID	Preindex#	Received Date	Action Item
34721	1614828	06/21/2016	Other information Change

Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	06/15/2016	SIMMONS_JLS	✕
HWG	Completeness Review	06/23/2016	SIMMONS_JLS	✕
HWG	Ready for Data Entry	06/23/2016	SIMMONS_JLS	✕
RHWT	Logged	06/15/2016	SIMMONS_JLS	✕
RHWT	Completeness Review	06/16/2016	HORLICK_S	✕
RHWT	Waiting for information	06/16/2016	HORLICK_S	✕
RHWT	Ready for Data Entry	06/22/2016	HORLICK_S	✕
RHWT	Data Entry Completed	06/22/2016	SIMMONS_JLS	

				✕
RHWT	Final Review	06/23/2016	HORLICK_S	✕
RHWT	Final Review	06/29/2016	RAINEY_JC	✕
RHWT	Notification Letter Emailed	06/29/2016	HORLICK_S	✕
RHWT	Booked into Oculus 	06/30/2016	THURSBY_K	✕
RUOH	Logged	06/15/2016	SIMMONS_JLS	✕
RUOH	Completeness Review	06/22/2016	ASHWOOD_J	✕
RUOH	Ready for Data Entry	06/22/2016	ASHWOOD_J	✕
RUOH	Data Entry Completed	06/23/2016	SIMMONS_JLS	✕
RUOH	Final Review	06/23/2016	ASHWOOD_J	✕
RUOH	Final Review	06/29/2016	RAINEY_JC	✕
RUOH	Notification Letter Emailed	06/29/2016	ASHWOOD_J	✕

Add A New Process

Document Type	Process	Date	
Please select <input type="button" value="v"/>	--- <input type="button" value="v"/>	06/30/2016	<input type="button" value="Add Process"/>

Comments

Document Type	Date	Comment	Author
General Comment	06/15/2016	Notification has an original signature, insurance form is a copy. RMH registration is current, expires 3/2017.	SIMMONS_JLS
RHWT	06/16/2016	HWT/UOH Certificate of Liability insurance form on file is expired.	HORLICK_S
RHWT	06/16/2016	Email to Greg Williams: In reviewing your submittals, we notice additional information is needed. Please submit the following to continue processing your Hazardous Waste Transporter renewal registration. 1. The 8700-12FL Notification form is incorrect (see attached with highlighted Item.). Please submit an updated page 1 of the 8700-12FL Florida Notification of Regulated Waste Activity. Since this is not signature page you may email the corrected page to me at email below. (a blank form is attached for your convenience). 2. Please revise the Certificate of Liability Insurance Hazardous Waste Transporter and Used Oil Handler form as follows; o The document must be hand signed (original <i>handwritten</i> signature) by an authorized agent of the insurance provider on file with the Florida Office of Insurance Regulation, not a copy or a stamp (see attached). 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	06/22/2016	Updated HWT/UOH Certificate of Liability and page 1 of 8700-12FL Notification form received.	HORLICK_S
RHWT	06/29/2016	Updated page 1 of 8700-12FL Notification form received.	HORLICK_S
RUOH	06/22/2016	Received original 8700 form, registration fee and training manual statement.	ASHWOOD_J
RUOH	06/22/2016	Received revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J
RUOH	06/22/2016	Received revised Page 1 of 8700 form.	ASHWOOD_J
RUOH	06/22/2016	Email sent to Greg Williams: In reviewing your submittal, we noticed additional information is needed. The Annual Report is incorrect (see attached). Please submit the following to continue processing your UO registration (see attached blank form for your convenience): Revised Annual Report As soon as possible, please email the required form to me. Let me know if you have any questions.	ASHWOOD_J
RUOH	06/29/2016	Email sent to Greg: I need a revised Page 1 of the 8700 form with physical address of Insured address (1619 Moylan Road, Panama City Beach, FL 32407) showing on page as soon as possible. Let me know if you have any questions.	ASHWOOD_J
RUOH	06/29/2016	Received revised Page 1 of 8700 form.	ASHWOOD_J

Add A New Comment

Document Type	Comments
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