



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. Stevenson
Secretary

July 27, 2016

Sent via email / Certified mail - return receipt

7004 2510 0004 6986 6316

Alan Chandler
President
AAG Environmental Inc
PO Box 959
Newberry, FL 32669

Re: EPA ID FLR000167635 AAG Environmental Inc / Newberry, Florida

Dear Mr. Chandler,

According to Department records, your authorization to transport hazardous waste expired on 11/30/2015. Transporting hazardous waste without authorization is a violation of the law, subject to penalty.

Pursuant to Rule 62-730.170, Florida Administrative Code, transporters of hazardous waste must annually submit evidence of casualty/liability insurance and notification of hazardous waste activities (Form 62-730.900(1)(b), "8700-12FL - Florida Notification of Regulated Waste Activity"). The most recent notification of hazardous waste activities we have on file for your facility is dated November 18, 2014.

Please contact
require address
Susan Horlick

Sincerely,

Susan L. Horlick

Susan Horlick
Environmental
Hazardous Waste

cc: All Districts

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none">Complete items 1, 2, and 3.Print your name and address on the reverse so that we can return the card to you.Attach this card to the back of the mailpiece, or on the front if space permits.		<p>A. Signature X <i>John Presley</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No enter delivery address below:</p>	
<p>Alan Chandler President AAG Environmental Inc PO Box 959 Newberry, FL 32669</p>		<p>NEWBERRY FL 32669 AUG 1 - 2016 \$5.17</p>	
<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>2. Article Number (Transfer from service label) 7004 2510 0004 6986 6316</p>			