

Revision Number 0					
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APPLICATION FOR A HAZARDOUS PART I - GEN	S WASTE FACILITY PERMIT IERAL	1187
TO BE COMPLETED BY	ALL APPLICANTS	5)4
Please Type or Print	S WASTE FACILITY PERMIT NERAL ALL APPLICANTS  110 100 100 100 100 100 100 100 100 1	
A. General Information		
1. Type of facility:  Disposal [ ]  landfill [ ]  surface impoundment [ ]  Storage [x]  containers [x]  piles [ ]  miscellaneous units [ ]  Treatment [x]  tanks [x]  incineration [ ]  miscellaneous units [x]  type of unit Solids Filter	land treatment miscellaneous units  tanks surface impoundment containment building  piles surface impoundment boiler/industrial furnace type of unit containment building	[ ] [x] [ ] [ ] [ ] [ ]
2. Type of application: [ ] TOP [ ] construction [x] [ ] construction/operation	operation [ ] closure [ ] RD&D	
3. Revision Number: 0		
4. Date current operation began (or is expected to begin	n): March 10, 1987	
5. Facility name: Laidlaw Environmental Service	s of Bartow, Inc.	
6. EPA/DEP I.D. No.: FI,D 980 729 610		
7. Facility location or street address: <u>Avenue D</u> , <u>Nort</u>	h, Bartow Municipal Airport	
8. Facility mailing address: <u>170 Bartow Municipal</u> Street or P.O. Box	Airport Bartow, FL 3383 City State	0

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9. Contact person: Mark Beh	el	_Telephone: (941	533-6111	
Title: Regulatory Compl	iance Manager			
Mailing Address: 170 Bar	tow Municipal Airp Street or P.O. Box	ort Bartow, F City	L 33830 State	Zip
10. Operator's name: Service		Telephone: (_941_	533-6111	
11. Operator's address: 170 E	artow Municipal Ai Street or P.O. Box dlaw Environmental	City	FL 33830 State	Zip
12. Facility owner's name:Serv	rices of Bartow, In	Ic Telephone: ( <u>941</u>	533-6111	
13. Facility owner's address:_I	70 Bartow Municipa Street or P.O. Box	<u>ll Airport Barto</u> City	w, FL 33830 State	Zip
14. Legal structure: [X] Corp [] Local Government	oration [ ] Non-profit ( [ ] State Government	Corporation [ ] Part [ ] Federal Govern	nership [ ] Inc ment [ ] Othe	lividual r
15. If an individual, partnership state where the name is re		g under an assumed i	name, specify th	e county and
County: N/A		State: N/A		· · · · · · · · · · · · · · · · · · ·
16. If the legal structure is a co	orporation, indicate the s	state of incorporation.		
State of incorporation:	Florida			
17. If the legal structure is an	ndividual or partnership	, list the owners.		
Name: N/A				
Address: N/A			·	
	Street or P.O. Box	City	State	Zip
Name: N/A				
Address: N/A	Street or P.O. Box	City	State	Zip
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Name:N/A			
Address: N/A			
Street or P.O. Box	City	State	Zip
8. Site ownership status: [ ] owned [ ] to be purchased [X] presently leased; the expirati			
If leased, indicate:	,	30 years	renewal
Land owner's name: <u>Bartow Municipal Airport Au</u>	ithority		
Land owner's address: P.O. Box 650	Bartow	FL	33830
Street or P.O. Box	City	State	Zip
9. Name of engineer: Robert W. Fox F	Registration no.:	40980	
Address: 9501 Princess Palm Ave, Suite 100	Tampa	FI.	33619
Street or P.O. Box	City	State	Zip
Associated with: <u>ERM-South</u> , <u>Inc.</u>			
20. Facility located on Indian land: [ ] yes [x] no	,		
21. Existing or pending environmental permits: (attach a ser	parate sheet if n	ecessary)	

	NAME OF PERMIT	AGENCY	PERMIT NUMBER	DATE ISSUED	EXPIRATION DATE
Haz. V	Waste Operating	FDEP	H053-182726A	12/10/91	12/10/96
Haz Wa	aste Construction	FDEP	HC53-170970	01/10/92	01/10/97
A	ir Operating	FDEP	A053-219428	05/10/93	12/24/97
A	ir Operating	FDEP	A053-253220	12/08/94	09/28/99
	Transporter	FDEP	FLD 980 729 610	09/01/94	09/01/95
	Transporter	U.S. DOT	062395 008 006D	06/25/95	06/30/96
	HSWA	U.S. EPA	FLD 980 729 610	12/05/91	12/05/01
	Stormwater	U.S. EPA	FLR 00B 286	12/16/93	10/01/97
	Foreign Soil	U.S.D.A.	S-4436	09/08/94	09/30/99
1	Stormwater	S.W.F.W.M.D.	401359.01	03/02/89	N/A

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B. Site Information					
Facility location		Nearest Com	munity:	Eagle 1	Lake
Latitude: 27° 57' 05"	[	Longitude:	81° 47'	09"	
Section: 23 Town	nship: <u>29E</u>		Range:	25S	
UTM #: <u>17 / 424.0E/3091.9N</u>					•
2. Area of facility site (acres):	10.2				
<ul> <li>3. Attach a scale drawing and photog future treatment, storage and disposestimated volume and control. See</li> <li>4. Attach topographic map which sho See Appendix D</li> <li>5. Is the site located in a 100-year flow See Appendix E for</li> </ul>	sal areas. Also sho Appendix A for B for w all the features in od plain? [] yes	ow the hazard drawing photogram producated in the first transfer of transfer o	dous wastes C fo phs ne instructio	traffic partraf:	attern including fic pattern
C. Land Use Information					
Present zoning of the siteI	ndustrial				
2 If a zoning change is needed, what	should the new zo	oning be?	N/A		÷
3. Present land use of site Hazardou	s Waste Storage	e, Treatme	nt & Recy	cling	
D. Operating Information  Is waste generated on site? [x] y	ves [] no				
List the SIC codes (4-digit)					
3030	169				Ab
<ol> <li>Απach a brief description of the factorizat, store or dispose of hazardous</li> <li>See</li> </ol>	•	ne or the bus	SHIESS, AHO	acuvilles	mat generate,

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3. Using the following table and codes provided, specify, (1) each process used for treating, storing, or disposing of hazardous waste (including design capacities) at the facility, and (2) the hazardous waste (or wastes) listed or designated in 40 CFR Part 261, including the annual quantities, to be treated, stored, or disposed by each process at the facility. (See the instructions for the list of process codes and units).

PROCESS	PROCESS DESIGN CAPACITY	HAZARDOUS	ANNUAL QUANTITY OF HAZARDOUS
CODE	AND UNITS OF MEASURE	WASTE CODE	WASTE AND UNITS OF MEASURE
S01	279,895 G*	SEE APPENDIX G	SEE APPENDIX G
S02	72,600 G	SEE APPENDIX G	SEE APPENDIX G
то1	12,000 U (GPD)	SEE APPENDIX G	SEE APPENDIX G
т04	10,000 U (GPD)	SEE APPENDIX G	SEE APPENDIX G

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<sup>\*</sup>This volume includes the capacity of the existing Container Storage Building and the Future Container Storage Building

AFFL NO:292488	
APPL RECVD:07/26/96 TYPE CODE:HB SUBCODE:01 LAST UPDATE:07/DER OFFICE RECVD:TPA DER OFFICE TRANSFER TB: APPLICATION COMPLETE:/	26/96
DER OFFICE RECVD: TPA DER OFFICE TRANSFER TO: APPLICATION COMPLETE:/	/
DER PROCESSOR: HWP	
APPL STATUS:AC DATE:07/26/96 (ACTIVE/DENIED/WITHDRAWN/EXEMPT/ISSUED/GENER	(AL)
RELIEF: (SSAC/EXEMPTIONS/VARIANCE)	
(Y/N) N MANUAL TRACKING DISTRICT:40 COUNTY:53	•
(Y/N) N OGC HEARING REQUESTED LAT/LONG:27.57.05/80.	97.09
(Y/N) N'PUBLIC NOTICE REOD? BASIN-SEGMENT:	
(Y/N) N GOV BODY LOCAL APPROVAL REGO? COE #:	,
(Y/N) N MANUAL TRACKING  (Y/N) N OGC HEARING REQUESTED  (Y/N) N PUBLIC NOTICE REQD?  (Y/N) N GOV BODY LOCAL APPROVAL REQD?  (Y/N) Y LETTER OF INTENT REQD? (1/18SUE D/DENY) ALT#:	
PROJECT SOURCE NAME: LAIDLAW ENVIRONMENTAL SVC/BARTOW	
STREET:170 BARTOW MUNICIPAL AIRPORT CITY:BARTOW STATE:FL ZIP:33830 PHONE:	
STATE:FL ZIP:33830 PHONE:	
APPLICATION NAME:LAIDLAW ENVIRONMENTAL SVC	
STREET: 170 BARTOW MUNICIPAL AIRPORT CITY: BARTOW	
STATE:FL ZIP:33830 PHONE:941-533-6111 AGENT NAME:FOX, ROBERT W	
AGENT NAME: FOX, ROBERT W	
STREET: 9501 PRINCESS PALM AVE #100 CITY: TAMPA	
STATE:FL ZIP:33619 PHONE:813-622-8727	
FEE #1 DATE PAID:07/26/96 AMBUNT PAID:10000 RECEIPT NUMBER:00097435	
B DATE APPLICANT INFORMED OF NEED FOR PUBLIC NOTICE /_ /_ C DATE DER SENT DNR APPLICATION/SENT DNR INTENT /_ /_ /_ /_ /_ /_ /_ /_ /_ /_ /_ /_ /	
C DATE DER SENT DNR APPLICATION/SENT DNR INTENT//	/
D DATE DER REG. COMMENTS FROM GOV. BODY FOR LOCAL APP/_/_	
E DATE #1 ADDITIONAL INFO REQREC FROM APPLICANT/_/_E DATE #2 ADDITIONAL INFO REQREC FROM APPLICANT/_/_	/
E DATE #2. ADDITIONAL INFO REQREC FROM APPLICANT   ///	/
E DATE #3 ADDITIONAL INFO REQREC FROM APPLICANT/_/E DATE #4 ADDITIONAL INFO REQREC FROM APPLICANT/_/_	/
E DATE #4 ADDITIONAL INFO REQREC FROM APPLICANT//_	/
& DATE #5 ADDITIONAL INFO REQREC FROM APPLICANT / / /	/
E DATE #6 ADDITIONAL INFO REQREC FROM APPLICANT / / /	1
F DATE LAST 45 DAY LETTER WAS SENT	
G DATE FIELD REPORT WAS REQREC / / /	1 1
H DATE DNR REVIEW WAS COMPLETED	
I DATE APPLICATION WAS COMPLETE +//_	
Lo 195 A Trans. In Section of the Se	1
L DATE PUBLIC NOTICE WAS SENT TO APPLICANT /_/	* ***
M DATE PROOF OF PUBLICATION OF PUBLIC NOTICE RECEIVED/_/	
N WAIVER DATE BEGINEND (DAY 90)/_//	/

COMMENTS:

AREA: SWD	Cash Receiving	Log Remittance		\$10,000.0
SYS\$REMT: 126266 SYS\$RCPT: 97135 SSN/FEI#: First: Address1: P.O. BOX	Nar Middle	k #: 1053917 me: LAIDLAW_ENV e: Title	Amount: IRONMENTAL_S: : Su	10,000.00 ERVICES f:
Address2: COLUMBIA		Zip: 29221	-LAIDLAW_ENV Country:	IRON/BARTOW_
Distr	ect e/Description: 234 HAZAR/WASTE-OPE	Payment Amount	Reference#	S Applic/ T Fund A
COMMIT FREQUENTLY ress_ <tab>_to_accept ount: *1</tab>	t_Collection_Point_c			<replace></replace>

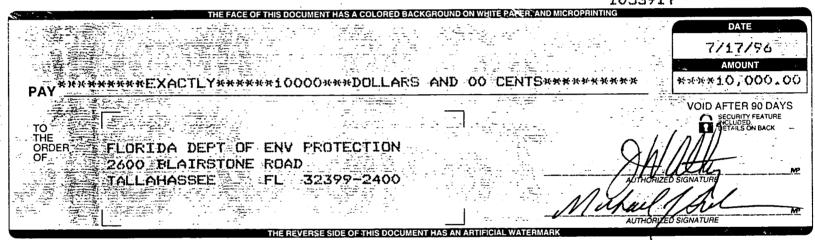


Post Office Box 210799 Columbia, South Carolina 29221

THE FIRST NATIONAL BANK OF CHICAGO

REPUBLIC BANK, SHELBYVILLE, KY.

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