

## Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Rick Scott Governor

Carlos Lopez-Cantera Lt. Governor

> Ryan E. Matthews Interim Secretary

03/02/2017 Vinnie Glorioso, Regional Mgr EHS Heritage Crystal-Clean LLC 6305 E Lombard St Baltimore, MD 21224-1734

The Florida Department of Environmental Protection has reviewed your form 8700-12FL notification for a new hazardous waste DEP/EPA Identification Number or status/information change. Based on the information received you must use the following identification number for all manifests or reports for Heritage Crystal-Clean LLC located at 105 S Alexander St, Plant City , FL 33563-4833

## FLD065680613

Your facility notified FDEP requesting the following hazardous waste status/activities which do not require a separate submission: Conditionally Exempt SQG; Petroleum Contact Water Management.

Your facility is currently registered for the following activities: UW Lamp SQH, UW Device SQH (reg exp on 03/01/2018); HW Transporter (reg exp on 06/30/2018); Used Oil Transporter, Used Oil Transfer Facility, Used Oil Filter Transporter, Used Oil Filter Transfer Facility (reg exp on 06/30/2018).

Your facility is currently permitted/active as: Used Oil Processor (exp on 10/26/2020).

If you have pending program registrations/certifications or permits, these will be mailed separately. You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status, activity or contact information. The form is found here:

http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm.

To review the details of your status, visit:

https://fideploc.dep.state.fl.us/www\_RCRA/Reports/handler\_results.asp?epaid=FLD065680613. For further assistance, please contact me at (850) 245-8749 or email at <a href="mailto:Glen.Perrigan@dep.state.fl.us">Glen.Perrigan@dep.state.fl.us</a>.

Sincerely,

Glen Perrigan

**Environmental Manager** 

Hazardous Waste Regulation Section

ME ID: 28737 , Email Address: vinnie.glorioso@crystal-clean.com

## FLORIDA

## 8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 (850) 245-8707 Date Received (for FDEP Official Use Only)

FEB 08 2017

TO WE WANTED FE

EPA ID: F L	D 0 6 5 6	8 0 6 1	3 Please	e use the instru	ictions	document to co	mplet	te this form	·····	
1. Reason for Submittal	Mark 'X' in the correct box:	☐ To provide ini waste, universal	itial notification				ardous			
(all submitters must complete pages 1 and 2	(must choose one To provide subsequent notification (to update status and facility identification information).									
and sign page 5.	if a notification)	To provide the	e final notifica	tion (closing) for	or the fa	acility. (see instru	ctions-	must complete pages	s 1,2,5)	
Pages 3 and 4, - complete as applicable)	FL Registration(s)	UW Mercı	ury (see page 3	3) <b>—</b> HW	/ Trans	sporter (see page	e 4)	Used Oil (see	page 4)	
2. Facility or Business Name		He	ritage-(	Crystal	Cle	ean, LL	C			
3. Facility	Name of Operator:	(-1 Olo				l	-	ator: 10 /16 / 201	14	
Operator (List additional Opera-	Heritage-C	-	an, LLC	<i>.</i>		New Ope		mm dd y	у	
(List additional Operators in the comments section).	Street or P.O. Box: 105 South Ale		et				813-754-1504			
,	City or Town: State: Plant City FL					Zip Code: 33563	l	Country (if not USA): USA		
	Operator Type:	Private Fed	leral  Mun	icipal Sta	te 🔲	County Otl	ner			
4. Facility Physical	Physical Street Addr 105 South Alex					□Vessel				
Location Information (No P.O. Boxes)	City or Town: Plant City			State: Zip Code: 33563						
Same address as #3 above or:	County: Hillsborough	1		Country (if USA	not US	A):				
5. Facility North Ar		A. <u>4 2</u>	<u>β <sub> </sub>9 <sub> </sub>3 <sub> </sub></u>	0 (required	i) B.	.				
Classification Syst Code(s) (at least 5	, ,	c.   _			D.	. <u>                                    </u>		<u></u>		
6. Facility or		☐ Same address as # above or: Street or P.O. Box:								
Business Mailing Address	City or Town: Baltimore			State: MD	Zip/Pa 212			Country (if not USA):  JSA		
7. Facility or Business	First Name: Vinnie		Last Name: Glorioso			Title: Regional	Mar	nager-EH&S		
RCRA Contact Person						@crystal-clear	ı.com	Fax: 410-633-1639		
Same address as	Street or P.O. Box:	6305 E. Lon	nbard Stre	eet						
# <u>4</u> above or:	City or Town: Baltimore (7)	Baltimore (7) Elgin (8) Form has glitch MD						Country (if not USA USA	r):	
8. Real Property	Name of Owner:			Date became (	Owner	10 / 16 / 2014				
(FL Land) Owner of the Facility's	Heritage-C	Crystal Cir	ean, LL	<u>.C</u>		New Owner mm dd yy				
Physical Location (List additional	Street or P.O. Box: 2175 Point Blvd #37	'5 				Phone Number: 377-938-7948				
owners in the com- ments section.)	City or Town: Baltimore (7) E	Flain (8) Forn	n has glitch	State:		Zip Code: 60123		Country (if not USA USA	.):	
Same address as #4 above or:										

RCRA Hazardous Waste Status Notification or Out of Business Notification				<sup>EPA ID No.</sup> FLD065680613									
9.	RCRA Haz	zardous \	Waste Act	ivities at this Fac	cility	: (Mark 'X'	in all tha	t apply):					
(/	(A) (1)Generator of Hazardous Waste					For Items	For Items 2 through 7, mark 'X' in all that apply.						
Yes No (Do not include Universal Waste or Used Oil)							ater, Store	r, or Disp	oser of H	azardous V	Vaste		
If YES, Choose only one of the following three categories.  a. Large Quantity Generator (LQG):					(at your facility) Note: A hazardous waste permit may be required for this activity.								
	Gene great haza	erates in any ter per mont rdous waste	calendar m th (kg/mo) (2 ; or Greater	onth 1,000 kilograms 2,200 lbs.) of non-acu than 1 kg (2.2 lbs) least once a year)	<ul> <li>a. Operating Commercial TSD</li> <li>b. Operating Non-Commercial TSD</li> <li>c. Non-Operating: Postclosure or Corrective Action Permit or Order (HSWA, etc.)</li> </ul>								
	<b>b. Small Quantity Generator (SQG):</b> Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200				200	(3) Recycler of Hazardous Waste (at your facility)  Specify: Commercial Non-Commercial.  Note: A permit is required for storage prior to recycling.							
	(2.2		of acute haza	waste and/or 1 kg ardous waste			(4) Exempt Boiler and/or Industrial Furnace  a. Small Quantity On-site Burner Exemption						
c. Conditionally Exempt SQG (CESQG): Generates in any calendar month 100 kg/mo or less (220 lbs.) of non-acute hazardous waste and 1 kg (2.2 lbs) or less of acute hazardous waste					<ul> <li>b. Smelting, Melting, and Refining Furnace Exemption</li> <li>(5) Person Authorized to Manage Conditionally Exempt         Waste Generated at Other Facilities         Choose this management activity ONLY if you attach         EITHER a copy of your application for such authorization         OR the authorization you received from FDEP.</li> </ul>								
			_	activities that apply	· •	<u>(6)</u> П			•				
<ul> <li>□ d. Short-Term Generator (one-time, not on-going)</li> <li>□ e. Episodic: Not more than one-time per year:SQGLQG</li> <li>□ f. United States Importer of hazardous waste</li> <li>□ g. Mixed Waste (hazardous and radioactive) Generator</li> <li>(6) □ Receives Hazardous Waste from Off-Site</li> <li>(7) □ Underground Injection Control</li> </ul>													
10	10. Waste Codes for Federally Regulated Hazardous Wastes: List the waste codes of the Federal hazardous wastes handled at your facility. List them in the order they are presented in the regulations (e.g., D001, D003, F007, K019, P012, U112). Hazardous waste transporters list codes routinely or usually transported. Use comments or an additional page if more spaces are needed.												
7 [	0001	<sup>2</sup> D004		<sup>3</sup> D006	<sup>4</sup> D0	<del></del>	<sup>5</sup> D008		<sup>6</sup> D018		<sup>7</sup> D039		
8		9		10	11		12		13		14		
15		16		17	18		19		20		21		
11	11. Other Status Changes (If no longer handling waste or closed, sections 9 and 10 should be blank and skip Section 12-16):												
	(A) Non-Handler of Regulated Waste at This Facility (Sections 9, 10 and 12-16 should be blank.)												
	_ '			tes, transports, treats,		_			ny regulat	ed waste.			
				ction only if <u>all</u> busin									
	(1) Closed at this location and moved or moving to another - Submit a new Form 8700-12FL for the new location if you will												
L	(2) Out of Business - Business closed on(date)												
	☐ (C) Property Tax Default ☐ (D) Petition for Bankruptcy Protection												
12-14 — Registration Activities Contact Information (only if this submission is a registration or registration information update):													
Same as Facility RCRA Contact on page 1 or enter:  First Name: Vinnie				Last Name:	Glorioso Title: Regional Mgr- E			ional Mgr- EHS					
Co	ontact for:		Phone Num	443-463-1		Extension:	E-Mail:	vinnie.glorioso@crystal-clean.com					
	HW Transpor			<sup>O. Box:</sup> 6305 E.	Lo	mbard St							
Universal Waste			City or Tov	<sup>m:</sup> Baltimor		State:(C	Country):	ИD	Zip Code:	21224			

Universal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No. FLD065	5680613						
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply) :								
A. Federal Notification Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 lb) or more of any combination of UW accumulated (at any one time)								
	Accumulates: a. UW Batteries b. Pesticides c. Pharmacet	ıticals						
	d. Mercury Containing Devices e. Mercury Contai	ning Lamps						
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a UW.  A permit is required for storage prior to recycling.							
B. Florida U	Universal Pharmaceutical Waste (UPW): one-time registration							
☐ Pharm	aceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)							
☐ Pharm	aceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW	) accumulated						
Revers	se Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])						
☐ Florida	Universal Pharmaceutical Waste (UPW) Transporter							
C. Florida A	nnual Mercury Handler Registration:							
Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first).  If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.								
	time registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH reg							
For-h	re Transporter of Universal Waste Mercury-Containing Lamps or Devices							
For-h	re Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration						
Merci	ary-Containing Devices (thermostats, etc) <b>SQH</b> = less than 100 kg accumulated by for-hire handler	Required						
Merci	ary-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	i						
☐ Merci	ary-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration +						
☐ Merci	ary-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	one- time \$1,000 fee+ More Requirements (contact FDEP)						
	Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) set time registering  Renewal	Annual Registration Required						
Briefly Describe your Universal Waste Activities:  We use Drum Top Bulb Crusher(s).								
This facility handles universal waste such as lamps, batteries and electronic scrap.								
	13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.]  Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]							

Hazardous Waste and Used Oil Transporter Registration	S	EPA ID No. FLD065680613					
14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities)							
Transporters of and Transfer Facilities for Hazardous Waste renew their registration. Evidence of casualty/liability insurance put Transfer facilities must submit several additional documents as detailed of changes. Registered transporters and transfer facilities may only begin op Generators of hazardous waste who transport waste only within the limits of the second seco	rsuant to 62-730.1 on page 5 the first te erations after rece	70(2)(a) is required in addition to this registration. time they register and when the information iving approval from the Department.					
A. HW Transporter Registration Information (must be completed annually and when this information changes)							
This facility is a registered transporter of hazardous waste.							
This form is: 🔲 Initial Registration 🔲 Renewal 💻 Notification of changes 🚨 Cancel Registration							
☐ 1. For own waste only ☐ 2. For commercial purposes ☐ 3. Both commercial and own waste							
4. Transportation Mode 🔲 Air 🔲 Rail 🖳 Highway	☐ Water ☐ O	other - specify					
B. HW Transfer Facility Registration Information (must	t be completed a	nnually and when this information changes)					
☐ This facility is a Hazardous Waste Transfer Facili	ty: (at this location	on) Storage Volume					
This form is: 🔲 Initial Registration 🔲 Renewal 🚨	Notification of c	changes					
Note: Hazardous Waste transfer facilities must comply with the re	quirements of Ru	tle 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.					
The Transfer Facility records required under the provisions of Rule 62-730.171(6), F.A.C., are kept at (check one):  Our mailing (business) address  The site (facility) address							
Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer Facility:  I L R D D D D D D D D D D D D D D D D D D							
15. Used Oil and Oil Filter Activities: : (Mark 'X' and complet	te all that apply is	f you need to register your used oil activities),					
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facilities annually register with the Department using this form. All except Florid \$100 registration fee.  This form is: Initial Registration Renewal If applicable, a check or money order, in the amount of \$100, page 100.	a used oil (UO) Pr	changes					
(1) Used Oil Transporter - mark activities: (occurring in Florida) (	6) Used Oil Filte	er Management (must annually register)					
a. Transporter (off-site) and noncontiguous locations	a. Transp	orter					
■ b. Transfer Facility		er Facility					
(2) Collection Center (From businesses, no more than 55 gal per shipment)	d. End U	sor (Annual Report Required )					
(3) Used Oil Processor (A permit is required.)		equired under the provisions of Rule 62-710.510,					
(4) Gff-Specification Used Oil Burner		at (check one):  ng (business) address  The site (facility) address					
(5) Used Oil Fuel Marketer • On-Spec • Off-Spec							
Please see the top of page 5 for additional items that must be submitted exempt Used Oil Transporters.	ed in addition to	the above registration and fees required for non-					

Transfer Facility and Used Oil Transporter requirem	ents and required signature page	EPA ID No. FLD06	5568	30613				
(14 cont.) Hazardous Waste Transfer Facilities: following items are required to be submitted with the ini subsequent submission [Rule 62-730.171(3), Florida Adv	tial notification for a transfer facility a							
Certification by a responsible corporate officer	of the transporter that the proposed loca	ation satisfies the criteria o	f					
Section 403.7211(2), Florida Statut	tes (F.S.) [Rule 62-730.171(3)(a)1., F.A	C.]						
Evidence of the transporter's financial responsit	oility [Rule 62-730.171(3)(a)3., F.A.C.]	]						
_A brief general description of the transfer facili		, F.A.C.]						
_A copy of the facility closure plan [Rule 62-730								
	_A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.]							
A map or maps of the transfer facility [Rule 62-	-730.171(3)(a)7., F.A.C.]							
(15 cont.) Used Oil Transporters: (Exemptions in								
In addition to the requirements on Page 4 Secti								
<ul> <li>ALL registered UO Handlers must submit their own company.</li> </ul>	an annual report except generators tra	nsporting UO from noncor	ntiguo	us operations within				
<ul> <li>UO transporters transporting off-site over</li> </ul>	public highways only within their own	n company must submit pro	onf of	insurance				
UO transporters transporting more than 50								
submission as a certified used oil transpor		·	-	<b>,</b>				
The used oil annual report is attached	Evidence of Liability Insurance pur	rsuant to 62-710.600(2)(e).	, F.A.	C. is attached.				
16. Comments (attach a page if more space is need								
national transporter EPA ID number IL marketed under the same EPA ID num		an on spec lacre	<i>,</i> , , , , , , , , , , , , , , , , , ,					
17. Certification: I certify under penalty of law that accordance with a system designed to assure that qu submitted is, to the best of my knowledge and belief false information, including the possibility of fine an	alified personnel properly gather and e f, true, accurate, and complete. I am aw	evaluate the information sulvare that there are significant	bmitte	d. The information				
I certify as a Used Oil Transporter that I am fe tation and have an annual and new employee training bility is demonstrated by the Used Oil Transporter Company of the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter that I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transporter than I am feature is a supplied to the Used Oil Transp	g program in place covering the applic	able used oil rules. Eviden	ce of					
Signature of owner, operator, or an authorized representative	Print Name and	Title	Used Oil	Date Signed (mm-dd-yyyy)				
MATASAM	Vinnie Glorioso- Regiona	al EHS Manager		2/6/17				
If the person that filled in this form is not the Facilit	y Contact or Operator, please compl	ete the information below	v:					
(Name of person completing this form)	(Phone Number)	(E-mail Address)						