



Jeb Bush  
Governor

# Department of Environmental Protection

Central District  
3319 Maguire Boulevard, Suite 232  
Orlando, Florida 32803-3767

David B. Struhs  
Secretary

CERTIFIED MAIL  
Z-291-348-845

FLD-980559-728

Chemical Conservation Corporation  
10100 Rocket Boulevard  
Orlando, Florida 32824

OCD-HW/P-99-0373

Attention: Mr. Armando Gonzalez

Orange County - HW  
Chemical Conservation Corporation  
RE: Permit Modification HOMM-0026916-003

Dear Mr. Gonzalez:

Enclosed is Permit Modification HOMM-0026916-003, dated November 19, 1999, to Chemical Conservation Corporation, issued pursuant to Section 403.722 Florida Statutes. In response to Chemical Conservation Corporation's submittal, dated October 27, 1999, and pursuant to Rules 62-4 and 62-730 of the Florida Administrative Codes, a Minor Modification is granted to modify the required closure cost estimates for the facility.

Specific Condition 3, of Part I-General Requirements of the existing permit, has been revised. All other conditions of the permit remain unchanged. This letter must be attached to the existing permit and becomes part of the permit.

Any party to this permit modification has the right to seek judicial review of the permit pursuant to Section 120.68, Florida Statutes, by the filing of a Notice of Appeal in accordance with Section 120.57, Florida Statutes, with the Office of General Counsel of the Department, at 3900 Commonwealth Boulevard, Mail Station #35, Tallahassee, Florida 32399; and by filing a copy of the Notice of Appeal accompanied by the applicable file fees with

Chemical Conservation Corp.  
Page 2

the appropriate District Court of Appeal. The Notice of Appeal must be filed within 30 days from the date this Permit Modification is filed with the Clerk of the Department.

Executed in Orlando, Florida;

STATE OF FLORIDA DEPARTMENT OF  
ENVIRONMENTAL PROTECTION

*Vivian F. Garfein* 12/2/99  
Vivian F. Garfein  
Director of District Management

FILING AND ACKNOWLEDGEMENT FILED, on  
this date, pursuant to §120.52(11),  
Florida Statutes, with the  
designated Department Clerk, Receipt  
of which is hereby acknowledged.

*A. Londe*  
Clerk

12/2/99  
Date

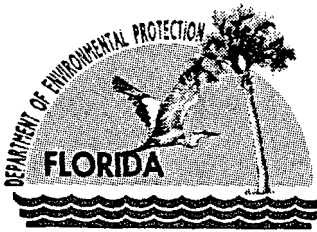
OK  
VFG/cak  
RJK

Copies furnished to:

Satish Kastury, FDEP Tallahassee  
Wes Hardegree, EPA Region IV

CERTIFICATE OF SERVICE

This is to certify that this NOTICE OF PERMIT MODIFICATION and all copies were mailed before the close of business on 12/2/99 to the listed persons, by Lucy Albrecht.



# Department of Environmental Protection

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Central District  
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Permittee:  
Chemical Conservation Corp.  
10100 Rocket Boulevard  
Orlando, Florida 32824

I.D.Number: FLD980556728  
Permit Number: H002-0026916-002  
Modification Number: HOMMS-0026916-003  
Modification Date: November 19, 1999  
Expiration Date: November 6, 2003  
County: Orange  
Latitude: 28°25'04"N  
Longitude: 81°23'10"W  
Section 11/Township 24/Range 29  
Project: Modification of Closure  
Cost Estimate

Attention: Mr. Armando Gonzalez

## SPECIFIC CONDITION:


3. The permittee shall meet the financial requirements of 40 CFR 264, Subpart H - Financial Requirements by:
  - a) Submitting to the Department at least 60 days before the date on which hazardous waste is first received for treatment, storage or disposal, documentation for financial assurance for closure through the use of the financial mechanisms found in 40 CFR 264.143 and 40 CFR 264.145.
  - b) Submitting to the Department at least 60 days before the date on which hazardous waste is first received for treatment, storage or disposal, a signed duplicate original of the Hazardous Waste Facility Liability Endorsement, or the Certificate of Liability Insurance for liability coverage for sudden accidental occurrences [40 CFR 264.147].
  - c) Financial documentation is sent to:

Financial Officer  
Hazardous Waste Regulation  
Florida Department of Environmental Protection  
2600 Blair Stone Road, MS #4560  
Tallahassee, Florida 32399-2400


Chemical Conservation Corp.  
HO02-0026916-003  
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d) Financial assurance must be established for closure of the facility. The closure cost estimates may be modified to include only the active processes, which, at the time of permit issuance consist solely of the container storage area. The facility must submit updated closure cost estimates prior to the implementation of any and all other processes or construction described in this permit, inclusive of the fuel blending and/or waste water treatment processes. These updated closure cost estimates must be submitted 60 days prior to the start of any and all construction, and/or operation of any process not included in the current cost closure estimates previously submitted for demonstration to the Department.

Sincerely,

  
Robert T. Snyder, P.E.  
Program Manager  
Hazardous Waste Section

Date: 12/1/99

  
RTS/can  
Permit File (HO02-0026916-003)

Is your RETURN ADDRESS completed on the reverse side?

**SENDER: HAZARDOUS WASTE**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

**DEC - 2 1999**

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

*Armando Gonzalez  
Chemical Conservation Corp  
10100 Rocket Blvd.  
Orlando, FL 32824*

4a. Article Number

*Z-291-348-845*

4b. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Registered                                | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                              | <input type="checkbox"/> Insured              |
| <input checked="" type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

*12-3-99*

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

*X [Signature]*

8. Addressee's Address (Only if requested and fee is paid)

*OC D-HW-99-0373*

*P*

*CA*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 291 348 845

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
<i>ARMOUSO GONZALEZ</i>	
Street & Number	
<i>Chemical Conservation Corp</i>	
Post Office, State, & ZIP Code	
<i>10100 Rocket Blvd.</i>	
Postage	
<i>Orlando FL 32824</i>	
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	
<i>OC D-HW/P-99-0373</i>	
<i>DEC - 2 1999</i>	

PS Form 3800, April 1995