



Department of Environmental Protection

Lawton Chiles
Governor

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

Virginia B. Wetherell
Secretary

940559 728

March 9, 1998

CERTIFIED MAIL
P-337-151-300

Mr. William Covan Val Bostwick, Jr.
1031 Ocean Boulevard
Atlantic Beach, Florida 32233

OCD-HW/P-98-0058

Orange County - HW
Chemcon
Incident Reports

Dear Mr. Bostwick:

Please find enclosed the information you requested regarding the incidents that occurred in 1997 at Chemical Conservation Corporation. If you should have any questions regarding this facility, please feel free to contact me in the Hazardous Waste Section at 407/893-3323.

Sincerely,

Chris Aoussat
Engineer III
Hazardous Waste Section

ca

cc: Doug Outlaw - DEP Tallahassee

Enclosure: Memo dated 2/21/97
Memo dated 9/23/97

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- 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.

HAZARDOUS WASTE

MAR 10 1998

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:
William Covan Val Bostwick
1031 Ocean Blvd
Atlantic Beach, FL 32233

4a. Article Number
P-337-151-300

4b. Service Type

<input type="checkbox"/> Registered	<input 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
3-13-98

5. Received By: (Print Name)
Chen...

8. Addressee's Address (Only if requested and fee is paid)
OCD-HW-98-0058

6. Signature: (Addressee or Agent)
X [Signature]

PS Form 3811, December 1994 102595-97-B-0179 Domestic Return Receipt

Thank you for using Return Receipt Service.

P 337 151 300

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	<i>WILLIAM BOSTWICK</i>
Street & Number	<i>1031 Ocean Blvd</i>
Post Office, State, & ZIP Code	<i>Atlantic Beach FL 32233</i>
Postage	\$
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>OCD-HW-98-0058</i> MAR 10 1998

PS Form 3800, April 1995