MyFDEP

Florida Department of Environmental Protection

Welcome, Kim Thursby. You are logged on with a role of CHAZ_USER. Sign Out

[Pending List] [Completed List]

[Completed List - this DocLog]

Completed Document Details

NATIVE NAME: SPECTRUM INDUSTRIAL SERVICES INC

DOC LOG ID: 37625 CHAZ ID: ALR000044743 CITY: ALABASTER COUNTY: ALL FL CNTYS

View email records

RHWT Email Template RHWT Approvals RUOH Email Template RUOH Approvals

Document Types

Document Type	Primary Type	Discontinued On
RHWT	Υ	
RUOH	N	

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
447365	UOP	clonggrear@specenviro.com	ALR000044743	Spectrum Industrial Services Inc
447415	HWT	clonggrear@specenviro.com	ALR000044743	Spectrum Industrial Services Inc
448287	MP	clonggrear@specenviro.com	ALR000044743	Spectrum Industrial Services Inc

Processes

Document Type	Process	Date	Author	Delete
RHWT	Logged	06/29/2017	SIMMONS_JLS	×
RHWT	Completeness Review	06/29/2017	HORLICK_S	×
RHWT	Waiting for information	06/29/2017	HORLICK_S	×
RHWT	Ready for Data Entry	07/28/2017	HORLICK_S	×
RHWT	Data Entry Completed	07/28/2017	SIMMONS_JLS	×
RHWT	Final Review	07/31/2017	HORLICK_S	×
RHWT	Booked into Oculus	08/03/2017	THURSBY_K	×
RUOH	Logged	06/29/2017	SIMMONS_JLS	×
RUOH	Completeness Review	06/29/2017	ASHWOOD_J	

				×
RUOH	Waiting for information	06/29/2017	ASHWOOD_J	×
RUOH	Ready for Data Entry	08/01/2017	ASHWOOD_J	×
RUOH	Data Entry Completed	08/01/2017	SIMMONS_JLS	×
RUOH	Final Review	08/01/2017	ASHWOOD_J	×
RUOH	Booked into Oculus	08/03/2017	THURSBY_K	×

Comments

Document Type	Date	Comment	Author
RHWT	06/29/2017	The ACORD form does not match the Certificate of Liability form on file.	HORLICK_S
RHWT	07/28/2017	Updated HWT/UOH Certificate of Liability for primary and excess coverage received.	HORLICK_S
RUOH	06/29/2017	Email sent to Christy Sullivan: In reviewing your submittal, we noticed additional information is needed. The ACORD form submitted does not match the Insurance form on file (see attached). UO transporters are required to provide an Insurance form for the automobile liability inclusive of pollution liability. However, in the event your policies are separate then we will need you to submit two separate Insurance forms. Please submit the following to continue updating our database (see attached blank form for your convenience): Combined HWT/UO Certificate of Liability Insurance form for pollution liability. As soon as possible, please mail the required forms with original (hand signed) signature to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any questions.	ASHWOOD_J
RUOH	08/01/2017	Received original Combined HWT/UO Insurance form for automobile liability - Good.	ASHWOOD_J

DEP Home | About DEP