



## Florida Department of Environmental Protection

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

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

June 18, 2009

William Parkes  
Cliff Berry Inc - Miami Terminal  
PO Box 13079  
Fort Lauderdale, FL 33316- 0100

### BE IT KNOWN THAT

Cliff Berry Inc - Miami Terminal  
3033 NW North River Dr  
Miami, FL 33142- 6304

### IS HEREBY REGISTERED AS A USED OIL

Transporter, Transfer Facility, Processor, Marketer, Filter Transporter,  
Filter Transfer Facility, Filter Processor

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C)

The Department of Environmental Protection hereby issues

Registration Number **FLD058560699** on June 18, 2009

Insurance Carrier: **GREENWICH INSURANCE**

**This registration will expire on 06/30/2010**

This certificate documents receipt of your annual registration and annual report. It shall be displayed in a prominent place at your facility. This certificate and your cancelled check are your receipts.

**Aprilia Graves**  
**Environmental Specialist IV**  
**Hazardous Waste Regulation Permitting**

# **Cliff Berry Inc**

## **Used Oil Analysis Plan**

### **General:**

- A:** This Analysis Plan is applicable to all used oil processing operations at Cliff Berry Inc (CBI) facilities. The purpose of this plan is to detail those procedures which CBI employees must follow when complying with the used oil analysis requirements contained in 40 CFR 279.53.
- B:** A copy of this plan must be retained at each facility processing used oil. Each facility manager is responsible to ensure this plan is adhered to. If any errors, omissions or modifications to this plan are identified, they should be reported to the Director of Petroleum Services for review and update to this plan.

### **Procedures:**

- A:** Drivers of used oil collection trucks will adhere to the following procedures when collecting used oil for delivery to a CBI facility.

Prior to collecting used oil, the driver will utilize a TIFF, Halogen Leak Detector to determine if the used oil contains elevated levels of halogens. If the leak detector indicates an elevated level of halogens, the driver will perform a field test using a DEXSIL Kit (CHLOR-D-TECT) Q-4000 to verify if the level is > than or < than 1000 parts per million (PPM). The DEXSIL kit conforms to EPA SW-846 Method 9077. A record of the halogen test result must be recorded on the manifest and job ticket.

Any time a DEXSIL Kit is used on site, a representative sample of the used oil must be taken. If it is determined that a client's oil has an elevated halogen level (>1000 PPM), then the used oil must not be loaded onto the truck. The sample must be retained by the driver and returned to his manager at CBI so a rebuttable presumption may be performed on the sample.

If, after re-testing, it is determined that the source of the halogens is from an inorganic source (chlorides, salt water), the oil may be removed for disposal as a non-hazardous liquid. If it is determined that the used oil has been mixed with a halogenated hazardous waste as defined in 40 CFR Part 261, the owner or operator must be immediately contacted and advised of the situation. CBI will then manage the used oil as a hazardous waste and arrange for proper disposal.

- B:** Upon arrival at a CBI facility, each used oil truck will have a composite sample of its load taken prior to off-loading. The sampling procedures to be followed must be consistent with the sampling of petroleum products guidelines (based upon API/MPMS chapter 8.1) attached as Appendix A. All samples of used oil (in-bound & out-bound) are to be retained at each CBI facility for a period of 90-days.

Use a DEXSIL Kit (CHLOR-D-TECT) Q-4000 to determine the amount (PPM) of halogens in the oil sample. Follow the directions on the kit for the preparation & analysis of the sample. A copy of the DEXSIL Kit (CHLOR-D-TECT) Q-4000 directions is attached as Appendix B.

If the used oil contains greater than 1000 PPM halogens, a rebuttable presumption may be performed. See attached Appendix C for rebuttable presumption flowchart.

- C:** On-Specification used oil that is to be burned for energy recovery must be sampled and sent to a certified laboratory to determine if it meets the fuel specifications of 40 CFR Part 279.11 prior to processing and/or re-refining.

Representative sampling will be done on batch loads of up to 75,000 gallons. Sampling will be conducted in accordance with the sampling procedures detailed in Appendix A.

The analysis of the used oil will be consistent with the appropriate analytical procedures used to determine whether a sample contains a given toxic constituent in accordance with EPA Publication SW-846, "Testing Methods for evaluating Solid Waste, Physical / Chemical Methods"

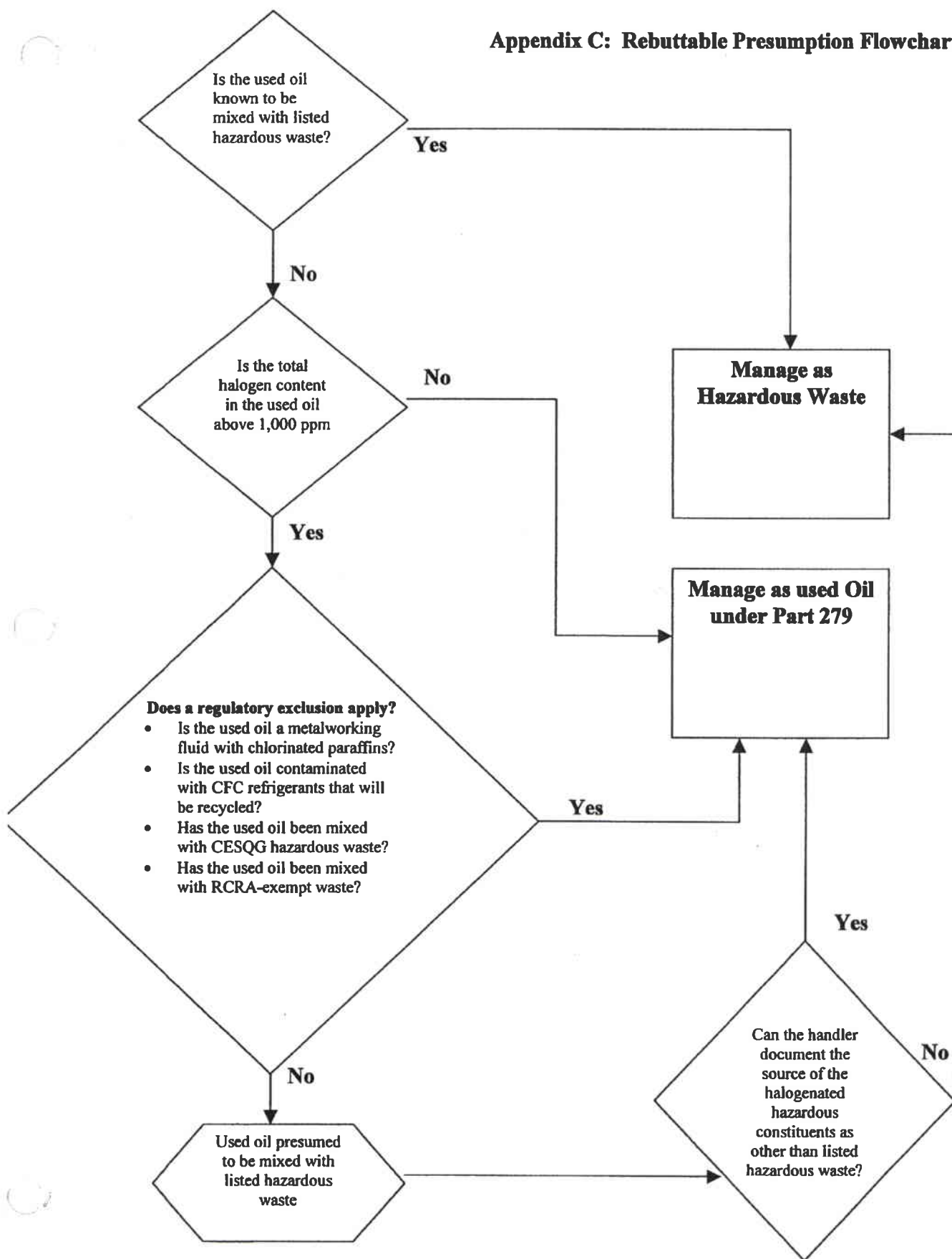
All on-specification used oil fuel must meet the following specifications:

Constituent / Property	Allowable Level
Arsenic	5 PPM Max
Cadmium	2 PPM Max
Chromium	10 PPM Max
Lead	100 PPM Max
Flash Point	100° F Minimum
Total Halogens	1000 PPM Max

Records of analysis conducted or information used to comply with the tracking requirements of 40 CFR Part 279 must be maintained for at least three years.

When tests are done to verify percent water and flash-point in the oil, they are to be conducted in accordance with the test procedures detailed in Appendix D and Appendix E respectively.

## Appendix C: Rebuttable Presumption Flowchart





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2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

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Secretary

06/18/2009

William Parkes  
Cliff Berry Inc - Miami Terminal  
PO Box 13079  
Fort Lauderdale, FL 33316-0100

The Florida Department of Environmental Protection has reviewed your application for registration as a transporter or handler for universal waste lamps and devices destined for recycling. Based on the information received, the facility located at **3033 NW North River Dr, Miami, FL 33142-6304** has been registered through **March 1, 2010** with the following status:

Facility ID # **FLD058560699**  
**Transporter of Universal Waste Lamps and Devices**  
**Transfer Facility for Universal Waste Lamps**  
**Transfer Facility for Universal Waste Devices**

The registration form for the year **2010** will be sent to the contact person on your application.

Chapter 62-737, Florida Administrative Code (F.A.C.), (copy enclosed) specifies several other requirements including packaging, training and record keeping for transporters and handlers of and reverse distribution programs for universal waste lamps or devices destined for recycling. These requirements are simple, flexible and make good business and environmental sense (summarized on enclosed fact sheets).

This registration does not allow you to transport or handle universal waste lamps or devices which are destined for landfill or other disposal. The transportation or handling of universal waste lamps or devices destined for disposal is subject to our hazardous waste management regulations under Chapter 62-730, F.A.C.

If any of your facility's information on the Universal Waste Lamp and Device Transporter and Handler Registration Form changes, please notify me at Mail Stop 4555 at the address above. I can also be contacted at (850) 245-8759 or at [Laurie.Tenace@dep.state.fl.us](mailto:Laurie.Tenace@dep.state.fl.us).

Sincerely,

Laurie Tenace  
Environmental Specialist  
Hazardous Waste Management Section

Enclosures



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

DEP Waste Management Division-HWRS, MS4560  
2600 Blair Stone Rd. Tallahassee, FL 32399-2400  
(850) 245-8772

Date Received  
(For RDEP Official Use Only)

EPA ID **FL0058560699**

## 1. Reason for Submittal

Mark 'X' in  
correct box:

- ☐ To provide **initial notification** (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).
- ☒ To provide **subsequent notification** (to update status and facility identification information).
- ☐ Is this the **final notification** (see instructions) for the facility?

## 2. Facility or Business Name

**CLIFF BERRY, INC. - MIAMI FACILITY**

FEID No.

**650511114**

## 3. Facility Operator (List additional Operators in the comments section).

Name of Operator:

**CLIFF BERRY, INC. (CBE)**

☐ New Operator

Date became Operator: **1-1-1993**  
mm dd yy

Street or P.O. Box:

**P.O. Box 13079**

Phone Number:

**(954) 763-3390**

City or Town:

**FORT LAUDERDALE**

State:

**FLORIDA**

Zip Code:

**33316**

Operator Type:

☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other

## 4. Facility Physical Location Information

Physical Street Address:

**3033 N.W. NORTH RIVER DRIVE**

City or Town:

**MIAMI**

State:

**FL**

Zip Code:

**33142**

County:

Choose **MIAMI-DADE**

If available, please attach a map or sketch of the facility boundaries. **SEE ATTACHED SITE PLAN**

Latitude:

**25 47 48. N**  
d d m m s s . ssss

Longitude:

**80 14 42. W**  
d d m m s s . ssss

Method:

Datum:

## 5. Facility North American Industry Classification System (NAICS) Code(s)

A.

**562219 (SEE NOTE IN COMMENTS)**

C.

B.

**INITIALS**

**\_\_\_\_\_**

D.

**DATE**

**\_\_\_\_\_**

## 6. Facility or Business Mailing Address

Street Address or P.O. Box:

**P.O. Box 13079**

City or Town:

**FORT LAUDERDALE**

State:

**FL**

Zip Code:

**33316**

## 7. Facility or Business Contact Person

First Name:

**WILLIAM**

Last Name:

**PARKES, JR.**

Title:

**MANAGER**

Phone Number:

**(954) 763-3390**

Extension:

**124**

E-Mail:

**BPARKES@CLIFF  
BERRY INC. COM**

Street or P.O. Box:

**P.O. Box 13079**

City or Town:

**FORT LAUDERDALE**

State:

**FL**

Zip Code:

**33316**

## 8. Real Property (Land) Owner of the Facility's Physical Location (List additional real property owners in the comments section.)

Name of Real Property (Land) Owner:

**CLIFF BERRY, INC. (CBE)**

☐ New Owner

Date became Owner: **1-1-1993**  
mm dd yy

Street or P.O. Box:

**P.O. Box 13079**

Phone Number:

**(954) 763-3390**

City or Town:

**FORT LAUDERDALE**

State:

**FL**

Zip Code:

**33316**

Owner Type:

☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other



**9. Type of Regulated Waste Activity (Mark 'X' in all that apply):****A. Hazardous Waste Activities:****(1) Generator of Hazardous Waste**

(Choose only one of the following three categories.)

- ☐ a. Large Quantity Generator (LQG):  
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of *non-acute* hazardous waste; or Greater than 1 kg (2.2 lbs) of *acute* hazardous waste
- ☐ b. Small Quantity Generator (SQG):  
Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 lbs.) of *non-acute* hazardous waste and/or 1 kg (2.2 lbs) or less of *acute* hazardous waste
- ☒ 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

In addition, indicate other generator activities that apply.

- ☐ d. United States Importer of hazardous waste
- ☐ e. Mixed Waste (hazardous and radioactive) Generator

For Items 2 through 7, mark 'X' in all that apply.

**(2) Treater, Storer, or Disposer of Hazardous Waste**

(at your facility) Note: A hazardous waste permit may be required for this activity.

- ☐ a. Operating Commercial TSD
- ☐ b. Operating Non-commercial TSD
- ☐ c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.)

**(3) Recycler of Hazardous Waste (at your facility)**Specify: ☐ Commercial; ☐ Non-Commercial.

A permit is required for storage prior to recycling.

**(4) Exempt Boiler and/or Industrial Furnace**

- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining Furnace Exemption

**(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.****(6) Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste.**

- (7) ☒ Transporter of Hazardous Waste** [Note: A Certificate of Liability Insurance is required along with this registration.]  
Registration must be renewed annually. ☐ a. For own waste only ☒ b. For commercial purposes

**c. Hazardous Waste Transporter Insurance Information**Insurance Company XL SPECIALTY INSURANCE COMPANYAddress 1990 N. CALIFORNIA BLVD, SUITE 740WALNUT CREEK, CALIFORNIA 94596

Contact \_\_\_\_\_ Telephone \_\_\_\_\_

Policy Number AEC 000 638 909 Expiration date 12/31/09d. **Transportation Mode** ☐ Air ☐ Rail ☒ Highway ☐ Water ☐ Other - specify \_\_\_\_\_e. **☒ Hazardous Waste Transfer Facility:** Storage Volume 145 DRUMS☐ **Initial notification**

The following items are required to be submitted with the initial notification for a transfer facility [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:

- ☐ Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]
- ☐ Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.]
- ☐ A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.]
- ☐ A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]
- ☐ 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.]

☐ **Notification of changes in above items**☒ **Annual update notification**

**B. Universal Waste (UW) Activities (Mark 'X' in all that apply) ("accumulated" means at any one time):**

- ☒ Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more of any combination of UW accumulated
- ☐ Small Quantity Handler (SQH) = always less than 5,000 kg accumulated
- ☐ Mercury-containing devices LQH = 100 kg (220 lb) or more accumulated by for-hire handler
- ☒ Mercury-containing devices SQH = less than 100 kg accumulated by for-hire handler
- ☒ Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler
- ☐ Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler
- [Note: 4 lamps = 1 kg, 62-737.200(10)]
- ☐ Pharmaceuticals LQH = 5,000 kg or more of universal pharmaceutical waste (UPW) accumulated
- ☐ Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste accumulated
- ☒ Pharmaceuticals SQH = always less than 5,000 kg of UPW and always 1 kg or less of acutely hazardous UPW accumulated

(1) For those Managing	Generate/ Accumulate	Transport (see note in instructions)	Handle at Transfer Facility	(2) Enter your estimate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>10,000</i>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>50</i>
d. Mercury Containing Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>50</i>
e. Mercury Containing Lamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>10,000</i>

(3) Mercury Recovery and/or Reclamation Facility ☐ Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]  
[Chapter 62-737, F.A.C.]

(4) Reverse Distributor of UW ☐ Pharmaceuticals ☐ Lamps ☐ Devices ☐

(5) 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.

**C. Used Oil Activities:****(1) Used Oil Transporter - indicate type(s) of activity(ies):**

- ☒ a. Transporter
- ☒ b. Transfer Facility
- (2) ☐ Collection Center
- (3) ☒ Used Oil Processor (A permit is required for this activity.)
- (4) ☐ Off-Specification Used Oil Burner
- (5) ☒ Used Oil Fuel Marketer
- (6) Used Oil Filter
- ☒ a. Transporter
- ☒ b. Transfer Facility
- ☒ c. Processor
- ☐ d. End User

**(8) Specific Certification to be signed by all Used Oil Transporters**

I certify as a Used Oil Transporter that the training program and financial responsibility required under Section 62-710.600, F.A.C., are in place, current and being adhered to. If any modifications have been made to the originally approved training program, they are explained in attachments to this registration form. Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of Liability Insurance, DEP form 62-710.901(4), F.A.C.

*[Signature]*  
Signature of Authorized Person

*CLIFF BERRY, II*  
Print Name of Authorized Person

(7) Used Oil Transporters, Transfer Facilities, Collection Centers, Off-Specification Burners and Marketers must pay an annual \$100 registration fee. Used Oil Processors are exempt from this fee. If applicable, enclose a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection.

☐ A check is enclosed.

(9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one):

- ☒ Our mailing (business) address
- ☐ The site (facility) address



EPA ID No. FLD 058 568 699**D. Other State Regulated Waste Activities:**

☒ **Petroleum Contact Water (PCW) Handler** [Chapter 62-740, F.A.C.]  
 Note: A water facility permit may be required for this activity.

**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, U112).

Hazardous waste transporters list codes routinely or usually transported. Use an additional page if more spaces are needed.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

*(SEE ATTACHED SHEET)*

**11. Other Status Changes (Mark 'X' in all that apply):****A. Non-Handler of Regulated Waste at This Facility**

- ☐ (1) Business no longer generates, transports, treats, stores, or disposes of hazardous waste
- ☐ (2) Waste generated by business has been delisted.
- ☐ (3) Other (explain) \_\_\_\_\_

**B. Facility Closed**

- ☐ (1) Closed at this location and **moved or moving** to another - submit a new Form 8700-12FL for the new location if you will be handling regulated waste there.
- ☐ (2) Out of Business - Business closed on \_\_\_\_\_ (Date). Please provide a contact person, mailing address, and phone number where you can be reached after closing.

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

☐ **C. Property Tax Default**☐ **D. Petition for Bankruptcy Protection**

**12. Certification:** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. If I have notified as a transfer facility, I am aware that transfer facilities must comply with the requirements of Rule 62-730.171, FAC, and Rule 62-730.182, FAC.

Signature of owner, operator, or an authorized representative	Print Name and Title	Date Signed (mm-dd-yyyy)
x <i>[Signature]</i>	CLIFF BERRY, JR., PRESIDENT	04/15/2009

If the person who filled in this form is not the Facility Contact or Operator, please complete the information below:

WILLIAM E. PARKES, JR. (954) 763-3390 BPARKES@CLIFFBERRYINC.COM  
 (Name of person completing this form) (Phone Number) (E-mail Address)

**13. Comments:**

NOTE: CBE USES SIC CODE 1799 FOR OSHA 300 LOGS

CSX R.R.

N.W. 30th AVENUE

N.W. NORTH RIVER DRIVE

70,000

PARKING LOT

STREET

RAILROAD

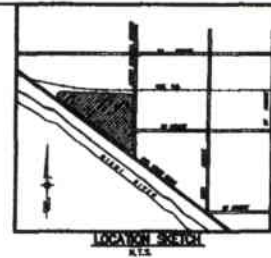
WATER

LAND

NORTH

SCALE

SITE PLAN



**DIVERSIFIED CONSTRUCTION**  
**PCES**  
 & **ENGINEERING SERVICES**  
 2250 N.W. COMPANIE BLVD., #125, BOCA RATON, FL 33431  
 561-750-3717 FAX 561-750-3668

[illegible]

**CLIFF BERRY INC.**  
**MIAMI FACILITY**  
2805 N.W. 107TH AVENUE, MIAMI, FL 33148  
**SITE PLAN**

DOCS	
DOCS 1"=30'	
DATE 4-10-07	
DWG. BY H.K.	
CHK. BY H.K.	
FL	PL
JOB NO. 732-98	
SHEET 1 OF 1	

D001	F032	P068	U001	U066	U126	U190	U365
D002	F034	P070	U002	U067	U127	U191	U366
D003	F035	P071	U003	U068	U128	U192	U367
D004	F037	P072	U004	U069	U129	U193	U372
D005	F038	P074	U005	U070	U130	U194	U373
D006	F039	P075	U007	U071	U131	U196	U375
D007	K001	P077	U008	U072	U132	U197	U376
D008	P001	P082	U009	U073	U134	U200	U377
D009	P002	P084	U010	U074	U136	U201	U378
D010	P003	P085	U011	U076	U137	U202	U379
D011	P004	P087	U012	U077	U138	U203	U381
D012	P005	P088	U014	U078	U140	U204	U383
D013	P007	P089	U015	U079	U141	U206	U384
D014	P008	P092	U016	U080	U142	U207	U385
D015	P010	P093	U017	U081	U143	U208	U386
D016	P011	P094	U018	U082	U144	U209	U387
D017	P012	P097	U019	U083	U145	U210	U389
D018	P013	P098	U021	U084	U146	U211	U390
D019	P014	P099	U022	U085	U147	U212	U391
D020	P015	P101	U024	U086	U148	U213	U392
D021	P016	P102	U025	U087	U149	U214	U393
D022	P018	P103	U026	U088	U150	U215	U394
D023	P020	P104	U027	U089	U151	U126	U395
D024	P021	P105	U028	U090	U152	U218	U396
D025	P023	P106	U029	U091	U154	U219	U400
D026	P024	P108	U030	U092	U155	U220	U401
D027	P026	P109	U031	U093	U156	U221	U402
D028	P027	P110	U032	U094	U157	U222	U403
D029	P028	P111	U034	U095	U158	U226	U404
D030	P029	P113	U035	U097	U159	U227	U407
D031	P030	P114	U036	U098	U161	U228	U409
D032	P034	P115	U037	U099	U162	U230	U410
D033	P036	P116	U038	U101	U164	U231	U411
D034	P037	P118	U039	U102	U165	U232	
D035	P038	P119	U041	U103	U166	U233	
D036	P039	P120	U042	U105	U167	U235	
D037	P040	P121	U044	U106	U168	U236	
D038	P041	P123	U045	U107	U169	U237	
D039	P043	P127	U046	U108	U170	U238	
D040	P044	P128	U047	U109	U171	U239	
D041	P045	P185	U048	U110	U172	U240	
D042	P046	P188	U049	U111	U173	U242	
D043	P047	P189	U050	U112	U174	U243	
F001	P048	P190	U051	U113	U176	U244	
F002	P049	P191	U052	U114	U177	U246	
F003	P050	P192	U053	U115	U178	U247	
F004	P051	P194	U055	U116	U179	U248	
F005	P054	P196	U056	U117	U180	U271	
F006	P057	P197	U057	U118	U181	U277	
F007	P058	P198	U058	U119	U182	U278	
F008	P059	P199	U059	U120	U183	U279	
F009	P060	P201	U060	U121	U184	U280	
F010	P062	P202	U061	U122	U185	U328	
F011	P064	P203	U062	U123	U186	U353	
F012	P066	P204	U063	U124	U187	U359	
F019	P067	P205	U064	U125	U188	U364	



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Michael W. Sole  
Secretary

## UNIVERSAL WASTE LAMP AND DEVICE TRANSPORTER AND TRANSFER FACILITY INFORMATION CHECKLIST

The Department requires that all universal waste lamp and device transporters and transfer facilities registered under Rule 62-737.400, F.A.C., complete and sign this Information Checklist. This information will be used to evaluate compliance with subparagraph 62-737.400(1)(b), F.A.C. **Your transporter registration will not be issued until you complete and return the checklist.** Handlers that are not engaging in transport activities need not complete this form.

CLIFF BERRY, INC. - MIAMI FACILITY FL0058360699  
(Facility Name) (EPA id)

3033 N.W. NORTH RIVER DRIVE MIAMI, FLORIDA 33142  
(Street Address) (City) (State) (Zip)

(954) 763-3390 (954) 763-8375 BPARKES@CLIFFBERRYINC.COM  
(Phone) (Fax) (E-mail)

Section 1: For all transporters and transfer facilities (in-state and out-of-state).

Complete all sections and check all boxes that apply.

- Estimated number of LAMPS handled during the last calendar year. 100,000  
Types: Fluorescent ☒ HID ☒
- Estimated number of DEVICES handled during the last calendar year. 1,000  
Types: Thermostats ☒ Electric Switches/Relays ☒  
Thermometers ☒ Manometers ☒ Other ☒
- Estimated weight of DEVICES handled during the last calendar year. 1,000 lb.
- Estimated number of lamps or devices you shipped to each lamp recycling facility. Check the boxes for lamps (L) or devices (D). Give the facility name, location, and contact information.

Number	L	D	Facility Name	City	State	Phone
<u>ALL</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<u>AERC RECYCLING W. MELBOURNE, FL</u>	<u>FL</u>	<u>321</u>	<u>952-1516</u>
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				

CLIFF BERRY, II  
Print Name of Authorized Agent

[Signature]  
Signature of Authorized Agent

4/15/09  
Date



# Florida Department of Environmental Protection

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

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

## Section 2: For out-of-state transporters and transfer facilities only

1. Is any environmental agency in your state aware of your activities as a transporter or transfer facility for universal waste lamps and devices in Florida?

Yes ☐

No ☐

2. If you have not already done the following in previous years, please enclose some written verification from that environmental agency that they are aware of your activities as a transporter for universal waste lamps and devices in Florida and in your state. This verification can be in the form of a letter to you or to the Department, a registration, a permit, etc.

Submitted Previously ☐

Submitted in What Year? \_\_\_\_\_

CLIFF BERRY, II  
Print Name of Authorized Agent

x [Signature]  
Signature of Authorized Agent

4/15/09  
Date

**Complete, sign and return this checklist along with your registration form to:**

EPA ID Notification Coordinator  
Hazardous Waste Regulation Section MS 4560  
Department of Environmental Protection  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

**Your transporter registration will not be issued until you complete and return this checklist.**

### QUESTIONS OR COMMENTS?

If you have any questions or comments, please contact Laurie Tenace at (850) 245-8759 or via e-mail at [laurie.tenace@dep.state.fl.us](mailto:laurie.tenace@dep.state.fl.us).

**Thank you for your cooperation in providing this information.**

TransChkl.doc





# Department of Environmental Protection

FDEP MS 4555 2600 Blair Stone Road Tallahassee, Florida 32399-2400

DEP Form #62-710.600(15)  
Form Title Certificate of Liability Insurance  
Used Oil Transporters  
Effective Date June 2, 2005

## Certificate of Liability Insurance Used Oil Transporters

Please Print or Type Form

1. Greenwich Insurance Company, (the Insurer), 1990 N. California Blvd., Suite 740 Walnut Creek, CA 94596  
(Name of the Insurer) (Address of the Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage for sudden accidental

occurrences to Cliff Berry, Inc., (the Insured), 3400 SE 9<sup>th</sup> Avenue, Dania Beach, FL 33316  
(Name of the Insured) (Address of the Insured)

whose EPA Identification number is FLR000083071 in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-710.600(2)(d). The insurance is primary and the company shall be liable for amounts up to \$ 1,000,000 less the deductible or retention of \$ 10,000 for each accident exclusive of legal defense costs. If a deductible or retention is applied, its amount may not exceed 10% of the equity of the Insured. This coverage is provided under policy number AEC000638908, issued on

12/31/08. The expiration date of said policy is 12/31/09 or the annual renewal date  
(Date) (Date)

is 12/31/09.

2. The insurer further certifies the following with respect to the insurance described in Paragraph 1:

- Bankruptcy or insolvency of the Insured shall not relieve the Insurer of its obligations under this policy.
- The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the Insured for any such payment made by the insurer.
- Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
- Cancellation of the insurance, whether by the Insurer or the Insured or by any other termination of the insurance (e.g., expiration or non-renewal), will be effective only upon written notice and only after the expiration of thirty-five days (35) days after a copy of such written notice is received by the Secretary of the FDEP as evidence by certified mail return receipt.
- The Insurer shall not be liable for the payment of any judgment or judgments against the insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States, including Florida.

Mike Bernath  
(Signature of Insurer or Authorized Representative)

Authorized Representative of

Mike Bernath  
(Type Name)

Greenwich Insurance Company  
(Name of Insurer)

Senior Underwriter  
(Title)

520 Eagleview Blvd., Exton, PA 19341  
(Address of Representative)

**Chapter 62-710.600, Florida Administrative Code  
Certification of Used Oil Transporters**

(d) Demonstrate, and annually verify, proof of liability insurance, or other means of financial responsibility, for any liability which may be incurred in the transport of used oil. Such financial responsibility shall cover sudden and accidental occurrences involving bodily injury and property damage in the amount of at least \$100,000 Combined Single Limit.

1. The \$100,000 Combined Single Limit is the minimum amount of financial responsibility that each used oil transporter must demonstrate. Depending on vehicle size and weight, other restrictions and financial responsibility requirements may be imposed by the Federal or State Departments of Transportation or other agencies.

2. The financial responsibility required in this paragraph may be established by:

(a) Evidence of liability insurance, either on a claim made or an occurrence basis, with or without a deductible (with deductible, if any, to be on a per occurrence or per accident basis and not to exceed ten percent of the equity of the business), using DEP Form 701.900(15). An ACORD form will only be accepted for renewal of a policy with the same carrier; or

(b) Evidence of self-insurance provided by the chief financial officer of the company. see attached insurance papers.

Any questions concerning this form may be referred to the Used Oil Coordinator, MS 4555, Florida Department of Environmental Protection, 2600 Blair Stone Road, Tallahassee, FL 32399-2400, Phone (850) 488-0300, e-mail: richard.neves@dep.state.fl.us

STATE OF FLORIDA

HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY INSURANCE

1. XL Specialty Insurance Company  
(Name of Insurer)

(the "Insurer"), of 1990 N. California Blvd., Ste 740, Walnut Creek, CA 94596  
(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

Cliff Berry, Inc.  
(Name of Insured)

(the "Insured"), of 3400 SE 9<sup>th</sup> Avenue, Dania Beach, FL 33316  
(Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-730.170. The coverage applies at:

<u>EPA/DEP I.D. No.</u>	<u>Name</u>	<u>Location</u>
FLR000083071	Cliff Berry, Inc.	3033 NW North River Drive Miami, FL 33142

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number AEC000638909, issued on 12/31/08.  
(date)

The effective date of said policy is 12/31/08 and the expiration date of said policy is 12/31/09.  
(date)

This insurance is excess and the company shall not be liable for amounts in excess of \$ 5,000,000 for each accident in excess of the underlying limit of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number UEC00063909, issued on 12/31/08. The effective date of  
(date)

said policy is 12/31/08 and the expiration date of said policy is 12/31/09.  
(date)

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

(a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.

- (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer.
- (c) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the Insured and any other termination of the insurance (e.g., expiration, non-renewal), will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Secretary of the FDEP as evidenced by certified mail return receipt.
- (e) The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgment or judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States including Florida.

M. Bernath  
(Signature of Authorized Representative of Insurer)

Michael Bernath  
(Typed name) (Social Security Number)

Senior Underwriter  
(Title)

Authorized Representative of

XL Specialty Insurance Company, c/o XI. Environmental, Inc.  
(Name of Insurer)

P.O. Box 636, 520 Eagleview Blvd., Exton, PA 19341  
(Address of Representative)



# Department of Environmental Protection

FDEP, MS 4555, 2600 Blair Stone Road Tallahassee, Florida 32399-2400

DEP Form #62-710.901(3)  
Form Title Annual Report by Used Oil  
and Used Oil Filter Handlers  
Effective Date June 9, 2005

## Annual Report by Used Oil and Used Oil Filter Handlers\*

(\*Handlers are any persons subject to the registration requirements of rule 62-710.500 and 62-710.850, F.A.C. [See Section A, Box 5 below])  
for reporting period January 1, 2008 through December 31, 2008

Use the information recorded in your Record Keeping Form [62-710.901(2)] or equivalent] to complete this document

### SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS

1. Company Name: CLIFF BERRY, INC (MIAMI) 2. Telephone No. (954) 763-3390  
Site Address: 3033 NW NORTH RIVER DRIVE  
MIAMI, FL 33142 3. EPA ID No. FLD 058 560699

o Check box if any of the above items (1-3) have changed since your last registration

4. Name of person preparing report (please print) GARY GIBSON  
Title MANAGER Phone number (if different from #2, above) ( )

5. Type of operation (check as many as apply to your operations)

Used Oil: ☒ Transporter ☒ Transfer Facility o Collection Center/Aggregation Point ☒ Processor ☒ Marketer

o Burner (of off-specification used oil)

Used Oil Filter: ☒ Transporter ☒ Transfer Facility ☒ Processor o End User

### SECTION B USED OIL (TO BE COMPLETED BY ALL REGISTERED USED OIL HANDLERS. USED OIL FILTER HANDLERS SEE SECTION C)

1. Amount (in gallons) of Used Oil and Oily Wastes collected

a. In Florida.....

b. From out of state.....

c. Beginning Inventory.....

d. Total (sum of totals from Lines a + b + c).....

Automotive	Industrial	Mixed	Total
847795	20135236	6711745	3524976
			0
			412145.
			35737121

2. Amount (in gallons) of Used Oil and Oily Wastes Managed

N - Not an end use, transferred to another facility for storage or processing.....

O - Marketed as an on-specification used oil fuel.....

F - Marketed as an off-specification used oil fuel.....

I - Marketed for an industrial process.....

B - Burned as an off-specification used oil fuel .....

D - Disposed of

Landfilled.....

Treated at a wastewater treatment unit.....

Incinerated.....

3. Total amount (in gallons) of used oil managed.....

4. End of year, on hand estimate (Difference between Lines 1D and Line 3).....

In State	Out of State
60000	
3805084	620407
559703	
27825211	
2727084	
35597489	
139632	



**SECTION C USED OIL FILTERS (OPTIONAL)** (USE TABLE BELOW FOR CONVERSIONS)

CHECK COLUMN IF OUT OF STATE ↓

1. Number of filters on hand from previous year.....	33450	
2. Number of used oil filters collected.....	1613955	
3. Total number of used oil filters to manage (1 plus 2).....	1647405	
4. Disposition of used oil filters collected:		
a. Transferred to another registered facility.....		
b. Burned for energy recovery at a Waste-To-Energy facility.....		
c. Transferred directly to a metal foundry for recycling.....	1632005	
d. TOTAL.....	1632005	
5. End of year, on hand estimate (Difference between Lines 3 and Line 4d).....	15400	
6. Gallons of used oil collected as a result of filter processing.....	11125	
7. Gallons of used oil transferred to a used oil handler (transporter or processor).....	11125	
8. Volume of oily waste collected and managed as a result of filter processing.....		
9. Description of oily waste management..... <u>WTE</u>	9300 LBS	

**DIRECTIONS FOR SECTION C**

Conversion Table

One 55-gallon drum of <b>crushed</b> used oil filters = approximately <b>400</b> used oil filters
One 55 gallon drum of <b>uncrushed</b> used oil filters = approximately <b>250</b> used oil filters
One <b>ton</b> of drained used oil filters = approximately <b>2,350</b> used oil filters

1. Enter the number of Used Oil Filters on hand, from previous year's inventory.
2. Enter the number of Used Oil Filters collected.
3. Enter the sum of Line 1 + Line 2.
4. Enter the number of filters managed by your facility in blocks 4a-c. Enter the sum of 4a-c in block 4d.
5. Enter the number of filters on hand at your site as of December 31, last year.
6. Fill in the number of gallons of used oil collected by your filter operation.
7. Enter the number of gallons transferred to a used oil transporter or processor.
8. List the volume (gallons or cubic yards) of the oily wastes collected through your filter handling. Oily wastes are identified in Chapter 62-710.201(1) of the Florida Administrative Code and include bottom sludges, sorbents, wipes etc.
9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

Any questions concerning this form may be referred to the Used Oil Coordinator, MS 4560, Department of Environmental Protection 2600 Blair Stone Road, Tallahassee, FL 32399-2400, Phone (850) 245-8754, email: [sebrina.bolton@dep.state.fl.us](mailto:sebrina.bolton@dep.state.fl.us), OR Phone (850) 245-8755, email: [aprilia.graves@dep.state.fl.us](mailto:aprilia.graves@dep.state.fl.us)

**Sullivan, Theresa A.**

---

**From:** Bill Parkes [BParkes@cliffberryinc.com]  
**Sent:** Monday, June 08, 2009 3:19 PM  
**To:** Sullivan, Theresa A.  
**Subject:** CORRECTED 8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

Theresa -

Please change / correct the 8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY FORMS for all Cliff Berry, Inc. ( CBI ) facility locations as follows:

Miami, Fort Pierce, Canaveral, Jacksonville and Tampa - ( X ) Universal Waste Transport for Batteries, Pharmaceuticals, Mercury Containing Devices,

Mercury Containing Lamps

Port Everglades - ( X ) Universal Waste Transfer for Batteries, Pharmaceuticals, Mercury Containing Devices, Mercury Containing Lamps

Any questions please contact me at ( 954 ) 763-3390.

Thanks,

Bill



## Florida Department of Environmental Protection

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

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

June 18, 2009

William Parkes  
Cliff Berry Inc - Miami Terminal  
PO Box 13079  
Fort Lauderdale, FL 33316-100

Re: Florida Hazardous Waste Transporter Approval

Dear William Parkes:

Your Florida Hazardous Waste Transporter Approval Certificate is enclosed. The terms and conditions of approval are specified in Sections 62-730.170 and 62-730.171, Florida Administrative Code(FAC), a copy of which is enclosed for your reference. Please note the following.

1. You must demonstrate proof of liability coverage on an annual basis, even if your insurance policy is issued on a multi-year basis. If no changes in status or insurance coverage have occurred, you can meet this requirement by submitting a certificate of liability coverage form along with the two copies of the Hazardous Waste Transporter Status Form, copies of which are available upon request from the Department of Environmental Protection.
2. A copy of your insurance policy, together with any endorsements, must be maintained at your principal place of business.
3. Your insurer can not terminate your coverage until 30 days after filing written notice with DEP, by Certified mail, that your policy has expired or has been canceled.
4. Any changes to the information specified on your approval certificate will render it null and void. It is your responsibility to advise DEP of any changes in liability coverage or status.
5. A copy of Hazardous Waste Transporter Status Form, complete with the Department approval shall be carried in each vehicle transporting hazardous waste for the transportation company.

William Parkes  
June 18, 2009  
Page Two

If you intend to operate a hazardous waste transfer facility, you must submit a Transfer Facility Form [Form 62-730.900(6)]. Notification also must include a contingency and emergency plan and a facility closure plan in accordance with Rule 62-730.171(3)(a), F.A.C. The owner or operator must also demonstrate to the satisfaction of the Department that the location complies with the relevant siting requirements listed in section 403.7211(2) Florida Statutes (F.S) before the location is used as a transfer facility.

If you are currently operating an authorized transfer facility, you must maintain records of incoming and outgoing hazardous waste shipments. These records must include generator names and manifest numbers, and, unless otherwise approved by the Department, must be maintained at the transfer facility in accordance with Rule 62-730.171(6), F.A.C.

If you have any questions, please contact me at 850/245-8755.

Sincerely,

Aprilia Graves  
Hazardous Waste Regulation Section

RN

Enclosures: Hazardous Waste Transporter Approval Certificate  
Hazardous Waste Transporter Status Form (with insurance verification)  
Sections [62-730.170](#) and [62-730.171](#) , FAC



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blainstone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

\*\*\*\*\*

## HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF APPROVAL

\*\*\*\*\*

This is to certify that the carrier specified below has been approved as a hazardous waste transporter in Florida. The terms and conditions of this certificate require that the holder comply with all applicable portions of Chapter 62-730, Florida Administrative Code. This certificate shall be rendered null and void if any information contained within becomes obsolete. The certificate shall remain valid through the expiration date specified below.

TRANSPORTER: Cliff Berry Inc - Miami Terminal

FACILITY ID NO: FLD058560699

FACILITY ADDRESS: 3033 NW North River Dr  
Miami, FL 33142-6304

INSURANCE CARRIER: XL SPECIALTY INSURANCE

INSURANCE POLICY#: AEC000638909

EFFECTIVE DATE: December 31, 2008

EXPIRATION DATE: December 31, 2009

APPROVED TRANSFER FACILITY: YES

APPROVAL ISSUED BY: \_\_\_\_\_ DATE: June 18, 2009

Aprilia Graves  
Hazardous Waste Regulation Section  
850/245-8755



Are your services commercially available? YES

## STATE OF FLORIDA

### HAZARDOUS WASTE TRANSPORTER STATUS FORM

I. Transporter Identification:

Transporter Name: CLIFF BERRY, INC. (CBI)

Transporter EPA ID: FLD 058 560 699

Location Address: 3033 N.W. NORTH RIVER DRIVE  
MINTH, FLORIDA 33142

Contact: WILLIAM E. PARKES, JR. Telephone: (954) 763-3390

Mailing Address: P.O. Box 13079  
FORT LAUDERDALE, FLORIDA 33316

II. Insurance Information:

Insurance Company: GREENWICH INSURANCE COMPANY

Address: 520 EAGLEVIEW BLVD.

ERTON, PA 193410636

Contact: SHELLI WARD Telephone: (800) 327-1414

Policy Number: AE 000 638909

Expiration date: 12/31/09

III. Waste Information:

EPA Waste Codes for Waste Routinely or Usually Transported:

D001 D002 D006 D007 D008 D009 D039 D040

Comments: \_\_\_\_\_

IV. Certification:

I certify under penalty of law that the above information is true, correct, and complete to the best of my knowledge.

CLIFF BERRY, II PRESIDENT  
Print/Type Name Title

[Signature] 6/10/09  
Signature Date Signed

V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The forms submitted by the transporter show compliance with the financial responsibility through \_\_\_\_\_ Date

Signature of Florida Department of Environmental Protection Representative Date Signed

## CESQG CHECKLIST

Facility Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Facility Representative: \_\_\_\_\_ Facility ID #: \_\_\_\_\_  
 SIC Codes: \_\_\_\_\_ Inspector: \_\_\_\_\_

### 40 CFR 261.5

1. Describe the facility's hazardous and potentially hazardous waste streams 40 CFR 262.11:

Waste	EPA Waste #s	Generation Rate	Disposal facility?	Proper Waste ID?

(describe discrepancies in waste identification in narrative)

### Standards for Conditionally Exempt Small Quantity Generators - 40 CFR 261.5

2. Does the facility generate less than 100 kg/mo (220 lb/mo) of all hazardous wastes? Y \_\_\_\_\_ N \_\_\_\_\_  
 And less than 1kg/mo of acutely toxic (P-listed, 40 CFR 262.33) hazardous wastes? Y \_\_\_\_\_ N \_\_\_\_\_
3. Has the facility obtained an EPA ID #? (not required for CESQGs) Y \_\_\_\_\_ N \_\_\_\_\_
4. Is the facility disposing of all its hazardous wastes to facilities permitted to accept the waste? (40 CFR 261.5) Describe discrepancies in narrative. Y \_\_\_\_\_ N \_\_\_\_\_
5. Is the facility disposing of hazardous waste by mixing with used oil? Y \_\_\_\_\_ N \_\_\_\_\_
5. Can the facility document proper disposal of all hazardous wastes? Y \_\_\_\_\_ N \_\_\_\_\_
6. Are any hazardous wastes treated or disposed of on site? Describe in narrative: Y \_\_\_\_\_ N \_\_\_\_\_
7. Are there any unpermitted discharges of other wastes to the environment? Y \_\_\_\_\_ N \_\_\_\_\_

Facility: \_\_\_\_\_  
Date: \_\_\_\_\_

- e. Are containers that are stored outside double-walled tanks; or, if not, are they stored within secondary containment on an oil-impermeable surface (sealed concrete or asphalt)? (FAC 62-710.401(6)) (circle which applies) Y \_\_\_ N \_\_\_
8. Are used oil filters stored in above ground containers which are: (62-710.850(6))
- a. In good condition? Y \_\_\_ N \_\_\_
- b. Closed or otherwise protected from weather? Y \_\_\_ N \_\_\_
- c. Labeled "Used Oil Filters"? Y \_\_\_ N \_\_\_
- d. Stored on an oil impervious surface? Y \_\_\_ N \_\_\_
9. Have any releases to the environment occurred, other than a leak from a UST? Y \_\_\_ N \_\_\_
- a. If so, did the facility stop the release, contain the oil, clean up the release and manage the contaminated material properly and repair or replace the leaking units prior to returning them to service? (279.22(d)) Y \_\_\_ N \_\_\_
10. Does the generator burn on site in a space heater? (279.23) Y \_\_\_ N \_\_\_
- a. If so, does he burn only DIY oil or oil generated on site? Y \_\_\_ N \_\_\_
- b. Does the heater have a capacity of no more than 0.5 million BTU/hr? Y \_\_\_ N \_\_\_
- c. Are combustion gasses vented to the atmosphere? Y \_\_\_ N \_\_\_
11. Does the generator only use transporters who have received EPA Identification numbers? Y \_\_\_ N \_\_\_
- Name and number \_\_\_\_\_
12. If not, does the generator self-transport only used oil generated on site or DIY oil to used oil collection centers or aggregation point owned by the generator? Y \_\_\_ N \_\_\_
- a. Name and location of center: \_\_\_\_\_
- b. Location of generator aggregation point: \_\_\_\_\_
- c. If so, is this only in vehicles owned by the facility or facility employees? Y \_\_\_ N \_\_\_
- d. Is no more than 55 gallons transported at one time? Y \_\_\_ N \_\_\_
13. Alternatively, does the generator have a tolling arrangement with a used oil reclaimer? Y \_\_\_ N \_\_\_
- a. Is a copy of the contract kept on site specifying type and frequency of shipments? Y \_\_\_ N \_\_\_
- b. That the transport vehicle is owned by the processor? Y \_\_\_ N \_\_\_
- c. That the reclaimed oil will be returned to the generator? Y \_\_\_ N \_\_\_

## **TRANSPORTERS CHECKLIST**

### **Transporter Requirements (40 CFR 263)**

1. Do vehicles transporting hazardous waste have the appropriate placards? (263.10)(49 CFR 172.500) Y\_\_\_\_N\_\_\_\_
2. Does transporter have an EPA identification number? (263.11(a)) Y\_\_\_\_N\_\_\_\_
3. Does the transporter mix/consolidate hazardous wastes of different DOT shipping descriptions 263.10(c)(2)? Y\_\_\_\_N\_\_\_\_  
If Yes, Complete Generator Checklist
4. Does the transporter use manifest system as required by 263.20? Y\_\_\_\_N\_\_\_\_  
Do the manifests contain at least:
  - a) Name, address, and EPA ID of transporter? Y\_\_\_\_N\_\_\_\_
  - b) Name, address, and EPA ID code of generator? Y\_\_\_\_N\_\_\_\_
  - c) Name, address, identification code of designated permitted facility? Y\_\_\_\_N\_\_\_\_
  - d) Corresponding manifest document number? Y\_\_\_\_N\_\_\_\_
  - e) Description and quantity of each hazardous waste? Y\_\_\_\_N\_\_\_\_
  - f) Signature of subsequent transporters? Y\_\_\_\_N\_\_\_\_
  - g) Signatures signifying proper delivery or reasons why delivery could not be certified? Y\_\_\_\_N\_\_\_\_
  - h) EPA waste codes? Y\_\_\_\_N\_\_\_\_
5. International shipments: (263.20(g)) NA\_\_\_\_
  - a) Record of date waste left U.S.? Y\_\_\_\_N\_\_\_\_
  - b) Presence of one signed copy in records? Y\_\_\_\_N\_\_\_\_
  - c) Signed copy of manifest returned to the generator? Y\_\_\_\_N\_\_\_\_
  - d) Copy of the manifest given to a U.S. Customs official at the point of departure from the United States? Y\_\_\_\_N\_\_\_\_
6. For SQG waste transported according to reclamation agreement:
  - a) Is the following information recorded on a shipping paper:  
Name, address, and EPA ID of waste generator Y\_\_\_\_N\_\_\_\_  
Quantity of waste accepted Y\_\_\_\_N\_\_\_\_  
DOT - required shipping info Y\_\_\_\_N\_\_\_\_  
Date waste is accepted Y\_\_\_\_N\_\_\_\_
  - b) Does transporter carry this shipping paper during transport? Y\_\_\_\_N\_\_\_\_
  - c) Are records maintained for three years after termination or expiration of reclamation agreement? Y\_\_\_\_N\_\_\_\_
  - d) Are vehicles owned and operated by the waste reclaimer? Y\_\_\_\_N\_\_\_\_
7. Are copies of the manifests retained for 3 years? (263.22) Y\_\_\_\_N\_\_\_\_
8. Is there evidence of discharge of hazardous waste? (263.30) Y\_\_\_\_N\_\_\_\_
9. Has transporter demonstrated the financial responsibility required under 62.730.170(2) F. A. C.? Y\_\_\_\_N\_\_\_\_

Facility: \_\_\_\_\_  
Date: \_\_\_\_\_

10. Does the transporter verify financial responsibility with the Department annually (62-730.170(3) F. A. C.)? Y\_\_\_\_N\_\_\_\_
11. Does the transporter manage Conditionally exempt or Household wastes? Y\_\_\_\_N\_\_\_\_
- a) Does the transporter have documentation that this waste was generated by an unregulated source? Y\_\_\_\_N\_\_\_\_
- b) If no, is the transporter assuming responsibility as the generator of this waste? Y\_\_\_\_N\_\_\_\_

If yes, complete the applicable Generator or Small Quantity Generator checklist.

**Transfer Facility Requirements (62-730.171) N/A \_\_\_\_\_**

1. 10 Day Limit (263.12)

Does transporter comply with 10 day storage limit for transfer facilities? Y\_\_\_\_N\_\_\_\_

a) Is the hazardous waste packaged according to 262.30? (263.12) Y\_\_\_\_N\_\_\_\_

b) Can the facility document that the material is held only as part of the normal course of transportation? Y\_\_\_\_N\_\_\_\_

If not, the storage may not be exempt.

2. Closure (62-730.171(2)(b) F. A. C.)

Does facility have a written closure plan satisfying requirements of closure performance, notification, and decontamination standards of 40 CFR 265.111, 265.112(c), 265.114, 265.115? Y\_\_\_\_N\_\_\_\_

Has the facility supplied DEP with a copy of the plan? Y\_\_\_\_N\_\_\_\_

3. Storage Areas (62-730.171(2)(d) F. A. C.)

Is hazardous waste that is stored in containers or vehicles stored on a man made surface which is capable of preventing spills or releases to the ground? Y\_\_\_\_N\_\_\_\_

4. Operating Record (62-730.171(2)(e) F. A. C.)

a) Is a written log maintained for all waste entering or leaving the transfer facility? Y\_\_\_\_N\_\_\_\_

b) Does the log contain:

Generators' names? Y\_\_\_\_N\_\_\_\_

Manifest numbers? Y\_\_\_\_N\_\_\_\_

Dates when waste enters and leaves facility? Y\_\_\_\_N\_\_\_\_

5. Notification (62-730.171(3) F. A. C.)

Has the facility notified the department on Form 62-730.900(6) (Transfer facility notification form)? Y\_\_\_\_N\_\_\_\_

Does the transfer facility have an EPA/DEP ID number? Y\_\_\_\_N\_\_\_\_



6. General Facility Standards (265 Subpart B)

a) Security (265.14)

- (1) Is the facility security system adequate to minimize unauthorized entry? Y\_\_\_\_\_N\_\_\_\_\_
- (2) Are signs posted and legible for 25 feet? Y\_\_\_\_\_N\_\_\_\_\_

b) Inspection Requirement (265.15)

- (1) Does the facility have a copy of the Inspection Plan? Y\_\_\_\_\_N\_\_\_\_\_
- (2) Does the facility have completed inspection logs? Y\_\_\_\_\_N\_\_\_\_\_
- (3) Were the deficiencies corrected in a timely manner? Y\_\_\_\_\_N\_\_\_\_\_
- (4) Are the inspection logs maintained at the facility for 3 years? Y\_\_\_\_\_N\_\_\_\_\_

c) Personnel Training (265.16)

- (1) Do facility personnel complete hazardous waste training? Y\_\_\_\_\_N\_\_\_\_\_

Comments:

- (2) Does the facility combine DOT Hazmat training with hazardous waste training? Y\_\_\_\_\_N\_\_\_\_\_
- (3) Is the trainer adequately trained in hazardous waste management procedures? Y\_\_\_\_\_N\_\_\_\_\_
- (4) Does the training cover safety? Y\_\_\_\_\_N\_\_\_\_\_
- (5) Does the training cover emergency response procedures, including equipment handling and inspection? Y\_\_\_\_\_N\_\_\_\_\_
- (6) Does the training cover hazardous waste identification and handling procedures? Y\_\_\_\_\_N\_\_\_\_\_
- (7) Does the facility maintain personnel training records? Y\_\_\_\_\_N\_\_\_\_\_
- (8) Does the facility maintain job titles and position descriptions for employees managing hazardous waste? Y\_\_\_\_\_N\_\_\_\_\_
- (9) Do the job descriptions include the requisite skills, education and experience ? Y\_\_\_\_\_N\_\_\_\_\_
- (10) Do the job descriptions include a list of the positions' duties? Y\_\_\_\_\_N\_\_\_\_\_
- (11) Are people trained within 6 months of hiring? Y\_\_\_\_\_N\_\_\_\_\_
- (12) Do they work unsupervised prior to training? Y\_\_\_\_\_N\_\_\_\_\_
- (13) Is training reviewed annually? Date of last training \_\_\_\_\_ Y\_\_\_\_\_N\_\_\_\_\_
- (14) Are records maintained for three years? Y\_\_\_\_\_N\_\_\_\_\_

Facility: \_\_\_\_\_  
Date: \_\_\_\_\_

d) Ignitable, Reactive, or Incompatible Waste (265.17)

(1) Is the waste separated and confined from sources of ignition or reaction, sparks, spontaneous ignition, and radiant heat? Y\_\_\_\_\_N\_\_\_\_\_

(2) Are "No Smoking" signs posted in the area? Y\_\_\_\_\_N\_\_\_\_\_

7. Preparedness and Prevention (40 CFR 265 Subpart C)

a) Is there evidence of a fire, explosion or release of hazardous waste or hazardous waste constituents to the environment? (265.31) Y\_\_\_\_\_N\_\_\_\_\_

If Yes, has the facility reported in writing to DOT as required by 49 CFR 171.16? Y\_\_\_\_\_N\_\_\_\_\_

b) Does the facility have an internal communication or alarm system? (265.32(a)) Y\_\_\_\_\_N\_\_\_\_\_

c) Is there a telephone, alarm, 2-way radio or other device at the scene of operations immediately available and capable of summoning assistance? (265.32(b)) Y\_\_\_\_\_N\_\_\_\_\_

d) Describe fire control equipment. Is it adequate? (265.32(c)) Y\_\_\_\_\_N\_\_\_\_\_

e) Is spill control and decontamination equipment present? (265.32(c)) Y\_\_\_\_\_N\_\_\_\_\_

f) If sprinklers, water hoses or foam producing equipment is part of the facility fire control equipment, is water available at adequate volume and pressure? (265.32(d)) Y\_\_\_\_\_N\_\_\_\_\_

g) Is the emergency equipment inspected and tested periodically? Y\_\_\_\_\_N\_\_\_\_\_

h) Frequency? \_\_\_\_\_

i) Is there adequate aisle space to allow unobstructed movement of facility personnel and emergency equipment to any area of the facility where needed? (265.35) Y\_\_\_\_\_N\_\_\_\_\_

j) Has the facility made emergency response arrangements with the following: (265.37)

Fire Department: \_\_\_\_\_ Y\_\_\_\_\_N\_\_\_\_\_

Police: \_\_\_\_\_ Y\_\_\_\_\_N\_\_\_\_\_

Hospital: \_\_\_\_\_ Y\_\_\_\_\_N\_\_\_\_\_

Emergency Response Contractor: \_\_\_\_\_ Y\_\_\_\_\_N\_\_\_\_\_

k). If not, has the facility attempted to do so and is the refusal documented? Y\_\_\_\_\_N\_\_\_\_\_

Facility: \_\_\_\_\_  
Date: \_\_\_\_\_

4. Contingency Plans and Emergency Response (265 Subpart C)

- a) Does the facility have a contingency plan? 265.51) Y \_\_\_\_\_ N \_\_\_\_\_
- b) Is it at the facility and easily available? (265.53) Y \_\_\_\_\_ N \_\_\_\_\_
- c) Does the plan include:
- |  |           |         |         |
|--|-----------|---------|---------|
| Fire Response Procedure:                                   | N/A _____ | Y _____ | N _____ |
| Spill Response Procedures:                                 | N/A _____ | Y _____ | N _____ |
| Explosion Response Procedures:                             | N/A _____ | Y _____ | N _____ |
| A description of arrangements with local authorities:      | N/A _____ | Y _____ | N _____ |
| Emergency Coordinators: (Name) _____                       |           | Y _____ | N _____ |
| Addresses and telephone numbers of Emergency Coordinators: |           | Y _____ | N _____ |
| Emergency equipment list:                                  |           | Y _____ | N _____ |
| Specifications and capabilities of emergency equipment:    |           | Y _____ | N _____ |
| Locations of emergency equipment:                          |           | Y _____ | N _____ |
| An evacuation plan and routes:                             |           | Y _____ | N _____ |
| Evacuation/alarm signals:                                  |           | Y _____ | N _____ |
- d) Is the plan up to date, with no changes to the list of emergency equipment, list of emergency coordinators, applicable regulations or contingency plan failures since the last revision? Y \_\_\_\_\_ N \_\_\_\_\_
- e) Has the plan been distributed to the local police, fire department, ERT and hospital? Circle omitted authorities. (265.53) Y \_\_\_\_\_ N \_\_\_\_\_
- f) Is the emergency coordinator authorized to commit funds for incident response? Y \_\_\_\_\_ N \_\_\_\_\_

5. Off Vehicle Container Storage Areas (Subpart I - Use and Management of Containers 265.170)

- a) Are the containers in good condition (265.171)?  
(check for leaks, corrosion, bulges, etc.) Y \_\_\_\_\_ N \_\_\_\_\_
- b) If a container is found to be leaking, does the operator transfer the hazardous waste from the leaking container? Y \_\_\_\_\_ N \_\_\_\_\_
- c) Is the waste compatible with the containers and/or its liner? (265.172) Y \_\_\_\_\_ N \_\_\_\_\_
- d) Are containers holding hazardous waste opened, handled or stored in such a manner as to cause the container to rupture or leak? (265.173) Y \_\_\_\_\_ N \_\_\_\_\_  
If yes, explain using narrative.
- e) Are each of the containers inspected at least weekly (265.174)? Y \_\_\_\_\_ N \_\_\_\_\_  
If no, explain using narrative concerning the frequency of inspection.
- f) Are containers holding ignitable or reactive wastes located at least 15 meters (50 feet) from the facility property line? (265.176) Y \_\_\_\_\_ N \_\_\_\_\_
- g) Are incompatible wastes stored in the same containers? Y \_\_\_\_\_ N \_\_\_\_\_
- h) Are containers holding incompatible wastes kept apart by physical barrier or sufficient distance? Y \_\_\_\_\_ N \_\_\_\_\_

## USED OIL TRANSPORTER CHECKLIST

Facility Name: Cliff Berry, Inc. - Miami Date: 1/29/08

Facility Representative: Philip Pierre-Louis Facility ID : FLD058560699

Inspector: Kathy Winston, Jowana Knight, Bheem Kothur Registration # 77628-HO-003

### **40 CFR 279 Subpart E -- Transporter Standards**

1. Is the facility exempt under any of the following? (279.40(a)) Y      N X  
On site transport?  
Generator transporting < 55 g /time to a collection center?  
Transporter of < 55 g /time from generator to aggregation point owned  
by same generator?
2. If the transporter also transports hazardous waste in the same trucks as  
are used to transport used oil, are the vehicles emptied per 261.7 after  
HW shipments? (If not, the used oil must be managed as hazardous) N/A  
Y      N
3. Does the transporter process used oil incidental to transport? (279.41) Y      N X  
  
Are any residues managed as used oil, reclaimed, or used as  
asphalt manufacture feedstock? N/A      Y      N       
  
If not, has the transporter conducted a hazardous waste  
determination? (279.10(e)) N/A      Y      N
4. Has the facility notified of used oil activities? Check EPA  
form 8700-12 Y X N
5. Does the transporter only deliver used oil to other transporters,  
oil processors, off specification used oil burners with EPA ID  
Numbers, or to on-specification oil burners? (279.43(a)) Y X N
6. Does the transporter comply with DOT requirements? (279.43(b)) Y X N
7. If any oil is discharged during transport, does the transporter: (279.43(c))  
Notify National Response Center and State Warning Point and Coast  
Guard per 33 CFR 153.203, as applicable? Y X N       
Report to DOT in writing per 49 CFR 171.16? Y X N       
Clean up any discharges until the discharge poses no threat? Y X N
8. Does the facility also transport used oil filters? Y X N       
  
If so, are the filters stored in above ground containers which are: (62-710.850(6))  
In good condition? Y X N       
Closed or otherwise protected from weather? Y X N       
Labeled "Used Oil Filters"? Y X N       
Stored on an oil impervious surface? Y X N

Facility Name: Cliff Berry, Inc.-Miami  
Date: 1/29/08

### Transporter Recordkeeping - 279.46

1. Do used oil acceptance records include: (279.46(a))

Name & Address of facility providing the oil for transport?	Y	<u>X</u>	N	_____
EPA ID # of oil provider (if applicable)? (CESQGs or recorded in customer records)	Y	<u>X</u>	N	_____
Quantity of oil shipped?	Y	<u>X</u>	N	_____
Date of shipment?	Y	<u>X</u>	N	_____
Signature of oil provider, dated upon receipt?	Y	<u>X</u>	N	_____

2. Do used oil delivery records include: (279.46(b))

Name & Address of receiving facility or transporter?	Y	<u>X</u>	N	_____
EPA ID # of receiving facility or transporter?	Y	<u>X</u>	N	_____
Quantity of oil delivered?	Y	<u>X</u>	N	_____
Date of delivery?	Y	<u>X</u>	N	_____
Signature of oil receiver, dated upon receipt?	Y	<u>X</u>	N	_____

3. Do the above records also include state required information on the type of oil and destination or end use? (62-710.510(1)(c & e))

Y X N \_\_\_\_\_

4. Does the facility keep records on DEP Form 62-710.900(2) or equivalent? (62-710.501(1))

Y X N \_\_\_\_\_

5. Does the facility submit an annual report by March 1 summarizing the on site records for the previous calendar year? (62-710.520)

Y X N \_\_\_\_\_

If not, is the facility an electric utility transporting only self generated used oil for recycling, which is exempt from state registration and reporting requirements? (62-710.530)?

Y \_\_\_\_\_ N \_\_\_\_\_

7. Does the transporter keep copies of the record and reports for three years at the street address of the facility? (62-710.510(2))

Y X N \_\_\_\_\_

### Transporter Certification (62-710 F.A.C.)

1. Is the transporter certified? (local governments, and < 55g/time transporters are exempt) (62-710.600)

Y X N \_\_\_\_\_

2. Does the facility maintain training records? (62-710.600(2)(c))

Y \_\_\_\_\_ N X \_\_\_\_\_

**Documentation of training showed some employees due for refresher, documentation of updated training provided 4/11/08**

3. Does the facility maintain insurance or financial assurance of ~~\$100,000~~ combined single limit? (62-710.600(2)(d))  
**\$1,000,000**

Y X N \_\_\_\_\_

4. Is the facility registration form and ID number displayed? (62-710.500)

Y X N \_\_\_\_\_

Facility Name: Cliff Berry, Inc.-Miami

Date: 1/29/08

**Transfer Facility Standards - 279.45**

- 1 Does the transporter store used oil at any transportation related facility (including parking lots) for more than 24 hours and not longer than 35 days during the normal course of transport? Transfer facilities storing used oil more than 35 days must comply with 279 Subpart F N/A      Y X N
- Is the transfer facility registered per 62-710.500(1)(a) F. A. C.? Y X N
- 2 Does the transporter determine whether used oil stored at a transfer facility has a total halogen content above or below 1,000 ppm? Y X N
- Is this done by testing? Y X N
- Is this done by process knowledge? Describe basis in narrative. Y      N
- Are test records or copies of records providing basis for determination kept for 3 years? Y X N
- 3 Have any analyses showed exceedances of the 1,000 ppm level? Y      N X
- If so, was the oil managed as hazardous waste? Y      N X
- If not, was the oil exempt? Describe in narrative. N/A X Y      N
- 4 Is used oil stored only in tanks or containers? (Circle applicable units) Y X N
- 5 If the facility has tanks, do they comply with 62-761 and 62.762 F. A. C rules? (Describe in narrative, including number and size of tanks, noting registration numbers if applicable, and compliance status.) Y X N
- Is secondary containment provided and adequate? Y X N
- 6 Are containers, and tank trailers in good condition and not leaking? Y X N
- 7 Are containers provided with secondary containment consisting of walls and floor at a minimum? Y X N
- Is the containment system impervious to oil so as to prevent migration? Y X N
- 8 Are ASTs, UST tank fill lines and containers labeled "used oil? Y X N
- 9 Are used oil filters stored more than 10 days?
- If so, is the facility a registered used oil filter transfer facility? (62-710.850) N/A      Y X N
- 10 Does the facility stop operations and clean up releases of used oil, repairing or replacing any leaking units as applicable? Y X N





## Florida Department of Environmental Protection

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

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

06/18/2009

William Parkes, Manager Reg Affairs  
Cliff Berry Inc - Miami Terminal  
PO Box 13079  
Fort Lauderdale, FL 33316-0100

The Hazardous Waste Regulation Section has reviewed your application for a hazardous waste DEP/EPA Identification Number. Based on the information received you must use the following identification number for all manifests or reports for Cliff Berry Inc - Miami Terminal located at **3033 NW North River Dr, Miami.**

**FLD058560699**

Your facility has been registered with the following requested status/activities:

**HW Transporter, Conditionally Exempt SQG  
Used Oil Marketer, Used Oil Processor, Oil Filters, Used Oil Transporter, Universal  
Pharmaceutical Transporter  
Small Quantity Handler, Universal Battery Transporter, Universal Lamp Transporter,  
Universal Device Transporter**

**THIS LETTER IS NOT AN APPROVAL TO TRANSPORT HAZARDOUS WASTE OR USED OIL  
OR UNIVERSAL WASTE OR TO OPERATE A HAZARDOUS WASTE TREATMENT, STORAGE,  
OR DISPOSAL (TSD) FACILITY OR A UNIVERSAL WASTE OR USED OIL PROCESSING  
FACILITY OR A LARGE QUANTITY HANDLER. PLEASE CONTACT THE DEPARTMENT FOR  
REQUIREMENTS FOR HAZARDOUS WASTE OR USED OIL TRANSPORTERS,  
HANDLERS, USED OIL PROCESSING FACILITIES, AND TSDS.**

Form 8700-12FL if there is any change in your operations which  
information. For further assistance, please call the Notification  
(850)245-8772 or (850)245-8706.

Michael X. R.  
Environmental M.  
Hazardous Waste Regulation Section

ME ID: 51668 , Email Address: [bparkes@cliffberryinc.com](mailto:bparkes@cliffberryinc.com)

Link: [http://appprod.dep.state.fl.us/www\\_RCRA/Reports/handler\\_results.asp?epaid=FLD058560699](http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLD058560699)

776 28-40-004  
776 28-86-005  
MOB- 62-4,080  
capacity 62-710,800(3)  
13511200

DEPARTMENT OF  
ENVIRONMENTAL PROTECTION[Home](#) | [HW Handlers](#) | [Permit Tracking](#) | [RCRA Guidance](#) | [Management Reports](#) | [Databases](#) | [Data Quality](#) |

## Selection Criteria for Handler Search:

EPAID: % ; ME ID: %; Name: %CLIFF% ; Address: % ; City: % ; County:

- **NNOT** indicates facility is a Non-Notifier and may not have been issued an EPAID - Check on these before giving out this EPAID.

Status: PTSD = Operating Treater/Storage/Disposal Permit, PC = Post-Closure Permit, CO = Closure order, CA = Corrective Action Permit

## For Facility Data Links:

[Activities](#)[Biennial Reporting System data](#)[County SQG Data](#)[Documents](#)

## For Generator Status History:

click on the [Status](#)[Generate in Excel](#)

EPA ID	ME ID	Name	Dist	Address	City	Zip	Status	As of	Data Links
FLD058560699	51668	Cliff Berry Inc - Miami Terminal	SED	3033 NW North River Dr	Miami	33142	<a href="#">TRA</a> <a href="#">UOP</a> <a href="#">UOT</a> <a href="#">CES</a>	5/4/2009	<a href="#">A</a> <a href="#">B</a> <a href="#">C</a> <a href="#">D</a>
FLD981020183	54729	Clifford L Suchman Trustee	SED	39205 S Dixie Highway	Miami	33156	<a href="#">NHR</a>	3/25/1988	<a href="#">A</a> <a href="#">D</a>

Search has retrieved 2 Facilities


[Home](#) | [HW Handlers](#) | [Permit Tracking](#) | [RCRA Guidance](#) | [Management Reports](#) | [Databases](#) | [Data Quality](#) |
**Activity History for:****EPAID: FLD058560699, Cliff Berry Inc - Miami Terminal**

Note: ETA links to Enforcement Tracking Activity

Date Done	Activity Type	Activity Comments	ETA Link
8/9/1984	File Review	Downloaded From Rcris On 18-Oct-96	
8/9/1984	Compliance Evaluation Inspection	Downloaded From Rcris On 18-Oct-96	
9/24/1987	Legacy Site Inspection	Downloaded From Rcris On 18-Oct-96	
9/24/1987	Warning Letter Issued	Downloaded From Rcris On 18-Oct-96	
9/29/1987	File Review	Downloaded From Rcris On 18-Oct-96	
5/30/1996	Compliance Evaluation Inspection	Used Oil Processor Inspection	
8/12/1998	Compliance Evaluation Inspection		
7/28/1999	Compliance Evaluation Inspection		
12/20/1999	Warning Letter Issued		
12/20/1999	Civil Penalty Authorization Memo		
1/25/2000	Enforcement Meeting		
7/24/2000	Project Closed Letter		
9/14/2000	Compliance Evaluation Inspection		
10/20/2000	Project Closed Letter		
3/14/2001	Legacy Site Inspection		
3/14/2001	Informal Verbal Enforcement		
4/2/2001	Compliance W/O Formal Enforcement Action		
4/2/2001	Case Closed By District		
2/17/2002	Informal Verbal Enforcement		
12/17/2002	Legacy Site Inspection		
12/17/2002	Compliance W/O Formal Enforcement Action		
3/3/2003	Project Closed Letter		
9/16/2004	Compliance Evaluation Inspection		
9/17/2004	Project Closed Letter		
4/6/2006	Legacy Site Inspection		
4/6/2006	Informal Verbal Enforcement		
4/24/2006	Submittal Received By Department		
5/19/2006	Submittal Received By Department		
5/19/2006	Compliance W/O Formal Enforcement Action		
6/2/2006	Return To Compliance Letter		
6/16/2006	Project Closed Letter		
1/29/2008	Legacy Site Inspection		
1/29/2008	Informal Verbal Enforcement		
3/7/2008	Submittal Received By Department		
3/26/2008	Submittal Received By Department		
4/11/2008	Submittal Received By Department		
4/11/2008	Compliance W/O Formal Enforcement Action		
4/11/2008	Return To Compliance Letter		
6/18/2008	Project Closed Letter		

**Violation History**

Vio#	Area	Regulation	Opened By	Date Determined	Completed	ETA	Act	Act Date	Regulation Text Excerpt (mouse over for more text)
------	------	------------	-----------	-----------------	-----------	-----	-----	----------	--

1	262.A	262.11	Chaz_Load	9/24/1987	10/5/1987		3353	9/24/1987	Hazardous waste determination. A person who generates a solid waste, as defined in 40 CFR 261.2, must determine if that waste is a hazardous waste using the following method:
2	279.F	279.52(b)	Smith_J	3/14/2001	4/2/2001		8180	3/14/2001	Contingency plan and emergency procedures. Owners and operators of used oil processing and re-refining facilities must comply with the following requirements:
3	262.C	262.34(a)(3)	Winston_K	12/17/2002	2/18/2003		9271	12/17/2002	While being accumulated on-site, each container and tank is labeled or marked clearly with the words, "Hazardous Waste"; and
4	279.C	279.22	Kantor_Ke	4/6/2006	4/24/2006		11353	4/6/2006	Used oil storage. Used oil generators are subject to all applicable Spill Prevention, Control and Countermeasures (40 CFR part 112) in addition to the requirements of this Subpart. Used oil generators are also subject to the Underground Storage Tank
5	XXS	62-737	Kantor_Ke	4/6/2006	4/24/2006		11353	4/6/2006	CHAPTER 62-737 THE MANAGEMENT OF SPENT MERCURY-CONTAINING LAMPS AND DEVICES DESTINED FOR RECYCLING
6	262.C	262.34(c)(1)	Kantor_Ke	4/6/2006	4/24/2006		11353	4/6/2006	A generator may accumulate as much as 55 gallons of hazardous waste or one quart of acutely hazardous waste listed in 261.33(e) in containers at or near any point of generation where wastes initially accumulate, which is under the control of the oper
7	265.C	265.35	Winston_K	1/29/2008	3/7/2008		12324	1/29/2008	Required aisle space. The owner or operator must maintain aisle space to allow the unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment to any area of facility operation in an emergency
8	279.C	279.22(c)	Winston_K	1/29/2008	3/7/2008		12324	1/29/2008	Labels.
9		279.52	Winston_K	1/29/2008	3/26/2008		12324	1/29/2008	General facility standards
10	264.B	264.16(c)	Winston_K	1/29/2008	4/11/2008		12324	1/29/2008	Facility personnel must take part in an annual review of the initial training required in paragraph (a) of this section.

## USED OIL PROCESSOR CHECKLIST

Facility Name: Cliff Berry, Inc. - Miami Date: 1/29/08

Facility Representative: Philip Pierre-Louis Facility ID : FLD058560699

Inspector: Kathy Winston, Jowana Knight, Bheem Kothur Registration # 77628-HO-003

### **40 CFR 279 Subpart F -- Processor Standards**

1. Is the facility exempt under any of the following? (279.50(a)) Y        N X  
Transporter or burner processing incidental to normal course of operations? Y        N X  
Processors who also generate, transport, market, dispose or burn used oil must comply with the applicable Subparts of Part 279.
2. Does the processor have an EPA ID Number? (279.51(a)) Y X N
3. Is the processor Registered? (62-710.500(1)(b)) Y X N
4. Does the processor have a general permit? 62-710.800(1)) Y X N
5. For new facilities, was the notification of intent to use the general permit submitted 30 days prior to beginning operation? For existing facilities, was "the notification for renewal submitted 30 days prior to expiration of the general permit?(62-710.800(2)) N/A  
Y        N

### **Oil Filter Processing Standards-- 62-710.850 F.A.C.**

1. Does the facility process used oil filters by removing oil, draining, crushing or element separation? Describe in narrative. Generators who process their own filters are not regulated provided the filters are not disposed of in a landfill but are managed by a registered processor. Y X N         
Is the facility a registered used oil filter processor? (62-710.850) Y X N
2. Are the filters stored in above ground containers which are: (62-710.850(6))  
In good condition? Y X N         
Closed or otherwise protected from weather? Y X N         
Labeled "Used Oil Filters"? Y X N         
Stored on an oil impervious surface? Y X N
3. Are records maintained on DEP Form 62-710.900(2) or equivalent that include: (62-710.850(5)(a))  
Destination or end use of the processed filters? Y X N         
Name and street address of each destination or end user? Y X N         
Are copies kept at the facility's street address for 3 years? (62-710.850(5)(b)) Y X N
4. Is an Annual Report submitted by March 1 for the previous calendar year summarizing the above records? (62-710.850(5)(c)) Y X N

**Oil Management Standards - 279.54**

1. Is used oil stored only in tanks or containers? (Circle applicable units) Y X N
2. If the facility has tanks, do they comply with 62-761 and 62.762 F. A. C. rules?  
(Applicable to USTs over 100 g and ASTs over 550 gallons. Describe in narrative, including number and size of tanks, noting registration numbers if applicable, and compliance status.) Y X N       
  
Is secondary containment consisting of a floor and dike which are impervious to oil provided for ASTs? Applies to all ASTs regardless of size per 279.54(d & e) Y X N
3. Are containers and tanks in good condition and not leaking? (279.54(b)) Y X N
4. Are containers provided with secondary containment consisting of walls and floor at a minimum? (279.54(c)) Y X N       
  
Is the containment system impervious to oil so as to prevent migration? Y X N
5. Are ASTs, UST tank fill lines and containers labeled "used oil"? (279.54(f)) Y X N
6. Does the facility stop operations and clean up releases of used oil, repairing or replacing any leaking units as applicable? (279.54(g)) Y X N

**General Facility Standards - 279.52**

1. Is the facility maintained and operated to prevent a fire, explosion or planned or unplanned release of used oil to the air, soil, or water which could threaten human health or the environment? (279.52(a)(1)) Y X N
2. Does the facility have an internal communication or alarm system capable of giving immediate emergency instruction to facility personnel?(279.52(a)) Y X N
3. Is there a telephone, alarm, 2-way radio or other device at the scene of operations immediately available and capable of summoning assistance from local fire departments? (279.52(a)(2)(ii)) Y X N       
  
Is there immediate access to this equipment by all personnel who are engaged in pouring, mixing, spreading or otherwise handled, either directly or by voice or visual contact with another employee? (279.52(a)(4)) Y X N
4. Describe fire control equipment. Is it adequate? (279.52(a)(2)(iii)) Y X N       
**Fire extinguishers, sprinklers**
5. Is spill control and decontamination equipment present? (279.52(a)(2)(iii)) Y X N
6. If sprinklers, water hoses or foam producing equipment is part of the facility fire control equipment, is water available at adequate volume and pressure? (279.52(a)(2)(iii)) Y X N
7. Is the emergency equipment inspected and tested periodically? Y X N       
Frequency? Annually, 5/07



Facility Name: Cliff Berry, Inc.-Miami  
Date: 1/29/08

8. Is there adequate aisle space to allow unobstructed movement of facility personnel and emergency equipment to any area of the facility where needed? (279.52(a)(5i)) Y        N X

**Not enough aisle space between transfer facility drums for inspection, photographic evidence of correction provide 3/4/08**

9. Has the facility made emergency response arrangements with the following: (279.52(a)(6))
- Fire Department: Metro-Dade Fire Rescue Y X N
- Police: Metro-Dade Police Y X N
- Hospital: UM Jackson Memorial Y X N
- Emergency Response Contractor: Cliff Berry Inc. Y X N
10. If not, has the facility attempted to do so and is the refusal documented? Y        N

**Contingency Plans and Emergency Response -- 279.52(b)**

1. Does the facility have a contingency plan? Y X N
2. Is it at the facility and easily available? Y X N
3. Does the plan include:
- Fire Response Procedure: (compare to 279.52(b)(6)) N/A        Y X N
- Spill Response Procedures: " N/A        Y X N
- Explosion Response Procedures: " N/A        Y X N
- Instructions for handling contaminated materials & residues Y X N
- A description of arrangements with local authorities: N/A        Y X N
- Emergency Coordinators: (Name) Zack Davis Y X N
- Addresses and telephone numbers of Emergency Coordinators: Y X N
- Emergency equipment list: Y X N
- Specifications and capabilities of emergency equipment: Y X N
- Locations of emergency equipment: Y X N
- An evacuation plan and routes: Y X N
- Evacuation/alarm signals: Y X N
- External reporting procedures: Y X N
- Internal recordkeeping requirements: Y X N
4. Is the plan up to date, with no changes to the list of emergency equipment, list of emergency coordinators, applicable regulations or contingency plan failures since the last revision? (279.52(b)(4)) Y X N
5. Has the plan been distributed to the local police, fire department, ERT and hospital? Circle omitted authorities. (279.52(b)(3)) Y X N
6. Is the emergency coordinator authorized to commit funds for incident response? Y X N
7. Has the processor noted in the operating record any incidents requiring implementation of the contingency plan? (279.52(b)(6)(ix)) Y        N X
9. Were written reports made within 15 days to the DEP? (279.52(b)(6)(ix)) Y        N
- N/A

**Rebuttable Presumption and Analysis Plan -- 279.53, 279.55**

1. Does the processor have a written analysis plan to determine whether used oil stored at the facility has a total halogen content above or below 1,000 ppm and whether the facility's used oil fuel meets the used oil specification? (279.55)(a) Y X N
2. Is the 1,000 ppm halogen determination made by testing? Y X N         
If so, does the analysis plan cover: (279.55(a)(2))  
Sampling methods? Y X N         
Frequency of sampling? Y X N         
Analytical Methods? Y X N         
Is the 1,000 ppm halogen determination made by process knowledge? Y        N X         
If so, is the type of information that will be used to determine the halogen content stated in the analysis plan? (279.55(a)(3)) Y        N
3. Have any analyses showed exceedances of the 1,000 ppm level? Y        N X         
If so, was the oil managed as hazardous waste? Y        N         
If not, was the oil exempt? Describe basis for presumption rebuttal in narrative. (ex. analysis, refrigerant oil, etc.) N/A        Y        N
4. Is the used oil fuel specification determination made by testing?  
If so, does the analysis plan cover: (279.55(b)(2))  
Sampling methods? Y X N         
Whether the oil will be tested before or after processing? Y X N         
Frequency of sampling? Y X N         
Analytical Methods? Y X N         
Is the used oil fuel specification determination made by process knowledge? Y        N X         
If so, is the type of information that will be used to determine the halogen content stated in the analysis plan? (279.55(b)(3)) Y        N
5. Are all oil processing residues managed as used oil, reclaimed, or used as asphalt manufacture feedstock? (279.59) N/A        Y X N         
If not, has the processor conducted a hazardous waste determination? (279.10(e)) N/A        Y        N
6. Are test records or copies of records providing basis for determinations kept for 3 years? Y X N

Facility Name: Cliff Berry, Inc.-Miami  
Date: 1/29/08

**Recordkeeping and Reporting -- 279.57, 62-710.510-520 F.A.C.**

1. Do used oil acceptance records include: (279.56(a))

Name & address of the generator or off site source of the used oil?	Y	X	N	_____
EPA ID # of oil provider (if applicable)?	Y	X	N	_____
Name & Address of the transporter delivering the oil to the facility?	Y	X	N	_____
EPA ID # of the transporter delivering the oil	Y	X	N	_____
Quantity of oil shipped?	Y	X	N	_____
Type of oil received (62-710.510(1)(c))	Y	X	N	_____
Date of shipment?	Y	X	N	_____

2. Do used oil delivery records include: (279.56(b), also check marketer requirements)

Name & Address of receiving facility? (burner, processor or disposal site)	Y	X	N	_____
EPA ID # of receiving facility?	Y	X	N	_____
Name & Address of transporter delivering the oil?	Y	X	N	_____
EPA ID # of transporter?	Y	X	N	_____
Quantity of oil delivered?	Y	X	N	_____
End Use of the oil? (62-710.510(1)(e))	Y	X	N	_____
Date of delivery?	Y	X	N	_____

3. Does the facility keep records on DEP Form 62-710.900(2) or equivalent? (62-710.501(1))

Y X N \_\_\_\_\_

4. Does the facility submit an annual report by March 1 summarizing the on site records for the previous calendar year? (62-710.520)

Y X N \_\_\_\_\_

If not, is the facility an electric utility processing only self generated used oil for recycling, which is exempt from state registration and reporting requirements? (62-710.530)?

Y \_\_\_\_\_ N \_\_\_\_\_

5. Does the transporter keep copies of the record and reports for three years at the street address of the facility? (62-710.510(2))

Y X N \_\_\_\_\_

**Closure -- 62-710.800(3) F.A.C. and 279.54(h)**

1. Has the facility submitted a written closure plan? (62-710.800(3)(a))

Y X N \_\_\_\_\_

2. Does the plan include procedures for removing containers of oil and residues?

Y X N \_\_\_\_\_

Cleaning and decontaminating tanks and ancillary equipment?

Y X N \_\_\_\_\_

Removing contaminated soils?

Y X N \_\_\_\_\_

Eliminating the need for further maintenance?

Y X N \_\_\_\_\_

If the facility operated tank systems, and not all contaminated soils can be practicably removed, the owner or operator must close the facility as a hazardous waste landfill.

1,444 (50 gallon drums) or  
72,200 gals

**RCRA COMPLIANCE INSPECTION REPORT**  
**TSD FACILITIES CHECKLIST**

Storage  
capacity

Facility Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Facility Representative: \_\_\_\_\_ Facility ID #: \_\_\_\_\_  
SIC Codes: \_\_\_\_\_ Inspector: \_\_\_\_\_

**General Facility Standards**

1. Has facility received hazardous waste from a foreign source?  
(264.12 - required notices) Y \_\_\_\_\_ N \_\_\_\_\_  
  
If yes, has he filed a notice with the Regional Administrator and DEP? Y \_\_\_\_\_ N \_\_\_\_\_
2. Does the facility have a copy of the permit along with the approved application? Y \_\_\_\_\_ N \_\_\_\_\_
3. Which types of regulated units are used for treatment, storage or disposal at the facility:  
Fill out appropriate unit checklist(s).  

_____ Containers (I)	_____ Landfill (N)
_____ Tanks (J)	_____ Incinerator (O)
_____ Surface Impoundment (K)	_____ Drip Pad (W)
_____ Waste Pile (L)	_____ Miscellaneous Unit (X)
_____ Land Treatment (M)	_____ Containment Building (DD)

**Waste Analysis (264.13)**

**Permit Condition \_\_\_\_\_**

1. Is a copy of the waste analysis plan maintained at the facility? Y \_\_\_\_\_ N \_\_\_\_\_
2. Does the facility have copies of completed waste analysis reports? Y \_\_\_\_\_ N \_\_\_\_\_
3. Has the waste analysis been reviewed or repeated as required? Y \_\_\_\_\_ N \_\_\_\_\_
4. (For off-site facilities) waste analysis that generators have agreed to supply? Y \_\_\_\_\_ N \_\_\_\_\_
5. Check waste analysis equipment to see if it is on-site and in working condition? Y \_\_\_\_\_ N \_\_\_\_\_

**Security (264.14)**

**Permit Condition \_\_\_\_\_**

1. Is the facility security system adequate to minimize unauthorized entry? Y \_\_\_\_\_ N \_\_\_\_\_
2. Are signs posted and legible for 25 feet? Y \_\_\_\_\_ N \_\_\_\_\_

Next time E, B, A

### Inspection Requirement (264.15)

#### Permit Condition \_\_\_\_\_

1. Does the facility have a copy of the Inspection Plan? Y\_\_\_\_\_N\_\_\_\_\_
2. Does the facility have completed inspection logs? Y\_\_\_\_\_N\_\_\_\_\_
3. Were the deficiencies corrected in a timely manner? Y\_\_\_\_\_N\_\_\_\_\_
4. Are the inspection logs maintained at the facility for 3 years? Y\_\_\_\_\_N\_\_\_\_\_
5. Is the facility equipped to prevent fire, explosion or contamination of the environment and is the equipment in working condition? Y\_\_\_\_\_N\_\_\_\_\_

### Personnel Training (264.16)

#### Permit Condition \_\_\_\_\_

1. Does facility have copy of training plan? Y\_\_\_\_\_N\_\_\_\_\_
2. Does facility have personnel training records? Y\_\_\_\_\_N\_\_\_\_\_
3. Has management completed training? Y\_\_\_\_\_N\_\_\_\_\_
4. Have laborers completed training? Y\_\_\_\_\_N\_\_\_\_\_
5. Is training successfully completed within 6 months of hiring/transfer to HW position? Y\_\_\_\_\_N\_\_\_\_\_
6. Has the training been conducted as stated in the Training Plan? Y\_\_\_\_\_N\_\_\_\_\_
7. Do the facility personnel training records include:
  - a. Job title, description of position and description of qualifications? Y\_\_\_\_\_N\_\_\_\_\_
  - b. Description of employee's training? Y\_\_\_\_\_N\_\_\_\_\_
8. Are records maintained for 3 years? Y\_\_\_\_\_N\_\_\_\_\_
9. Date of last annual training review \_\_\_\_\_

### Ignitable, Reactive, or Incompatible Waste (264.17)

#### Permit Condition \_\_\_\_\_

1. Is the waste separated and confined from sources of ignition or reaction sparks, spontaneous ignition, and radiant heat? Y\_\_\_\_\_N\_\_\_\_\_
2. Are "No Smoking" signs posted in the area? Y\_\_\_\_\_N\_\_\_\_\_

### Preparedness and Prevention - 264 C

1. Is there evidence of fire, explosion or contamination of the environment? Y\_\_\_\_\_N\_\_\_\_\_
2. Is the facility equipment located in accordance with the approved plan and is it functional? Y\_\_\_\_\_N\_\_\_\_\_
3. Is required aisle space maintained? (264.37) Y\_\_\_\_\_N\_\_\_\_\_

### Contingency Plan and Emergency Procedures - 264 D

1. Does the facility have a copy of the Contingency Plan? Y\_\_\_\_\_N\_\_\_\_\_
- Is it up to date? Y\_\_\_\_\_N\_\_\_\_\_
2. Has the plan been amended and have the amendments been approved? Y\_\_\_\_\_N\_\_\_\_\_
3. Were the plan revisions submitted to all authorities? Y\_\_\_\_\_N\_\_\_\_\_
4. Is the emergency coordinator on-site or within short driving distance of plant at all times? Y\_\_\_\_\_N\_\_\_\_\_
5. Verify equipment location. Is it in working condition? Y\_\_\_\_\_N\_\_\_\_\_

### Manifest System, Recordkeeping and Report -- 264 E

1. Does the facility have copies of the manifests for off site waste? Y\_\_\_\_\_N\_\_\_\_\_
- a. Are the manifests signed and dated and returned to the generator? Y\_\_\_\_\_N\_\_\_\_\_
- b. Is a signed copy given to the transporter? Y\_\_\_\_\_N\_\_\_\_\_
- c. Are there any manifests that have not been completely filled out? Y\_\_\_\_\_N\_\_\_\_\_
2. Are copies of the manifests retained for three years? Y\_\_\_\_\_N\_\_\_\_\_
3. Has the facility received any shipments of hazardous waste which were inconsistent with the manifest? Y\_\_\_\_\_N\_\_\_\_\_
- If yes, has he attempted to reconcile the discrepancy with the generator and transporter? Y\_\_\_\_\_N\_\_\_\_\_
- If no, has DEP been notified? Y\_\_\_\_\_N\_\_\_\_\_
4. Does the facility have operating records that show a description and quantity of each hazardous waste and the date and method of T,S,D at the facility? Y\_\_\_\_\_N\_\_\_\_\_
5. Does location and quantity of hazardous waste agree with operating record? Y\_\_\_\_\_N\_\_\_\_\_



**Groundwater Monitoring - 264 F \_\_\_\_\_ N/A**

**264.90-.100, Permit Condition \_\_\_\_\_**

1. Does the facility have a copy of the Groundwater Monitoring Plan? Y \_\_\_\_\_ N \_\_\_\_\_
2. Does the facility have copies of the groundwater analysis? Y \_\_\_\_\_ N \_\_\_\_\_
3. Has the analysis been conducted as specified? Y \_\_\_\_\_ N \_\_\_\_\_
4. Has there been a statistically significant increase of the value for the parameter from background? Y \_\_\_\_\_ N \_\_\_\_\_
5. Did the facility notify the Department of the parameter that showed a statistically significant increase within 7 days? Y \_\_\_\_\_ N \_\_\_\_\_
6. Verify location of wells? Y \_\_\_\_\_ N \_\_\_\_\_
7. Verify condition of wells and check for caps and locks? Y \_\_\_\_\_ N \_\_\_\_\_

**Closure and Post-Closure - 264 G**

**264.110-.120, Permit Condition \_\_\_\_\_**

1. Is a copy of the approved plan and all revisions kept at the facility? Y \_\_\_\_\_ N \_\_\_\_\_
2. Does the maximum inventory of wastes at the facility exceed that specified in the Closure Plan? Y \_\_\_\_\_ N \_\_\_\_\_
3. Does the facility have an approved post-closure plan (for land disposal facilities)? N/A \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_
4. Has the plan been amended and approved by the Department and distributed to the appropriate agencies? Y \_\_\_\_\_ N \_\_\_\_\_

**Financial - 264 H**

**264.140-.151, Permit Condition \_\_\_\_\_**

1. Does the facility have a written estimate, in current dollars, of the cost of closing the facility? Y \_\_\_\_\_ N \_\_\_\_\_
2. Has the financial assurance been updated for the last year? Y \_\_\_\_\_ N \_\_\_\_\_
3. Is the facility in compliance with the financial assurance regulation with respect to:
  - Closure cost? Y \_\_\_\_\_ N \_\_\_\_\_
  - Post-closure cost? Y \_\_\_\_\_ N \_\_\_\_\_ NA \_\_\_\_\_
  - Sudden liability? Y \_\_\_\_\_ N \_\_\_\_\_
  - Non-sudden liability? Y \_\_\_\_\_ N \_\_\_\_\_ NA \_\_\_\_\_
  - Corrective action? Y \_\_\_\_\_ N \_\_\_\_\_ NA \_\_\_\_\_

**Florida Department of Environmental Protection  
Interoffice Memorandum**

<b>DATE:</b> _____  <b>TO:</b> Jack Long      District Director <b>FROM/THROUGH:</b> Joe Lurix      Program Administrator Karen Kantor      Environmental Manager _____      Environmental Specialist _____      Document Reviewer  <b>PROGRAM:</b> Hazardous Waste	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">ENFORCEMENT TRACKING</th> </tr> <tr> <th style="width: 50%; text-align: center;">INITIAL</th> <th style="width: 50%; text-align: center;">DATE</th> </tr> <tr> <td style="text-align: center;">[Signature]</td> <td style="text-align: center;">5-18-10</td> </tr> <tr> <td style="text-align: center;">[Signature]</td> <td style="text-align: center;">5/18/2010</td> </tr> <tr> <td style="text-align: center;">[Signature]</td> <td style="text-align: center;">5/13/2010</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	ENFORCEMENT TRACKING		INITIAL	DATE	[Signature]	5-18-10	[Signature]	5/18/2010	[Signature]	5/13/2010				
ENFORCEMENT TRACKING															
INITIAL	DATE														
[Signature]	5-18-10														
[Signature]	5/18/2010														
[Signature]	5/13/2010														

<b>Case Name/ No.:</b> Cliff Berry Inc. Miami Terminal	<b>Facility ID#:</b> FLD058560699
<b>OGC#</b> <u>N/A 10-1658</u>	<b>County:</b> Miami-Dade

**Description of Violations:**  
 Hazardous waste determination, leaking used oil container, violations of permit conditions involving used oil secondary containment, Contingency Plan violations

**Case Summary:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**Penalty Summary:**  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>Penalty Amount:</b>	<b>Costs &amp; Expenses:</b>	<b>Total Penalty:</b>
\$2,700.00	\$250.00	\$2,950.00

**Attachment(s):** Proposed Short Form Consent Order, Notice of Rights, Copy of Warning Letter and Penalty Worksheets, Penalty Settlement Worksheet.

**CHECKLIST FOR PROPOSED CONSENT ORDER**

Case Manager: _____		Please check off all items that apply to this order.
<b>STEP # 1:</b>  <b>Contents Checklist</b>	<input type="checkbox"/>	Cover Letter (not required for Short Form)
	<input checked="" type="checkbox"/>	Copy of Inspection Report and/or Checklist
	<input type="checkbox"/>	Exhibits(s): number of Exhibits: _____
	<input type="checkbox"/>	<b>Penalty Calculation Sheets. If Recalculated</b>
	<input checked="" type="checkbox"/>	Notice of Rights (Short form CO only)
	<input checked="" type="checkbox"/>	Other/Comments: SCHEDULE A for payments
<b>STEP # 2:</b> <b>Copying &amp; Mailing Procedure</b>	<input type="checkbox"/>	Record in PA/Director Log
	<input type="checkbox"/>	Send Certified Mail or DHL To Respondent
	<input type="checkbox"/>	Respondent : Cover Letter, Consent Order, <b>Inspection Report--Date Stamp, Exhibits, Notice of Rights</b>
	<input type="checkbox"/>	cc: copy of Cover Letter, Consent Order
	<input type="checkbox"/>	Inspection Report and Exhibits
	<input type="checkbox"/>	File Copy: Entire Package
<b>STEP # 3:</b> <b>Filing Procedure</b>	<input type="checkbox"/>	Archboard: Letter, Consent Order, Exhibits
	<input type="checkbox"/>	Other: _____
	<input type="checkbox"/>	Record Date Mailed in PA/DDM or DESIGNEE Log
	<input type="checkbox"/>	<b>CASE FILE:</b>
	<input type="checkbox"/>	Cover Letter, Consent Order, Inspection Report, Exhibits
	<input type="checkbox"/>	Penalty Calculation Sheets
<b>ARCHBOARD:</b>		
<input type="checkbox"/>		Cover Letter, Consent Order, Inspection Report, Exhibits
<b>SPECIAL INSTRUCTIONS:</b> _____		

*Answer:*

*\* Please leave "Sign here" flags for respondent in place for mailing  
 so no signatures are missed. Thank you*

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000081921

Entity Name: CLIFF BERRY, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

851 ELLER DRIVE  
FORT LAUDERDALE, FL 33316

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 13079  
FT. LAUDERDALE, FL 33316

## New Mailing Address:

FEI Number: 65-0511114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BERRY, CLIFF SR.  
851 ELLER DRIVE  
FT. LAUDERDALE, FL 33316 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BERRY, CLIFF SR.  
Address: 851 ELLER DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: BERRY, CLIFF II  
Address: 851 ELLER DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: BERRY, SANDRA B  
Address: 851 ELLER DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: S ( ) Delete  
Name: BERRY, BETTY  
Address: 851 ELLER DR.  
City-St-Zip: FORT LAUDERDALE, FL 33316

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLIFF BERRY SR.

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date

**Kantor, Karen E.**

---

**From:** Bill Parkes [BParkes@cliffberryinc.com]  
**Sent:** Tuesday, April 20, 2010 4:38 PM  
**To:** Kantor, Karen E.  
**Subject:** MEETING AT THE SOUTHEAST DISTRICT OFFICE ON 4-29-10 @10 AM

Karen -

This e-mail is to confirm our meeting with you at the FDEP Southeast District Office on Thursday, April 29th, 2010 at 10 am.

Our Executive Vice President, Larry Doyle and myself will be representing CBI.

Per your request I will forward the pictures of the CBI - Miami Facility rolloff storage area prior to our meeting.

Regards,

Bill

William E. Parkes, Jr.  
Manager Regulatory Affairs and Capital Projects.  
Cliff Berry, Inc. ( CBI ).

( 954 ) 763-3390 ( office )    [bparkes@cliffberryinc.com](mailto:bparkes@cliffberryinc.com) ( e-mail )





## MEETING DOCUMENTATION

Attendees: (see attached sheet)	Location: <u>WPB - WC ROOM</u>	Date/Time: <u>4/29/2010 @ 10am</u>
------------------------------------	-----------------------------------	---------------------------------------

Meeting Requested by:

FDEP

Meeting Objectives:

MEETING RE: THE DEP'S LETTER 4/12/2010.

Notes:

Agreements/conclusions:

Follow-up Actions/Dates:

Prepared by: \_\_\_\_\_

mtdocnot



Cliff Berry, Incorporated  
058 560 699  
3033 Northwest North River Drive  
Miami, Florida 33142

I.D. Number: FLD

Permit/Cert Number: 77628-HO-004; 77628-SO-005  
Expiration Date: February 12, 2013

soil, or surface water which could threaten human health or the environment, in accordance with 40 CFR 279.52 and Rule 62-710.800(1), F.A.C.

26. The Permittee shall not accept or store any hazardous wastes in the permitted tanks or in any other area at the facility without receiving written approval from the Department.
27. The Permittee is allowed to store used oil only in the aboveground tanks within the secondary containment, as shown in Attachment A of the permit.
28. The Permittee shall not exceed the maximum storage capacities of the permitted tanks as specified in Attachment No. 3 of the permit application dated December 07, 2007 and revised January 25, 2008 and in Attachment B of the permit.
29. To prevent overflow, the Permittee shall notify the Department when the volume of the used oil stored in any of the tanks exceeds ninety-five (95) percent of the maximum storage capacity of the tank as specified in Attachment No. 3 of the permit application dated December 07, 2007 and revised January 25, 2008 and Attachment B of the permit.
30. Category-A (tanks installed on or before March 12, 1991) and Category-B Storage Tanks (tanks installed after March 12, 1991, and before July 13, 1998) shall comply with the performance standards of Rule 62-762.511, F.A.C. Category-C Storage Tanks (tanks installed on or after July 13, 1998) shall comply with the performance standards of Rule 62-762.501, FAC. Repairs to aboveground storage and process tanks shall meet the criteria of Rule 62-762.701, F.A.C. [Rule 62-710.300(3), F.A.C.].
31. The inspection records and release detection monitoring required in Rule 62-762.601, F.A.C. for aboveground process and storage tanks and integral piping shall be maintained in the Permittee operating record [Rule 62-710.510, F.A.C.].
32. The Permittee shall prevent the release of used oil, oily waste or oily wastewater to the environment. The secondary containment system shall be maintained in accordance with Attachment No. 6 of the permit application dated December 07, 2007 and revised January 25, 2008 and shall comply with the requirements of 40 CFR 279.54, including the requirements set forth below:
  - a. All new components shall have secondary containment as required by parts (b) and (c) of this condition prior to being put into service;
  - b. Pursuant to 40 CFR 279.54, the secondary containment system shall be:
    - (1) Designed, installed and operated to prevent any migration of wastes or accumulated liquid to the soil, groundwater or surface waters;
    - (2) Capable of detecting and collecting releases and run-on until the collected material is removed;

Cliff Berry, Incorporated  
058 560 699  
3033 Northwest North River Drive  
Miami, Florida 33142

I.D. Number: FLD

Permit/Cert Number: 77628-HO-004; 77628-SO-005  
Expiration Date: February 12, 2013

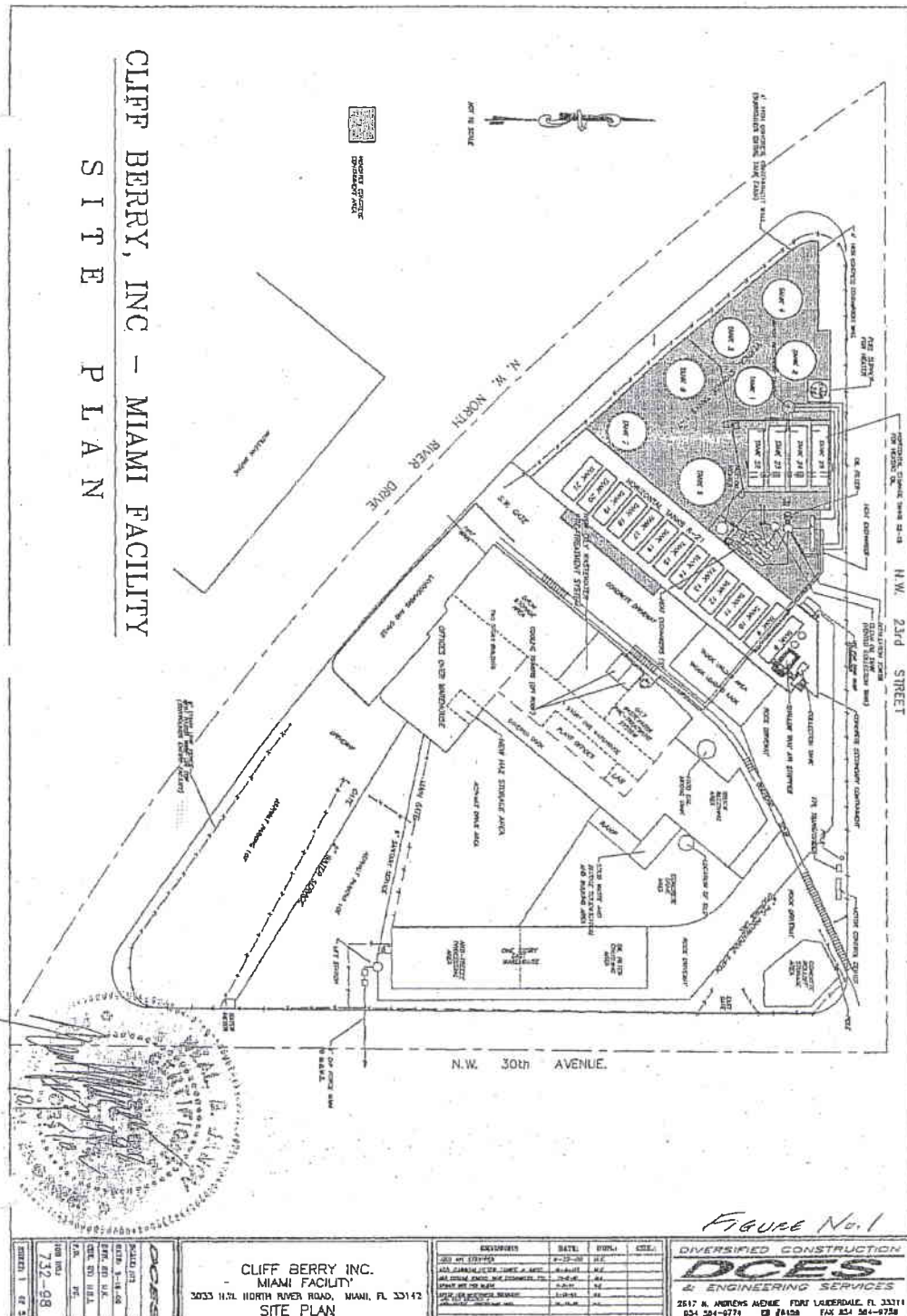
- (3) Constructed of or lined with materials compatible with the waste to be stored and have sufficient structural strength to sustain the stresses induced by a failure of the primary containment system as well as other stresses which may be induced by the environment;
  - (4) Placed on a foundation or base capable of providing support to the secondary containment system;
  - (5) Provided with a leak detection system designed and operated to detect failure of either the primary or secondary containment structures or the presence of any release within 24 hours;
  - (6) Sloped or otherwise designed and operated to drain or remove liquids resulting from leaks, spills, or precipitation; and
  - (7) Designed and operated, to contain 110% of the capacity of the largest tank within its boundary.
- c. Ancillary equipment shall be provided with secondary containment.
- 33. The Permittee shall inspect the secondary containment system floor and perimeter walls for any cracks or gaps, prior to beginning operation. If any cracks or gaps are found, the Permittee shall repair the cracks and gaps prior to beginning operation of the used oil processing facility [40 CFR 279.54(d)(2) and 40 CFR 279.54(e)(2)].
  - 34. The Permittee shall label or mark all containers and aboveground tanks, used for storage or processing of used oil, with the words "Used Oil" [40 CFR 279.54(f)].
  - 35. The Permittee shall label or mark all containers or tanks which are solely used for the storage of Petroleum Contact Water with the words "Petroleum Contact Water" or "PCW" [Rule 62-740.100, F.A.C.].
  - 36. The Permittee shall store used oil, PCW, used oil residues or used oil filters only in those containers or tanks which are made of or lined with materials that will not react with and are otherwise compatible with the waste to be stored.
  - 37. If a container or tank holding used oil, PCW, used oil residues or used oil filters is not in good condition (e.g., rusting, bulging) or begins to leak, the Permittee shall transfer the waste to another container or tank which is in good condition [40 CFR 279.22].
  - 38. As part of the general operating requirements, the Permittee shall:
    - a. Not place used oil, other wastes or treatment reagents in a tank system if the possibility exists that this may cause the tank system to fail;
    - b. Use appropriate controls and practices to prevent spills and overflows;

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Expiration Date: February 12, 2013

## ATTACHMENT A



## EXAMPLE SIGNATURE BLOCKS AND CERTIFICATIONS

In many cases, the responsible party entering a Consent Order with the Department is a business entity rather than an individual. To assist Department staff in identifying the appropriate person to sign a Consent Order on behalf of a business entity respondent, this document provides example signature blocks and certifications of authority to sign/bind.

**PLEASE NOTE:** In most cases, you will not need to use a certification of authority. The sample certifications are only for use when you are unable to verify that the person seeking to sign the Consent Order is an officer, manager, or general partner. If, based on the information available on SUNBIZ, you can verify that the person seeking to sign the Consent Order is authorized to do so (see who can sign for each type of business entity in the signature blocks below), then you do not need to refer to the sample certifications **or contact OGC for advice.**

Information about business entities and their officers, manager, etc. is available at SUNBIZ ([www.sunbiz.org/search.html](http://www.sunbiz.org/search.html)). For businesses not listed there, contact OGC for advice on naming the proper parties.

Clicking on the following links will direct you to the corresponding sample:

### Example signature blocks:

- 1) Corporations [*this page*]
- 2) Limited Liability Companies – LLCs [*this page*]
- 3) Partnerships
  - a) General partnership - GP
  - b) Limited partnership - LP
  - c) Limited liability partnership - LLP
  - d) Limited liability limited partnership - LLLP
- 4) Multiple entities

### Example certifications of authority:

- 1) Corporations
- 2) Limited Liability Companies – LLCs
- 3) Partnerships
- 4) D/B/A (Doing Business As/Fictitious Name)

## EXAMPLES OF PROPER SIGNATURE BLOCKS

CORPORATION - Only an officer OR a non-officer with written signatory authority (see certifications below) can sign.

(Example)

GREEN EARTH, INC.,

By: \_\_\_\_\_  
Name: John H. Doe  
Title: President [or Secretary or Treasurer]

**LLC** – *Only a Manager can sign.*

(Example - LLC)

BIOHAZARD DISPOSAL, LLC

By: \_\_\_\_\_  
Jim Q. Brown, Manager [or Managing Member]

**PARTNERSHIP** – *Only a General Partner can sign; a Limited Partner cannot sign.*

(Example – general partnership)

MULCH RECYCLERS, GP, a Florida general partnership,

By: \_\_\_\_\_  
Jane Smith, General Partner

(Example – limited partnership (LP))

ORGANIC ENTERPRISES, LP, an Alaskan limited partnership,

By: \_\_\_\_\_  
Jonathan H. Smith, General Partner

(Example – limited liability partnership (LLP))

ORGANIC ENTERPRISES, L.L.P., a Virginia limited liability partnership,

By: \_\_\_\_\_  
John D. Doe, Partner [or Managing Partner]

(Example – limited liability limited partnership (LLLP))

ORGANIC ENTERPRISES, L.L.L.P., a Florida limited liability limited partnership,

By: \_\_\_\_\_  
John D. Doe, General Partner

**MULTIPLE ENTITIES** – When one type of business entity is the Partner/Manager/etc.

(Example)

Land Developer, L.L.C., a Florida limited liability company,

By: Development Solutions, L.P., a Florida limited partnership,  
Its Manager,

By: Developer Company, a Florida general partnership,  
Its General Partner,

By: Greenspace Corporation, a Florida corporation,  
Its Managing Partner,

By:

Name: Jane R. Doe

Title: President [or Secretary or Treasurer]

EXAMPLE CERTIFICATIONS OF AUTHORITY

*[Exhibit A  
Separate exhibit]*

CORPORATION – *Three examples are provided.*

(Corp - Example 1)

*Larry Doyle*  
I, ~~Jane R. Doe~~, the Executive Vice-President of ~~Environmental Protection, Inc.~~ *Cliff Berry Inc.*, named as Respondent in the Consent Order attached herein, hereby certify and represent to the State of Florida Department of Environmental Protection that the undersigned executed the Consent Order for and on behalf of said corporation and that in so executing said instrument, the undersigned was duly authorized to do so in her named capacity as officer and by so executing ~~does~~ hereby bind said corporation to the terms of said instrument as therein set forth.

~~Jane R. Doe~~ *Larry Doyle*  
Executive Vice-President

Dated: \_\_\_\_\_

(Corp - Example 2 – Foreign Corporation)

I, Joan B. Green, Secretary of Gross Point, Inc., a Georgia corporation (the "Company"), do hereby certify that the Vice President, John Q. Brown, is authorized and empowered to negotiate, enter into and execute, in the name and on behalf of the Company, any agreements, documents, instruments, certificates and other commitments and obligations that he deems or believes to be advisable and in the best interest of the Company, including, without limitation, the Consent Order attached hereto entered into between the State of Florida Department of Environmental Protection and the Company relating to Describe the facility or site at which the violations occurred, CITY, COUNTY, Florida, upon the effective date of the Consent Order.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the corporate seal of said Company, this \_\_\_\_ day of \_\_\_\_\_, 200\_\_.

{SEAL}

*[or, if the corporation has no seal delete the paragraph above and use the following:]*

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_\_ day of \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
Joan B. Green  
Secretary, Gross Point, Inc.



(Corp - Example 3 – Non-officer signing)

I, Jane B. Green, certify that I am the Secretary of Evergreen Properties, Inc., a Florida corporation (the "Company") named as Respondent in the Consent Order attached herein; that Robert Doe, in his capacity as Environmental Manager of Evergreen Properties, Inc. is authorized to enter into and execute this Consent Order in the name and on behalf of the Company; that said Consent Order was duly signed by him for and on behalf of said corporation by authority of its governing body, and is within the scope of its corporate powers.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the corporate seal of said Company, this \_\_\_\_ day of \_\_\_\_\_, 200\_\_.

{SEAL}

*[or, if the corporation has no seal delete the paragraph above and use the following:]*

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_\_ day of \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
Jane B. Green  
Secretary, Evergreen Properties, Inc.

**LLC – Two examples are provided.**

(LLC - Example 1)

The undersigned, Jane B. Smith, Manager and President of Biohazard Disposal LLC, a Florida limited liability company (the "Company"), does hereby certify in the name and on behalf of the Company that I am a Manager and the President of the Company. The undersigned further certifies that:

(1) John H. Doe has been duly appointed Vice-President of the Company and is currently serving in that position.

(2) Pursuant to the Company's Organizational Agreement, Operating Agreement and resolutions duly adopted by the Managers of the Company, Mr. Doe is authorized and empowered to negotiate, enter into and execute, in the name and on behalf of the Company, any agreements, documents, instruments, certificates and other commitments and obligations that he deems or believes to be advisable and in the best interest of the Company, including, without limitation, the Consent Order attached hereto entered into between the State of Florida Department of Environmental Protection and the Company relating to Describe the facility or site at which the violations occurred, CITY, COUNTY County, Florida.

(continued on the next page)

IN WITNESS WHEREOF, I have hereunto set my hand, this \_\_\_\_ day of \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
Jane B. Smith  
Manager and President

(LLC - Example 2)

The undersigned, being all of the Members or Managers of Biohazard Disposal LLC (the "Company"), a Florida limited liability company, do unanimously agree and certify that:

- (1) Jane R. Brown, as President and Manager of the Company, is authorized and empowered to negotiate, enter into and execute, in the name and on behalf of the Company, any agreements, documents, instruments, certificates and other commitments and obligations that he deems or believes to be advisable and in the best interest of the Company, including, without limitation, the Consent Order attached hereto entered into between the State of Florida Department of Environmental Protection and the Company relating to Describe the facility or site at which the violations occurred, CITY, COUNTY, Florida.

IN WITNESS WHEREOF, the undersigned have executed this consent on the dates indicated below

\_\_\_\_\_  
NAME  
Member or Manager

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME  
Member or Manager

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME  
Member or Manager

\_\_\_\_\_  
DATE

## PARTNERSHIP

The undersigned, being all of the General Partners of Mulch Recyclers Partnership (the "Partnership"), a Florida general partnership, do hereby certify that:

- (1) LAURIE J. ROUGHTON, as General Partner of the Partnership, is authorized and empowered to negotiate, enter into and execute, in the name and on behalf of the Partnership, any agreements, documents, instruments, certificates and other commitments and obligations that she deems or believes to be advisable and in the best interest of the Partnership, including, without limitation, the Consent Order attached hereto entered into between the State of Florida Department of Environmental Protection and the Partnership relating to Describe the facility or site at which the violations occurred, CITY, COUNTY County, Florida.

IN WITNESS WHEREOF, the undersigned have executed this consent on the dates indicated below:

\_\_\_\_\_  
Laurie J. Roughton, General Partner

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME, General Partner

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME, General Partner

\_\_\_\_\_  
DATE

## D/B/A (Doing Business As)

This is to certify that the below named person, partnership, limited liability company or corporation conducts or transact business under the assumed or fictitious name in CITY, COUNTY, Florida.

- (1) The Assumed or Fictitious Name of Business is \_\_\_\_\_.
- (2) The business is owned by Identify entity type, e.g. sole proprietor, corporation, LLC, partnership, etc.

\_\_\_\_\_  
Name

\_\_\_\_\_  
DATE



1/25/2008 Attachment #5  
Response to NOD Items #6 & #7

## **FIRE RESPONSE**

### **Fire Control Systems and Equipment**

1. The Miami Facility has a PA system for internal communication capable of giving immediate emergency instruction to facility personnel.
2. All plant operation personnel have 2-way radios so that they are in constant communication with each other at all times.
3. The facility is equipped with a fire alarm system consisting of an emergency pull switch located in the operations office. This pull switch activates the local plant alarms as well as the security company. The facility fire alarm system pull switch is monitored twenty for (24) hours a day by ADT security company. ADT 24 hour operations center phone number is (305) 377-4541. The location code is 34-14-411.
4. Fire Control Equipment consist of:
  - a. Numerous fire extinguishers are locating around the plant. They are inspected and certified (tagged) on an annual basis. (See figure IV for location of fire extinguishers).
  - b. The main warehouse has a supervised automatic fire sprinkler system which is also monitored twenty-four (24) hours a day by ADT security company. (See phone number and location code above) the fire sprinkler system is inspected, tested and certified on an annual basis. (See next page for inspection/test report).
5. Water for the fire sprinkler system comes in on a separate fire main and adequate volume and pressure is available at all times.

### **Emergency Procedures**

#### **Fire**

1. Upon initial sighting, activate fire alarm system. If fire is in its incipient stage, respond with extinguishers.
2. Immediately alert emergency coordinator by word of mouth.
3. Emergency coordinator will assess danger and will initiate response to fire, shutdown procedure, and/or evacuation.
4. All nonessential personnel should evacuate as soon as the alarm sounds. Once off the property, Antillean Marine will be used as a communication center.

## MATERIALS

SPC OIL SORBENT	SIZE		QUANTITY
SPC 100 Pads	17" x 19" x 3/8"	100 Pads/Bale	40
SPC 200 Pads	17" x 19" x 3/16"	200 Pads/Bale	120
SPC 50 Pads	34" x 38" x 3/8"	50 Pads/Bale	40
SPC 810 Boom	10' x 8"	4 Boom/Bale	70
SPC 510 Boom	10' x 5'	4 Boom/Bale	50
SPC 5510 Boom	10' x 5" (DBL Boom)	4 Boom/Bale	5
SPC 10 Pillow	14" x 25"	10 Pillows/Bale	15
SPC 1900 Sweep	17" x 100'	1 Sweep/Bale	80
SPC 150 Blanket	38" x 144" x 3/8"	1 Blanket/Bale	20
SPC 152 Blanket	19" x 144" x 3/8"	2 Blankets/Bale	10
SPC 27 Particulate		1 Bag/Bale	5

SORBENT INDUSTRIAL RUG & SUPER SIR			
Sir 36 Rug	36" x 300'	1 Rug/Bale	10
Sir 18 Rug	18" x 300'	2 Rugs/Bale	15
Sir 001 Pads	18" x 18"	100 Pads/Bale	10

COBRA COIL			
CC 400 Coils	3" x 48" Long	12 Coils/ Box	15

SPC UNIVERSAL PLUS			
Description			Quantity
UN 915 pillows 9" x 15"	16 pillows/bag	1 bag/case	10
Oil Snare			25 boxes
Plastic sheeting 20' x 100'			5 rolls
Plastic bags			2000 bags



Description	Quantity	
Steel overpack drums	10	drums
Poly overpack drums	5	drums
55 gallon Open Head Drums (DOT approved)	50	drums
Coveralls - Tyvek	100	suits
Coveralls - Saranyx	50	suits
Respirator cartridges	100	sets
Rubber boots (heavy duty)	50	pairs
Rubber gloves (heavy duty)	200	pairs
Water soluble industrial cleaning fluid	55	gallon
Industrial solvent	55	gallon
Industrial scrub brushes	15	
Industrial squeegees	10	
Dip nets (spill equipment)	30	
Tyvek hoods	100	
Clear PVC booties	25	pairs



# CLIFF BERRY, INC.

## EQUIPMENT LIST

Page 1

## DESCRIPTION

## QUANTITY

## BOATS &amp; BARGES

ALUM. UTILITY BOAT W/MOTOR 14'	2
ALUM. WORK BOATS W/MOTOR 30,40 & 15HP	4
FIBERGLASS WORK BOAT W/MOTOR 20'	1
LANDING CRAFT - 36'	1
PONTOON BOAT W/MOTOR 85 HP	1

## HEAVY EQUIPMENT

BACKHOE/FRONTEND LOADER (COMBO)	1
BOBCAT LOADER	1
BULLDOZER	1
DRUM GRABBER	1
FRONTEND LOADER	2
TRACKHOE	1

## LIGHT EQUIPMENT

AIR COMPRESSOR	3
AIR COMPRESSOR W/TRAILER	1
AIR FILLING STATION	1
ATV'S	3
BLOWERS, PORTABLE GAS POWERED	2
BOOM ANCHORS	20
BUOYS, LIGHTED	25
CHAIN SAW	4
COMBUSTIBLE OXYGEN, TOXILOGOLY METER	1
CONTAINMENT BOOM (24", 18" & 12")	10,000'
CUTTING SAW, GAS POWERED	1

## DESCRIPTION

## QUANTITY

## LIGHT EQUIPMENT

DBL DIAPHRAM PUMP 1"	2
DBL DIAPHRAM PUMP 2"	1
DBL DIAPHRAM TRANSFER PUMP 3"	3
FASTANK - 250 GAL	1
FRAC TANK - 20,000 GAL	2
GENERATOR 15KW	1
GENERATOR 3,000 WATT	1
GENERATOR 4,000 WATT	2
GENERATOR 400 WATT	1
GENERATOR 5,000 WATT	1
HOSE 2"	200'
HOSE 3"	200'
HOT WATER PRESSURE CLEANER	3
HYDRAULIC POWER PACKS	2
JACK HAMMER & BIT	1
LIGHT TOWER UNIT	8
OIL MOP SKIMMER	1
OVA METER	1
PORTABLE CUTTING TORCH	1
PORTABLE WELDER	1
PRESSURE CLEANER	2
PUMPS, SUBMERSIBLE 6"	2
RADIO, PORTABLE TWO WAY VHF	10
RED DEVIL BLOWER & HOSE	1
ROLLOFF CONTAINER (20 YDS)	4
ROLLOFF CONTAINER (40 YD)	1
ROPE	1,000'
SCOTT AIR PACK	3
SCOTT AIRLINE CASCADE SYS W/SKA PAK	8
SHOVELS , ROUND POINT	20
SHOVELS , SQUARE POINT	20
SHOVELS, POLY	5

## DESCRIPTION

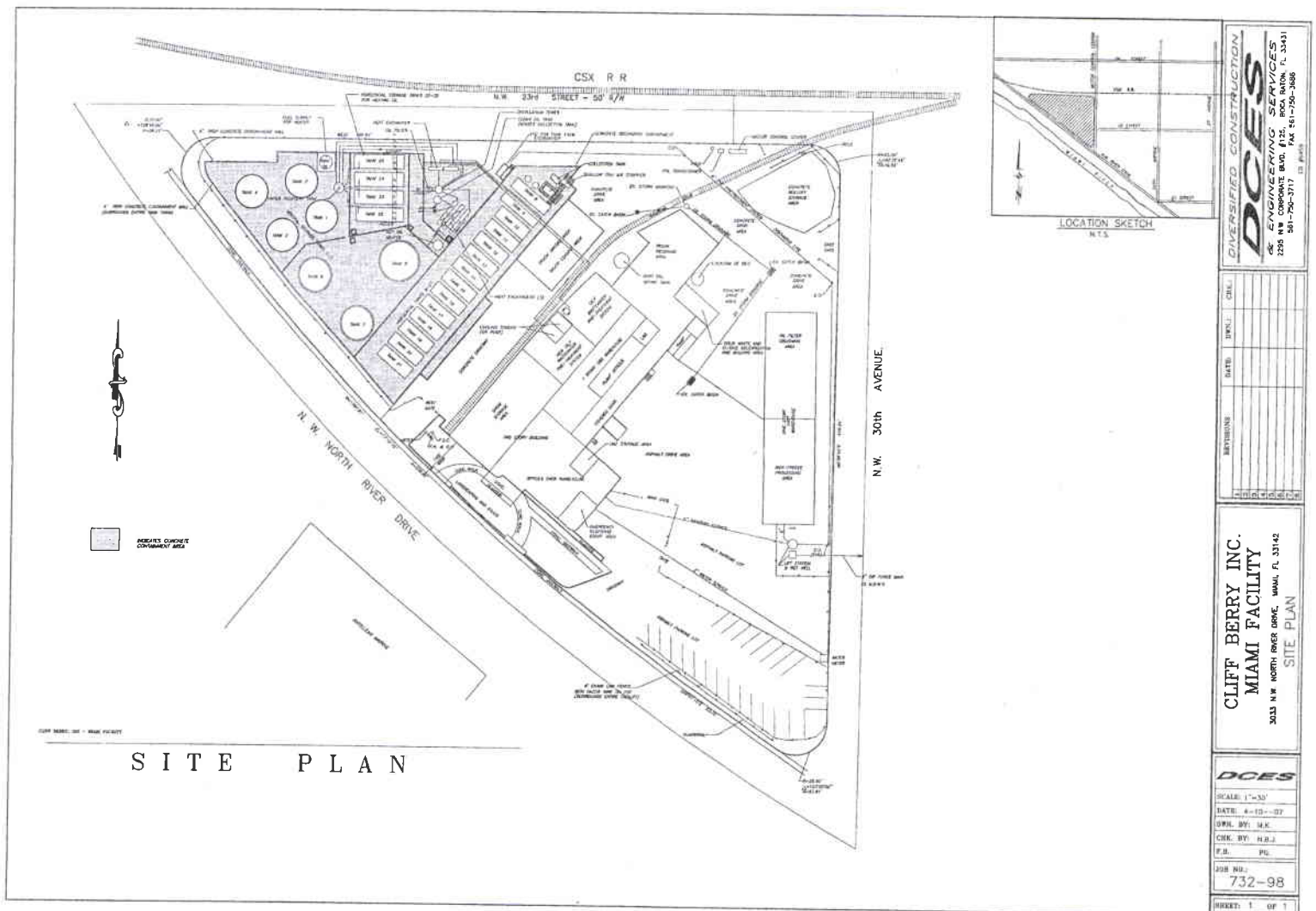
## QUANTITY

## LIGHT EQUIPMENT

SKID TANK	5
SKIMMER (MADUSO) 2,000 GAL	1
SKIMMER (WEIR) 1,000 GAL	1
SLOAN PUMP 4"	1
STAGING TENT (20'X20')	1
TOOL SET, NON SPARKING	1
WELDER 4 CYCLE (MILLER)	2
WHEELBARROWS	10
YARD RAKES	10

## VEHICLES

BOX TRUCKS	2
BUCKET TRUCK (50')	1
CRANE TRUCKS (2 TON)	2
DUMP TRUCK	1
EMERGENCY RESPONSE TRAILER (18'-20')	2
EMERGENCY RESPONSE TRAILER (40' MOBILE)	3
EMERGENCY RESPONSE VAN	2
FLATBED TRAILERS	3
INDUSTRIAL VACUUM UNIT W/ CYCLONE DRUM LOADER	1
MOBILE COMMAND UNIT	2
PUMP TRUCKS	2
ROLLOFF TRUCK	1
SMALL VEHICLES (CARS, 2W DR TRUCKS ETC.)	6
TANK TRAILERS	3
TRACTORS FOR TRAILERS	5
VACUUM TRUCKS (2,500 - 3,600 GAL)	5



**DIVERSIFIED CONSTRUCTION**  
**DCES**  
 ENGINEERING SERVICES  
 1250 N.W. CORPORATE BLVD., #125, BOCA RATON, FL 33431  
 561-750-3717 FAX 561-750-3800

REVISIONS	DATE	BY	CHK.

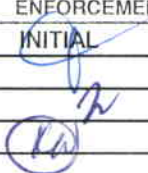
**CLIFF BERRY INC.**  
**MIAMI FACILITY**  
 3033 N.W. NORTH RIVER DRIVE, MIAMI, FL 33142  
**SITE PLAN**

<b>DCES</b>
SCALE: 1"=30'
DATE: 4-10-07
DRWN. BY: M.K.
CHK. BY: H.B.J.
P.B. PG.
SHEET NO.: 732-98
SHEET: 1 OF 1

i/25/2008 ATTACHMENT 6  
 Response to NOD Item #8

# Florida Department of Environmental Protection

## Interoffice Memorandum

<b>DATE:</b> _____		<b>ENFORCEMENT TRACKING</b>	
<b>TO:</b> Jack Long      District Director <b>FROM/THROUGH:</b> Joe Lurix      Program Administrator Karen Kantor      Environmental Manager _____      Environmental Specialist _____      Document Reviewer		<b>INITIAL</b> 	<b>DATE</b> 2-12-10 4/12/10 4/19/10
<b>PROGRAM:</b> Hazardous Waste			
<b>Case Name/ No.:</b> Cliff Berry Inc. Miami Terminal		<b>Facility ID#:</b> FLD058560699	
<b>OGC#</b> N/A		<b>County:</b> Miami-Dade	
<b>Description of Violations:</b> Hazardous waste determination, leaking used oil container, violations of permit conditions involving used oil secondary containment, Contingency Plan violations			
<b>Case Summary:</b>			
<b>Penalty Summary:</b>			
<b>Attachment(s):</b> Warning Letter, Inspection Report, Penalty Calculation Worksheets			
<b>CHECKLIST FOR WARNING LETTER</b>			
<b>Case Manager:</b> Please check off all items that apply to this order.			
<b>STEP # 1:</b>	<b>X</b>	Cover Letter ( <b>Director Signs</b> )	
<b>Contents Checklist</b>	<b>X</b>	Copy of Inspection Report and/or Checklist, No. of Exhibits _____	
	<b>X</b>	Penalty Calculations (Director or Designee Signs)	
		Penalty Authorization (do not mail)	
		Ranking - Potential For Harm	
		Other/Comments: _____	
		Record in PA/Director Log	
<b>STEP # 2:</b>		Send Certified, Federal Express or Email to Respondent	
<b>Mailing &amp; Copying Procedure</b>		Cover Letter ( <b>Signed by Director</b> )	
		Inspection Report ( <b>Date Stamp</b> )	
	File Only	<b>Original Penalty Calculations (Signed by Director)</b>	
		Copy of Penalty Calculations to Respondent	
	File Only	Ranking - Potential For Harm	
		cc: Copies of Letter & Inspection Report	
		Special Instructions: _____	
		Record Date Mailed in PA/Director Log	
<b>STEP # 3:</b>		<b>CASE FILE:</b>	
<b>File Procedure</b>	File Only	<b>Original Penalty Calculations (Signed by Director)</b>	
	File Only	Ranking - Potential For Harm	
		Copy of Inspection Report	
		<b>ELECTRONIC ARCHBOARD:</b>	
		Copies of Letter & Inspection Report	
		INSERT INTO OCULUS	
		<b>SPECIAL INSTRUCTIONS:</b> _____	
		<b>HW ONLY: Insert through SWIFT DMA</b> <b>HW ONLY: Distribute to cc: parties via OCULUS</b>	



Florida Department of  
Environmental Protection  
Hazardous Waste Inspection Report

**FACILITY INFORMATION:**

Facility Name: Cliff Berry Inc - Miami Terminal

On-Site Inspection Start Date: 12/10/2009 On-Site Inspection End Date: 12/10/2009

ME ID#: 51668

EPA ID#: FLD058560699

Facility Street Address: 3033 NW North River Dr, Miami, Florida 33142-6304

Contact Mailing Address: PO Box 13079, Fort Lauderdale, Florida 33316-0100

County Name: Miami-Dade

Contact Phone: (954) 763-3390

**NOTIFIED AS:**

CESQG (<100 kg/month)

Transporter

Used Oil

**INSPECTION TYPE:**

Routine Inspection for Used Oil Processor facility

Routine Inspection for Hazardous Waste Transporter facility

Routine Inspection for Transfer Facility

Routine Inspection for Used Oil Transfer Facility

Routine Inspection for Universal Waste Transporter facility

**INSPECTION PARTICIPANTS:**

Principal Inspector: Karen E Kantor, Inspector

Other Participants: Kathy Winston, Environmental Consultant; Leroy Arce, Facility Manager; Zack Davis, Project Manager

**LATITUDE / LONGITUDE:** Lat 25° 47' 47.6926" / Long 80° 14' 38.8063"

**SIC CODE:** 4953 - Trans. & utilities - refuse systems

**TYPE OF OWNERSHIP:** Private

**Introduction:**

Cliff Berry Inc. - Miami Terminal (CBI Miami) is located in an industrial area near the Miami River in Miami, Florida. CBI Miami is located on an approximately 3.39-acre parcel of land owned by Cliff Berry, Inc., and is served by City of Miami water and sewer. The facility is authorized to process used oil, oily wastewater, petroleum contact water, oily solid waste, and used oil filters under their active permits #77628-HO-004 and #77628-SO-005. The facility is also registered as a Hazardous Waste Transporter and Transfer Facility (less than 10-day storage), and a Small Quantity Handler of Universal Waste batteries, mercury lamps and devices, and pharmaceutical waste. In addition, CBI Miami is a Conditionally Exempt Small Quantity Generator (CESQG) of hazardous waste. The facility employs 20 people, and operates Monday through Friday from 6am to 9pm.

The facility was previously inspected by the Department on January 29, 2008.

**Process Description:**

The two main streams managed at the facility are used oil and oily wastewater. The oily wastewater treated at the facility consists of bilge water from cruise ships, and wastewaters and petroleum contaminated water from facilities such as car wash and fuel distribution centers.

During the inspection, the Department was escorted by facility personnel through the bulk

offloading/pit area; the tank farm and used oil processing area; the wastewater pre-treatment plant; the container offloading and hazardous waste 10-day storage areas; the used oil filter processing building; and the solid waste roll-off storage area. At the time of the inspection, all storage tanks were reportedly in use, and inspectors observed all tanks were properly labeled.

During the inspection of the bulk offloading/pit area, inspectors observed one unlabeled 55-gallon drum of unknown contents.

During the inspection of the used oil processing area, inspectors observed a mobile Gencor boiler. Mr. Arce reported that the facility's boiler had been out of service for one week--approximately two weeks prior--for major repairs, and the mobile boiler was brought on site to continue operations during the downtime. The facility's boiler was in working order and operating at the time of the inspection.

During the inspection of the solid waste roll-off storage area, inspectors observed four frac tanks stored in the area. Inspectors observed evidence of a leak in one of the frac tanks in the form of puddled used oil within the secondary containment berm. Pursuant to the facility's operating permit, this area is not authorized for the storage of used oil containers.

Following the facility walk-through, Department inspectors reviewed the facility's available used oil- and hazardous waste-related documentation. During the records review, the facility's employee training records, documentation of the distribution of the facility's Contingency Plan, and the facility's Closure Plan were not available for inspector review. In addition, an adequate and updated Contingency Plan was not available for review.

Potential violations and areas of concern noted during the inspection are indicated below.

#### **New Potential Violations and Areas of Concern:**

##### **CESQG Checklist - 40 CFR 261.5**

Type:	Violation
Rule:	262.11
Question Number:	7.1
Question:	Did the facility conduct a waste determination on all wastes generated?
Explanation:	One unlabeled 55-gallon drum of unknown contents was observed in the unloading pit area. A partial identifier indicating "Pep Boys" was noted.
Corrective Action:	Perform a waste determination of the contents of the drum, and properly label and store the container for disposal.

**Attachments:**



Inspection Date: 12/10/2009

#### Unlabeled Drum




---

#### Transporters Checklist

Type: Violation

Rule: 62-730.171(2)(a)

Question Number: 1.390

Question: Does the facility have personnel training records including job title, description of position, and description of employee's training?

Explanation: Employee training records were not available for review during the inspection.

Corrective Action: Provide legible documentation of compliance with training requirements

---

#### Used Oil Processor

Type: Area Of Concern

Rule: 62-710.850(5)(a)

Question Number: 28.90

Question: Are the filters stored in above ground containers which are (All of the following checkboxes must be checked for this question to be marked Ok, otherwise this question must be marked as Not Ok.):

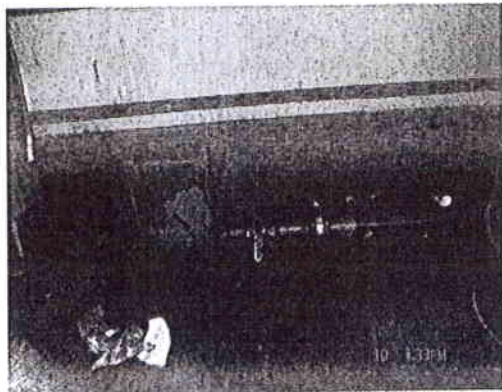
Explanation: Release of used oil was observed beneath the inoperable filter crusher.

Corrective Action: Stop the leak from the machine, and document the response to the release.

**Attachments:**

Inspection Date: 12/10/2009

### Leak Under Filter Crusher



Type: Violation

Rule: 279.54(b)

Question Number: 28.170

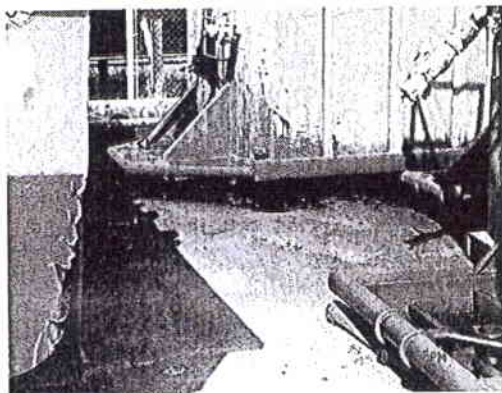
Question: Are containers and tanks in good condition and not leaking?

Explanation: One frac tank stored within the solid waste roll-off storage area is leaking used oil into secondary containment. This is also a violation of General Permit Condition paragraph 32.

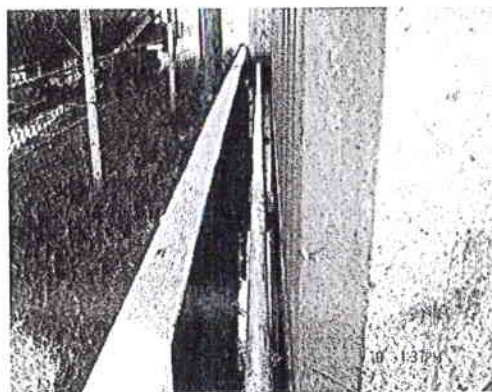
Corrective Action: Immediately stop leak and respond to spill. Provide documentation of response to the Department.

### Attachments:

#### Leaking Frac Tank



#### Leaking Frac Tank



Type: Violation

Rule: 279.54(c)

Question Number: 28.180

Question: Are containers provided with secondary containment consisting of walls and floor at a minimum?

Explanation: The secondary containment of the solid waste roll-off storage area is not adequate to hold the leaking frac tank. In addition, the area is not intended to hold used oil containers. This is also a violation of General Permit Condition paragraph 27.

Corrective Action: The frac tanks observed on site need to be stored within adequate secondary containment, or emptied of their contents, if any. The solid waste storage area is not designated for the storage of used oil containers.

---

Type: Violation

Rule: 279.52(b)(2)

Question Number: 28.340

Question: Does the plan include the following?

Explanation: Inspectors noted the Contingency Plan lacked the locations of emergency equipment within the facility.

Corrective Action: Update Contingency Plan and provide documentation to the Department.

---

Type: Violation

Rule: 279.52(b)(3)

Question Number: 28.360

Question: Has the plan been distributed to the:

Explanation: Documentation of the distribution of the facility's current Contingency Plan was not available during the inspection.

Corrective Action: Distribute updated version of Contingency Plan and provide documentation to the Department (certified mail receipts).

---

Type: Area Of Concern

Rule: 62-710.800(3)(a)

Question Number: 28.730

Question: Has the facility submitted a written closure plan?

Explanation: Facility did not have a copy of the approved Closure Plan for the facility.

Corrective Action: Maintain a copy of the facility's Closure Plan.

---

#### Summary of Potential Violations and Areas of Concern:

##### Potential Violations

Rule Number	Area	Date Cited	Explanation
CESQG Checklist - 40 CFR 261.5 262.11		12/10/2009	One unlabeled 55-gallon drum of unknown contents was observed in the unloading pit area. A partial identifier indicating "Pep Boys" was noted.
Transporters Checklist 62-730.171(2)(a)		12/10/2009	Employee training records were not available for review during the inspection.

Used Oil Processor

Rule Number	Area	Date Cited	Explanation
279.54(b)		12/10/2009	One frac tank stored within the solid waste roll-off storage area is leaking used oil into secondary containment. This is also a violation of General Permit Condition paragraph 32.
279.54(c)		12/10/2009	The secondary containment of the solid waste roll-off storage area is not adequate to hold the leaking frac tank. In addition, the area is not intended to hold used oil containers. This is also a violation of General Permit Condition paragraph 27.
279.52(b)(2)		12/10/2009	Inspectors noted the Contingency Plan lacked the locations of emergency equipment within the facility.
279.52(b)(3)		12/10/2009	Documentation of the distribution of the facility's current Contingency Plan was not available during the inspection.

#### Areas of Concern

Rule Number	Area	Date Cited	Explanation
Used Oil Processor			
62-710.850(5)(a)		12/10/2009	Release of used oil was observed beneath the inoperable filter crusher.
62-710.800(3)(a)		12/10/2009	Facility did not have a copy of the approved Closure Plan for the facility.

#### **Conclusion:**

The facility was not in compliance at the time of the inspection. Please provide the requested documentation of corrective actions within thirty (30) days.

**Signed:**

A hazardous waste compliance inspection was conducted on this date, to determine your facility's compliance with applicable portions of Chapters 403 & 376, F.S., and Chapters 62-710, 62-730, 62-737, & 62-740 Florida Administrative Code (F.A.C.). Portions of the United States Environmental Protection Agency's Title 40 Code of Federal Regulations (C.F.R.) 260 - 279 have been adopted by reference in the state rules under Chapters 62-730 and 62-710, F.A.C. The above noted potential items of non-compliance were identified by the inspector(s).

This is not a formal enforcement action and may not be a complete listing of all items of non-compliance discovered during the inspection.

Karen E Kantor

PRINCIPAL INSPECTOR NAME

Inspector

PRINCIPAL INSPECTOR TITLE



PRINCIPAL INSPECTOR SIGNATURE

12/10/2009

DATE

Kathy Winston

INSPECTOR NAME

Environmental Consultant

INSPECTOR TITLE

NO SIGNATURE

INSPECTOR SIGNATURE

FDEP

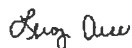
ORGANIZATION

Leroy Arce

REPRESENTATIVE NAME

Facility Manager

REPRESENTATIVE TITLE



REPRESENTATIVE SIGNATURE

Cliff Berry

ORGANIZATION

12/10/2009

DATE

Zack Davis

REPRESENTATIVE NAME

Project Manager

REPRESENTATIVE TITLE

NO SIGNATURE

REPRESENTATIVE SIGNATURE

Cliff Berry

ORGANIZATION

NOTE: By signing this document, the Site Representative only acknowledges receipt of this Inspection Report and is not admitting to the accuracy of any of the items identified by the Department as "Potential Violations" or areas of concern.

## PENALTY COMPUTATION WORKSHEET

Facility Name: Cliff Berry Inc - Miami Terminal  
 Facility Address: 3033 NW North River Dr, Miami, Florida 33142-6304

Department Staff Responsible for the Penalty Computations:

  
 Karen Kanjor

  
 Kathy Winston

  
 Michelle Robinson-Austin

Date: 4/12/2010

### PART I - Class A Penalty Determinations

	Alleged Violation Type	Potential for Harm	Extent of Dev.	Matrix Amount	Multi-day	Adjustments	Economic Benefit Calculation	Total
1	40 CFR 279.54(b) Leaking Used Oil Container	Minor*	Major	\$1,199				\$1,199
2	40 CFR 279.54(c) Used Oil Secondary Containment	Minor*	Major	\$1,199				\$1,199
3	40 CFR 279.52(h)(2) & (3) Content and Distribution of Contingency Plan	Major	Major	\$10,000				\$10,000
4	40 CFR 262.11 Waste Determination	Minor*	Major	\$3,868			Not Taken	\$3,868
5	62-730.171(4)(a), F.A.C. [40 CFR 265.16(d)] Training	Minor	Moderate	\$1,933				\$1,933
* See attached Ranking System for Potential for Harm Worksheets						Penalties Subtotal:		\$18,199
						Department Costs:		\$500
						Total:		\$18,699

All penalty calculations are based on the Florida Department of Environmental Protection Hazardous Waste Regulation Section's "Guidelines for Characterizing RCRA Violations" and "Guidelines for Characterizing Used Oil Violations" revised as of May 2008. Certain violations require Potential for Harm Ranking System characterization and have been utilized where applicable; refer to the attached Ranking System for Potential for Harm worksheets. The attached civil penalty worksheets are formulated and tendered only in the context of settlement negotiations in order to attempt to reach a cooperative settlement.

  
 Jack Long  
 District Director  
 Florida Department of Environmental Protection Southeast District

Date

2-12-2010

## PENALTY COMPUTATION WORKSHEET

(continued)

Facility Name: Cliff Berry Inc - Miami Terminal  
Facility Address: 3033 NW North River Dr, Miami, Florida 33142-6304

### Part II - Multi-day Penalties and Adjustments

	Dollar Amount:
Adjustments:	
Good Faith/lack of good Faith prior to Discovery:	_____
Justification:	
Good Faith/lack of good Faith after Discovery:	_____
Justification:	
History of Non-Compliance:	_____
Justification:	
Economic Benefit of Non-Compliance:	\$155
Justification:	<u>For Violation #4, economic benefit was calculated based on avoided costs. However, the calculated amount, \$155, is not at least \$3,000 when the gravity-based total penalty is less than \$30,000; economic benefit was therefore not pursued.</u>
Ability to pay:	_____
Justification:	
Multi-Day Penalties:	Dollar Amount:
Number of days adjustment factor(s) to be applied:	_____
Justification:	
Number of days matrix amount is to be multiplied:	_____
Justification:	

### Part III-Other Adjustments Made After Meeting With Responsible Party

	Dollar Amount:
Adjustments:	
Relative Merits of the Case:	_____
Resource Consideration:	_____
Other Justification:	_____

\_\_\_\_\_  
Jack Long Date  
District Director  
Florida Department of Environmental Protection Southeast District



# RANKING SYSTEM FOR POTENTIAL FOR HARM WORKSHEET FOR HAZARDOUS WASTE VIOLATIONS

FACILITY NAME: Cliff Berry Inc - Miami Tenninal

Item Number	Alleged Violation Type	Nature of Waste	Amount of Waste	RECEPTORS		Total Score	Potential for Harm
				Discharges	Affected Population		
4	40 FR 262.11 Waste Determination	4	2	1	2	9	Minor

Assigned by:

Karen Kantor  
Karen Kantor

Date: 4/12/2010

for Joe Luv  
Kathy Winston

Michelle D. Robinson  
Michelle Robinson-Austin

## HAZARDOUS WASTE SCORING SYSTEM

Nature of Waste	Amount of Waste	Receptors	
		Discharges	Affected Population
CATEGORY A = 8 (High hazard wastes)	> 25 drums = 8	Discharge = 4	> 1000 People = 4
	6 - 25 drums = 5	Potential Discharge = 4	100 - 1000 People = 3
CATEGORY B = 4 (Typical hazardous wastes)	< 6 drums = 2	No Discharge = 1	10 - 100 People = 2
			< 10 People = 1

If the Total Score is

19-24

13-18

8-12

Then the Potential for Harm is

MAJOR

MODERATE

MINOR

# RANKING SYSTEM FOR POTENTIAL FOR HARM WORKSHEET FOR USED OIL VIOLATIONS

FACILITY NAME: Cliff Berry Inc - Miami Terminal

Item Number	Alleged Violation Type	Nature of Waste	Amount of Waste	RECEPTORS		Total Score	Potential for Harm
				Discharges	Affected Population		
1	40 CFR 279.54(b) Leaking Used Oil Container	4	2	4	2	12	Minor
2	40 CFR 279.54(c) Used Oil Secondary Containment	4	2	4	2	12	Minor

Assigned by:

Karen Kantor

Date: 4/12/2010

Kathy Winston

Michelle Robinson-Austin

## USED OIL SCORING SYSTEM

Nature of Waste	Amount of Waste	Receptors	
		Discharges	Affected Population
Category 1 Used Oil = 4	> 10 drums = 8	Discharge = 6	> 1000 People = 4
	3 - 10 drums = 5	Potential Discharge = 4	100 - 1000 People = 3
Category 2 Used Oil Filters = 2	< 3 drums = 2	No Discharge = 1	10 - 100 People = 2
			< 10 People = 1

If the Total Score is

19-24

13-18

6-12

Then the Potential for Harm is

MAJOR

MODERATE

MINOR

## ECONOMIC BENEFIT CALCULATION

FACILITY: Cliff Berry Inc - Miami Terminal  
 VIOLATION: Waste Determination - 40 CFR 262.11

The facility failed to perform a waste determination on one drum of unknown contents.

The economic benefit is based on avoided costs, per the DEPs Guidelines for Characterizing RCRA Violations and the September 10, 2007 Revised Prices for Calculating Economic Benefit.

Avoided Costs (AC)	\$	250	<i>analytical services</i>
		X	<i>Number of containers</i>
TOTAL AC	\$	250	

Delayed Costs (DC)			<i>N/A</i>
		X	
TOTAL DC	\$	-	

---


$$\begin{array}{rcl}
 AC(I-T) & + & DC(I) \\
 \text{where } T=38\%, I=10\% & & \\
 \hline
 \$250*(1-0.38) & + & \$0*(.10) \\
 \hline
 \text{Therefore, } \$155 & + & \$0 \\
 \hline
 \end{array}
 = \begin{array}{l} \text{ECONOMIC BENEFIT} \\ \\ \text{EB} \\ \\ \$155 \end{array}$$

The economic benefit amount (all violations added together) was compared to the chart on page 28 of the RCRA Civil Penalty Policy Manual. Economic Benefit was not pursued based on the following:

When the gravity-based and multi-day total penalty is:

- \$30,000 or less
- \$30,001 to \$49,999
- \$50,000 or more

Economic Benefit should be pursued if it totals:

- at least \$3,000
- at least 10% of the proposed penalty
- \$5,000 or more

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000081921

Entity Name: CLIFF BERRY, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

851 ELLER DRIVE  
FORT LAUDERDALE, FL 33316

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 13079  
FT. LAUDERDALE, FL 33316

## New Mailing Address:

FYI

FEI Number: 65-0511114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BERRY, CLIFF SR  
851 ELLER DRIVE  
FT. LAUDERDALE, FL 33316 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BERRY, CLIFF SR.  
Address: 851 ELLER DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: BERRY, CLIFF II  
Address: 851 ELLER DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete  
Name: BERRY, SANDRA B  
Address: 851 ELLER DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: S ( ) Delete  
Name: BERRY, BETTY  
Address: 851 ELLER DR.  
City-St-Zip: FORT LAUDERDALE, FL 33316

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLIFF BERRY SR.

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date

## PENALTY COMPUTATION WORKSHEET

(continued)

Facility Name: Cliff Berry Inc - Miami Terminal

Facility Address: 3033 NW North River Dr, Miami, Florida 33142-6304

### Part II - Multi-day Penalties and Adjustments

#### **Adjustments:**

Dollar  
Amount:

Good Faith/lack of good Faith prior to Discovery:

Justification:

Good Faith/lack of good Faith after Discovery:

Justification:

History of Non-Compliance:

Justification:

Economic Benefit of Non-Compliance:

\$155

Justification: For Violation #4, economic benefit was calculated based on avoided costs. However, the calculated amount, \$155, is not at least \$3,000 when the gravity-based total penalty is less than \$30,000; economic benefit was therefore not pursued.

Ability to pay:

Justification:

#### **Multi-Day Penalties:**

Dollar  
Amount:

Number of days adjustment factor(s) to be applied:

Justification:

Number of days matrix amount is to be multiplied:

Justification:

### Part III-Other Adjustments Made After Meeting With Responsible Party

#### **Adjustments:**

Dollar  
Amount:

Relative Merits of the Case:

Resource Consideration:

Other Justification:

-\$15,499

The following reductions to the penalty amounts were discussed/agreed between the facility and the Department: Violation #1 stands at \$1,199; Violation #2 reduced to \$600, which is the bottom value of the matrix box for the Minor/Major characterization for this violation; Violation #3 reduced to the ELRA penalty amount of \$1,000 for the same violation; and Violations #4 and #5 rescinded. This yields a total of \$2,799. In an effort to settle the matter in a timely manner and avoid the risk litigation, District Staff recommends an additional reduction to \$2,700 in penalties for the facility's expedited return to compliance, and expenses reduced to \$250, for a total settlement amount of \$2,950.00.

Jack Long

District Director

Florida Department of Environmental Protection Southeast District

Date