From: Ashwood, Janet
To: jwilson@flagerce.com

Cc: Epost HWRS; Horlick, Susan; Knauss, Elizabeth

Subject: Florida Used Oil Transporter Registration Letter for Flagler Construction Equipment _Tampa (FLR000088518)

Date: Monday, July 30, 2018 4:05:18 PM
Attachments: Flagler Construction Equipment Tampa.pdf

Dear Jon Wilson:

Please note: your Used Oil (UO) registration expires June 30, 2019. Pursuant to Rule 62-710.600(2)(e) F.A.C., you are required to maintain valid liability insurance during the entire UO registration period.

In an effort to provide a more efficient service, the Florida Department of Environmental Protection's Permitting and Compliance Assistance Program Authorization Representative is forwarding the attached document(s) to you by electronic correspondence in lieu of a hard copy through the normal postal service.

We ask that you verify receipt of this document by simply hitting "reply" to this message, with no message text required. If your email address has changed or you anticipate that it will change in the future, or if for some reason you need a hard copy of this documents, please advise accordingly in your reply. You may also update this information by contacting me at the number below.

The attached document(s) are in "pdf" format and will require Adobe Reader 6 or higher to open. You may download a free copy of this at www.adobe.com./products/acrobat/readstep2.html.

Please note, our documents are sent virus free. However, if you use Norton anti-virus software, a warning may appear when attempting to open the document. Please disregard this warning if it happens.

We look forward to your reply and should you have any questions regarding the attached document(s), as stated previously, you may contact me at the number below.

Sincerely,

Janet Ashwood
Environmental Consultant
Department of Environmental Protection
Bob Martinez Center
Waste Compliance Assistance Program, MS #4560
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Direct: 850.245.8789

Email: <u>Janet.Ashwood@dep.state.fl.us</u>

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

(850) 245-8707

Date Received (for FDEP Official Use Only)

Please use the instructions document to complete this form EPA ID: 1. Reason for Mark 'X' in To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, used oil activities, or PCW activities). the correct box: Submittal (all submitters must To provide subsequent notification (to update status and facility identification information). (must choose one complete pages 1 and 2 if a notification) and sign page 5. To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5) Pages 3 and 4, - complete as applicable) FL Registration(s) Used Oil (see page 4) UW Mercury (see page 3) ☐ HW Transporter (see page 4) 2. Facility or **Business Name** Name of Operator: Date became Operator: 11 / 10/14 3. Facility Operator Flagter Const (List additional Opera-Phone Number: Street or P.O. Box: tors in the comments 5151 Dr. ML (239)481-855 section). Zip Code: City or Town: State: ☑Private ☐Federal ☐Municipal ☐State ☐County ☐Other Operator Type: Physical Street Address: ☐ Vessel 4. Facility Physical Location City or Town: State: Zip Code: Information (No P.O. Boxes) County: Country (if not USA): Same address as #3 above or: 5. Facility North American Industry (required) B. Classification System (NAICS) Code(s) (at least 5 digits) D. Same address as #__ above or: Street or P.O. Box: 6. Facility or **Business** Country (if not USA): City or Town: State: Zip/Postal Code: **Mailing Address** Last Name: First Name: Title: 7. Facility or andro **Business RCRA** Phone Number: Extension: E-Mail: **Contact Person** 1239)3 Street or P.O. Box: Same address as Country (if not USA): City or Town: State: Zip Code: #_ above or: Name of Owner: 8. Real Property Date became Owner: (FL Land) Owner New Owner mm dd Phone Number: of the Facility's Street or P.O. Box: **Physical Location** -1190 8501 (List additional owners in the com-ments section.) City or Town: State: Zip Code: Country (if not USA): ☐ Same address as ☐ Municipal State County Other Federal # above or:

RCF	RA Hazardous V	Vaste	Status No	tification or Out of	Busi	ness Notific	cation		EPA ID	No. FL	ROCC	213629
9. R	CRA Hazard	ous V	Vaste Act	ivities at this Fac	cility:	(Mark '	K' in a	ll tha	t apply):			
(A)	(1)Generator of	Hazar	dous Waste			For Ite	ns 2 th	rough	7, mark '	X' in all t	that apply.	
٦	Yes 🔽 No	(Do not	include Univ	ersal Waste or Used Oil)	(2) T	reater,	Store	r, or Dispo	ser of H	azardous W	Vaste
If	YES, Choose on a. Large Qua			ving three categories.			(at you	ur facil	ity) Note:		lous waste p required for	ermit this activity.
,	Generates greater per hazardous	in any r montl waste;	calendar mo 1 (kg/mo) (2 or Greater t	onth 1,000 kilograms, 200 lbs.) of non-acuthan 1 kg (2.2 lbs) least once a year)				b. Op	-	on-Comm ng: Postcl	ercial TSD osure or Co	rrective Action
	100kg/mo lbs.) of no (2.2 lbs) o	in any but les n-acute r less o	calendar moss than 1,000 hazardous of acute hazar	GQG): onth greater than 0 kg/mo (>220 to <2,2 waste and/or 1 kg rdous waste	200		Spec Note:	ify: A pe empt I	Comm rmit is requ Boiler and	ercial [ired for sto /or Indus	e (at your fand Non-Contrage prior to trial Furna	nmercial. recycling.
	(at least or	nce a y	ear)				Ч		-	-	Burner Ex	-
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					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							
_			_	activities that apply	.						eived from	
				ne, not on-going)	1.00	(6)	→ Re	ceives	Hazardou	s Waste	from Off-Si	ite
0 0	f. United State	s Impo	rter of hazar	me per year:SQG_ dous waste adioactive) Generator			☐ Un	dergro	ound Injec	tion Con	trol	
	your facility. Lis	st them	in the order	Regulated Hazare they are presented in ist codes routinely or	the re	gulations (e.	g., D00	1, D00	3, F007, F	C019, P01	2, U112).	
8	9			10	11		12			13		14
15	10	6		17	18		19			20		21
13	10			17	10		19			20		21
<u> </u>				longer handling wast						ank and sl	kip Section	12-16):
(A)				e at This Facility (S								
	(1) Busines	s no lo	nger genera	tes, transports, treats,	stores	, disposes of,	or oth	erwise	handles ar	ny regulat	ed waste.	
(B)	-		-	ction only if <u>all</u> busin								
	(1) Closed	at this	location and	moved or moving to	anoth	er - Submit a	new F	orm 87	700-12FL f	for the nev	w location if	f you will
	(2) Out of	Busine	ss - Busines	s closed on				(da	ate)			
	(C) Property T	ax Def	ault			(D)	Petitio	n for E	Bankruptc	y Protect	tion	*
12-1	4 — Registra	tion A	ctivities	Contact Informa	tion	(only if this	submis	sion is	a registrat	ion or reg	istration inf	ormation update):
	Same as Facility RC		First Name:			Last Name:					Title:	
			Phone Num	ber:		Extension:	Е	-Mail:				
	ct for: HW Transporter		Street or P.0	O. Box:		-						
	Jsed Oil Handler Jniversal Waste		City or Tow	/n:			S	tate:(C	Country):		Zip Code:	

F	LROO	213	5620
NI= P	man.	DA	200

Universal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No.						
12. Univers	sal Waste (UW) Activities (Mark 'X' and complete all that apply):						
A. Federal Notification	Todat and Defined Bar go Quantity mander (BQXX) Some areas seem and the second services and seem and the second services and the second services and the second services are services are services and the second services are services						
	Accumulates: 🗖 a. UW Batteries 🗖 b. Pesticides 🗖 c. Pharmacet	uticals					
	d. Mercury Containing Devices e. Mercury Contai	ning Lamps					
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	JW.					
B. Florida U	Iniversal Pharmaceutical Waste (UPW): one-time registration						
☐ Pharma	aceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)						
☐ Pharma	accuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW	() accumulated					
Revers	se Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Hea	lth [DOH])					
C. Florida A	Annual Mercury Handler Registration:						
Devices operatorm [Chapte of Mercury-C	For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Containing Lamps and Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.						
	a is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-l time registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH re						
☐ For-hi	re Transporter of Universal Waste Mercury-Containing Lamps or Devices						
☐ For-hi	ire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration					
☐ Mercı	rry-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required					
☐ Mercı	ary-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler						
☐ Mercu	ary-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration +					
☐ Mercı	ary-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	one—time \$1,000 fee+ More Requirements (contact FDEP)					
	(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) Annual Registration Required						
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).							
13. Other Sta	ite Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transp	ort [62-740 F.A.C.]					
	: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to R						

Hazardous Waste and Used Oil Transporter Registration	ns	EPA ID No. FLRCOO213629							
14. HW Transporter Activities: (Mark 'X' and complete all tha	at apply if you need	to register your HW Transporter activities)							
renew their registration. Evidence of casualty/liability insurance p Transfer facilities must submit several additional documents as detailed changes. Registered transporters and transfer facilities may only begin of	Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. Generators of hazardous waste who transport waste only within the boundaries of their facility should not register.								
A. HW Transporter Registration Information (must be of This facility is a registered transporter of hazardo		y and when this information changes)							
This form is: Initial Registration Renewal Notification of changes Cancel Registration 1. For own waste only 2. For commercial purposes 3. Both commercial and own waste									
4. Transportation Mode Air Rail Highway	Water U O	ther - specify							
B. HW Transfer Facility Registration Information (mu	-								
☐ This facility is a Hazardous Waste Transfer Faci									
This form is: Initial Registration Renewal	Notification of ch	hanges							
Note: Hazardous Waste transfer facilities must comply with the	requirements of Ru	tle 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.							
The Transfer Facility records required under the provision of Our mailing (business) address	ions of Rule 62-730.1 The site (facility)								
Please enter the EPA ID Number of the HW Transporter who carries the	insurance for this Tr	ransfer Facility:							
Please see the top of page 5 for additional items that must be Transfer Facilities [Rule 62-730.171(3), Florida Administrative		on to the above registration for Hazardous Waste							
15. Used Oil and Oil Filter Activities: : (Mark 'X' and comp	lete all that apply it	f you need to register your used oil activities),							
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facili annually register with the Department using this form. All except Flor \$100 registration fee. This form is: Initial Registration Renewal If applicable, a check or money order, in the amount of \$100,	rida used oil (UO) Pro Notification of	rocessors and collection centers must pay an annual f changes Cancel Registration							
(1) Used Oil Transporter - mark activities: (occurring in Florida)	1	er Management (must annually register)							
a. Transporter (off-site) and noncontiguous locations	a. Transpo								
☑ b. Transfer Facility		er Facility ssor (Annual Report Required)							
(2) Collection Center (From businesses, no more than 55 gal per shipment)	d. End U								
(3) Used Oil Processor (A permit is required.)		equired under the provisions of Rule 62-710.510,							
(4) Off-Specification Used Oil Burner		t at (check one): ing (business) address							
(5) Used Oil Fuel Marketer	Uur maili	ing (outsiness) address							
Please see the top of page 5 for additional items that must be submexempt Used Oil Transporters.	itted in addition to	the above registration and fees required for non-							

Transfer Facility and Used Oil Transporter requirem	ents and required signature page	EPA ID No.	∞	213629					
following items are required to be submitted with the init	(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [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 responsib	oility [Rule 62-730.171(3)(a)3., F.A.C.]							
_A brief general description of the transfer facilit A copy of the facility closure plan [Rule 62-730]	•	, F.A.C.]							
A copy of the contingency and emergency plan									
A map or maps of the transfer facility [Rule 62-									
15 cont.) Used Oil Transporters: (Exemptions in 40 CFR 279.40(a)(1-4)) In addition to the requirements on Page 4 Section 15: • ALL registered UO Handlers must submit an annual report except generators transporting UO from noncontiguous operations within									
their own company.	all allitual report except generators tra	disporting 00 from noncor	mguou	s operations within					
 UO transporters transporting off-site over UO transporters transporting more than 50 submission as a certified used oil transport 	00 gallons/year must submit proof of in	nsurance annually, and mus	st sign a						
The used oil annual report is attached	Evidence of Liability Insurance pu	rsuant to 62-710.600(2)(e).	, F.A.C	C. is attached.					
16. Comments (attach a page if more space is need 8418 Palm River Road, Tam	16. Comments (attach a page if more space is needed): Corporate Office is located at 8418 Palm River Road, Tampa, FL 33619.								
17. 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.									
I certify as a Used Oil Transporter that I am tation and have an annual and new employee training bility is demonstrated by the Used Oil Transporter O	g program in place covering the appli-	cable used oil rules. Eviden	ce of f						
Signature of owner, operator, or an authorized representative	Print Name and	Title	Used Oil	Date Signed (mm-dd-yyyy)					
My Comments	Barton Montgon	N CFO	\(\begin{array}{c}\)	3-14-2019					
		,							
If the person that filled in this form is not the Facilit	y Contact or Operator, please comp	lete the information below	v:						
Usa Albury 400)965-5945 lalbury@flaglerce.com									
(Name of person completing this form)	(Phone Number)	(E-mail Address)							



Mail Station 4560, 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 4-23-13 Incorporated in Rule 62-710.510(5)

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 the reporting period January 1, 2018 through December 31, 2018

Use the information recorded in your Record Keeping Form	1 [62-710.901(2)] or equivalent	to complete	this document.				
SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS								
1. Company Name: Flagler Construction Equipm	Telephone No	(239) 4	81-859	54				
Site Address: 5151 Dr. MLK Blvd., Fort Myers, FL 33905								
	3, EPA ID No.	PROOC	2136	29				
☐ Check box if any of the above items (1-3) have changed since your last registration								
4. Name of person preparing report (please print) LSA Albun	1							
Title: Di Complance, Safety Phone number (if diffe	rent from #2, above)	(_)						
5. Type of operation (check as many as apply to your operations) Used Oil: Transporter Transfer Facility Collection Center/Aggregation Point Processor Marketer Burner (of off-specification used oil) Used Oil Filter: Transporter Transfer Facility Processor End User								
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL	L HANDLERS. USI	ED OIL FILTER I	IANDLERS SEI	E SECTION C)				
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Industrial	Mixed	Total				
a. In Florida	0	8281	0	828				
b. From out of State	0	0	0	0				
c. Beginning Inventory				345				
d. Total (sum of totals from Lines $a + b + c$)				8626				
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)			In State	Out of State				
N - Transferred to another facility (not an end use)		8	185					
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		8	185					
4 End of year on hand estimate (difference between Line 1d and Line 3)			14					

SECTION C USED OIL FILTE	ERS (OPTIONAL	L) (USE TABLE BELOW FOR CONVERSIONS)	CHECK	COLUMN IF OUT OF STA	ге 🖖	
1. Number of filters on hand from		500				
2. Number of used oil filters colle	ected		\	3166		
3. Total number of used oil filters			1	3666		
4. Disposition of used oil filters c		a. Transferred to another registered facility		2500		
		$\mathbf{b.}$ Burned for energy recovery at a Waste-To-Energy facility				
		c. Transferred directly to a metal foundry for recycling				
		d. TOTAL		2500		
5. End of year, on hand estimate	(Line 3 minus Lir	ne 4d)	1	1166		
6. Gallons of used oil collected as	s a result of filter	processing		586		
7. Gallons of used oil transferred	to a used oil hand	iler (transporter or processor)		8771		
8. Volume of oily waste collected	d and managed as	a result of filter processing gallons 🗆 cubic yards	C	586		
9. Description of oily waste management Olly rags and pads sent to Safety Kleen DIRECTIONS FOR SECTION C Fearlity to be recycled. Conversion Table						
	One 55-gallon d	rum of <u>crushed</u> used oil filters = approximately <u>400</u> used oil filt	ters	,		
	filters					
	One ton of drain	ned used oil filters = approximately 2,350 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 Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).



8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

(850) 245-8707

Date Received (for FDEP Official Use Only)

EPA ID: 두 👢	R0000	8851	8 Please	ase the instruc	tions o	document to comp	lete this form	n
1. Reason for Submittal (all submitters must complete pages 1 and 2 and sign page 5.	the correct box: (must choose one	the correct box: waste, universal waste, used oil activities, or PCW activities). (must choose one To provide subsequent notification (to update status and facility identification information).						
Pages 3 and 4, - complete as applicable)	FL Registration(s)	UW Mercur	y (see page 3)	☐ HW	Transp	porter (see page 4)	☐ Used	Oil (see page 4)
2. Facility or Business Name	Flagter	Constru	ction	Equir	m	rent		
3. Facility Operator (List additional Operators in the comments section).	Street or P.O. Box: 8418 Pal City or Town: Tampa	Construct Im River	Road	State:		Phone Number: (813) 6 Zip Code: 33619 County Other	30-C Country (if	0077
4. Facility Physical Location Information (No P.O. Boxes) Same address as #3 above or:	Physical Street Addi City or Town: County:	ess:		Country (if	not US.		ip Code:	Vessel
5. Facility North A Classification Sy Code(s) (at least	stem (NAICS)	A. <mark>8 1</mark>	1/3/1/0	(required)) B. D.			_
6. Facility or Business Mailing Address	Same address as City or Town:	# above or: Stree		State:	Zip/P	ostal Code:	Country (if	not USA):
7. Facility or Business RCRA Contact Person	Phone Number: (813) 630 Street or P.O. Box:		Last Name: Vangu Extension:	e-Mail:	un	Service Service dy@floo	Fax: (130430-22 2000
Same address as #above or:	City or Town:			State:		Zip Code:	Country	(if not USA):
8. Real Property (FL Land) Owner of the Facility's Physical Location (List additional owners in the comments section.)	Street or P.O. Povi	aster Fu Princess	J		P	Date became Ow New Ow Phone Number: Zip Code:	mer mr	n dd yy (if not USA):

RCRA Hazardous Waste Status Notification or Out of Business Notification					EPA ID N	No.FU	ROOC	088518			
9. F	CRA I	Hazardous V	Vaste Act	ivities at this Fac	ility:	(Mark 'X' in	all tha	t apply):			
(A)	(1)Gene	erator of Hazar	dous Waste			For Items 2	through	1 7, mark 'Y	ζ' in all tl	hat apply.	
	Yes 💟	No (Do no	t include Univ	ersal Waste or Used Oil))	(2) Treate	er, Store	er, or Dispo	ser of Ha	zardous W	aste
If				ving three categories.		(at y	your faci	lity) Note:		ous waste pe	ermit his activity.
	g h	greater per mont nazardous waste	calendar mo h (kg/mo) (2 ; or Greater t	DQG): onth 1,000 kilograms of ,200 lbs.) of non-acuth than 1 kg (2.2 lbs) least once a year)	or e		b. O	perating Con perating No. on-Operatin ermit or Ord	n-Comme g: Postclo	ercial TSD osure or Cor	rective Action
	(00kg/mo but le	calendar moss than 1,000	onth greater than kg/mo (>220 to <2,2	.00	Sp	ecify:	☐ Comme	ercial [e (at your face) Non-Comerage prior to re	mercial.
	(bs.) of non-acut 2.2 lbs) or less at least once a y	of acute haza	waste and/or 1 kg ardous waste			a. Sı	nall Quantit	y On-site	trial Furnac Burner Exe Refining Fu	
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 (5) Person Authorized to Manage Conditional Waste Generated at Other Facilities Choose this management activity ONLY if EITHER a copy of your application for such					if you attach uch authorization						
In _	_			activities that apply	•					eived from I rom Off-Si t	
	1 e. Ep	isodic: Not mor	e than one-ti	ne, not on-going) me per year:SQG_	_LQG	ł		ound Injec			ie.
		ited States Impo		dous waste adioactive) Generator		(/)	ondergi	ound Injec	tion con		
10.	your fa	cility. List then	in the order	Regulated Hazard they are presented in ist codes routinely or	the re	gulations (e.g., D	ooo1, Do	03, F007, K	.019, P01	2, U112).	
8		9		10	11		12		13		14
15		16		17	18		19		20		21
_											
				longer handling wast					nk and sk	ap Section I	2-16):
(A				e at This Facility (So					r: vo an late	ad wasta	
				tes, transports, treats, ction only if <u>all</u> busine					y regulati	ed wasie.	
(1)		-		I moved or moving to					or the nev	w location if	`you will
	_	2) Out of Busin	ess - Busines	ss closed on			((date)			
<u></u>		roperty Tax De				☐ (D) Peti		Bankruptc	y Protect	ion	
12-	14 — F	Registration	Activities	Contact Informa	tion	(only if this subr	nission i	s a registrati	on or reg	istration info	ormation update):
		Facility RCRA	First Name	:		Last Name:				Title:	
\vdash		page 1 or enter:	Phone Nun	ıber:		Extension:	E-Mai	l:			
	tact for: HW Tran	120	Street or P.	O. Box:							
	Used Oil Universa		City or Tov	vn:			State:(Country):		Zip Code:	

Universal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No. FURC	20088518					
12. Univer	sal Waste (UW) Activities (Mark 'X' and complete all that apply) :						
A. Federal Notification	Tederany Defined Enige Quantity Manual (2 QM)						
	Accumulates: 🗖 a. UW Batteries 🗖 b. Pesticides 🗖 c. Pharmaceu	ticals					
	d. Mercury Containing Devices — e. Mercury Contain	ing Lamps					
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	W.					
B. Florida l	Universal Pharmaceutical Waste (UPW): one-time registration						
Pharm	aceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)						
☐ Pharm	accuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated					
☐ Rever	se Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])					
C. Florida	Annual Mercury Handler Registration:						
Devices oper form [Chapte of Mercury-C	nsporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Contains at the State of Florida are required to register annually with the Department using this er 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quanti Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). generate lamps and/or devices or manage pharmaceuticals, do not register or complete the in	section of the ty for-hire Handler					
	n is being submitted as a Florida Registration of Universal Waste Transporter/Handler <u>for-h</u> t time registering						
☐ For-l	nire Transporter of Universal Waste Mercury-Containing Lamps or Devices						
	nire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration					
☐ Merc	cury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required					
☐ Merc	cury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	100					
☐ Mero	cury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration + one-time \$1,000 fee+					
☐ Merc	cury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)					
2 2	(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) Annual Registration Required						
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).							
13. Other St	ate Regulated Waste Activities: Petroleum Contact Water (PCW) 🚨 Recovery 🚨 Transpo	ort [62-740 F.A.C.1					
	e: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to R						

Hazardous Waste and Used Oil Transporter Registration	ns	EPA ID No FURCO 88518
14. HW Transporter Activities: (Mark 'X' and complete all tha	at apply if you need	to register your HW Transporter activities)
Transporters of and Transfer Facilities for Hazardous Wasternew their registration. Evidence of casualty/liability insurance p Transfer facilities must submit several additional documents as detailed changes. Registered transporters and transfer facilities may only begin of Generators of hazardous waste who transport waste only within the	oursuant to 62-730.17 on page 5 the first to operations after recei	70(2)(a) is required in addition to this registration. ime they register and when the information iving approval from the Department.
A. HW Transporter Registration Information (must be of This facility is a registered transporter of hazardo		y and when this information changes)
This form is: Initial Registration Renewal 1. For own waste only 2. For commercial pro-		changes
4. Transportation Mode		ther - specify
B. HW Transfer Facility Registration Information (mu	ust be completed a	nnually and when this information changes)
This facility is a Hazardous Waste Transfer Faci	ility: (at this locatio	on) Storage Volume
		nanges
Note: Hazardous Waste transfer facilities must comply with the	requirements of Ru	tle 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.
The Transfer Facility records required under the provisi Our mailing (business) address	ons of Rule 62-730. The site (facility)	
Please enter the EPA ID Number of the HW Transporter who carries the	insurance for this T	ransfer Facility:
Please see the top of page 5 for additional items that must be Transfer Facilities [Rule 62-730.171(3), Florida Administrative		on to the above registration for Hazardous Waste
15. Used Oil and Oil Filter Activities: : (Mark 'X' and comp	lete all that apply i	f you need to register your used oil activities),
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer faciliannually register with the Department using this form. All except Flow \$100 registration fee. This form is: Initial Registration Renewal If applicable, a check or money order, in the amount of \$100,	rida used oil (UO) Pr	f changes
(1) Used Oil Transporter - mark activities: (occurring in Florida)	1	er Management (must annually register)
☑ a. Transporter (off-site) and noncontiguous locations	a. Transp	
☑ b. Transfer Facility		fer Facility
(2) Collection Center (From businesses, no more than 55 gal per shipment)	☐ d. End U	ssor (Annual Report Required) Iser
(3) Used Oil Processor (A permit is required.)		equired under the provisions of Rule 62-710.510,
(4) Gff-Specification Used Oil Burner	FAC, are kept	t at (check one):
(5) Used Oil Fuel Marketer	☐ Our mail	ing (business) address
Please see the top of page 5 for additional items that must be subm exempt Used Oil Transporters.	itted in addition to	the above registration and fees required for non-

nts and required signature page	EPA ID No. FLRO	00088218						
(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [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.]								
171(3)(a)5., F.A.C.]								
Rule 62-730.171(3)(a)6., F.A.C.]								
30.171(3)(a)7., F.A.C.]								
40 CFR 279.40(a)(1-4))								
n 15:								
an annual report except generators tra	insporting UO from nonconti	guous operations within						
oublic highways only within their ow	n company must submit proof	f of insurance.						
_ Evidence of Liability Insurance pu	rsuant to 62-710.600(2)(e)., F	F.A.C. is attached.						
lified personnel properly gather and true, accurate, and complete. I am av	evaluate the information subr ware that there are significant	nitted. The information						
program in place covering the appli	cable used oil rules. Evidence form 62-730.900(5)(a), F.A.	e of financial responsi- C						
Print Name and		Oil Date Signed (mm-dd-yyyy)						
Barton Montgon	y CFO	3-14-19						
								
		-						
Contact or Operator, please comp	lete the information below:							
Lisa Albury (Name of person completing this form) (Phone Number) (E-mail Address)								
	In addition to the registration required al notification for a transfer facility a inistrative Code (F.A.C.)]: If the transporter that the proposed loce (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.] Ity [Rule 62-730.171(3)(a)3., F.A.C.] operations [Rule 62-730.171(3)(a)4.171(3)(a)5., F.A.C.] Rule 62-730.171(3)(a)6., F.A.C.] Rule 62-730.171(3)(a)6., F.A.C.] 10 CFR 279.40(a)(1-4)) In 15: In annual report except generators transposed in the section 17 (except those exempted Evidence of Liability Insurance pure discretificate of Liability Insurance, DEP Print Name and P	in addition to the registration required for Transfer Facilities on Pal notification for a transfer facility and any changed items must be inistrative Code (F.A.C.)]: If the transporter that the proposed location satisfies the criteria of items (F.S.) [Rule 62-730.171(3)(a)3., F.A.C.] Ity [Rule 62-730.171(3)(a)3., F.A.C.] operations [Rule 62-730.171(3)(a)4., F.A.C.] 171(3)(a)5., F.A.C.] Rule 62-730.171(3)(a)6., F.A.C.] 30.171(3)(a)7., F.A.C.] 10 CFR 279.40(a)(1-4)) 11 15: In annual report except generators transporting UO from nonconticular to this properties of the property						



Mail Station 4560, 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 4-23-13 Incorporated in Rule 62-710.510(5)

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 the reporting period January 1, _____ through December 31, _____

Use the information recorded in your Record Keeping Form	ı [62-710.901(2)] or equiva	alent to	complete	this document.
SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS					
1. Company Name: Flagter Construction Equipme	Telephone No	(813)	63	50-0C	דת
Site Address: 8418 Palm River Road, Tampa, FL 33619					
·	3. EPA ID No	FLRC	000	0883	518
☐ Check box if any of the above items (1-3) have changed since your last registration					
4. Name of person preparing report (please print) Lisa Alburo					
Title: Div. Compliance Safety Phone number (if different Phone number (if d					
Used Oil: Transporter Transfer Facility Collection Center/Aggregation I	Point Processor Processor	Marketer	☐ Bu End U	rner (of off-sp ser	ecification used oil)
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL	HANDLERS. USI	ED OIL FILT	ER HA	NDLERS SEE	E SECTION C)
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Industr	ial	Mixed	Total
a. In Florida	0	1593	38	0	15938
b. From out of State	b. From out of State			0	0
c. Beginning Inventory					168
d. Total (sum of totals from Lines a + b + c)			,,,,,,,		16106
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)			In	State	Out of State
N - Transferred to another facility (not an end use)			51	076	
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					7 w
D- Disposed of: Landfilled					
Treated at a wastewater treatment	unit				
Incinerated					
3. Total amount (in gallons) of Used Oil managed		······ <u>1</u>	5	676	
4. End of year, on hand estimate (difference between Line 1d and Line 3)			4:	20	

SECTION C USED OIL FILTERS (OPTIONAL) (USE TABLE BELOW FOR CONVERSIONS)			CHECK COLUMN IF OUT OF STATE	ΕΨ		
1. Number of filters on hand from	m previous year		750			
2. Number of used oil filters coll	lected		45993			
3. Total number of used oil filter	46743					
4. Disposition of used oil filters collected: a. Transferred to another registered facility			44750			
		b. Burned for energy recovery at a Waste-To-Energy facility				
		c. Transferred directly to a metal foundry for recycling				
		d. TOTAL	44750			
5. End of year, on hand estimate	1993					
6. Gallons of used oil collected a	2098					
7. Gallons of used oil transferred	d to a used oil han	dler (transporter or processor)	17774			
		s a result of filter processing gallons 🗌 cubic yards				
9. Description of oily waste management Olly rags and pads sent to Safety Kleen DIRECTIONS FOR SECTION C Faculity to be recycled. Conversion Table						
	ers					
One 55- gallon drum of <u>uncrushed</u> used oil filters = approximately <u>250</u> used oil filters						
	One $\underline{\text{ton}}$ of drained used oil filters = approximately $\underline{\textbf{2,350}}$ 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 Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

(850) 245-8707

Date Received (for FDEP Official Use Only)

EPA ID: FL	R000097378 Please	use the instructions document to complete this form						
1. Reason for Submittal (all submitters must complete pages 1 and 2 and sign page 5.	the correct box: waste, universal waste, used oil a (must choose one To provide subsequent notific	waste, universal waste, used oil activities, or PCW activities). ust choose one a notification To provide subsequent notification (to update status and facility identification information). To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5)						
Pages 3 and 4, - complete as applicable)	FL Registration(s) UW Mercury (see page 3)	HW Transporter (see page 4) Used Oil (see page 4)						
2. Facility or Business Name	Flagter Construction Fo	uipment						
3. Facility Operator (List additional Operators in the comments section).	Name of Operator: Flagler Construction Equivariant Street or P.O. Box: Quo 1 Boggy Creek Road City or Town: Orlando Operator Type: Private Prederal Muni	Date became Operator: 11 / 10 / 14						
4. Facility Physical Location Information (No P.O. Boxes) Same address as #3 above or:	Physical Street Address: City or Town: County:	State: Zip Code: Country (if not USA):						
5. Facility North A Classification Sys Code(s) (at least 5	stem (NAICS)	O (required) B. D.						
6. Facility or Business Mailing Address	Same address as # above or: Street or P.O. Box City or Town:	State: Zip/Postal Code: Country (if not USA):						
,	First Name: A \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	E-Mail: Fax: (457) 850-087						
Same address as #above or:	City or Town:	State: Zip Code: Country (if not USA):						
8. Real Property (FL Land) Owner of the Facility's Physical Location (List additional owners in the comments section.) Same address as # above or:	Name of Owner: BE Orlando, U.C. Street or P.O. Box: 1745 Indian Wood Circle City or Town: Maumee Owner Type: Private Federal Munic	Date became Owner: / _ / _ New Owner mm dd yy Phone Number: (4 9) 2 8 3 - 3 19 4 State: Zip Code: Country (if not USA): H353						

F	RCRA Hazardous Waste Status Notification or Out of Business Notification			on	EPA ID I	No.FL	ROOC	097378			
9.	RCRA Haz	zardous V	Vaste Act	ivities at this Fac	ility:	(Mark 'X' i	n all tha	it apply):			
(.	A) (1)Generat	or of Hazaı	dous Waste			For Items	through	h 7, mark '	X' in all t	hat apply.	
	□Yes ☑ No	(Do no	t include Univ	ersal Waste or Used Oil)	(2) Trea	ter, Store	er, or Dispo	ser of Ha	zardous W	aste
	_	-		ving three categories.		(at	your faci	ility) Note:		ous waste pe	ermit this activity.
	Gene	erates in any		onth 1,000 kilograms		Į	□ a. O	perating Co	mmercial	TSD	
				,200 lbs.) of non-acut han 1 kg (2.2 lbs)	e ·	Į		perating No			
				least once a year)		1		on-Operating			rective Action
	☐ b. Small	Quantity (Generator (S	SQG):		(3)			57.0	e (at your fac	cility)
	Gene	erates in any	calendar mo	onth greater than kg/mo (>220 to <2,2	00			Commo		Non-Com	
	lbs.)	of non-acut	e hazardous	waste and/or 1 kg	.00					rage prior to r	
		lbs) or less cast once a y	of acute haza rear)	rdous waste		1.				t rial Furna Burner Exe	
	_					j					ırnace Exemption
			xempt SQG	(CESQG): onth 100 kg/mo or les	S	(5) D	Dawaan A	uth suized t	a Manag	a Candition	nally Exempt
	(220	lbs.) of nor	-acute hazar	dous waste and 1 kg		(5)	Waste (Generated a	at Other	Facilities	
(2.2 lbs) or less of acute hazardous waste Choose this management activity ONLY if you attach EITHER a copy of your application for such authorizati				if you attach							
	In addition, in	idicate othe	er generator	activities that apply						eived from I	
İ				ne, not on-going)		. ,	Receives	. Hazardou	s Waste f	rom Off-Si	te
				me per year:SQG_	_LQC	(7)	Undergr	ound Injec	tion Con	trol	
		-	orter of hazar	dous waste adioactive) Generator		(/)	ondergi	ouna injec	tion con		
H					-	***		1 0.1	n .		
10				Regulated Hazare they are presented in							wastes nandled at
				ist codes routinely or							e spaces are needed.
1		2		3	4		5		6		7
8		9		10	11		12		13		14
1.	5	16		17	18		19		20		21
1	1. Other Sta	itus Chai	nges (If no	longer handling wast	e or cl	osed, sections 9	and 10 s	hould be bla	ink and sk	tip Section 1	2-16):
Г	(A) Non-Han	dler of Reg	ulated Wast	e at This Facility (S	ection	s 9, 10 and 12-1	6 should	be blank.)			
ı	☐ (1) B	usiness no l	onger genera	tes, transports, treats,	stores	, disposes of, or	otherwis	e handles ar	y regulate	ed waste.	
				ction only if all busin							
١	□ ⁽¹⁾ C	losed at this	location and	moved or moving to	anothe	er - Submit a ne	w Form 8	3700-12FL f	or the nev	v location if	'you will
	(2) (of Busin	ess - Busines	ss closed on			(date)			
C	(C) Propo	erty Tax De	fault			(D) Pet	ition for	Bankruptc	y Protect	ion	
1	2-14 — Reg	istration .	Activities	Contact Informa	tion		mission i	s a registrat	ion or reg	istration info	ormation update):
C	Same as Facil		First Name			Last Name:				Title:	
L	Contact on pag	e 1 or enter:	Phone Num	iber:		Extension: E-Mail:					
C	ontact for:		G:	0 P							
10	HW Transpor		Street or P.	O. Box:							4
	Used Oil Han Universal Wa		City or Tov	vn:			State:(Country):		Zip Code:	

Universal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No.	30097378			
12. Univer	sal Waste (UW) Activities (Mark 'X' and complete all that apply) :				
A. Federal Notification	Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 of any combination of UW accumulated (at any one time)	lb) or more			
	Accumulates: 🗖 a. UW Batteries 🗖 b. Pesticides 🗖 c. Pharmaceu	ticals			
	d. Mercury Containing Devices — e. Mercury Contain	ning Lamps			
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	W.			
B. Florida U	Universal Pharmaceutical Waste (UPW): one-time registration				
☐ Pharm	aceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)				
☐ Pharm	aceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated			
Rever	se Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])			
C. Florida	Annual Mercury Handler Registration:				
Devices oper form [Chapte of Mercury-C	resporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Contains at the State of Florida are required to register annually with the Department using this er 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quanti Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). Generate lamps and/or devices or manage pharmaceuticals, do not register or complete the in	section of the ty for-hire Handler			
	n is being submitted as a Florida Registration of Universal Waste Transporter/Handler <u>for-h</u> t time registering				
☐ For-h	ire Transporter of Universal Waste Mercury-Containing Lamps or Devices				
☐ For-h	ire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration			
☐ Merc	ury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required			
☐ Merc	ury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler				
	cury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler cury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	Annual Registration + one- time \$1,000 fee+ More Requirements (contact FDEP)			
(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) Annual Registration Required					
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).					
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.] Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]					

Hazardous Waste and Used Oil Transporter Registratio	ns	EPA ID No. FLR 000097378			
14. HW Transporter Activities: (Mark 'X' and complete all the	at apply if you need	to register your HW Transporter activities)			
Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. Generators of hazardous waste who transport waste only within the boundaries of their facility should not register.					
A. HW Transporter Registration Information (must be	completed annually	y and when this information changes)			
This facility is a registered transporter of hazardo	ous waste.				
This form is: Initial Registration Renewal					
1. For own waste only 2. For commercial p	urposes 3. I	Both commercial and own waste			
4. Transportation Mode 🔲 Air 🔲 Rail 🔲 Highway	☐ Water ☐ O	ther - specify			
B. HW Transfer Facility Registration Information (must be completed annually and when this information changes)					
☐ This facility is a Hazardous Waste Transfer Fac					
This form is: 🔲 Initial Registration 💆 Renewal 🔲	Notification of ch	nanges			
Note: Hazardous Waste transfer facilities must comply with the	requirements of Ru	le 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.			
The Transfer Facility records required under the provisi Our mailing (business) address	ons of Rule 62-730. The site (facility)				
Please enter the EPA ID Number of the HW Transporter who carries the	insurance for this Tr	ransfer Facility:			
Please see the top of page 5 for additional items that must be Transfer Facilities [Rule 62-730.171(3), Florida Administrative		on to the above registration for Hazardous Waste			
15. Used Oil and Oil Filter Activities: : (Mark 'X' and comp	lete all that apply i	f you need to register your used oil activities),			
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facilities, processors, off-specification burners, and/or marketers must annually register with the Department using this form. All except Florida used oil (UO) Processors and collection centers must pay an annual \$100 registration fee. This form is: Initial Registration Renewal Notification of changes Cancel Registration If applicable, a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection is enclosed.					
(1) Used Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filte	er Management (must annually register)			
a. Transporter (off-site) and noncontiguous locations	🔟 a. Transp	orter			
☑ b. Transfer Facility	b. Transf	-			
(2) Collection Center (From businesses, no more than 55 gal per shipment)	☐ d. End U	ssor (Annual Report Required)			
(3) Used Oil Processor (A permit is required.)	(7) The records re	equired under the provisions of Rule 62-710.510,			
(4) Gff-Specification Used Oil Burner		at (check one):			
(5) Used Oil Fuel Marketer	U Our maili	ng (business) address			
Please see the top of page 5 for additional items that must be submitted in addition to the above registration and fees required for non-exempt Used Oil Transporters.					

Transfer Facility and Used Oil Transporter requiren	nents and required signature page	EPA ID No. FURO	00097378				
(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:							
Certification by a responsible corporate officer Section 403.7211(2), Florida Statu	of the transporter that the proposed locates (F.S.) [Rule 62-730.171(3)(a)1., F.A						
Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.]							
A brief general description of the transfer facil	lity operations [Rule 62-730.171(3)(a)4.	, F.A.C.]					
A copy of the facility closure plan [Rule 62-73	30.171(3)(a)5., F.A.C.]						
_A copy of the contingency and emergency plan	n [Rule 62-730.171(3)(a)6., F.A.C.]						
_A map or maps of the transfer facility [Rule 62	2-730.171(3)(a)7., F.A.C.]						
In addition to the requirements on Page 4 Sec	(15 cont.) Used Oil Transporters: (Exemptions in 40 CFR 279.40(a)(1-4)) In addition to the requirements on Page 4 Section 15: • ALL registered UO Handlers must submit an annual report except generators transporting UO from noncontiguous operations within						
their own company.	iit aii aiiiidai report except generators tra	insporting 00 from noncontig	guous operations within				
UO transporters transporting off-site over	er public highways only within their ow	n company must submit proof	of insurance.				
UO transporters transporting more than submission as a certified used oil transporting more than submission as a certified used							
The used oil annual report is attached	Evidence of Liability Insurance pu						
17. 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 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.							
☑ I certify as a Used Oil Transporter that I am tation and have an annual and new employee train bility is demonstrated by the Used Oil Transporter	ing program in place covering the appli Certificate of Liability Insurance, DEF	cable used oil rules. Evidence Form 62-730.900(5)(a), F.A.	of financial responsi- C				
Signature of owner, operator, or an authorized representative	Print Name and		Date Signed (mm-dd-yyyy)				
Ry	Barton Monty	- mig CT	1 03-11-219				
]				
			ם				
If the person that filled in this form is not the Facil							
(Name of person completing this form)		blete the information below: bury@floq ler (E-mail Address)	ce.com				



Mail Station 4560, 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 4-23-13
Incorporated in Rule 62-710.510(5)

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 the reporting period January 1, through December 31, 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 agter Construction Equipment Telephone No. (407) 850-9614 Boggy Creek Road, Orlando, FL 32824 3. EPA ID No. FUR OOC ☐ Check box if any of the above items (1-3) have changed since your last registration. 4. Name of person preparing report (please print) _ Afety Phone number (if different from #2, above) (407) 965 - 5945 5. Type of operation (check as many as apply to your operations)
Used Oil: Transporter Transfer Facility Collection Center/Aggregation Point Processor Marketer Burner (of off-specification used oil) ☐ Processor ☐ End User Transfer Facility Used Oil Filter: ▼ Transporter SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL HANDLERS. USED OIL FILTER HANDLERS SEE SECTION C) Industrial Mixed Total 1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code) Automotive a. In Florida b. From out of State c. Beginning Inventory d. Total (sum of totals from Lines a + b + c) Out of State In State 2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code) N - Transferred to another facility (not an end use)..... 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..... 3. Total amount (in gallons) of Used Oil managed

4. End of year, on hand estimate (difference between Line 1d and Line 3).....

SECTION C USED OIL FILTERS	CHECK COLUMN IF OUT OF STATE	£ V			
		1.			
1. Number of filters on hand from pre	revious year	51			
2. Number of used oil filters collected	od	10505			
3. Total number of used oil filters to	10556				
4. Disposition of used oil filters colle	9091				
	b. Burned for energy recovery at a Waste-To-Energy facility				
	c. Transferred directly to a metal foundry for recycling				
	d. TOTAL	909			
5. End of year, on hand estimate (Lin	ne 3 minus Line 4d)	1465			
6. Gallons of used oil collected as a r	result of filter processing	426			
7. Gallons of used oil transferred to a	a used oil handler (transporter or processor)	15749			
	nd managed as a result of filter processing 🗹 gallons 🗌 cubic yards				
9. Description of oily waste management Oily rags and pads sent to Safety Kleen DIRECTIONS FOR SECTION C Facility to be recycled. Conversion Table					
One 55-gallon drum of crushed used oil filters = approximately 400 used oil filters					
Oil	approximately 400 and on more approximately 400 and on more				
On	ers				
On	ne \underline{ton} of drained used oil filters = approximately $\underline{2,350}$ used oil filters	a.			

- 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 Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

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

Please use the instructions document to complete this form Mark 'X' in ☐ To provide initial notification (to obtain an EPA ID Number for hazardous 1. Reason for waste, universal waste, used oil activities, or PCW activities). the correct box: Submittal (all submitters must To provide subsequent notification (to update status and facility identification information). (must choose one complete pages 1 and 2 if a notification) and sign page 5. To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5) Pages 3 and 4, - com-☑ Used Oil (see page 4) FL Registration(s) ☐ HW Transporter (see page 4) plete as applicable) UW Mercury (see page 3) 2. Facility or **Business Name** Date became Operator: 11 / 10/14 Name of Operator: 3. Facility Operator (List additional Opera-Phone Number: Street or P.O. Box: tors in the comments (954)581-474 section). Zip Code: Country (if not USA): City or Town: State: □State □County □Other Private Federal Municipal Operator Type: **□** Vessel Physical Street Address: 4. Facility Physical Location State: Zip Code: City or Town: Information (No P.O. Boxes) Country (if not USA): County: Same address as #3 above or: 5. Facility North American Industry (required) B. Classification System (NAICS) Code(s) (at least 5 digits) D. ☑ Same address as #__ above or: Street or P.O. Box: 6. Facility or **Business** Zip/Postal Code: Country (if not USA): City or Town: State: **Mailing Address** Title: Last Name: First Name: 7. Facility or Anae **Business** E-Mail: Phone Number: Extension: **RCRA Contact Person** Street or P.O. Box: Same address as Country (if not USA): City or Town: State: Zip Code: # above or: Name of Owner: 8. Real Property Date became Owner: (FL Land) Owner New Owner mm dd уу of the Facility's Phone Number: Street or P.O. Box **Physical Location** 256-1190 (List additional Country (if not USA): State: Zip Code: City or Town: owners in the comments section.) Same address as ☐ Municipal State County Other Federal Owner Type: above or:

R	CRA Haz	ardous Was	ste Status Not	ification or Out of	Busir	ess Notifica	tion	EPA ID N	NO FLE	2000	SOLLOO
9.	RCRA	Hazardou	s Waste Acti	ivities at this Fac	ility:	(Mark 'X'	in all t	that apply):			
(A) (1)Gen	erator of Ha	zardous Waste			For Items	2 thro	ugh 7, mark 'X	K' in all tl	hat apply.	
Ţ	⊒ Yes ⊑	No (Do	not include Univ	ersal Waste or Used Oil))	(2) Tre	ater, St	orer, or Dispo	ser of Ha	zardous W	aste
ļ			one of the follow	ving three categories.		(at your f	facility) Note:			ermit this activity.
		Generates in	any calendar mo	onth 1,000 kilograms			□ a.	. Operating Cor	mmercial	TSD	
				,200 lbs.) of non-acut han 1 kg (2.2 lbs)	e			. Operating No			
				least once a year)			☐ c.	. Non-Operatin Permit or Ord			rective Action
			ty Generator (S			(3)		ler of Hazardo			
				onth greater than kg/mo (>220 to <2,2	.00		Specify Note:	: Comme A permit is require			
		lbs.) of non-a	cute hazardous	waste and/or 1 kg				pt Boiler and/			
		(2.2 lbs) or le (at least once	ess of acute haza a year)	rdous waste		(4)		. Small Quantit			
	_	•									urnace Exemption
			y Exempt SQG	(CESQG): onth 100 kg/mo or les	s.	(E) [
		(220 lbs.) of	non-acute hazar	dous waste and 1 kg	3	(5)	Persor Wasi	n Authorized t te Generated a	o Manag it Other l	e Conditior Facilities	тапу вхетрі
		(2.2 lbs) or le	ess of acute haza	urdous waste			Choc	ose this manage	ment acti	vity ONLY	if you attach
	In additi	on indicate o	ther generator	activities that apply	<u>.</u>		OR t	IER a copy of y he authorization	your appli n you rec	ication for s eived from l	uch authorization FDEP.
		-	_	ne, not on-going)	•	(6)		ves Hazardous			
				me per year:SQG_	_LQG	· _					
		-	mporter of hazar			(7)	Unde	rground Injec	tion Con	trol	
	☐ g. M	lixed Waste (hazardous and r	adioactive) Generator							
10				Regulated Hazare they are presented in							wastes handled at
	your f	acility. List ti Iazardous was	item in the order ste transporters l	they are presented in list codes routinely or	usuall	guiadons (e.g. y transported.	Use co	mments or an a	dditional	page if mor	re spaces are needed.
1		2	Posterio	3	4	•	5		6		7
8		9		10	11		12		13		14
15		16		17	18		19		20	*	21
11	. Other	r Status Cl	nanges (Ifno	longer handling wast	e or cl	osed, sections	9 and 1	0 should be bla	ınk and sk	cip Section	12-16):
_				e at This Facility (S							
				tes, transports, treats,					v regulate	ed waste.	
				ction only if <u>all</u> busin					,		
				I moved or moving to					or the nev	w location if	f you will
	u		isiness - Busines	9				(date)			
		Property Tax		35 51030d OII		☐ (D) P	etition f	for Bankruptc	v Protect	ion	
	. ,			Contact Informa	tion						ormation update):
Ē		Facility RCRA	First Name			Last Name:				Title:	
		on page 1 or ente		nber:		Extension:	E-M	Лаil:			
Co	ontact for:		G	O. D.		l					
-		ansporter	Street or P.	O. Box:							
		il Handler al Waste	City or Tov	vn:			Stat	te:(Country):		Zip Code:	

Universal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No. FLR O	OCCOOC			
12. Univers	sal Waste (UW) Activities (Mark 'X' and complete all that apply) :				
A. Federal Notification	Todorumy Dominos Eurige Quantity Immunos (2-Q22)				
	Accumulates: 🗖 a. UW Batteries 🗖 b. Pesticides 🗖 c. Pharmaceu	ticals			
-	d. Mercury Containing Devices — e. Mercury Contain	ing Lamps			
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	W.			
B. Florida U	Universal Pharmaceutical Waste (UPW): one-time registration				
Pharm	aceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)				
Pharm	aceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated			
Rever	se Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Health	th [DOH])			
C. Florida	Annual Mercury Handler Registration:				
Devices oper form [Chapte of Mercury-C	For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Containing Lamps and Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.				
100 100	n is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-handler for-handler registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH reg				
☐ For-h	ire Transporter of Universal Waste Mercury-Containing Lamps or Devices ire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices ury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler ury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	Annual Registration Required			
	ury-Containing Devices $\mathbf{LQH} = 100 \text{ kg}$ (220 lb) or more accumulated at any one time by for-hire handler ury-Containing Lamps $\mathbf{LQH} = 2,000 \text{ kg}$ (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	Annual Registration + one– time \$1,000 fee+ More Requirements (contact FDEP)			
(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) Annual Registration Required					
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).					
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.] Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]					

Hazardous Waste and Used Oil Transporter Registration	ns	EPA ID No. FLROCCOOTTO 8				
14. HW Transporter Activities: (Mark 'X' and complete all th	at apply if you need	l to register your HW Transporter activities)				
Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. Generators of hazardous waste who transport waste only within the boundaries of their facility should not register.						
A. HW Transporter Registration Information (must be	completed annuall	y and when this information changes)				
This facility is a registered transporter of hazardo	ous waste.					
This form is: 🔲 Initial Registration 🔲 Renewal	Notification of	changes Cancel Registration				
☐ 1. For own waste only ☐ 2. For commercial p	urposes 3.	Both commercial and own waste				
4. Transportation Mode Air Rail Highway	Water Q	Other - specify				
B. HW Transfer Facility Registration Information (m	ust be completed a	nnually and when this information changes)				
☐ This facility is a Hazardous Waste Transfer Fac	☐ This facility is a Hazardous Waste Transfer Facility: (at this location) Storage Volume					
This form is: 🔲 Initial Registration 🚨 Renewal 🗆	Notification of cl	hanges Cancel Registration				
Note: Hazardous Waste transfer facilities must comply with the	requirements of Ri	ule 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.				
	The Transfer Facility records required under the provisions of Rule 62-730.171(6), F.A.C., are kept at (check one):					
Please enter the EPA ID Number of the HW Transporter who carries the	e insurance for this T	Transfer Facility:				
Please see the top of page 5 for additional items that must be Transfer Facilities [Rule 62-730.171(3), Florida Administrative		ion to the above registration for Hazardous Waste				
15. Used Oil and Oil Filter Activities: : (Mark 'X' and comp	olete all that apply i	if you need to register your used oil activities),				
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facil annually register with the Department using this form. All except Flo \$100 registration fee. This form is: Initial Registration	rida used oil (UO) P	rocessors and collection centers must pay an annual				
If applicable, a check or money order, in the amount of \$100	, payable to Florida l	Department of Environmental Protection is enclosed.				
(1) Used Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filt	ter Management (must annually register)				
a. Transporter (off-site) and noncontiguous locations	💆 a. Transp					
☑ b. Transfer Facility	b. Trans					
(2) Collection Center (From businesses, no more than 55 gal per		ssor (Annual Report Required)				
shipment)	d. End U	user				
(3) Used Oil Processor (A permit is required.)	(7) The records r	equired under the provisions of Rule 62-710.510,				
(4) Gff-Specification Used Oil Burner	(4) Off-Specification Used Oil Burner FAC, are kept at (check one):					
(5) Used Oil Fuel Marketer	Our mail	ing (business) address				
Please see the top of page 5 for additional items that must be submitted in addition to the above registration and fees required for non-exempt Used Oil Transporters.						

Transfer Facility and Used Oil Transporter requirem	nents and required signature page	EPA ID No. FLK CC	X0000110K			
(14 cont.) Hazardous Waste Transfer Facilities: following items are required to be submitted with the insubsequent submission [Rule 62-730.171(3), Florida Ad	itial notification for a transfer facility a	d for Transfer Facilities on Pag and any changed items must be	ge 4, Section 14, the submitted with any			
Certification by a responsible corporate officer Section 403.7211(2), Florida Statut	of the transporter that the proposed loctes (F.S.) [Rule 62-730.171(3)(a)1., F.A					
Evidence of the transporter's financial responsi		-				
A brief general description of the transfer facili						
A copy of the facility closure plan [Rule 62-73	0.171(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.]					
(15 cont.) Used Oil Transporters: (Exemptions in	1 40 CFR 279.40(a)(1-4))					
In addition to the requirements on Page 4 Sect						
 ALL registered UO Handlers must submit their own company. 	t an annual report except generators tra	ansporting UO from noncontig	uous operations within			
UO transporters transporting off-site over	public highways only within their ow	n company must submit proof	of insurance.			
 UO transporters transporting more than 5 submission as a certified used oil transport 			gn and certify this			
The used oil annual report is attached	Evidence of Liability Insurance pu	rsuant to 62-710.600(2)(e)., F.	A.C. is attached.			
17. 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 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. I certify as a Used Oil Transporter that I am familiar with the applicable Florida and Federal laws and rules governing used oil transpor-						
tation and have an annual and new employee training bility is demonstrated by the Used Oil Transporter	Certificate of Liability Insurance, DEF	9 form 62-730.900(5)(a), F.A.C	•			
Signature of owner, operator, or an authorized representative	Print Name and	O	il (mm-dd-yyyy)			
155	Barter Montgon		00 1/601/			
0						
			1			
If the person that filled in this form is not the Facili	ty Contact or Operator, please comp	olete the information below:				
(Name of person completing this form)	(Name of person completing this form) (Phone Number) (E-mail Address)					
	**					



Mail Station 4560, 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 4-23-13 Incorporated in Rule 62-710.510(5)

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 the reporting period January 1, _____ through December 31, _____

Use the information recorded in your Record Keeping Form	i [62-710.901(2)] or equivalen	t to complete	this document.				
SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS								
1. Company Name: Flagler Construction Equipme			581-4	144				
Site Address: 5210 Recese Road, David	Contract to the contract to th							
	3. EPA ID No	FLROO	0007	805				
☐ Check box if any of the above items (1-3) have changed since your last registration	n.							
4. Name of person preparing report (please print) Lisa Alburt								
Title: Div. Compliance, Safety f Phone number (if difference of the complex of t								
	Processor	En		pecification used on)				
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL	HANDLERS. USI	ED OIL FILTER	HANDLERS SE	E SECTION C)				
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Industrial	Mixed	Total				
a. In Florida	0	5241	0	5241				
b. From out of State	0	0	0	0				
c. Beginning Inventory								
d. Total (sum of totals from Lines a + b + c)				524				
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)			In State	Out of State				
N - Transferred to another facility (not an end use)		4	992					
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	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	992					
4 End of year on hand estimate (difference between Line 1d and Line 3)			40					

SECTION C USED OIL FILT	CHECK COLUMN IF OUT OF STATE	E ♥					
1. Number of filters on hand from	146						
2. Number of used oil filters coll	lected		6002				
3. Total number of used oil filter	s to manage (Line	•	6148				
4. Disposition of used oil filters	collected:	a. Transferred to another registered facility	5747				
		$\mathbf{b}.$ Burned for energy recovery at a Waste-To-Energy facility \dots					
		c. Transferred directly to a metal foundry for recycling					
		d. TOTAL					
5. End of year, on hand estimate	401						
6. Gallons of used oil collected a	270						
7. Gallons of used oil transferred	5262						
8. Volume of oily waste collecte	270						
9. Description of oily waste management Oily pads and rags sent to Safety Kleen DIRECTIONS FOR SECTION C Facility to be recycled.							
Conversion Table							
One 55-gallon drum of <u>crushed</u> used oil filters = approximately $\underline{400}$ used oil filters							
One 55- gallon drum of <u>uncrushed</u> used oil filters = approximately <u>250</u> used oil filters							
One $\underline{\text{ton}}$ of drained used oil filters = approximately $\underline{2,350}$ 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 Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

(850) 245-8707

Date Received (for FDEP Official Use Only)

EPA ID: FL	R0002	13686	Please use	the instruc	tions o	document to comp	lete this form	
1. Reason for Submittal	Mark 'X' in the correct box:	To provide initial no waste, universal waste					us	
(all submitters must complete pages 1 and 2 and sign page 5.	:c	✓ To provide subseque✓ To provide the final						
Pages 3 and 4, - complete as applicable)	FL Registration(s)	UW Mercury (s	ee page 3)	□ HW	Transp	oorter (see page 4)	☑ Used Oi	il (see page 4)
2. Facility or Business Name	Flagler	Construct	ion Ec	vipn	ner	1		
3. Facility Operator (List additional Operators in the comments section).	Name of Operator: Flag ler Co Street or P.O. Box:	onstruction Arrowh	Equip	ment		Phone Number: (386) 7 Zip Code:		+44
4. Facility		Private Federal	Municipa	al 🗆 Stat	e 🔲	County Other_		Vessel
Physical Location Information (No P.O. Boxes) Same address as #3 above or:	City or Town:	_		Country (if	not US.		ip Code:	
5. Facility North A Classification Sys Code(s) (at least 5	stem (NAICS)	A. <mark>8 1 1</mark>	3110	(required)) В. D.	_ _		
6. Facility or Business Mailing Address	Same address as City or Town:	# above or: Street or	P.O. Box:	ite:	Zip/P	ostal Code:	Country (if no	t USA):
7. Facility or Business RCRA Contact Person	First Name: Jackie Phone Number: (386)758 Street or P.O. Box:	Exte	Name:	d E-Mail: Show	ard	Branch Branch Of lagler	Admir Fax: (38) %)158-7
Same address as #above or:	City or Town:			State:		Zip Code:	Country (if	not USA):
8. Real Property (FL Land) Owner of the Facility's Physical Location (List additional owners in the comments section.) Same address as #above or:	Street or P.O. Box: Five Gree City or Town: Green	Rentals Renwich off	ealty	CT CT		Date became Ow New Ow Thone Number: (203) 6 Zip Code: O6 & 3		31

RC	RA Hazardous	s Waste	Status Not	ification or Out of	Busi	ness Notif	ficati	on	EPA ID	No. FL	ROOK	2	13686
9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):													
(A) (1)Generator of Hazardous Waste				For Items 2 through 7, mark 'X' in all that apply.									
	Yes 🖪 No	(Do no	t include Univ	ersal Waste or Used Oil)	(2)	Treat	er, Stor	er, or Dispo	ser of Ha	azardous W	aste	
			of the follov Generator (ving three categories.			(at	your fac	ility) Note:		ous waste per required for		ivity.
	Generat greater hazardo	es in any per mont ous waste	calendar mo h (kg/mo) (2 ; or Greater t	onth 1,000 kilograms, 200 lbs.) of non-acut han 1 kg (2.2 lbs) least once a year)			[b. O		on-Comme ng: Postcle	ercial TSD osure or Cor	rective	Action
ַ	Generat	es in any		GQG): onth greater than kg/mo (>220 to <2,2	200	Permit or Order (HSWA, etc.) (3) Recycler of Hazardous Waste (at your facility) Specify: Commercial Non-Commercial. Note: A permit is required for storage prior to recycling.							
	lbs.) of (2.2 lbs)	non-acut	e hazardous of acute haza	waste and/or 1 kg		(4)		Exempt a. S	Boiler and	or Indus ty On - site	trial Furna Burner Exe	ce emption	
	General (220 lbs) (2.2 lbs)	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			(5)	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				xempt attach			
I	_		~	activities that apply	•						eived from I		
				ne, not on-going)	1.00	(6)	ч.	Receives	s Hazardou	s Waste 1	from Off-Si	te	
	f. United Sta			me per year:SQG_ dous waste	_rQc	(7)		Undergi	ound Injec	tion Con	trol		
		_		adioactive) Generator	Ś								
	your facility.	List them	in the order	Regulated Hazare they are presented in ist codes routinely or	the re	gulations (e.g., I ed. U	D001, D0 Jse comn	003, F007, F	X019, P01 additional	2, U112).	e space	
1		2		3	4			5		6		7	
8		9		10 :	11			12		13		14	
15		16		17	18			19		20		21	4
11.	Other Statu	s Chan	i ges (If no	longer handling wast	e or c	losed, section	ons 9	and 10 s	hould be bla	ank and sl	kip Section 1	2-16):	
(2	A) Non-Handle	r of Regi	ılated Wast	e at This Facility (S	ection	s 9, 10 and	12-16	should	be blank.)		•		
	_ ,,			tes, transports, treats,		· · · · · · · · · · · · · · · · · · ·				ny regulat	ed waste.		
(I				ction only if all busin									
	(1) Closed at this location and moved or moving to another - Submit a new Form 8700-12FL for the new location if you will												
	(2) Out	of Busin	ess - Busines	s closed on				(date)				
	☐ (C) Property Tax Default ☐ (D) Petition for Bankruptcy Protection												
12-	14 — Registi	ration 2		Contact Informa	tion			mission i	s a registrat	ion or reg		ormatio	n update):
	Same as Facility I		First Name:			Last Name					Title:		
┢			Phone Num	ber:		Extension		E-Mai	l: <u></u>				
Con	tact for: HW Transporter		Street or P.	O. Box:				1					
	Used Oil Handler Universal Waste		City or Tov	/n:				State:(Country):		Zip Code:		

Universal Was	ste Notification and Mercury Transporter/Handler Registration EPA ID No. FLRO	00213686					
12. Univers	12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply):						
A. Federal Notification	Tederally Defined Barge Quantity Handler (BQH) Generation recumulation of the first state						
•	Accumulates: 🔲 a. UW Batteries 🔲 b. Pesticides 🔲 c. Pharmaceu	ticals					
	d. Mercury Containing Devices e. Mercury Contain	ing Lamps					
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	W.					
B. Florida U	niversal Pharmaceutical Waste (UPW): one-time registration						
☐ Pharma	ceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)						
☐ Pharma	ceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated					
☐ Reverse	e Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])					
C. Florida A	nnual Mercury Handler Registration:						
Devices opera form [Chapter of Mercury-Co	For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Containing Lamps and Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.						
	is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-htime registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH reg						
☐ For-hi	re Transporter of Universal Waste Mercury-Containing Lamps or Devices						
☐ For-hi	re Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration					
☐ Mercu	ry-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required					
☐ Mercu	ry-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler						
☐ Mercu	ry-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration + one– time \$1,000 fee+					
	ry-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)					
	Recovery and/or Reclamation Facility (A <u>hazardous waste permit</u> is required for this activity) st time registering Renewal	Annual Registration Required					
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).							
	13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.] Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]						

EPA ID No. FLR00021368(Hazardous Waste and Used Oil Transporter Registrations 14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities) Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. Generators of hazardous waste who transport waste only within the boundaries of their facility should not register. A. HW Transporter Registration Information (must be completed annually and when this information changes) This facility is a registered transporter of hazardous waste. Renewal Notification of changes Cancel Registration This form is: Initial Registration ☐ 1. For own waste only ☐ 2. For commercial purposes ☐ 3. Both commercial and own waste 4. Transportation Mode Air Rail Highway Water Other - specify_ B. HW Transfer Facility Registration Information (must be completed annually and when this information changes) ☐ This facility is a Hazardous Waste Transfer Facility: (at this location) Storage Volume ___ This form is: ☐ Initial Registration ☐ Renewal ☐ Notification of changes ☐ Cancel Registration Note: Hazardous Waste transfer facilities must comply with the requirements of Rule 62-730.171, F.A.C., and Rule 62-730.182, F.A.C. The Transfer Facility records required under the provisions of Rule 62-730.171(6), F.A.C., are kept at (check one): The site (facility) address Our mailing (business) address Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer Facility: Please see the top of page 5 for additional items that must be submitted in addition to the above registration for Hazardous Waste Transfer Facilities [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]: 15. Used Oil and Oil Filter Activities: : (Mark 'X' and complete all that apply if you need to register your used oil activities), Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facilities, processors, off-specification burners, and/or marketers must annually register with the Department using this form. All except Florida used oil (UO) Processors and collection centers must pay an annual \$100 registration fee. This form is: \square Initial Registration \square Renewal \square Notification of changes \square Cancel Registration If applicable, a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection is enclosed. (1) Used Oil Transporter - mark activities: (occurring in Florida) Used Oil Filter Management (must annually register) 🗹 a. Transporter ■ a. Transporter (off-site) and noncontiguous locations ■ b. Transfer Facility ☑ b. Transfer Facility a c. Processor (Annual Report Required) (2) Collection Center (From businesses, no more than 55 gal per ☐ d. End User shipment) (3) Used Oil Processor (A permit is required.) The records required under the provisions of Rule 62-710.510, FAC, are kept at (check one): ☐ Off-Specification Used Oil Burner Our mailing (business) address The site (facility) address (5) Used Oil Fuel Marketer ☐ On-Spec ☐ Off-Spec

Please see the top of page 5 for additional items that must be submitted in addition to the above registration and fees required for non-

exempt Used Oil Transporters.

Transfer Facility and Used Oil Transporter requirement	ents and required signature page	EPA ID No. FLR O	00213486			
(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [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 responsib						
A brief general description of the transfer facilit		, F.A.C.]				
_A copy of the facility closure plan [Rule 62-730						
_A copy of the contingency and emergency plan						
A map or maps of the transfer facility [Rule 62-	730.171(3)(a)7., F.A.C.]					
(15 cont.) Used Oil Transporters: (Exemptions in						
In addition to the requirements on Page 4 Section		ananatina IIO f	tionone operationsitl.			
 ALL registered UO Handlers must submit their own company. 	an annual report except generators tra	insporting UU from nonconf	uguous operations within			
 UO transporters transporting off-site over 	public highways only within their own	n company must submit prod	of of insurance.			
UO transporters transporting more than 50	00 gallons/year must submit proof of in	nsurance annually, and must	sign and certify this			
submission as a certified used oil transpor	ter in section 17 (except those exempted	by Rule 62-710.600(1), F.A.C.)):.			
	Evidence of Liability Insurance pu					
16. Comments (attach a page if more space is need 8418 Palm River Road	Tampa, FL 33	619.				
17. Certification: I certify under penalty of law that accordance with a system designed to assure that quesubmitted is, to the best of my knowledge and belief false information, including the possibility of fine and the possibility of the accordance.	alified personnel properly gather and f, true, accurate, and complete. I am av	evaluate the information subware that there are significan	omitted. The information			
I certify as a Used Oil Transporter that I am tation and have an annual and new employee trainin bility is demonstrated by the Used Oil Transporter O	g program in place covering the appli	cable used oil rules. Evidend	ce of financial responsi-			
Signature of owner, operator, or an authorized representative	Print Name and	Title	Used Oil Date Signed (mm-dd-yyyy)			
But	Barton Montgon	en CFO	Q 63-11-176			
If the person that filled in this form is not the Facilit	y Contact or Operator, please comp	lete the information below	<i>'</i> :			
4sa Alburu 4	07)965-5945 lal	bury@flagte	erce.com			
(Name of person completing this form)	(Phone Number)	(E-mail Address)				



Mail Station 4560, 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 4-23-13 Incorporated in Rule 62-710.510(5)

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 the reporting period January 1, _____ through December 31, _____

Use the information recorded in your Record Keeping For	m [62-710.901(2)] or equiv	alent to	o complete	this c	locument.
SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS						
1. Company Name: Flagler Construction Favi	2. Telephone No	386	779	58-7L	144	+
Site Address: 539 SW Arrowhead T				,FL	321	024
	3. EPA ID No.	FLRO	000	2130	08	4
☐ Check box if any of the above items (1-3) have changed since your last registra						
4. Name of person preparing report (please print) LISQ Album						
Title: Dir. Compliance, Safety Phone number (if dif	ferent from #2, above)	(407)	969	5-594	15	
5. Type of operation (check as many as apply to your operations) Used Oil: ☐ Transporter ☐ Transfer Facility Used Oil Filter: ☐ Transporter ☐ Transfer Facility ☐ Transfer Facility	☐ Processor		_ End U	ser		
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED C	IL HANDLERS. US	ED OIL FIL	TER HA	NDLERS SE	E SEC	TION C)
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Indust	trial	Mixed	Ĺ	Total
a. In Florida	0	50	4	0		506
b. From out of State				0	0	
c. Beginning Inventory						130
d. Total (sum of totals from Lines a + b + c)						636
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)			In	State	C	Out of State
N - Transferred to another facility (not an end use)						
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	nt unit					
Incinerated						
3. Total amount (in gallons) of Used Oil managed			59	84		
4. End of year, on hand estimate (difference between Line 1d and Line 3)			5	7		

SECTION C USED OIL FILTERS (OPT	IONAL) (USE TABLE BELOW FOR CONVERSIONS)	CHECK COLUMN IF OUT OF STATE ♥
Number of filters on hand from previous	year	
2. Number of used oil filters collected		(02.6)
3. Total number of used oil filters to manag	e (Line 1 plus Line 2)	626
4. Disposition of used oil filters collected:	a. Transferred to another registered facility	500
	b. Burned for energy recovery at a Waste-To-Energy facility	👝
	c. Transferred directly to a metal foundry for recycling	
	d. TOTAL	500
5. End of year, on hand estimate (Line 3 mi	126	
6. Gallons of used oil collected as a result of	··· 23	
7. Gallons of used oil transferred to a used		
8. Volume of oily waste collected and mana	_ 23	
9. Description of oily waste management DIRECTIONS FOR SECTION C	Oily rags and pads ser acility to be recycled.	nto to Safety Kleen
One 55-g	allon drum of <u>crushed</u> used oil filters = approximately $\underline{400}$ used oil filters	ters
One 55- g	sallon drum of <u>uncrushed</u> used oil filters = approximately $\underline{250}$ used oil	filters
One ton	of drained used oil filters = approximately $2,350$ 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 Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

FLORIDA

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

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

Please use the instructions document to complete this form EPA ID: To provide initial notification (to obtain an EPA ID Number for hazardous Mark 'X' in 1. Reason for the correct box: waste, universal waste, used oil activities, or PCW activities). Submittal (all submitters must To provide subsequent notification (to update status and facility identification information). (must choose one complete pages 1 and 2 if a notification) and sign page 5. To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5) Pages 3 and 4, - com-Used Oil (see page 4) plete as applicable) FL Registration(s) ☐ HW Transporter (see page 4) UW Mercury (see page 3) 2. Facility or **Business Name** Date became Operator: 11 /10/14 Name of Operator: 3. Facility Operator Flagler Constru (List additional Opera-Street or P.O. Box: Phone Number: tors in the comments (904) 137-6000 section). Country (if not USA): Zip Code: City or Town: State: 32256 Jackson ☐Federal ☐Municipal □State □County □Other Private Operator Type: Physical Street Address: **□** Vessel 4. Facility **Physical** Location State: Zip Code: City or Town: Information (No P.O. Boxes) Country (if not USA): County: Same address as #3 above or: 5. Facility North American Industry B. (required) Classification System (NAICS) Code(s) (at least 5 digits) D. Same address as #__ above or: Street or P.O. Box: 6. Facility or **Business** Country (if not USA): State: Zip/Postal Code: City or Town: **Mailing Address** Last Name: Title: First Name: 7. Facility or Jorthcraft Shawn **Business** Phone Number: Extension: **RCRA** -6000 464 904)737 e.com **Contact Person** Street or P.O. Box: Same address as Country (if not USA): City or Town: State: Zip Code: #__above or: Name of Owner: 8. Real Property Date became Owner: (FL Land) Owner New Owner mm dd уу of the Facility's Phone Number: Street or P.O. Box **Physical Location** 1.85-2290 904 (List additional Zip Code: Country (if not USA): State: City or Town: owners in the comments section.) 32082 Same address as State County Other Owner Type: #__above or:

RC	RA Hazardous	Waste	Status Not	ification or Out of	Busii	ness Notif	icatio	on	EPA ID	No.FL	R000	213694
9.]	RCRA Hazar	dous V	Vaste Act	ivities at this Fac	ility:	(Mark	'X' in	all tha	t apply):			
(A)	(1)Generator	of Hazar	dous Waste			For Items 2 through 7, mark 'X' in all that apply.						
	Yes 🗹 No	(Do not	include Univ	ersal Waste or Used Oil)	(2)	Γreat	er, Store	r, or Dispo	oser of Ha	zardous W	aste
I:	_		of the follov Generator (ving three categories.			(at	your faci	lity) Note:		ous waste per	ermit this activity.
	Generat	es in any	calendar mo	onth 1,000 kilograms ,200 lbs.) of non-acut					perating Co			
				han 1 kg (2.2 lbs) least once a year)				c . No		ng: Postcle	osure or Coi	rective Action
ַ	b. Small Qu			GQG): onth greater than		(3)					e (at your fa Non-Con	
	100kg/n	no but les	s than 1,000	kg/mo (>220 to <2,2) waste and/or 1 kg	.00		No	ote: A pe	ermit is requ	ired for sto	rage prior to r	ecycling.
	(2.2 lbs)	or less of once a y	of acute haza	rdous waste		(4)	<u> </u>				trial Furna Burner Exe	
	_			(07000)			Ī			1.75		urnace Exemption
۱ ۱	Generat	tes in any		onth 100 kg/mo or les	S	(5)						nally Exempt
			-acute hazar of acute haza	dous waste and 1 kg ardous waste				Choose		ement acti	vity ONLY	if you attach
ı	n addition. indic	cate othe	r generator	activities that apply				EITHER OR the a	R a copy of authorization	your appl on you rec	ication for seived from	uch authorization FDEP.
Ţ				ne, not on-going)		(6)		Receives	Hazardou	s Waste f	rom Off-Si	te
Ţ				me per year:SQG_	_LQC		_					
Ţ	f. United Sta	ates Impo	rter of hazar	dous waste		(7)	U 1	Undergr	ound Injec	ction Con	trol	
Ĺ	g. Mixed W	aste (haza	ardous and r	adioactive) Generator	·	7						
10.				Regulated Hazare they are presented in								wastes handled at
				ist codes routinely or								re spaces are needed.
1		2		3	4		3	5		6		7
8		9		10	11			12		13		14
15		16		17	18		3	19		20		21
11.	Other Statu	s Chan	ges (If no	longer handling wast	e or c	losed, section	ons 9 :	and 10 sl	nould be bla	ank and sl	cip Section	12-16):
(.	A) Non-Handle	r of Regu	ılated Wast	e at This Facility (S	ection	s 9, 10 and	12-16	should b	oe blank.)			
	(1) Busin	ness no lo	nger genera	tes, transports, treats,	stores	, disposes o	of, or o	otherwise	handles ar	ny regulat	ed waste.	
(1	B) Facility Clos	ed (Com	plete this se	ction only if <u>all</u> busin	ess act	tivities at th	is fac	ility have	e ceased.)			
	(1) Close	ed at this	location and	moved or moving to	anoth	er - Submit	a nev	v Form 8	700-12FL 1	for the nev	w location if	you will
	(2) Out of Business - Business closed on(date)											
	☐ (C) Property Tax Default ☐ (D) Petition for Bankruptcy Protection											
12-	14 — Registi	ration A		Contact Informa	tion			nission is	s a registrat	ion or reg		ormation update):
	Same as Facility I		First Name			Last Name					Title:	
			Phone Num	ber:		Extension	;	E-Mail	;			
Cor	ntact for: HW Transporter		Street or P.	O. Box:								
	Used Oil Handler Universal Waste		City or Tov	vn:				State:(0	Country):		Zip Code:	

Universal Waste Notification and Mercury Transporter/Handler Registration EPA ID No. FLROC	0213694								
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply):									
A. Federal Notification Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 of any combination of UW accumulated (at any one time)	lb) or more								
Accumulates: 🔲 a. UW Batteries 🔲 b. Pesticides 🗀 c. Pharmaceuticals									
d. Mercury Containing Devices — e. Mercury Contain	ing Lamps								
Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	W.								
B. Florida Universal Pharmaceutical Waste (UPW): one-time registration									
Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)									
Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated								
Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])								
C. Florida Annual Mercury Handler Registration:									
For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Contain Devices operating in the State of Florida are required to register annually with the Department using this form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the in	section of the ty for-hire Handler								
(1) This form is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-being First time registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH registering									
For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices									
For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration								
Mercury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required								
Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	~								
Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration + one-time \$1,000 fee+								
Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)								
(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) Annual Registration Required									
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).									
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transpo									

Hazardous Waste and Used Oil Transporter Registrations

EPAID No.FLR 000213694

14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities) Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. Generators of hazardous waste who transport waste only within the boundaries of their facility should not register. A. HW Transporter Registration Information (must be completed annually and when this information changes) This facility is a registered transporter of hazardous waste. This form is: Initial Registration Renewal Notification of changes Cancel Registration ☐ 3. Both commercial and own waste ☐ 1. For own waste only ☐ 2. For commercial purposes 4. Transportation Mode Air Rail Highway Water Other - specify_ B. HW Transfer Facility Registration Information (must be completed annually and when this information changes) ☐ This facility is a Hazardous Waste Transfer Facility: (at this location) Storage Volume ____ This form is:
☐ Initial Registration ☐ Renewal ☐ Notification of changes ☐ Cancel Registration Note: Hazardous Waste transfer facilities must comply with the requirements of Rule 62-730.171, F.A.C., and Rule 62-730.182, F.A.C. The Transfer Facility records required under the provisions of Rule 62-730.171(6), F.A.C., are kept at (check one): Our mailing (business) address ☐ The site (facility) address Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer Facility: Please see the top of page 5 for additional items that must be submitted in addition to the above registration for Hazardous Waste Transfer Facilities [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]: 15. Used Oil and Oil Filter Activities: : (Mark 'X' and complete all that apply if you need to register your used oil activities), Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facilities, processors, off-specification burners, and/or marketers must annually register with the Department using this form. All except Florida used oil (UO) Processors and collection centers must pay an annual \$100 registration fee. If applicable, a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection is enclosed. (1) Used Oil Transporter - mark activities: (occurring in Florida) Used Oil Filter Management (must annually register) a. Transporter a. Transporter (off-site) and noncontiguous locations b. Transfer Facility ☑ b. Transfer Facility a c. Processor (Annual Report Required) (2) Collection Center (From businesses, no more than 55 gal per ☐ d. End User shipment) (3) Used Oil Processor (A permit is required.) The records required under the provisions of Rule 62-710.510, FAC, are kept at (check one): ☐ Off-Specification Used Oil Burner (5) Used Oil Fuel Marketer ☐ On-Spec ☐ Off-Spec Please see the top of page 5 for additional items that must be submitted in addition to the above registration and fees required for nonexempt Used Oil Transporters.

Transfer Facility and Used Oil Transporter requirem	ents and required signature page	EPA ID No.FLROO	0213694
(14 cont.) Hazardous Waste Transfer Facilities: following items are required to be submitted with the ini subsequent submission [Rule 62-730.171(3), Florida Adr	tial notification for a transfer facility a		
Certification by a responsible corporate officer Section 403.7211(2), Florida Statut	of the transporter that the proposed loces (F.S.) [Rule 62-730.171(3)(a)1., F.A		
Evidence of the transporter's financial responsib			
_A brief general description of the transfer facility	ty operations [Rule 62-730.171(3)(a)4.	, F.A.C.]	
_A copy of the facility closure plan [Rule 62-730	0.171(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.]		
	on 15: t an annual report except generators tra public highways only within their own 00 gallons/year must submit proof of inter in section 17 (except those exempted Evidence of Liability Insurance pure	n company must submit proof consurance annually, and must signly Rule 62-710.600(1), F.A.C.):. rsuant to 62-710.600(2)(e)., F.A.	f insurance. In and certify this A.C. is attached.
16. Comments (attach a page if more space is need 8418 Palm River Road,			
17. Certification: I certify under penalty of law tha accordance with a system designed to assure that quesubmitted is, to the best of my knowledge and belief also information, including the possibility of fine at the control of th	nalified personnel properly gather and of true, accurate, and complete. I am avend imprisonment for knowing violation	evaluate the information submit vare that there are significant posts.	ted. The information enalties for submitting
✓ I certify as a Used Oil Transporter that I am a tation and have an annual and new employee training bility is demonstrated by the Used Oil Transporter (g program in place covering the applic	cable used oil rules. Evidence o form 62-730.900(5)(a), F.A.C.	f financial responsi-
Signature of owner, operator, or an authorized representative	Print Name and	Title Use Oil	
Big	Barton Montgor	my CFO	03-19-2019
		0	
If the person that filled in this form is not the Facilit Lisa Albury (Name of person completing this form)		bury of flag le (E-mail Address)	rce.Com



DEPARTMENT OF ENVIRONMENTAL PROTECTION

Mail Station 4560, 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 4-23-13 Incorporated in Rule 62-710.510(5)

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 the reporting period January 1, 2018 through December 31, 2018

Use the information recorded in your Record Keeping Form	n [62-710.901(2)] or equi	valent to	o complete	this o	document.			
SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS									
1. Company Name: Flagter Construction Equipmen Telephone No. 904) 737-6000									
Site Address: 8750 Philips Hwy., Jacksonville, FL 32256									
3. EPA ID No. FLR 000 213 694									
	☐ Check box if any of the above items (1-3) have changed since your last registration.								
4. Name of person preparing report (please print) LISQ Alburu									
Title: Dir. Compliance, Safety Phone number (if differ	rent from #2, above)	407	796	5-50	14)			
5. Type of operation (check as many as apply to your operations) Used Oil: ☐ Transporter ☐ Transfer Facility ☐ Collection Center/Aggregation I Used Oil Filter: ☐ Transporter ☐ Transfer Facility ☐	Point Processor	□Market	er 🔲 Bu 🔲 End U	uner (of off-s ser	pecific	eation used oil)			
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL	LHANDLERS. USI	ED OIL FI	LTER HA	NDLERS SE	E SEC	TION C)			
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Indu	strial	Mixed		Total			
a. In Florida	0	58	43	0		5863			
b. From out of State	0	(0		0			
c. Beginning Inventory						0			
d. Total (sum of totals from Lines a + b + c)						5843			
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)			In	State	(Out of State			
N - Transferred to another facility (not an end use)			580	03					
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			58	63					
4. End of year, on hand estimate (difference between Line 1d and Line 3)			6						

DEP Form #62-710.901(3)
Form Title Annual Report by
Used Oil and Used Oil Filter Handlers
Effective Date 4-23-13
Incorporated in Rule 62-710.510(5)

SECTION C USED OIL FILTERS (O	PTIONAL) (USE TABLE BELOW FOR CONVERSIONS)	CHECK COLUMN IF OUT OF STATE Ψ
1. Number of filters on hand from previous	ous year	🔼
2. Number of used oil filters collected		6789
3. Total number of used oil filters to man		6789
4. Disposition of used oil filters collected	d: a. Transferred to another registered facility	W469
	b. Burned for energy recovery at a Waste-To-Energy facility	
	c. Transferred directly to a metal foundry for recycling	
	d. TOTAL	6469
5. End of year, on hand estimate (Line 3	minus Line 4d)	320
6. Gallons of used oil collected as a resu	lt of filter processing	318
7. Gallons of used oil transferred to a us	ed oil handler (transporter or processor)	6181 <u> </u>
8. Volume of oily waste collected and m	nanaged as a result of filter processing 🗹 gallons 🗌 cubic yards	318
9. Description of oily waste management DIRECTIONS FOR SECTION C	to Safety Kleen be recycled.	
One 5	5-gallon drum of <u>crushed</u> used oil filters = approximately 400 used oil filters	ers
One 5:	filters	
One <u>to</u>	\underline{on} of drained used oil filters = approximately $\underline{2,350}$ 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 Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

For assistance with this form, please call the Used Oil Coordinator at 850-245-8707.

Data Home | HW Handlers | Permit Tracking | RCRA Guidance | Management Reports | Databases | Data Quality | Help

Activity History for:

EPAID: FLR000088518, Flagler Construction Equipment

Note: ETA links to Enforcement Tracking Activity

Legend of Status Types

Date Done	Activity Type	Activity Comments	ETA Link
10/23/2014	Site Inspection	Routine; SQG (100-1000 kg/month) - Routine; Used Oil Transporter	
12/9/2014	Verbal Compliance Assitance Offer	Finished-12/09/2014	

Violation History

Vio#	Area	Regulation	Opened By	Date Determined	Completed	ЕТА	Act		Regulation Text Excerpt (mouse over for more text)
1	XXS	62-710.500	Camp_Sd	10/23/2014	12/8/2014		173441	10/23/2014	Registration and Notification.

Legend of Status Types:

- 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/Storer/Disposer Permit, PC = Post-Closure Permit, CO = Closure order, CA = Corrective Action Permit

LQG - Large Quantity Generator

SQG - Small Quantity Generator

CES - Conditionally Exempt Small Quantity Generator

NHR - Non-Handler of Hazardous Waste CLO - Closed

TRA - Hazardous Waste Transporter

TSD - Treatment/Storage/Disposal Facility – this is more broken out in the Internal report.

NRTRA – is a handler that was once registered as a hazardous waste transporter but is not currently registered.

UOT - is a currently registered Used Oil Handler

NRUOT - is a handler that was once registered as a used oil handler but is not currently registered.

NR-TRA - is a handler which has handler status of hazardous waste transporter but is not registered as such.

NR-UOT – is a handler which has handler status of used oil handler but is not registered as such.

Non Reg Tra - is a generic warning message that the facility has a handler status of either used oil or

hazardous waste transporter, but is not registered as such. That is for internal users to help recognize where waste activities data is not the same as registration data.

*** INVOICE CUSTOMER COPY ***

Location : CINTAS FIRE PROTECTION

Invoice # : 0F32613340 Inv Date : 10/04/2018

Acct # : 26727

WO Number: Acct 21p . 5386241

Bill to: Remit to:

CINTAS FIRE 636525 FLAGLER CONSTRUCTION EQUI

P.O. BOX 636525 8418 PALM RIVER RD TAMPA, FL 33619 CINCINNATI, OH 452636525

(813) 621-6094

Serviced: FLAGLER CONSTRUCTION EQUI 8418 PALM RIVER RD TAMPA, FL 33619

Item	Qty	Description	Unit Price	Net Amount Tx
AX456	1	EXTINGUISHER, 10# ABC, ALUMINUM VALVE	155.21	155.21 Y
DISP	5	MATERIAL RECYCLE & DISPOSAL	8.30	41.50 Y
DISPBAT	7	BATTERY RECYCLE & DISPOSAL	6.72	47.04 Y
EXB64	7	BATTERY, 6V 4 AH	59.28	414.96 Y
DC10	5	RECHARGE, 10# DRY CHEMICAL	35.52	177.60 Y
DC5	1	RECHARGE, 5# DRY CHEMICAL	23.66	23.66 Y
EEOR	6	O RING ASSEMBLY	7.05	42.30 Y
EESEAL	26	FLAG SEAL/TAMPER INDICATOR	2.41	62.66 Y
EEVSC	6	VERIFICATION SVC COLLAR	4.71	28.26 Y
EEVSTEM	6	VALVE STEM ASSEMBLY	16.56	99.36 Y
IN	26	FIRE EXT. INSPECTION	9.49	246.74 Y
INEL	8	INSPECTION, LIGHTING, EMERGENCY AND/OR	EXIT	

*** INVOICE CUSTOMER COPY ***

Location : CINTAS FIRE PROTECTION

Invoice # : 0F32613340 Inv Date : 10/04/2018

WO Number: ACCL 41p . 5386241

Remit to: Bill to:

CINTAS FIRE 636525 FLAGLER CONSTRUCTION EQUI

8418 PALM RIVER RD P.O. BOX 636525 CINCINNATI, OH 452636525 TAMPA, FL 33619 (813) 621-6094

Serviced: FLAGLER CONSTRUCTION EQUI 8418 PALM RIVER RD TAMPA, FL 33619

Item	Qty	Description	Unit Price 13.99	Net Amount Tx 111.92 Y
INPTT	17	INSP, ELIGHT PUSH TO TEST	5.77	98.09 Y
SY	6	6YR MAINT-INTERNAL INSPCT	21.26	127.56 Y
SC	1	SERVICE CHARGE	60.00	60.00 Y

SUB-TOTAL : 1,736.86 TAX : 121.58 TOTAL : 1,858.44

PLEASE PAY FROM THIS INVOICE WE ACCEPT VISA/MC/AMEX AND DISCOVER TO MAKE A PAYMENT BY PHONE: 570.891.0493 OR EMAIL NEUBAUERK@CINTAS.COM LICENSE NUMBERS: #EF20001213 #20678300012010 #94476600042007 #94476600032007

Date : 3/04/19 Time: 9:41:46 Cintas Corporation Site Survey Report

Page . . : 1 Report ID: CU249R

Location: 00F32 CINTAS FIRE PROTECTION

Contract: 26727

FLAGLER CONSTRUCTION EQUI

8418 PALM RIVER RD TAMPA, FL 33619

Customer: 26727

FLAGLER CONSTRUCTION EQUI

8418 PALM RIVER RD TAMPA, FL 33619

eq	Category	Description	Location	Date	Exch Date	Service
		AND FIR 10 LB ABC DRY CHEM				
	EXTINGOLDHER				2014H	October
		AND FIR 10 LB ABC DRY CHEM	SHOP N RACKS	2011	201411	OCCODE
05	DATINGOLDIIDIK	Mfg: AMEREX Serial Number			2018Н	October
70		AND FIR 10 LB ABC DRY CHEM			201011	OCCODEL
, 0	LATINGOIDHER	Mfg: AMEREX Serial Number			2018H	October
80		AND FIR 10 LB ABC DRY CHÉM	TRUCK 231309	2010	201011	0000001
•	DITT TIVO TENTE	Mfg: AMEREX-I Serial Number	B76520094	2016	2016Н	October
190	EXTINGUISHER	AND FIR 10 LB ABC DRY CHEM	BREAKROOM	2010	201011	OCCODEL
130		AND FIR 10 LB ABC DRY CHEM Mfg: AMEREX Serial Number	CC96355	2014	2014H	October
200	EXTINGUISHER	AND FIR 10 LB ABC DRY CHEM	LOBBY	2011	202 111	CCCORCI
200	DITT IN COLD III.	Mfg: AMEREX Serial Number	CC96370	2014	2014H	October
210	EXTINGUISHER	AND FIR 10 LB ABC DRY CHEM	OFFICE 2FL W	WAT.T.	20111	000000
210	LITTINGOIDHLI	Mfg: AMEREX Serial Number			2014H	October
220	EXTINGITSHER	AND FIR 10 LB ABC DRY CHEM			201111	OCCODE
220	LMITHOOTDILLI	Mfg: AMEREX Serial Number			2014н	October
230	EXTINGUISHER	AND FIR 20 LB ARC DRY CHEM	USED OTT.	2014	201411	OCCODE
230	BATTROOTERIN	AND FIR 20 LB ABC DRY CHEM Mfg: AMEREX Serial Number	A22709031	2014	2014H	October
240	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM	TRUCK 194355	2011	201111	OCCODE
210		Mfg: KIDDE Serial Number			2013Н	Octobe
250		AND FIR 5 LB ABC DRY CHEM		2013	201311	OCCODE:
200		Mfg: AMEREX Serial Number		2011	2011H	Octobei
260		AND FIR 5 LB ABC DRY CHEM		2011	201111	OCCODC:
200		Mfg: KIDDE Serial Number		2014	2014H	October
270		AND FIR 5 LB ABC DRY CHEM		2011	201111	OCCODE
210		Mfg: KIDDE Serial Number		2012	2013Н	October
280		AND FIR 5 LB ABC DRY CHEM		2012	201311	OCCODE
200		Mfg: KIDDE Serial Number		2013	2013Н	October
330		AND FIR 5 LB ABC DRY CHEM		2013	201311	OCCODE
330		Mfg: KIDDE Serial Number		2013	2013Н	October
340		AND FIR 5 LB ABC DRY CHEM			201311	OCCODE
310		Mfg: AMEREX Serial Number			2012Н	October
350	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM	TRUCK 194357	2012	201211	occobe.
550	EMITINGOLDINER	Mfg: KIDDE Serial Number		2011	2011H	Octobei
110	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM		2011	201111	OCCODE:
110	DATINGOLDIIDI	Mfg: PEMALL Serial Number		2013	2013Н	Octobei
30	EXTINGUISHER	AND FIR 10 LB ABC DRY CHEM	STCKRM E WALL		201311	OCCODE
30	DATINOOIDIIDIN	Mfg: AMEREX Serial Number		2014	2014H	October
360	EXTINCUITSHER	AND FIR 10 LB ABC DRY CHEM	TRUCK 194357	2011	2 V 1 111	OCCODE
500	Tari Tiroo Tollink	Mfg: BADGER Serial Number		2013	2013Н	October
370	EXTINGUISHED	AND FIR 5 LB ABC DRY CHEM	TRUCK 194358	2013	201311	OCCODE
570	PVITMOOTOHEK	Mfg: AMEREX Serial Number		2015	2015Н	October
380	EXTINCUITAND	AND FIR 5 LB ABC DRY CHEM	TRUCK 194358	2013	~ O T J I I	occoper
	TATTAGGENITA	WAD TIK O DD UDC DKI CHEM	TUOCU TEATOO			

Date : 3/04/19 Time : 9:41:46 Cintas Corporation Site Survey Report Page . . : 2 Report ID: CU249R

Location: 00F32 CINTAS FIRE PROTECTION

Contract: 26727

FLAGLER CONSTRUCTION EQUI

8418 PALM RIVER RD TAMPA, FL 33619

Customer: 26727

FLAGLER CONSTRUCTION EQUI

8418 PALM RIVER RD TAMPA, FL 33619

eq	Category		Description	Location	Date	Exch Date	
 50	EXTINGUISHER		10 LB ABC DRY CHEM				
00	DATEMOOFDIEN		REX Serial Number		2018	2018H	Octobe
60	EXTINGUISHER		10 LB ABC DRY CHEM			201011	000000
			JL Serial Number		2017	2017H	Octobe
90	EXTINGUISHER		10 LB ABC DRY CHEM				
			GER Serial Number		2013	2013H	Octobe
400	EXTINGUISHER	_	10 LB ABC DRY CHEM				
			KEYE Serial Numbe		2010	2016H	Octobe
410	EMERGENCY OR	_	EXIT SIGN - DC BACK				
		Mfg:	Serial Numbe	er	1900	1900	October
420	EMERGENCY OR	_	EXIT SIGN - DC BACK	JP BREAKRM EXIT	ľ		
		Mfg:	Serial Numbe	er	1900	1900	Octobe
430	EMERGENCY OR		EXIT SIGN - DC BACK	JP RECEPTIONIST	ľ		
		Mfg:	Serial Number	er	1900	1900	October
440	EMERGENCY OR		EMERG LIGHT - DC BAG	CKUP WOMENS REST	RM		
		Mfg:	Serial Number	er	1900	1900	Octobe
450	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP RESTRM HALL			
		Mfg:	Serial Numbe	er	1900	1900	Octobe:
460	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP MENS RESTRM			
		Mfg:	Serial Numbe	er	1900	1900	Octobe:
470	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP 2FL W WALL			
		Mfg:	Serial Number	er	1900	1900	Octobe:
480	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP 2FL WOMENS H	RESTRM		
		Mfg:	Serial Number	er	1900	1900	Octobe:
490	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP 2FL MENS RES	STRM		
		Mfg:	Serial Numbe	er	1900	1900	Octobe:
500	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP 2FL N WALL W	V		
		Mfg:	Serial Numbe	er	1900	1900	October
510	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP 2FL N MID HA	ALL		
			Serial Numbe		1900	1900	October
520	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP 2FL N WALL E	Σ.		
		Mfg:	Serial Numbe	er	1900	1900	Octobe
530	EMERGENCY OR	EXIT LI	EXIT SIGN - DC BACK	JP 2FL E HALL 1	1		
		Mfg:	Serial Numbe	er	1900	1900	Octobe:
540	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG	CKUP 2FL NE HALL			
		Mfg:	Serial Numbe	er	1900	1900	Octobe:
550	EMERGENCY OR	EXIT LI	EXIT SIGN - DC BACK	JP 2FL NE EXIT			
		Mfg:	Serial Numbe	er	1900	1900	Octobe:
560	EMERGENCY OR	EXIT LI	EXIT SIGN - DC BACK	JP SHOP SE EXIT	[
		Mfg:	Serial Number		1900	1900	Octobe:
570	EMERGENCY OR	EXIT LI	EMERG LIGHT - DC BAG				
		Mfg:	Serial Numbe		1900	1900	Octobe:
580	EMERGENCY OR		EMERG LIGHT - DC BAG				
		Mfg:	Serial Numbe	er	1900	1900	Octobe:

Date: 3/04/19 Cintas Corporation Page..: 3
Time: 9:41:46 Site Survey Report Report ID: CU249R

Location: 00F32 CINTAS FIRE PROTECTION

Contract: 26727 Customer: 26727

FLAGLER CONSTRUCTION EQUI FLAGLER CONSTRUCTION EQUI

8418 PALM RIVER RD 8418 PALM RIVER RD TAMPA, FL 33619 TAMPA, FL 33619

Seq	Category	Description		Mfg Date		
		EXIT LI EXIT SIGN - DC BACKUP				
		Mfg: Serial Number EXIT LI EMERG LIGHT - DC BACKUP			1900	October
600	EMERGENCY OR		SHOP LOCKER RN			
61.0	ENGERGENOU OR	Mfg: Serial Number	ONOD ON TWITE	1900	1900	October
		EXIT LI EXIT SIGN - DC BACKUP	SHOP SW EXIT	1900	1900	Ogtobox
620	EMERGENCY OR	Mfg: Serial Number EXIT LI EMERG LIGHT - DC BACKUP	SHOP W WALL	1900	1900	October
02.0	EPERGENCI OR	Mfg: Serial Number	SHOE W WALL	1900	1900	October
630	EMERGENCY OR	EXIT LI EXIT SIGN - DC BACKUP	SHOP NW EXIT	1500	1500	0000001
				1900	1900	October
		Mfg: Serial Number EXIT LI EXIT SIGN - DC BACKUP	SHOP NE EXIT			
		Mfg: Serial Number EXIT LI EMERG LIGHT - DC BACKUP		1900	1900	October
650	EMERGENCY OR	EXIT LI EMERG LIGHT - DC BACKUP	SHOP E WALL			
660		Mfg: Serial Number AND FIR 5 LB ABC DRY CHEM	mp.,,a,, 024220	1900	1900	October
660	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM	TRUCK 231309	2006	2012T	October
670	EVTTNCIITQUED	Mfg: BADGER Serial Number YEAND FIR 5 LB ABC DRY CHEM		2006	2012I	October
070	EXIINGOISHER	Mfg: KIDDE Serial Number CO		2014	2014H	October
680	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM		2011	201111	0000001
		Mfg: BADGER Serial Number CI		2014	2014H	October
690	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM				
		Mfg: BADGER Serial Number BZ		2013	2013H	October
700	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM				
700		Mfg: BADGER Serial Number BI		2013	2013Н	October
720	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM Mfg: BADGER Serial Number BB		2013	2013н	October
750	FYTTMCHTQUED	AND FIR 5 LB ABC DRY CHEM		2013	Z013U	October
750	EXITINGOLDHER	Mfg: BADGER Serial Number B		2013	2013н	October
770	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM		2013	201311	OCCODE
		Mfg: BADGER Serial Number B		2013	2013Н	October
790	EXTINGUISHER	AND FIR 10 LB ABC DRY CHEM	SPARE			
		Mfg: BUCKEYE Serial Number Al		2018	2018H	October
40	EXTINGUISHER	AND FIR 10 LB ABC DRY CHEM			004.4	
020	TVTTNOUT OUTD	Mfg: BADGER Serial Number Cl		2014	2014H	October
830	EXTINGUISHER	AND FIR 10 LB ABC DRY CHEM Mfg: AMEREX Serial Number XV	SPARE	2018	2018Н	October
850	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM	TRUCK 194344	2010	201011	October
0.50	TWI THOUTDIEN	Mfg: BADGER Serial Number AS		2012	2012Н	October
860	EXTINGUISHER	AND FIR 2.5 LB ABC DRY CHEM	TRUCK DKU D86			
		Mfg: AMEREX Serial Number B	B784233	2012	2012H	October
390	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM	TRUCK 121956			
		Mfg: BADGER Serial Number B		2013	2013H	October
880	EXTINGUISHER	AND FIR 5 LB ABC DRY CHEM	SPARE	2017	20177	0-4-1
		Mfg: ANSUL Serial Number Pt	U-0/2298	2017	2017I	October

Date : 3/04/19 Time : 9:41:46 Cintas Corporation Site Survey Report Page . . : 4
Report ID: CU249R

Location: 00F32 CINTAS FIRE PROTECTION

Contract: 26727

26727 Customer: 26727

FLAGLER CONSTRUCTION EQUI

FLAGLER CONSTRUCTION EQUI

8418 PALM RIVER RD TAMPA, FL 33619

8418 PALM RIVER RD TAMPA, FL 33619

Seq	Category	Desc	 ription	Location	Mfg Date	Exch Date	Next Service
100	EXTINGUISHER	AND FIR 10 L		SHOP SPARE			
		Mfg: AMEREX	Serial Number	F46824751	2018	2018H	October
900	EXTINGUISHER	AND FIR 5 LB	ABC DRY CHEM	SPARE			
		Mfg: AMEREX	Serial Number	AX67617	2018	2018H	October
910	EXTINGUISHER	AND FIR 5 LB		SPARE			
		Mfq: KIDDE	Serial Number	C88770255	2017	2017H	October
**** I	End of Report	****					

			Doc No:	EAP
CONSTRUCTION EQUIPMENT			Initial Issue Date	12/04/2017
		Flagler CE Holdings, LLC Safety Management System	Revision Date:	Initial Version
EMERGENCY ACTION	12/04/2017	1		
EIVIERGENCI ACTION	Next Review Date:	12/31/2019		
Preparation: Safety Director	Authority: Vice Presid Product Support	ent Issuing Dept: Safety	Page:	Page 1 of 21

Purpose

Each FLAGLER CE HOLDINGS, LLC location shall have a written Emergency Action Plan, appropriate to the hazards of the workplace, in order to respond to an emergency that may require rescue or evacuation.

Each Emergency Action Plan shall be prepared to reflect all known probable emergency conditions which may arise from within the workplace and from adjacent workplaces, the minimum of which will include fire or other emergencies.

The emergency action plan must be available to all employees to review. An emergency action plan must be in writing, kept in the workplace and available to employees for review. However, if a site has 10 or fewer employees the plan may be orally to employees.

Emergency Response Planning, Issuing and Annual Review Guidelines

Emergency Procedures shall be issued and discussed with all new/transferred personnel upon arrival for assignment.

Emergency Action Plans shall be established, implemented, reviewed, maintained and updated annually in conjunction with:

- Client emergency services department requirements.
- FLAGLER CE HOLDINGS, LLC safety staff and management.
- The requirement to ensure the plan is up to date to reflect current circumstances at the workplace.

The plan is to be reviewed before the job and when conditions warrant and should be used for routine and non-routine emergencies as well as changes in operation, and products or services which warrant new emergencies situations.

Reviewing the Emergency Action Plan with Employees

A review of the emergency action plan should occur with employees:

- When the plan is developed or the employee is assigned initially to a job.
- When the employee's responsibilities under the plan change.
- When the plan is changed.

Procedures for Emergency Evacuation Planning

The emergency action plan must include procedures for emergency evacuation. An emergency action plan must include, at a minimum, procedures for emergency evacuation, including type of evacuation and exit route assignments.

The individual site evacuation procedure shall be appropriate to the risk must be developed and implemented to:

CONSTRUCTION EQUIPMENT			Doc No:	EAP
			Initial Issue Date	12/04/2017
		Flagler CE Holdings, LLC afety Management System	Revision Date:	Initial Version
EMERGENCY ACTION PLAN		12/04/2017	1	
EWERGENCY ACTION PLAN		Next Review Date:	12/31/2019	
Preparation: Safety Authority: Vic Director Product S		Issuing Dept: Safety	Page:	Page 2 of 21

- Notify staff, including the first aid attendant, of the nature and location of the emergency,
- Evacuate employees safely and procedures to account for all employees after evacuation,
- Check and confirm the safe evacuation of all employees,
- Notify the fire department or other emergency responders, and
- Notify adjacent workplaces or residences which may be affected if the risk of exposure to a substance
 extends beyond the workplace. Notification of the public must be in conformity with the requirements of
 other jurisdictions, including provincial and municipal agencies.

List of Potential Emergencies

The emergency action plan must include procedures for reporting a fire or other emergency. An emergency action plan must include, at a minimum, procedures for reporting a fire or other emergency.

Each location shall conduct a risk assessment for hazards posed by potential hazardous substances from accidental release, fie or other such emergencies that could cause an evacuation or rescue and list the potential emergencies for FLAGLER CE HOLDINGS, LLC operations. Procedures for each of these potential emergencies shall be contained within the Emergency Action Plan. Examples include:

- Fire
- Gas Leaks/Chemical Spills
- Bomb Threats
- Medical Emergencies
- Explosion
- Workplace Violence

Guidance Procedures for Potential Emergencies

Fire

- Warn others in the immediate area. Notify the appropriate emergency response personnel by phone or radio and pull the nearest fire alarm if present.
- If nearby staff have been trained, and it is safe to do so, fight the fire using a portable fire extinguisher. Remember, if in doubt get out.
- Evacuate the premises via the nearest exit and proceed to the nearest Emergency Assembly Area.
- Re-enter only after the Emergency Coordinator has given an ALL CLEAR.

Gas Leaks/Chemical Spills - Upon smelling or noticing a gas leak or unusual vapors, or a chemical spill:

- Pull fire alarm (if present) or sound warning and evacuate the premises via the nearest exit
- Proceed to the Emergency Assembly Area
- Contact local emergency response personnel by phone or radio
- Re-enter only after the Emergency Coordinator has given an ALL CLEAR.

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If employees are required to control a release of a hazardous substance, to perform cleanup of a spill, or to carry out testing before re-entry, FLAGLER CE HOLDINGS, LLC shall provide:

- Adequate written safe work procedures and documented training.
- Appropriate personal protective equipment which is readily available to employees and is adequately maintained, and
- Material or equipment necessary for the control and disposal of the hazardous substance.

Bomb Threats

- If a threat is received by phone, mail or other means, get as much information as possible.
- If the threat is received by phone, try to keep the person on the line for as long as possible. Do not hang up the phone, even after the call has been terminated.
- Contact local emergency response personnel by phone or radio.
- If a suspicious device is identified, evacuate the immediate area and notify local emergency response personnel.

Medical Emergencies

- Call for assistance by phone or radio. Give the exact location and details of the medical emergency.
- If qualified, provide basic first aid, and keep the person comfortable. Do not move the person. Do not leave him/her unattended.
- Arrange for emergency medical transportation based on the medical planning portion of the site's Emergency Action Plan.

Explosions

- Get down on the floor, take shelter under tables or desks, and protect your face and head against flying glass and debris.
- Once it is safe to do so, evacuate the premises via the nearest exit and proceed to the nearest Emergency Assembly Area.
- Re-enter only after the Emergency Coordinator has given an ALL CLEAR.

Workplace Violence

- Notify security immediately by phone or radio and report the occurrence.
- Do NOT attempt to physically intervene. Protect yourself first at all costs.

Emergency Response Equipment

Listing of Types of Emergency Equipment

Each site Emergency Action Plan shall identify, list the locations of and provide operational procedures for types of emergency equipment. For off-site locations, available emergency equipment should be identified and reviewed with workers prior to commencing work activities. Examples include:

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- Living areas with an audible alarm and a fire hose cabinet.
- Emergency lighting, exit doors, dampers and fire stop flaps.
- First aid kits located throughout the facility and in vehicles.
- Portable fire extinguishers being located throughout the facility and clearly marked.
- Only authorized and trained personnel will operate emergency equipment.

Inspection & Maintenance Records

Maintenance records must be kept, including but not limited to the name of manufacturer, the type of equipment, the date put into service, when and for what purpose the equipment has been used, the date of the last inspection and name of the inspecting person, any damage suffered, and the date and nature of any of maintenance on emergency response equipment.

Ropes and associated equipment must be inspected visually and physically by qualified employees after each use for rescue, evacuation or training purposes.

The FLAGLER CE HOLDINGS, LLC designated representative will perform and maintain the FLAGLER CE HOLDINGS, LLC Emergency Inspection Checklist Form on a monthly basis. The checklist shall be maintained for retention in active files for two years and in on site archives for seven years.

Media Response Plan

FLAGLER CE HOLDINGS, LLC employees must not be interviewed by anyone unless the Legal Department has given prior approval. In most cases the Legal Department will have an attorney present for such interviews.

Note: If after FLAGLER CE HOLDINGS, LLC personnel have received approval for an interview from the Legal Department and another party's attorney appears unannounced, you should politely adjourn the interview until the FLAGLER CE HOLDINGS, LLC Legal Department can be contacted. Personnel must not give any work related interviews, affidavits, written or recorded statements, or depositions without the express approval from the FLAGLER CE HOLDINGS, LLC Legal Department.

In the case of interviews of FLAGLER CE HOLDINGS, LLC employees by non-attorneys, (law enforcement, government officials, media, etc.) you must inform the Legal Department before the interview. If the interview is taped or videotaped, you must request a copy of the tape. If the interview is reduced to writing, you must ask for a copy of any notes or statements taken. This procedure is to avoid information being misrepresented.

All media requests should be referred to the FLAGLER CE HOLDINGS, LLC Chief Operating Officer. Unless requested to do so by the Legal Department, other Flagler CE Holdings, LLC personnel are not to give interviews or make statements to the media. Management prefers that families of personnel involved in an incident receive initial notification from a FLAGLER CE HOLDINGS, LLC representative and not the media.

Training

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FLAGLER CE HOLDINGS, LLC shall ensure training for Emergency Action Plan is delivered, documented and prepares the staff and facility for emergency conditions. FLAGLER CE HOLDINGS, LLC will designate and train employees to assist in a safe and orderly evacuation of other employees. Requirements include:

- All employees must be given adequate instruction in the fire prevention and emergency evacuation procedures applicable to their workplace.
- The designated site representative shall provide the Emergency Action Plan orientation to all new/transferred personnel before they begin work.
- All personnel shall receive a review/update orientation at least annually, or whenever any new/revised information is to be provided.
- The Emergency Action Plan Orientation Check List shall be completed after orientation and the record maintained in the individual's training records.
- FLAGLER CE HOLDINGS, LLC management shall ensure that contractors/consultants working in areas under the supervision of FLAGLER CE HOLDINGS, LLC also receive the Emergency Action Plan orientation upon arrival to the area.
- Employees expected to perform duties under the Emergency Action Plan will be trained prior to assuming their roles. This will include simulated rescue or evacuation exercises and regular retraining, appropriate to the type of rescue or evacuation being provided, and training records must be kept.
- A list of trained staff responders shall be posted and maintained indicating their name, response function, their work location and what type of equipment they have been trained for.

Location and Use of Emergency Facilities

FLAGLER CE HOLDINGS, LLC shall ensure each Emergency Action Plan lists the location and how to use emergency facilities for each work site. For off-site locations, outside services that can provide assistance in the event of an emergency should be identified and reviewed with workers prior to commencing work activities. A list shall be posted in a conspicuous area showing local emergency facilities and how to contact. Examples include:

- Client Emergency Response Department (Initial Responder for All Emergencies If Applicable)
- Local Police, Local Hospital, Poison Center (Poison Response) 1-800-332-1414, etc.

Fire Protection & Response

FLAGLER CE HOLDINGS, LLC shall ensure each Emergency Action Plan provides fire protection and response planning within each site Emergency Action Plan and is utilized during all phases of work. As a minimum, all shall include the following:

Protection

- Smoking is not permitted except in designated 'SMOKING" areas.
- Facilities shall be designed and maintained in accordance with local fire code and regulations.
- Portable fire extinguishers shall be stationed, inspected and maintained in accordance with local fire code and regulations. FLAGLER CE HOLDINGS, LLC personnel shall be trained in their use.

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- Flammable and combustible liquids shall be properly stored.
- Employees shall report all fire safety issues to their immediate supervisor.
- Facilities shall be inspected by use of the FLAGLER CE HOLDINGS, LLC Emergency Inspection Checklist

Response

In the event of a fire, personnel working in facility will adhere to the following procedure for their work area:

- Warn others in the immediate area. Notify the appropriate emergency response personnel by phone or radio and pull the nearest fire alarm if present.
- If nearby staff have been trained, and it is safe to do so, fight the fire using a portable fire extinguisher. Remember, if in doubt get out.
- Evacuate the premises via the nearest exit and proceed to the nearest Emergency Assembly Area.
- Re-enter only after the Emergency Coordinator has given an ALL CLEAR.

Roads are designated as fire lanes. Vehicles can stop there for unloading, but no parking will be allowed.

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Alarm & Emergency Communication

Each Emergency Action Plan for FLAGLER CE HOLDINGS, LLC shall contain methods to address alarms and communications in case of an emergency. For off-site locations, the method of emergency notification should be identified and reviewed with workers prior to commencing work activities.

Alarm System

A system must be in place to alert employees. The alarm system shall be distinctive and recognizable as a signal to evacuate the work area or perform actions designated under the emergency action plan. For sites with 10 or fewer employees in a particular workplace, direct voice communication is an acceptable procedure for sounding the alarm provided all employees can hear the alarm. Each Emergency Response plan will describe how to activate an alarm and what to do after either activating or hearing an alarm.

Personnel responding to any alarm shall avoid complacency. Every alarm should be treated as an actual incident until proven otherwise. Treating and responding to alarms as a routine happening can result in injuries, fatalities and destruction of property.

Communications

FLAGLER CE HOLDINGS, LLC responders and security use telephones, cell phones and radios in conjunction with emergency response.

Rescue and Evacuation Procedures

Procedures for Rescue and Medical Services

Each site Emergency Action Plan shall address who performs recue services when required. It is the position of FLAGLER CE HOLDINGS, LLC that all rescue and medical duties are performed by client emergency responders or local governmental responders when on their location. For off-site locations, evacuation procedures and methods of rescue shall be identified and reviewed with workers prior to commencing work activities.

At least one member of a rescue team must be a first aid attendant trained to immobilize an injured employee.

Effective communications must be maintained between the employees engaged in rescue or evacuation and support persons.

Procedure for Evacuation

<u>Preparation for Evacuation</u>

Each site Emergency Action Plan shall contain a procedure for evacuation if required.

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The FLAGLER CE HOLDINGS, LLC designated Emergency Coordinator will maintain an active list of all FLAGLER CE HOLDINGS, LLC and contract emergency responders.

<u>Critical Plant Operations Personnel</u>

Staff designated to remain in the facility to shut down or supervise critical operations or equipment will be specifically trained and authorized by management to perform their duties before any evacuation may occur.

Evacuation Drills

Evacuation drills shall be conducted at least annually. Before conducting an evacuation drill a pre-drill assessment of the evacuation routes and assembly points shall be conducted. The pre-drill assessment is intended to verify that all egress components (stairs, doors, etc.) are in proper order and that occupants can use them safely.

Coordination Within a Facility

Emergency training and drills should also be coordinated within a FLAGLER CE HOLDINGS, LLC facility so that key staff are involved in the planning process and are aware of their responsibilities in an emergency as well as during the drill.

Facility management also needs to be informed of the potential for the interruption in productivity and business operations. Alternatives for the continuity of critical operations need to be considered.

<u>Procedures to Account for All Employees After Evacuation</u>

The emergency action plan must include procedures to account for all employees after the evacuation. An emergency action plan must include, at a minimum, procedures to account for all employees after evacuation. Each muster or assembly point will have a blank roster for evacuees to enter their name. All completed rosters will be gathered and checked against a master list of employees assigned or checked in at the facility to verify all employees are accounted for.

Emergency Evacuation Notification and Routes

In the event of an emergency occurring within or affecting the work site, the Emergency Coordinator makes the following decisions and ensures the appropriate key steps are taken:

- Advise all personnel of the emergency.
- Activate the emergency notification sequence to alert the appropriate responders and initiate emergency notification within the building.
- Evacuate all persons to the identified assembly area and account for everyone including visitors and clients.

All personnel will proceed to the primary safe area immediately located at the identified emergency assembly area for their location.

A copy of escape routes shall be posted in all offices, at all alarm stations and at all exits.

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Sweep Check by FLAGLER CE HOLDINGS, LLC Designated Responders

- FLAGLER CE HOLDINGS, LLC trained responders will establish a pattern that will permit covering the area in the shortest time, with a minimum of backtracking.
- When the evacuation alarm rings, stop work immediately, and conduct a sweep of the area. Ask everyone
 to leave the premises immediately and proceed to the identified emergency assembly area for their
 location.
- If you encounter smoke or flame, leave that section immediately, finish your sweep and evacuate the building by activating fire alarm pull stations. Remember, if in doubt get out.
- If anyone refuses to leave, note their name and location, and advise the client emergency services personnel.
- Meet the client emergency services personnel and advise them of your sweep or an area of smoke or flame that you were unable to check. Assist with head count and evacuation if required.
- Ensure that everyone stays at the emergency assembly area until the Emergency Coordinator has given an all clear to re-enter the building.
- In the event of inclement weather, the client will make arrangements to have buses either as temporary shelter or to transport personnel to another location.

Evacuation or Drill Evaluation

Following an evacuation or drill a response review shall be conducted and documented by the FLAGLER CE HOLDINGS, LLC Emergency Coordinator and lessons learned share with the appropriate responders and staff using the FLAGLER CE HOLDINGS, LLC Evacuation Report.

Emergency Response Program Management

Contact information will be provided to employees who need additional information pertaining to the plan or to their respective duties. The FLAGLER CE HOLDINGS, LLC site manager may be contacted by employees who need more information about the plan or an explanation of their duties under the plan.

For the purpose of this Emergency Action Plan guidance the Emergency Coordinator will be designated by the FLAGLER CE HOLDINGS, LLC site manager. His/her alternate will be the FLAGLER CE HOLDINGS, LLC Site Safety Supervisor or otherwise designated by the site manager.

Employees performing rescue or evacuation must wear personal protective clothing and equipment appropriate to the hazards likely to be encountered.

Duties

FLAGLER CE HOLDINGS, LLC Emergency Coordinator

The FLAGLER CE HOLDINGS, LLC Emergency Coordinator ensures that:

- Evacuation drills are conducted on an annual basis.
- Inspections of facilities are performed monthly.

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- All necessary repairs of components for evacuation paths are completed.
- Plans for the modification of any part of an evacuation path are reviewed.
- An up to date list of Fire Wardens is maintained.
- Radios and reflective vests and other response equipment are available.

During an evacuation or evacuation exercise, the FLAGLER CE HOLDINGS, LLC Emergency Coordinator:

- Coordinates activities in accordance with either local authorities or the client Security and ERT as required.
- Coordinates Fire Wardens and informs them the nature of the emergency via handheld radios.

Following an evacuation or evacuation exercise, the FLAGLER CE HOLDINGS, LLC Emergency Coordinator:

- Notifies Fire Wardens that it is safe to re-enter the building.
- Prepares a report following an evacuation (actual or drill).
- Reports to management for follow up or corrective actions.

FLAGLER CE HOLDINGS, LLC Site Safety Supervisor

• Assist the FLAGLER CE HOLDINGS, LLC Emergency Coordinator when requested.

Fire Wardens

- Be equipped with radios and reflective vests. The equipment is to be handed into the FLAGLER CE HOLDINGS, LLC Emergency Coordinator and reissued to the next oncoming Fire Warden for the designated area.
- Be familiar with exits and muster stations for their responsible area.
- Direct residents safely out of the building to the designated muster station or to an alternate location.
- Sweep their effected area, ensuring that the alarms are properly functioning and that residents evacuate safely.
- In order to account for all employees after evacuation the fire wardens or designated personnel shall complete a head count and reconcile the evacuees with the attendance or daily housing report at the assigned muster station or alternate location.
- Radio unaccounted for personnel to Security.
- Notify personnel that they may re-enter the building when permission has been given by the appropriate authorities.

Residents, Contractors & Visitors

- All employees, users, contractors and visitors will follow the instructions of the Fire Wardens, Security, ERT, Safety Personnel, managers and supervisors when asked to evacuate the building.
- Know the two safest and most direct evacuation routes from their work area(s).
- Know the designated evacuation assembly point for the building.

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FLAGLER CE HOLDINGS, LLC Emergency Inspection Checklist

Department:	Location:	Date of Inspe	ection:		
Inspected by:	Title:	Ext:			
This form is to be used monthly.			N/A	Yes	No
EGRESS					
Is every means of egress arranged ar unmistakable at all times?	nd clearly marked, so that	the way to safety is			
Are exits signs lit?					
Are there sufficient exits for the pror emergencies?	npt escape of all employe	es in case of fire or other			
Are doors that aren't exits that could	l be mistaken as one, clea	rly marked "Not an Exit"?			
Do exit doors swing out?					
Are means of egress at least 28 inche people?	es at any point and adequ	ate width for the number of			
Are egresses kept clear of obstructio	ns and materials at all tim	nes?			
Is there proper lighting for emergence	cy exiting? (i.e. during a p	ower failure)			
Are at least two exits by separate wa	ys of travel available for e	each occupant?			
Is the minimum width of any exit wa	y no less than 28 inches?				
Are furnishings and decorations so p thereto, or the egress there from, or	•	ostruct the exits, the access			
Are explosive and highly flammable f	urnishings or decorations	prohibited?			
EMERGENCIES/EVACUATION					
Are evacuation maps posted in readi	ly accessible places?				
Do employees know where their mus	ster point is located?				
Do employees know area hazards, th	e nearest exit and alterna	ate routes of escape?			
Do employees know the preferred m	eans of reporting emerge	encies?			

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Do employees know the site emergency number(s)?

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Product Support

Director

This form is to be used monthly.	N/A	Yes	No
Is the site emergency number posted on or by the phone?			
Do employees know what signal indicates evacuation?			
Can all personnel perceive the employee alarm?			
Do employees with special assistance needs been addressed?			
Employees questioned know where the emergency shut off is for the natural gas			
FIRE PROTECTION			
Are fire hydrants accessible?			
Are fire hydrants inspected yearly and records maintained to show the date?			
Are control and operating valves locked open or electronically supervised?			
Are fire hoses maintained and periodically tested?			
Are combustible materials kept away from ignition sources?			
Are standpipe and hose system components visually inspected quarterly?			
Is the accumulation of flammable and combustible materials controlled so they do not contribute to fire emergency?			
All product, supplies, merchandise etc. not piled within 18" of Sprinkler heads			
No Combustibles within three feet of Hot Water Tank, Space Heaters and/or Electrical panels			
All Compressed Gas Cylinders tied or chained to eliminate tipping			
DETECTION AND ALARM SYSTEMS			
Are detection systems installed and maintained?			
Are all trouble alarms and fire signals investigated?			
Do detection/alarm systems shut down or reverse HVAC systems for smoke control?			
Do detection/alarm systems close smoke or fire doors?			
Do detection/alarm systems activate local alarms?			
Are alarm and PA systems periodically tested?			
PORTABLE FIRE EXTINGUISHERS			
Does everyone know where the nearest fire extinguisher is stored?			

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This form is to be used monthly.	N/A	Yes	No
Has the area fire extinguisher been maintenance tested within the last year and tagged to show the date?			
Are fire extinguishers accessible and the proper type for the fire hazard?			
Are employees trained in how to use fire extinguishers?			
Is there a fire extinguisher mounted within 75 ft. of any point in an area?			
Are the extinguishers clean and well cared for?			
Is the seal and lock pin in place?			
Clear access to extinguishers? Not blocked			
Is the extinguisher location plainly marked, so as to be visible at a distance?			
Is the extinguisher class marked on the extinguisher?			
FIRST AID / MEDICAL SUPPLIES			
Are first aid supplies stocked, clean, accessible and sanitary?			
Are there eye/body wash facilities near injurious corrosive materials?			
Is a person or persons adequately trained to render first aid available in the near proximity to the workplace?			
Are AEDs present and operators trained?			
Condition of First Aid Kits Acceptable			
Are employees/subcontractors familiar with the incident/accident reporting process?			
Do employees/subcontractors know where accident/incident forms are located?			

Date of last inspection of sprinkler system (require	ed yearly)

Comment/Actions:

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FLAGLER CE HOLDINGS, LLC Evacuation Report

This form is to be used to record all emergency evacuations (including drills).

Building Details			
Building Name	Number of Floors (includi	ng ground)	
Designated Muster Station	Person Completing Form		
Evacuation Details			
Evacuation Date/Time://	Evacuation Drill	Yes 🗆	No 🗆
Trigger for Evacuation: Fire Alarm Activated	Drill ERT Security	_	
Emergency Situation:			
Condition: Staff Only All Occupants Elapsed			r
Evacuation was orderly with no panic Mobility-impaired persons present (sight, hearing, p The majority of evacuees went to the mustering poin Were the building occupants notified of this drill? Emergency Control Organization	hysical, etc.)?	Yes	No
Emergency Coordinator Deputy	Emergency Coordinator		
Emergency Coordinators were stationed at the prop All Fire Wardens reported to the Emergency Coordin If not, who did not report in?	nator?	Yes ☐ Yes ☐	No 🗆 No 🗆
All Fire Wardens were identifiable (vests, hard hats,		Yes□	No□
Control of external building exits achieved?		Yes	No 🔲
Did the Fire Wardens perform their duties correctly? Evacuation maps and emergency procedures posters		Yes □ Yes □	No □ No □
Building Fire & Emergency Equipment			
Was the evacuation signal audible throughout the b	uilding?	Yes□	No 🗆

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Automatic closing fire doc Card access doors automa Fire doors and emergency	Yes 🔲 🗈 N	No		



Emergency Response Members

	□ Security □ FLAGLER CE F			
AGLER CE HOLDINGS, LLC Act	ion Sheet			
Issue(s)	Action(s) Required	By Who	By When	Sign Off/Date
Records				

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- Keep the original in your Emergency Response folder and monitor to ensure all action items completed as soon as possible. Report delays to senior management.
- Copies shall be distributed in accordance with the FLAGLER CE HOLDINGS, LLC Site Emergency Action Plan.

Emergency Action Plan Orientation Check List

Employe	ee Name	Department
Hire/Transfer Date		Orientation Date
[]	Emergency Procedures	
[]	Evacuation route(s) from assigned work area	
[]	Evacuation from an unfamiliar area	
[]	Location of Emergency Assembly Areas	
[]	Receiving and following instructions during an emerg	gency
[]	ALL CLEAR and re-entry procedure	
[]	Reporting hazards and/or substandard conditions	
[]	Advising anyone who may require assistance during	an emergency evacuation
[]	Location of Emergency Equipment (i.e. Fire Extinguis	hers, etc.)
Employee Signature:		
Orientation Conducted by:		
Job Position/Title:		

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Sample Emergency Action Plan Core Requirements

	The following are identified potential emergencies:		
POTENTIAL EMERGENCIES	The following are identified potential efficies.		
(BASED ON HAZARD ASSESSMENT)	FireList others		
EMERGENCY PROCEDURES	In the event of a fire occurring within or affecting the work site, the Emergency Coordinator (or deputy) makes the following decisions and ensures the appropriate key steps are taken: - advise all personnel - pull the fire alarm to alert the nearest fire station and initiate all fire alarms within the building - evacuate all persons to a safe point in the assembly area and account for everyone including visitors and clients		
LOCATION OF EMERGENCY EQUIPMENT	 Fire Alarm – List Fire Extinguisher – List Fire Hose - List 		
WORKERS TRAINED IN THE USE OF EMERGENCY EQUIPMENT	(1)		
EMERGENCY RESPONSE TRAINING REQUIREMENTS	 Use of fire extinguishers Practice fire drills Frequency Orientation and annually At the call of site management 		
LOCATION AND USE OF	The nearest emergency services are located at:		

			Doc No:	EAP
CONSTRUCTION EQUIPMENT			Initial Issue Date	12/04/2017
		Flagler CE Holdings, LLC Safety Management System	Revision Date:	Initial Version
EMERGENCY ACTION PLAN			12/04/2017	1
			Next Review Date:	12/31/2019
Preparation: Safety Director	Authority: Vice Presiden Product Support	nt Issuing Dept: Safety	Page:	Page 20 of 21

EMERGENCY FACILITIES	List facilities	
FIRE PROTECTION REQUIREMENTS	List all site fire protection requirements.	
ALARM AND EMERGENCY COMMUNICATION REQUIREMENTS	 Pulling the fire alarm automatically alerts the fire department and initiates an alarm within the building The fire alarm signal is (describe sound and pattern) 	
FIRST AID	First aid supplies are located at: List First Aiders are: List all names Transportation for ill or injured workers is by (describe). The contact number or radio channel is (describe).	
PROCEDURES FOR RESCUE AND EVACUATION	 Advise all personnel Pull the fire alarm Evacuate all persons to a safe point in the staff parking lot and account for everyone including visitors and clients Assist ill or injured workers to evacuate the building Provide first aid to injured workers if required Call emergency response personnel to arrange for transportation of ill or injured workers to the nearest health care facility if required. 	
DESIGNATED RESCUE AND EVACUATION WORKERS	The following workers are trained in rescue and evacuation (or describe client rescue organization): (1)	



	(2) (3) (4)
Completed on:Signed:	



Florida Department of Environmental Protection

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

Carlos Lopez-Cantera Lt. Governor

> Noah Valenstein Secretary

July 30, 2018

Jon Wilson Flagler Construction Equipment 8418 Palm River Rd Tampa, FL 33619

BE IT KNOWN THAT

Flagler Construction Equipment 8418 Palm River Rd Tampa, FL 33619- 4314

IS HEREBY REGISTERED AS A USED OIL

Transporter, Transfer Facility, Filter Transporter, Filter Transfer Facility

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C) For regulatory guidance, go to:

http://www.dep.state.fl.us/waste/categories/used_oil/default.htm

The Department of Environmental Protection hereby issues
Registration Number FLR000088518 on July 30, 2018
Transporter Type: FH

This registration will expire on 6/30/2019

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.

Janet Ashwood

Environmental Consultant
Waste Compliance Assistance Program

FLORIDA

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

(850) 245-8707

RECEIVED

Department of Environmental
De

APR 17 2018

Permitting & Compliance Assistance Program

EPA ID:	12000c	88518	Please u	se the instru	ctions docu	ment to comp	lete this form	aiii
1. Reason for Submittal	Mark 'X' in the correct box:	the correct box: waste, universal waste, used oil activities, or PCW activities).						
(all submitters must complete pages 1 and 2 and sign page 5.	(must choose one if a notification)	■ To provide subseque□ To provide the final						1,2,5)
Pages 3 and 4, - complete as applicable)	FL Registration(s)	UW Mercury (se	ce page 3)	☐ HW	Transporte	r (see page 4)	X Used Oil (see	page 4)
2. Facility or Business Name	Flagle	r Construc	tion:	Equip	mer	h		
3. Facility Operator (List additional Operators in the comments section).	Name of Operator: Flag lev Street or P.O. Box:	Constructi alm River	on E	ánibu	Date Pho	te became Ope	30-0077 Country (if not USA):	<u> </u>
4. Facility			Munici	pal Star		ty Other_		vessel
Physical Location Information (No P.O. Boxes)	City or Town:				Sta	te: Z	ip Code:	
Same address as #3 above or:	County:			Country (if	not USA):			
 Facility North A: Classification Sys Code(s) (at least 5 	stem (NAICS)	A. <u>[8]] </u>	<u>311 10</u> 1 1	(required) B.	<u> </u>		
6. Facility or	Same address as #_ above or: Street or P.O. Box:							
Business Mailing Address	City or Town:		St	ate:	Zip/Postal	Code:	Country (if not USA):	
7. Facility or Business RCRA Contact Person	First Name: JON Phone Number: (813)630- Street or P.O. Box:	Exter	Name: VISO nsion: ILI	E-Mail:		ervic	e Manage Fax:(813)163 rec.com	er 0-22
Same address as #above or:	City or Town:			State:	Zip	Code:	Country (if not USA	():
8. Real Property (FL Land) Owner of the Facility's Physical Location (List additional	Name of Owner: Store Management of P.O. Box:	aster Func	ess Br	17, LL : Str. :	Phone Phone	Number: (480)	ner mm dd <u>.</u> 256-119	/y
owners in the comments section.) Same address as	City or Town: SCOTISE Owner Type:	<u>do</u> l© Private □ Federal □	J Municipa	State: Z	89	Code: <u>5255</u> v □Other	Country (if not USA):

F	RCRA Hazardous Waste Status Notification or Out of Business Notification				EPA ID N	o. FL	ROOC	0088518			
9.	9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):										
(A) (1)Generator of Hazardous Waste Fo				For Items 2	For Items 2 through 7, mark 'X' in all that apply.						
☐Yes ☑ No (Do not include Universal Waste or Used Oil)			(2) Treater, Storer, or Disposer of Hazardous Waste					aste			
	a. Large Qu	uantity	Generator (ving three categories. LQG): onth 1,000 kilograms		(at			may be	required for	ermit this activity.
	greater p hazardou	er mont is waste	th (kg/mo) (2 ; or Greater t	,200 lbs.) of non-acu han 1 kg (2.2 lbs) least once a year)		[b. O _I	perating Con perating Non pn-Operating rmit or Orde	-Comm : Postcl	ercial TSD osure or Cor	rrective Action
	100kg/m	s in any o but le	ss than 1,000	SQG): onth greater than kg/mo (>220 to <2,7 waste and/or 1 kg	200	S	pecify:	of Hazardou Comment crmit is require	cial [Non-Con	nmercial.
		or less	of acute haza			[a. Sn	Boiler and/onall Quantity	On-site	Burner Exe	
	(220 lbs.) (2.2 lbs)	s in any) of nor or less	vealendar mo n-acute hazaro of acute haza	onth 100 kg/mo or les dous waste and 1 kg rdous waste		(5) 🔲 I	Person Au Waste G Choose t EITHER	athorized to Generated at his manager a copy of ye	Manag Other nent act our appl	ge Condition Facilities ivity ONLY ication for s	if you attach uch authorization
				activities that apply	·•	OR the authorization you received from FDEP. (6) Receives Hazardous Waste from Off-Site					
:	e. Episodic: N f. United State	Not mor es Impo	e than one-tii orter of hazar	e, not on-going) me per year:SQG_ dous waste adioactive) Generator		i		Hazardous ound Injecti			te
1(your facility. Li	ist them	in the order	Regulated Hazard they are presented in ist codes routinely or	the re	gulations (e.g., I	0001, D00	3, F007, K0	19, P01	2, U112).	
1		2	ransporters	3	4		5	Citts of all ad		page II mor	7
8	9	9		10	11		12		13		14
15	i	16		17	18		19	- 2	20		21
11	. Other Status	Chan	iges (If no	longer handling wast	e or cl	osed, sections 9	and 10 sh	ould be blan	k and sk	tip Section I	2-16):
	(A) Non-Handler	of Regi	lated Waste	e at This Facility (S	ections	9, 10 and 12-16	should b	e blank.)			
	(1) Busine	ess no la	onger generat	es, transports, treats,	stores,	disposes of, or o	otherwise	handles any	regulate	ed waste.	
	(B) Facility Closed	d (Com	plete this sec	ction only if <u>all</u> busine	ess act	ivities at this fac	ility have	ceased.)			
	(1) Closed	l at this	location and	moved or moving to	anothe	er - Submit a nev	v Form 87	700-12FL for	the nev	v location if	you will
	(2) Out of	f Busine	ess - Busines	s closed on			(da	ate)			
Ш	(C) Property T	Γax De	fault			(D) Peti	tion for E	Bankruptcy	Protect	ion	
12	2-14 — Registra	ition A		Contact Informa	tion	(only if this subn	nission is	a registratio	n or reg	istration info	ormation update):
X	Same as Facility RC Contact on page 1 or		First Name:	· · · · · · · · · · · · · · · · · · ·		Last Name:				Title:	
Ĺ			Phone Numb	per:		Extension:	E-Mail:				
ŭЦL	ontact for: HW Transporter		Street or P.C). Box:	1		1				
	Used Oil Handler Universal Waste		City or Tow	n:			State:(C	ountry):		Zip Code:	

Universal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No. FLR. O	00088518				
12. Univers	al Waste (UW) Activities (Mark 'X' and complete all that apply) :					
A. Federal Notification	Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 of any combination of UW accumulated (at any one time)	lb) or more				
	Accumulates: 🗖 a. UW Batteries 🔲 b. Pesticides 📮 c. Pharmaceu	iticals				
	d. Mercury Containing Devices 🔲 e. Mercury Contain	ning Lamps				
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a U A permit is required for storage prior to recycling.	W.				
B. Florida U	niversal Pharmaceutical Waste (UPW): one-time registration					
☐ Pharma	iceuticals LQH = 5,000 kg or more of Universal Pharmaccutical Waste (UPW) accumulated (at any one time)					
Pharma	sceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated				
Revers	e Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	th [DOH])				
C. Florida A	nnual Mercury Handler Registration:					
Devices opera form [Chapte of Mercury-C	For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Containing Lamps and Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.					
	is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-htime registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH reg					
☐ For-hi	re Transporter of Universal Waste Mercury-Containing Lamps or Devices					
☐ For-hi	re Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration				
☐ Mercu	ry-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required				
☐ Mercu	ry-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler					
☐ Mercu	ry-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration + one- time \$1,000 fee+				
☐ Mercu	One—time \$1,000 fee+					
(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity) Annual Registration Required						
Briefly Describe yo	Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s).					
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.] Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]						

Hazardous Waste and Used Oil Transporter Registration	ons	EPAID NO. FLR 000088518
14. HW Transporter Activities: (Mark 'X' and complete all the	at apply if you need	to register your HW Transporter activities)
Transporters of and Transfer Facilities for Hazardous Was renew their registration. Evidence of casualty/liability insurance Transfer facilities must submit several additional documents as detaile changes. Registered transporters and transfer facilities may only begin Generators of hazardous waste who transport waste only within the	pursuant to 62-730.1'd on page 5 the first to operations after received.	70(2)(a) is required in addition to this registration. ime they register and when the information ving approval from the Department.
A. HW Transporter Registration Information (must be	completed annually	y and when this information changes)
This facility is a registered transporter of hazard	ous waste.	
This form is: 🔲 Initial Registration 🔲 Renewal	Notification of	changes Cancel Registration
1. For own waste only 2. For commercial p	ourposes 3. I	Both commercial and own waste
4. Transportation Mode 🔲 Air 🔲 Rail 🔲 Highwa	water 🗆 O	ther - specify
B. HW Transfer Facility Registration Information (m	ust be completed a	nnually and when this information changes)
This facility is a Hazardous Waste Transfer Face	ility: (at this location	on) Storage Volume
This form is: 🔲 Initial Registration 🔲 Renewal 🖵	Notification of ch	anges Cancel Registration
Note: Hazardous Waste transfer facilities must comply with the	requirements of Ru	le 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.
The Transfer Facility records required under the provis Our mailing (business) address	ions of Rule 62-730. The site (facility	
Please enter the EPA ID Number of the HW Transporter who carries the	e insurance for this Ti	ransfer Facility:
Please see the top of page 5 for additional items that must be Transfer Facilities [Rule 62-730.171(3), Florida Administrativ		on to the above registration for Hazardous Waste
15. Used Oil and Oil Filter Activities: : (Mark 'X' and com	olete all that apply it	you need to register your used oil activities),
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer facil annually register with the Department using this form. All except Flc \$100 registration fee. This form is: Initial Registration	rida used oil (UO) Pr	ocessors and collection centers must pay an annual
If applicable, a check or money order, in the amount of \$100	, payable to Florida D	Department of Environmental Protection is enclosed.
(1) 11 1017	(6) 11 101151	
(1) Used Oil Transporter - mark activities: (occurring in Florida)	_/	r Management (must annually register)
a. Transporter (off-site) and noncontiguous locations	a. Transpo b. Transfo	
☑ b. Transfer Facility		sor (Annual Report Required)
(2) Collection Center (From businesses, <u>no more than 55 gal per shipment)</u>	d. End U	
(3) Used Oil Processor (A permit is required.)	(7) The records re	quired under the provisions of Rule 62-710.510,
(4) Off-Specification Used Oil Burner	FAC, are kept	at (check one):
(5) Used Oil Fuel Marketer	□ Our maili	ng (business) address
Please see the top of page 5 for additional items that must be submexempt Used Oil Transporters.	itted in addition to 1	he above registration and fees required for non-

Transfer Facility and Used Oil Transporter requiren	nents and required signature page	EPA ID No. FLRO	100088518		
(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:					
Certification by a responsible corporate officer Section 403.7211(2). Florida Statu	of the transporter that the proposed loc tes (F.S.) [Rule 62-730.171(3)(a)1., F.A				
Evidence of the transporter's financial responsi	· · · · ·	_			
A brief general description of the transfer facil					
A copy of the facility closure plan [Rule 62-73					
_A copy of the contingency and emergency plan	1 [Rule 62-730.171(3)(a)6., F.A.C.]				
A map or maps of the transfer facility [Rule 62	2-730.171(3)(a)7., F.A.C.]				
In addition to the requirements on Page 4 Section 15: • ALL registered UO Handlers must submit an annual report except generators transporting UO from noncontiguous operations within their own company. • UO transporters transporting off-site over public highways only within their own company must submit proof of insurance. • UO transporters transporting more than 500 gallons/year must submit proof of insurance annually, and must sign and certify this submission as a certified used oil transporter in section 17 (except those exempted by Rule 62-710.600(1), F.A.C.); The used oil annual report is attached Evidence of Liability Insurance pursuant to 62-710.600(2)(e), F.A.C. is attached. 16. Comments (attach a page if more space is needed): Corporate Office Confederation of the proof of the proof of the confederation of the proof o					
17. 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.					
I certify as a Used Oil Transporter that I am tation and have an annual and new employee training bility is demonstrated by the Used Oil Transporter	ng program in place covering the applic	cable used oil rules. Evidence form 62-730.900(5)(a), F.A.	e of financial responsi- C		
Signature of owner, operator, or an authorized representative	Print Name and	Title	Date Signed (mm-dd-yyyy)		
Mall	Kevin Walden VP Pro	oduct Suppora-E	a 04/13/18		
	,]		
			ם		
If the person that filled in this form is not the Facility Contact or Operator, please complete the information below:					
Lisa Alburu (46) 965-5945 Ialburu Plaatevee. Com Name of person completing this form) (Phone Number) (E-mail Address)					

Mail original completed form to:

Department of Environmental Protection 2600 Blair Stone Road, Mail Station 4560 Tallahassee, Florida 32399-2400

r assistance calR**EQEME®**707 Florida Department of Environmental Protection

JUL 3 0 2018

STATE OF FLORIDA CERTIFICATE OF LIABILITY INSUR HAZARDOUS WASTE TRANSPORTER AND USED

(3.7	
(Name of Insurer)	
he "Insurer"), of 1800 North Point Drive, Stevens Point, WI 54481	
(Address of Insurer)	
ereby certifies that it has issued liability insurance covering bodily injury and property dam nvironmental restoration for sudden accidental occurrences to	nage including
lagler CE Holdings LLC DBA Flagler Construction Equipment	
(Name of Insured)	
he "Insured"), of 9601 Boggy Creek RD Orlando, FL 32824	
(Physical Address of Insured)	
connection with the insured's obligation to demonstrate financial responsibility under Flor dministrative Code Rule 62-710.600(2) and 62-730.170. The coverage applies at:	rida
PA/DEP I.D. No. Name Physical Address	
LR000097378 Flagler Construction Eqt. 9601 Boggy Creek Rd., Orl	ando El
I D000212604 Florier Construction Feet 0750 Dbilling Lhous Jackson	
LR000213694 Flagler Construction Eqt. 8750 Philips Hwy., Jackson	ville, FL
LR000213694 Flagler Construction Eqt. 8750 Philips Hwy., Jackson f coverage is for multiple facilities, identify each facility insured.)	ville, FL
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> and the company shall not be liable for amounts in excess of for each accident, exclusive of legal defense costs. The coverage is	
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> and the company shall not be liable for amounts in excess of	
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 oder policy number 25-51455-05 , issued on 05/01/2018 (date) he effective date of said policy is 05/01/2018 and the expiration date of said	s provided
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 not policy number 25-51455-05 , issued on 05/01/2018 (date)	s provided
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 oder policy number 25-51455-05 , issued on 05/01/2018 (date) he effective date of said policy is 05/01/2018 and the expiration date of said (date)	s provided
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 oder policy number 25-51455-05 , issued on 05/01/2018 (date) he effective date of said policy is 05/01/2018 and the expiration date of said 05/01/2019 (date)	s provided
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 oder policy number 25-51455-05, issued on 05/01/2018 (date) he effective date of said policy is 05/01/2018 and the expiration date of said 05/01/2019 (date) his insurance is excess and the company shall not be liable for amounts in excess of	s provided
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 oder policy number 25-51455-05, issued on 05/01/2018 (date) he effective date of said policy is 05/01/2018 and the expiration date of said 05/01/2019 (date) his insurance is excess and the company shall not be liable for amounts in excess of 1,000,000 for each accident in excess of the underlying limit of 1,000,000 for each accident, exclusive of legal defense costs. The coverage	s provided policy
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 oder policy number 25-51455-05 , issued on 05/01/2018 (date) he effective date of said policy is 05/01/2018 and the expiration date of said (date) (date) (date) (date) (is insurance is excess and the company shall not be liable for amounts in excess of 1,000,000 for each accident in excess of the underlying limit of 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs. The coverage is 1,000,000 for each accident, exclusive of legal defense costs.	s provided policy
f coverage is for multiple facilities, identify each facility insured.) his insurance is <u>primary</u> 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 oder policy number 25-51455-05 , issued on 05/01/2018 (date) he effective date of said policy is 05/01/2018 and the expiration date of said (date) (date) (date) (is insurance is excess and the company shall not be liable for amounts in excess of 1,000,000 for each accident in excess of the underlying limit of 1,000,000 for each accident, exclusive of legal defense costs. The coverage	s provided policy e is provided

(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 of more States including Florida.

(Signature of Authorized Representative of Insurer)

Gary Deja

(Typed name)

Account Manager

(Title)

Authorized Representative of

Sentry Select Insurance Company

(Name of Insurer)

1800 North point Drive Stevens Point WI 54481

(Address of Representative)

RECEIVED orida Der ARTOLENT OF ENVIRONMENTAL PROTECTION Mail Station 4560, 2600 Blair Stone Road, Tallahassee, Florida 32399-2400

MAY 18 2018

DEP Form #62-710.901(3) Form Title Annual Report by Used Oil and Used Oil Filter Handlers Effective Date 4-23-13 Incorporated in Rule 62-710.510(5)

Annual Report by Used Oil and Used Oil Filter Handlers*

(*Hpermitting: &s & moliance attorise requirements of rule 62-710.500 and 62-710.850, F.A.C. See Section A, Box 5 below.)

Assistance the ognating period January 1, 2017 through December 31, 2017

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: Flogler Construction Equipment 2. Telephone No. 813-630-0077					
Site Address: 8418 Palm River Rd., Tampa, FL 33619					
3. EPA ID NO. FLR 0000 & 8518					
Check box if any of the above items (1-3) have changed since your last registration.					
4. Name of person preparing report (please print) Liso Alburu					
Title: DIVECTON COMOLIGICE. Phone number (if different from #2, above) 457-850-9614 5. Type of operation (check as many as apply to your operations) Used Oil: Transporter Transfer Facility Collection Center/Aggregation Point Processor Marketer Burner (of off-specification used oil)					
Used Oil: Transporter Transporter Transfer Facility Transfer Facility Transfer Facility	Processor Processor	End	Jser	spectrication used on)	
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL	HANDLERS. USI	ED OIL FILTER H	ANDLERS SE	E SECTION C)	
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Industrial	Mixed	l Total	
a. In Florida		9850	0	9850	
b. From out of State				0	
c. Beginning Inventory				965	
d. Total (sum of totals from Lines a + b + c)				10815	
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)		I	ı State	Out of State	
N - Transferred to another facility (not an end use)		101	g47		
O - Marketed as an on-specification used oil fuel					
F - Marketed as an off-specification used oil fuel					
I - Marketed for an industrial process		<u> </u>			
B - Burned as an off-specification used oil fuel					
D- Disposed of: Landfilled					
Treated at a wastewater treatment to	unit				
Incinerated					
3. Total amount (in gallons) of Used Oil managed	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	100	047		
. End of year, on hand estimate (difference between Line 1d and Line 3)					

DEP Form #62-710.901(3)
Form Title Annual Report by
Used Oil and Used Oil Filter Handlers
Effective Date 4-23-13
Incorporated in Rule 62-710.510(5)

SECTION C USED OIL FILT	CHECK	COLUMN IF OUT OF S	STATE ♥			
1. Number of filters on hand from	m previous year			300		
2. Number of used oil filters coll	ected		. [0.300		
3. Total number of used oil filter	s to manage (Line	•		10.1000		
4. Disposition of used oil filters		a. Transferred to another registered facility		9850		
		b. Burned for energy recovery at a Waste-To-Energy facility \dots				
		c. Transferred directly to a metal foundry for recycling		0		
		d. TOTAL		9850		
5. End of year, on hand estimate	(Line 3 minus Lin	e 4d)		750		
6. Gallons of used oil collected a		344				
7. Gallons of used oil transferred		10647				
8. Volume of oily waste collecte		344				
9. Description of oily waste management Oily pads and roos sent to sofety kleen DIRECTIONS FOR SECTION C Facility to recycled.						
DIRECTIONS FOR SECTION	Y C	Conversion Table	· ·	•		
	One 55 -gallon dr	am of <u>crushed</u> used oil filters = approximately $\underline{400}$ used oil filter	ers			
	One 55- gallon di	um of <u>uncrushed</u> used oil filters = approximately <u>250</u> used oil f	ilters			
	One <u>ton</u> of draine	ed used oil filters = approximately 2.350 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 Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

For assistance with this form, please call the Used Oil Coordinator at 850-245-8707.

10/30/18 Josh B.



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• Ensuring that all containers are labeled, tagged or marked properly.

Authority: Vice President

Product Support

- Providing new-hire and annual training for employees.
- Maintaining training records.

Preparation: Safety

Director

- Identifying hazardous chemicals used in nonroutine tasks and asses ng their risks.
- Informing outside contractors who are performing work on FLAGL R CE HOLDINGS, LLC property about potential hazards.

Issuing Dept: Safety

• Reviewing the effectiveness of the hazard communication program and making sure that the program satisfies the requirements of all applicable federal, state or local hazard communication requirements.

Employees

- Employees are responsible for following the requirements in the Ha ard Communication Program.
- Any employee who transfers any material from one container to another is responsible for labeling the new container with all required information.
- All employees are responsible for learning the requirements of this ection and for applying them to their daily work routine.
- Identifying hazards before starting a job.
- Reading container labels and SDSs.
- Notifying the supervisor of torn, damaged or illegible labels or of un abeled containers.
- Using controls and/or personal protective equipment provided by the Flagler CE Holdings, LLC to minimize exposure.
- Following Flagler CE Holdings, LLC instructions and warnings pertaining to chemical handling and usage
- Properly caring for personal protective equipment, including pr per use, routine care and cleaning, storage and replacement.
- Knowing and understanding the consequences associated with not following FLAGLER CE HOLDINGS, LLC
 policy concerning the safe handling and use of chemicals.
- Participating in FLAGLER CE HOLDINGS, LLC training.

Procedure

List of Hazardous Chemicals

An inventory/list of hazardous chemicals is maintained. An inventory of all azardous chemicals used by FLAGLER CE HOLDINGS, LLC should be maintained. Each chemical on the list should have the same name as shown on its corresponding Safety Data Sheet (SDS).

The Hazardous Chemical List is updated as necessary and at least annually b the Safety Director or their designee. The Hazardous Chemical List must be available for review upon request.

Safety Data Sheets (SDS)

Safety Data Sheets (SDS) are obtained for all hazardous chemicals. Chemical manufacturers are responsible for developing SDSs. FLAGLER CE HOLDINGS, LLC shall have a SDS for each chemical used.

The purchasing of any potentially hazardous chemical products from an supplier that does not provide an appropriate Safety Data Sheet in a timely fashion is prohibited.



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Preparation: Safety	Au
Director	

thority: Vice President **Product Support**

Issuing Dept: Safety

Safety Data Sheets (SDS) are readily available to employees. SDSs shall be maintained and readily accessible in each work area. SDSs can be maintained at the primary work site. However, they should be available in case of an emergency. SDS must be made available, upon request, to employees, neir designated representatives, the Assistant Secretary and the Director.

The Safety Data Sheet must be kept in the SDS library for as long as the chen call is used by the facility.

Electronic access (telephone, fax, internet, etc.) may be used to acquire and naintain SDS libraries and archives.

The Manager is responsible for seeing that the Chemical Inventory List inven pry is maintained, is current and is complete. He/she will review Chemical Inventory List at least annually. Vhen a hazardous material has been permanently removed from the work place, its SDS is to be removed from th
Chemical Inventory List.

SDS' for hazardous materials to which FLAGLER CE HOLDINGS, LLC emi oyees have been exposed must be maintained after the employee leaves the employment of FLAGLER CE HOLD NGS, LLC.

Methods to be used to Inform Employees of the Hazards of Non-Routine Tasks

The methods that FLAGLER CE HOLDINGS, LLC will use to inform employee; of the hazards of non-routine tasks (i.e., the cleaning of reactor vessels, etc.) and the hazards associated with c emicals contained in unlabeled pipes in their work areas include:

- Conducting a Job Hazard Assessment (JSA).
- Employees will be advised of methods and special precautions, PE and the hazards associated with chemicals and the hazards associated with chemicals contained in u labeled pipes in their work areas.
- In the unlikely event that such tasks are required, the supervisor, and designee, will provide a SDS for the involved chemical.

The Use and Care of Labels and Other Forms of Warning

Containers of hazardous chemicals are labeled. Container labels should cont in the following information:

- Product identifier
- Signal word
- Hazard statement
- Pictogram(s)
- Precautionary statement(s), and
- Name, address and telephone number of the chemical manufacture, importer or other responsible party.

The Manager will ensure that all hazardous chemicals used or stored in the figility are properly labeled.

Damaged labels or labels with incomplete information shall be reported immediately.

Workplace labels or other forms of warning will be legible, in English and pominently displayed on the container or readily available in the work area throughout each work shift.

If employees speak languages other than English, the information in the oner language(s) may be added to the material presented as long as the information is presented in English as well.



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Preparation: Safety Director Authority: Vice President Product Support

Issuing Dept: Safety

FLAGLER CE HOLDINGS, LLC will use the GHS labeling system for secondary containers.

Portable containers into which hazardous chemicals are transferred from laleled containers and that are intended for the immediate use of the employee who performs the transfer do not require a label.

If the portable container will be used by more than one employee or used coer the course of more than one shift, the container must be labeled.

Received from vendors that are not properly labeled must be rejected.

Pictograms and Hazards

Health Hazard	Flame	Excla ⊨ation Mark
Carcinogen Mutagenicity Reproductive Toxicity Respiratory Sensitizer Target Organ Toxicity Aspiration Toxicity	Planmables Pyrophorics Self-Heating Emits Flammable Gas Self-Reactives Organic Peroxides	Irritant skin and eye) Skin Statizer Acute Tacity (harmful) Narcot Effects Respire ory Tract Irritant Hazerde sto Ozone Layer (Fan-Mandatory)
Gas Cylinder	Corrosion	Expl ding Bomb
Gases Under Pressure	Skin Corrosion/ Burns Eye Damage Corrosive to Metals	Explo ves Self-F actives Organ : Peroxides
Flame Over Circle	Environment (Non-Mandatory)	kull and trossbones
(4)	*	< Q
Oxidizers	Aquatic Toxicity	* Acute Toxicity (fatal = toxic)



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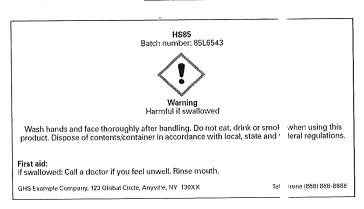
HAZARD COMMUNICATION - (HAZCOM)

Preparation: Safety Director

Authority: Vice President **Product Support**

Issuing Dept: Safety

Example Label



Multi-Employer Job Sites and/or Multi Work Site

Chemical information is provided to employees on multiple worksites or mul ple employer worksites.

The following specific methods for providing other employer information concerning hazardous chemicals at job sites, methods of providing SDS sheets, methods of precautionary measures to be taken and methods of providing information on labeling systems:

Multi-Work Sites

Where employees must travel between work places during a work shift (mu di job sites), the written program may be kept at a primary job site. If there is no primary, then the program should be sent with employees.

Multi-Employer Job Sites

A pre-job briefing shall be conducted with the contractor prior to the initiation of work on the site.

- During this pre-job briefing, contractors shall notify FLAGLER CE HOLDINGS, LLC and present current copies of Safety Data Sheets and label information for every hazard-us chemical brought on-site.
- FLAGLER CE HOLDINGS, LLC shall notify and provide required SDS and label information for all hazardous chemicals the contractor may encounter on the job.
- The facilities labeling system and any precautionary measures to e taken by contractor during normal conditions and emergencies shall be addressed.
- By providing such information to other employers, FLAGLER CE OLDINGS, LLC does not assume any obligations that other employers have for the safety of their employees.

Training

Employees are provided with information and training on the hazardous chemicals they may be exposed to. Employees shall be provided with effective information and training on haz rdous chemicals in their work area at the time of their initial assignment, and whenever a new physical or health hazard the employees have not previously been trained about is introduced into their work area. Informa on and training may be designed to cover categories of hazards (e.g., flammability, carcinogenicity) or specific chamicals. Chemical-specific information must always be available through labels and safety data sheets.



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Director	Prod

Authority: Vice President Product Support

Issuing Dept: Safety

Additional training will be provided whenever a new chemical hazard is introduced into the work area. To reinforce the importance of handling chemicals properly when performing new or non-routine tasks supervisors will conduct supplementary training as needed.

Formal training will be conducted by facility employees or individuals w o are knowledgeable in the Hazard Communication program.

The Hazard Communication Program documented training shall, as a minimun, include:

- Requirements of the OSHA Hazard Communication Standard 29 CFR 1910.1200 (General Industry) or 29 CFR 1926.59 (Construction Industry).
- Operations in the work area where hazardous chemicals are presen
- Location and availability of the hazard communication program, che nical inventory list and SDSs.
- Methods and observations used to detect the presence or release of a hazardous chemical in the work area, such as monitoring devices, visual appearance or odor of haza dous chemicals when being released.
- Explanation of the labels received on shipped containers.
- Explanation of the workplace labeling system.
- Explanation of the SDS, including order of information and how employees can obtain and use the appropriate hazard information.

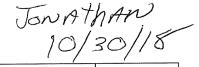
The Manager shall ensure records of employee training are maintained.

Implementation Requirement

Per OSHA Requirements

Effective Completion Date	Requirement(s)		Who
December 1, 2013	Train employees on the new label elements and safety data format.	eet (SDS)	Employers
June 1, 2015* December 1, 2015	Compliance with all modified provisions of this final rule, exc- The Distributor shall not ship containers labeled by the chem manufacturer or importer unless it is a GHS label		Chemical manufacturers, importers, distributors and employers
June 1, 2016	Update alternative workplace labeling and hazard communical program as necessary, and provide additional employee train newly identified physical or health hazards.	on g for	Employers
Transition Period to the effective completion dates noted above	May comply with either 29 CFR 1910.1200 (the final standard current standard, or both	, or the	Chemical manufacturers, importers, distributors, and employers

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Preparation: Safety
Director

Authority: Vice President **Product Support**

Issuing Dept: Safety

Purpose

The purpose of this program is to ensure the safe use of hazardous chemical substances and to comply with the requirements of OSHA HCS 2012.

Introduction

In 2012, OSHA revised the Hazard Communication Standard (HCS) to align with the Globally Harmonized System of Classification and Labeling of Chemicals (GHS). As a result, this Hazard Communication Program (HCP) has been revised to comply with the requirements of the OSHA HCS 2012.

It spells out how FLAGLER CE HOLDINGS, LLC will inventory chemicals stored and used, obtain and use Safety Data Sheets, maintain labels on chemical substances and train employees about t e hazards of chemicals they are likely to encounter on the job.

Preparation of this program indicates our continuing commitment to safe / among our employees in all of our locations.

- Each facility is expected to follow this program and maintain its vork areas in accordance with these requirements.
- Employees, their designated representatives, and government off tials must be provided copies of this program upon request.
- In addition to the program, other information required as part c our hazard communication effort is available to workers upon request.
- Asking to see this information is an employee's right.
- Using this information is part of our shared commitment to a safe, healthy workplace.

Scope

This program is applicable to all FLAGLER CE HOLDINGS, LLC employees who may be exposed to hazardous chemical substances. When work is performed on a non-owned or operated lite, the operator's program shall take precedence, however, this document covers FLAGLER CE HOLDINGS, LLC er ployees and contractors and shall be used on owned premises, or when an operator's program doesn't exist or is less stringent.

Responsibilities

FLAGLER CE HOLDINGS, LLC has a written Hazard Communication progra 1. A written hazard communication program shall be developed, implemented, and maintained at each workpla e that describes how labels and other forms of warning, safety data sheets, and employee information will be met.

Safety Director or Designee

The Safety Director, or designee, is responsible for administering the hazard ommunication program. This person is also responsible for:

- Reviewing the potential hazards and safe use of chemicals.
- Maintaining a list of all hazardous chemicals and a master file of SDS i.

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MyFDEP

Florida Department of Environmental Protection



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

[Pending List]

[Pending List - this DocLog] [Edit DocLog] [Document Checkout]

Pending Document Details

NATIVE NAME: FLAGLER CONSTRUCTION EQUIPMENT

DOC LOG ID:40170CHAZ ID: FLR000088518CITY:TAMPACOUNTY: HILLSBOROUGH

View email records



Document Types

Document Type	Primary Type	Discontinued On
HWG	Υ	
RUOH	N	

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
458002	HWR	wtrautman@flaglerce.com	FLR000088518	Flagler Construction Equipment
479104	UOP	jwilson@flaglerce.com	FLR000088518	Flagler Construction Equipment

Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	04/17/2018	SIMMONS_JLS	×
HWG	Completeness Review	04/20/2018	NOLAND_T	×
HWG	Ready for Data Entry	04/20/2018	NOLAND_T	×
RUOH	Logged	04/17/2018	SIMMONS_JLS	×
RUOH	Completeness Review	04/19/2018	ASHWOOD_J	×
RUOH	Waiting for information	04/24/2018	ASHWOOD_J	×
RUOH	Ready for Data Entry	07/30/2018	ASHWOOD_J	×
RUOH	Data Entry Completed	07/30/2018	SIMMONS_JLS	×
RUOH	Final Review	07/30/2018	ASHWOOD_J	×
RUOH	Notification Letter Emailed	07/30/2018	ASHWOOD_J	×
RUOH	Booked into Oculus	07/31/2018	THURSBY_K	×

Add A New Process

Document Type	Process	Date	
Hazardous Waste Generator (HWG) ▼	Data Entry Completed ▼	07/31/2018	Add Process

Comments

Document Type	Date	Comment	Author
General Comment	04/17/2018	Notification has an original signature.	SIMMONS_JLS
RUOH	04/22/2018	Received original 8700 form, training manual statement, and Annual Report.	ASHWOOD_J
RUOH	04/24/2018	Insurance form on file is current until 5/1/18.	ASHWOOD_J
RUOH	04/24/2018	Email sent to Lisa Albury: In reviewing your submittal, we noticed additional information is needed. Your Insurance will expire on May 1, 2018.UO transporters are required to provide an Insurance form for the automobile liability inclusive of pollution liability. However, in the event your policies are separate then we will need you to submit two separate Insurance forms. Please submit the following by Tuesday, May 15, 2018 to continue processing your UO registration (see attached blank forms for your convenience): Registration fee of \$100 made payable to Florida Department of Environmental Protection via check or money order, Updated Combined HWT/UO Certificate of Liability Insurance form for automobile and pollution liability after May 1st and 2017 Revised Annual Report. NOTE: Transporting used oil without a valid registration is a violation of the law, subject to penalties. As soon as possible, please mail the required form(s) with original (wet) signature to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any further questions.	ASHWOOD_J
RUOH	05/22/2018	Received registration fee and revised Annual Report.	ASHWOOD_J
RUOH	06/21/2018	Email sent to Lisa Albury: We are still waiting for the updated Combined HWT/UO Certificate of Liability Insurance form for the automobile and pollution liability. Let me know if you have any questions.	ASHWOOD_J
RUOH	07/25/2018	Email sent to Lisa Albury: In reviewing your submittal, we noticed additional information is needed. The ACORD form submitted does not match Insurance form on file (see attached). UO transporters are required to provide an Insurance form for the automobile liability inclusive of pollution liability. However, in the event your policies are separate then we will need you to submit two separate Insurance forms. Please submit the following by Wednesday, August 8, 2018 to continue processing your UO registration (see attached blank forms for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance form for automobile and pollution liability. NOTE: Transporting used oil without a valid registration is a violation of the law, subject to penalties. As soon as possible, please mail the required form(s) with original (wet) signature to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any further questions.	ASHWOOD_J
RUOH	07/30/2018	Received revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J

Add A New Comment

Document Type	Comments	
Hazardous Waste Generator (HWG) ▼		Add Comment

DEP Home | About DEP



Florida Department of Environmental Protection

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

Carlos Lopez-Cantera Lt. Governor

> Noah Valenstein Secretary

08/28/2017 Wes Trautman, Svc Mgr Flagler Construction Equipment 8418 Palm River Rd Tampa, FL 33619-4314

The Florida Department of Environmental Protection has reviewed your form 8700-12FL notification for a new hazardous waste DEP/EPA Identification Number or status/information change. Based on the information received you must use the following identification number for all manifests or reports for Flagler Construction Equipment located at 8418 Palm River Rd, Tampa , FL 33619-4314

FLR000088518

Your facility notified FDEP requesting the following hazardous waste status/activities which do not require a separate submission: Non-Handler of Hazardous Waste.

Your facility is currently registered for the following activities: Used Oil Transporter, Used Oil Transfer Facility, Used Oil Filter Transporter, Used Oil Filter Transfer Facility (reg exp on 06/30/2018).

Your facility is currently permitted/active as: No Active Hazardous Waste Treatment, Storage, or Disposal Permit.

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

To review the details of your status, visit:

https://fideploc.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLR000088518. For further assistance, please contact me at (850) 245-8749 or email at _Glen.Perrigan@dep.state.fl.us .

Sincerely,

Glen Perrigan

Environmental Manager

Hazardous Waste Regulation Section

ME ID: 23248 , Email Address: <u>wtrautman@flaglerce.com</u>

FLORIDA

8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400

(850) 245-8707

Date Received > (for FDEP Official Use Only)

AUG 1 0 2017

PER TO A NO. TO STREET OF

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Pages 3 and 4, - com- plete as applicable)	FL Registration(s)	UW Merca	ury (see p	rage 3)	□ н₩	Transp	porter (see page	4) 🔄	Used Oil	(see page 4)
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				e hazardous of acute haza	waste and/or 1 kg rdous waste		(4)	Exempt :	Boiler and	or Indus	trial Furna	ee
		(at leas	t once a y	'ലേ)			_			-	Burner Exc	-
i	a c.	Conditi	onally E	vempt SQG	(CESQG):		·	□ b. St	melting, Me	iting, and	Refining F	urnace Exemption
		Genera	tes in any	calendar mo	onth 100 kg/mo or les	S	(5) 🚨 1					nally Exempt
				of acute hazar	dous waste and 1 kg ardous waste				lenerated : this manage			if you attach
				•				EITHER	Ca copy of	your appl	ication for s	uch authorization
	_			•	activities that apply	•	OR the authorization you received from FDEP.					
					ne, not on-going)	LOC	(6) Receives Hazardous Waste from Off-Site					
c. Episodic: Not more than one-time per year:SQGLQG f. United States Importer of hazardous waste (7) Underground Injection Control												
	_		•		ndioactive) Generator							
10	Wast	e Code	es for F	ederally R	Regulated Hazaro	dous	Wastes: Lie	the wast	codes of t	he Redora	l hazardous	wastes handled at
				•	they are presented in							wastes milities in
_		Hazardou	is waste t	ransporters l	ist codes routinely or	usuall	ly transported. U	lse comm	ents or an a	idditional	page if mor	e spaces are needed.
1			2		3	4	Ì	5		6		7
S			9	-	10	II		12		Ĩ3		
15		•	16		17	18		19		20		21
11.	. Othe	r Statu	s Char	iges (1f no	longer handling wast	e or cl	losed, sections 9	and 10 st	nould be bla	ink and sl	cip Section 1	12-16):
_				_	e at This Facility (Se						·	
		(1) Busii	ness no li	anger generat	es, transports, treats.	stores	, disposes of, or	otherwise	handles ar	y regulat	ed waste.	
۱ (B) Faci	lity Clos	ed (Con	plete this see	ction only if <u>all</u> busing	ess act	tivities at this fac	ility have	ccased.)			
	п'	(1) Close	ed at this	location and	moved or moving to	anothe	er - Submit a nev	v Form 8	700-12FL t	or the nev	v location if	you will
	ч											
L		(2) Out	of Busine	ess - Busines	s closed on			(d	ate)			
	(C)	Property	y Tax De	fault			(D) Peti	tion for	Bankruptc	y Protect	ion	<u>.</u>
12	-14—	Regist	ration a		Contact Informa	tion		nission is	a registrati	ion or reg		ormation update):
		s Facility		First Name:			Last Name:				Title:	
<u> </u> -	Contact o	on page 1	or enter;	Phone Num	ber:		Extension:	E-Mail	:		l <u> </u>	
	ntact for,			Day 1 B 2	N. 15						<u> </u>	
片		ansporter		Street or P.0). BOX:							
		il Handler sal Waste	Г	City or Tow	n.		_	State:(0	Country):		Zip Code:	

Universal Wa	ste Notification and Mercury Transporter/Handler Registration EPA ID No.FLROX	00088518						
12. Univers	al Waste (UW) Activities (Mark 'X' and complete all that apply):							
A. Federal Notification	Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 of any combination of UW accumulated (at any one time)	lb) or more						
	Accumulates: 🔲 a. UW Batteries 🔲 b. Pesticides 🚨 c. Pharmaceu	iticals						
	☐ d. Mercury Containing Devices ☐ e. Mercury Contain	ning Lamps						
	Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a UW. A permit is required for storage prior to recycling.							
B. Florida U	niversal Pharmaceutical Waste (UPW): one-time registration							
Pharma	secuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)							
Pharma	secutions Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated						
Revers	e Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Heal	lth [DOH])						
C. Florida A	annual Mercury Handler Registration:							
For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Containing Lamps and Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.								
	is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-time registering Renewal One-time \$1,000 fee for Mercury for-hire first time LQH reg							
For-hi	re Transporter of Universal Waste Mercury-Containing Lamps or Devices							
☐ For-hi	re Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual Registration						
	ry-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler	Required						
☐ Mercu	ry-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler							
☐ Mercu	ry-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration + one-time \$1,000 fee+						
☐ Merci.	ry-Containing Lamps LQH = 2.000 kg (4400 lbs/8.000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)						
	Recovery and/or Reclamation Facility (A <u>hazardous waste permit</u> is required for this activity) st time registering Renewal	Annual Registration Required						
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s)								
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transport [62-740 F.A.C.] Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740,300(5)]								

Hazardous Waste and Used Oil Transporter Registration	ons	EPA ID No. FLRO 000 88518
14. HW Transporter Activities: (Mark 'X' and complete all th	nat apply if you need	to register your HW Transporter activities)
Transporters of and Transfer Facilities for Hazardous Was- renew their registration. Evidence of casualty/liability insurance Transfer facilities must submit several additional documents as detaile changes. Registered transporters and transfer facilities may only begin Generators of hazardous waste who transport waste only within the	pursuant to 62-730.17 d on page 5 the first to operations after received	70(2)(a) is required in addition to this registration. ime they register and when the information iving approval from the Department.
A. HW Transporter Registration Information (must be	completed annually	y and when this information changes)
This facility is a registered transporter of hazard	ous waste.	
This form is: 🚨 Initial Registration 💢 Renewal	Notification of a	changes Cancel Registration
☐ 1. For own waste only ☐ 2. For commercial p	ourposes 🔲 3.1	Both commercial and own waste
4. Transportation Mode 🔲 Air 🚨 Rail 🚨 Highway	y 🚨 Water 🚨 O	ther - specify
B. HW Transfer Facility Registration Information (m	ust be completed a	nnually and when this information changes)
This facility is a Hazardous Waste Transfer Face	ility: (at this location	on) Storage Volume
This form is: 🔲 Initial Registration 🔲 Renewal 🗆	Notification of ch	nanges Cancel Registration
Note: Hazardous Waste transfer facilities must comply with the	requirements of Ru	le 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.
The Transfer Facility records required under the provis Our mailing (business) address	ions of Rule 62-730. The site (facility	• • • • • • • • • • • • • • • • • • • •
Please enter the EPA ID Number of the HW Transporter who carries the	e insurance for this T	ransfer Facility:
Please see the top of page 5 for additional items that must be Transfer Facilities [Rule 62-730.171(3), Florida Administrativ		on to the above registration for Hazardous Waste
15. Used Oil and Oil Filter Activities: : (Mark 'X' and com	plete all that apply i	f you need to register your used oil activities),
Transporters (exemptions in 40 CFR 279.40(a)(1-4), transfer faciliannually register with the Department using this form. All except Flo \$100 registration fee. This form is: Initial Registration Renewal Inapplicable, a check or money order, in the amount of \$100	orida used oil (UO) Pr	changes
(1) Used Oil Transporter - mark activities: (occurring in Florida)	(6) Used Oil Filte	er Management (must annually register)
a. Transporter (off-site) and noncontiguous locations	a. Transp	
b. Transfer Facility	b. Transf	
G b. Fransier Facility	L	sor (Annual Report Required)
(2) Collection Center (From businesses, <u>no more than</u> 55 gal per shipment)	☐ d. End U	ser
(3) Used Oil Processor (A permit is required)	(7) The records re	equired under the provisions of Rule 62-710.510.
(4) 🚨 Off-Specification Used Oil Burner		at (check one):
(5) Used Oil Fuel Marketer	☐ Our maili	ng (business) address The site (facility) address
Please see the top of page 5 for additional items that must be submexempt Used Oil Transporters.	itted in addition to	the above registration and fees required for non-

Transfer Facility and Used Oil Transporter requiren	nents and required signature page	EPAID No. FLROOM	0088518					
(14 cont.) Hazardous Waste Transfer Facilities: In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:								
Certification by a responsible corporate officer Section 403.7211(2), Florida Statu	of the transporter that the proposed locates (F.S.) [Rule 62-730.171(3)(a)1., F.A							
Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.]								
A brief general description of the transfer facil								
_A copy of the facility closure plan [Rule 62-73								
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	2-730.171(3)(a)7., F.A.C.]							
(15 cont.) Used Oil Transporters: (Exemptions i	n 40 CFR 279.40(a)(1-4))							
In addition to the requirements on Page 4 Sect								
 ALL registered UO Handlers must subm their own company. 	it an annual report except generators tra	unsporting UO from noncontigue	ous operations within					
 UO transporters transporting off-site ove 	r public highways only within their own	n company must submit proof of	insurance.					
 UO transporters transporting more than 500 gallons/year must submit proof of insurance annually, and must sign and certify this submission as a certified used oil transporter in section 17 (except those exempted by Rule 62-710.600(1), F.A.C.). 								
The used oil annual report is attached	Evidence of Liability Insurance pu	1. * (1997) # (1997) # (1997) # (1997) # (1997) # (1997) # (1997) # (1997) # (1997) # (1997) # (1997) # (1997)	C. is attached.					
16. Comments (attach a page if more space is nee								
17. Certification: I certify under penalty of law the accordance with a system designed to assure that q submitted is, to the best of my knowledge and beliefalse information, including the possibility of fine and the certify as a Used Oil Transporter that I am	ualified personnel properly gather and e ef, true, accurate, and complete. I am av and imprisonment for knowing violation familiar with the applicable Florida and	evaluate the information submitt ware that there are significant penns. d Federal laws and rules governing	ed. The information nalties for submitting ng used oil transpor-					
tation and have an annual and new employee traini bility is demonstrated by the Used Oil Transporter	Certificate of Liability Insurance, DEP	form 62-730.900(5)(a), F.A.C						
Signature of owner, operator, or an authorized representative	Print Name and	Oil	Date Signed (mm-dd-yyyy)					
alul	Kevin Walden, V.P.T	Product 1	07-31-20					
		Support						
If the person that filled in this form is not the Facili								
Lisa Albury 14		bury@flagter	ce. Com					
(Name of person completing this form)	(Phone Number)	(E-mail Address)						

03/30/18 10:11 CSG_SK-TSM-BOX-23 Joseph D Davis PAGE 1

Safety-Kleen Systems, Inc.
2600 N Central Expy, Suite 200
Richardson, TX 75080 CORPORATE: 800-669-5740 24 HR EMERGENCY: 800-468-1760 (Safety-Kleen)

8136261203

CUSTOMER# FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314

SRVC WEEK: 2018-13 SRVC DATE: 03/30/18

76290411-1801141147

REFERENCE NBR.

PHONE 813-630-0077 BILL TO CUSTOMER# BILL TO ADDRESS:

Flagler Holdings 9601 Boggy Creek Road Orlando FL 32824-0000 PHONE 407-922-2993

PURCHASE ORDER# TAX EXEMPT#

PRODUCT/SERVICES

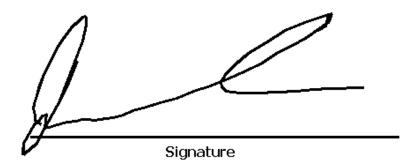
SERVICE, PRODUCT	/	QTY UNIT	PRICE T	'AX CH	TOTAL ARGE
3383	DRUM,55 GAL FOR O.F. SERVICE TERM 1 WEEK	4.000	8.5200	0.00	34.08
83383	DRUM,55 WASTE O.F. SERVICE TERM 1 WEEK	4.000	69.2300	0.00	276.92
100001	FEE, FUEL SURCHARGE	1.000	12.8100	0.00	12.81
3230	TAX HANDLING N/C DRUM DROP 30	4.000	0.0000	0.00	0.00
	TOTAL SERVICE/PRODUCTS		90.5600	0.00	323.81
			TOTAL CHARG	E	323.81
			CREDITS		0.00
			TOTAL DUE		323.81

UNPAID BALANCE THIS RECEIPT 323.81

GENERATOR STATUS 0-220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such

introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still residues containing perchloroethylene, petroleum naphtha, or triflurotrichloroethane dry cleaning solvents. Customer agrees that it is responsible for properly classifying its waste streams as Used Oil or Nonhazardous Waste in accordance with the provision of 40 ${\tt CFR}$ 262.11 and applicable state laws. Customer agrees that it will not introduce any non-conforming substance into the SK Property, including, without limitation, any hazardous waste or hazardous waste constituent, (i.e., polychlorinated biphenyls ("PCBs"), herbicides, pesticides, dioxins, or listed hazardous wastes) except to the extent such introduction is incidental to the normal use of the SK Property. In the event of the introduction of such non-conforming hazardous waste, Customer agrees that it will be responsible for all costs and remediation expenses related to or arising from the proper management and disposal of the non-conforming waste, including the cost of equipment decontamination and subsequent disposal. Final invoicing will be based on the actual services provided, which may include additional charges for off specification waste and surcharges. Final invoice amount may be more than the amount listed on the printed receipt. If any legal action is commenced because of an alleged dispute, breach, default or misrepresentation, the Customer also agrees that the prevailing party will be entitled to recover reasonable attorney's fees and costs associated with the non-conforming contamination event. Safety-Kleen's failure to screen Customer's material or take a retain sample, in no way constitutes a waiver of Customer's obligation to properly classify its materials. Safety-Kleen relies on Customer's representations and Customer is responsible for informing Safety-Kleen of any process changes that may alter the characteristics of the materials provided. IN THE EVENT OF AN EMERGENCY CALL **24-HR NUMBER** 1-800-468-1760 (Safety-Kleen)



CUSTOMER / GENERATOR: j

SHIPPING DOCUMENT

CUSTOMER#/GENERATOR: FL15674 Flagler Equipment 76290411-1801141147

8418 Palm River Rd Tampa FL 33619-4314

PHONE 813-630-0077

GENERATOR USEPA ID. CESQG GENERATOR STATE 9120019999
MANIFEST#: FORM CD: NR SHIP# 224895421

TRANSPORTER 1 TXR000081205

TRANSPORTER 2

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

DRAINED USED OIL FILTERS
(NOT USDOT OR USEPA REGULATED)

FEDERAL WASTE CODES NONE

STATE WASTE CODES

TOTAL CONT 4 TYPE DM WT/VOL P SKDOT 1476

CNT#: 180303001723 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 150167 CNT#: 180323360360 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 150167 CNT#: 180323360359 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 150167 CNT#: 180323360358 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 150167

DESIGNATED FACILITY NAME/ADDRESS:

SAFETY-KLEEN SYSTEMS INC 5309 24TH AVE SOUTH TAMPA, FL 33619 TSD PHONE: 813-626-1203

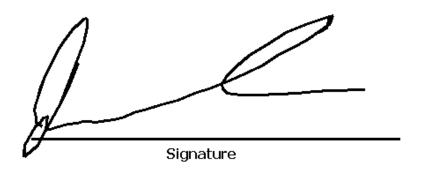
FACILITY USEPA ID NO FLD980847271

FACILITY STATE ID NO

GENERATOR STATUS
0-220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls $({\tt PCB's})\,,\ {\tt herbicides},\ {\tt pesticides},\ {\tt dioxins}\ {\tt or}\ {\tt listed}\ {\tt hazardous}\ {\tt waste}$ into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still residues containing perchloroethylene, petroleum naphtha, or

 ${\tt triflurotrichloroethane} \ {\tt dry} \ {\tt cleaning} \ {\tt solvents}. \ {\tt Customer} \ {\tt agrees} \ {\tt that} \ {\tt it}$ is responsible for properly classifying its waste streams as Used Oil or Nonhazardous Waste in accordance with the provision of 40 CFR 262.11 and applicable state laws. Customer agrees that it will not introduce any non-conforming substance into the SK Property, including, without limitation, any hazardous waste or hazardous waste constituent, (i.e., polychlorinated biphenyls ("PCBs"), herbicides, pesticides, dioxins, or listed hazardous wastes) except to the extent such introduction is incidental to the normal use of the SK Property. In the event of the introduction of such non-conforming hazardous waste, Customer agrees that it will be responsible for all costs and $\ensuremath{\operatorname{remediation}}$ expenses related to or arising from the proper management and disposal of the non-conforming waste, including the cost of equipment decontamination and subsequent disposal. Final invoicing will be based on the actual services provided, which may include additional charges for off specification waste and surcharges. Final invoice amount may be more than the amount listed on the printed receipt. If any legal action is commenced because of an alleged dispute, breach, default or misrepresentation, the Customer also agrees that the prevailing party will be entitled to recover reasonable attorney's fees and costs associated with the non-conforming contamination event. Safety-Kleen's failure to screen Customer's material or take a retain sample, in no way constitutes a waiver of Customer's obligation to properly classify its materials. Safety-Kleen relies on Customer's representations and Customer is responsible for informing Safety-Kleen of any process changes that may alter the characteristics of the materials provided. IN THE EVENT OF AN EMERGENCY CALL **24-HR NUMBER** 1-800-468-1760 (Safety-Kleen)



CUSTOMER / GENERATOR: j

LAST PAGE

CSG_SK-TSM-BOX-23 Joseph D Davis 07/02/18 09:16 PAGE 1

Safety-Kleen Systems, Inc.
2600 N Central Expy, Suite 200
Richardson, TX 75080 CORPORATE: 800-669-5740 24 HR EMERGENCY: 800-468-1760 (Safety-Kleen)

8136261203

CUSTOMER# FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314 PHONE 813-630-0077 77130207-1802953246 SRVC WEEK: 2018-27 SRVC DATE: 07/02/18

TAX EXEMPT#

REFERENCE NBR.

BILL TO CUSTOMER#

BILL TO ADDRESS: Flagler Holdings 9601 Boggy Creek Road Orlando FL 32824-0000 PHONE 407-922-2993

PURCHASE ORDER#

PRODUCT/SERVICES

SERVICE	/					TOTAL
PRODUCT		QTY	UNIT	PRICE	TAX CH	ARGE
3383	DRUM,55 GAL FOR O.F.	3.	000	8.5200	0.00	25.56
	SERVICE TERM 1 WEEK					
83383	DRUM,55 WASTE O.F.	1.	000	69.2300	0.00	69.23
	SERVICE TERM 1 WEEK					
30150	MDL 30 WITH PRM SOLVENT	1.	000	145.3200	10.17	155.49
	S/N 15906127 TAG 00001140SK1	59061	27 CLE	EAN 15.00 SE	PENT 14.000	
	SERVICE TERM 8 WEEK SCAN	NED Y	ES			
30150	MDL 30 WITH PRM SOLVENT	1.	000	145.3200	10.17	155.49
	S/N 16016123 TAG 00001140SK1			EAN 15.00 SE	PENT 14.000	
	SERVICE TERM 8 WEEK SCAN					
	RECOVERY FEE					
3230	TAX HANDLING N/C DRUM DROP 30	3	.000	0.0000	0.00	0.00
	TOTAL SERVICE/PRODUCTS			391.5200	21.96	430.52
					ARGE	
				CREDITS		0.00
				momat Diii		420 52
				TOTAL DUE		430.52

430.52 UNPAID BALANCE THIS RECEIPT

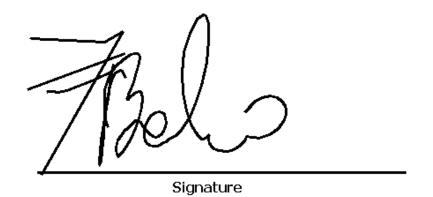
Machine clean and good condition? Yes Lamp Assembly Condition Yes Decals in place and legible? Yes Fusible link installed? Yes Emergency closing of lid unobstructed? Yes Machine properly grounded? Yes Local Phone No. Sticker Affixed to Machine Yes Spent solvent meets acceptance criteria? Yes

GENERATOR STATUS 0-220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the $\,$ Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges $% \left(1\right) =\left(1\right) \left(1$ and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated

herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent $% \left(1\right) =\left(1\right) \left(1\right) +\left(1\right) \left(1\right) \left(1\right) +\left(1\right) \left(parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still residues containing perchloroethylene, petroleum naphtha, or triflurotrichloroethane dry cleaning solvents. Customer agrees that it is responsible for properly classifying its waste streams as Used Oil or Nonhazardous Waste in accordance with the provision of 40 CFR 262.11 and applicable state laws. Customer agrees that it will not introduce any non-conforming substance into the SK Property, including, without limitation, any hazardous waste or hazardous waste constituent, (i.e., polychlorinated biphenyls ("PCBs"), herbicides, pesticides, dioxins, or listed hazardous wastes) except to the extent such introduction is incidental to the normal use of the SK Property. In the event of the introduction of such non-conforming hazardous waste, Customer agrees that it will be responsible for all costs and remediation expenses related to or arising from the proper management and disposal of the non-conforming waste, including the cost of equipment decontamination and subsequent disposal. Final invoicing will be based on the actual services provided, which may include additional charges for off specification waste and surcharges. Final invoice amount may be more than the amount listed on the printed receipt. If any legal action is commenced because of an alleged dispute, breach, default or misrepresentation, the Customer also agrees that the prevailing party will be entitled to recover reasonable attorney's fees and costs associated with the non-conforming contamination event. Safety-Kleen's failure to screen Customer's material or take a retain sample, in no way constitutes a waiver of Customer's obligation to properly classify its materials. Safety-Kleen relies on Customer's representations and Customer is responsible for informing Safety-Kleen of any process changes that may alter the characteristics of the materials provided. IN THE EVENT OF AN EMERGENCY CALL **24-HR NUMBER** 1-800-468-1760 (Safety-Kleen) A variable recovery fee that fluctuates with the DOE national average diesel price may be applied to your invoice. For more information regarding our recovery fee calculation please go to http://safety-kleen.com/

customer-service/environmental-fees/recovery-fees. Please note e-manifest fees applicable to this order may not be included in the total above and will be included in the final invoice or credit card statement. RECEIPT ONLY - THIS IS NOT AN INVOICE



CUSTOMER / GENERATOR: j

SHIPPING DOCUMENT

REFERENCE NBR. 77130207-1802953246

CUSTOMER#/GENERATOR: FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314

PHONE 813-630-0077

GENERATOR USEPA ID. CESQG GENERATOR STATE 9120019999

MANIFEST#: FORM CD: NR SHIP# 225709029

TRANSPORTER 1 TXR000081205

TRANSPORTER 2

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

DRAINED USED OIL FILTERS
(NOT USDOT OR USEPA REGULATED)

FEDERAL WASTE CODES NONE

STATE WASTE CODES

TOTAL CONT 3 TYPE DM WT/VOL P SKDOT 1476

CNT#: 180628276517 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 150167 CNT#: 180609932270 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 150167 CNT#: 180609932271 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 150167

USED CLEANING COMPOUNDS (PETROLEUM

NAPHTHA) (NOT USDOT OR USEPA REGULATED)

FEDERAL WASTE CODES NONE

STATE WASTE CODES

TOTAL CONT 2 TYPE DM WT/VOL G SKDOT 557

CNT#: 180609932268 SZ: 30 GAL/114 L CONTAINERS QTY: 14 PROF# 150012 CNT#: 180609932269 SZ: 30 GAL/114 L CONTAINERS QTY: 14 PROF# 150012

DESIGNATED FACILITY NAME/ADDRESS:

SAFETY-KLEEN SYSTEMS INC 5309 24TH AVE SOUTH TAMPA, FL 33619 TSD PHONE: 813-626-1203

FACILITY USEPA ID NO FLD980847271

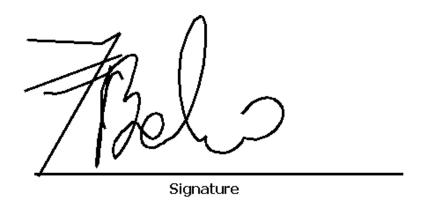
FACILITY STATE ID NO

GENERATOR STATUS 0-220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint qun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls

(PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still residues containing perchloroethylene, petroleum naphtha, or triflurotrichloroethane dry cleaning solvents. Customer agrees that it is responsible for properly classifying its waste streams as Used Oil or Nonhazardous Waste in accordance with the provision of 40 CFR 262.11 and applicable state laws. Customer agrees that it will not introduce any non-conforming substance into the SK Property, including, without limitation, any hazardous waste or hazardous waste constituent, (i.e., polychlorinated biphenyls ("PCBs"), herbicides, pesticides, dioxins, or listed hazardous wastes) except to the extent such introduction is incidental to the normal use of the SK Property. In the event of the introduction of such non-conforming hazardous waste, Customer agrees that it will be responsible for all costs and remediation expenses related to or arising from the proper management and disposal of the non-conforming waste, including the cost of equipment decontamination and subsequent disposal. Final invoicing will be based on the actual services provided, which may include additional charges for off specification waste and surcharges. Final invoice amount may be more than the amount listed on the printed receipt. If any legal action is commenced because of an alleged dispute, breach, default or misrepresentation, the Customer also agrees that the prevailing party will be entitled to recover reasonable attorney's fees and costs associated with the non-conforming contamination event. Safety-Kleen's failure to screen Customer's material or take a retain sample, in no way constitutes a waiver of Customer's obligation to properly classify its materials. Safety-Kleen relies on Customer's representations and Customer is responsible for informing Safety-Kleen of any process changes that may alter the characteristics of the materials provided. IN THE EVENT OF AN EMERGENCY CALL **24-HR NUMBER** 1-800-468-1760 (Safety-Kleen) A variable recovery fee that fluctuates with the DOE national average diesel price may be applied to your invoice. For more information regarding our recovery fee calculation please go to http://safety-kleen.com/

customer-service/environmental-fees/recovery-fees. Please note e-manifest fees applicable to this order may not be included in the total above and will be included in the final invoice or credit card statement. RECEIPT ONLY - THIS IS NOT AN INVOICE



CUSTOMER / GENERATOR: j

LAST PAGE

10/31/18 11:28 CSG_SK-TSM-BOX-23 Joseph D Davis PAGE 1

Safety-Kleen Systems, Inc.
2600 N Central Expy, Suite 200
Richardson, TX 75080 CORPORATE: 800-669-5740 24 HR EMERGENCY: 800-468-1760 (Safety-Kleen)

8136261203

CUSTOMER# FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314

PHONE 813-630-0077

BILL TO CUSTOMER#

BILL TO ADDRESS: Flagler Holdings 9601 Boggy Creek Road Orlando FL 32824-0000 PHONE 407-922-2993

PURCHASE ORDER#

TAX EXEMPT#

REFERENCE NBR.

78302529-1805450160

SRVC WEEK: 2018-44

SRVC DATE: 10/31/18

PRODUCT/SERVICES

	I RODGOT/GERVIGEG							
SERVICE	/				TOTAL			
PRODUCT		QTY UNIT	PRICE	TAX C	HARGE			
3383	DRUM,55 GAL FOR O.F. SERVICE TERM 1 WEEK	4.000	0.0000	0.00	0.00			
	CAUSE CODE VoidHeaderAndLine	-SERVICE	NOT NEEDED					
8003369	DRUM, 55 GL BLACK STEEL O SERVICE TERM 8 WEEK	4.000	85.0000	23.80	363.80			
1272482/								
875467	CNO-NON HAZARDOUS SOLID B SERVICE TERM 12 WEEK	2.000	285.0000	0.00	570.00			
100030	RECOVERY FEE	1.000	63.7000	4.46	68.16			
	TOTAL SERVICE/PRODUCTS		433.7000	28.26	1001.96			
			TOTAL CHA	RGE	1001.96			
			CREDITS		0.00			
			TOTAL DUE	=====	1001.96			

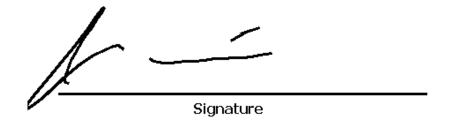
UNPAID BALANCE THIS RECEIPT 1001.96

GENERATOR STATUS 0-220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer

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customer-service/environmental-fees/recovery-fees. Please note e-manifest fees applicable to this order may not be included in the total above and will be included in the final invoice or credit card statement. RECEIPT ONLY - THIS IS NOT AN INVOICE



10/31/18 11:28 PAGE 2 CSG SK-TSM-BOX-23 Joseph D Davis

SHIPPING DOCUMENT

CUSTOMER#/GENERATOR: FL15674 Flagler Equipment

78302529-1805450160 8418 Palm River Rd

REFERENCE NBR.

Tampa FL 33619-4314 PHONE 813-630-0077

GENERATOR USEPA ID. CESQG GENERATOR STATE 9120019999

MANIFEST#: FORM CD: NR SHTP# 226876416

TRANSPORTER 1 TXR000081205

TRANSPORTER 2

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

NONE, NON D.O.T. REGULATED, (ABSORBENT S CONTAMINATED WITH OIL), N/A FEDERAL WASTE CODES NONE

STATE WASTE CODES

TOTAL CONT 2 TYPE DM WT/VOL P SKDOT 7856497

CNT#: 181025527945 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 1272482 CNT#: 181025527946 SZ: 55 GAL/205 L CONTAINERS QTY: 150 PROF# 1272482

DESIGNATED FACILITY NAME/ADDRESS: CLEAN HARBORS FLORIDA LLC 7001 KILO AVENUE BARTOW FL TSD PHONE: 863-533-6111

FACILITY USEPA ID NO FLD980729610 FACILITY STATE ID NO 9120019999

GENERATOR STATUS 0-220 lbs/month

classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still residues containing perchloroethylene, petroleum naphtha, or triflurotrichloroethane dry cleaning solvents. Customer agrees that it is responsible for properly classifying its waste streams as Used Oil or Nonhazardous Waste in accordance with the provision of 40 CFR

Customer certifies that (i) the above-named materials are properly

262.11 and applicable state laws. Customer agrees that it will not introduce any non-conforming substance into the SK Property, including, without limitation, any hazardous waste or hazardous waste constituent, (i.e., polychlorinated biphenyls ("PCBs"), herbicides, pesticides, dioxins, or listed hazardous wastes) except to the extent such introduction is incidental to the normal use of the SK Property. In the event of the introduction of such non-conforming hazardous waste, Customer agrees that it will be responsible for all costs and remediation expenses related to or arising from the proper management and disposal of the non-conforming waste, including the cost of equipment decontamination and subsequent disposal. Final invoicing will be based on the actual services provided, which may include additional charges for off specification waste and surcharges. Final invoice amount may be more than the amount listed on the printed receipt. If any legal action is commenced because of an alleged dispute, breach, default or misrepresentation, the Customer also agrees that the prevailing party will be entitled to recover reasonable attorney's fees and costs associated with the non-conforming contamination event. Safety-Kleen's failure to screen Customer's material or take a retain sample, in no way constitutes a waiver of Customer's obligation to properly classify its materials. Safety-Kleen relies on Customer's representations and Customer is responsible for informing Safety-Kleen of any process changes that may alter the characteristics of the materials provided. IN THE EVENT OF AN EMERGENCY CALL **24-HR NUMBER** 1-800-468-1760 (Safety-Kleen) A variable recovery fee that fluctuates with the DOE national average diesel price may be applied to your invoice. For more information regarding our recovery fee calculation please go to http://safety-kleen.com/

customer-service/environmental-fees/recovery-fees. Please note e-manifest fees applicable to this order may not be included in the total above and will be included in the final invoice or credit card statement. RECEIPT ONLY - THIS IS NOT AN INVOICE

Signature

CUSTOMER / GENERATOR: john

CSG SK-TSM-IIMO-02 11/16/18 07:44 Anthony B Matthews PAGE 1

Safety-Kleen Systems, Inc.
2600 N Central Expy, Suite 200
Richardson, TX 75080 CORPORATE: 800-669-5740 24 HR EMERGENCY: 800-468-1760 (Safety-Kleen)

8136261203

CUSTOMER# FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314

SRVC WEEK: 2018-46 SRVC DATE: 11/16/18

PHONE 813-630-0077 BILL TO ADDRESS:

BILL TO CUSTOMER# FL19573

Flagler Holdings 9601 Boggy Creek Road Orlando FL 32824-0000 PHONE 407-922-2993

PURCHASE ORDER#

TAX EXEMPT#

REFERENCE NBR.

78274614-1805393849

PRODUCT/SERVICES

SERVICE/	/					TOTAL
PRODUCT			QTY UNIT	PRICE	TAX CH	ARGE
66636		RECYCLE AUTOMOTI TERM 1 WEEK	307.000	0.0000	0.00	0.00
	HALOGEN	/ CLOR-D-TECT TEST	NOT PERFORME	D:		
10256		SERVICE/STOP NON TERM 1 WEEK	1.000	10.0000	0.00	10.00
	TOTAL S	SERVICE/PRODUCTS		10.0000	0.00	10.00
				TOTAL CHAR	RGE	10.00
				CREDITS		0.00
				TOTAL DUE		10.00
				101111 202	======	=======

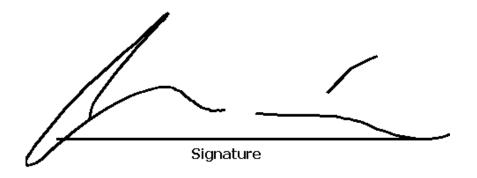
UNPAID BALANCE THIS RECEIPT 10.00

If high risk source, rep. certifies that load specific PCB & Silicon testing have been completed prior to pumping this load.

GENERATOR STATUS CESQG: Vehicle

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to

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CUSTOMER / GENERATOR: steve



TRANSPORTER: Anthony B Matthews

SHIPPING DOCUMENT

CUSTOMER#/GENERATOR: FL15674 Flagler Equipment

REFERENCE NBR. 78274614-1805393849

8418 Palm River Rd Tampa FL 33619-4314

PHONE 813-630-0077

GENERATOR USEPA ID. CESQG GENERATOR STATE 9120019999

MANIFEST#: FORM CD: NR SHIP# 226802140

TRANSPORTER 1 TXR000081205

TRANSPORTER 2

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

USED OIL

(NOT USDOT HAZARDOUS MATERIAL)

FEDERAL WASTE CODES NONE

STATE WASTE CODES

TOTAL CONT 1 TYPE TT WT/VOL G SKDOT 850

CNT#: 181116940057 SZ: BULK VOLUME CONTAINER QTY: 307 PROF# 150105

DESIGNATED FACILITY NAME/ADDRESS:

SAFETY-KLEEN SYSTEMS INC 5309 24TH AVE SOUTH TAMPA, FL 33619 TSD PHONE: 813-626-1203

FACILITY USEPA ID NO FLD980847271

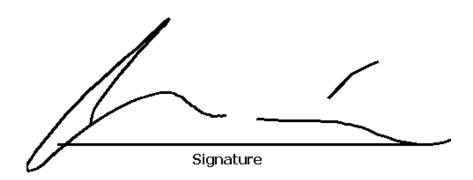
FACILITY STATE ID NO

If high risk source, rep. certifies that load specific PCB & Silicon testing have been completed prior to pumping this load.

GENERATOR STATUS CESOG: Vehicle

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls $({\tt PCB's})\,,\ {\tt herbicides},\ {\tt pesticides},\ {\tt dioxins}\ {\tt or}\ {\tt listed}\ {\tt hazardous}\ {\tt waste}$ into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still residues containing perchloroethylene, petroleum naphtha, or

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CUSTOMER / GENERATOR: steve



TRANSPORTER: Anthony B Matthews

CSG SK-TSM-BOX-23 Joseph D Davis 12/10/18 14:28 PAGE 1

Safety-Kleen Systems, Inc.
2600 N Central Expy, Suite 200
Richardson, TX 75080 CORPORATE: 800-669-5740

24 HR EMERGENCY: 800-468-1760 (Safety-Kleen)

8136261203

CUSTOMER# FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314 78538924-1805917749 SRVC WEEK: 2018-48 SRVC DATE: 12/10/18

REFERENCE NBR.

PHONE 813-630-0077 BILL TO CUSTOMER# BILL TO ADDRESS:

Flagler Holdings 9601 Boggy Creek Road Orlando FL 32824-0000 PHONE 407-922-2993

PURCHASE ORDER#

TAX EXEMPT#

PRODUCT/SERVICES

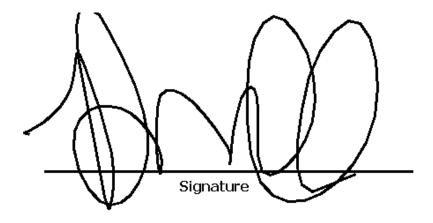
	1110000	.,				
SERVICE	/				TOTAL	
PRODUCT		QTY UNIT	PRICE	TAX C	CHARGE	
	DRUM,55 GAL FOR O.F. SERVICE TERM 1 WEEK	5.000	9.1200	0.00	45.60	
	DRUM,55 WASTE O.F. SERVICE TERM 1 WEEK	5.000	45.0000	0.00	225.00	
	DRUM, 55 GL BLACK STEEL O SERVICE TERM 8 WEEK	4.000	0.0000	0.00	0.00	
	CAUSE CODE VoidHeaderAndLine	-SERVICE 1	NOT NEEDED			
1531030/						
	CNO-NON HAZARDOUS SOLID 5 SERVICE TERM 12 WEEK	4.000	263.3800	0.00	1053.52	
3300	DRUM 85 GL YELLOW STEEL O	1.000	296.0000	20.72	316.72	
100030	RECOVERY FEE	1.000	81.0000	5.67	86.67	
3230	TAX HANDLING N/C DRUM DROP 30	5.000	0.0000	0.00	0.00	
	TOTAL SERVICE/PRODUCTS		694.5000	26.39	1727.51	
			TOTAL CHAR	RGE	1727.51	
			CREDITS		0.00	
			TOTAL DUE	=====	1727.51	

UNPAID BALANCE THIS RECEIPT 1727.51

GENERATOR STATUS 0-220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind

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SHIPPING DOCUMENT

CUSTOMER#/GENERATOR: FL15674 Flagler Equipment

REFERENCE NBR. 78538924-1805917749

8418 Palm River Rd Tampa FL 33619-4314

PHONE 813-630-0077

GENERATOR USEPA ID. CESQG GENERATOR STATE 9120019999

MANIFEST#: FORM CD: NR SHIP# 227039798

TRANSPORTER 1 TXR000081205

TRANSPORTER 2

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

DRAINED USED OIL FILTERS
(NOT USDOT OR USEPA REGULATED)

FEDERAL WASTE CODES NONE

STATE WASTE CODES

TOTAL CONT 5 TYPE DM WT/VOL P SKDOT 1476

CNT#: 181119012997 SZ: 55 GAL/205 L CONTAINERS QTY: 100 PROF# 150167 CNT#: 181119012998 SZ: 55 GAL/205 L CONTAINERS QTY: 100 PROF# 150167 CNT#: 181119024045 SZ: 55 GAL/205 L CONTAINERS QTY: 100 PROF# 150167 CNT#: 181119024046 SZ: 55 GAL/205 L CONTAINERS QTY: 100 PROF# 150167 CNT#: 181119024047 SZ: 55 GAL/205 L CONTAINERS QTY: 100 PROF# 150167

DESIGNATED FACILITY NAME/ADDRESS:

SAFETY-KLEEN SYSTEMS INC 5309 24TH AVE SOUTH TAMPA, FL 33619 TSD PHONE: 813-626-1203

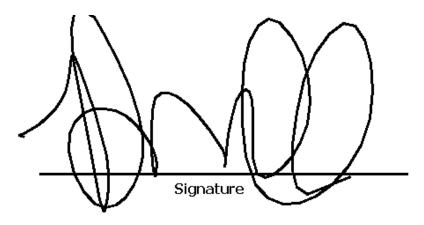
FACILITY USEPA ID NO FLD980847271

FACILITY STATE ID NO

GENERATOR STATUS 0-220 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material, and (iii) the above referenced Generator Status is correct. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. If Customer fails to make payment when due, an amount equal to the lesser of (i) 1.5% per month (18% per annum) or (ii) the maximum amount allowed by law, will be added to all unpaid amounts outstanding. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. Customer acknowledges that it is responsible for maintaining its Generator Status and obtaining an EPA ID number if required by applicable law. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still

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CUSTOMER / GENERATOR: john

SHIPPING DOCUMENT

REFERENCE NBR. 78538924-1805917749

CUSTOMER#/GENERATOR: FL15674 Flagler Equipment 8418 Palm River Rd

Tampa FL 33619-4314 PHONE 813-630-0077

GENERATOR USEPA ID. CESQG GENERATOR STATE 9120019999

MANIFEST#: FORM CD: NR SHIP# 227208506

TRANSPORTER 1 TXR000081205

TRANSPORTER 2

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

NONE, NON D.O.T. REGULATED, (OIL, DIRT

AND SAND), N/A

FEDERAL WASTE CODES NONE

STATE WASTE CODES

TOTAL CONT 4 TYPE DM WT/VOL P SKDOT 8016233

CNT#: 181119024061 SZ: 55 GAL/205 L CONTAINERS QTY: 250 PROF# 1531030 CNT#: 181119024060 SZ: 55 GAL/205 L CONTAINERS QTY: 250 PROF# 1531030 CNT#: 181119024062 SZ: 55 GAL/205 L CONTAINERS QTY: 250 PROF# 1531030 CNT#: 181119024059 SZ: 55 GAL/205 L CONTAINERS QTY: 250 PROF# 1531030

DESIGNATED FACILITY NAME/ADDRESS:

CLEAN HARBORS FLORIDA LLC 7001 KILO AVENUE

BARTOW FL 33830

TSD PHONE: 863-533-6111

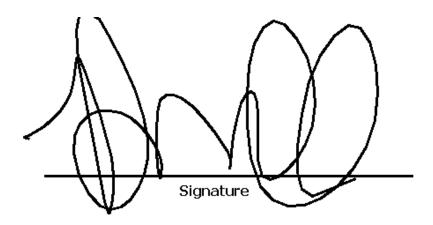
FACILITY USEPA ID NO FLD980729610 FACILITY STATE ID NO 9120019999

GENERATOR STATUS 0-220 lbs/month

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customer-service/environmental-fees/recovery-fees. Please note e-manifest fees applicable to this order may not be included in the total above and will be included in the final invoice or credit card statement. RECEIPT ONLY - THIS IS NOT AN INVOICE



CUSTOMER / GENERATOR: john

CSG SK-TSM-BOX-23 Joseph D Davis 12/20/18 14:36 PAGE 1

Safety-Kleen Systems, Inc.
2600 N Central Expy, Suite 200
Richardson, TX 75080 CORPORATE: 800-669-5740 24 HR EMERGENCY: 800-468-1760 (Safety-Kleen)

8136261203

CUSTOMER# FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314 PHONE 813-630-0077

SRVC WEEK: 2018-51 SRVC DATE: 12/20/18

REFERENCE NBR.

78583634-1806006528

BILL TO CUSTOMER#

PURCHASE ORDER#

BILL TO ADDRESS: Flagler Holdings 9601 Boggy Creek Road Orlando FL 32824-0000 PHONE 407-922-2993

TAX EXEMPT#

PRODUCT/SERVICES

SERVICE	/					TOTAL
PRODUCT		QTY	UNIT P	RICE	TAX C	HARGE
	DRUM,55 GAL FOR O.F.	4.0	00	0.0000	0.00	0.00
	SERVICE TERM 1 WEEK					
	CAUSE CODE VoidHeaderAndLine					
	DRUM,55 WASTE O.F.	1.0	00	0.0000	0.00	0.00
	SERVICE TERM 1 WEEK					
	CAUSE CODE VoidHeaderAndLine					
30150	MDL 30 WITH PRM SOLVENT	1.0	00	156.2200	10.94	167.16
	S/N 15906127 TAG 00001140SK15	590612	7 CLEA	N 15.00 SP	ENT 14.00	0
	SERVICE TERM 8 WEEK SCANN	NED YE	IS			
30150	MDL 30 WITH PRM SOLVENT	1.0	00	156.2200	10.94	167.16
	S/N 16016123 TAG 00001140SK16	501612	3 CLEA	N 15.00 SP	ENT 14.00	0
	SERVICE TERM 8 WEEK SCANN	MED YE	S			
100030	RECOVERY FEE	1.0	00	21.8700	1.53	23.40
	-					
	TOTAL SERVICE/PRODUCTS			334.3100	23.41	357.72
			TOTAL CHAR			
				CREDITS		0.00
				TOTAL DUE		357.72
					=====	

UNPAID BALANCE THIS RECEIPT 357.72

Machine clean and good condition? Yes Lamp Assembly Condition Yes Decals in place and legible? Yes Fusible link installed? Yes Emergency closing of lid unobstructed? Yes Machine properly grounded? Yes Local Phone No. Sticker Affixed to Machine Yes Spent solvent meets acceptance criteria? Yes

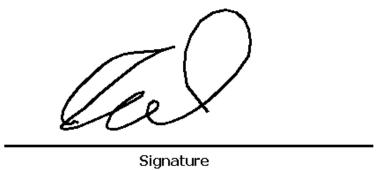
GENERATOR STATUS 0-220 lbs/month

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CUSTOMER / GENERATOR: nathan



TRANSPORTER: Joseph D Davis

SHIPPING DOCUMENT

IN THE EVENT OF AN EMERGENCY CALL **24-Hr-Number** 1-800-468-1760(Safety-Kleen) REFERENCE NBR.

78583634-1806006528

CUSTOMER#/GENERATOR: FL15674 Flagler Equipment

8418 Palm River Rd Tampa FL 33619-4314 PHONE 813-630-0077

GENERATOR USEPA ID. CESQG GENERATOR STATE

MANIFEST#: FORM CD: NR SHIP# 227082514

TRANSPORTER 1 TXR000081205 SAFETY-KLEEN SYSTEMS INC

TRANSPORTER 2

US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID)

USED CLEANING COMPOUNDS (PETROLEUM NAPHTHA) (NOT USDOT OR USEPA REGULATED) FEDERAL WASTE CODES NONE

STATE WASTE CODES NON

TOTAL CONT 2 TYPE DM WT/VOL G SKDOT 557

CNT#: 181124104740 SZ: 30 GAL/114 L CONTAINERS QTY: 14 PROF# 150012 CNT#: 181124104741 SZ: 30 GAL/114 L CONTAINERS QTY: 14 PROF# 150012

DESIGNATED FACILITY NAME/ADDRESS:

SAFETY-KLEEN SYSTEMS INC 5309 24TH AVE SOUTH TAMPA, FL 33619 TSD PHONE: 813-626-1203

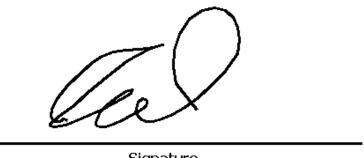
FACILITY USEPA ID NO FLD980847271

FACILITY STATE ID NO

GENERATOR STATUS 0-220 lbs/month

Miles

Signature



Signature

TRANSPORTER:	Joseph	D	Davis	
				Ì
				i

TRANSPORTER 2: