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NATIVE NAME: LANDSTAR EXPRESS AMERICA INC

**DOC LOG ID:** 46044 **CHAZ ID:** FLR000099945

CITY: JACKSONVILLE COUNTY: DUVAL

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RHWT Email Template RHWT Approvals

**Document Types** 

Document TypePrimary TypeDiscontinued OnRHWTY

**Email Addresses** 

Affiliation-IDInterest TypeEmailNative IDNative Name253560HWRwpace@landstar.comFLR000099945Landstar Express America Inc275196HWTwpace@landstar.comFLR000099945Landstar Express America Inc

**Processes** 

Document Type	Process	Date	Author	Delete
RHWT	Logged	04/19/2019	SIMMONS_JLS	×
RHWT	Completeness Review	04/19/2019	HORLICK_S	×
RHWT	Waiting for information	04/22/2019	HORLICK_S	×
RHWT	Ready for Data Entry	04/23/2019	HORLICK_S	×
RHWT	Data Entry Completed	04/23/2019	HORLICK_S	×
RHWT	Final Review	04/23/2019	HORLICK_S	×
RHWT	Booked into Oculus	04/24/2019	THURSBY_K	×

## **Comments**

Document Type	Date	Comment	Author
RHWT	04/19/2019	The ACORD policy number does not match the Certificate of Liability form on file.	HORLICK_S
RHWT	04/22/2019	Email sent to Wes Pace: In reviewing your submittal, we noticed additional information is needed. The submitted ACORD form must exactly match the Certificate of Liability Insurance form we have on file. The policy number does not match. Please submit the following by Monday, May 6 to continue processing your insurance update (see attached blank form for your convenience): ¿ Certificate of Liability Insurance Hazardous Waste Transporter and Used Oil Handler form. The documents submitted must be signed (original ¿WET² signature) by an authorized agent of the insurance provider on file with the Florida Office of Insurance Regulation. As soon as possible, please mail the required form with original (hand signed) signature to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 Let me know if you have any questions. Thanks	HORLICK_S
RHWT	04/23/2019	HWT/UOH Certificate of Liability received.	HORLICK_S

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