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## Pending Document Details

**NATIVE NAME:** ADVANCE MEDICAL SANITATION INC

**DOC LOG ID:** 42077

**CHAZ ID:** FLR000230144

**CITY:** MIAMI GARDENS

**COUNTY:** MIAMI-DADE

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### Document Types

#### Document Type

HWG  
RHWT

#### Primary Type

Y  
N

#### Discontinued On

### Email Addresses

#### Affiliation-ID

490046  
510845

#### Interest Type

HWR  
HWT

#### Email

[dramdon@aol.com](mailto:dramdon@aol.com)  
[dramdon@aol.com](mailto:dramdon@aol.com)

#### Native ID

FLR000230144  
FLR000230144

#### Native Name

Advance Medical Sanitation Inc  
Advance Medical Sanitation Inc

### Child Documents

#### DocLog-ID

[47441](#)

#### Preindex#

1778648

#### Received Date

06/13/2019

#### Action Item

Other information Change

### Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	10/15/2018	SIMMONS_JLS	✖
HWG	Post Stamp	10/19/2018	NOLAND_T	✖
HWG	Completeness Review	10/19/2018	NOLAND_T	✖
HWG	Ready for Data Entry	10/19/2018	NOLAND_T	✖
HWG	Waiting for information	12/21/2018	NOLAND_T	✖
HWG	Received Missing Information	01/16/2019	NOLAND_T	✖
HWG	Waiting for information	01/16/2019	NOLAND_T	✖
RHWT	Logged	04/29/2019	NOLAND_T	✖
RHWT	Completeness Review	04/29/2019	HORLICK_S	✖

RHWT	Waiting for information	05/01/2019	HORLICK_S	✕
RHWT	Waiting for information	07/15/2019	HORLICK_S	✕
RHWT	Waiting for information	09/19/2019	HORLICK_S	✕
RHWT	Ready for Data Entry	12/06/2019	HORLICK_S	✕
RHWT	Data Entry Completed	12/06/2019	HORLICK_S	✕
RHWT	Final Review	12/06/2019	HORLICK_S	✕
RHWT	Notification Letter Emailed	12/06/2019	HORLICK_S	✕
RHWT	Booked into Oculus 	12/09/2019	THURSBY_K	✕

## Add A New Process

Document Type	Process	Date	
Hazardous Waste Generator (HWG) ▼	Completeness Review ▼	12/09/2019	Add Process

## Comments

Document Type	Date	Comment	Author
General Comment	04/29/2019	Notification has an original signature.	NOLAND_T
HWG	12/21/2018	Correct city is Miami Gardens	NOLAND_T
HWG	12/21/2018	Sent email for Own/Opr dates	NOLAND_T
HWG	01/16/2019	Rec'd revised page 2	NOLAND_T
HWG	01/16/2019	Mentioned they want to manage pharms but didn't mark it on form-sent email	NOLAND_T
RHWT	04/29/2019	8700-12FL Notification form and HWT/UOH Certificate of Liability received.	HORLICK_S
		Email sent to Dear David Ramdon: Your EPA/DEP ID number is FLR000230144. Please use this ID number in all correspondence and on all required forms. In reviewing your submittals, we notice additional information is needed. Please see comments and questions below and submit the following to continue processing your Florida Hazardous Waste Transporter registration. Please revise the Florida Certificate of Liability Insurance Hazardous Waste Transporter and Used Oil Handler form as follows; ¿ The Certificate of Liability Insurance Hazardous Waste Transporter and Used Oil Handler must be filled out by your insurance provider. ¿ The center section under ¿coverage applies at¿ must be filled in with the EPA/DEP ID Number, Name of Insured and physical location- complete street address of insured that goes with the EPA ID number (see attached). ¿ Submit the revised insurance form hand signed (¿WET signature¿) by an authorized agent of the insurance provider. No stamps and no photo copies of the signature. (A blank Insurance form is attached for your convenience.) On the 8700-12FL Florida Notification of Regulated Waste Activity on page 3 you have marked that you wish to manage Mercury lamps or devices, but you did not mark Florida Universal Pharmaceutical Wastes. Your original email was concerning Universal Pharmaceutical Wastes so I am confused. Please clarify. On the 8700-12FL Florida Notification of Regulated Waste Activity on page 2 you have marked ¿Operating Commercial TSD¿ and on page 4 you have marked ¿HW Transfer Facility.¿ Both of these hazardous waste activities require a permit. I am copying Bheem Kothur on this email. Contact him at 850-245-8781 or via email for permit information. As soon as possible, please mail the required forms to: DEP Waste Management Division¿HWPP, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 Let me know if you have any questions or comments. Thanks	
RHWT	05/01/2019	Email sent to David Ramdon: In reviewing your submittals, we notice additional information is needed. Please submit the following to continue processing your Florida Hazardous Waste Transporter registration. Please revise the Florida Certificate of Liability Insurance Hazardous Waste Transporter and Used Oil Handler form as follows; ¿ The center section under ¿coverage applies at¿ must be filled in with the Name of Insured and physical location- complete street address of insured that goes with the EPA ID number. Item 4. Page 1 of 8700_12FL form (see attached). ¿ Submit the revised insurance form hand signed (¿WET signature¿) by an authorized agent of the insurance provider. No stamps and no photo copies of the signature. (A blank Insurance form is attached for your convenience.) As soon as possible, please mail the required forms to: DEP Waste Management Division¿HWPP, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400 Let me know if you have any questions or comments. Thanks	HORLICK_S
RHWT	07/15/2019	Phone call with David Ramdon. Verbal request for the Federal version of the 8700_12 For Pharma Transporter registration.	HORLICK_S
RHWT	09/19/2019	Pharma rule took effect before valid Cert was received. Waiting for 8700-12 EPA.	HORLICK_S
RHWT	12/06/2019	8700-12EPA Notification form received as requested on 11/12/2019. Not on doc log for HWT.	HORLICK_S
RHWT	12/06/2019	Valid updated HWT/UOH Certificate of Liability received on 8/29/2019.	HORLICK_S

## Add A New Comment

Document Type

Comments

Hazardous Waste Generator (HWG) ▼

Add Comment

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