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Florida Department of Environmental Protection



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Completed Document Details

NATIVE NAME: FLAGLER CONSTRUCTION EQUIPMENT

DOC LOG ID: 53441 **CHAZ ID:**FLR000097378

CITY: ORLANDO COUNTY: ORANGE

View email records

RUOH Email Template RHWT Email Template RHWT Approvals

Document Types

Document Type	Primary Type	Discontinued On	
RHWT	Υ		
RUOH	N		

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
458000	HWR	lalbury@flaglerce.com	FLR000097378	Flagler Construction Equipment
497020	UOP	ayork@flaglerce.com	FLR000097378	Flagler Construction Equipment

Processes

Document Type	Process	Date	Author	Delete
RHWT	Logged	01/02/2020	OUTLEY_D	×
RHWT	Completeness Review	01/02/2020	HORLICK_S	×
RHWT	Withdrawn 🎉	02/03/2020	HORLICK_S	×
RUOH	Logged	01/02/2020	OUTLEY_D	×
RUOH	Completeness Review	01/06/2020	ASHWOOD_J	×
RUOH	Waiting for information	01/06/2020	ASHWOOD_J	×
RUOH	Ready for Data Entry	02/03/2020	ASHWOOD_J	×
RUOH	Data Entry Completed	02/03/2020	ASHWOOD_J	×
RUOH	Final Review	02/03/2020	ASHWOOD_J	×
RUOH	Booked into Oculus	02/03/2020	THURSBY_K	×

Comments

Document Type	Date	Comment	Author
General Comment	01/02/2020	Acord form	OUTLEY_D
RHWT	01/03/2020	Facility is not HWT.	HORLICK_S
RUOH	01/07/2020	Email sent to Alvin York: In reviewing your submittal, we noticed additional information is needed. The ACORD form submitted does not exactly match the Insurance form on file (see attached). UO transporters are required to provide an Insurance form for the automobile liability inclusive of pollution liability. However, in the event your policies are separate then we will need you to submit two separate Insurance forms. Please submit the following by Tuesday, January 28, 2020 to continue updating our database (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 (hand signed) signature to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any questions.	ASHWOOD_J
RUOH	02/03/2020	Received original Combined HWT/UO Insurance form - Good.	ASHWOOD_J

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