



# FLORIDA DEPARTMENT OF Environmental Protection

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

**Ron DeSantis**  
Governor

**Jeanette Nuñez**  
Lt. Governor

**Noah Valenstein**  
Secretary

10/13/2020  
Brandon Barr, Sr Env Spec  
Wildwood Service Complex  
517 Independence Way  
Inverness, FL 34453

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 **Wildwood Service Complex** located at **4306 E County Road 462, Wildwood , FL 34785-8762**

**FLD029436631**

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not require a separate submission: Very Small Quantity Generator (VSQG)**.

Your facility is **currently registered** for the following activities: **Used Oil Transporter, Used Oil Transfer Facility (reg exp on 06/30/2021)**.

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://fldeploc.dep.state.fl.us/www\\_RCRA/Reports/handler\\_results.asp?epaid=FLD029436631](https://fldeploc.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLD029436631).

For further assistance, please contact me at (850) 245-8749 or email at

[Glen.Perrigan@dep.state.fl.us](mailto:Glen.Perrigan@dep.state.fl.us) .

Sincerely,

*Janet E. Ashwood*  
for

Glen Perrigan  
Environmental Manager  
Hazardous Waste Regulation Section

ME ID: 52257 , Email Address: [brandon.barr@duke-energy.com](mailto:brandon.barr@duke-energy.com)



# 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)  
FEB 24 2020

Permit: 1 Compliance  
Assessment Program

EPA ID: F L D 0 2 9 4 3 6 6 3 1

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  
Pages 3 and 4 - complete as applicable)

Mark 'X' in the correct box:  
(must choose one if a notification)

- ☐ To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, used oil activities, or PCW activities)  
☒ 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)

FL Registration(s) ☐ UW Mercury (see page 3) ☐ HW Transporter (see page 4) ☒ Used Oil (see page 4)

## 2. Facility or Business Name

Wildwood Service Complex

## 3. Facility Operator

(List additional Operators in the comments section)

Name of Operator: Duke Energy Florida, LLC. Date became Operator: 01 / 20 / 1968  
Street or P.O. Box: 4306 E County Rd 462 Phone Number: 321-402-8671  
City or Town: Wildwood State: FL Zip Code: 34785 Country (if not USA)  
Operator Type: ☐ Private ☐ Federal ☐ Municipal ☐ State ☐ County ☒ Other Electric Utility

## 4. Facility Physical Location Information (No P.O. Boxes)

☒ Same address as #3 above or:

Physical Street Address: 4306 E County Rd 462 ☐ Vessel  
City or Town: Wildwood State: FL Zip Code: 34785  
County: Sumter Country (if not USA)

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

A. 12 | 2 | 1 | 1 | 2 | 2 (required) B.   
C.   
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)

## 7. Facility or Business RCRA Contact Person

☐ Same address as #\_\_ above or:

First Name: Brandon Last Name: Barr Title: Sr Environmental Specialist  
Phone Number: 321-402-8671 Extension: E-Mail: Brandon.Barr@Duke-Energy.com Fax:  
Street or P.O. Box: 517 Independence Hwy  
City or Town: Inverness State: FL Zip Code: 34453 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: Duke Energy Florida, LLC. Date became Owner: 01 / 20 / 1968  
Street or P.O. Box: 299 First Avenue North Phone Number:  
City or Town: St. Petersburg State: FL Zip Code: 33701 Country (if not USA)  
Owner Type: ☐ Private ☐ Federal ☐ Municipal ☐ State ☐ County ☒ Other Electric Utility

**Universal Waste Notification and Mercury Transporter/Handler Registration**

EPA ID No. FLD029436631

**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 lb) or more of any combination of UW accumulated (at any one time)**

Accumulates: ☐ a. UW Batteries ☐ b. Pesticides ☐ c. Pharmaceuticals  
☐ d. Mercury Containing Devices ☐ e. Mercury Containing 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 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 Health [DOH])

**C. Florida 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.

**(1) This form is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-hire Activities**

- ☐ First time registering ☐ Renewal ☐ One-time \$1,000 fee for Mercury for-hire first time LQH registration is attached

- ☐ For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices  
☐ For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices  
☐ Mercury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler  
☐ Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler

Annual  
Registration  
Required

- ☐ Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler  
☐ Mercury-Containing Lamps LQH = 2,000 kg (4,400 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)**

- ☐ First 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)]

**(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 responsibility [Rule 62-730.171(3)(a)3., F.A.C.]
- ☐ A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.]
- ☐ A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]
- ☐ A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.]
- ☐ A map or maps of the transfer facility [Rule 62-730.171(3)(a)7., F.A.C.]

**(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.
- 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.).

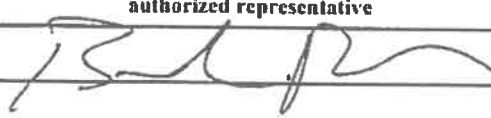
☐ The used oil annual report is attached ☐ Evidence of Liability Insurance pursuant to 62-710.600(2)(e), F.A.C. is attached.

**16. Comments (attach a page if more space is needed):**

No comments.

**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 familiar with the applicable Florida and Federal laws and rules governing used oil transportation and have an annual and new employee training program in place covering the applicable used oil rules. Evidence of financial responsibility 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 Title	Used Oil	Date Signed (mm-dd-yyyy)
	Brandon Barr, Sr Environmental Specialist	<input type="checkbox"/>	3-26-2018
		<input type="checkbox"/>	
		<input type="checkbox"/>	

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

(Name of person completing this form)

(Phone Number)

(E-mail Address)