

For reporting period from January 1

## Department of Environmental Protection

Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

DEP Form #	62-737.900(3)
Form Title	Mercury Recovery and Mercury
_	Reclamation Facility Annual
Effective Date	May 20, 1998 EIVED orida Department of Environmen
	Protection

\*, through December 31, 2020

MAR 03 2021

Mercury Recovery and Mercury Permitting & Compliance Assistance Program
Reclamation Facility Annual Report and Instructions
For Calendar Year 2020

\*If other than January 1, explain in "Other Notes or Explanations," on Page 3.

to	Pursuant to Rule 62-737.600, Florida Administrative Code, mercury recovery and mercury reclamation facilities permitted operate in the state of Florida must report their activities to the Department using this form. See instructions on pages 4-6.
Par	rt I: Business Information:
1.	Business name: Veolia ES Technical Solutions, L.L.C. EPA ID Number: FL0000207449
2.	Mailing address: 342 Marpan Lane, Tallahassee, FL 32305
	Telephone No.:(850 ) 877-8299
3.	Street Address: 342 Marpan Lane, Tallahassee, FL 32305
4.	Name of person preparing report (please print): Wayne Bulsiewicz
	Title EHS Manager Telephone No.:(602 ) 233-2955
	t II: Type of Facility: (Check one only. Submit a separate annual report for each type of facility your business erates.)
	➤ Mercury Recovery
Par	t III: Materials Flow: Complete both Table 1 on Page 2 and Table 2 on Page 3.
Par	t VI: Certification:
To acc	the best of my knowledge and belief, I certify under penalty of perjury that the information provided in this report is true, curate and correct. I have attached all documents that are required.
Wa	ayne Bulsiewicz 2/27/2021
	Print Name of Authorized Agent Signature of Authorized Agent Date

Mail completed form to:
Florida Department of Environmental Protection
Hazardous Waste Management Section MS 4555
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

Table 1: Materials Flow: All quantities in Kilograms. If you report quantities on lines 10, 18, or 29, use the lines marked "Specify" below the table to describe the

	Material	Method	Beginning	Inventory	Quantity	Received		rom ut of	Quantity	Shipped	Destination Code	Ending	Inventory
			Number	Kilogramss	Number	Kilograms	St	ate	Number	Kilograms		Number	Kilograms
1	LAMPS				111-11							*	
2	Straight Fluorescent 4 Ft.	2	900	204	2,117,183	480,169	78	%	0			1,300	295
3	Straight Fluorescent 8 Ft.	2	600	272	110,519	50,131	79	%	0			0	0
4	Straight Fluorescent Other Lengths	2	0	0	19,979	3,329	82	%	0			0	0
5	Total Straight Fluorescent	2	1,500	476	2,247,681	533,628	78		0			1,300	295
6	Irregular Fluorescent U , Circular	2	0	0	79,210	17,965	82	_	0			0	0
7	Irregular Fluorescent Compact	2	1,700	193	27,288	87,098	77		0			3,170	359
8	Total Irregular Fluorescent	2	1,700	193	709,498	105.062	79		0			3170	359
9	High Intensity Discharge (HID)	2	1,500	680	764,493	346,480	71	%	0			1,100	499
10	Other Whole Lamps (Specify Below)	2	125	14	14,181	2,294	B7		0			0	0
11	Unintentionally Broken Lamps	7		0		4.398	18	%					0
12	Total Lamps		4,825	1,363	3,732,853	991,862	75	%	0			5,570	1,153
13	Intentionally Crushed Lamps			499		75,817	28	%				2,010	404
14	DEVICES			100			2.0	70					707
15	Thermostats			1			Ť.	%		*		V	
16	Mercury Column Devices							%					
17	Other Relays/Switches/Gauges							%					
18	Other Devices (Specify Below)						1	%					
19	Unintentionally Broken Devices			-			-	%					
20	Total Devices							%					
21	Intentionally Crushed Devices		A 1 1 1 1 1					%					
22	MISCELLANEOUS							70					
23	Separated Ampoules			0		0		%		0			0
24	Separated HID Arc Tubes			726		0	0	%		0			340
25	Liquid Mercury					-	<u> </u>	%					340
26	Separated Glass			18,643		0		%	11 de 21	557 220	14		10.000
27	Separated Aluminum			125		0	_	%	HE SE	557,220	12		16,036
28	Phosphor Powder			2,223			37	%		50,341			23 1,837
29	Other (Specify Below)			2,981		0	- 1	%		50,732	12, 14 3,14		
30	Total Materials			26,560		1,118,020	70	%	12 TO 18	658,293	3,14		78 19,871

Specify: Describe materials listed in Table 1 above on Line 10, Line 18, and Line 29. For example, laboratory test equipment lamps, filter material, floor sweepings, cardboard, plastic, personal protective equipment, etc.

Line 10 Neon, UV, incandescent, led lamps

her Notes or Explanations: Use this space for other notes or explanations needed to clarify what you report in Table 1. Pleacify which line and column the note or explanation applies to. For example: "Line 27, Destination - Our facility shipped 20	ise
of separated lamp glass to an in-state recycling facility and 25 Kg of separated lamp glass to an in-state mercury reclamation	,000
ility because the mercury content exceeded 3 ppm." Attach additional sheets if necessary.	ı

**Table 2: Rejected Materials:** Use this space to list the descriptions, total amounts and disposition of <u>all incoming</u> materials which were <u>rejected</u> by your facility <u>and all outgoing</u> materials which were <u>rejected</u> by the destination facility. Attach additional sheets if necessary.

Material None	Incoming (Kg)	Outgoing (Kg)	Reason Rejected	Disposition
None				
				1



For reporting period from \_\_\_\_\_1

## Department of Environmental Protection

Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

62-737.900(3)

Form Title

Mercury Recovery and Mercury

Reclamation Facility Annual

Effective Date

May 20, 1998

\*, through December 31, 2020

# Mercury Recovery and Mercury Reclamation Facility Annual Report and Instructions

For Calendar Year <sup>2020</sup>

\*If other than January 1, explain in "Other Notes or Explanations," on Page 3.

to	Pursuant to Rule 62-737.600, Florida Administrative Code, mercury recovery and mercury reclamation facilities permitted operate in the state of Florida must report their activities to the Department using this form. See instructions on pages 4-6.
Pai	rt I: Business Information:
1.	Business name: Veolia ES Technical Solutions, L.L.C. EPA ID Number: FL0000207449
2.	Mailing address: 342 Marpan Lane, Tallahassee, FL 32305  Telephone No. (850 ) 877-8299
3.	Telephone No.:(850 ) 877-8299  Street Address: 342 Marpan Lane, Tallahassee, FL 32305
4.	Name of person preparing report (please print): Wayne Bulsiewicz
	Title EHS Manager Telephone No.:(602 ) 233-2955
	t II: Type of Facility: (Check one only. Submit a separate annual report for each type of facility your business erates.)
	☐ Mercury Recovery   Mercury Reclamation
Par	t III: Materials Flow: Complete both Table 1 on Page 2 and Table 2 on Page 3.
Раг	t VI: Certification:
To acc	the best of my knowledge and belief, I certify under penalty of perjury that the information provided in this report is true, surate and correct. I have attached all documents that are required.
Wa	ayne Bulsiewicz 2/27/2021
	Print Name of Authorized Agent Signature of Authorized Agent Date

Mail completed form to: Florida Department of Environmental Protection Hazardous Waste Management Section MS 4555 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Table 1: Materials Flow: All quantities in Kilograms. If you report quantities on lines 10, 18, or 29, use the lines marked "Specify" below the table to describe the material. Use the codes on page 5 to complete the "Destination Code" column.

	Material	Method	Beginning	Inventory	Quantity	Received	From Out of	Quantity	Shipped	Destination Code	Ending	Inventory
			Number	Kilogramss	Number	Kitograms	State	Number	Kilograms		Number	Kilograms
1	LAMPS					1000		70.77	1	1000	- 111	1 2
2	Straight Fluorescent 4 Ft.						%					
3	Straight Fluorescent 8 Ft.						%					
4	Straight Fluorescent Other Lengths						%					
5	Total Straight Fluorescent						%					
6	Irregular Fluorescent U, Circular						%					
7	Irregular Fluorescent Compact						%					
8	Total Irregular Fluorescent						%					
9	High Intensity Discharge (HID)						%					
10	Other Whole Lamps (Specify Below)						%					
11	Unintentionally Broken Lamps	State of the last	100				%					
12	Total Lamps						%					
13	Intentionally Crushed Lamps						%	DECK K				
14	DEVICES	2 L					1118		7 30			S - 2
15	Thermostats						%					
16	Mercury Column Devices						%					
17	Other Relays/Switches/Gauges	157 14			10000		%					
18	Other Devices (Specify Below)			00		46,016	99 %		0			99
19	Unintentionally Broken Devices			0		0	0 %					0
20	Total Devices			00		46,016	99 %		0			00
21	Intentionally Crushed Devices			0	17 - 17	0	0 %			i i		0
22	MISCELLANEOUS									73		100 LU
23	Separated Ampoules			0		0	0 %					0
24	Separated HID Arc Tubes			0		0	0 %		0	12		0
25	Liquid Mercury			0		1	p %		00	12		112
26	Separated Glass						%					
27	Separated Aluminum						%					
28	Phosphor Powder			9,525		50,341	37 %					3,062
29	Other (Specify Below)			0			0 %		23,944	11, 14, 15		0
30	Total Materials			9.598			53 %		23,944			3,273

Specify: Describe materials listed in Table 1 above on Line 10, Line 18, and Line 29. For example, laboratory test equipment lamps, filter material, floor sweepings, cardboard, plastic, personal protective equipment, etc.

Line 10

Line 18 Includes all MCMA received by the facility (thermometers, thermostats, switches) and debris (non-site generated) and amalgam

Line 29 PPE and Debris generated while processing Mercury containing devices and condensate water from retort operations

Other Notes or Explanations: Use this space for other notes or explanations needed to clarify what you report in Table 1. Please specify which line and column the note or explanation applies to. For example: "Line 27, Destination - Our facility shipped 20,000
Kg of separated lamp glass to an in-state recycling facility and 25 Kg of separated lamp glass to an in-state mercury reclamation
facility because the mercury content exceeded 3 ppm." Attach additional sheets if necessary.

**Table 2: Rejected Materials:** Use this space to list the descriptions, total amounts and disposition of <u>all incoming</u> materials which were <u>rejected</u> by your facility <u>and all outgoing</u> materials which were <u>rejected</u> by the destination facility. Attach additional sheets if necessary.

Material	Incoming (Kg)	Outgoing (Kg)	Reason Rejected	Disposition
Material None			•	
	-			

# Instructions for Completing the Volume Reduction, Mercury Recovery and Mercury Reclamation Facility Annual Report

Use this form to comply with the annual reporting requirements for volume reduction, mercury recovery, and mercury reclamation facilities found in Rule 62-737.800, Florida Administrative Code.

#### Who Must Report?

- 1. Mercury Recovery Facilities permitted by the State of Florida as defined in 62-737.200, F.A.C., as "a facility where operations or processes are performed or equipment is used to receive and process spent mercury-containing lamps or devices for the purpose of crushing or dismantling and separating the lamps or devices in a manner as to produce separated, individual recyclable components such as glass and scrap metal; and mercury-containing phosphor powder, ampoules or other mercury-containing residuals which will be processed at a mercury reclamation facility for the purpose of reclamation of the mercury."
- 2. Mercury Reclamation Facilities permitted by the State of Florida as defined in 62-737.200, F.A.C., as "a facility where operations or processes are performed or equipment is used to receive and recapture mercury from spent lamps, mercury-containing devices, mercury-containing materials or residuals, or pourable, commodity grade mercury materials; and that can demonstrate, using a quality control plan approved in acordance with Chapter 62-160, F.A.C., and an EPA analytical test method for determining the total mercury content of a waste material, an effective reclamation rate of at least 99% of the mercury introduced into its process or a resulting total mercury concentration remaining in the processed material that is below the method detection limit; and by which a commercial grade of mercury is produced for recycling."

#### When Are Reports Due?

Reports are due by March 1 of each year for the preceding calendar year.

#### Part I: Business Information

**Business Name -** Give the business name and specific site name (if business has more than one site) for which you are reporting.

EPA ID Number - Your facility's 12 alpha/numeric character EPA ID Number. Your EPA ID number will remain the same from year to year.

Street Address - Actual physical location address, not P.O. Box or Route Number.

#### Part II: Type of Facility

<u>Check only one box.</u> If you operate more than one type of facility, you must submit <u>a separate annual report for each facility</u>. See your facility's operating permit(s) for the type(s) of facility(ies).

#### Part III: Materials Flow and Rejected Materials

#### Table 1: Materials Flow (Page 2).

#### Material (Column):

Line 1: Lines 2 through 13 relate to mercury-containing lamps only.

Line 2: Report only unbroken straight lamps which are 4 feet long here.

Line 3: Report only unbroken straight lamps which are 8 feet long here.

Line 4: Report all unbroken straight lamps not 4 feet or 8 feet long here (2 feet, 6 feet, 7 feet, 9 feet, 10 feet, etc.).

Line 5: Total of Lines 2 through 4.

Line 6: Report U-shaped and circular fluorescent lamps here.

Line 7: Report all types of compact fluorescent lamps here.

Line 8: Total of Lines 6 through 7.

Line 9: Report all types of high intensity discharge (HID) lamps (mercury vapor, metal halide, high pressure sodium, etc.).

Line 10: Report any mercury-containing lamps which do not fit into any of the above categories and describe them in "Specify" below Table 1. This may include such lamps as neon, special purpose lamps for diagnostic or testing equipment, etc. Do not report incandescent or other lamps which do not contain mercury on this line. Report those types of non mercury-containing lamps on Line 30, "Other (Specify)" and describe them in "Specify" below Table 1.

Line 11: Report <u>all types</u> of mercury-containing lamps which were found to be broken in the packaging containers which your facility received or which were unintentionally or accidentally broken at your facility between receipt and introduction into your process. Since it may sometimes be difficult to get an exact count on how many lamps have been broken when several or many lamps in a packaging container arrive broken, provide your best estimate.

Line 12: Total of Lines 5, 8, 9, 10, and 11.

Line 13: Report the quantity of lamps which were intentionally crushed for volume reduction or other purposes.

Line 14: Lines 15 through 21 relate to mercury-containing devices only.

Line 15: Report only thermostats which contain mercury. Do not report thermostats which do not contain mercury on this line. Report non mercury-containing thermostats such as bimetal, solid state, etc. on Line 29, "Other (Specify)" and describe them in "Specify" below Table 1.

Line 16: Report all types of devices which use a column of mercury such as thermometers, manometers, sphygmomanometers, etc.

Line 17: Report <u>all types</u> of mercury wetted relays, pressure control devices, and other switches which use ampoules containing liquid mercury. This may include such things as shoes with mercury switches which control heel lights.

Line 18: Report any mercury-containing devices which do not fit into any of the above categories and describe them in "Specify" below Table 1.

Line 19: Report <u>all types</u> of mercury-containing devices which were found to be broken in the packaging containers which your facility received or which were unintentionally or accidentally broken at your facility between receipt and introduction into your process. Since it may sometimes be difficult to get an exact count on how many devices have been broken when several or many devices in a packaging container arrive broken, provide your best estimate.

Line 20: Total of Lines 15 through 19.

Line 21: Report the quantity of devices which were intentionally crushed for volume reduction or other purposes.

Line 22: Lines 23 through 30 apply to other mercury-containing and non mercury-containing materials which do not fit into any other categories under "LAMPS" or "DEVICES".

Line 23: Report <u>all types</u> of unbroken ampoules (glass, plastic, metal, etc.) containing liquid mercury which have been separated from the devices which contain the ampoule.

Line 24: Report all types of unbroken arc tubes which have been separated from HID lamps.

Line 25: Report <u>all</u> liquid mercury not contained in lamps, devices, separated ampoules, or separated HID arc tubes. This would include liquid mercury which has been separated from lamps, devices, ampoules, or arc tubes; or which has been received or shipped in any other container (bottle, metal flask, etc.)

Line 26: Report all glass regardless of its mercury content which has been separated from lamps or devices.

Line 27: Report all aluminum regardless of its mercury content which has been separated from lamps or devices.

Line 28: Report <u>all</u> phosphor powder regardless of its mercury content which has been separated from lamps or devices.

Line 29: Report any materials which do not fit into any of the above categories and describe them in "Specify" below Table 1.

Line 30: Total of Lines 12, 13, 20, 21, and 23 through 29.

Method (Column): Use one of the following methods to obtain the quantities reported in the "Kilograms" subcolumns of "Beginning Inventory", "Quantity Received", Quantity Shipped", and "Ending Inventory" columns.

01 Actual weight including containers

02 An average unit weight based upon manufacturers data

03 An average unit weight based upon a statistically significant sample of your materials

04 An average unit weight based upon another method approved by the Department

Report the code number corresponding to the method used to obtain the quantities reported for each material. If you use more than one method for obtaining the quantity of a particular material, please explain in "Other Notes and Explanations" on page 3.

Beginning Inventory (Column): Report both number of units (in "Number" column) and quantities in kilograms (in "Kilograms" column) of all materials in your inventory on site at your facility as of January 1 of the reporting year.

Quantity Received (Column): Report both number of units (in "Number" column) and quantities in kilograms (in "Kilograms" column) of all materials received by your facility. In the "From Out of State" column, report the percentage of materials (by either number or kilograms) received from out of state generators.

Quantity Shipped (Column): Report both number of units (in "Number" column) and quantities in kilograms (in "Kilograms" column) of all materials shipped from your facility.

Destination Code (Column): Report the destination of all shipped materials using the following codes:

- 01 In-State Mercury Reclamation Facilities
- 02 In-State Mercury Recovery Facilities
- 03 Other In-State Recycling Facilities or Brokers
- 04 In-State Solid Waste Landfills
- 06 Other In-State Facilities (Specify Type)

- 11 Out-of-State Mercury Reclamation Facilities
- 12 Out-of-State Mercury Recovery Facilities
- 13 Other Out-of-State Recycling Facilities or Brokers
- 14 Out-of-State Solid Waste Landfills
- 15 Out-of-State Hazardous Waste Landfills
- 16 Other Out-of-State Facilities (Specify Type)

Page 5 of 6