

## FLORIDA DEPARTMENT OF Environmental Protection

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

Jeanette Nuñez Lt. Governor

Shawn Hamilton Secretary

09/22/2022 Josh Johnson, Manager Lamp Sales Unlimited Inc 1271 LaQuinta Dr Unit # 13 Orlando, FL 32809

The Florida Department of Environmental Protection has reviewed your submittal for a hazardous waste DEP/EPA Identification Number or status/information change.

Based on the information received, you have been issued the following number or reports for Lamp Sales Unlimited Inc located at 1271 La Quinta Dr Unit #13, Orlando, FL 32809-7713

DEP/EPA Identification Number: FLR000142281

Your facility status is the following: Non-Handler of Hazardous Waste, Universal Waste - Lamps.

Florida Administrative Code 62-730 requires all persons who generate, transport, recycle, store, or dispose of hazardous waste to notify the department of their hazardous waste activities. You are required to renotify on form 8700-12FL when there are changes in your operations which would affect your status, activity or contact information. Additional hazardous waste information including the 8700-12FL form can be found at:

 $\underline{https://floridadep.gov/waste/permitting-compliance-assistance/content/hazardous-waste-management-main-page}.$ 

Please note that pending program registrations, certifications, or permits will be sent to you separately. **To review the details of your status**, visit:

 $\underline{\text{https://fldeploc.dep.state.fl.us/www}} \ \ \underline{\text{RCRA/Reports/handler}} \ \ \underline{\text{results.asp?epaid=FLR000142281}}.$ 

For further assistance, please contact me at (850) 245-8707 or email me at <a href="mailto:left.Gregg@dep.state.fl.us">left.Gregg@dep.state.fl.us</a>.

Sincerely,

Jeff Gregg

Environmental Manager

Waste Compliance Assistance Program

ME ID: 81763, Email Address: Josh@lampsales.org

## RECEIVED Florida Department of Environmental



## 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



Permitting & Compliance of Assistance Programs

EB 14 AM 11:06

EPAID: FLROOC	1422	281	Please	e use the instruction	ons document to	complete this form.
1. Reason for Submittal: (all submitters must complete pages 1 and 2 and sign page 7, Pages 3 through 6 - complete as applicable)						
Mark 'X' in the correct box*:  To obtain a new EPA ID number (for hazardous waste, universal waste, used oil activities, or PCW activities).						
(must choose one To provide updated information for an EPA ID number (to update status and facility identification information).					iformation).	
if a notification) To provide the	To provide the final information for an EPA ID number (closing), (see instructions—must complete pages 1, 2, 3, 7)					
To obtain new or updating an EPA ID number for conducting Electronic Manifest Broker activities.						
Submitting nev	Submitting new or revised notification for Part A for permitted facilities.					
FL Registration(s) UW Mercu	ry (see page 4)	□н₩	/ Transpo	orter (see page 5)	Used C	Oil (see page 6)
2. Facility or Business Name:*						
LAMP SALE	S UNLIN	IITED	, in	ic,		
3. Facility Physical Location Information:	(No P.O. Boxes)					
Physical Street Address*:						Vessel
City or Town:	INTA DR	IVE . (	<u> </u>	T 13 I State:	Zip Code:	
ORLANDO				FL	328	09
Country (if not USA)*:						
4. Facility or Business Mailing Address:						
Same address as #_3above or*:						
City or Town*:	S	tate*:	Zip/Po:	stal Code*:	Country (if not	ŪSA):
5. Facility North American Industry Classi	fication System (NA	AICS) Code(s)	)*: (at le	east 5 digits)		
A. 1412131619101 (required)			B.			
c.	D.	D.				
6. Facility or Business RCRA Contact Pers	on: Same addres	s as #abov	e or:			
First Name*: JOSH	SH Last Name*: Title*: BRANCH MANAGER  7-859-1515 Extension*: Fax*: 407 859 2423		NAGER			
Phone Number*:   Extension*:				Fax*: 407	859	2423
E-Mail*:						
Street or P.O. Box (or same address box is ch	ecked)*:					1
City or Town*:		State*:		Zip Code*;	Country (if	not USA):

CARLES OF THE COMMON CONTROL OF THE	arosereta kataleria adalluntur ett. Vitta alabarita	AMAZINE COA ID No. 1			
RCRA Hazardous Waste Status Notification or Out	of Business Notification	On EPAID NO.	000142281		
7. Real Property (FL Land) Owner of the Facility's Physic	cal Location (List additions				
Name of Owner*:		Date became Owner*:	12/20/2021		
COFE LA QUINTA LLC		New Owner n			
Street or P.O. Box (or same address box is checked)*: 706	Grande Notional	Phone Number*:			
		Zip.Code*:32819	Country (if not USA):		
City or Town*: Or lando # 34 E-Mail*: RWHITLEY @ WATERMARK Flo	rida. com				
Owner Type*: Rrivate Federal Municipal		Other			
Comments:			The state of the s		
8. Facility Operator (List additional Operators in the comments so	ection). Same address as	above or:			
Name of Operator*:		Date became Operator*	*. /		
•		New Operator			
Street or P.O. Box (or same address box is checked)*:		Phone Number*:			
City or Town*:	State*:	Zip Code*:	Country (if not USA):		
E-Mail*:	L		<u> </u>		
	State County	Other	Marie Control of the		
9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):  (1) Generator of Hazardous Waste  Yes No (This does not include Universal Waste or Used Oil)  If YES, Choose only one of the following three categories.  a. Large Quantity Generator (LQG):  Generates in any calendar month (includes quantities imported by importer site) 1,000 kilograms or greater per month (kg/mo) (2,200 lbs/mo.) of non-acute hazardous waste; or  Generates in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs/mo) of acute hazardous waste; or  Generates in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lb/mo) of acute hazardous spill cleanup material.  b. Small Quantity Generator (SQG):  Generates in any calendar month greater than 100kg/mo but less than 1,000 kg/mo (>220 to <2,200 lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste and/or no more than 100 kg (220 lbs) of any acute hazardous spill					
cleanup material.  c. Very Small Quantity Generator (VSQG):  - Generates in any calendar month 100 kg/mo or less (220 lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute					
hazardous waste.					
In addition, indicate other generator activities that apply  d. Short-Term Generator (one-time, not on-going)  e. Mixed Waste (hazardous and radioactive) Generator  f. United States Importer of hazardous waste  g. LQG notifying of VSQG Hazardous Waste Under C  h. Episodic: Not lasting more than 60 days: SQG 1  i. Electronic Manifest Broker, as defined in 40 CFR 26	Control of the Same Person LQG (Addendum B Requir	ired)			
transmit an electronic manifest under a contractual relationship with a hazardous waste generator.					

RCRA Hazardous Waste Status Notification or Out of Business Notification 4 FLR 000142281								
9. R	9. RCRA Hazardous Waste Activities at this Facility continued: (Mark 'X' in all that apply):							
				<u> </u>				
l		gh 9, mark 'X' in a	• • •	Vanta (at manu Faniti	tre Chagge Onto One	a) Matai A hagandara	wasta namit may ba	
{2	(2) Treater, Storer, or Disposer of Hazardous Waste (at your facility—Choose Only One) Note: A hazardous waste permit may be							
	required for this activity.							
	a. Operating Commercial TSD  b. Operating Non-Commercial TSD							
	_	_		tivo Action Parciti	or Order (HSWA, etc.	1		
(3)		er of Hazardous W			Just, K. W. Cit.) 1901.0 It	,		
(3)	Specify:		Non-Con	7.7				
	Specify:	Stores prior to	o recycling [	Does not store prid for storage prior to re	or to recycling.			
(4)	Exemp	t Boiler and/or Inc	lustrial Furnac	e e				
		Small Quantity On-		**				
( <b>r</b> )		Smelting, Melting,	_	•	o edor	87 68646		
(5)	Choos	e this management.	activity ONLY	if you attach	Generated at Other  R the authorization yo	r actitues u received from FDEI	).	
(6)		es Hazardous Was		e				
(7)		ground Injection C		_				
(8)	(8) Recognized Trader— Mark all that apply							
	a. Importer b. Exporter							
(9)	Import	er/ Exporter of Sp	ent Lead-Acid	Batteries (SLABs)	under 40 CFR subp	art G-Mark all that	apply	
	<del></del> ,	Importer						
10 V	b. Exporter						Lat	
	10. Waste Codes for Federally Regulated Hazardous Wastes*: List the waste codes of the Federal hazardous wastes handled at your facility. List them in the order they are presented in the regulations (e.g., D001, D003, F007, K019, P012, U112).						· ut	
	ardous waste t			y or usually transpo	rted. Use comments of		f more spaces are needed	
I		2	3	4	5	6	7	l
8	·	9	10	11	12	13	14	$\dashv$
v				1		13	, T	ı
15		16	17	18	19	20	21	$\dashv$
								ı
11. Other Status Changes (If no longer handling waste or closed, items 9 and 10 should be left blank and items 12-16 skipped):								
		mulation Area (CA						ᅱ
Central Accumulation Area (CAA)								
Facility Closed (Complete this section only if all business activities at this facility have ceased.)								
(B) Closure Dates:								
(1) Expected closure date(date in mm/dd/yyyy)					1			
(2) Requesting new closure date(date in mm/dd/yyyy)				1				
(3) Date of closure:(date in mm/dd/yyyy)								
	a. In compliance with the closure performance standards in 40 CFR 262.17(a)(8)							
b. Not in compliance with the closure performance standards in 40 CFR 262.17(a)(8)								
(C)	Property Ta	x Default 🗌		( <b>D</b> )	Petition for Bankr	uptcy Protection 🔲		- 1

Universal Waste Notification and Mercury Transporter/Handler Registration EPA ID No.:	142281				
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 UW accumulated (at any one time)	f any combination				
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 notification					
Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time	e)				
Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UP one time)	W) accumulated (at any				
Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be permitted with the Florida Department of Bu Regulation [DBPR])	siness and Professional				
Florida Universal Pharmaceutical Waste (UPW) Transporter					
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.,F.A.C. (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 Mercury Transporter/Handler for-hire Activities    Stannual Registration					
For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices					
For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual				
Mercury-Containing Devices (thermostats, etc.) SQH = less than 100 kg accumulated by for-hire handler	Registration Required				
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	,				
Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration +				
Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)				
(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity)  Ist Annual Registration Annual Renewal	Annual Registration Required				
Briefly Describe your Universal Waste Activities:  Pick up and Store reycle! bulbs and mercury containing discusses.  Items are picked up from wour location by certified recycles of hazardous waste facility.  3 Other State Regulated Waste Activities: Petrology Containing Discussion of Towns 100 710 510 510 510 510 510 510 510 510 510 5					
3. Other State Regulated Waste Activities: Petroleum Contact Water (PCW)  Recovery  Transpo Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62]	ort [62-740 F.A.C.]				

Hazardous Waste Transporter and Academic Laboratories EPA ID No. 2000 142 28					
14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities)					
Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration. Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required as part of this registration. Transporters and transfer facilities may only begin operations after receiving approval from the Department.					
Generators who transport waste only within the boundaries of their facility should NOT register in box 14.A below.					
A. HW Transporter Registration Information (must be completed annually and when this information changes)					
This form is: Initial Registration Renewal Notification of changes Cancel Registration					
1. For own waste only					
2. For commercial purposes					
3. Both commercial and own waste					
4. Transportation Mode Air Rail Highway Water Other - specify					
B. HW Transfer Facility Registration Information (must be completed annually and when this information changes)					
This facility is a Hazardous Waste Transfer Facility: (as listed in Item 3) Storage Volume					
This form is: I Initial Registration Renewal Notification of changes Cancel Registration					
Note: Hazardous Waste transfer facilities must comply with the requirements of Rule 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.					
The Transfer Facility records required under the provisions of Rule 62-730.171(6), F.A.C., are kept at (check one):					
Our mailing (business) address  The site (facility) address					
Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer Facility:					
Please see 14.C for additional items to be submitted for registration of a Hazardous Waste Transfer Facility [Rule 62-730, 171(3).					
Florida Administrative Code (F.A.C.)]:					
C. 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 facility 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 facility'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. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K					
1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories					
See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:					
a. College or University					
b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university					
c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university					
2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories					

Used Oil and Hazardous Secondary Material EPA ID No. 200 142 78				
技術機能はない。例如は他のでは、他のでは、他のでは、他のでは、他のでは、他のでは、他のでは、他のでは				
16. Used Oil and Used Oil Filter Activities: (Mark 'X' and complete all that apply)				
Transporters (exemptions in 40 CFR 279.40(a)(1-4)), transfer facilities, processors, off-specification burners, and/or marketers must annually register with the Department using this form. An annual \$100 registration fee is required for all, except used oil (UO) Processors and collection centers.				
This form is: Initial Registration Renewal Notification of changes Cancel Registration				
If applicable, a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection is enclosed.  UO Collection Centers must check 16.(2) of this form (not as a registration).				
(1) Used Oil Transporter - mark 'X' in all that apply: (occurring in Florida)				
a. Transporter (off-site) and noncontiguous locations				
b. Transfer Facility				
(2) Collection Center (From businesses, no more than 55 gal per shipment)				
(3) Used Oil Processor (A permit is required.)				
(4) Used Oil Re-refiner (A permit is required.)				
(5) Off-Specification Used Oil Burner Utility Boiler Industrial Boiler Industrial Furnace				
(6) Used Oil Fuel Marketer On-Spec Off-Spec				
(7) Used Oil Filter Management (must annually register)				
a. Transporter				
L b. Transfer Facility				
C. Processor (Annual Report Required)				
L d. End User (see instructions for definition)  (8) The records required under the provisions of Rule 62-710.510, FAC, are kept at (check one):				
Our mailing (business) address (as listed in Item 4)				
The site (facility) address (as listed in Item 3)				
(9) Used Oil Transporters: (Exemptions in 40 CFR 279.40(a)(1-4))				
<ul> <li>ALL registered UO transporters must submit an annual report except generators transporting UO from noncontiguous operations within their own company.</li> </ul>				
<ul> <li>UO transporters transporting off-site over public highways only within their own company must submit proof of insurance.</li> </ul>				
<ul> <li>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 19 (except those exempted by Rule 62-710.600(1), F.A.C.).</li> </ul>				
The used oil annual report is attached Evidence of Liability Insurance pursuant to 62-710.600(2)(e)., F.A.C. is attached.				
17. Notification of Hazardous Secondary Material (HSM) Activity				
(1) Notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 260.30, 40 CFR 261.4(a)(23), (24), or (27). (Addendum C Required)				
(2) Notifying under 40 CFR 260.43(a)(4)(iii) that the product of your recycling process has levels of hazardous constituents that are not comparable to or unable to be compared to a legitimate product or intermediate but that the recycling is still legitimate.  (Addendum C Required)				

Required signature page set a fine et a compart was the	EPA ID No. 1900 142281			
18. Comments (attach a page if more space is needed):				
19. 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 known violations.				
	applicable Florida and Federal laws and rules governing used oil transporce covering the applicable used oil rules. Evidence of financial responsibility Insurance, DEP form 62-730.900(5)(a), F.A.C			
Signature of owner, operator, or an authorized representative:	Date Signed (mm-dd-yyyy):			
Slaufall	1/20/2022			
Print Name (First, Middle Initial, Last):  Sear F Valliere	Title:			
Organization: Lamp Sales Unlimited INC	Used Oil			
Email: Scan@lampsales.org				
Signature of owner, operator, or an authorized representative:	Date Signed (mm-dd-yyyy):			
Print Name (First, Middle Initial, Last):	Title:			
Organization:	Used Oil			
Email:				
If the person that filled in this form is not the Facility Contact or Ope	erator, please complete the information below:			
Name of person completing this form) (Phone Number	(Famail Address)			