



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blairstone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

February 06, 2008

William Parke  
Cliff Berry Inc - Port Everglades Facility  
PO Box 13079  
Fort Lauderdale, FL 33316-100

Re: Florida Hazardous Waste Transporter Approval

Dear William Parke:

Your Florida Hazardous Waste Transporter Approval Certificate is enclosed. The terms and conditions of approval are specified in Sections 62-730.170 and 62-730.171, Florida Administrative Code(FAC), a copy of which is enclosed for your reference. Please note the following.

1. You must demonstrate proof of liability coverage on an annual basis, even if your insurance policy is issued on a multi-year basis. If no changes in status or insurance coverage have occurred, you can meet this requirement by submitting a certificate of liability coverage form along with the two copies of the Hazardous Waste Transporter Status Form, copies of which are available upon request from the Department of Environmental Protection.
2. A copy of your insurance policy, together with any endorsements, must be maintained at your principal place of business.
3. Your insurer can not terminate your coverage until 30 days after filing written notice with DEP, by Certified mail, that your policy has expired or has been canceled.
4. Any changes to the information specified on your approval certificate will render it null and void. It is your responsibility to advise DEP of any changes in liability coverage or status.
5. A copy of Hazardous Waste Transporter Status Form, complete with the Department approval shall be carried in each vehicle transporting hazardous waste for the transportation company.

William Parke  
February 06, 2008  
Page Two

If you intend to operate a hazardous waste transfer facility, you must submit a Transfer Facility Notification Form 30 days before you use the facility as a storage location. If you are currently operating a transfer facility, you must maintain records of incoming and outgoing hazardous waste shipments. These records must include generator names and manifest numbers, and unless otherwise approved by DEP, must be maintained at the transfer facility. You need to be aware that the 1998 Florida Legislature adopted a new bill for transfer facilities. At the present time the Department is drafting new language for 62-730.171 to meet the criteria set forth in the legislation.

If you have any questions, please contact me at 850/245-8755.

Sincerely,

A handwritten signature in cursive script, appearing to read "Richard Neves".

Richard Neves  
Hazardous Waste Management Section

RN

Enclosures: Hazardous Waste Transporter Approval Certificate  
Hazardous Waste Transporter Status Form (with insurance verification)  
Sections 62-730.170 and 62-730.171, FAC



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blairstone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

\*\*\*\*\*

## HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF APPROVAL

\*\*\*\*\*

This is to certify that the carrier specified below has been approved as a hazardous waste transporter in Florida. The terms and conditions of this certificate require that the holder comply with all applicable portions of Chapter 62-730, Florida Administrative Code. This certificate shall be rendered null and void if any information contained within becomes obsolete. The certificate shall remain valid through the expiration date specified below.

TRANSPORTER: Cliff Berry Inc - Port Everglades Facility

FACILITY ID NO: FLR000083071

FACILITY ADDRESS: 3400 SE 9th Ave  
Fort Lauderdale, FL 33316

INSURANCE CARRIER: XL SPATIALITY INSURANCE

INSURANCE POLICY#: AEC000638908

EFFECTIVE DATE: December 31, 2007

EXPIRATION DATE: December 31, 2008

APPROVED TRANSFER FACILITY: YES

APPROVAL ISSUED BY: Richard Neves DATE: February 06, 2008

Richard Neves  
Hazardous Waste Management Section  
850/245-8755

RECEIVED

Are your services commercially available? YES

DEC 10 2007

STATE OF FLORIDA

HAZARDOUS WASTE TRANSPORTER STATUS FORM

BY: BSM

1. Transporter Identification:

Transporter Name: CLIFF BERRY, INC (CBI)  
Transporter EPA ID: FLR 000 083 071  
Location Address: 3400 S.E. 9<sup>TH</sup> AVE

Contact: WILLIAM E. PHARES, JR. Telephone: (954) 763-3390  
Mailing Address: P.O. BOX 13079  
FORT LAUDERDALE, FLORIDA 33316

II. Insurance Information:

Insurance Company: XL Specialty Insurance Company  
Address: 1990 N California Blvd, STE 740

Contact: SHELLI WARR Telephone: 7-1414  
Policy Number: AE 000 638 908  
Expiration date: 12/31/08

III. Waste Information:

EPA Waste Codes for Waste Routinely or Usually Transported:

0001 0002 0006 0007 0008 0009 0039 0040

Comments: \_\_\_\_\_

IV. Certification:

I certify under penalty of law that the above information is true, correct, and complete to the best of my knowledge.

CLIFF BERRY, II Title PRESIDENT  
Print/Type Name Title  
X Cliff Berry II 11-23-07  
Signature Date Signed

V. The transporter identified above is in compliance with the financial responsibility requirements for hazardous waste transporters pursuant to Chapter 62-730.170, Florida Administrative Code. The forms submitted by the transporter show compliance with the financial responsibility through 12/31/08 Date

APPROVED by Sebrena L. Bolton, changes approved by the Certifier by phone 2/6/2008

Signature of Florida Department of Environmental Protection Representative Date Signed

STATE OF FLORIDA

HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY INSURANCE

1. XL Specialty Insurance Company  
(Name of Insurer)

(the "Insurer"), of 1990 N. California Blvd., Ste 740, Walnut Creek, CA 94596  
(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

Cliff Berry, Inc.  
(Name of Insured)

(the "Insured"), of 3400 SE 9<sup>th</sup> Avenue, Dania Beach, FL 33316  
(Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-730.170. The coverage applies at:

<u>EPA/DEP I.D. No.</u>	<u>Name</u>	<u>Location</u>
FLR000083071	Cliff Berry, Inc.	3033 NW North River Drive Miami, FL 33142

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number AEC000638908, issued on 12/31/07.  
(date)

The effective date of said policy is 12/31/07 and the expiration date of said policy is 12/31/08.  
(date)

This insurance is excess and the company shall not be liable for amounts in excess of \$ 5,000,000 for each accident in excess of the underlying limit of \$ 1,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number UEC00063907, issued on 12/31/07. The effective date of  
(date)

said policy is 12/31/07 and the expiration date of said policy is 12/31/08.  
(date) (date)

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

(a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.

- (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer.
- (c) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the Insured and any other termination of the insurance (e.g., expiration, non-renewal), will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Secretary of the FDEP as evidenced by certified mail return receipt.
- (e) The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgment or judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States including Florida.

*Mike Bernath*  
 \_\_\_\_\_  
 (Signature of Authorized Representative of Insurer)

Michael Bernath  
 (Typed name)                      (Social Security Number)

Senior Underwriter  
 (Title)

Authorized Representative of

XL Specialty Insurance Company, c/o XL Environmental, Inc.  
 (Name of Insurer)

P.O. Box 636, 520 Eagleview Blvd., Exton, PA 19341  
 (Address of Representative)

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/26/2007

**PRODUCER**  
Seitlin  
6700 N. Andrews Avenue, Ste 300  
Fort Lauderdale FL 33309  
(954) 938-8788 (954) 938-8566

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.**

**INSURED**  
Cliff Berry, Inc.  
  
P.O. Box 13079  
Ft. Lauderdale FL 33316

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Greenwich Insurance Company	22322
INSURER B: XL Specialty Ins. Co.	37885
INSURER C: Indian Harbor Ins. Company	36940
INSURER D:	
INSURER E:	

## COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> per proj per loc	GEC000638808	12/31/2007	12/31/2008	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
					MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> MCS-90 <input checked="" type="checkbox"/> BROD POLL	AEC000638908  JAN 03 2008	12/31/2007	12/31/2008	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	BODILY INJURY (Per person) \$				
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN AUTO ONLY: EA ACC \$
					AGG \$
C	EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	UEC000639308	12/31/2007	12/31/2008	EACH OCCURRENCE \$ 5,000,000
	AGGREGATE \$ 5,000,000				
					\$
					\$
					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WEC0001272807 INCLUDES USL&H	12/31/2007	12/31/2008	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
					E.L. EACH ACCIDENT \$ 1,000,000
					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
					E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	OTHER Professional & Poll Liab (CEL)	PEC000639008	12/31/2007	12/31/2008	\$2000000 Each Loss \$2000000 Aggregate \$50000 Retention

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

**\*10 DAYS NOTICE OF CANCELLATION FOR NON-PAYMENT. TWIN TOWERS OFFICE BLDG - ATTN: JOAN FLINT RE: RENEWAL OF HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY INSURANCE. PROOF OF INSURANCE ONLY**

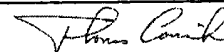
## CERTIFICATE HOLDER

DEPARTMENT OF ENVIRON.PROTECT.  
SOLID WASTE SECTION  
2600 BLAIR STONE ROAD MS4565  
  
TALLAHASSEE FL 32399-2400

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.



62-730.171 Transfer Facilities.

(1) 40 CFR 263.12 as adopted by reference in Rule 62-730.170, F.A.C. provides that transporters who store manifested hazardous waste in proper containers at a transfer facility for ten (10) days or less are exempt from regulation as a hazardous waste facility. If the waste is stored for more than ten (10) days, the facility is subject to the permitting requirements for a hazardous waste storage facility.

(2) A transfer facility used for storage of hazardous waste for more than 24 hours but ten (10) days or less shall comply with the following requirements as adopted by reference in 62-730.180, F.A.C.:

(a) The owner or operator of the transfer facility shall comply with the requirements of 40 CFR 265 Subparts B (general facility standards), C (preparedness and prevention), D (contingency and emergency plan), and I (management of containers), with the exception of 265.13. The aisle space requirements described in 40 CFR 265.35 and the special requirements for incompatible wastes described in 40 CFR 265.177(c) shall not apply at transfer facilities to containers stored in trucks loaded in accordance with DOT regulations described in 40 CFR 263.10. The 40 CFR 265 requirements referenced above shall apply to transfer facilities notwithstanding 40 CFR Part 265.1(c)(12). The owner or operator of the transfer facility shall submit the contingency and emergency plan to the Department with their first Transfer Facility Notification Form (DEP Form 62-730.900(6)).

(b) The owner or operator of the transfer facility shall have a written closure plan to show that the facility will be closed in a manner which satisfies the requirements of the closure performance, notification, and decontamination standards of 40 CFR 265.111, 265.112, 265.114 and 265.115. The owner or operator of the transfer facility shall submit the closure plan to the Department with their first Transfer Facility Notification Form (DEP Form 62-730.900(6)). Within 60 days of completion of closure, the owner or operator of the transfer facility shall submit to the Department a certification that the facility has been closed in accordance with the specifications in the closure plan. The certification shall be signed by both the owner or operator of the transfer facility and an independent registered, professional engineer.

(c) Records required in this section shall be maintained in permanent form and shall be available for inspection by the Department. The records shall be kept at the facility unless the Department gives written approval to do otherwise.

(d) Hazardous waste stored in containers or vehicles at transfer facility shall be stored on a manmade surface which is capable of preventing spills or releases to the ground.

(e) The owner or operator of a transfer facility shall maintain a written record of when all hazardous waste enters and leaves the facility. This record shall include the generator's name, the generator's EPA/DEP identification number, and the manifest number. For conditionally exempt small quantity generators without an EPA/DEP identification number, the record shall include the name and address of the generator. This recordkeeping requirement applies to all hazardous wastes including hazardous waste generated by conditionally exempt small

quantity generators.

(3) The owner or operator of a transfer facility which stores manifested shipments of hazardous waste for more than 24 hours but ten (10) days or less shall notify the Department on Form 62-730.900(6). The owner or operator of a new facility shall submit a notification form at least 30 days before the storage of hazardous waste is to begin. The transfer facility shall annually update the information on the Transfer Facility Notification Form (DEP Form 62-730.900(6)) and send it to the Department with the transporter's evidence of financial responsibility as required under Rule 62-730.170(3), F.A.C.

(4) The owner or operator of a transfer facility shall obtain an EPA/DEP identification number for each transfer facility location. Any owner or operator who has not obtained an EPA/DEP identification number for each transfer facility location may obtain one by applying to the Department using EPA Form 8700-12. Specific Authority: 403.704, 403.721, F.S.  
Law Implemented: 403.704, 403.721, F.S.  
History: New 3-2-86; Amended 6-28-88; Formerly 17-30.171; Amended 8-13-90; Amended 9-10-91, 10-14-92; Formerly 17-730.171; Amended 1-5-95.

62-730.170 Standards Applicable to Transporters of Hazardous Waste.

(1) The Department adopts by reference 40 CFR Part 263 revised as of July 1, 1993.

(2) In addition to the requirement of paragraph (1) of this Section, no person shall transport a hazardous waste within the state for which either a manifest is required under 40 CFR Part 262 or a reclamation agreement is entered between a generator and recycler pursuant to Part 263.20 unless compliance with the following special requirements has been demonstrated.

(a) The transporter shall have and maintain financial responsibility for sudden accidental occurrences in a minimum amount of \$1,000,000 per occurrence for combined coverage of injury to persons and for damage to property and the environment from the spillage of hazardous waste while such wastes are being transported including the costs of cleaning up the spill. Such financial responsibility shall be issued by an agent or company authorized or licensed to transact business in the State of Florida. Such financial responsibility shall be maintained at all times, be exclusive of legal defense costs, and be established by any one or a combination of the following:

1. Evidence of casualty/liability insurance on an occurrence basis with or without a deductible. With the deductible the Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insured. Each insurance policy must be evidenced by a certificate of liability insurance or amended by attachment of an endorsement.

2. Surety bonds.

(b) Evidence of coverage shall include submittal of an originally signed copy of one or more of the following forms adopted in Rule 62-730.900(5), F.A.C.:

1. Hazardous Waste Transporter Certificate of Liability Insurance,

2. Hazardous Waste Transporter Liability Endorsement,

3. Hazardous Waste Transporter Liability Surety Bond.

(c) The insurance policy, including all endorsements, or the liability surety bond must be maintained at the carrier's principal place of business.

(d) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection, the Insurer agrees to furnish to the department a signed duplicate original of the policy and all endorsements.

(e) The transporter shall annually submit to the Department two originally signed Transporter Status Forms (DEP Form 62-730.900(5)(d)). The Department shall complete the approval part of the form and return one of the originally signed forms to the transporter after verifying that the transporter is complying with the financial responsibility requirements of this section. A copy of this form complete with the Department approval shall be carried in each vehicle transporting hazardous waste for the transporter. This approval is non-transferable and non-assignable.

(f) This subsection does not apply to any person who transports hazardous waste only on the site of a hazardous waste generator or a permitted hazardous waste treatment, storage, or disposal facility.

(g) States and the federal government are exempt from the requirements of this subsection.

(3) Evidence of financial responsibility, updated for the current year, shall be verified annually by the submission of the appropriate DEP Form 62-730.900(5)(a) through (c) or by the submission of a certificate of insurance. A certificate of insurance shall include a certification by the insurer that the original insurance policy and all endorsements are still in full force and effect as evidenced on the original forms submitted to the Department.

Specific Authority: 403.704, 403.721, 403.724, 403.8055, F.S.

Law Implemented: 403.704, 403.721, 403.724, F.S.

History: New 11-8-81; Amended 5-31-84, 9-13-84; Formerly 17-30.17;

Amended 9-19-86, 3-31-87, 5-26-87; 6-28-88; Formerly 17-30.170;

Amended 1-25-89, 8-13-90, 9-10-91, 10-14-92, 10-7-93; Formerly

17-730.170; Amended 1-5-95.