



Florida Department of Environmental Protection

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

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

June 25, 2009

Bart Shomaker
Shoreline Environmental Inc
21971 C R 68 N
Robertsdale, AL 36567

BE IT KNOWN THAT

Shoreline Environmental Inc
21971 Co Rd 68 N
Robertsdale, AL 36567

IS HEREBY REGISTERED AS A USED OIL

Transporter, Marketer, Filter Transporter

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C)

The Department of Environmental Protection hereby issues

Registration Number **ALR000039974** on June 25, 2009

Insurance Carrier: **EVEREST INDEMNITY INSURANCE**

This registration will expire on 06/30/2010

This certificate documents receipt of your annual registration and annual report. It shall be displayed in a prominent place at your facility. This certificate and your cancelled check are your receipts.

Aprilia Graves
Environmental Specialist IV
Hazardous Waste Regulation Permitting



8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY

DEP Waste Management Division-HWRS, MS4560
2600 Blair Stone Rd. Tallahassee, FL 32399-2400
(850) 245-8772

RECEIVED

Date Received
(for FDEP Official Use Only)

JUN 05 2009

BY: [Signature]

EPA ID **A R L 0 0 0 0 3 9 9 7 4**

MTS

RCRAInfo

1. Reason for Submittal

Mark 'X' in
correct box:

- ☐ To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).
- ☒ To provide subsequent notification (to update status and facility identification information).
- ☐ Is this the final notification (see instructions) for the facility?

2. Facility or Business Name

Shoreline Environmental Inc.

FEID No.

0 3 0 5 3 6 4 1 2

3. Facility Operator (List additional Operators in the comments section).

Name of Operator:

Shoreline Environmental Inc.

☐ New Operator

Date became Operator: ____/____/____
mm dd yy

Street or P.O. Box:

21971 Co. Rd. 68 N.

Phone Number:

251-960-5505

City or Town:

Robertsdale

State:

AL

Zip Code:

36567

Operator Type:

☒ Private

☐ Federal

☐ Municipal

☐ State

☐ Other

4. Facility Physical Location Information

Physical Street Address:

21971 Co. Rd. 68 N.

City or Town:

Robertsdale

State:

AL

Zip Code:

36567

County:

~~Baker~~ BALDWIN

If available, please attach a map or sketch of the facility boundaries.

Latitude: **3 0 3 8 5 2 . 52**
dd mm ss.ssss

Longitude: **8 7 3 8 4 8 . 34**
dd mm ss.ssss

Method:

computer

Datum:

5. Facility North American Industry Classification System (NAICS) Code(s)

A.

484122

B.



Initials ____

C.

D.



Date ____

6. Facility or Business Mailing Address

Street Address or P.O. Box:

21971 Co. Rd. 68 N.

City or Town:

Robertsdale

State:

AL

Zip Code:

36567

7. Facility or Business Contact Person

First Name:

Bart

Last Name:

Shumaker

Title:

Persident

Phone Number:

251-960-5505

Extension:

E-Mail:

Street or P.O. Box:

21971 Co. Rd. 68 N.

City or Town:

Robertsdale

State:

AL

Zip Code:

36567

8. Real Property (Land) Owner of the Facility's Physical Location (List additional real property owners in the comments section.)

Name of Real Property (Land) Owner:

Bart Shumaker

☐ New Owner

Date became Owner: ____/____/____
mm dd yy

Street or P.O. Box:

18696 Loretta Dr.

Phone Number:

251-971-2965

City or Town:

Foley

State:

AL

Zip Code:

36535

Owner Type:

☒ Private

☐ Federal

☐ Municipal

☐ State

☐ Other

9. Type of Regulated Waste Activity (Mark 'X' in all that apply):**A. Hazardous Waste Activities:**

For Items 2 through 7, mark 'X' in all that apply.

(1) Generator of Hazardous Waste

(Choose only one of the following three categories.)

- ☐ a. Large Quantity Generator (LQG):
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of *non-acute* hazardous waste; or Greater than 1 kg (2.2 lbs) of *acute* hazardous waste
- ☐ 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
- ☒ c. Conditionally Exempt SQG (CESQG):
Generates in any calendar month 100 kg/mo or less (220 lbs.) of *non-acute* hazardous waste and 1 kg (2.2 lbs) or less of *acute* hazardous waste

In addition, indicate other generator activities that apply.

- ☐ d. United States Importer of hazardous waste
- ☐ e. Mixed Waste (hazardous and radioactive) Generator

(2) Treater, Storer, or Disposer of Hazardous Waste

(at your facility) Note: A hazardous waste permit may be required for this activity.

- ☐ a. Operating Commercial TSD
- ☐ b. Operating Non-commercial TSD
- ☐ c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.)

(3) Recycler of Hazardous Waste (at your facility)Specify: ☐ Commercial; ☐ Non-Commercial.

A permit is required for storage prior to recycling.

(4) Exempt Boiler and/or Industrial Furnace

- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining Furnace Exemption

(5) Person Authorized to Manage Conditionally Exempt Waste Generated at Other Facilities - Choose this management activity ONLY if you attach EITHER a copy of your application for such authorization OR the authorization you received from FDEP.**(6) Underground Injection Control - Mark an 'X' even if the UIC well at your facility does not receive hazardous waste.****(7) Transporter of Hazardous Waste [Note: A Certificate of Liability Insurance is required along with this registration.]**Registration must be renewed annually. ☐ a. For own waste only ☐ b. For commercial purposes**c. Hazardous Waste Transporter Insurance Information**

Insurance Company _____

Address _____

Contact _____ Telephone _____

Policy Number _____ Expiration date _____

d. Transportation Mode ☐ Air ☐ Rail ☐ Highway ☐ Water ☐ Other - specify _____e. ☐ Hazardous Waste Transfer Facility: Storage Volume _____☐ Initial notification

The following items are required to be submitted with the initial notification for a transfer facility [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.]
- ☐ Notification of changes in above items
- ☐ Annual update notification

B. Universal Waste (UW) Activities (Mark 'X' in all that apply) ("accumulated" means at any one time):

- ☐ Large Quantity Handler (LQH) = 5,000 kg (11,000 lb) or more of any combination of UW accumulated
- ☐ Small Quantity Handler (SQH) = always less than 5,000 kg accumulated
- ☐ Mercury-containing devices LQH = 100 kg (220 lb) or more accumulated by for-hire handler
- ☐ Mercury-containing devices SQH = less than 100 kg accumulated by for-hire handler
- ☐ Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler
- ☐ Mercury-containing lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler
- [Note: 4 lamps = 1 kg, 62-737.200(10)]
- ☐ Pharmaceuticals LQH = 5,000 kg or more of universal pharmaceutical waste (UPW) accumulated
- ☐ Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste accumulated
- ☐ Pharmaceuticals SQH = always less than 5,000 kg of UPW and always 1 kg or less of acutely hazardous UPW accumulated

(1) For those Managing	Generate/ Accumulate	Transport (see note in instructions)	Handle at Transfer Facility	(2) Enter your estimate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
c. Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
d. Mercury Containing Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
e. Mercury Containing Lamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

(3) Mercury Recovery and/or Reclamation Facility ☐ [Chapter 62-737, F.A.C.] Note: A hazardous waste permit is required for this activity. [Rule 62-737.800, F.A.C.]

(4) Reverse Distributor of UW ☐ Pharmaceuticals ☐ Lamps ☐ Devices ☐

(5) 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.

C. Used Oil Activities:**(1) Used Oil Transporter - indicate type(s) of activity(ies):**

- ☒ a. Transporter
- ☐ b. Transfer Facility

(2) ☐ Collection Center**(3) ☐ Used Oil Processor (A permit is required for this activity.)****(4) ☐ Off-Specification Used Oil Burner****(5) ☐ Used Oil Fuel Marketer****(6) Used Oil Filter**

- ☒ a. Transporter
- ☐ b. Transfer Facility
- ☐ c. Processor
- ☐ d. End User

(8) Specific Certification to be signed by all Used Oil Transporters

I certify as a Used Oil Transporter that the training program and financial responsibility required under Section 62-710.600, F.A.C., are in place, current and being adhered to. If any modifications have been made to the originally approved training program, they are explained in attachments to this registration form. Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of Liability Insurance, DEP form 62-710.901(4), F.A.C.


Signature of Authorized Person

Bart Shumaker

Print Name of Authorized Person

(7) Used Oil Transporters, Transfer Facilities, Collection Centers, Off-Specification Burners and Marketers must pay an annual \$100 registration fee. Used Oil Processors are exempt from this fee. If applicable, enclose a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection.

☒ A check is enclosed.

(9) The records required under the provisions of Rule 62-710.510, F.A.C., are kept at (check one):

- ☐ our mailing (business) address
- ☒ The site (facility) address

D. Other State Regulated Waste Activities:☒ **Petroleum Contact Water (PCW) Handler** [Chapter 62-740, F.A.C.]

Note: A water facility permit may be required for this activity.

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, U112).

Hazardous waste transporters list codes routinely or usually transported. Use an additional page if more spaces are needed.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

11. Other Status Changes (Mark 'X' in all that apply):**A. Non-Handler of Regulated Waste at This Facility**

- ☐ (1) Business no longer generates, transports, treats, stores, or disposes of hazardous waste
- ☐ (2) Waste generated by business has been delisted.
- ☐ (3) Other (explain) _____

B. Facility Closed

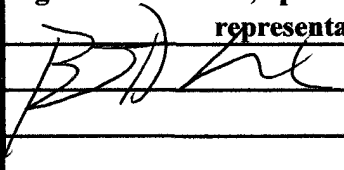
- ☐ (1) Closed at this location and **moved or moving** to another - submit a new Form 8700-12FL for the new location if you will be handling regulated waste there.
- ☐ (2) Out of Business - Business closed on _____ (Date). Please provide a contact person, mailing address, and phone number where you can be reached after closing.

Contact _____ Phone _____

Address _____

City, State, Zip _____

☐ **C. Property Tax Default**☐ **D. Petition for Bankruptcy Protection****12. 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. If I have notified as a transfer facility, I am aware that transfer facilities must comply with the requirements of Rule 62-730.171, FAC, and Rule 62-730.182, FAC.

Signature of owner, operator, or an authorized representative	Print Name and Title	Date Signed (mm-dd-yyyy)
	Bart Shumaker President	6-2-09

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

Bart Shumaker

251-960-5505

(Name of person completing this form)

(Phone Number)

(E-mail Address)

13. Comments:



Department of Environmental Protection

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

Application for Registration Used Oil and Oil Filter Handlers*

(*Handlers are any persons subject to the registration requirements of Rule 62-710.500 and 62-710.850, 4, F.A.C. [see item 4b below])

For registration period July 1, 2002 through June 30, 2003

Please print or Type Form

1. Business Name SHORELINE ENVIRONMENTAL FEID No. 03-0536412
DBA (Doing Business As) JAME AS ABOVE Telephone No. (251) 960-5505
Business Mailing Address: 21971 Co. Rd. 6B N
City: ROBERTSDALE County BAYVIEW State: AL Zip Code: 36567
Site Address: SAME AS ABOVE
City: _____ County _____ State: _____ Zip Code: _____
2. Facility Owner Name: BART SHUMAKER Telephone No. (251) 960-5505
Address 21971 Co. Rd 6B N
City: ROBERTSDALE County BAYVIEW State: AL Zip Code: 36567
3. Facility Operator's Name (if different from owner)
Operator's Name: _____ Telephone No. () _____
4. Make \$100.00 fee check or money order payable to Florida Department of Environmental Protection
4a. Registration Status: _____ New X Renewal EPA ID No. ALR 000 039 974
4b. Check boxes which apply to your used oil/used oil filter activity(ies).
Used Oil: XTransporter ☐Transfer Facility ☐Marketer ☐Processor ☐Burner of off-spec used oil
Used Oil Filter: XTransporter ☐Transfer Facility ☐Processor ☐End User

5. Certification

5a. General Certification to be signed by all Registrants:

To the best of my knowledge and belief I certify the information provided in this application is true, accurate and correct.

BART SHUMAKER

Name of Authorized Person (Print or Type) Signature of Authorized person

6-2-08
Date

5b. Specific Certification to be signed by all Used Oil Transporters

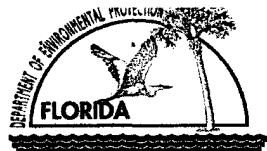
(Except those exempted by Rule 62-710.600(1), F.A.C.)

I certify as a Used Oil Transporter that the training program and financial responsibility required under Section 62-710.600, F.A.C., is in place, current and being adhered to. If any modifications have been made to the originally approved training program, they are explained in attachments to this registration form. Evidence of financial responsibility is demonstrated by the attached Used Oil Transporter Certificate of Liability Insurance, DEP form 62-701.900(15), F.A.C.

BART D SHUMAKER

Name of Authorized Person (Print or Type) Signature of Authorized person

6-2-08
Date



Department of Environmental Protection

FDEP, MS 4555, 2600 Blair Stone Road Tallahassee, Florida 32399-2400

DEP Form #62-710.901(3)
Form Title Annual Report by Used Oil
and Used Oil Filter Handlers
Effective Date June 9, 2005

Annual Report by Used Oil and Used Oil Filter Handlers*

(*Handlers are any persons subject to the registration requirements of rule 62-710.500 and 62-710.850, F.A.C. [See Section A, Box 5 below])
for reporting period January 1, 2008 through December 31, 2008

Use the information recorded in your Record Keeping Form [62-710.901(2)] or equivalent to complete this document

SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS

1. Company Name: SHORELINE ENVIRONMENTAL INC. 2. Telephone No. (251) 960-5505
Site Address: 21971 Co. Rd. 68 N. ROBERTSDALE AL. 36567
3. EPA ID No. ALR 0000 39974
- ☐ Check box if any of the above items (1-3) have changed since your last registration
4. Name of person preparing report (please print) BART SHUMAKER
Title PRESIDENT Phone number (if different from #2, above) ()
5. Type of operation (check as many as apply to your operations)
Used Oil: ☒ Transporter ☐ Transfer Facility ☐ Collection Center/Aggregation Point ☐ Processor ☐ Marketer
☐ Burner (of off-specification used oil)
Used Oil Filter: ☒ Transporter ☐ Transfer Facility ☐ Processor ☐ End User

SECTION B USED OIL (TO BE COMPLETED BY ALL REGISTERED USED OIL HANDLERS. USED OIL FILTER HANDLERS SEE SECTION C)

1. Amount (in gallons) of Used Oil and Oily Wastes collected
- | | Automotive | Industrial | Mixed | Total |
|--|------------|------------|-------|--------|
| a. In Florida..... | 34,677 | N/A | N/A | 34,677 |
| b. From out of state..... | N/A | N/A | N/A | N/A |
| c. Beginning Inventory..... | | | | |
| d. Total (sum of totals from Lines a + b + c)..... | | | | 34,677 |
2. Amount (in gallons) of Used Oil and Oily Wastes Managed
- | | In State | Out of State |
|--|----------|--------------|
| N - Not an end use, transferred to another facility for storage or processing..... | 34,677 | N/A |
| O - Marketed as an on-specification used oil fuel..... | N/A | N/A |
| F - Marketed as an off-specification used oil fuel..... | N/A | N/A |
| I - Marketed for an industrial process..... | N/A | N/A |
| B - Burned as an off-specification used oil fuel | N/A | N/A |
| D - Disposed of | | |
| Landfilled..... | N/A | N/A |
| Treated at a wastewater treatment unit..... | N/A | N/A |
| Incinerated..... | N/A | N/A |
| 3. Total amount (in gallons) of used oil managed..... | 25,750 | N/A |
| 4. End of year, on hand estimate (Difference between Lines 1D and Line 3)..... | 8,927 | N/A |

SECTION C USED OIL FILTERS (OPTIONAL) (USE TABLE BELOW FOR CONVERSIONS)

CHECK COLUMN IF OUT OF STATE ↓

1. Number of filters on hand from previous year.....
2. Number of used oil filters collected.....
3. Total number of used oil filters to manage (1 plus 2).....
4. Disposition of used oil filters collected:
 - a. Transferred to another registered facility.....
 - b. Burned for energy recovery at a Waste-To-Energy facility.....
 - c. Transferred directly to a metal foundry for recycling.....
 - d. TOTAL.....
5. End of year, on had estimate (Difference between Lines 3 and Line 4d).....
6. Gallons of used oil collected as a result of filter processing.....
7. Gallons of used oil transferred to a used oil handler (transporter or processor).....
8. Volume of oily waste collected and managed as a result of filter processing.....
9. Description of oily waste management.....

N/A	
14,750	
N/A	
14,750	X
N/A	
N/A	
14,750	X
0	
0	
0	
0	

DIRECTIONS FOR SECTION C

Conversion Table

One 55-gallon drum of crushed used oil filters = approximately 400 used oil filters
One 55 gallon drum of uncrushed used oil filters = approximately 250 used oil filters
One ton of drained used oil filters = approximately 2,350 used oil filters

1. Enter the number of Used Oil Filters on hand, from previous year's inventory.
2. Enter the number of Used Oil Filters collected.
3. Enter the sum of Line 1 + Line 2.
4. Enter the number of filters managed by your facility in blocks 4a-c. Enter the sum of 4a-c in block 4d.
5. Enter the number of filters on hand at your site as of December 31, last year.
6. Fill in the number of gallons of used oil collected by your filter operation.
7. Enter the number of gallons transferred to a used oil transporter or processor.
8. List the volume (gallons or cubic yards) of the oily wastes collected through your filter handling. Oily wastes are identified in Chapter 62-710.201(1) of the Florida Administrative Code and include bottom sludges, sorbents, wipes etc.
9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

Any questions concerning this form may be referred to the Used Oil Coordinator, MS 4560, Department of Environmental Protection 2600 Blair Stone Road, Tallahassee, FL 32399-2400, Phone (850) 245-8754, email: sebrina.bolton@dep.state.fl.us, OR Phone (850) 245-8755, email: aprilia.graves@dep.state.fl.us

ACORD™ CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
05/26/2009**PRODUCER**

Burkholder Insurance, Inc.
Chris Burkholder
P.O. Box 81569
Mobile AL 36608

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

Shoreline Environmental, Inc.
21971 County Road 68 North

Robertsdale AL 36537

INSURERS AFFORDING COVERAGE**NAIC #**

INSURER A: Everest Indemnity Insurance Group

10851

INSURER B: Auto-Owners Insurance Company

19899

INSURER C: American Equity Insurance Company

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"/> Includes Pollution Liab. GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	TBD	05/24/2009	05/24/2010	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 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 checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	4506196900	05/24/2009	05/24/2010	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 EA ACC \$ AUTO ONLY: AGG \$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000	TBD	05/24/2009	05/24/2010	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$ \$ \$
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	38061969	05/24/2009	05/24/2010	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000
C		OTHER USL & H	INCD00420-01	03/11/2009	03/11/2010	EL Each Accident \$1,000,000 EL Disease-Ea Employee \$1,000,000 EL Disease Policy Limit \$1,000,000

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

Attn: Rick Neves

CERTIFICATE HOLDER

Florida Department of Environmental Protection
Twin Tower Office, HWM. MS4555
2600 Blair Stone Road
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 10 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.

ADEM



ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

POST OFFICE BOX 301463 36130-1463 ♦ 1400 COLISEUM BLVD. 36110-2059

MONTGOMERY, ALABAMA

WWW.ADEM.STATE.AL.US

(334) 271-7700

ONIS "TREY" GLENN, III, P.E.

DIRECTOR

BOB RILEY

GOVERNOR

April 20, 2007

CERTIFIED MAIL 7005 1820 0003 1876 0327
RETURN RECEIPT REQUESTED

Mr. Bart Shumaker, President
Shoreline Environmental, Inc.
21971 County Road 68 N
Robertsdale, Alabama 36567

RE: Alabama Used Oil Transport Permit Renewal
Permit Number ALR 000 039 974

Dear Mr. Shumaker:

Enclosed is your renewed Alabama Used Oil Transport Permit. As you will note, the permit is valid for three (3) years. If you anticipate transportation of used oil in Alabama longer than the term of the permit, you must submit your renewal application at least 180 days before the expiration of this permit to avoid delays.

The wastes that you are allowed to transport are specified on the permit. Pursuant to the requirements of the Alabama Department of Environmental Management (ADEM) Administrative Code Rule 335-14-17-.05 (9)(a), you must maintain a copy of this permit and a copy of the contingency plan required by Rule 335-14-8-.09 (4)g with each vehicle actively transporting used oil.

If you have questions or comments regarding this matter, please contact Mr. Abe Oberkor at (334) 271-7758.

Sincerely,

James L. Bryant, Chief
Environmental Services Branch

JLB/AOO/gs

Birmingham Branch
110 Vulcan Road
Birmingham, Alabama 35209-4702
(205) 942-6188
(205) 941-1803 (Fax)

Decatur Branch
2715 Sandlin Road, S.W.
Decatur, Alabama 35603-1333
(256) 353-1713
(256) 340-9359 (Fax)

Mobile Branch
2204 Perimeter Road
Mobile, Alabama 36615-1131
(251) 450-3400
(251) 479-2593 (Fax)

Mobile - Coastal
4171 Commanders Drive
Mobile, Alabama 36615-1421
(251) 432-6533
(251) 432-6598 (Fax)



Printed on Recycled Paper

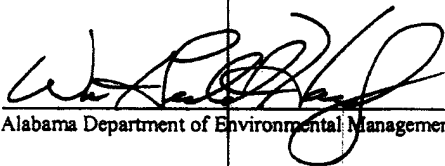


USED OIL TRANSPORT PERMIT

PERMITTEE: Shoreline Environmental, Inc.
ADDRESS: 21971 County Road 68 N
Robertsdale, Alabama 36567
PERMIT NUMBER: ALR 000 039 974
HAZARDOUS WASTES APPROVED: Only used oil identified by ADEM
Administrative Code Rule 335-14-17-.02.
TRANSPORTATION MODE: Highway

In accordance with and subject to the provisions of the Hazardous Waste Management Act of 1978, as amended, Code of Alabama 1975, §§22-30-1 to 22-30-2, the Alabama Environmental Management Act, as amended, Code of Alabama 1975, §§22-22A-1 to 22-22A-15, and rules and regulations adopted thereunder, and subject further to the conditions set forth in this permit, the Permittee is hereby authorized to transport the approved hazardous wastes/used oil by the approved transportation mode.

ISSUANCE DATE: April 20, 2007
EFFECTIVE DATE: June 8, 2007
EXPIRATION DATE: June 7, 2010


Alabama Department of Environmental Management

**UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION**



**HAZARDOUS MATERIALS
CERTIFICATE OF REGISTRATION
FOR REGISTRATION YEAR(S) 2008-2009**

Registrant: SHORELINE ENVIRONMENTAL, INC.
Attn: RICHARD MCNEILL
PO BOX 2264
MOBILE, AL 36652

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 062408 552 086Q Issued: 06/24/2008 Expires: 06/30/2009

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

- (1) A copy of the registration statement filed with PHMSA; and
- (2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-62, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

TRANSPORTER TRAINING PROGRAM EVALUATION CHECKLIST

Note: Training programs deemed insufficient by the Department will not be approved until your company is notified and amendments to the training program are accepted and approved. This may delay the certification process. If you have any questions, please contact the Used Oil Recycling Coordinator, MS 4555, FDEP, 2600 Blair Stone Road, Tallahassee, FL; or by phone at (850) 245-8755.

Date Reviewed / / Company Name: SHORELINE ENVIRONMENTAL
Action: Approved Not Approved/reason: Reviewed by

A) Federal rules governing used oil transportation, found in Part 279 of the Code of Federal Regulations. Federal rules relevant to used oil transporters include:

- 1) 40 CFR, Part 279.40, Applicability
- 2) 40 CFR, Part 279.41, Restrictions on transporters.
- 3) 40 CFR, Part 279.42, Notification
- 4) 40 CFR, Part 279.43, Used oil transportation, to include:
- 5) **a detailed spill response protocol**
- 6) 40 CFR, Part 279.44 Rebuttable presumption (SOP for halogen screening, Rule 62-710.600(b)(3))
- 7) 40 CFR, Part 279.45, Used oil storage at transfer facilities
- 8) 40 CFR, Part 279.46, Tracking

B) Florida Laws governing pollution and used oil management, found in Chapter 403 of the Florida Statutes (F.S.). State laws relevant to used oil transporters include:

- 1) 403.121, F.S., Damages to Air, Water or Property
- 2) 403.141, F.S., Joint and Several Liability
- 3) 403.161, F.S., Causing Pollution (*careless or reckless; willful; non-compliance*)
- 4) 403.708(1) and (15), F.S., Prohibitions (*Solid Waste, Special Waste*)
- 5) 403.751, F.S., Prohibited Actions (*Used Oil*)
- 6) 403.754, F.S., Registration of Used Oil Handlers
- 7) 403.7545, F.S., Regulation of Used Oil as Hazardous Waste
- 8) 403.767, F.S., Certification of Used Oil Transporters

C) Department Rules governing used oil transportation, found in Chapter 62-710 (Used Oil Management) of the Florida Administrative Code (F.A.C.), to include:

- 1) 62-710.201, F.A.C., Definitions
(in particular: oily wastes [1] and used oil [5])
- 2) 62-710.401, F.A.C., Prohibitions
- 3) 62-710.901(2), F.A.C., Record Keeping Form
- 4) 62-710.500, F.A.C., Registration and Notification
- 5) 62-710.510, F.A.C., Record Keeping and Reporting
- 6) 62-710.600, F.A.C., Certification of Used Oil Transporters
- 7) 62-710.850, F.A.C., Management of Used Oil Filters (if applicable)

D) The training materials submitted must also include:

 1) A document verifying that personnel handling or transporting used oil have successfully completed the training program within 90 days after beginning employment. This document should be maintained in the individual personnel files, be available for review by Department personnel during any inspection, and include a record indicating:

- a) the type of training provided, and
- b) the dated signatures of those receiving and providing the training.

 2) A statement, filed annually with the Department as part of the registration required under Rule 62-710.500, F.A.C., which states that the training program is still operating and is being adhered to, and which provides an explanation of any modifications to the training program.

☒ **E) Used Oil Transporter Certificatoin and Training Manual (BFA Custom Publications)**
In lieu of preparing your own training manual, you may purchase the Used Oil Transportation Certification and Training Manual which is produced and offered for sale by BFA Custom Publications. This manual has been edited and approved by the Department. Persons who elect to use this manual need only submit the signature pages in the front of the manual to the Department. Contact the Association, in care of Frank Bronstein, Executive Director, 318 Newman Road, Sebring, Florida, 33870; by email at: frank.ess.bee@gmail.com, or by phone at: (863) 655-0691.

Manual Invoice Number 94VX0007 Copyright Date AUG 2005

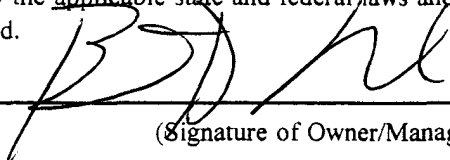
Record of Compliance

BUSINESS OWNER/MANAGER FORM

I hereby acknowledge receipt of a copy of the *Used Oil Transporters Certification and Training Manual*. I have familiarized myself with these regulations and will comply with their provisions at all times on duty as a driver/employee.

I understand that by signing this form I am indicating that I have reviewed and understand the materials in the Certification Manual. I further understand that a copy of this form will remain on file as a personnel record at the firm and that a copy will be available upon request to the Department.

At least once a year I will review the applicable state and federal laws and rules governing used oil transporting and sign a new form for the personnel record.



(Signature of Owner/Manager)

BANT D. SHUMAKER

(Print Full Name of Owner/Manager)

JAN 5TH 2009

(Today's Date: Include Month, Date & Year)

SHORELINE ENVIRONMENTAL

(Name of Firm)

21971 CO. RD. 68 N.

(Address of Firm)

ROBERTSDALE AL 36567

(City, State and Zip Code)

251-960-5505

(Work Phone, Include Area Code)

Instructions: This business owner/manager form receipt is to be read and signed by the the firm's owner/manager and placed in his or her qualification file. It must be updated annually. Violations of the certification law can lead to denial or revocation of certification. (Make copies of this form for additional owners who are drivers.)

Record of Compliance

DRIVER/EMPLOYEE FORM

I hereby acknowledge receipt of a copy of the *Used Oil Transporters Certification and Training Manual*. I have familiarized myself with these regulations and will comply with their provisions at all times on duty as a driver/employee.

I understand that by signing this form I am indicating that I have reviewed and understand the materials in the certification manual. I further understand that a copy of this form will remain on file as a personnel record at the firm and that a copy will be available upon request to the Department.

At least once a year, I will review the applicable state and federal laws and rules governing used oil transporting and sign a new form for the personnel record.

Joe Jones
(Signature of Driver)

Joe Jones
(Print Full Name of Driver)

JAN 5TH 2009
(Today's Date: Include Month, Date & Year)

SHORELINE ENVIRONMENTAL
(Name of Employer/Firm)

21871 Co. Rd. 68 N
(Address of Firm)

ROBERTSDALE AL. 36567
(City, State and Zip Code)

251-960-5505
(Work Phone, Include Area Code)

[Signature]
(Signature of Owner/Manager)

Instructions: This receipt is to be read and signed by the driver/employee. It should be countersigned by the firm's owner/manager and placed in the driver's qualification file. It must be updated annually. Violations of the certification law can lead to denial or revocation of certification. (Make copies of this form for additional employees.)

Record of Compliance

DRIVER/EMPLOYEE FORM

I hereby acknowledge receipt of a copy of the *Used Oil Transporters Certification and Training Manual*. I have familiarized myself with these regulations and will comply with their provisions at all times on duty as a driver/employee.

I understand that by signing this form I am indicating that I have reviewed and understand the materials in the certification manual. I further understand that a copy of this form will remain on file as a personnel record at the firm and that a copy will be available upon request to the Department.

At least once a year, I will review the applicable state and federal laws and rules governing used oil transporting and sign a new form for the personnel record.



(Signature of Driver)

William J. Taylor

(Print Full Name of Driver)

JAN 5TH 2009

(Today's Date: Include Month, Date & Year)

SHORELINE ENVIRONMENTAL

(Name of Employer/Firm)

21971 Co. Rd. 68 N.

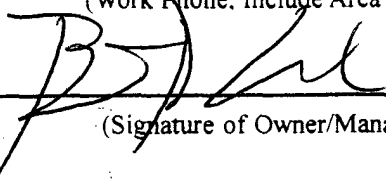
(Address of Firm)

ROBERTSDALE AL. 36567

(City, State and Zip Code)

251-960-5505

(Work Phone. Include Area Code)



(Signature of Owner/Manager)

Instructions: This receipt is to be read and signed by the driver/employee. It should be countersigned by the firm's owner/manager and placed in the driver's qualification file. It must be updated annually. Violations of the certification law can lead to denial or revocation of certification. (Make copies of this form for additional employees.)

Record of Compliance

DRIVER/EMPLOYEE FORM

I hereby acknowledge receipt of a copy of the *Used Oil Transporters Certification and Training Manual*. I have familiarized myself with these regulations and will comply with their provisions at all times on duty as a driver/employee.

I understand that by signing this form I am indicating that I have reviewed and understand the materials in the certification manual. I further understand that a copy of this form will remain on file as a personnel record at the firm and that a copy will be available upon request to the Department.

At least once a year, I will review the applicable state and federal laws and rules governing used oil transporting and sign a new form for the personnel record.

BTH
(Signature of Driver)

BART SHUMAN
(Print Full Name of Driver)

JAN 5TH 2009
(Today's Date: Include Month, Date & Year)

SHORELINE ENVIRONMENTAL
(Name of Employer/Firm)

21971 G. H. LEB N. 1
(Address of Firm)

ROBERTSDALE AL. 36567
(City, State and Zip Code)

251 - 960 - 5505
(Work Phone, Include Area Code)

BTH
(Signature of Owner/Manager)

Instructions: This receipt is to be read and signed by the driver/employee. It should be countersigned by the firm's owner/manager and placed in the driver's qualification file. It must be updated annually. Violations of the certification law can lead to denial or revocation of certification. (Make copies of this form for additional employees.)

Used Oil Training Program

III. Used Oil Training Program

Developed For:

Company Name SHORELINE ENVIRONMENTAL INC.

Submitted To:

Florida Department of Environmental Protection, Used Oil Coordinator

MS 4555

Twin Towers Office Building

Tallahassee, FL 32399-2400

Date 6-2-09

A. Training Program Description

Please check the appropriate response and complete the information that is applicable

1. ☒ Option A. The Used Oil Transporters Certification and Training Manual shall serve as our corporate Training Program.

2. ☐ Option B. An alternate Training Program has been developed and is described on the attached sheets.

B. Training Program Implementation

Please provide a description of your training methodology (i.e. lecture, employee review of written programs, etc.).

GROUP LECTURE, ORAL QUIZ & WRITTEN TEST

Page 1 of 4

The serial number of this manual is 94VX0007

(NOTE: Please submit this page to FDEP with your registration forms)

C. Employee Training Program Verification

Please provide a complete description of your employee training test methodology (i.e. oral quiz, written test, etc.)

GROUP ORAL QUIZ + WRITTEN TEST

D. Employee Training Frequency

Description of the frequency of employee training (annually, every two years, etc.)

ON NEW HIRE + THEN ANNUALLY

REVIEW ALL INCIDENT OR SPILLS (IF ANY)
AS A GROUP

Page 2 of 4

The serial number of this manual is 94VX0007

(NOTE: Please submit this page to FDEP with your registration forms)

E. Employee Training Program Record Keeping

Please provide a full description of your company's record keeping methodology for employee training.

SIGN OFF SHEETS + WRITTEN TEST

A COPY GOES INTO THE DRIVER'S EMPLOYEE
FILE + TRAINING FILE

F. Used Oil Training Program Additional Information

Please provide any additional information required as part of your corporate Used Oil Training Program on these pages. Identify the Section (i.e. 1. Training Program Description) to which the information applies. Use additional sheets of blank white paper as necessary.

HALOGEN TESTING AT SHORELINE ENVIRONMENTAL

WE TEST ALL OIL BEFORE PICK UP W/ A DEXSIL
COLOR-D-TECT 1000 KIT. IF OIL FAILS WE CHECK
W/ DEXSIL COLOR-D-TECT 2400D. IF UNDER 4000 PPM
A SAMPLE IS TAKEN + SENT OUT TO A LAB FOR
A REBUTAL TEST. IF REBUTAL FAILS WE DON'T
PICK UP THE USED OIL. IT WOULD BE A HAZARDOUS WASTE

Page 3 of 4

The serial number of this manual is 94VX0007

(NOTE: Please submit this page to FDEP with your registration forms)

G. Used Oil Training Program Signature Page

I certify, as a used oil transporter, that the training program required under Rule 62-710.600, Florida Administrative Code, as described on the attached sheets will be implemented and adhered to. To the best of my knowledge, the training program described is in full compliance with the rule 62-710.600.

BART D. SHUMANN

Name of Authorized Person (Print or Type)

PRESIDENT

Title of Authorized Person

[Signature]

Signature of Authorized Person

6-2-09

Date

This document shall be submitted to the FDEP to facilitate the review and acceptance of your training program.

If this *Used Oil Certification and Training Manual* is to be used as the training manual, a copy of said manual must be kept on the premises of the location for which a permit has been applied. The manual does not need to be submitted with this document.

Page 4 of 4

The serial number of this manual is 94VX0007

(NOTE: Please submit this page to FDEP with your registration forms)

SHORELINE ENVIRONMENTAL, INC.
21971 Co. Rd. 68 N.
Robertsdale, AL 36567
251-960-5505
251-747-7607

EMERGENCY RESPONSE PLAN FOR USED OIL/OILY WASTE TRANSPORT (NON-HAZARDOUS)

GENERAL INFORMATION

US Department of Transportation rules require that all transporters of oil in bulk volume of 3,500 gallons or more have a "Basic Written Plan" that provides for emergency response in the event of an incident where there could be a release or discharge of oil.

Shoreline Environmental's emergency phone number is 251-960-5505.

SPILL PLAN

This plan is to be used in the event of an incident resulting in the spillage of product or waste or in the event of an incident or accident, which endangers the shipment. All Shoreline Environmental drivers are to be thoroughly familiar with this plan.

PLANNING FOR EMERGENCY RESPONSE

Response planning for an incident involving a discharge of oil during transportation includes the following concepts and activities:

Each transportation vehicle is equipped with a small spill response kit including bulk absorbents and other supplies for immediate response to a minor oil spill. Shoreline Environmental drivers have received training covering proper procedures for spill incident control, and response and communication requirements. A check on the spill kit status will be

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21971 Co. Rd. 68 N.
Robertsdale, AL 36567
251-960-5505
251-747-7607

included as part of the pre-trip inspection conducted by the vehicle driver.

In the event of a transportation incident that results in an oil discharge amount greater than the handling capacity of the unit's spill kit, assistance from other groups will be arranged. Options include:

- A second Shoreline Environmental vehicle that may be near enough to be dispatched for assistance to the incident location, either from 21971 Co. Rd. 68 N. Robertsdale, AL or off a different used oil collection route.
- The HAZMAT response team operating as a part of the local fire department.
- An outside firm specializing in emergency response for chemical or petroleum spill or release incidents.

The spill response procedures may vary depending on the type of incident, amount of material discharged, etc., but basic activities will include:

- Attend to any injured or threatened personnel.
- Stop the flow of oil if possible.
- Control and contain the flow of material as much as possible.
- All Shoreline Environmental drivers are equipped with cell phones/2 way radios in order to contact police/fire immediately.
- Communicate incident details to Shoreline Environmental office.

The vehicle driver will function as the emergency response coordinator on site until assistance arrives from the Shoreline Environmental office. On scene incident coordinator activities include:

SHORELINE ENVIRONMENTAL, INC.

21971 Co. Rd. 68 N.

Robertsdale, AL 36567

251-960-5505

251-747-7607

- The release may result in an increased potential for ignitable vapor concentration. The coordinator will evaluate the situation for a determination of any measures needed for barricades or separation markings to reduce the possibilities for sparks, open flames, or other ignition sources.
- The coordinators assessment will include a determination on whether or not the accident can be contained or controlled by Shoreline Environmental emergency response efforts. If additional emergency response/spill control assistance is needed, the coordinator will call for outside assistance, **Attachment A** provides contact information for spill response resources.

Containment is the critical step to prevent the escape of any spilled liquid or solid into the ground or into a storm or sanitary sewer. Steps of containment include:

- Immediately erecting a barrier to prevent escape of spilled material/waste liquids using whatever material is at hand.
- Containment of solid will be dependent on wind and weather conditions (use of a tarpaulin or plastic if conditions are wet and windy).
- The source of the leak must be located and controlled.

Detailed procedures for cleanup of a small spill (up to 5 gallons of oil) are:

- The source of the spill must be located and controlled.
- Apply absorbents to soak up the spilled material. Spread the absorbent over and around the edges of the spill area.

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Robertsdale, AL 36567
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251-747-7607

- Sweep and shovel up the absorbent-depositing the material in a bucket.
- Apply a second layer of absorbent and use a stiff broom to cleanup spill residue traces. Sweep up the material.

Detailed procedures for cleanup of a medium spill (6-1000 gallons of oil) include:

- The source of the spill must be located and controlled.
- Set up a temporary pump and hose arrangement and connection whereby the material can be pumped into an available tote tank, container, or tanker.
- After all liquid materials are pumped into a standby container or vehicle, residue traces are to be cleaned up with absorbents.
- Cleanup absorbent is swept up and deposited into buckets/containers.

Detailed procedures for cleanup of a large spill (over 1000 gallons of oil) include:

- The source of the spill must be located and controlled.
- Use absorbent, sand, or soil to arrange a temporary containment dike.
- Obtain the services of a mobile vacuum truck unit to assist in the pickup of spilled material and cleanup of any affected soil or surface.

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251-747-7607

MAXIMUM POTENTIAL DISCHARGE

Used oil trucks will depart empty each morning from the company facility on their regular collection routes. The maximum collection capacity of the largest truck at Shoreline Environmental is 4600 gallons of used oil.

For an incident or accident resulting in the discharge of the maximum potential quantity, response will include the assistance from outside spill response contractors. Contractor personnel will be used to set up temporary containment, vacuum up as much released oil as possible and then clean up traces and residues of the spilled material from soil or other surfaces.

RESPONSE PERSONNEL

The Shoreline Environmental vehicle driver is designated as the initial incident response coordinator. The driver will have received training sufficient to handle responses involving small amounts of oil.

INCIDENT COMMUNICATIONS

Shoreline Environmental policies require immediate reporting by telephone of all accidents associated with spill response actions. **Attachment B** is a form for recording incident activities.

State and Federal reporting requirements are coordinated the Shoreline Environmental office and is determined by the nature of the incident, the extent of damage or injury, amount of material involved and related factors. Telephone numbers for emergency incident reporting to agencies are listed in **Attachment A**.

SHORELINE ENVIRONMENTAL, INC.
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Robertsdale, AL 36567
251-960-5505
251-747-7607

TRAINING PROGRAM

Although all waste handled by Shoreline Environmental is non-hazardous, all drivers have received 40 hour HAZMAT training with yearly 8 hour refresher. All drivers are trained on the Emergency Response Plan for Used Oil/Oily Waste Transport (non-hazardous) yearly. Monthly safety meetings also include emergency response information.

SHORELINE ENVIRONMENTAL, INC.
21971 Co. Rd. 68 N.
Robertsdale, AL 36567
251-960-5505
251-747-7607

ATTACHMENT A: SPILL RESPONSE RESOURCES

- **United States Environmental Services, LLC (USES)**

4230-A Halls Mill Rd.
Mobile, AL 36693

24 Hour Emergency Number
251-662-3500

- **SWS First Response**

1783 W. Nine Mile Rd.
Pensacola, FL 32534

24 Hour Emergency Number
800-969-0092

- **Oil Recovery Company (ORC)**

1101 S. Conception St.
Mobile, AL 36603

24 Hour Emergency Number
800-350-0443

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21971 Co. Rd. 68 N.
Robertsdale, AL 36567
251-960-5505
251-747-7607

ATTACHMENT A: SPILL RESPONSE RESOURCES

Agency	Phone
National Response Center	800-424-8802
USEPA Region IV Atlanta, Emergency Response	404-347-3016
AL Emergency Management Agency	800-356-9596
Hazardous Materials/Waste Incidents	800-843-0699
US Coast Guard, Mobile	251-441-5976
AL Dept. of Public Safety	334-424-4378
CHEMTREC	800-424-9300
AL Dept. of Environmental Management	800-843-0699
FL Emergency Response	850-245-2010
MS Emergency Response	601-352-9100
LA Emergency Response	225-342-1234

When the situation necessitates, call the following:

Local Police	911
Local Fire	911

Shoreline Environmental, Inc. officers are to be notified by the driver every time there is a spill of any amount per company policy. An officer for

SHORELINE ENVIRONMENTAL, INC.
21971 Co. Rd. 68 N.
Robertsdale, AL 36567
251-960-5505
251-747-7607

Shoreline Environmental or their Qualified Alternate will respond to all spills:

Bart Shumaker, First Responder	Office: 251-960-5505 Cell: 251-747-7607 Pager: 251-923-1600
Kim Shumaker, Second Responder	Office: 251-960-5505 Cell: 251-747-7606
Brian Thorpe, Qualified Alternate	Office: 251-960-5505 Cell: 251-747-0212

SHORELINE ENVIRONMENTAL, INC.
21971 Co. Rd. 68 N.
Robertsdale, AL 36567
251-960-5505
251-747-7607

ATTACHMENT B: RECORDING AND REPORTING INCIDENT
ACTIVITIES

1. Name of person reporting incident: _____
2. Name/address/ID number of transporter: _____

3. Phone number where person reporting can be reached: _____
4. Date/time/location of incident: _____
5. Extent of injuries if any: _____
6. Classification/name/quantity of waste involved, if available: _____
7. Type of incident and nature of waste involved, and whether a continuing danger exists at the scene: _____
8. Identify all types of waste involved, estimate quantity of material spilled, and estimate the extent of contamination to land, water, or air: _____

RECEIVED

DEP Form # 17-730.900(5)(a)
Form Title: HWF Transporter Certificate of
Liability Insurance
Effective Date: 1-29-06
DEP Application #

JUN 05 2009

ST. BSHW

STATE OF FLORIDA
HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF LIABILITY
INSURANCE

1. American Safety Insurance Services Inc.,
(Name of Insurer)

(the "Insurer"), of One Perimeter Park S Birmingham, AL 35243
(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

American Compliance Technologies, Inc.,
(Name of Insured)

(the "Insured"), of 1875 W. Main Street Bartow, FL 33830
(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>
FLR000011049	American Compliance Technologies Inc	1875 W. Main Street Bartow, FL 33830

(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 ENV0196320801, issued on 5/29/09.
(date)

The effective date of said policy is 5/29/09 and the expiration date of said policy
06/29/09 (date)
is _____ (date)

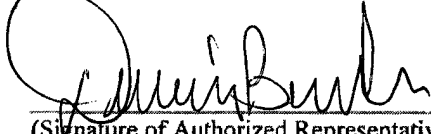
This insurance is excess and the company shall not be liable for amounts in excess of
\$ 4,000,000 for each accident in excess of the underlying limit of
\$ 4,000,000 for each accident, exclusive of legal defense costs. The coverage is provided
under policy number ENV0196330801, issued on 5/29/09. The effective date of
(date)
said policy is 05/29/09 and the expiration date of said policy is 06/29/09.
(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 of more States including Florida.



(Signature of Authorized Representative of Insurer)

Dennis Brownlee

(Typed name)

Producer

(Title)

Authorized Representative of

American Safety Insurance Services Inc.,

(Name of Insurer)

414 N. Alexander Street Plant City, FL 33563

(Address of Representative)