



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

03/23/2010

Conrad Thornburgh, Branch Manager
FCC Environmental
105 S Alexander St
Plant City, FL 33563-4833

The Hazardous Waste Regulation Section has reviewed your application for a hazardous waste DEP/EPA Identification Number. Based on the information received you must use the following identification number for all manifests or reports for FCC Environmental located at **105 S Alexander St, Plant City.**

FLD065680613

Your facility notified FDEP requesting the following status/activities:

**HW Transfer Facility, Conditionally Exempt SQG
Used Oil Marketer, Used Oil on-Spec Marketer, Used Oil Processor, Petroleum Contact
Wastewater Management, Oil Filters, Used Oil Transfer Facility Small Quantity Handler,
Universal Batteries, Universal Lamps**

THIS LETTER IS NOT AN APPROVAL TO TRANSPORT HAZARDOUS WASTE OR USED OIL OR UNIVERSAL WASTE OR TO OPERATE A HAZARDOUS WASTE TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY OR A UNIVERSAL WASTE OR USED OIL PROCESSING FACILITY OR LARGE QUANTITY HANDLER. PLEASE CONTACT THE DEPARTMENT FOR COMPLETE REQUIREMENTS FOR HAZARDOUS WASTE OR USED OIL TRANSPORTERS, UNIVERSAL WASTE HANDLERS, USED OIL PROCESSING FACILITIES, AND TSDS.

You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status or contact information. For further assistance, please call the Notification Coordinator at (850)245-8760 or (850)245-8772 or (850)245-8706.
Sincerely,

for Michael Redig

Michael X. Redig
Environmental Manager
Hazardous Waste Regulation Section

ME ID: 28737 , Email Address: thornburgh@fccenvironmental.com
Link: http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLD065680613

FCC ENVIRONMENTAL

ID: [8425](#) EPA: [FLD065680613](#) City: Plant City County: Hillsborough

[« Back to main page](#)

8700-12 Submitted As: HWG RMH RUOH

Logged in as [Noland_T](#) [\[Logout\]](#)

HWR : thornburgh@fccenvironmental.com UOP : kelli.winter@fccenvironmental.com MP : thornburgh@fccenvironmental.com

Program Area	Process	Date	Author
HWG			
HWG	Logged	2/9/2010 8:03:55 AM	Sullivan_TA
HWG	Completeness Review	2/18/2010 5:24:16 PM	Noland_T
HWG	Data processing	2/18/2010 5:24:24 PM	Noland_T
RMH			
RMH	Completeness Review	2/18/2010 5:24:04 PM	Noland_T
RMH	Completeness Review	2/23/2010 5:25:56 PM	Noland_T
RMH	Data processing	2/23/2010 5:26:03 PM	Noland_T
RMH	Final reviewed	2/25/2010 1:58:27 PM	Tenace_L
RMH	Notification Letter Emailed	2/25/2010 1:59:04 PM	Tenace_L
RMH	Booked into Oculus	2/25/2010 1:59:53 PM	Tenace_L
RUOH			
RUOH	Completeness Review	3/23/2010 9:44:32 AM	Noland_T
RUOH	Data processing	3/23/2010 9:44:38 AM	Noland_T

HWG Final reviewed 3/23/2010 11:36:12 AM or

Date	Comment	Program Area	Author
HWG			
3/23/2010 10:03:11 AM	Did not mark that they handle PCW-Sent e-mail to Kelli	HWG	Noland_T
3/23/2010 10:03:29 AM	She said they do-made correction on form.	HWG	Noland_T
RMH			
2/18/2010 5:24:00 PM	Need to call re:UW Activities Data says transporter and SQH but form says Transfer Facility	RMH	Noland_T
2/23/2010 3:36:41 PM	They are a UW Transfer Facility	RMH	Noland_T
2/23/2010 3:39:30 PM	They are a SQH of batteries and lamps	RMH	Noland_T
2/23/2010 3:39:47 PM	They are a transfer facility of UW	RMH	Noland_T
RUOH			
2/23/2010 3:36:15 PM	Spoke w/ Kelli-she is sending AR and Training Manual	RUOH	Noland_T
3/5/2010 1:10:25 PM	Training manual reviewed. One correction needed. Sent an email to Kelli on 3/4/10. Waiting for facility response	RUOH	Graves_A
3/11/2010 11:43:27 AM	The revised UO Training MAnnual submitted today is approved	RUOH	Graves_A
Add new			Noland_T <input type="checkbox"/>



Hydrocarbon Recovery Services Inc.
105 S. Alexander Street
Plant City, FL 33563

RECEIVED

FEB 02 2010

BY: BSHW

January 25, 2010

Department of Environmental Protection
2600 Blair Stone Road
MS 4550
Tallahassee, Florida 32399-2400

Re: Annual Used Oil and Used Oil Filter Handler registration for the following
Hydrocarbon Recovery Services Inc facilities:

- 5690 West Midway Road, Ft. Pierce, FL 34981
- 2058 East 21st Street, Jacksonville, FL 32206
- 233 Central Florida Parkway, Orlando, FL 32824
- 105 S. Alexander Street, Plant City, FL 33563
- 1280 NE 48th Street, Pompano Beach, FL 33064

To Whom It May Concern:

Enclosed please find a completed copy of form 8700-12FL – Florida Notification of Regulated Waste Activity for each of our five facilities in Florida, as well as our Used Oil and Hazardous Waste Transportation activities throughout the State.

For information submitted in 2010 compared to 2009, items to note are as follows:

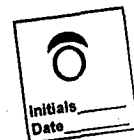
- HRSI has discontinued operations at 3450 Canal Street, Ft. Myers. The owner of the property is still in business. Notification was made to FDEP in May 2009 and acknowledged by the Department in a letter dated 5/28/09.
- HRSI has discontinued operations at 405 NE 1st Avenue in High Springs. The owner of the property is still in business. Notification was made to FDEP in December 2009 and acknowledged in a letter dated 12/16/09.

If questions arise or further information is required, please contact me. Thank you for your time and attention in this matter.

Sincerely,

A handwritten signature in black ink that reads 'Kelli R Winter'.

Kelli R Winter, CHMM
Hydrocarbon Recovery Services Inc, dba FCC Environmental
105 S Alexander Street, Plant City, FL 33563
813-754-1504 ext. 3129
kelli.winter@fccenvironmental.com





8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY
 DEP Waste Management Division-HWRS, MS4560
 2600 Blair Stone Rd. Tallahassee, FL 32399-2400
 (850) 245-8772

Date Received
 (for FDER Official Use Only)
 RECEIVED
 FERRIS

EPA ID **F L D 0 6 5 6 8 0 6 1 3**

MTS RCRAInfo
BY: BSHW

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 Hydrocarbon Recovery Services Inc. d.b.a. FCC Environmental

FEID No. **4 5 0 5 6 9 5 5 7**

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

Name of Operator: Hydrocarbon Recovery Services Inc. d.b.a. FCC Environmental

New Operator
 Date became Operator: ___/___/___
 mm dd yy

Street or P.O. Box: 105 S. Alexander Street **Phone Number:** 813-754-1504

City or Town: Plant City **State:** FL **Zip Code:** 33563

Operator Type: Private Federal Municipal State Other

4. Facility Physical Location Information

Physical Street Address: 105 S. Alexander Street

City or Town: Plant City **State:** FL **Zip Code:** 33563

County: Hillsborough **If available, please attach a map or sketch of the facility boundaries.**

Latitude: 28° 00' 45.6" **Longitude:** 82° 08' 17.1" **Method:** geocoder
 d d m m s s . ssss d d m m s s . ssss **Datum:**

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

A. 423930 B. _____
 C. _____ D. _____

6. Facility or Business Mailing Address

Street Address or P.O. Box: 105 S. Alexander Street

City or Town: Plant City **State:** FL **Zip Code:** 33563

7. Facility or Business Contact Person

First Name: Conrad **Last Name:** Thornburgh **Title:** Branch Manager

Phone Number: 813-754-1504 **Extension:** 3117 **E-Mail:** conrad.thornburgh@fccenvironmental.com

Street or P.O. Box: 105 S. Alexander Street

City or Town: Plant City **State:** FL **Zip Code:** 33563

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: Hydrocarbon Recovery Services, Inc. d.b.a. FCC Environmental

New Owner
 Date became Owner: ___/___/___
 mm dd yy

Street or P.O. Box: 523 N Sam Houston Pkwy East, Ste 400 **Phone Number:** 281-668-3315

City or Town: Houston **State:** TX **Zip Code:** 77060

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 checked="" type="checkbox"/>	unknown (see comments)
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	"
c. Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	"
d. Mercury Containing Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1000 lbs on-site
e. Mercury Containing Lamps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1000 lbs on-site

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

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

EPA ID No.

FLD065680613

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
D001	D004	D006	D007	D008	D018	D039
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.

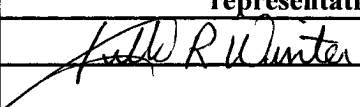
Contact _____ Phone _____

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)
	Kelli R Winter, EH&S Mgr	01/25/2010

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

Kelli R Winter

813-754-1504

kelli.winter@fccenvironmental.com

(Name of person completing this form)

(Phone Number)

(E-mail Address)

13. Comments:

We have not started handling batteries, pesticides, or pharmaceuticals.