



Department of Environmental Protection

Lawton Chiles
Governor

Central District
3319 Maguire Boulevard, Suite 232
Orlando, Florida 32803-3767

Virginia B. Wetherell
Secretary

October 23, 1997

CERTIFIED MAIL
P 337 151 208

Attention: Mr. David Brindlecombe, Facility Supervisor
Ringhaver Equipment Company
Post Office Box 30169
Tampa, Florida 33630-3169

OCD-HW/C-97-0495

Volusia County - HW
Ringhaver Equipment Company
401 North Tomoka Farms Road, Daytona Beach
FLR000024158

Dear Mr. Brindlecombe:

Thank you for meeting us at Ringhaver's Daytona Beach facility, October 10, 1997, for a routine hazardous waste inspection. The inspection was conducted to determine facility compliance with hazardous waste regulations found in Chapter 40, Code of Federal Regulations (CFR), Parts 260-268, adopted in Florida Administrative Code Chapter 62-730, and used oil regulations 40 CFR Part 279, adopted in Florida Administrative Code Chapter 62-710. This inspection follows those performed at the Ringhaver Orlando location.

The facility has five Safety Kleen "green" parts washers and is on a laundry service with *Cintas*. Painting operations are not performed at the Daytona Beach facility. Records for parts washer service, performed by Safety Kleen, used oil, used oil filters, and antifreeze disposal, performed by Magnum, were reviewed. One Land Disposal Restriction notification form was missing for Safety Kleen manifest number 10621. Within 15 days of receipt of this letter, forward a copy of the document to the above address.

I may be reached at (407) 893-3323 if there are any questions.

Sincerely,

Lu Burson
Environmental Specialist
Hazardous Waste

cc: Paul Valanti, Daytona Beach Service Manager

"Protect, Conserve and Manage Florida's Environment and Natural Resources"

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

OCT 23 1997

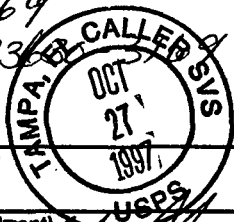
I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

David Brundelcombe
 Rughover Equipment Co
 P.O. Box 30169
 Tampa FL 33616



4a. Article Number

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4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X

[Handwritten signature]

8. Addressee's Address (Only if requested and fee is paid)

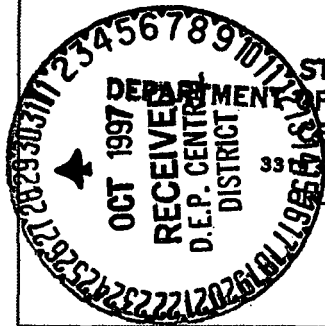
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STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
CENTRAL DISTRICT
33 MAGUIRE BLVD., SUITE 232
LANDO, FL 32803 - 3767

