



# Florida Department of Environmental Protection

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

Rick Scott  
Governor

Jennifer Carroll  
Lt. Governor

Herschel T. Vinyard, Jr.  
Secretary

03/01/2011  
Sonny Watson, Owner  
Pensacola Recycling Inc  
3185 Newton Dr  
Pensacola, FL 32503-5106

The Florida Department of Environmental Protection has reviewed your form 8700-12FL notification for a new hazardous waste DEP/EPA Identification Number or status/information change. Based on the information received you must use the following identification number for all manifests or reports for **Pensacola Recycling Inc** located at **195 E Fairfield Dr, Pensacola , FL32503-2956**

**FLR000136861**

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not require a separate submission: Non-Handler of Hazardous Waste; Small Quantity Handler, Universal Waste Batteries, Universal Waste Lamps, Universal Waste Devices.**

Your facility is **currently registered** for the following activities: **UW Lamp Transporter, UW Device Transporter, UW Lamp SQH, UW Device SQH (reg exp on 03/01/12).**

Your facility is **currently permitted** as: **No Active Hazardous Waste Treatment, Storage, or Disposal Permit.**

If you have pending program registrations/certifications or permits, these will be mailed separately. You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status, activity or contact information. The form is found here:

<http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm>.

**To review the details of your status**, visit:

[http://appprod.dep.state.fl.us/www\\_RCRA/Reports/handler\\_results.asp?epaid=FLR000136861](http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLR000136861).

For further assistance, please e-mail a Notification Coordinator at [EPOST\\_HWreg@dep.state.fl.us](mailto:EPOST_HWreg@dep.state.fl.us) or call us at (850)245-8707.

Sincerely,

FOR

Glen Perrigan  
Environmental Manager  
Hazardous Waste Regulation Section

ME ID: 78235 , Email Address: [prrecyclinginc@aol.com](mailto:prrecyclinginc@aol.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 FDEP Official Use Only)

EPA ID FLR000136861

MTS

RCRA info

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

PENSACOLA RECYCLING INC

FEID No.

593552918

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

Name of Operator:

FRANK (SONNY) H. WATSON III

New Operator

Date became Operator: mm dd yy

Street or P.O. Box:

3185 NEWTON DR

Phone Number:

850-432-7833

City or Town:

PENSACOLA

State:

FL

Zip Code:

32503

Operator Type: Private

Federal

Municipal

State

Other

4. Facility Physical Location Information

Physical Street Address:

195 EAST FAIRFIELD DR

City or Town:

PENSACOLA

State:

FL

Zip Code:

32503

County:

Escambia

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

Latitude:

dd mm ss.ssss

Longitude:

dd mm ss.ssss

Method:

Datum:

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

A.

561790

B.

C.

D.

6. Facility or Business Mailing Address

Street Address or P.O. Box:

3185 NEWTON DRIVE

City or Town:

PENSACOLA

State:

FL

Zip Code:

32503

7. Facility or Business Contact Person

First Name:

SONNY

Last Name:

WATSON

Title:

OWNER

Phone Number:

(850) 432-7833

Extension:

E-Mail:

PRRECYCLINGINC@AOL.COM

Street or P.O. Box:

3185 NEWTON DR

City or Town:

PENSACOLA

State:

FL

Zip Code:

32503

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:

UNCLE BOBS SELF STORAGE

New Owner

Date became Owner: mm dd yy

Street or P.O. Box:

195 EAST FAIRFIELD DR

Phone Number:

(850) 433-7638

City or Town:

PENSACOLA

State:

FL

Zip Code:

32503

Owner Type: Private

Federal

Municipal

State

Other

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

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

**(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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	600 LBS
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Pharmaceuticals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Mercury Containing Devices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	50-100 LBS
e. Mercury Containing Lamps	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	less than 4,400 pounds

(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

\_\_\_\_\_  
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)
	FRANK H. WATSON III	02/09/2011

If the person who filled in this form is not the Facility Contact or Operator, please complete the information below:  
**FRANK H WATSON III**      **8504327833**      **PRRECYCLINGINC@AOL.COM**  
 (Name of person completing this form)      (Phone Number)      (E-mail Address)

**13. Comments:**

## **Plan of Operation for Pensacola Recycling.**

**January 1, 2011**

**Pensacola Recycling has a call list and this list has each month, 90 days, 6 months, one year and will call. This depends on how the account is set up. We call the customer or the customer will call us for a pick up. We schedule a day to go pick the up and we ask them how many bulbs they have, and are they loose or in boxes. Some of our company's we give 150 Count Fiber drum to put there 4 Ft. bulbs in for storage and other use them for the U- shaped bulbs for storage.**

**Every Job is different. Some customer don't know how many Bulbs they have on hand and they will tell us maybe 100 bulbs and when we get there they have about 1,000 or more and ballast. We had that happen several time.**

**Went we go to a job and fine a few bulbs broken we sweep the broken bulb up and put it into a DOT bucket. If there is a full box of 30 count bulbs broken, we tape all opening and we put the box into a 150 count Fiber drum for safety.**

**If customers call about a mercury spill we refer them to Southern Waste Services and let them handle it from there until they need us to come get the material already contained in a five gallon bucket or larger container.**

**In 1999 we had a customer call us and tell me that they had some manufacture Mercury containing article in two 55 Gal steel drum, The first thing I ask the customer was any of the article broken and they told me no, they we all intact. When I got to the Job, I open the first drum and found several articles that were broken. I closed the drum and resealed the drum. I call the customer and told him what I had found and told him we would have to ship it out hazard waste and he would**

**have to let the DEP for that month that his company generated Hazard waste.**

**I called Southern waste service to see if they had and Plastic bags and any 85 gal drums on hand, which they did and two bags of absorbent material.**

**When we got back to the job we weighed the 55 gallon drum and the 85 gallon drum and the 2 bags of absorbent material. Then we weighted the 55 gallon drums that contained the mercury articles. We took the fork lift and lifted the 55 gallon drum and slid the plastic bags on the drum and lined the 85 gallon drum with absorbent material and then put the 55 gallon drum into the 85 gallon for shipping. After the 55 gallon drum was in the 85 gallon drum we weighed both together to get an accurate weight for the BOL with Veolia Technical Solutions. Once everything was contained we then called our recycling facility we use out of Tallahassee and set up the date and time for them to come and pick up the mercury articles.**

**If you should have any other questions about our Plan of Operations that we may have missed, please call us at 850-432-7833.**

**Sincerely,**

**Sonny Watson  
Jennifer W. Zam**



# Florida Department of Environmental Protection

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

Received  
FEB 11 2011

Charlie Crist  
Governor  
  
Jeff Kottkamp  
Lt. Governor  
  
Michael W. Sole  
Secretary

**BSHW**

## UNIVERSAL WASTE LAMP AND DEVICE TRANSPORTER AND TRANSFER FACILITY INFORMATION CHECKLIST

The Department requires that all universal waste lamp and device transporters and transfer facilities registered under Rule 62-737.400, F.A.C., complete and sign this Information Checklist. This information will be used to evaluate compliance with subparagraph 62-737.400(1)(b), F.A.C. **Your transporter registration will not be issued until you complete and return the checklist.** Handlers that are not engaging in transport activities need not complete this form.

PENSACOLA RECYCLING, INC		<table border="1" style="border-collapse: collapse; width: 100%;"> <tr> <td style="width: 12.5%;">FL</td> <td style="width: 12.5%;">R</td> <td style="width: 12.5%;">0</td> <td style="width: 12.5%;">0</td> <td style="width: 12.5%;">1</td> <td style="width: 12.5%;">3</td> <td style="width: 12.5%;">6</td> <td style="width: 12.5%;">6</td> <td style="width: 12.5%;">1</td> </tr> </table>		FL	R	0	0	1	3	6	6	1
FL	R	0	0	1	3	6	6	1				
<small>(Facility Name)</small>		<small>(EPA id)</small>										
3185 NEWTON DR	PENSACOLA	FL	32503									
<small>(Street Address)</small>	<small>(City)</small>	<small>(State)</small>	<small>(Zip)</small>									
(850) 432-7833	(850) 432-2442	prrecyclinginc@aol.com										
<small>(Phone)</small>	<small>(Fax)</small>	<small>(E-mail)</small>										

Section 1: For all transporters and transfer facilities (in-state and out-of-state).  
Complete all sections and check all boxes that apply.

1. Estimated number of LAMPS handled during the last calendar year. 115,670  
Types:          Fluorescent           HID
2. Estimated number of DEVICES handled during the last calendar year. 200  
Types: Thermostats           Electric Switches/Relays   
Thermometers           Manometers           Other  12 lbs liquid merc
3. Estimated weight of DEVICES handled during the last calendar year. 100 merc cap lb.
4. Estimated number of lamps or devices you shipped to each lamp recycling facility. Check the boxes for lamps (L) or devices (D). Give the facility name, location, and contact information.

Number	L	D	Facility Name	City	State	Phone
115,670	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Veolia Tech. Solutions(Linda)	Tallahassee	FL	18668778299
100	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Veolia Tech. Solutions(Linda)	Tallahassee	FL	18668778299
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				

Frank H Watson III		02/09/2011
<small>Print Name of Authorized Agent</small>	<small>Signature of Authorized Agent</small>	<small>Date</small>





# Florida Department of Environmental Protection

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

Charlie Crist  
Governor

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Lt. Governor

Michael W. Sole  
Secretary

## Section 2: For out-of-state transporters and transfer facilities only

1. Is any environmental agency in your state aware of your activities as a transporter or transfer facility for universal waste lamps and devices in Florida?

Yes

No

2. If you have not already done the following in previous years, please enclose some written verification from that environmental agency that they are aware of your activities as a transporter for universal waste lamps and devices in Florida and in your state. This verification can be in the form of a letter to you or to the Department, a registration, a permit, etc.

Submitted Previously

Submitted in What Year? \_\_\_\_\_

Print Name of Authorized Agent \_\_\_\_\_

Signature of Authorized Agent *Frank H. [Signature]*

Date *2/9/2011*

**Complete, sign and return this checklist along with your registration form to:**

EPA ID Notification Coordinator  
Hazardous Waste Regulation Section MS 4560  
Department of Environmental Protection  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

**Your transporter registration will not be issued until you complete and return this checklist.**

### QUESTIONS OR COMMENTS?

If you have any questions or comments, please contact Laurie Tenace at (850) 245-8759 or via e-mail at [laurie.tenace@dep.state.fl.us](mailto:laurie.tenace@dep.state.fl.us).

**Thank you for your cooperation in providing this information.**

TransChkl.doc