



June 16, 2004

Ms. Kelly M. Honey
Environmental Specialist – Hazardous Waste Program
Florida Department of Environmental Protection
3804 Coconut Palm Drive
Tampa, Florida 33619-8318



Dear Ms. Honey:

Enclosed please find two documents related to the May 25 compliance inspection conducted at the Progress Energy – Wildwood Operations Center in Wildwood, Florida. The first is a revised Central Hazardous Waste Storage Area Weekly Inspection Form. This form was revised at the corporate level to reflect changes deemed necessary as a result of the compliance inspection at the Wildwood facility. Thank you very much for your input regarding the improvement of this form. The second enclosure is a copy of EPA Form 8700-12, RCRA Subtitle C Site Identification Form, to provide an amendment to the Subsequent Notification of Regulated Waste Activity. The Florida Department of Environmental Protection form, Request for Status or Information Change, is also attached. The originals of the latter two forms were sent to the DEP Hazardous Waste Regulation Section office in Tallahassee.

As a result of the compliance inspection, the following items were also addressed:

- Personnel responsible for the inspection of the Wildwood facility central hazardous waste storage area were instructed to enter all data required by the Florida Administrative Code and RCRA requirements, including the entry of the full name of the person completing the storage area inspection. In addition, only one inspection form will be used.
- A USED OIL label was placed on the tanker used for batching oil prior to offsite shipment.

Thank you for taking the time to discuss the results of the compliance inspection with me and Scott Stenger. Your input enabled us to improve environmental performance at Progress Energy.

Please contact me at (919) 662-6165 if you have any comments or require additional information.

Sincerely,

A handwritten signature in black ink that reads 'James P. Haggett'.

James P. Haggett
Lead Environmental Specialist

Central Hazardous Waste Storage (Accumulation) Area Weekly Inspections Form

Instructions: Perform inspection weekly; include the inspector's full name. For each question, use (Y) for Yes and (N) for No. If answer is "No", note problem and corrective actions under the "Comments" section along with the date corrective action was taken.

This record must be kept on-site for 3 years from the date the waste was transported off-site.

Start Date:	End Date:						
Inspector (full name) ¹ <i>Print legibly</i>							
Date							
Time ¹							
Number of containers ¹							
Are containers in good condition: <ul style="list-style-type: none"> • Sealed, bungs tight • Not rusted • Heads not bulging • DOT-approved containers • Not leaking 							
Completed hazardous waste label on container: <ul style="list-style-type: none"> • Container contents marked • Accumulation start date 							
Appropriate signage present: <ul style="list-style-type: none"> • Restricted access • No smoking sign, if applicable 							
Accumulation time: <ul style="list-style-type: none"> • Less than 90 days for LQGs • Less than 180 days for SQGs and CESQGs 							
Storage (Accumulation) area maintained: <ul style="list-style-type: none"> • Free of structural deterioration • Free of leaks • Adequate aisle space for unobstructed movement • Free of trash and debris 							

¹Florida hazardous waste regulations (FL Ch. 62-730.160(6)) require that weekly storage (accumulation) area inspections include the time of the inspection, the number of containers (enter 0 if there are no containers in the storage (accumulation) area), and the legibly printed name of the inspector.



OUT OF BUSINESS:

_____ Business closed on _____ (Date)

NON-HANDLER STATUS

This status change is requested because:

_____ Business no longer generates, transports, treats, stores, or disposes of hazardous waste.

_____ Waste generated by business has been delisted.

_____ Other; explain:

HAZARDOUS WASTE TRANSFER FACILITY STATUS

_____ Hazardous waste transfer facilities must also notify as a hazardous waste transporter and must comply with FAC 62-730.170 and 62-730.171.

Please attach any documentation or additional explanations and justification to support your request for a status change. You may be asked to submit additional information.

I HEREBY CERTIFY THAT UNDER PENALTY OF LAW I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS DOCUMENT AND ALL ATTACHMENTS AND THAT, BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

James P. Haggett Lead Environmental Specialist
NAME TITLE

James P. Haggett 6/14/2004
SIGNATURE DATE

Please mail completed forms to :

Hazardous Waste Regulation Section
Florida DEP, MS 4560
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Attachment: EPA Form 8700-12 and instructions

<p>SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.</p>	<p>United States Environmental Protection Agency</p> <p>RCRA SUBTITLE C SITE IDENTIFICATION FORM</p>		
<p>1. Reason for Submittal (See instructions on page 13.)</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p>Reason for Submittal:</p> <p><input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)</p> <p><input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report</p>		
<p>2. Site EPA ID Number (page 14)</p>	<p>EPA ID Number</p> <p style="text-align: center;">F.L.D. 29.43.6.63.1</p>		
<p>3. Site Name (page 14)</p>	<p>Name:</p> <p style="text-align: center;">Progress Energy - Wildwood Operations Center</p>		
<p>4. Site Location Information (page 14)</p>	<p>Street Address: 4306 E. County Road 462</p>		
	<p>City, Town, or Village: Wildwood</p>	<p>State: Florida</p>	
	<p>County Name: Sumter</p>	<p>Zip Code: 34785</p>	
<p>5. Site Land Type (page 14)</p>	<p>Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		
<p>6. North American Industry Classification System (NAICS) Code(s) for the Site (page 14)</p>	<p>A.</p> <p style="text-align: center;">22122</p>	<p>B.</p>	
	<p>C.</p>	<p>D.</p>	
<p>7. Site Mailing Address (page 15)</p>	<p>Street or P. O. Box: 4306 E. County Road 462 (Bldg. E)</p>		
	<p>City, Town, or Village: Wildwood</p>		
	<p>State: Florida</p>		
	<p>Country: United States</p>	<p>Zip Code: 34785</p>	
<p>8. Site Contact Person (page 15)</p>	<p>First Name: Jon</p>	<p>MI: A</p>	<p>Last Name: Simpson</p>
	<p>Phone Number: 352-748-8711 Extension:</p>		<p>Email address:</p>
<p>9. Operator and Legal Owner of the Site (pages 15 and 16)</p>	<p>A. Name of Site's Operator: Progress Energy Service Co., LLC</p>		<p>Date Became Operator (mm/dd/yyyy): 11/12/2001</p>
	<p>Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		
	<p>B. Name of Site's Legal Owner: Progress Energy Florida, Inc.</p>		<p>Date Became Owner (mm/dd/yyyy): 11/12/2001</p>
<p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			

9. Legal Owner (Continued) Address	Street or P. O. Box: <u>P.O. Box 1551</u>	
	City, Town, or Village: <u>Raleigh</u>	
	State: <u>North Carolina</u>	
	Country: <u>United States</u>	Zip Code: <u>27602</u>

10. Type of Regulated Waste Activity
Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 16 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

1. Generator of Hazardous Waste
If "Yes", choose only one of the following - a, b, or c.
- a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
 - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
 - c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities.

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

- 2. Transporter of Hazardous Waste
- 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.
- 4. Recycler of Hazardous Waste (at your site)
- 5. Exempt Boiler and/or Industrial Furnace
If "Yes", mark each that applies.
 - a. Small Quantity On-site Burner Exemption
 - b. Smelting, Melting, and Refining Furnace Exemption
- 6. Underground Injection Control

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. If "Yes", mark all boxes that apply:

	<u>Generate</u>	<u>Accumulate</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

2. Destination Facility for Universal Waste
Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

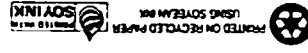
- 1. Used Oil Transporter
If "Yes", mark each that applies.
 - a. Transporter
 - b. Transfer Facility
- 2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.
 - a. Processor
 - b. Re-refiner
- 3. Off-Specification Used Oil Burner
- 4. Used Oil Fuel Marketer
If "Yes", mark each that applies.
 - a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
 - b. Marketer Who First Claims the Used Oil Meets the Specifications

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. F L D 0 2 9 4 3 6 8 3 1 2 7 0 0 6		Manifest Document No. 27006		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.									
3. Generator's Name and Mailing Address Florida Power Corp Wildwood Operations, 4308 East C-462 Wildwood, FL 34785				A. State/Manifest/Document Number		B. State/Generator's ID SAME											
4. Generator's Phone (352) 748-8721		5. Transporter 1 Company Name Clean Harbors Env Services Inc		6. US EPA ID Number M A D 0 3 9 3 2 2 2 5 0		C. State/Transporter's ID		D. Transporter's Phone (781) 949-1800									
7. Transporter 2 Company Name		8. US EPA ID Number		E. State/Transporter's ID		F. Transporter's Phone											
9. Designated Facility Name and Site Address Clean Harbors Florida LLC 170 Bartow Municipal Airport Bartow, FL, 33830				10. US EPA ID Number F L D 9 8 0 7 2 9 6 1 0		G. State/Facility's ID 9 1 2 0 0 1 9 9 9 9		H. Facility's Phone (863) 533-6111									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit W/Vol		15. Waste No.					
						No.		Type									
a. BATTERIES, DRY, CONTAINING POTASSIUM HYDROXIDE SOLID, ELECTRIC, STORAGE , 8 , UN3028 , PG III UNIVERSAL WASTE						0 0 1 C F		0 0 0 0 5 P									
b. RQ HAZARDOUS WASTE, SOLID, N.O.S. (CADMIUM) , 9 , NA3077 , PG III (D008)						0 0 3 D F		0 0 1 4 0 P									
c. X Waste Flammable Liquids N.O.S (mineral spirits Acetone) 3, UN 1993 PG II						0 0 1 D M		0 0 4 2 5 P				D001 D 018 D029 D035 F003 F005					
d.																	
J. Additional Descriptions for Materials Listed Above 11a. ERG#154 (S) 11b. ERG#171 (S)						K. Handling Codes for Wastes Listed Above											
15. Special Handling Instructions and Additional Information 11a: CH32554 11b: 3505243 11c: 6015299 Small box 300F CF 5-GAL 55-G TRK 529101						24 HOUR EMERGENCY # (800) 645 - 8285											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						CR		5/29/03		FS		5/29/03		OFFC			
Printed/Typed Name Richard G. Fowler				Signature <i>Richard G. Fowler</i>				Month Day Year 5/27/03									
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Mike Zuck		Signature <i>Mike Zuck</i>		Month Day Year 5/27/03							
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Month Day Year							
19. Discrepancy Indication Space Line 11B add D006 waste code SP																	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name Deanna M. Harris		Signature <i>Deanna M. Harris</i>		Month Day Year 10/5/29/03							



ORIGINAL-RETURN TO GENERATOR

2959111 9177 3957509 7593



ORIGINAL-RETURN TO GENERATOR

4+36511-514

PLEASE PRINT OR TYPE. (Form designed for use on 12-pitch typewriter.) D0889114 Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **FLD 02843063193003**

2. Page 1 of 1 information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Progress Energy
 Wildwood Operations, 4308 East C-462
 Wildwood, FL 34785

4. Generator's Phone (352) 748-8721

5. Transporter 1 Company Name
Clean Harbors Env Services Inc
 US EPA ID Number **MA D 0 3 8 3 2 2 5 0**

6. US EPA ID Number

7. Transporter 2 Company Name
Clean Harbors Florida LLC
 US EPA ID Number **8 1 2 0 0 1 9 9 9**

8. US EPA ID Number

9. Designated Facility Name and Site Address
170 Bantow Municipal Airport
 Bantow, FL 33830
 US EPA ID Number **FL D 9 8 0 7 2 9 6 1 0**

10. US EPA ID Number

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)
RD HAZARDOUS WASTE, SOLID, N.O.S. (CADMIUM), 9, NA3077, PG III (D008)

12. Containers
 13. Total Quantity
 14. Unit W/Vol
 Waste No. **DD08**

15. Special Handling Instructions and Additional Information
4X5 511015

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
 If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name **Richard G. Fowler**
 Signature *[Signature]*
 Month Day Year **193003**

18. Transporter 2 Acknowledgement of Receipt of Materials
 Printed/Typed Name **Stephen L Bouter**
 Signature *[Signature]*
 Month Day Year **193003**

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
 Printed/Typed Name **Deanna M. McDuffie**
 Signature *[Signature]*
 Month Day Year **193003**

J. Additional Descriptions for Materials Listed Above
 K. Handling Codes for Wastes Listed Above

CR 9/30/03
 FS 10/01/03
 OFFC

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY