

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

02/06/2013 Anna Gillman, Env Svcs Coord St Petersburg College- Clearwater Campus 14025 58th St N Pinellas Park, FL 33781-1207

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 **St Petersburg College- Clearwater Campus** located at **2465 Drew St, Clearwater , FL33765-2816**

FLD982157448

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

Your facility is currently registered for the following activities: None.

Your facility is currently permitted/active 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: <u>http://www.dep.state.fl.us/sate/categories/hwRegulation/pages/NotificationRegulatedWaste.htm</u>.

To review the details of your status, visit:

http://appprod.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLD982157448.

For further assistance, please e-mail a Notification Coordinator at <u>EPOST_HWreg@dep.state.fl.us</u> or call us at (850)245-8707.

Sincerely,

River M Shim

Glen Perrigan Environmental Manager Hazardous Waste Regulation Section

ME ID: 33322 , Email Address: gillmanna@spcollege.edu

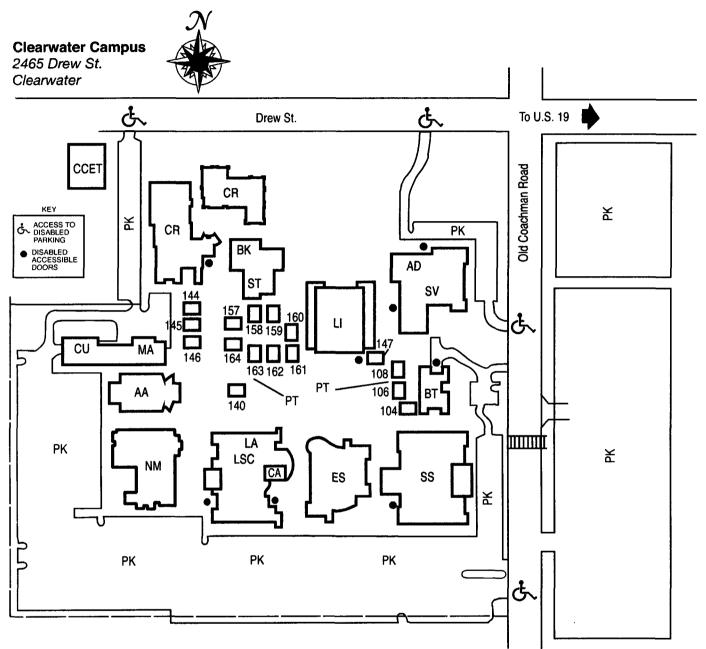
FLORIDA	8700-12 RI DEP V 2600	19			cial Use Only)			
EPA ID FLD	9 8 2 1 5	7 4 4 8	MIS			RCRAI	10 CONTRACTOR	
1. Reason for Submittal	Mark 'X' in correct box: To provide <u>initial notification</u> (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). X To provide <u>subsequent notification</u> (to update status and facility identification information). Is this the <u>final notification</u> (see instructions) for the facility?							
2. Facility or Business Name	St. Petersburg College - Clearwater Campus						1489	
3. Facility Operator (List additional Operators in the	Name of Operator: St. Petersburg College Board of Trustees			New Operator Date became Operator: 02 / 17 / 1988 mm dd yy				
comments section).	Street or P.O. Box: P.O. Box 13489				Phone Nu	mber: 7	27-341-3314	
	City or Town:	burg	State:	FL Zij	o Code:	33733		
	Operator Type: [Private Federal Municipal State Other					
4. Facility Physical Location	Physical Street Address: 2465 Drew Street							
Information	City or Town:	Clearwate	er	State:	FL Zip	Code:	33765	
	^{County:} Pinellas		If available, please attach a map or sketch of the facility boundaries.					
	Latitude: $\begin{bmatrix} 2 & 7 \\ 5 & 7 \\ 5 & 3 \\ 7624 \end{bmatrix}$ Longitude: $\begin{bmatrix} 8 & 2 \\ 4 & 4 \\ 6 & 7152 \end{bmatrix}$ Method: d d mm s s . ssss d d mm s s . ssss Datum:							
5. Facility North Am Classification Syst		A. 6113	10	В.				
Code(s)	C.		D.					
6. Facility or Business Mailing	Street Address or P.O. Box: P.O. Box 13489							
Address	City or Town:	St. Peterst	ourg	State: p	=L Zip	o Code:	33733	
7. Facility or Business Contact	First Name:	Anna	Last Name: Gillman ^{Title:} Env. Srcs. Co			Srcs. Coord.		
Person	Phone Number:	727-341-3314	Extension: E-Mail: gillman.anna@spcollege.edu			pcollege.edu		
	Street or P.O. Box: P.O. Box				x 13489			
	City or Town:	St. Petersb	burg	State:	FL Zij	o Code:	33733	
8. Real Property (Land) Owner of the Facility's Physical Location (Lis: additional real property owners in the comments	Name of Real Property (Land) Owner: St. Petersburg College Board of Trustees			New Owner Date became Owner: <u>12 / 1 / 1965</u> mm dd yy				
	Street or P.O. Boy	^{c:} P.O. B	ox 13489		Phone Nu	1997 1997 1997 1997 1997 1997 1997 1997	27-341-3314	
	City or Town:	St. Petersburg			FL Zil	p Code:	33733	
section.)	Owner Type: Private Federal Municipal State Other							

	EPA ID No. FLD982157448
9. Type of Regulated Waste Activity (Mark 'X' in all th	
A. Hazardous Waste Activities:	For Items 2 through 7, mark 'X' in all that apply.
(1) Generator of Hazardous Waste	(2) Treater, Storer, or Disposer of Hazardous Waste
(Choose only one of the following three categories.)	(at your facility) Note: A hazardous waste permit may be required for this activity.
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of <i>non-acute</i> hazardous waste; or Greater than 1 kg (2.2 lbs) of <i>acute</i> hazardous waste	 a. Operating Commercial TSD b. Operating Non-commercial TSD c. Non-operating: Postclosure or Corrective Action Permit or Consent Order (HSWA, etc.)
 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 <i>non-acute</i> hazardous waste and/or 1 kg (2.2 lbs) or less of <i>acute</i> hazardous waste 	 (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
 c. Conditionally Exempt SQG (CESQG): Generates in any calendar month 100 kg/mo or less (220 lbs.) of <i>non-acute</i> hazardous waste and 1 kg (2.2 lbs) or less of <i>acute</i> hazardous 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.
In addition, indicate other generator activities that apply.	
 d. United States Importer of hazardous waste c. Mixed Waste (hazardous and radioactive) Generator 	(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 Registration must be renewed annually. a. For owr c. Hazardous Waste Transporter Insurance Informati Insurance Company Address 	on
Contact	Telephone
Policy Number d. Transportation Mode 🗌 Air 🔲 Rail 🔲 Highway	Expiration date
e. 🔲 Hazardous Waste Transfer Facility:	Storage Volume
Florida Administrative Code (F.A.C.)]:	ity [Rule 62-730.171(3)(a)3., F.A.C.] operations [Rule 62-730.171(3)(a)4., F.A.C.] 71(3)(a)5., F.A.C.] Rule 62-730.171(3)(a)6., F.A.C.]
Annual update notification	

	FLD982157448		
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	of any combination of UW accumulated		
Small Quantity Handler (SQH) = always less than 5,000 kg accu			
$\square \qquad Mercury-containing devices LQH = 100 kg (220 lb) or more ac$	-		
Mercury-containing devices SQH = less than 100 kg accumulate	ed by for-hire handler		
Mercury-containing lamps LQH = 2,000 kg (4400 lbs/8,000 lam			
Mercury-containing lamps SQH = less than 2,000 kg (8,000 lam	ups) accumulated by for-hire handler		
[Note: 4 lamps = 1 kg, $62-737.200(10)$]			
Pharmaceuticals LQH = 5,000 kg or more of universal pharmace	eutical waste (UPW) accumulated		
Pharmaceuticals LQH = more than 1 kg (2.2 lb) of acutely hazar	rdous ("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 Generate/ Accumulate Transport (see note in instructions) Handle at Transfer Facility	(2) Enter your esitmate of the maximum amount (in pounds) of each type of UW on site or transported at any one time.		
a. Batteries	est. less than 100 lbs. on site at a time		
b. Pesticides			
c. Pharmaceuticals			
d. Mercury Containing Devices	est. less than 5 lbs. on site at one time		
e. Mercury Containing Lamps	est. less than 200 lbs on site at 1 time		
(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 storage prior to recu			
C. Used Oil Activities:	8) Specific Certification to be signed by all Used Oil Transporters		
 (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 	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 orginally 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.		
 a. Transporter b. Transfer Facility c. Processor d. End User 	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 		

			стана (т	EPA ID No.	FLD	982157448		
D. Other State R	Regulated Waste A	.ctivities:		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.								
⁷ D001	² D002	³ D005	[≁] D007	⁵ D008	٥ D011	⁷ D016		
⁸ D022	⁹ D035	¹⁰ F002	¹¹ F003	¹² F005	¹³ P042	¹⁴ P093		
¹⁵ U122	¹⁶ U328	17	18	19	20	21		
22	23	24	25	26	27	28		
11. Other Statu	us Changes (Mar	rk 'X' in all that a	pply):					
(1) Bus (2) Was (3) Othe	(2) Waste generated by business has been delisted.							
 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								
C. Pro	operty Tax Default	t	D. Petitio	on 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 ow	vner, operator, o representative		P	rint Name and 7	Title	Date Signed (mm-dd-yyyy)		
Tulman	<i>Illow</i>		Anna Gillma	an. Env.Servic	es Coordinator			
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		<u>,</u>	 					
If the person who filled in this form is not the Facility Contact or Operator, please complete the information below:								
(Name of person c	completing this form	m)	(Phone Number))			
13. Comments:	;							

Clearwater Campus



CLEARWATER BUILDING CODES

- AA Arts Auditorium
- AD Administration
- BK Bookstore
- BT Business Technologies
- CA Cafe/Food services
- CCET Collaborative Center for Emerging Technologies
- CR Crossroads
- CU Central Utilities
- ES Ethics and Social Sciences
- LA Language Arts

- LI Michael M. Bennett Library
- LSC Learning Support Commons
- MA Maintenance

PT

- NM Natural Science, Math and College of Education
- PK Student parking
 - Portables 104, 106, 108, 140, 144, 145, 146, 147, 157, 158, 159, 160, 161, 162, 163 and 164
- SS Social Sciences
 - Student Life and Leadership
- ST Student Life and Le SV - Student Services