

170 Bartow Municipal Airport Bartow, FL 33830 863.533.6111 Fax 863.519.6363

17 October 2013

OEDT 2 i 2013

Southwest District

Ms. Mary Yeargan
Director, Southwest District
Florida Department of Environmental Protection
13501 N. Telecom Parkway
Temple Terrace, FL 33637

Re: Unmanifested Waste Report

Clean Harbors Florida LLC EPA ID # FLD 980 729 610 Permit #64274-HO-011

Dear Ms. Yeargan:

40 CFR 264.76 requires hazardous waste treatment, storage, and disposal facilities that receive a shipment of hazardous waste not on a hazardous waste manifest to report that shipment to the permitting authority. Clean Harbors Florida LLC received a shipment of waste from Syntheon on BOL 60017, October 08, 2013. Our fingerprint analysis results of October 09, 2013 showed that one drum of material contained bottles of a Videojet Cleaner Solution that had a flash point of <140° F. This material should have been shipped as a UN1993, Waste Flammable Liquid, N.O.S., 3, PG II.

A copy of EPA form 8700-13B is included for this shipment.

Should you have any questions, or require additional information, please contact me at (863) 533-6111.

Sincerely,

John Bosek

Facility Manager

JB/ddesha enclosures

cc:

David Desha

Jim Childress

Syntheon Customer File (WO #MSF8148363)

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HAZARDOUS WASTE REPORT	PART A: GENERATOR ANNUAL REPORT												
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Use this form as a cover for all required reports.	PART B: FACILITY ANNUAL REPORT												
	THIS REPORT IS FOR THE YEAR ENDING DEC 3 2 0 1 3												
	PART C: UNMANIFESTED WASTE REPORT												
	THIS REPORT IS FOR A WASTE												
II. INSTALLATION'S EPA ID NUMBER	RECEIVED (day/mo/yr) 1 0 / 0 8 / 2 0 1 3												
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III. NAME OF INSTALLATION	是一个人的一个人,但是一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的												
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IV. INSTALLATION MAILING ADDRESS													
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V. LOCATION OF INSTALLATION	ASSESSMENT RESIDENCE OF THE PROPERTY OF THE PR												
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VI. INSTALLATION CONTACT	AND THE PROPERTY OF THE PROPER												
NAME (last and first)	PHONE NO. (area code & no.)												
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VII. TRANSPORTATION SERVICES USED (for Part A reports	only)												
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VIII. COST ESTIMATED FOR FACILITIES (For Part B Only)													
A. COST ESTIMATE FOR FACILITY CLOSURE													
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IX. CERTIFICATION	The state of the s												
certify under penalty of law that I have personally examined and am far	niliar with the information submitted in this and all all all all all												
and that based on the inquiry of those individuals immediately responsib	the for obtaining the information, I believe that the submitted information is												
inde, accurate, and complete. I am aware that there are significant pena	Ities for submitting false information, including the possibility of												
fines and imprisonment.	5 sudding the possibility of												
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A Print or Time Name	Dank 10/17/13												
A. Print or Type Name	B. Signature C. Date Signed												

FACILITY REPORT - PARTS B & C																				
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	E ONLY	2. Received By	POR	Γ (en	ter	an >	()	XVII. FACILITIES EPA ID NO.												
(items 1 & 2)										FLD980729610										
XVIII.	ERATOR'S ADDRESS (street or PO box, city, state, & zip co													coc	ie)					
FLICES QG																				
Syntheon 13755 SW 119th Ave. Miami, FL 33186																				
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XIX. W	ASTE IDE	NTIFICATION																		
LINE NUMBER		B. EPA HAZARDOUS WASTE NUMBER					C. HANDLING METHOD			D. AMOUNT OF WASTE					TO STIMI.	E. UNITS OF MEASURE				
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XXII. COMMENTS (enter information by line number - see instructions)																				
Line item 2 This waste was originally shipped as Non-Regulated Material (N-Methyl-2-Pyrrolidone, Ammonia) The sample flashed at <140 F.																				
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