

FYI

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LUIS RENE FIGUEREDO
DIAL DIRECT (305) 579-0364

October 26, 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

RECEIVED
OCT 31 1988

Mr. Paul Wierzbicki
Environmental Supervisor II
Waste Programs
Florida Department of
Environmental Regulation
1900 S. Congress Avenue
Suite A
West Palm Beach, Florida 33046

RECEIVED
NOV 11 1988

Dept. of Environmental Reg.
West Palm Beach

HAZARDOUS WASTE

Re: Integrated Resource Recovery
Response to Request for Information

Dear Mr. Wierzbicki:

This letter will serve as Integrated's official response to the Department of Environmental Regulation's request for information dated October 24, 1988. I have attached a legible copy of the manifest for the material contained in the tanker trailer (Florida license plate No. 14145 E). The hazardous waste material was properly transported and delivered to the Oldover facility, (EPA ID No. FLD 000737312904-269-6206) in accordance with 40 CFR 263 and 17-30 F.A.C. Mr. Van Dooren informed me that on the return trip the driver developed engine trouble. The driver disconnected the empty tank trailer, parked it in the rest area in Fort Pierce and proceeded into town to repair the truck. Once the truck was repaired, the driver returned to the rest area, reconnected the empty tanker trailer and proceeded to the Integrated facility. In response to your question regarding the brown substance, Mr. Van Dooren explained that several months ago at the Integrated facility a small amount of paint resin was discharged out of a hose onto the top of the tank trailer. The leak was very small and none of the paint resin was spilled onto the pavement. The cigarette butts were apparently on the premises prior to parking the tank trailer.

I have also attached a copy of a letter from State Farm Insurance Company to the Florida Department of Environmental Regulation which was inadvertently addressed to

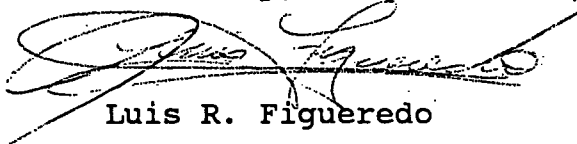
MORGAN, LEWIS & BOCKIUS

Mr. Paul Wierzbicki
Page -2-
October 27, 1988

DER in Tampa. The State Farm letter states that the copy of the cancellation notice for Integrated Resource Recovery Inc. Policy No. 8984 492 59 was sent in error. Further, State Farm states in its letter that the policy is current and in force. Integrated's hazardous waste transportation vehicles are all insured. Hence Integrated Resource Recovery is in compliance with Chapter 17-30 of the Florida Administrative Code addressing transporter liability coverage.

If you have any further questions regarding your observations of the October 22, 1988 incident or require additional information please do not hesitate to contact me.

Sincerely,



Luis R. Figueredo

LRF/go
Encs.

c.c. Charles Biderman

State Farm Insurance Companies



September 7, 1988

Florida Office
9425 Lake Alfred Road
Winter Haven, Florida 33888-0007

The Florida Department of Environmental Regulation
4520 Oakfair Blvd.
Tampa, FL 33610-7347

Gentlemen:

RE: Policy: A984 492 59
Integrated Resource Recovery Inc.

Attached is a copy of a cancellation notice we sent you on this policy number. Please note this cancellation notice was sent in error. Policy number A983 942 59 is being cancelled. However, policy A984 492 59 should remain in force.

If a new filing is needed showing the current in-force policy number, please forward a new filing to our office. We will complete it and return it to your office showing continuous coverage on policy number A984 492 59.

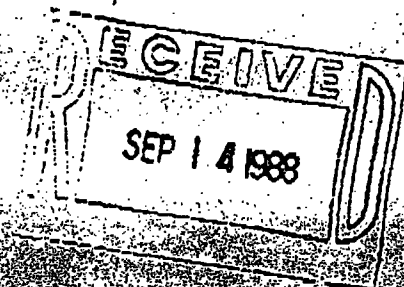
Sincerely,

Al Cash
Supervisor
FJUA Department

CV:jd/39-7

Attachment

cc: Integrated Resource Recovery
Rollins, Burdick, Hunter of Florida 4112



UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **FL098101877300046**

Manifest Document No.

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

3. Generator's Name and Mailing Address: **INTEGRATED RESOURCE RECOVERY
3811 S.W. 47TH AVE SUITE 615
DADE FL 33314**

A. State Manifest Document Number **870184**

B. State Generator's ID

4. Generator's Phone (305) **583-3795**

5. Transporter 1 Company Name **INTEGRATED RESOURCE RECOVERY**

6. US EPA ID Number **FL0981018773**

C. State Transporter's ID

D. Transporter's Phone **305-583-3795**

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: **OLDOVER CORPORATION
STATE ROAD 209 A
GREEN RIVE SPRINGS, FL 32043**

10. US EPA ID Number, **FL0000737312**

G. State Facility's ID

H. Facility's Phone **904-269-6206**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

1. Waste No.

a. **WASTE FLAMMABLE LIQUID N.O.S.
UN. 1993**

001 TT

03.2.08

G

**F005
F003**

b.

c.

d.

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
**S-02, T-18, LT. W1.
R35 ROTARY KILN**

15. Special Handling Instructions and Additional Information **THIS IS A COVER MANIFEST FOR STOPS
PICKED UP INDIVIDUALLY AND COMBINED INTO ONE LOAD.**

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 governmental 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.

Printed/Typed Name **DENNIS WILLIAMS**

Signature *Dennis Williams*

Month Day Year **10 20 89**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name **John Morone**

Signature *John Morone*

Month Day Year **10 20 89**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space:
2910 GALLONS REC. AT PLANT

20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

Signature *Alvin G...*

Month Day Year

AND TRANSPORTER #1

GENERATOR

TRANSPORTER

FACILITY