## Synergy Recycling LLC A Refined Solution to Environmental Services

Date: May 28, 2014

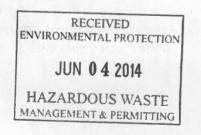
Florida Department of Environmental Protection Hazardous Waste Management Section 2600 Blair Stone Road, Mail Station 4555 Tallahassee, Florida 32399-2400

To whom it may concern:

Please be advised that this notification is in accordance with our facility's SPCC plan notification procedures. The attached report is an accurate description of a minor spill that occurred on May 27, 2014. The spill was contained and cleaned in accordance with all applicable regulations. There is no potential harm to human health or the environment. You may contact me directly at (813) 410-4974 with any questions you may have.

Sincere

Jeff Englin, Plant Manager



Synergy Recycling LLC

A Refined Solution to Environmental Services

Minor Spill Report:

Date of Spill: May 27, 2014

Time of Spill: 7:30 PM

Spill Location:

SYNERGY RECYCLING OF CENTRAL FLORIDA, LLC 3800 WEST LAKE HAMILTON DRIVE WINTER HAYEN, FLORIDA 33881 (866) 492-6789 ext. 301

SE 1/4 of NE 1/4 of Section 6, Township 28 South, Range 27 East Latitude 28° 04' 42" and Longitude 81° 39' 39"

U.S. EPA ID. NO. FLR 000 053 611

Responder: Mr. Jeffery Englin, Plant Manager (813) 410-4974

Product Spilled: Used Motor Oil

Quantity: 95 Gallons

Method of determining Quantity: Tank Gauge

Emergency Response Contractor: SWS Environmental, located at 18630 US HWY 27 S, Lake Wales, Florida 33853, telephone number (800) 881-8369

Injuries: None

Fire Risk: None

Surface Water/Ground Water Media Affected: None

Media Affected: Asphalt Paving/Gravel Parking Area

Spill Diagram: Attachment A

Chronological log of events and communication during incident:

At approximately 7:30 pm on May 27, 2014 James Clements, the plant assistant, was transferring product from a used oil collection truck into storage tank #4. During the transfer a pneumatic valve failed on the adjacent truck compartment causing the flow of oil to transfer into this compartment instead of transferring into storage tank #4 as designated. Mr. Clements was filling out his paperwork within 15 feet on the south side of the truck when the spill occurred. The spill occurred from overflowing the compartment and draining to the north of the property. Mr. Clements did not realize the spill immediately as he was standing on the south side of the truck. The spill traveled on inclined asphalt paving following a driveway path into the gravel parking area. Mr. Clements immediately implemented the SPCC Plan by first containing the spill and immediately notifying Jeff Englin. Because the used motor oil traveled onto a non-impervious surface "Gravel Parking Area" Mr. Englin immediately contacted SWS for emergency response assistance. SWS responded at approximately 9:00 pm with 4 personal, Bobcat and a 20 yard roll off container. At 3:00 am the cleanup was complete. Approximately 10 yards of contaminated gravel was removed from the

surface and placed into the roll off for safe disposal of site. The Asphalt paving was cleaned and oily residue removed. The spill was contained and cleaned within a short period of time.

Disposition of spill material: Contaminated Gravel will be tested in accordance with all regulations and safely disposed of at a permitted facility. Upon receipt the Department will be provided a copy of the disposal manifest.

Corrective Action: Used Oil Collection Pneumatic valve will be immediately repaired. A copy of the repair will be placed in this file.

Verbal Notification: Date: May 28, 2014

Time: 3:00pm

Dept. of Environmental Protection 1-813-632-7600

Notification via Certified US Mail

Florida Department of Environmental Protection Southwest District, Hazardous Waste Section 13051N. Telecom Parkway, Temple Terrace, Florida 33637

Florida Department of Environmental Protection Hazardous Waste Management Section 2600 Blair Stone Road, Mail Station 4555 Tallahassee, Florida 32399-2400

Florida Department of Environmental Protection Bureau of Petroleum Storage Systems 2600 Blair Stone Road Tallahassee, Florida 32399-2400

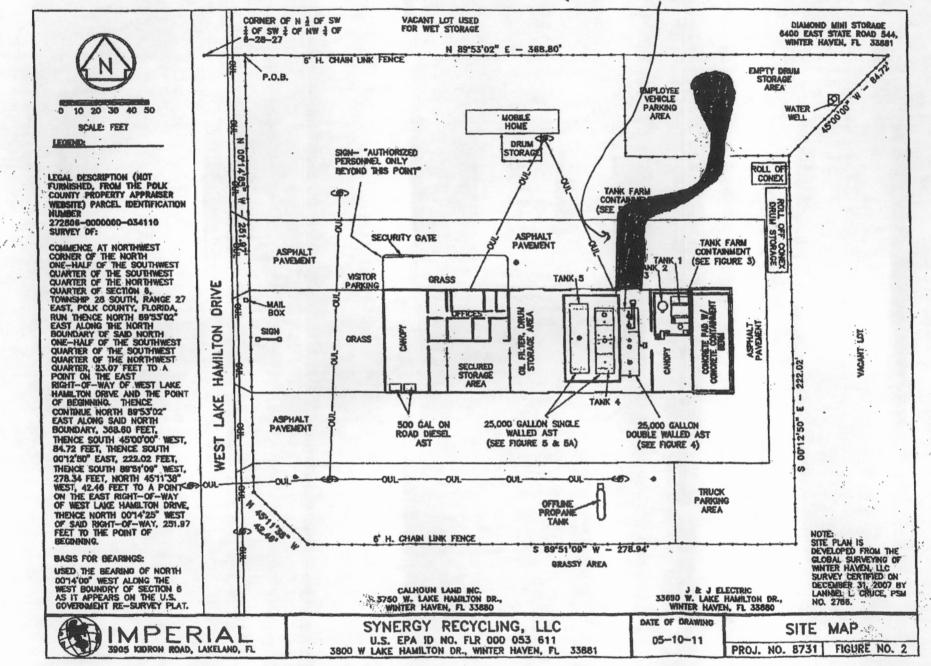
Florida Department of Health in Polk county-Environmental Engineering Division Curtis Peterson Building 200 N. Kentucky Avenue, Suite 404 Lakeland, Florida 33801-4963

This is an accurate report of the spill incident and response efforts.

Jeffery Englin, Plant Manager

Date: May 28, 2014

Attachment A . Spill. (Shaded Aspa Below)



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CONTENTAL PROTECTIONS	<b>Discharge Reporting Form</b>			DEP Form # <u>62-761.900(1)</u> Form Title <u>Discharge Reporting Form</u>
		PLEASE PRINT OR T	TYPE	Effective Date
FLORIDA				
		the reverse side. Please com		
Facility ID Number (if registe	ared): 000 05	3 61 2. Date	of form completion: <u>M</u>	0428,2014
General information	Re cuclino	of Central Elm	ida. 110	
Facility name: <u>SUNERGE</u> Facility Owner or Operator:	Jerfferry El	19/in	iv with the	
Facility Contact Person 12	Pland Grains	Telephone number: (%)	13 410-4914	County: Polk
Facility Mailing address: 39	100 Lovest Lo	the Handon b	mue, Winter Hon	len, FL 33881
Location of discharge (facility Latitude and Longitude of disc	street address): 382	DO West Lake H	amit to Drive; M	linter Laver
			,	. 95
<ol> <li>Date of receipt of test result discovery of confirmed disc</li> </ol>		month/day/year	5. Estimated number	of gallons discharged: 7.3
6. Discharge affected: [] A	Air MSoil []C	round water [] Drinking	g water well(s) [] Shor	eline [] Surface water (water body name
. Method of discovery (check a				
[] Liquid detector (automatic o		Internal inspection	[ ] Closure/Closure A	ssessment
[] Vapor detector (automatic o		Inventory control	[] Groundwater analy	
[] Tightness test		Monitoring wells	[] Soil analytical test	s or samples
[ ] Pressure test		Automatic tank gauging	Visual observation	
[] Statistical Inventory Reconc	ciliation []	Manual tank gauging	[ ] Other	
Type of regulated substance				
[]Unknown	JUsed/waste oil	[] Jet fuel	[] Heating oil	[] New/lube oil
	Aviation gas		[] Kerosine	[] Mineral acid
(write in name or Chemical			avie quantities, pesticides,	ammonia, chlorine, and derivatives
[] Other				······································
Discharge originated from a:	: (check all that apply	) .		
[ ] Dispensing system [	] Pipe	[] Barge	[] Pipeline	
	] Fitting	[] Tanker ship	[] Railroad tank	
	J Valve failure	[] Other Vessel	[] Tank truck	[]Drum
[ ] Other	······			
0. Cause of the discharge: (ch		() C-20	L 1 Callinian	1   Corrosion
	] Puncture	[] Spill [] Human error	[] Collision ] Vehicle Acci	
V Other Failly Sensor		[ ] truinai citor	[] Venicie Addi	[] Instantion muce
		ement aven along	and Spilvoursile	d and sent for disposal
A ACHORS LAKER IN PESPORSE IG	o me usenarge: 100	CHICKY WAY CULK	and the second	and our cooperag
2. Comments: Correction	ie Action: 11	seal Oil Collection	on Kneumatic	Vaule will be immediate
- I MUMICAI MI	copy of the	repair usin p	ILLIA LA TURS	
3. Agencies notified (as applica	abie):			/
	] National Response 1-800-424-8802	Center [] Fire Depar	tment. [] County Tan	ks Program [v] DEP (district/person)
4. To the best of my knowledg	e and belief all infor	mation submitted on this fo	orm is true accurate, and	complete.
				1
J. ~ 2.25	5 1 2 1 1 4 2			
JEffery Ev		esentative S	ignature of Owner. Operation	or or Authorized Representative.
Teffery E.V Printed Name of Owner, Operator		esentative S	Signature of Owner, Operation	or or Authorized Representative.
		esentative S	Signature of Owner, Operat	or Authorized Representative.

## **Incident Notification Form**

DEP Form # 62-761.900(6)

Form Title Incident Notification Form

Effective Date: July 13, 1998

## PLEASE PRINT OR TYPE

Instructions are on the reverse side. Please complete all applicable blanks

1. Facility ID Number (if registered): 000	053611 2.1	2. Date of form completion: 5/28/14		
3. General information				
Facility name: Synergy Recycling of	Central Florida, LLC			
Facility Owner or Operator: Jeffery Er				
Contact Person: Jeffery Englin	Telephone nur	nber: (813)410-4974	County: Polk	
Facility mailing address: 3800 West L				
Location of incident (facility street addre				
Latitude and Longitude of incident (If kn	own.) east latitude 28 04	42" Ingitude 81 39' 39"		
4. Date of Discovery of incident: 5/27/14		nonth/day/year		
5. Monitoring method that indicates a po				
[] Liquid detector (automatic or manual)				
[] Vapor detector (automatic or manual)	[] Monitoring wells	[] Inventory contro		
[] Tightness test	[] Internal inspection	[] Statistical Invent	[] Statistical Inventory Reconciliation	
[] Pressure test	[] Odors in the vicin	Odors in the vicinity [] Groundwater analytical samples		
		ic tank gauging [/] Soil analytical tests or samples		
[/] Visual observation	[] Manual tank gaug			
		]Other		
6. Type of regulated substance stored in	the storage system: (check o	ne)		
Diesel	Used\waste oil	[]]	New/lube oil	
[] Gasoline	[] Aviation gas		Кегозепе	
[] Heating oil	[ ] Jet fuel		Dther	
[] Hazardous substance - includes CERC				
(write in name or Chemical Abstract S		minorina, enternic, and men deriva		
	(		•	
7. Incident involves or originated from a	(check all that apply)			
[/] Tank [] Unusual operation	ting conditions [] Dispe	insing equipment []P	ipe [] Overfill protection device	
[] Piping sump [] Release detection		dary containment system [] O		
[] Loss of >100 gallons to an imperviou			>500 gallons within secondary containment	
8. Cause of the incident, if known: (check	all that annly)		· · · · · · · · · · · · · · · · · · ·	
	Spill (<25 gallons)	[] Theft	[] Corrosion	
	Human error	[] Installation failure	[/] Other <u>95 gallons</u>	
WI rainy riobe of sensor []	Auman error	[] instanation faiture	W] Other 35 galloris	
9. Actions taken in response to the incide	nt: Pavement area clear	ned. soil removed and sent f	or disposal	
			•	
10. Comments: Corrective Action: Use		tic vavle will be immediately	repaired.	
A copy of the repair will be placed in	this file.			
	·····	· · ·		
11. Agencies notified (as applicable):				
a second s		$\bigcirc$		
[] Fire Department.	[] Local Program	I DE	P (district/person)	
12. To the best of my knowledge and beli				
Jeffery Englin				
Printed Name of Owner, Operator or Author	rized Representative	Signature of Owner, Or	grator or Authorized Representative.	
a runne av a trinni a harmen av sunne			/	
		V		
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