Florida Department of Environmental Protection



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NATIVE NAME: ALTA CONSTRUCTION EQUIPMENT FLORIDA LLC

DOC LOG ID: 68619 **CHAZ ID:** FLR000213694

CITY: JACKSONVILLE COUNTY: DUVAL

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HWG Email Template RUOH Email Template Notification Approvals

Document Types

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Email Addresses

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Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	03/17/2021	SIMMONS_JLS	×
HWG	Completeness Review	03/17/2021	ASHWOOD_J	×
HWG	Waiting for information	03/17/2021	ASHWOOD_J	×
HWG	Ready for Data Entry	06/07/2021	ASHWOOD_J	×
HWG	Data Entry Completed	06/07/2021	ASHWOOD_J	×
HWG	Final Review	06/07/2021	ASHWOOD_J	×
HWG	Notification Letter Emailed	06/07/2021	ASHWOOD_J	×
HWG	Booked into Oculus	06/07/2021	ASHWOOD_J	×
RUOH	Logged	03/17/2021	SIMMONS_JLS	×
RUOH	Completeness Review	03/17/2021	ASHWOOD_J	×
RUOH	Waiting for information	03/17/2021	ASHWOOD_J	×
RUOH	Ready for Data Entry	06/07/2021	ASHWOOD_J	×
RUOH	Data Entry Completed	06/07/2021	ASHWOOD_J	

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RUOH	Booked into Oculus	06/07/2021	ASHWOOD_J	×

Comments

Document Type	Date	Comment	Author
General Comment	03/17/2021	Notification has an original signature.	SIMMONS_JLS
RUOH	06/02/2021	Received original 8700 form, registration fee, training manual statement, and Annual Report.	ASHWOOD_J
RUOH	06/07/2021	Email sent to Sheila Mills on 6/2: In reviewing your submittal, we noticed additional information is needed. The Insurance forms submitted has expired (see attached). UO transporters are required to provide an Insurance form for the automobile liability inclusive of pollution liability. However, in the event your policies are separate then we will need you to submit two separate Insurance forms. Please submit the following by Tuesday, June 16, 2021 to continue processing your UO renewal registration (see attached blank forms for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance form for automobile and pollution liability. NOTE: Transporting used oil without a valid registration is a violation of the law, subject to penalties. As soon as possible, please mail the required form(s) with original hand signed signature to: DEP Waste Management Division-HWRS, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any questions.	ASHWOOD_J
RUOH	06/07/2021	Received revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J

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