



## Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Rick Scott  
Governor

Carlos Lopez-Cantera  
Lt. Governor

Jonathan P. Steverson  
Secretary

03/08/2016

Jeff Young  
Univar USA Inc  
2145 Skyland Ct  
Norcross, GA 30071-2960

The Florida Department of Environmental Protection has reviewed your application for registration as a transporter or handler for universal waste lamps and devices destined for recycling. Based on the information received, the facility located at **2145 SKYLAND COURT, NORCROSS, GA 30091-1677** has been registered through **March 1, 2017** with the following status:

Facility ID # **GAD980845077**  
**Transporter of Universal Waste Lamps and Devices**

The registration form for the year **2017** will be sent to the contact person on your application.

Chapter 62-737, Florida Administrative Code (F.A.C.), (copy enclosed) specifies several other requirements including packaging, training and record keeping for transporters and handlers of universal waste lamps or devices destined for recycling. These requirements are simple, flexible and make good business and environmental sense (summarized on enclosed fact sheets).

This registration does not allow you to transport or handle universal waste lamps or devices which are destined for landfill or other disposal. The transportation or handling of universal waste lamps or devices destined for disposal is subject to our hazardous waste management regulations under Chapter 62-730, F.A.C.

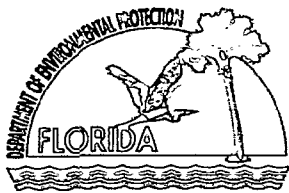
If any of your facility's information on the Florida Notification of Regulated Waste Activity [form 62-730.900(1)(b)] changes, please notify the Department using that form. I can also be contacted at (850) 245-8759 or at [Laurie.Tenace@dep.state.fl.us](mailto:Laurie.Tenace@dep.state.fl.us).

Sincerely,

A handwritten signature in blue ink, appearing to read "Laurie Tenace".

Laurie Tenace  
Environmental Specialist  
Waste Reduction Section

Enclosures



8700-12FL - FLORIDA NOTIFICATION OF REGULATED WASTE ACTIVITY  
 DEP Waste Management Division-HWRS, MS4560  
 2600 Blair Stone Rd. Tallahassee, FL 32399-2400  
 (850) 245-8707

Date Received  
 (for FDEP Official Use Only)  
 MAR 04 2016  
 PERMITTING & COMPLIANCE  
 ASBESTOS PROGRAM

EPA ID: **G A D 9 8 0 8 4 5 0 7 7** Please use the instructions document to complete this form

**1. Reason for Submittal**  
 (all submitters must complete pages 1 and 2 and sign page 5. Pages 3 and 4, - complete as applicable)

Mark 'X' in the correct box:  
 To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, used oil activities, or PCW activities).  
 To provide subsequent notification (to update status and facility identification information).  
 To provide the final notification (closing) for the facility. (see instructions—must complete pages 1,2,5)

FL Registration(s)  UW Mercury (see page 3)  HW Transporter (see page 4)  Used Oil (see page 4)

**2. Facility or Business Name**  
 Univar USA Inc.

**3. Facility Operator**  
 (List additional Operators in the comments section).

Name of Operator: **Univar USA Inc.** Date became Operator: 02 / 02 / 1986  
 Street or P.O. Box: **2145 Skyland Court** Phone Number: **(770) 246-7700**  
 City or Town: **Norcross** State: **GA** Zip Code: **30071** Country (if not USA):  
 Operator Type:  Private  Federal  Municipal  State  County  Other

**4. Facility Physical Location Information**  
 (No P.O. Boxes)  
 Same address as #3 above or:

Physical Street Address: \_\_\_\_\_  Vessel  
 City or Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 County: \_\_\_\_\_ Country (if not USA): \_\_\_\_\_

**5. Facility North American Industry Classification System (NAICS) Code(s)** (at least 5 digits)

A. **4 | 2 | 4 | 6 | 9 | 0** (required) B. \_\_\_\_\_  
 C. \_\_\_\_\_ D. \_\_\_\_\_

**6. Facility or Business Mailing Address**  
 Same address as #3 above or: Street or P.O. Box:  
 City or Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country (if not USA): \_\_\_\_\_

**7. Facility or Business RCRA Contact Person**  
 Same address as #3 above or:

First Name: **Lee** Last Name: **Young** Title: **Operations Mgr.**  
 Phone Number: **(770) 246-7700** Extension: \_\_\_\_\_ E-Mail: **jeff.young@univarusa.com** Fax: \_\_\_\_\_  
 Street or P.O. Box: \_\_\_\_\_  
 City or Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country (if not USA): \_\_\_\_\_

**8. Real Property (FL Land) Owner of the Facility's Physical Location**  
 (List additional owners in the comments section.)  
 Same address as #3 above or:

Name of Owner: **Univar USA Inc.** Date became Owner: 02 / 02 / 1986  
 New Owner mm dd yy  
 Street or P.O. Box: **3075 Highland Pkwy, Suite 200** Phone Number: **(425) 889-3400**  
 City or Town: **Downers Grove** State: **IL** Zip Code: **60515** Country (if not USA):  
 Owner Type:  Private  Federal  Municipal  State  County  Other

**9. RCRA Hazardous Waste Activities at this Facility:** (Mark 'X' in all that apply):

**(A) (1) Generator of Hazardous Waste**

For Items 2 through 7, mark 'X' in all that apply.

Yes  No (Do not include Universal Waste or Used Oil)

If YES, Choose only one of the following three categories.

**a. Large Quantity Generator (LQG):**  
Generates in any calendar month 1,000 kilograms or greater per month (kg/mo) (2,200 lbs.) of non-acute hazardous waste; or Greater than 1 kg (2.2 lbs) of acute hazardous waste (at least once a year)

**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 non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute hazardous waste (at least once a year)

**c. Conditionally Exempt SQG (CESQG):**  
Generates in any calendar month 100 kg/mo or less (220 lbs.) of non-acute hazardous waste and 1 kg (2.2 lbs) or less of acute hazardous waste

In addition, indicate other generator activities that apply.

- d. Short-Term Generator (one-time, not on-going)
- e. Episodic: Not more than one-time per year: \_\_ SQG \_\_ LQG
- f. United States Importer of hazardous waste
- g. Mixed Waste (hazardous and radioactive) Generator

**(2) Treater, Storer, or Disposer of Hazardous Waste**

(at your facility) Note: A hazardous waste permit may be required for this activity.

- a. Operating Commercial TSD
- b. Operating Non-Commercial TSD
- c. Non-Operating: Postclosure or Corrective Action Permit or Order (HSWA, etc.)

**(3)  Recycler of Hazardous Waste (at your facility)**  
Specify:  Commercial  Non-Commercial.  
Note: 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 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.

**(6)  Receives Hazardous Waste from Off-Site**

**(7)  Underground Injection Control**

**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, K019, P012, U112). Hazardous waste transporters list codes routinely or usually transported. Use comments or an additional page if more spaces are needed.

<sup>1</sup> D001	<sup>2</sup> D002	<sup>3</sup> D003	<sup>4</sup> D005	<sup>5</sup> D006	<sup>6</sup> D007	<sup>7</sup> D008
<sup>8</sup> D009	<sup>9</sup> D011	<sup>10</sup> D035	<sup>11</sup> D040	<sup>12</sup> F002	<sup>13</sup> F003	<sup>14</sup> F004
<sup>15</sup> F005	<sup>16</sup> U080	<sup>17</sup> U145	<sup>18</sup> U154	<sup>19</sup> U228	<sup>20</sup>	<sup>21</sup>

**11. Other Status Changes** (If no longer handling waste or closed, sections 9 and 10 should be blank and skip Section 12-16):

**(A) Non-Handler of Regulated Waste at This Facility** (Sections 9, 10 and 12-16 should be blank.)

(1) Business no longer generates, transports, treats, stores, disposes of, or otherwise handles any regulated waste.

**(B) Facility Closed** (Complete this section only if all business activities at this facility have ceased.)

(1) Closed at this location and moved or moving to another - Submit a new Form 8700-12FL for the new location if you will

(2) Out of Business - Business closed on \_\_\_\_\_ (date)

**(C) Property Tax Default**

**(D) Petition for Bankruptcy Protection**

**12-14 — Registration Activities Contact Information** (only if this submission is a registration or registration information update):

<input type="checkbox"/> Same as Facility RCRA Contact on page 1 or enter:  Contact for: <input type="checkbox"/> HW Transporter <input type="checkbox"/> Used Oil Handler <input type="checkbox"/> Universal Waste	First Name: <b>Lee</b>	Last Name: <b>Jarrett</b>	Title: <b>Regulatory Manager</b>
	Phone Number: <b>336-289-8094</b>	Extension:	E-Mail: <b>lee.jarrett@univarusa.com</b>
	Street or P.O. Box: <b>202 Oakdale Rd.</b>		
	City or Town: <b>Jamestown</b>	State:(Country): <b>NC</b>	Zip Code: <b>27282-9201</b>

**12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply) :**

<b>A. Federal Notification</b>	<input type="checkbox"/> <b>Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: <u>5,000 kg (11,000 lb) or more</u> of any combination of UW accumulated (at any one time)</b>  Accumulates: <input type="checkbox"/> <b>a. UW Batteries</b> <input type="checkbox"/> <b>b. Pesticides</b> <input type="checkbox"/> <b>c. Pharmaceuticals</b> <input type="checkbox"/> <b>d. Mercury Containing Devices</b> <input type="checkbox"/> <b>e. Mercury Containing Lamps</b>  <input type="checkbox"/> <b>Destination Facility for UW</b> Note: For this activity, a facility must treat, dispose or recycle a UW. A permit is required for storage prior to recycling.
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**B. Florida Universal Pharmaceutical Waste (UPW): one-time registration**

Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)  
 Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated  
 Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Health [DOH])

**C. Florida Annual Mercury Handler Registration:**

For-hire transporters, transfer facilities, handlers, reclamation and recovery facilities of Mercury-Containing Lamps and Devices operating in the State of Florida are required to register annually with the Department using this section of the form [Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-hire Handler of Mercury-Containing Lamps and Devices as detailed in 62-737.400(3)(a)3. (please contact FDEP first).

If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.

(1) This form is being submitted as a Florida Registration of Universal Waste Transporter/Handler for-hire Activities

First time registering    Renewal    One-time \$1,000 fee for Mercury for-hire first time LQH registration is attached

<input checked="" type="checkbox"/> For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices <input checked="" type="checkbox"/> For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices <input type="checkbox"/> Mercury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler <input type="checkbox"/> Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	Annual Registration Required
<input type="checkbox"/> Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler <input type="checkbox"/> Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	Annual Registration + one-time \$1,000 fee+ More Requirements (contact FDEP)

(2) Mercury Recovery and/or Reclamation Facility (A hazardous waste permit is required for this activity)

First time registering    Renewal

Annual Registration Required

Briefly Describe your Universal Waste Activities: \_\_\_\_\_

We use Drum Top Bulb Crusher(s).

**13. Other State Regulated Waste Activities:**   Petroleum Contact Water (PCW)  Recovery  Transport [62-740 F.A.C.]

Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [62-740.300(5)]



**(14 cont.) Hazardous Waste Transfer Facilities:** In addition to the registration required for Transfer Facilities on Page 4, Section 14, the following items are required to be submitted with the initial notification for a transfer facility and any changed items must be submitted with any subsequent submission [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)] :

- Certification by a responsible corporate officer of the transporter that the proposed location satisfies the criteria of Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]
- Evidence of the transporter's financial responsibility [Rule 62-730.171(3)(a)3., F.A.C.]
- A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4., F.A.C.]
- A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]
- A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.]
- A map or maps of the transfer facility [Rule 62-730.171(3)(a)7., F.A.C.]

**(15 cont.) Used Oil Transporters: (Exemptions in 40 CFR 279.40(a)(1-4))**

In addition to the requirements on Page 4 Section 15:

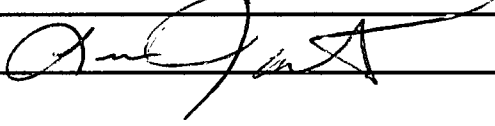
- o ALL registered UO Handlers must submit an annual report except generators transporting UO from noncontiguous operations within their own company.
- o UO transporters transporting off-site over public highways only within their own company must submit proof of insurance.
- o UO transporters transporting more than 500 gallons/year must submit proof of insurance annually, and must sign and certify this submission as a certified used oil transporter in section 17 (except those exempted by Rule 62-710.600(1), F.A.C.).

The used oil annual report is attached  Evidence of Liability Insurance pursuant to 62-710.600(2)(e).. F.A.C. is attached.

**16. Comments (attach a page if more space is needed):**

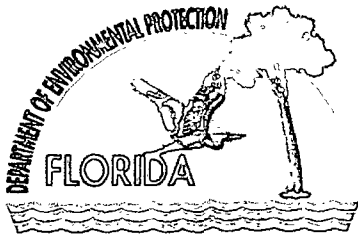
**17. Certification:** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. The information submitted is, to 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.

I certify as a Used Oil Transporter that I am familiar with the applicable Florida and Federal laws and rules governing used oil transportation and have an annual and new employee training program in place covering the applicable used oil rules. Evidence of financial responsibility is demonstrated by the Used Oil Transporter Certificate of Liability Insurance, DEP form 62-730.900(5)(a), F.A.C..

Signature of owner, operator, or an authorized representative	Print Name and Title	Used Oil	Date Signed (mm-dd-yyyy)
	Lee Jarrett, Regional Regulatory Mgr.	<input checked="" type="checkbox"/>	03/01/2016
		<input type="checkbox"/>	
		<input type="checkbox"/>	

If the person that filled in this form is not the Facility Contact or Operator, please complete the information below:

Lee Jarrett (336) 289-8094 lee.jarrett@univarusa.com  
 (Name of person completing this form) (Phone Number) (E-mail Address)



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

## UNIVERSAL WASTE LAMP AND DEVICE TRANSPORTER AND TRANSFER FACILITY INFORMATION CHECKLIST

The Department requires that all universal waste lamp and device transporters and transfer facilities registered under Rule 62-737.400, F.A.C., complete and sign this Information Checklist. This information will be used to evaluate compliance with subparagraph 62-737.400(1)(b), F.A.C. Your transporter registration will not be issued until you complete and return the checklist. Handlers that are not engaging in transport activities need not complete this form.

Univar USA Inc.		<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>G</td><td>A</td><td>D</td><td>9</td><td>8</td><td>0</td><td>8</td><td>4</td><td>5</td><td>0</td><td>7</td><td>7</td></tr></table>		G	A	D	9	8	0	8	4	5	0	7	7
G	A	D	9	8	0	8	4	5	0	7	7				
(Facility Name)		(EPA id)													
2145 Skyland Ct.	Norcross	GA	30071												
(Street Address)	(City)	(State)	(Zip)												
770-246-7700	lee.jarrett@univarusa.com														
(Phone)	(Fax)	(E-mail)													

**Section 1: For all transporters and transfer facilities (in-state and out-of-state).**

Complete all sections and check all boxes that apply.

1. Estimated number of LAMPS handled during the last calendar year. 1279  
 Types:      Fluorescent                       HID

2. Estimated number of DEVICES handled during the last calendar year. 0  
 Types: Thermostats       Electric Switches/Relays   
        Thermometers       Manometers       Other

3. Estimated weight of DEVICES handled during the last calendar year. 0 lb.

4. Estimated number of lamps or devices you shipped to each lamp recycling facility. Check the boxes for lamps (L) or devices (D). Give the facility name, location, and contact information.

Number	L	D	Facility Name	City	State	Phone
1279	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vopak Logistic Services	Fitzgerald	GA	229-423-5428
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>				

Lee Jarrett		03/03/2016
Print Name of Authorized Agent	Signature of Authorized Agent	Date



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

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## Section 2: For out-of-state transporters and transfer facilities only

1. Is any environmental agency in your state aware of your activities as a transporter or transfer facility for universal waste lamps and devices in Florida?

Yes

No

2. If you have not already done the following in previous years, please enclose some written verification from that environmental agency that they are aware of your activities as a transporter for universal waste lamps and devices in Florida and in your state. This verification can be in the form of a letter to you or to the Department, a registration, a permit, etc.

Submitted Previously

Submitted in What Year? 2009

Lee Jarrett

Print Name of Authorized Agent

Signature of Authorized Agent

03/03/2016

Date

Complete, sign and return this checklist along with your registration form to:

EPA ID Notification Coordinator  
Hazardous Waste Regulation Section MS 4560  
Department of Environmental Protection  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Your transporter registration will not be issued until you complete and return this checklist.

### QUESTIONS OR COMMENTS?

If you have any questions or comments, please contact Laurie Tenace at (850) 245-8759 or via e-mail at [laurie.tenace@dep.state.fl.us](mailto:laurie.tenace@dep.state.fl.us).

Thank you for your cooperation in providing this information.

TransChkl.doc



Univar USA Inc.  
202 Oakdale Road  
Jamestown, NC 27282-9201  
USA

T 336-289-8056  
F 336-887-0786  
www.univarusa.com



March 3, 2016

Ms. Janet Ashwood  
Hazardous Waste Regulation Sect. MS 4560  
Department of Environmental Protection  
2600 Blair Stone Rd.  
Tallahassee, Florida 32399-2400

RE: Univar USA 8700-12FL

Dear Ms. Ashwood,

Enclosed are the 8700-12FL forms along with the related Universal Waste forms, and Memorandum of Liability of Insurance for our Tampa, Jacksonville, and Norcross, GA. I will be renewing the Oil Transporter Permit online as soon as the insurance information is updated.

There has been no change in the insurance carrier or policy number (CA4806890).

The information to fulfill the requirements for items 4, 5, 6, and 7 for renewal of the hazardous waste transfer certificate was supplied in 2009.

I certify the used oil training manual is still in use and there have been no changes to the manual.

If you have any questions or need additional information please contact me at 336-289-8094 or [lee.jarrett@univarusa.com](mailto:lee.jarrett@univarusa.com)

Sincerely

A handwritten signature in black ink, appearing to read 'Lee Jarrett', with a long horizontal line extending to the right.

Lee Jarrett  
Regional Regulatory Mgr.