



## 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

10/20/2016  
Gerry McCormick, VP  
Diversified Marine Tech Inc  
1201 N 22nd Street  
Tampa, FL 33605

The Florida Department of Environmental Protection has reviewed your form 8700-12FL notification for a new hazardous waste DEP/EPA Identification Number or status/information change. Based on the information received you must use the following identification number for all manifests or reports for **Diversified Marine Tech Inc** located at **2531 Causeway Blvd, Tampa , FL 33619-5151**

**FLD984182733**

Your facility notified FDEP requesting the following hazardous waste status/activities which **do not require a separate submission: Non-Handler of Hazardous Waste.**

Your facility is **currently registered** for the following activities: **Used Oil Transporter, Used Oil Transfer Facility, Used Oil Filter Transporter (reg exp on 06/30/2017).**

Your facility is **currently permitted/active** as: **No Active Hazardous Waste Treatment, Storage, or Disposal Permit.**

If you have pending program registrations/certifications or permits, these will be mailed separately. You are required to notify us on form 8700-12FL if there is any change in your operations which would affect your status, activity or contact information. The form is found here:

<http://www.dep.state.fl.us/waste/categories/hwRegulation/pages/NotificationRegulatedWaste.htm>.

**To review the details of your status**, visit:

[https://fldeploc.dep.state.fl.us/www\\_RCRA/Reports/handler\\_results.asp?epaid=FLD984182733](https://fldeploc.dep.state.fl.us/www_RCRA/Reports/handler_results.asp?epaid=FLD984182733).

For further assistance, please contact me at (850) 245-8749 or email at

[Glen.Perrigan@dep.state.fl.us](mailto:Glen.Perrigan@dep.state.fl.us) .

Sincerely,

*Robin K. Pandley*  
*Jov*

Glen Perrigan  
Environmental Manager  
Hazardous Waste Regulation Section

ME ID: 40523 , Email Address: [desdmtgerry@gmail.com](mailto:desdmtgerry@gmail.com)



**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

RECEIVED  
Date Received  
END PROTECTION  
(for FDEP Official Use Only)  
**FEB 24 2016**  
PERMITTING & COMPLIANCE ASSISTANCE PROGRAM

EPA ID: 

F	L	D	9	8	4	1	8	2	7	3	3
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 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**

**Diversified Marine Tech**

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

Name of Operator: **Diversified Environmental Services Inc.** Date became Operator: 06 / 01 / 88

Street or P.O. Box: **1201 N 22nd St.** Phone Number: **813-248-3256**

City or Town: **Tampa** State: **FL** Zip Code: **33605** 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:  Vessel

Physical Street Address: **2531 Causeway Blvd.**

City or Town: **Tampa** State: **FL** Zip Code: **33619**

County: **Hillsborough** Country (if not USA):

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

A. 221310 (required) B. \_\_\_\_\_

C. \_\_\_\_\_ D. \_\_\_\_\_

**6. Facility or Business Mailing Address**

Same address as #\_\_ 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**

First Name: **Gerry** Last Name: **McCormick Jr.** Title: **Vice President**

Phone Number: **813-248-3256** Extension: \_\_\_\_\_ E-Mail: **desdmtgerry@gmail.com** Fax: **813-247-5453**

Street or P.O. Box: **1201 N 22nd St.**

City or Town: **Tampa** State: **FL** Zip Code: **33605** Country (if not USA):

Same address as #\_\_ above or:

**8. Real Property (FL Land) Owner of the Facility's Physical Location**  
(List additional owners in the comments section.)

Same address as #\_\_ above or:

Name of Owner: **Tampa Port Authority** Date became Owner: \_\_\_/\_\_\_/\_\_\_  
 New Owner mm dd yy

Street or P.O. Box: **1101 Channelside Dr.** Phone Number: **800-741-2297**

City or Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ 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)

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

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

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

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)

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

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)

(3)  Recycler of Hazardous Waste (at your facility)  
Specify:  Commercial  Non-Commercial.  
Note: A permit is required for storage prior to recycling.

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

(4)  Exempt Boiler and/or Industrial Furnace  
 a. Small Quantity On-site Burner Exemption  
 b. Smelting, Melting, and Refining Furnace Exemption

In addition, indicate other generator activities that apply.

(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.

- 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

- (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.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21

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 checked="" 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>Gerry</b>	Last Name:	Title:
	Phone Number:	Extension:	E-Mail:
	Street or P.O. Box:		
	City or Town:	State:(Country):	Zip Code:

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

**A. Federal Notification**

- Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 lb) or more of any combination of UW accumulated (at any one time)
- Accumulates:  a. UW Batteries       b. Pesticides       c. Pharmaceuticals
- d. Mercury Containing Devices       e. Mercury Containing Lamps
- Destination Facility for UW Note: For this activity, a facility must treat, dispose or recycle a UW. A permit is required for storage prior to recycling.

**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

- For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices
- For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices
- Mercury-Containing Devices (thermostats, etc) SQH = less than 100 kg accumulated by for-hire handler
- Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler
- Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler
- Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler

Annual Registration Required

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. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities)**

**Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration.** Evidence of casualty/liability insurance pursuant to 62-730.170(2)(a) is required in addition to this registration. Transfer facilities must submit several additional documents as detailed on page 5 the first time they register and when the information changes. Registered transporters and transfer facilities may only begin operations after receiving approval from the Department. **Generators of hazardous waste who transport waste only within the boundaries of their facility should not register.**

**A. HW Transporter Registration Information (must be completed annually and when this information changes)**

**This facility is a registered transporter of hazardous waste.**

**This form is:**  Initial Registration  **Renewal**  Notification of changes  Cancel Registration

1. For own waste only  2. For commercial purposes  3. Both commercial and own waste

4. **Transportation Mode**  Air  Rail  Highway  Water  Other - specify \_\_\_\_\_

**B. HW Transfer Facility Registration Information (must be completed annually and when this information changes)**

**This facility is a Hazardous Waste Transfer Facility: (at this location)** Storage Volume \_\_\_\_\_

**This form is:**  Initial Registration  Renewal  Notification of changes  Cancel Registration

**Note: Hazardous Waste transfer facilities must comply with the requirements of Rule 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.**

**The Transfer Facility records required under the provisions of Rule 62-730.171(6) , F.A.C., are kept at (check one):**

Our mailing (business) address  The site (facility) address

Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer Facility: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Please see the top of page 5 for additional items that must be submitted in addition to the above registration for Hazardous Waste Transfer Facilities [Rule 62-730.171(3), Florida Administrative Code (F.A.C.)]:**

**15. Used Oil and Oil Filter Activities: : (Mark 'X' and complete all that apply if you need to register your used oil activities),**

**Transporters (exemptions in 40 CFR 279.40(a)(1-4) , transfer facilities, processors, off-specification burners, and/or marketers must annually register with the Department using this form. All except Florida used oil (UO) Processors and collection centers must pay an annual \$100 registration fee.**

**This form is:**  Initial Registration  **Renewal**  Notification of changes  Cancel Registration

If applicable, a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection is enclosed.

(1) Used Oil Transporter - mark activities: (occurring in Florida)

- a. Transporter (off-site) and noncontiguous locations
- b. Transfer Facility

(2)  Collection Center (From businesses, no more than 55 gal per shipment)

(3)  Used Oil Processor (A permit is required.)

(4)  Off-Specification Used Oil Burner

(5) Used Oil Fuel Marketer  On-Spec  Off-Spec

(6) Used Oil Filter Management (must annually register)

- a. Transporter
- b. Transfer Facility
- c. Processor (Annual Report Required )
- d. End User

(7) The records required under the provisions of Rule 62-710.510, FAC, are kept at (check one):

Our mailing (business) address  The site (facility) address

**Please see the top of page 5 for additional items that must be submitted in addition to the above registration and fees required for non-exempt Used Oil Transporters.**



Mail original completed form to: Department of Environmental Protection  
2600 Blair Stone Road, Mail Station 4560  
Tallahassee, Florida 32399-2400

For assistance call: 850-245-8707

RECEIVED  
ENVIRONMENTAL PROTECTION  
FEB 24 2016  
PERMITTING & COMPLIANCE  
ASSISTANCE PROGRAM

**STATE OF FLORIDA  
CERTIFICATE OF LIABILITY INSURANCE  
HAZARDOUS WASTE TRANSPORTER AND USED OIL HANDLER**

1. ALG SPECIALTY INSURANCE COMPANY  
(Name of Insurer)

(the "Insurer"), of 175 WATER STREET, NEW YORK, NY 10038  
(Address of Insurer)

hereby certifies that it has issued liability insurance covering bodily injury and property damage including environmental restoration for sudden accidental occurrences to

DIVERSIFIED ENVIRONMENTAL SERVICES, INC.  
(Name of Insured)

(the "Insured"), of 1201 N. 22<sup>nd</sup> STREET, TAMPA, FL 33605  
(Physical Address of Insured)

in connection with the insured's obligation to demonstrate financial responsibility under Florida Administrative Code Rule 62-710.600(2) and 62-730.170. The coverage applies at:

EPA/DEP I.D. No.	Name	Physical Address
<u>FLD 984182733</u>	<u>DIVERSIFIED MARINE TECH, INC.</u>	<u>2531 CANSELY BLVD. TAMPA, FL 33619</u>

(If coverage is for multiple facilities, identify each facility insured.)

This insurance is primary and the company shall not be liable for amounts in excess of \$2,000,000 for each accident, exclusive of legal defense costs. The coverage is provided under policy number PLSM610418, issued on April 1, 2016.  
(date)


The effective date of said policy is April 1, 2016 and the expiration date of said policy is April 1, 2018.  
(date)

This insurance is excess and the company shall not be liable for amounts in excess of \$ \_\_\_\_\_ for each accident in excess of the underlying limit of \$ \_\_\_\_\_ for each accident, exclusive of legal defense costs. The coverage is provided under policy number \_\_\_\_\_, issued on \_\_\_\_\_.  
(date)  
The effective date of said policy is \_\_\_\_\_ and the expiration date of said policy is \_\_\_\_\_.  
(date)

Mail original completed form to: Department of Environmental Protection For assistance call: 850-245-8707  
2600 Blair Stone Road, Mail Station 4560  
Tallahassee, Florida 32399-2400

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:
- (a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.
  - (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer.
  - (c) Whenever requested by the Secretary (or designee) of the Florida Department of Environmental Protection (FDEP), the Insurer agrees to furnish to the Department a signed duplicate original of the policy and all endorsements.
  - (d) Cancellation of the insurance, whether by the Insurer or the Insured and any other termination of the insurance (e.g., expiration, non-renewal), will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Secretary of the FDEP as evidenced by certified mail return receipt.
  - (e) The Insurer shall not be liable for the payment of any judgment or judgments against the Insured for claims resulting from accidents which occur after the termination of the insurance described herein, but such termination shall not affect the liability of the Insurer for the payment of any such judgment or judgments resulting from accidents which occur during the time the policy is in effect.

I hereby certify that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one of more States including Florida.

  
\_\_\_\_\_  
(Signature of Authorized Representative of Insurer)

PATRICK HIGGINS  
\_\_\_\_\_  
(Typed name)

AGENT - FL License #: A118784  
\_\_\_\_\_  
(Title)

Authorized Representative of

AIG SPECIALTY INSURANCE COMPANY  
\_\_\_\_\_  
(Name of Insurer)

630 COREY AVENUE, SAINT PETE BEACH, FL 33706  
\_\_\_\_\_  
(Address of Representative)





# DEPARTMENT OF ENVIRONMENTAL PROTECTION

Mail Station 4560, 2600 Blair Stone Road, Tallahassee, Florida 32399-2400

DEP Form #62-710.901(3)  
 Form Title Annual Report by Used  
 Oil and Used Oil Filter Handlers  
 Effective Date 4-23-13  
 Incorporated in Rule 62-710.510(5)

## Annual Report by Used Oil and Used Oil Filter Handlers\*

(\*Handlers are any persons subject to the registration requirements of rule 62-710.500 and 62-710.850, F.A.C. See Section A, Box 5 below.)

For the reporting period January 1, \_\_\_\_\_ through December 31, \_\_\_\_\_

Use the information recorded in your Record Keeping Form [62-710.901(2)] or equivalent to complete this document.

### SECTION A TO BE COMPLETED BY ALL REGISTERED PERSONS

1. Company Name: Diversified Marine Tech. 2. Telephone No. 813-248-3256

Site Address: 2531 Causeway Blvd. Tampa FL 33619

3. EPA ID No. FLD984182733

Check box if any of the above items (1-3) have changed since your last registration.

4. Name of person preparing report (please print) Gerry McCormick Jr.

Title: Vice President Phone number (if different from #2, above) 813-248-3256

5. Type of operation (check as many as apply to your operations)

Used Oil:  Transporter  Transfer Facility  Collection Center/Aggregation Point  Processor  Marketer  Burner (of off-specification used oil)  
 Used Oil Filter:  Transporter  Transfer Facility  Processor  End User

### SECTION B USED OIL (TO BE COMPLETED BY ALL REGISTERED USED OIL HANDLERS. USED OIL FILTER HANDLERS SEE SECTION C)

1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)

a. In Florida .....

b. From out of State Marine Vessels .....

c. Beginning Inventory .....

d. Total (sum of totals from Lines a + b + c) .....

	Automotive	Industrial	Mixed	Total
a. In Florida		3,422,963		
b. From out of State <u>Marine Vessels</u>		1,281,521		
c. Beginning Inventory				
d. Total (sum of totals from Lines a + b + c)				4,704,484

2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)

N - Transferred to another facility (not an end use).....

O - Marketed as an on-specification used oil fuel.....

F - Marketed as an off-specification used oil fuel.....

I - Marketed for an industrial process.....

B - Burned as an off-specification used oil fuel.....

D- Disposed of: Landfilled.....

Treated at a wastewater treatment unit.....

Incinerated .....

3. Total amount (in gallons) of Used Oil managed .....

4. End of year, on hand estimate (difference between Line 1d and Line 3).....

	In State	Out of State
N - Transferred to another facility (not an end use)	91,106	
O - Marketed as an on-specification used oil fuel		
F - Marketed as an off-specification used oil fuel		
I - Marketed for an industrial process		
B - Burned as an off-specification used oil fuel		
D- Disposed of: Landfilled		
Treated at a wastewater treatment unit	4,613,378	
Incinerated		
3. Total amount (in gallons) of Used Oil managed	4,704,484	
4. End of year, on hand estimate (difference between Line 1d and Line 3)	0	

**SECTION C USED OIL FILTERS (OPTIONAL) (USE TABLE BELOW FOR CONVERSIONS)** **CHECK COLUMN IF OUT OF STATE ↓**

1. Number of filters on hand from previous year .....	0	
2. Number of used oil filters collected .....	8450	
3. Total number of used oil filters to manage (Line 1 plus Line 2) .....	8450	
4. Disposition of used oil filters collected:		
a. Transferred to another registered facility .....	0	
b. Burned for energy recovery at a Waste-To-Energy facility .....	8450	
c. Transferred directly to a metal foundry for recycling .....	0	
d. TOTAL .....	8450	
5. End of year, on hand estimate (Line 3 minus Line 4d) .....	0	
6. Gallons of used oil collected as a result of filter processing .....	0	
7. Gallons of used oil transferred to a used oil handler (transporter or processor) .....	0	
8. Volume of oily waste collected and managed as a result of filter processing ..... <input type="checkbox"/> gallons <input type="checkbox"/> cubic yards.....		
9. Description of oily waste management _____		

**DIRECTIONS FOR SECTION C**

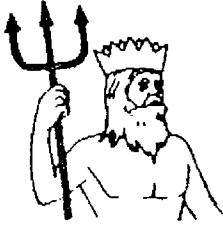
**Conversion Table**

One 55-gallon drum of <b>crushed</b> used oil filters = approximately <b>400</b> used oil filters
One 55- gallon drum of <b>uncrushed</b> used oil filters = approximately <b>250</b> used oil filters
One <b>ton</b> of drained used oil filters = approximately <b>2,350</b> used oil filters

1. Enter the number of Used Oil Filters on hand, from previous year's inventory.
2. Enter the number of Used Oil Filters collected.
3. Enter the sum of Line 1 + Line 2.
4. Enter the number of filters managed by your facility in blocks 4a-c. Enter the sum of 4a-c in block 4d.
5. Enter the number of filters on hand at your site as of December 31, last year.
6. Fill in the number of gallons of used oil collected by your filter operation.
7. Enter the number of gallons transferred to a used oil transporter or processor.
8. List the volume (gallons or cubic yards) of the oily wastes collected through your filter handling. Oily wastes are identified in Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

For assistance with this form, please call the Used Oil Coordinator at 850-245-8707.

# DIVERSIFIED ENVIRONMENTAL SERVICES, INC.



P.O. Box 5357  
Tampa, FL 33675-5357  
Toll Free: 1 (800) 786-3256 • Office: 1 (813) 248-3256  
Fax: 1 (813) 247-5453

February 23, 2016

Department of Environmental Protection  
Waste Management Division  
2600 Blair Stone Road  
Tallahassee FL 32399-2400

RE: Training manual for Used Oil Transporter Diversified Marine Tech **FLD984182733**

This letter is to certify that the Used Oil Training manual previously submitted and approved for Diversified Marine Tech Inc. is still in effect. The training policies and guidelines outlined by the manual were evaluated and no changes are needed to be made to the manual at this time. If changes are needed in the future copies will be sent to your office for approval. If you have any questions feel free to contact me at any time.

Sincerely,

A handwritten signature in black ink, appearing to read 'Gerry McCormick Jr.', written over a horizontal line.

Gerry McCormick Jr.  
Vice President  
DMT Inc.  
2531 Causeway Blvd.  
Tampa FL 33619  
813-918-3773  
H8luzn2@gmail.com