

## MyFDEP

Florida Department of Environmental Protection




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## Pending Document Details

NATIVE NAME: INDEPENDENT WASTE OIL INC

DOC LOG ID: 35157

CHAZ ID: FLR000009563

CITY: JACKSONVILLE

COUNTY: DUVAL

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[📁 Notification Approvals](#)
[📁 RUOH Email Template](#)
[📁 RUOH Approvals](#)

### Document Types

Document Type	Primary Type	Discontinued On
HWG	Y	
RUOH	N	

### Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
190008	HWR	<a href="mailto:iwojax@yahoo.com">iwojax@yahoo.com</a>	FLR000009563	Independent Waste Oil Inc
216842	UOP	<a href="mailto:IWOjax@yahoo.com">IWOjax@yahoo.com</a>	FLR000009563	Independent Waste Oil Inc

### Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	08/17/2016	SIMMONS_JLS	✖
RUOH	Logged	08/17/2016	SIMMONS_JLS	✖
RUOH	Completeness Review	08/17/2016	ASHWOOD_J	✖
RUOH	Waiting for information	08/17/2016	ASHWOOD_J	✖
RUOH	Waiting for information	08/29/2016	ASHWOOD_J	✖
RUOH	Waiting for information	11/02/2016	ASHWOOD_J	✖
RUOH	Ready for Data Entry	11/03/2016	ASHWOOD_J	✖
RUOH	Data Entry Completed	11/03/2016	SIMMONS_JLS	✖
RUOH	Final Review	11/03/2016	ASHWOOD_J	✖
RUOH	Notification Letter Emailed	11/03/2016	ASHWOOD_J	✖
RUOH	Booked into Oculus 🌳🌳	11/04/2016	THURSBY_K	✖

## Add A New Process

Document Type	Process	Date	
Hazardous Waste Generator (HWG) ▼	Completeness Review ▼	11/04/2016	Add Process

## Comments

Document Type	Date	Comment	Author
General Comment	08/17/2016	Notification has an original signature, insurance form is a copy.	SIMMONS_JLS
RUOH	08/17/2016	Received original 8700 form, registration fee, training manual statement and Annual Report.	ASHWOOD_J
RUOH	08/17/2016	Email sent to Kenneth Graden: In reviewing your submittal, we noticed additional information is needed. The Insurance form liability amount is missing and form does not have an original (wet) signature (see attached). Also, please make sure the Insurance policy number is for the automobile liability. Please correct numbers on the Annual Report and return both pages. Please submit the following to continue processing you UO renewal registration (see attached blank form for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance form and Revised Annual Report. As soon as possible, please mail the required form with original (hand signed) signature to us at: 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	08/29/2016	Received revised Combined HWT/UO Insurance form for pollution policy.	ASHWOOD_J
RUOH	08/29/2016	Email sent to Kenneth Graden: In reviewing your submittal, we noticed additional information is needed. We received the Insurance form for the pollution prevention and now we need Insurance form for the automobile liability policy. Please submit the following to continue processing you UO renewal registration (see attached blank form for your convenience): Combined HWT/UO Certificate of Liability Insurance form As soon as possible, please mail the required form with original (hand signed) signature to us at: 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	11/02/2016	Spoke several times to Suzy and Raymond concerning Insurance form. Insurance form is on the way.	ASHWOOD_J
RUOH	11/03/2016	Received revised Combined HWT/UO Insurance form for automotive liability policy - Good.	ASHWOOD_J

## Add A New Comment

Document Type	Comments	
Hazardous Waste Generator (HWG) ▼	<div></div>	Add Comment