

APPLICATION TRACKING SYSTEM

11/03/95

APPL NO:279950

APPL RECVD:11/02/95 TYPE CODE:SD SUBCODE:08

LAST UPDATE:11/03/95

DER OFFICE RECVD:TPA DER OFFICE TRANSFER TO:___ APPLICATION COMPLETE:___/___/___

DER PROCESSOR:SWP ~~CRAWFORD~~

APPL STATUS:AC DATE:11/02/95 (ACTIVE/DENIED/WITHDRAWN/EXEMPT/ISSUED/GENERAL)

RELIEF:___ (SSAC/EXEMPTIONS/VARIANCE)

(Y/N) N MANUAL TRACKING

DISTRICT:40 COUNTY:52

(Y/N) N OGC HEARING REQUESTED

LAT/LONG:___/___/___

(Y/N) N PUBLIC NOTICE REQD?

BASIN-SEGMENT:___

(Y/N) N GOV BODY LOCAL APPROVAL REQD?

COE #:___

(Y/N) Y LETTER OF INTENT REQD? ___ (I/ISSUE D/DENY)

ALT#:___

PROJECT SOURCE NAME:USED OIL PROCESSING FACILITY

STREET:843 43RD ST SOUTH

CITY:ST PETERSBURG

STATE:FL

ZIP:33711

PHONE:___-___-___

APPLICATION NAME:HOWCO ENVIRONMENTAL SERVICES

STREET:843 43RD ST SOUTH

CITY:ST PETERSBURG

STATE:FL

ZIP:33711

PHONE:813-327-8467

AGENT NAME:___

STREET:___

CITY:___

STATE:___

ZIP:___

PHONE:___-___-___

FEE #1 DATE PAID:11/02/95 AMOUNT PAID:00100 RECEIPT NUMBER:00053628

B DATE APPLICANT INFORMED OF NEED FOR PUBLIC NOTICE - - - / / /
C DATE DER SENT DNR APPLICATION/SENT DNR INTENT - - - / / /
D DATE DER REQ. COMMENTS FROM GOV. BODY FOR LOCAL APP. - - - / / /
E DATE #1 ADDITIONAL INFO REQ--REC FROM APPLICANT - - - / / /
E DATE #2 ADDITIONAL INFO REQ--REC FROM APPLICANT - - - / / /
E DATE #3 ADDITIONAL INFO REQ--REC FROM APPLICANT - - - / / /
E DATE #4 ADDITIONAL INFO REQ--REC FROM APPLICANT - - - / / /
E DATE #5 ADDITIONAL INFO REQ--REC FROM APPLICANT - - - / / /
E DATE #6 ADDITIONAL INFO REQ--REC FROM APPLICANT - - - / / /
F DATE LAST 45 DAY LETTER WAS SENT - - - / / /
G DATE FIELD REPORT WAS REQ--REC - - - / / /
H DATE DNR REVIEW WAS COMPLETED - - - / / /
I DATE APPLICATION WAS COMPLETE - - - / / /
J DATE GOVERNING BODY PROVIDED COMMENTS OR OBJECTIONS - - - / / /
K DATE NOTICE OF INTENT WAS SENT--REC TO APPLICANT - - - / / /
L DATE PUBLIC NOTICE WAS SENT TO APPLICANT - - - / / /
M DATE PROOF OF PUBLICATION OF PUBLIC NOTICE RECEIVED - - - / / /
N WAIVER DATE BEGIN--END (DAY 90) - - - / / /

COMMENTS:



Used Oil Processing Facility General Permit Notification

Department of Environmental Protection
SOUTHWEST DISTRICT
BY

Pursuant to Rule 62-710.800, Florida Administrative Code, the owners or operators of a used oil processing facility shall submit the following information to the Waste Program Administrator of the appropriate District Office of the Department. A fee of \$100.00 shall also be submitted.

- Page 1 of 2

8. Attach a description of the operation of the facility including how and where the used oil will be tested, stored and processed.
9. Attached the Closure Plan for the facility. This plan must demonstrate that:
1. There will be no need for further facility maintenance;
 2. Used oil will not contaminate surface or ground water; and
 3. All soils will be free of oil and equipment will be emptied and cleaned or dismantled.

Any modification to this plan must be submitted to the Waste Program Administrator at the appropriate District Office of the Department.

10. Certification:

To the best of my knowledge and belief, I certify the information provided in this notification is true, accurate and correct.

I agree that any duly authorized representative of the Department may at any reasonable time enter and inspect, for the purpose of ascertaining the state of compliance with the law or rules and regulations of the Department, the property, premise or place identified on this form.

CATHLEEN C. CLEMSON
(Name of Authorized Agent)

Cathleen C. Clemson
(Signature of Authorized Agent)

10/30/95
(Date)

Any questions concerning this form may be referred to the Used Oil Coordinator, Hazardous Waste Management Section, Bureau of Solid and Hazardous Waste, Department of Environmental Protection, 2600 Blair Stone Road, Tallahassee, FL, 32399-2400, (904) 488-0300.

AREA: SWD _____

Cash Receiving Application
Collection Point Log Remittance

CRAF006A

Tot: _____ \$100.00

-----+-----
SYS\$REMT: 73067 Type: CP Recvd Date: 02-NOV-1995 Status: RECEIVED
SYS\$RCPT: 53628 PNR: Check #: 018931 Amount: 100.00
SSN/FEI#: Name: HOWCO ENVIRONMENTAL SERVICES
First: Middle: Title: Suf:
Address1: 843_43RD_ST_SOUTH Short Comments:
Address2: S-HOWCO ENV SVCS
City: ST_PETERSBURG ST: FL Zip: 33711- Country: _____
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> P A Y M E N T (S) <-----+-----

| | Distr | CL | Object | Payment | Reference# | Applic/ | S |
|-----------|--------|------------------------|--------|-------------|------------|---------|----|
| | | | | Amount..... | | Fund | T |
| | | | | | | | A |
| SYS\$PAYT | Area.. | Code/Description..... | | | | | |
| 75008 | SWD | 002245 SOLID_WASTE-OPE | | \$100.00 | SO52279950 | PFTF | CO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

COMMIT FREQUENTLY

\$100.00 Payment total

Press <TAB> to accept Collection Point or enter F&A. _____

Count: *1

<Replace>