

## MyFDEP

Florida Department of Environmental Protection



Welcome, Kim Thursby. You are logged on with a role of CHAZ\_USER. [\[Sign Out\]](#)

[\[Pending List\]](#) [\[Completed List\]](#)

[\[Completed List - this DocLog\]](#)

## Completed Document Details

**NATIVE NAME:** SHORELINE ENVIRONMENTAL INC

**DOC LOG ID:** 37372

**CHAZ ID:** ALR000039974

**CITY:** ROBERTSDALE

**COUNTY:** ALL FL CNTYS

[View email records](#)

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

### Document Types

**Document Type**

RUOH

**Primary Type**

Y

**Discontinued On**

### Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
273145	UOP	<a href="mailto:shorelineenvironmental@yahoo.com">shorelineenvironmental@yahoo.com</a>	ALR000039974	Shoreline Environmental Inc

### Processes

Document Type	Process	Date	Author	Delete
RUOH	Logged	05/22/2017	SIMMONS_JLS	
RUOH	Completeness Review	05/25/2017	ASHWOOD_J	
RUOH	Waiting for information	05/25/2017	ASHWOOD_J	
RUOH	Ready for Data Entry	06/14/2017	ASHWOOD_J	
RUOH	Data Entry Completed	06/14/2017	SIMMONS_JLS	
RUOH	Final Review	06/14/2017	ASHWOOD_J	
RUOH	Booked into Oculus	06/15/2017	THURSBY_K	

### Comments

Document Type	Date	Comment	Author
---------------	------	---------	--------

RUOH	05/25/2017	Received updated ACORD form.	ASHWOOD_J
RUOH	05/25/2017	Email sent to Bart Shumaker: In reviewing your submittal, we noticed additional information is needed. The ACORD form submitted does not match Insurance form on file (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 to submit two separate Insurance forms (see attached). Please submit the following to continue updating your Insurance in our database (see attached blank form for your convenience): Combined HWT/UO Certificate of Liability Insurance form for automobile and pollution liability. As soon as possible, please mail the required form 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	06/14/2017	Received original Combined HWT/UO Insurance form - Good.	ASHWOOD_J

[DEP Home](#) | [About DEP](#)