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FL DEP
WEST PALM BEACH

VIA Fed Ex #812785102834

February 28, 2018

Department of Environmental Resources Management
Waste Regulation Section
701 NW 1st Court 7th Floor
Miami, Florida 33136

DEP Waste Management Division
Hazardous Waste Regulation Section MS 4560
2600 Blair Stone Rd.
Tallahassee, FL 32399-2400

Department of Environmental Protection
Southeast District Office
Attn: Hazardous Waste Program Administrator
3301 Gun Club Road
West Palm Beach, Florida 33406

Re: CEMEX Construction Materials Florida, LLC – Cement Mill
DEP Permit No. 56307-HO-003
Annual Report and Used Oil Registration for 2018

This letter submits the annual used oil registration (Form 62-730.900(1)(b) revised form and the annual used oil report (Form 62-710.901 (3)). This facility is not required to pay the used oil registration fee per Rule 62-710.500(2), F.A.C.


If you have any questions concerning this information please contact me at (305) 229-2949, mauricer.hogg@cemex.com

Sincerely,

CEMEX Construction Materials Florida, LLC

Roger Hogg
Environmental Manager

cc: File

 <p>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</p>		Date Received (for FDEP Official Use Only) <div style="color: red; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="color: red; font-weight: bold; font-size: 1.2em;">MAR 06 2018</div>
EPA ID: F L D 9 8 1 7 5 8 4 8 5		Please use the instructions document to complete this form
1. Reason for Submittal <small>(all submitters must complete pages 1 and 2 and sign page 5. Pages 3 and 4, - complete as applicable)</small>	Mark 'X' in the correct box: <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (must choose one if a notification) </div> <div style="width: 35%;"> <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, used oil activities, or PCW activities) </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input checked="" type="checkbox"/> To provide subsequent notification (to update status and facility identification information) </div> <div style="width: 35%;"> <input type="checkbox"/> To provide the final notification (closing) for the facility (see instructions—must complete pages 1,2,5) </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 30%;"> FL Registration(s) </div> <div style="width: 30%;"> <input type="checkbox"/> UW Mercury (see page 3) </div> <div style="width: 30%;"> <input type="checkbox"/> HW Transporter (see page 4) </div> <div style="width: 10%;"> <input checked="" type="checkbox"/> Used Oil (see page 4) </div> </div>	
2. Facility or Business Name	<div style="font-size: 1.5em; font-weight: bold;">CEMEX Miami Cement Plant</div>	
3. Facility Operator <small>(List additional Operators in the comments section).</small>	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Name of Operator: <div style="font-size: 1.2em; font-weight: bold;">CEMEX Construction Materials FI, LLC</div> </div> <div style="width: 35%;"> Date became Operator: 02 / 21 / 2008 </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;"> Street or P.O. Box: <div style="font-weight: bold;">1200 NW 137th Ave</div> </div> <div style="width: 35%;"> Phone Number: <div style="font-weight: bold;">305-229-2949</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> City or Town: Miami </div> <div style="width: 10%;"> State: FI </div> <div style="width: 15%;"> Zip Code: 33182 </div> <div style="width: 35%;"> Country (if not USA): </div> </div> <div style="margin-top: 5px;"> Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> Federal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Other _____ </div>	
4. Facility Physical Location Information <small>(No P.O. Boxes)</small> <input checked="" type="checkbox"/> Same address as #3 above or:	Physical Street Address: _____ <input type="checkbox"/> Vessel <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;"> City or Town: </div> <div style="width: 15%;"> State: </div> <div style="width: 25%;"> Zip Code: </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> County: </div> <div style="width: 60%;"> Country (if not USA): </div> </div>	
5. Facility North American Industry Classification System (NAICS) Code(s) <small>(at least 5 digits)</small>	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> A. 13 2 7 3 1 0 (required) </div> <div style="width: 35%;"> B. _____ </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;"> C. _____ </div> <div style="width: 35%;"> D. _____ </div> </div>	
6. Facility or Business Mailing Address	<input checked="" type="checkbox"/> Same address as #__ above or: Street or P.O. Box: _____ <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> City or Town: </div> <div style="width: 15%;"> State: </div> <div style="width: 20%;"> Zip/Postal Code: </div> <div style="width: 25%;"> Country (if not USA): </div> </div>	
7. Facility or Business RCRA Contact Person	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> First Name: Maurice </div> <div style="width: 30%;"> Last Name: Hogg </div> <div style="width: 40%;"> Title: Environmental Manager </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 30%;"> Phone Number: 305-229-2949 </div> <div style="width: 10%;"> Extension: </div> <div style="width: 30%;"> E-Mail: mauricer.hogg@cemex.com </div> <div style="width: 30%;"> Fax: 305-229-8015 </div> </div> <div style="margin-top: 5px;"> Street or P.O. Box: _____ </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> City or Town: </div> <div style="width: 15%;"> State: </div> <div style="width: 20%;"> Zip Code: </div> <div style="width: 25%;"> Country (if not USA): </div> </div>	
8. Real Property (FL Land) Owner of the Facility's Physical Location <small>(List additional owners in the comments section.)</small> <input checked="" type="checkbox"/> Same address as #__ above or:	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Name of Owner: <div style="font-size: 1.2em; font-weight: bold;">CEMEX Construction Materials FI, LLC</div> </div> <div style="width: 35%;"> Date became Owner: 02 / 21 / 2008 <input type="checkbox"/> New Owner mm dd yy </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;"> Street or P.O. Box: </div> <div style="width: 35%;"> Phone Number: </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 40%;"> City or Town: </div> <div style="width: 15%;"> State: </div> <div style="width: 15%;"> Zip Code: </div> <div style="width: 30%;"> Country (if not USA): </div> </div> <div style="margin-top: 5px;"> Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> Federal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Other _____ </div>	

RCRA Hazardous Waste Status Notification or Out of Business Notification	EPA ID No.
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9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply):

(A) (1) Generator of Hazardous Waste

☐ 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

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

(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.

1 D002	2 D008	3 D009	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 checked="" type="checkbox"/> Used Oil Handler <input type="checkbox"/> Universal Waste	First Name: Maurice	Last Name: Hogg	Title: Env. Manager
	Phone Number: 305-229-2955	Extension:	E-Mail: mauricer.hogg@cemex.com
	Street or P.O. Box:		
	City or Town:	State:(Country):	Zip Code:

Universal Waste Notification and Mercury Transporter/Handler Registration		EPA ID No. _____
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply) :		
A. Federal Notification	<input type="checkbox"/> 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) <div style="display: flex; justify-content: space-between;"> Accumulates: <input type="checkbox"/> a. UW Batteries <input type="checkbox"/> b. Pesticides <input type="checkbox"/> c. Pharmaceuticals </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> d. Mercury Containing Devices <input type="checkbox"/> e. Mercury Containing Lamps </div> <input type="checkbox"/> 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		
<input type="checkbox"/> Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time) <input type="checkbox"/> Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW) accumulated <input type="checkbox"/> Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be registered with the Florida Department of Health [DOH])		
C. Florida Annual Mercury Handler Registration:		
<p>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).</p> <p>If you <u>only</u> generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.</p>		
(1) This form is being submitted as a Florida Registration of Universal Waste Transporter/Handler <u>for-hire</u> Activities <input type="checkbox"/> First time registering <input type="checkbox"/> Renewal <input type="checkbox"/> One-time \$1,000 fee for Mercury for-hire first time LQH registration is attached		
	<input type="checkbox"/> For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices <input 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 <u>hazardous waste permit</u> is required for this activity) <input type="checkbox"/> First time registering <input type="checkbox"/> Renewal	Annual Registration Required
Briefly Describe your Universal Waste Activities: _____ <input type="checkbox"/> We use Drum Top Bulb Crusher(s).		
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) <input type="checkbox"/> Recovery <input type="checkbox"/> 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)]		

Hazardous Waste and Used Oil Transporter Registrations	EPA ID No. _____
14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need to register your HW Transporter activities)	
<p>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.</p>	
<p>A. HW Transporter Registration Information (must be completed annually and when this information changes)</p> <p>This facility is a registered transporter of hazardous waste.</p> <p>This form is: <input type="checkbox"/> Initial Registration <input type="checkbox"/> Renewal <input type="checkbox"/> Notification of changes <input type="checkbox"/> Cancel Registration</p> <p> <input type="checkbox"/> 1. For own waste only <input type="checkbox"/> 2. For commercial purposes <input type="checkbox"/> 3. Both commercial and own waste</p> <p>4. Transportation Mode <input type="checkbox"/> Air <input type="checkbox"/> Rail <input type="checkbox"/> Highway <input type="checkbox"/> Water <input type="checkbox"/> Other - specify _____</p>	
<p>B. HW Transfer Facility Registration Information (must be completed annually and when this information changes)</p> <p><input type="checkbox"/> This facility is a Hazardous Waste Transfer Facility: (at this location) Storage Volume _____</p> <p>This form is: <input type="checkbox"/> Initial Registration <input type="checkbox"/> Renewal <input type="checkbox"/> Notification of changes <input type="checkbox"/> Cancel Registration</p> <p>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.</p> <p>The Transfer Facility records required under the provisions of Rule 62-730.171(6) , F.A.C., are kept at (check one):</p> <p> <input type="checkbox"/> Our mailing (business) address <input type="checkbox"/> The site (facility) address</p> <p>Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Transfer Facility: </p> <p>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.)]:</p>	
15. Used Oil and Oil Filter Activities: : (Mark 'X' and complete all that apply if you need to register your used oil activities),	
<p>Transporters (exemptions in 40 CFR 279.40(a)(1-4) , transfer facilities, processors, off-specification burners, and/or marketers <u>must annually register</u> with the Department using this form. All except Florida used oil (UO) Processors and collection centers must pay an annual \$100 registration fee.</p> <p>This form is: <input type="checkbox"/> Initial Registration <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Notification of changes <input type="checkbox"/> Cancel Registration</p> <p><input type="checkbox"/> If applicable, a check or money order, in the amount of \$100, payable to Florida Department of Environmental Protection is enclosed.</p>	
<p>(1) Used Oil Transporter - mark activities: (occurring in Florida)</p> <p> <input type="checkbox"/> a. Transporter (off-site) and noncontiguous locations</p> <p> <input type="checkbox"/> b. Transfer Facility</p> <p>(2) <input type="checkbox"/> Collection Center (From businesses, <u>no more than</u> 55 gal per shipment)</p> <p>(3) <input checked="" type="checkbox"/> Used Oil Processor (A permit is required.)</p> <p>(4) <input checked="" type="checkbox"/> Off-Specification Used Oil Burner</p> <p>(5) Used Oil Fuel Marketer <input type="checkbox"/> On-Spec <input type="checkbox"/> Off-Spec</p>	<p>(6) Used Oil Filter Management (must annually register)</p> <p> <input type="checkbox"/> a. Transporter</p> <p> <input type="checkbox"/> b. Transfer Facility</p> <p> <input type="checkbox"/> c. Processor (Annual Report Required)</p> <p> <input type="checkbox"/> d. End User</p> <p>(7) The records required under the provisions of Rule 62-710.510, FAC, are kept at (check one):</p> <p> <input type="checkbox"/> Our mailing (business) address <input type="checkbox"/> The site (facility) address</p>
<p>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.</p>	



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, 2017 through December 31, 2017

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: CEMEX Construction Materials FL, LLC. 2. Telephone No. 305 229-2949
Site Address: 1200 NW 137th Avenue
Miami, Florida 33182 3. EPA ID No. FLD 981 758 485

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

4. Name of person preparing report (please print) Roger Hogg
Title: Environmental Manager Phone number (if different from #2, above) ()

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)	Automotive	Industrial	Mixed	Total
a. In Florida			4,673,500	4,673,500
b. From out of State				
c. Beginning Inventory				177,701
d. Total (sum of totals from Lines a + b + c)				4,851,201

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

In State	Out of State
4,510,889	
4,510,889	
340,312	

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

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

