



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: JAM ENVIRONMENTAL & VACUUM SERVICES LLC

DOC LOG ID: 38573

CHAZ ID: FLR000176842

CITY: FORT LAUDERDALE

COUNTY: BROWARD

[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
332349	HWR	jmccully@jamenvironmental.com	FLR000176842	Jam Environmental & Vacuum Services LLC
332855	UOP	jmccully@jamenvironmental.com	FLR000176842	Jam Environmental & Vacuum Services LLC

Processes

Document Type	Process	Date	Author	Delete
RUOH	Logged	12/04/2017	SIMMONS_JLS	✕
RUOH	Completeness Review	12/05/2017	ASHWOOD_J	✕
RUOH	Waiting for information	12/05/2017	ASHWOOD_J	✕
RUOH	Ready for Data Entry	07/25/2018	ASHWOOD_J	✕
RUOH	Data Entry Completed	07/25/2018	SIMMONS_JLS	✕
RUOH	Final Review	07/25/2018	ASHWOOD_J	✕
RUOH	Notification Letter Emailed	07/25/2018	ASHWOOD_J	✕
RUOH	Booked into Oculus 🚧	07/25/2018	THURSBY_K	✕

Comments

Document Type	Date	Comment	Author
RUOH	12/05/2017	Email sent Brian McCully: In reviewing your submittal, we noticed additional information is needed. The ACORD form submitted does not match the 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 you to submit two separate Insurance forms. Please submit the following to continue updating your Insurance in our database (see attached blank form for your convenience): Combined	ASHWOOD_J

HWT/VO 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.

RUOH	07/25/2018	Received original Combined HWT/VO Insurance form - Good.	ASHWOOD_J
RUOH	07/25/2018	Received original 8700 form, registration fee,training manual statement, and Annual Report.	ASHWOOD_J

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