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Completed Document Details

NATIVE NAME: COASTAL OIL RECOVERY LLC

DOC LOG ID: 60003

CITY: MELBOURNE

CHAZ ID: FLR000231506

COUNTY: BREVARD

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Document Types

Document Type

RUOH

Primary Type

Y


Discontinued On

Email Addresses

| Affiliation-ID | Interest Type | Email | Native ID | Native Name |
|----------------|---------------|--|--------------|--------------------------|
| 496913 | HWR | coastaloilrecovery@gmail.com | FLR000231506 | Coastal Oil Recovery LLC |
| 497688 | UOP | coastaloilrecovery@gmail.com | FLR000231506 | Coastal Oil Recovery LLC |

Processes

| Document Type | Process | Date | Author | Delete |
|---------------|-------------------------|------------|-------------|--------|
| RUOH | Logged | 06/24/2020 | SIMMONS_JLS | |
| RUOH | Completeness Review | 06/24/2020 | ASHWOOD_J | |
| RUOH | Waiting for information | 06/24/2020 | ASHWOOD_J | |
| RUOH | Ready for Data Entry | 06/28/2020 | ASHWOOD_J | |

| | | | | |
|------|--|------------|-----------|---|
| RUOH | Data Entry Completed | 06/28/2020 | ASHWOOD_J | ✕ |
| RUOH | Final Review | 06/28/2020 | ASHWOOD_J | ✕ |
| RUOH | Booked into Oculus  | 07/01/2020 | THURSBY_K | ✕ |

Comments

| Document Type | Date | Comment | Author |
|-----------------|------------|--|-------------|
| General Comment | 06/24/2020 | Insurance form does not have an original signature. | SIMMONS_JLS |
| RUOH | 06/24/2020 | <p>Email sent to James Moss: In reviewing your submittal, we noticed additional information is needed. The Insurance form submitted does have an original (wet) signature (see attached). The Insurance form can not be altered in any other form. 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 as soon as possible to continue processing your revise UO renewal registration(see attached blank forms for your convenience): Revised Combined HWT/UO Certificate of Liability Insurance form for automobile and pollution liability. NOTE: Transporting used oil without a valid registration is a violation of the law, subject to penalties. As soon as possible, please mail the required form(s) 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.</p> | ASHWOOD_J |
| RUOH | 06/28/2020 | Received pollution liability inclusive of the automobile liability. | ASHWOOD_J |

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