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Florida Department of Environmental Protection



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Completed Document Details

NATIVE NAME: KELLY TRACTOR COMPANY

DOC LOG ID: 56221 **CHAZ ID:** FLD981925811 **CITY:** DORAL **COUNTY:** MIAMI-DADE

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RUOH Email Template RUOH Approvals

Document Types

 Document Type
 Primary Type
 Discontinued On

 RUOH
 Y

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
256013	HWT	Elaine Lastra@kellytractor.com	FLD981925811	Kelly Tractor Company
502244	HWR	roy subia@kellytractor.com	FLD981925811	Kelly Tractor Company

Processes

Document Type	Process	Date	Author	Delete
RUOH	Logged	03/11/2020	OUTLEY_D	×
RUOH	Completeness Review	03/11/2020	ASHWOOD_J	×
RUOH	Waiting for information	03/11/2020	ASHWOOD_J	×
RUOH	Ready for Data Entry	11/30/2020	ASHWOOD_J	×
RUOH	Data Entry Completed	11/30/2020	ASHWOOD_J	×
RUOH	Final Review	11/30/2020	ASHWOOD_J	×

RUOH	Notification Letter Emailed	11/30/2020	ASHWOOD_J	×
RUOH	Booked into Oculus	11/30/2020	ASHWOOD_J	×

Comments

Document Type	Date	Comment	Author
General Comment	03/11/2020	Acord Certificate of Liability Insurance form	OUTLEY_D
RUOH	06/15/2020	Email sent to Roy Subia: In reviewing your submittal, we noticed additional information is needed. The Insurance form submitted does have any original (wet) signature (see attached). We do not accept digital or stamped signatures. 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 and Registration fee of \$100 made payable to Florida Department of Environmental Protection via check or money order. 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.	ASHWOOD_J
RUOH	11/30/2020	Received registration fee and revised original Combined HWT/UO Insurance form - Good.	ASHWOOD_J

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