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NATIVE NAME: MEDICAL BIOWASTE SOLUTIONS INC

DOC LOG ID: 86732

CHAZ ID: FLR000258251

CITY: WINTER PARK

COUNTY: ORANGE

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Document Types






Document Type	Primary Type	Discontinued On
HWG	Y	
RHWT	N	
RMH	N	
RUOH	N	

Email Addresses


Affiliation-ID	Interest Type	Email	Native ID	Native Name
601659	HWR	diana@medbws.com	FLR000258251	Medical Biowaste Solutions Inc
603187	UOP	diana@medbws.com	FLR000258251	Medical Biowaste Solutions Inc
603232	HWT	diana@medbws.com	FLR000258251	Medical Biowaste Solutions Inc

Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	03/21/2023	CIARAVELLA_J	
RHWT	Logged	03/21/2023	CIARAVELLA_J	
RHWT	Completeness Review	03/21/2023	HORLICK_S	
RHWT	Ready for Data Entry	04/27/2023	HORLICK_S	
RHWT	Data Entry Completed	04/27/2023	HORLICK_S	
RHWT	Final Review	04/27/2023	HORLICK_S	
RHWT	Notification Letter Emailed	04/27/2023	HORLICK_S	
RHWT	Booked into Oculus	04/27/2023	HORLICK_S	
RMH	Logged	03/21/2023	CIARAVELLA_J	
RMH	Completeness Review	03/21/2023	HORLICK_S	

RMH	Withdrawn 	03/21/2023	HORLICK_S	
RUOH	Logged	03/21/2023	CIARAVELLA_J	
RUOH	Completeness Review	03/21/2023	ASHWOOD_J	
RUOH	Waiting for information	03/21/2023	ASHWOOD_J	


Add A New Process

Document Type	Process	Date	
Please select 	--- 	04/27/2023	Add Process

Comments

Document Type	Date	Comment	Author
General Comment	03/21/2023	Notification has an original signature, insurance form signature is digital - facility marked RMH on form but is not currently registered.	CIARAVELLA_J
RHWT	04/27/2023	Updated HWT/UOH Certificate of Liability received with original signature.	HORLICK_S
RMH	03/21/2023	Email with facility. Thy are not RMH.	HORLICK_S
RUOH	03/30/2023	Received original 8700 form, registration fee, training manual statement, and Annual Report.	ASHWOOD_J
RUOH	03/30/2023	Email sent to Diana Vizcarra: In reviewing your submittal, we noticed additional information is needed. 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 by Thursday, April 20, 2023 to continue processing your 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 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	04/18/2023	Email sent to Diana Vizcarrap: In reviewing your submittal, we noticed additional information is needed. The Insurance form submitted does not have an original signature (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 by Tuesday, May 9, 2023 to continue processing your 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 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

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