

FLORIDA DEPARTMENT OF Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, FL 32399-2400 Ron DeSantis Governor

Jeanette Nuñez Lt. Governor

Shawn Hamilton Secretary

11/15/2023 Jonathan Drew, President Drew Fuel Services Inc 1862 NW 21st St Pompano Beach, FL 33069

The Florida Department of Environmental Protection has reviewed your submittal for a hazardous waste DEP/EPA Identification Number or status/information change.

Based on the information received, you have been issued the following number or reports for **Drew Fuel Services Inc** located at **1862 NW 21st St, Pompano Beach, FL 33069-1306**

DEP/EPA Identification Number: FLR000235903

Your facility status is the following: Non-Handler of Hazardous Waste, Petroleum Contact Water Management.

Florida Administrative Code 62-730 requires all persons who generate, transport, recycle, store, or dispose of hazardous waste to notify the department of their hazardous waste activities. You are required to renotify on form 8700-12FL when there are changes in your operations which would affect your status, activity or contact information. Additional hazardous waste information including the 8700-12FL form can be found at:

 $\underline{https://floridadep.gov/waste/permitting-compliance-assistance/content/hazardous-waste-management-main-page.}$

Please note that pending program registrations, certifications, or permits will be sent to you separately. **To review the details of your status**, visit:

https://fideploc.dep.state.fl.us/www RCRA/Reports/handler results.asp?epaid=FLR000235903.

For further assistance, please contact me at (850) 245-8707 or email me at Jeff.Gregg@dep.state.fl.us.

Sincerely,

Jeff Gregg

Environmental Manager

Waste Compliance Assistance Program

ME ID: 141581, Email Address: jon@drewfuelservices.com

SAVE

PRINT

CLEAR



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

Date Received (for FDEP Official Use Only)

> DIVISION OF WASTE '23 OCT 4 PM2:26:14

EPA ID:	F	L F	3	0	0	0	2	3 5	9	0	3		use the instruct datory fields	ions do	cument to complete this form
1. Reason fo	r Su	bmitt	al:	(all sı	ubmitt	ers m	ust con	nplete pag	es 1 ar	nd 2 ar	nd sign	page 7. Pag	es 3 through 6 - con	iplete as a	applicable)
Mark 'X' in the correct b	ox*:	1	Г	Γο ob	tain a	new I	EPA II	D numbe	r (for	hazar	dous w	vaste, univer	sal waste, used oil ac	ctivities, o	or PCW activities).
(must choose if a notification		[tification information). st complete pages 1, 2, 3, 7)
To obtain new or updating an EPA ID number for conducting Electronic Manifest Broker activities.Submitting new or revised notification for Part A for permitted facilities.									oner den mies.						
FL Registrat	ion(s	i)	 	_				page 4)					rter (see page 5)	[☑ Used Oil (see page 6)
2. Facility or	Busi	ness N	ame	e:*											
	DREW FUEL SERVICES, INC.														
3. Facility Phy	sical	Loca	tion	Info	rmat	ion: (No P.C). Boxes)							
Physical Stree	t Add	lress*:							18	62 N	IW 2	1ST ST			Vessel
City or Town:											State: Zip Code:				
*				Ρ(OMP	ANC) BE	ACH		_	FL 33069			33069	
County*:				BR	OW	ARD				Country (if not USA)*:					
4. Facility or l	Busin	iess M	ailiı	ng Ao	ldres	s:									
Same addı	ess a	s#;	abov	ve or	k :										
City or Town	ķ.								St	ate*:	te*: Zip/Postal Code*: Country (if not USA):			ountry (if not USA):	
5. Facility No	rth A	meric	an I	ndus	try C	Classi	ficatio	n Syster	n (NA	ICS)	Code	e(s)*: (at l	east 5 digits)	•	
A. 5 6	2	<u> </u> 9	9	8	_ (re	equire	d)				В.	5 6	<u> 2 9 1 0</u>	_	
c.	_ _	_ _	_		_						D.		_		
6. Facility or	Busir	ness R	CRA	A Co	ntact	Pers		_	ddres	s as #	3 at	ove or:			
First Name*: JONATHAN Last Name*:				DI	REW	1		Title*:	PF	RES					
Phone Numbe	r*:	95	543	0668	853		Exte	nsion*:			N/A		Fax*:		N/A
E-Mail*:								JC)N@	DRE	WFU	JELSER\	/ICES.COM		
Street or P.O.	Box ((or san	ne a	ddres	s box	is ch	ecked)*:							
City or Town*:						Stat	e*:		Zip Code*:		Country (if not USA):				

RCRA Hazardous Waste Status Notification or Out of B	n	EPA ID No.*FLR00235903				
7. Real Property (FL Land) Owner of the Facility's Physical I	Location (List additional	owners	in the comments sect	ion.)		
Name of Owner*: DREW FUEL SERVICES, INC.			pecame Owner*: _1 New Owner m			
Street or P.O. Box (or same address box is checked)*: 1862	NW 21ST ST	Phone	Number*:	954-306-6853		
City or Town*: POMPANO BEACH	State*: FL	Zip Co	ode*: 33069	Country (if not USA):		
E-Mail*: JON@	DREWFUELSERV	ICES.	.COM			
Owner Type*: X Private Federal Municipal S	tate County O	ther				
Comments: OFFICE AND TRUCK PARKING ON	ILY AT THIS LO	CATI	ON			
8. Facility Operator (List additional Operators in the comments section	on). Same address as #_	7 abo	ve or:			
Name of Operator*:		Date I	became Operator*: New Operator			
Street or P.O. Box (or same address box is checked)*:		Phone	e Number*:			
City or Town*:	State*:	Zip C	ode*:	Country (if not USA):		
E-Mail*:				L		
Operator Type*: Private Federal Municipal	State County	Other_		_		
Comments:						
9. RCRA Hazardous Waste Activities at this Facility: (Mark 'X' in all that apply): (1) Generator of Hazardous Waste Yes No (This does 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 (includes quantities imported by importer site) 1,000 kilograms or greater per month (kg/mo) (2,200 lbs/mo.) of non-acute hazardous waste; or Generates in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs/mo) of acute hazardous waste; or Generates in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lb/mo) of acute hazardous spill cleanup material.						
	- 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 and/or no more than 100 kg (220 lbs) of any acute hazardous spill					
c. Very Small Quantity Generator (VSQG): - Generates in any calendar month 100 kg/mo or le hazardous waste.	c. Very Small Quantity Generator (VSQG): - Generates in any calendar month 100 kg/mo or less (220 lbs.) of non-acute hazardous waste and/or 1 kg (2.2 lbs) or less of acute					
In addition, indicate other generator activities that apply. d. Short-Term Generator (one-time, not on-going) e. Mixed Waste (hazardous and radioactive) Generator f. United States Importer of hazardous waste g. LQG notifying of VSQG Hazardous Waste Under Control of the Same Person pursuant to 40 CFR 262.17(f). (Addendum A Required) h. Episodic: Not lasting more than 60 days: SQG LQG (Addendum B Required) i. Electronic Manifest Broker, as defined in 40 CFR 260.10, electing to use EPA electronic manifest system to obtain, complete, and transmit an electronic manifest under a contractual relationship with a hazardous waste generator.						

RCRA I	Hazardous	Waste Status Noti	fication or Out of	Business No	tification		EPA ID No.* FLR00235903	3
9. RC	RA Hazaı	dous Waste Act	ivities at this Fa	cility contin	ued: (Mark 'X'			
For Ite	ms 3 throug	h 9, mark 'X' in all t	that apply.					
(2)		rer, or Disposer of H this activity.	Hazardous Waste (a	t your facility—	-Choose Only One)	Note: A haz	ardous waste per	mit may be
	а. Оре	rating Commercial T	SD					
	b. Ope	erating Non-Commerc	cial TSD					
	c. Non	-Operating: Postclos	ure or Corrective Ac	tion Permit or (Order (HSWA, etc.)			
(3)	Recycles	r of Hazardous Was	te (at your facility)					
	Specify:		Non-Commercia					
	Specify:		recycling Does maybe required for store					
(4)	`	Boiler and/or Indu						
		Small Quantity On-sit Smelting, Melting, an	•					
(5)	Person A	Authorized to Mana e this management ac	ge Very Small Quartivity ONLY if you a	ntity Waste Ge attach			m EDED	
(6)		R a copy of your app s Hazardous Waste		norization OK t	ne authorization you	i received iro	ш грег.	
(7)		round Injection Co						
(8)		ized Trader— Mark	all that apply					
		mporter Exporter						
(9)	\neg	er/ Exporter of Spen	nt Lead-Acid Batter	ries (SLARs) m	nder 40 CFR subna	ort G— Mark	all that apply	
(>)		mporter	Zena Hein Zattei	100 (02.120) 4.			an mar appro	
		Exporter						
		s for Federally I List them in the order	0					is wastes handled at
		ransporters must list	•	-				paces are needed.
1		2	3	4	5	6		7
8		9	10	11	12	13		14
15		16	17	18	19	20		21
11. Ot	ther Statu	s Changes (If no	longer handling was	te or closed, ite	ems 9 and 10 should	l be left blank	and items 12-16	skipped):
(A) (Central Accu	mulation Area (CA	A) or Facility Close	ed:				
	Central A	ccumulation Area (C	AA)					
	-	losed (Complete this	s section only if all b	usiness activitie	es at this facility hav	e ceased.)		
(B) (Closure Date				/1/11/			
F		ected closure date uesting new closure d						
F	_					(aa/yyyy)		
		of closure:				0)		
		In compliance with to Not in compliance v	-					
(C)		ax Default	That the closure peric		Petition for Bankr		ction	

Universal Waste Notification and Mercury Transporter/Handler Registration EPA ID No.*FLR0023	5903					
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply):						
A. Federal Notification						
Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: 5,000 kg (11,000 lb) or more of any combination of UW accumulated (at any one time)						
Accumulates: a. UW Batteries b. Pesticides c. Pharmaceuticals						
d. Mercury Containing Devices e. Mercury Containing Lamps 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 notification						
Pharmaceuticals LQH = 5,000 kg or more of Universal Pharmaceutical Waste (UPW) accumulated (at any one time)						
Pharmaceuticals Acute LQH = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW one time) Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be permitted with the Florida Department of Busi Regulation [DBPR]) Florida Universal Pharmaceutical Waste (UPW) Transporter						
C. Florida Annual Mercury Handler Registration:						
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.,F.A.C. (please contact FDEP first). If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below. (1) This form is being submitted as a Florida Registration of Universal Waste Mercury Transporter/Handler for-hire Activities 1						
For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices Mercury-Containing Devices (thermostats, etc.) SQH = less than 100 kg accumulated by for-hire handler Mercury-Containing Lamps SQH = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler	Annual Registration Required					
Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler 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 hazardous waste permit is required for this activity) Ist Annual Registration Annual Renewal Annual Required						
Briefly Describe your Universal Waste Activities: We use Drum Top Bulb Crusher(s). We use Drum Top Bulb Crusher(s). We use Drum Top Bulb Crusher(s). Recovery 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)] F.A.C.						

Hazardous Waste Transporter and Academic Laboratories	EPA ID No.* FLR00235903							
14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need	to register your HW Transporter activities)							
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 as part of this registration. Transporters and transfer facilities may only begin operations after receiving approval from the Department.								
Generators who transport waste only within the boundaries of their facility should NOT register in box 14.A below.								
A. HW Transporter Registration Information (must be completed annually and when this information changes)								
This form is: Initial Registration Renewal Notification of changes Cancel Registration								
1. For own waste only								
2. For commercial purposes								
X 3. Both commercial and own waste								
4. Transportation Mode Air Rail Highway Water Oth	ner - specify							
B. HW Transfer Facility Registration Information (must be completed an	nnually and when this information changes)							
☐ This facility is a Hazardous Waste Transfer Facility: (as listed in It	em 3) Storage Volume							
This form is: Initial Registration Renewal Notification of c	changes Cancel Registration							
Note: Hazardous Waste transfer facilities must comply with the requirements of Ru	le 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.							
The Transfer Facility records required under the provisions of Rule 62-730.17	1(6), F.A.C., are kept at (check one):							
Our mailing (business) address The site (facility) a	address							
Please enter the EPA ID Number of the HW Transporter who carries the insurance for this Tr	ransfer Facility:							
Please see 14.C for additional items to be submitted for registration of a Hazardous	Waste Transfer Facility [Rule 62-730.171(3),							
Florida Administrative Code (F.A.C.)]:								
C. The following items are required to be submitted with the initial notification for a tran submitted with any subsequent submission [Rule 62-730.171(3), Florida Administrative								
Certification by a responsible corporate officer of the transporter facility that the prop Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]	osed location satisfies the criteria of							
Evidence of the transporter facility's financial responsibility [Rule 62-730.171(3)(a)3	., F.A.C.]							
_A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)4	., F.A.C.]							
_A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]								
_A copy of the contingency and emergency plan [Rule 62-730.171(3)(a)6., F.A.C.]								
_A map or maps of the transfer facility [Rule 62-730.171(3)(a)7., F.A.C.]								
15. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K								
1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the man	nagement of hazardous wastes in laboratories							
See the item-by-item instructions for definitions of types of eligible acade.	mic entities. Mark all that apply:							
a. College or University								
b. Teaching Hospital that is owned by or has a formal written affiliation ag								
c. Non-profit Institute that is owned by or has a formal written affiliation ag	reement with a college or university							
2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardou	s wastes in laboratories							

Used Oil and Hazardous Secondary Material	EPA ID No.*FLR00235903
16. Used Oil and Used Oil Filter Activities: (Mark 'X' and complete all that app	ply)
Transporters (exemptions in 40 CFR 279.40(a)(1-4)), transfer facilities, processors, off-spannually register with the Department using this form. An annual \$100 registration fee is requollection centers.	
This form is: Initial Registration 🗵 Renewal 🔲 Notification of c	hanges Cancel Registration
If applicable, a check or money order, in the amount of \$100, payable to Florida Dep UO Collection Centers must check 16.(2) of this form (not as a registration).	partment of Environmental Protection is enclosed.
(1) Used Oil Transporter - mark 'X' in all that apply: (occurring in Florida)	
a. Transporter (off-site) and noncontiguous locations	
b. Transfer Facility	
(2) Collection Center (From businesses, <u>no more than</u> 55 gal per shipment)	
(3) Used Oil Processor (A permit is required.)	
(4) Used Oil Re-refiner (A permit is required.)	
(5) Off-Specification Used Oil Burner Utility Boiler Industrial Boiler Industrial Furnace	
(6) Used Oil Fuel Marketer On-Spec Off-Spec	
(7) Used Oil Filter Management (must annually register)	one):
 (9) Used Oil Transporters: (Exemptions in 40 CFR 279.40(a)(1-4)) ALL registered UO transporters must submit an annual report except generators within their own company. UO transporters transporting off-site over public highways only within their ow UO transporters transporting more than 500 gallons/year must submit proof of i submission as a certified used oil transporter in section 19 (except those exempted) 	n company must submit proof of insurance. nsurance annually, and must sign and certify this
The used oil annual report is attached	ant to 62-710.600(2)(e)., F.A.C. is attached.
17. Notification of Hazardous Secondary Material (HSM) Activity	
(1) Notifying under 40 CFR 260.42 that you will begin managing, are managing, or we under 40 CFR 260.30, 40 CFR 261.4(a)(23), (24), or (27). (Addendum C Required	
(2) Notifying under 40 CFR 260.43(a)(4)(iii) that the product of your recycling process comparable to or unable to be compared to a legitimate product or intermediate but (Addendum C Required)	

Required signature page		EPA ID No.*FLR00235903
18. Comments (attach a page if more space is needed):		
10 Contification I satisfy under results of last that this decomposition	d all attachments	
19. Certification: I certify under penalty of law that this document an accordance with a system designed to assure that qualified personnel p submitted is, to the best of my knowledge and belief, true, accurate, ar false information, including the possibility of fine and imprisonment for the contract of the contra	properly gather and ond complete. I am av	evaluate the information submitted. The information ware that there are significant penalties for submitting
I certify as a Used Oil Transporter that I am familiar with the all tation and have an annual and new employee training program in place bility is demonstrated by the Used Oil Transporter Certificate of Liabi	e covering the applic	cable used oil rules. Evidence of financial responsi-
Signature of owner, operator, or an authorized representative:	Date Signed (mn	n-dd-yyyy): .
MIT. K	8/6/2	23
Print Name (First, Middle Initial, Last):	Title:	_
Jonathan L.Drew		Pres
Organization:	Used Oil 🔀	
Drew Fuel Services, Inc.		
Email:		
jon@drewfuels Signature of owner, operator, or an authorized representative:	Services.com Date Signed (mn	n dd ywyy):
Signature of owner, operator, or an authorized representative.	Date Signed (iiii	n-uu-yyyy).
Print Name (First, Middle Initial, Last):	Title:	
Organization:	Used Oil	
Email:		
If the person that filled in this form is not the Facility Contact or Ope	rator, please comp	lete the information below:
(Name of person completing this form) (Phone Number)		(F_mail Address)



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 12/2019
Incorporated in Rule 62-710.510(5)

Annual Report by Used Oil and Used Oil Filter Handlers*

(*Used Oil handlers are any person(s) subject to the registration requirements of rule 62-710.500 and 62-710.850, F.A.C. See Section A, Box 8 below.)

For the reporting period January 1, 2021 through December 31, 2021

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:Drew Fuel Services, Inc2. Site Address:	1862 NW 2	1st ST Pom	pano Beac	h FL 33069				
054 006 6050	box if any of the above	ve items (1-3) have	changed since you	ır last registration.				
El B	FI POOCOSSOOO							
0	Title:							
	oke@drewfu							
Used Oil: Transporter Transfer Facility Collection Center/Aggregation Point Processor								
Marketer: On Spec Off Spec								
Burner (off-specification used oil): Industrial Furnace Indus	strial Boiler Utility	Boiler Heater						
Used Oil Filter: ☐ Transfer Facility ☐ Processor ☐ End Use	er							
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL	L HANDLERS). SEE	DIRECTIONS BE	LOW					
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Industrial	Mixed	Total				
a. In Florida		5,100		5,100				
b. From out of State								
c. Beginning Inventory								
d. Total (sum of totals from Lines a + b + c)				5,100				
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)			In State	Out of State				
N - Transferred to another facility (not an end use)			5,100					
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								
3. Total amount (in gallons) of Used Oil managed	3. Total amount (in gallons) of Used Oil managed 5,100							
4. End of year, on hand estimate (difference between Line 1d and Line 3)			0	0				

DEP Form #62-710.901(3)
Form Title Annual Report by
Used Oil and Used Oil Filter Handlers
Effective Date 12/2019
Incorporated in Rule 62-710.510(5)

DIRECTIONS FOR SECTION B

- 1. Enter the amount of Used Oil or Oily Waste collected in gallons for type code: Automotive, Industrial, and Mixed.
 - a. In State
 - b. from Out of State
 - c. Beginning Inventory from last year's ending amount
 - d. Enter the total sum of lines a + b + c
- 2. Enter the amount of used oil managed by your facility by end use code (N, O, F, I, B, and D).
- 3. Enter total amount in gallons of Used Oil managed.
- 4. Enter the end-of-year on hand amount (difference between Line 1d and Line 3).

SECTION C USED OIL FILTERS (USE T	ABLE BELOW FOR CONVERSIONS)	In State	Out of State	
1. Number of filters on hand from previous ye	1. Number of filters on hand from previous year			
2. Number of used oil filters collected		0	0	
3. Total number of used oil filters to manage (
4. Disposition of used oil filters collected:	a. Transferred to another registered facility	0	0	
	b. Burned for energy recovery at a Waste-To-Energy facility	0	0	
	c. Transferred directly to a metal foundry for recycling	0	0	
	d. TOTAL			
5. End of year, on hand estimate (Line 3 minu	is Line 4d)			
6. Gallons of used oil collected as a result of f	ilter processing	0	0	
7. Gallons of used oil transferred to a used oil	5,100	0		
8. Volume of oily waste collected and manage	ed as a result of filter processing again gallons cubic yards	0	0	

DIRECTIONS FOR SECTION C

Conversion Table

One 55-gallon drum of <u>crushed</u> used oil filters = approximately <u>400</u> used oil filters

One 55- gallon drum of <u>uncrushed</u> used oil filters = approximately <u>250</u> used oil filters

One <u>ton</u> of drained used oil filters = approximately <u>2,350</u> used oil filters

- 1. Enter the number of Used Oil Filters on hand, from previous year's inventory.
- 2. Enter the number of Used Oil Filters collected.

9. Description of oily waste management _transporter

- 3. Enter the sum of Line 1 + Line 2.
- 4. Enter the number of filters managed by your facility in blocks 4a-c. Enter the sum of 4a-c in block 4d.
- 5. Enter the number of filters on hand at your site as of December 31, last year.
- 6. Fill in the number of gallons of used oil collected by your filter operation.
- 7. Enter the number of gallons transferred to a used oil transporter or processor.
- 8. List the volume (gallons or cubic yards) of the oily wastes collected through your filter handling. Oily wastes are identified in Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

For assistance with this form, please contact the Used Oil Coordinator at 850-245-8707.



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 12/2019
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Annual Report by Used Oil and Used Oil Filter Handlers*

(*Used Oil handlers are any person(s) subject to the registration requirements of rule 62-710.500 and 62-710.850, F.A.C. See Section A, Box 8 below.)

For the reporting period January 1, 2022 through December 31, 2022

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: Drew Fuel Services, Inc. 2. Site Address:	1862 NW 2	1st ST Pom	nano Beac	h FL 33069				
5. Telephone No.	Trickhold No. I ally of the above helis (1-5) have changed since your last registration.							
5. Title: Sec. 7. Phone number (if different from #3, above)								
8. Type of operation (check all that apply): 9. Email Address:brooke@drewfuelservices.com								
Used Oil: Transporter Transfer Facility Collection Center/Aggregation Marketer: On Spec Off Spec	Point Processor							
Burner (off-specification used oil): Industrial Furnace Industrial	aial Dailan Dukilika	Dailar Duastan						
Used Oil Filter: Transporter Transfer Facility Processor End Used		BoilerHeater						
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL		DIRECTIONS RE	OW					
Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Industrial	Mixed	Total				
a. In Florida		900		900				
a. III Florida		300		900				
b. From out of State								
c. Beginning Inventory								
d. Total (sum of totals from Lines $a + b + c$)				900				
2. Amount (in gallons) of Used Oil and Oily Wastes managed (end use code)			In State	Out of State				
N - Transferred to another facility (not an end use)			900					
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	B - Burned as an off-specification used oil fuel							
D - Disposed of: Landfilled								
Treated at a wastewater treatment unit								
Incinerated								
3. Total amount (in gallons) of Used Oil managed			900					
4. End of year, on hand estimate (difference between Line 1d and Line 3)	0	0						

DEP Form #62-710.901(3)
Form Title Annual Report by
Used Oil and Used Oil Filter Handlers
Effective Date 12/2019
Incorporated in Rule 62-710.510(5)

DIRECTIONS FOR SECTION B

- 1. Enter the amount of Used Oil or Oily Waste collected in gallons for type code: Automotive, Industrial, and Mixed.
 - In State
 - b. from Out of State
 - c. Beginning Inventory from last year's ending amount
 - d. Enter the total sum of lines a + b + c
- 2. Enter the amount of used oil managed by your facility by end use code (N, O, F, I, B, and D).
- 3. Enter total amount in gallons of Used Oil managed.
- 4. Enter the end-of-year on hand amount (difference between Line 1d and Line 3).

SECTION C USED OIL FILTERS (USE TA	ABLE BELOW FOR CONVERSIONS)	In State	Out of State	
1. Number of filters on hand from previous yes	1. Number of filters on hand from previous year			
2. Number of used oil filters collected		0	0	
3. Total number of used oil filters to manage (Line 1 plus Line 2)			
4. Disposition of used oil filters collected:	a. Transferred to another registered facility	0	0	
	b. Burned for energy recovery at a Waste-To-Energy facility	0	0	
	c. Transferred directly to a metal foundry for recycling	0	0	
	d. TOTAL			
5. End of year, on hand estimate (Line 3 minus	s Line 4d)			
6. Gallons of used oil collected as a result of fr	Iter processing	0	0	
7. Gallons of used oil transferred to a used oil	900	0		
8. Volume of oily waste collected and manage	d as a result of filter processing gallons cubic yards	0	0	
6. Gallons of used oil collected as a result of fi7. Gallons of used oil transferred to a used oil	d. TOTAL	0 900	0	

DIRECTIONS FOR SECTION C

Conversion Table

One **55**-gallon drum of **crushed** used oil filters = approximately **400** used oil filters

One **55**- gallon drum of **uncrushed** used oil filters = approximately **250** used oil filters

One **ton** of drained used oil filters = approximately **2,350** used oil filters

- 1. Enter the number of Used Oil Filters on hand, from previous year's inventory.
- 2. Enter the number of Used Oil Filters collected.

9. Description of oily waste management transporter

- 3. Enter the sum of Line 1 + Line 2.
- 4. Enter the number of filters managed by your facility in blocks 4a-c. Enter the sum of 4a-c in block 4d.
- 5. Enter the number of filters on hand at your site as of December 31, last year.
- 6. Fill in the number of gallons of used oil collected by your filter operation.
- 7. Enter the number of gallons transferred to a used oil transporter or processor.
- 8. List the volume (gallons or cubic yards) of the oily wastes collected through your filter handling. Oily wastes are identified in Florida Administrative Code Rule 62-710.201(1), and include wastewaters, filter residues or sludges, tank bottoms, sorbents, wipes, etc.
- 9. Describe how oily wastes were managed (sent to a WTE, hazardous waste facility, landfilled after appropriate testing, etc.).

For assistance with this form, please contact the Used Oil Coordinator at 850-245-8707.