

# FLORIDA DEPARTMENT OF Environmental Protection

Ron DeSantis Governor

Jeanette Nuñez Lt. Governor

Shawn Hamilton Secretary

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

04/17/2024 Jeffrey Bennett, AMBR Environmental Services By JDB LLC 6070 Channel Ct Jacksonville, FL 32244

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 for reports for **Environmental Services By JDB LLC** located at **3880 Firestone Rd**, **Jacksonville**, **FL 32210-4825** 

## DEP/EPA Identification Number: FLR000252114

Your facility status is the following: Very Small Quantity Generator (VSQG), 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:

<u>https://floridadep.gov/waste/permitting-compliance-assistance/content/hazardous-waste-management-main-page</u>.

Please note that pending program registrations, certifications, or permits will be sent to you separately. **To review the details of your status**, visit: <a href="https://fldeploc.dep.state.fl.us/www">https://fldeploc.dep.state.fl.us/www</a> RCRA/Reports/handler results.asp?epaid=FLR000252114.

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

Sincerely,

Tiplary Nalonal For

Jeff Gregg Environmental Manager Waste Compliance Assistance Program

ME ID: 149089, Email Address: jeff@envserbyjdb.com

RUNTAL PROTECTION	DEP Waste Management Division-HWRS MS4560					(for FDEP Official Use Only) DIVISION OF WASTE MAI '24 FEB 29 AM10: 42:
EPA ID:       F       L       R       O       O       2       5       2       1       4       Please use the instructions document to complete this form * mandatory fields						
1. Reason for Submittal: (all submitters must complete pages 1 and 2 and sign page 7. Pages 3 through 6 - complete as applicable)						
Mark 'X' in the correct box*:	To obtain a new EPA ID number (for hazardous waste, universal waste, used oil activities, or PCW activities).					
(must choose one						
if a notification)	To provide the f	inal information for	r an EPA ID	number (clo	osing). (see instruction	ons-must complete pages 1, 2, 3, 7)
	To obtain new o	r updating an EPA	ID number	for conducti	ng Electronic Mar	nifest Broker activities.
	□ Submitting new	or revised notificat	ion for Part	A for permi	tted facilities.	
FL Registration(s)	UW Mercury	y (see page 4)	X F	IW Transpor	ter (see page 5)	Used Oil (see page 6)
2. Facility or Business	Name:*					
	nental Se	ervices b	by JD	B, LL	.C	
3. Facility Physical Lo	cation Information: ()	No P.O. Boxes)				
Physical Street Address	*: 3880 Fires	tone Rd.				□Vessel
City or Town: Jacks	sonville				State: FL	Zip Code: <b>32210</b>
County*: Duval	Country (if not USA)*:					
4. Facility or Business	Mailing Address:					
Same address as #_	_above or*:					
City or Town*:	City or Town*: State*: Zip/Postal Code*: Country (if not USA):					Country (if not USA):
5. Facility North Ame	ican Industry Classif	fication System (N	AICS) Cod	e(s)*: (at le	east 5 digits)	
а. <u>5 6 2 </u>	A. <u>5  6   2   9   1   0 (required)</u> B. <u> 5  6   1   7   9   0  </u>					
c. <u> 5 6 1 7 3 0 </u> D. <u>           </u>						
6. Facility or Business	RCRA Contact Pers	on: 🗖 Same addre	ess as #a	bove or:		
First Name*: Jeffr	ey	Last Name <sup>*</sup> :Be	nnett		Title*: Pres	ident
Phone Number*: 904	1-535-1968	Extension <sup>*</sup> : N/A			Fax <sup>*:</sup> N/A	
E-Mail*: jeff@env	serbyjdb.com	-				
Street or P.O. Box (or s	ame address box is ch	ecked)*: 6070	Chann	el Ct.		
City or Town*:	ksonville		State*:	FL	Zip Code*: 322	Country (if not USA):

RCRA Hazardous Waste Status Notification or Out of Bus	siness Notificatio	n EPA ID No.* FL	_R000252114			
7. Real Property (FL Land) Owner of the Facility's Physical Location (List additional owners in the comments section.)						
Name of Owner*: Date became Owner*: <u>11/01/86</u>						
Lane Land Dev.		□ New Owner mm dd yy				
Street or P.O. Box (or same address box is checked)*:3320 Lake	e Shore Blvd.	Phone Number*:				
City or Town*: Jacksonville State*: FL Zip Code*: 32210 Country (if not USA):						
E-Mail*: lanelanddev@gmail.com						
Owner Type <sup>*</sup> : Private □Federal □Municipal □State □County □Other						
Comments:						
8. Facility Operator (List additional Operators in the comments section).	Same address as #	above or:				
Name of Operator*:		Date became Operator*:				
Street or P.O. Box (or same address box is checked)*:		Phone Number*:				
City or Town*: S	tate*:	Zip Code*:	Country (if not USA):			
E-Mail*:		L				
Operator Type <sup>*</sup> :	ate County	Other				
<ul> <li>Comments:</li> <li>9. RCRA Hazardous Waste Activities at this Facility (1) Generator of Hazardous Waste</li> <li>Yes No (This does not include Universal Waste or Used O If YES, Choose only one of the following three categories.</li> <li>a. Large Quantity Generator (LQG): <ul> <li>Generates in any calendar month (includes quantitie (2,200 lbs/mo.) of non-acute hazardous waste; or</li> </ul> </li> </ul>	il) es imported by impor	rter site) 1,000 kilograms (				
<ul> <li>Generates in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs/mo) of acute hazardous waste; or</li> <li>Generates in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lb/mo) of acute hazardous spill cleanup material.</li> </ul>						
<ul> <li>b. Small Quantity Generator (SQG):</li> <li>Generates in any calendar month greater than 100kg waste and/or 1 kg (2.2 lbs) or less of acute hazardou cleanup material.</li> </ul>		•				
<ul> <li>c. Very Small Quantity Generator (VSQG):</li> <li>Generates in any calendar month 100 kg/mo or less hazardous waste.</li> <li>In addition, indicate other generator activities that apply.</li> </ul>	(220 lbs.) of non-act	ute hazardous waste and/o	r 1 kg (2.2 lbs) or less of acute			
<ul> <li>d. Short-Term Generator (one-time, not on-going)</li> <li>e. Mixed Waste (hazardous and radioactive) Generator</li> <li>f. United States Importer of hazardous waste</li> <li>g. LQG notifying of VSQG Hazardous Waste Under Control</li> <li>h. Episodic: Not lasting more than 60 days:SQG_LQG</li> <li>i. Electronic Manifest Broker, as defined in 40 CFR 260.10 transmit an electronic manifest under a contractual relation</li> </ul>	(Addendum B Requ ), electing to use EPA	<b>ired)</b> A electronic manifest syste				

RCRA Hazaro	ous Waste Status	s Notification or C	Dut of Business No	otification	EPA ID	FLR000252114
9. RCRA H	azardous Waste	e Activities at th	is Facility conti	ued: (Mark 'X'	in all that apply):	
For Items 3 th	rough 9, mark 'X'	in all that apply.				
(2) Treate	. Storer, or Dispos	er of Hazardous W	aste (at your facility-	-Choose Only One)	Note: A hazardous v	vaste permit may be
	d for this activity.					,
_	. Operating Comme	roial TSD				
_						
	. Operating Non-Co					
		ostclosure or Correct s Waste (at your fac	ive Action Permit or	Order (HSWA, etc.)		
		cial D Non-Com				
	cify: 🗖 Stores pr	ior to recycling	Does not store prio	r to recycling.		
(4) 🛛 Ex		r Industrial Furnac		, ennig.		
		On-site Burner Exer				
	b. Smelting, Melt	ing, and Refining Fu	rnace Exemption			
C	hoose this managem	nent activity ONLY	if you attach	enerated at Other Father the authorization you		,
		Waste from Off-Sit		J		
(7) 🗖 Ur	derground Injection	on Control				
(8) 🗖 Re	cognized Trader—	- Mark all that apply				
	a. Importer					
	b. Exporter					
(9) 🗖 In	porter/ Exporter o	f Spent Lead-Acid	Batteries (SLABs) u	nder 40 CFR subpa	<b>rt G</b> — Mark all that	apply
	a. Importer					
	b. Exporter					
				es*: List the waste on the state of the stat		hazardous wastes handled a
			0			f more spaces are needed.
l	•			5		
D001						
8	9	10	11	12	13	14
15	16	17	18	19	20	21
1. Other S	tatus Changes	(If no longer handli	ng waste or closed, it	ems 9 and 10 should	be left blank and iter	ns 12-16 skipped):
(1)	Accumulation Are	a (CAA) or Facility	Closed:			
(A) Central	al A commutation A	rea (CAA)				
	ral Accumulation A			es at this facility have	( because )	
Cen		ete this section only	if all business activit	is at this facility have	e ceased.)	
Cen	lity Closed (Comple	ete this section only	if <u>all</u> business activit	ies at this facility have	e ceaseu.)	
Cent Faci (B) Closure	lity Closed (Comple Dates:			_(date in mm/dd/yyy)		
Cent Faci (B) Closure (1)	lity Closed (Comple <b>Dates:</b> Expected closure d	ate		_(date in mm/dd/yyy	y)	
<ul> <li>Cent</li> <li>Faci</li> <li>(B) Closure</li> <li>(1)</li> <li>(2)</li> </ul>	lity Closed (Comple <b>Dates:</b> Expected closure d Requesting new clo	ate		_(date in mm/dd/yyy	y)	
<ul> <li>Cent</li> <li>Faci</li> <li>(B) Closure</li> <li>(1)</li> <li>(2)</li> </ul>	lity Closed (Comple Dates: Expected closure d Requesting new clo Date of closure:	ate	(dat	_ (date in mm/dd/yyy (date in mm/d e in mm/dd/yyyy)	y) dd/yyyy)	
Cent Faci (B) Closure (1) (2) (3)	lity Closed (Comple Dates: Expected closure d Requesting new clo Date of closure: a. In compliance	ate osure date with the closure per	(dat	_(date in mm/dd/yyy	y) dd/yyyy) 3)	

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date: 12/2019 Page 3 of 10

Unive	rsal Waste Notification and Mercury Transporter/Handler Registration EPA ID No.*FLR000	252114				
12.	Universal Waste (UW) Activities (Mark 'X' and complete all that apply) :					
A. F	A. Federal Notification					
	Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: <u>5,000 kg (11,000 lb) or more</u> of a of UW accumulated (at any one time)	any combination				
	Accumulates: 🗖 a. UW Batteries 🗖 b. Pesticides 🗖 c. Pharmaceuticals					
	<ul> <li>d. Mercury Containing Devices</li> <li>e. Mercury Containing Lamps</li> <li>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.</li> </ul>					
B. F	lorida 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 <b>Acute LQH</b> = more than 1 kg (2.2 lb) of acutely hazardous ("P-listed") pharmaceutical waste (UPW one time)	) accumulated (at any				
	Florida Universal Pharmaceutical Waste (UPW) Transporter					
C. Fl	lorida Annual Mercury Handler Registration:					
<ul> <li>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).</li> <li>If you only generate lamps and/or devices or manage pharmaceuticals, do not register or complete the information below.</li> <li>(1) This form is being submitted as a Florida Registration of Universal Waste Mercury Transporter/Handler for-hire Activities</li> <li>Ist Annual Registration Annual Renewal One-time \$1,000 fee for Mercury for-hire first time LQH registration is attached</li> </ul>						
	For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices					
	For-hire Transfer Facility of Universal Waste Mercury-Containing Lamps or Devices	Annual				
	Mercury-Containing Devices (thermostats, etc.) SQH = less than 100 kg accumulated by for-hire handler	Registration Required				
	Mercury-Containing Lamps <b>SQH</b> = less than 2,000 kg (8,000 lamps) accumulated by for-hire handler					
	Mercury-Containing Devices LQH = 100 kg (220 lb) or more accumulated at any one time by for-hire handler	Annual Registration + one- time \$1,000 fee+				
	Mercury-Containing Lamps LQH = 2,000 kg (4400 lbs/8,000 lamps) or more accumulated by for-hire handler	More Requirements (contact FDEP)				
(2)	Mercury Recovery and/or Reclamation Facility (A <u>hazardous waste permit</u> is required for this activity) Ist Annual Registration Annual Renewal	Annual Registration Required				
Briefly I	Describe your Universal Waste Activities:	op Bulb Crusher(s).				
	ther State Regulated Waste Activities: Petroleum Contact Water (PCW) CRecovery CTransponder Note: A water facility permit may be required for this activity. An annual report is required for a recovery facility pursuant to Rule [6]					

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date: 12/2019 Page 4 of 10

azardous Waste Transporter and Academic Laboratories EPA ID No.* FLR000252114				
14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need				
<b>Transporters of and Transfer Facilities for Hazardous Waste in the State of Florida are required to register and annually renew their registration.</b> 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 annuall	y 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				
3. Both commercial and own waste				
4. Transportation Mode 🗖 Air 🗖 Rail 🞽 Highway 🗖 Water 🗖 Ot	ther - specify			
B. HW Transfer Facility Registration Information (must be completed a	nnually and when this information changes)			
This facility is a Hazardous Waste Transfer Facility: (as listed in I	tem 3) Storage Volume			
This form is: 🗖 Initial Registration 🗖 Renewal 📮 Notification of	changes 🛛 Cancel Registration			
Note: Hazardous Waste transfer facilities must comply with the requirements of Ru	ule 62-730.171, F.A.C., and Rule 62-730.182, F.A.C.			
The Transfer Facility records required under the provisions of Rule 62-730.171(6), F.A.C., are kept at (check one):				
Please enter the EPA ID Number of the HW Transporter who carries the insurance for this T	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.)]:				
<b>C.</b> The following items are required to be submitted with the initial notification for a <b>tra</b> submitted with any subsequent submission [Rule 62-730.171(3), Florida Administrati				
Certification by a responsible corporate officer of the transporter facility that the prop	posed location satisfies the criteria of			
Section 403.7211(2), Florida Statutes (F.S.) [Rule 62-730.171(3)(a)1., F.A.C.]	2 FACI			
Evidence of the transporter facility's financial responsibility [Rule 62-730.171(3)(a): A brief general description of the transfer facility operations [Rule 62-730.171(3)(a):				
A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]	+., r.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 opti laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K	ing into or withdrawing from managing			
1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the ma	negament of begandous wastes in laboratories			
See the item-by-item instructions for definitions of types of eligible acade				
<ul> <li>a. College or University</li> </ul>	nno onthoo. man an that appy.			
<ul> <li>b. Teaching Hospital that is owned by or has a formal written affiliation age</li> <li>c. Non-profit Institute that is owned by or has a formal written affiliation age</li> </ul>				
<b>2</b> . Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardou	us wastes in laboratories			

Used Oil and Hazardous Secondary Material	EPA ID No.* FLR000252114						
16. Used Oil and Used Oil Filter Activities: (Mark 'X' and complete all that ap	16. Used Oil and Used Oil Filter Activities: (Mark 'X' and complete all that apply)						
Transporters (exemptions in 40 CFR 279.40(a)(1-4)), transfer facilities, processors, off-specification burners, and/or marketers <u>must</u> <u>annually register</u> with the Department using this form. An annual \$100 registration fee is required for all, except used oil (UO) Processors and collection centers.							
This form is: 🛛 Initial Registration 🛛 Renewal 📮 Notification of changes 📮 Cancel Registration							
If applicable, a check or money order, in the amount of \$100, payable to Florida De 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)							
a. Transporter							
<ul> <li>b. Transfer Facility</li> <li>c. Processor (Annual Report Required)</li> </ul>							
$\Box$ d. End User (see instructions for definition)							
(8) The records required under the provisions of Rule 62-710.510, FAC, are kept at (check	one):						
<ul> <li>Our mailing (business) address (as listed in Item 4)</li> <li>The site (facility) address (as listed in Item 3)</li> </ul>							
<ul> <li>(9) Used Oil Transporters: (Exemptions in 40 CFR 279.40(a)(1-4))</li> <li>ALL registered UO transporters must submit an annual report except generator</li> </ul>	s transporting UO from noncontiguous operations						
within their own company.							
<ul> <li>UO transporters transporting off-site over public highways only within their ow</li> <li>UO transporters transporting more than 500 gallons/year must submit proof of submission as a certified used oil transporter in section 19 (except those exemption)</li> </ul>	insurance annually, and must sign and certify this						
The used oil annual report is attached Auto & General Liability insurance carriers will send in the r	ant to 62-710.600(2)(e)., F.A.C. is attached. required document.						
17. Notification of Hazardous Secondary Material (HSM) Activity							
(1) I Notifying under 40 CFR 260.42 that you will begin managing, are managing, or w under 40 CFR 260.30, 40 CFR 261.4(a)(23), (24), or (27). (Addendum C Required							
<ul> <li>(2) In 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)</li> </ul>							

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date: 12/2019 Page 6 of 10

Required signature page	EPA ID No.* FLR000252114		
18. Comments (attach a page if more space is needed):			
<b>19. Certification:</b> 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 f	properly gather and evaluate the information submitted. The information and complete. I am aware that there are significant penalties for submitting		
I certify as a Used Oil Transporter that I am familiar with the ap tation and have an annual and new employee training program in place bility is demonstrated by the Used Oil Transporter Certificate of Liabi	oplicable Florida and Federal laws and rules governing used oil transpor- e covering the applicable used oil rules. Evidence of financial responsi- lity Insurance, DEP form 62-730.900(5)(a), F.A.C		
Signature of owner, operator, or an authorized representative:	Date Signed (mm-dd-yyyy):		
	02/20/24		
Print Name (First, Middle Initial, Last):	Title:		
Jeffrey D. Bennett	President		
Organization:	Used Oil 🔀		
Environmental Services by JDB, LLC			
Email:			
jeff@envserbyjdb.com			
Signature of owner, operator, or an authorized representative:	Date Signed (mm-dd-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 complete the information below:		
(Name of person completing this form) (Phone Number)	(E-mail Address)		

DEP Form 62-730.900(1)(b), adopted by reference in rule 62-730.150(2)(a), 62-710.500(1), and 62-737.400(3)(a)2., F.A.C. Effective Date: 12/2019 Page 7 of 7



## **D**EPARTMENT 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, <u>2023</u> through December 31, <u>2023</u>

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				-		
. Company Name: Environmental Services by JDB, LLC 2. Site Address: 3880 Firestone Rd., Jacksonville, FL 32210						
8. Telephone No: 904-535-1968 Check box if any of the above items (1-3) have changed since your last registration.						
. EPA ID No. FLR000252114 5. Name of person preparing report (please print) Rose Sutton						
6. Title: Office Manager 7. Phone number (if different from #3, above) 904-513-419						
8. Type of operation (check all that apply): 9. Email Address: jeff@envserbyjdb.com						
Used Oil: Transporter Transfer Facility Collection Center/Aggregation Point Processor						
Marketer: On Spec Off Spec						
Burner (off-specification used oil): Industrial Furnace Industr	ial Boiler 🗌 Utility	Boiler Heater				
Used Oil Filter: Transporter Transfer Facility Processor End User						
SECTION B USED OIL (TO BE COMLETED BY ALL REGISTERED USED OIL	HANDLERS). SEE	DIRECTIONS BEI	.OW			
1. Amount (in gallons) of Used Oil and Oily Wastes collected (type code)	Automotive	Industrial	Mixed	Total		
a. In Florida			663,677	663,677		
b. From out of State						
c. Beginning Inventory				1,095		
<b>d. Total</b> (sum of totals from Lines $a + b + c$ )				664,772		
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)						
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			40,230			
Treated at a wastewater treatment u	nit		624,542			
Incinerated						
3. Total amount (in gallons) of Used Oil managed			664,772			
4. End of year, on hand estimate (difference between Line 1d and Line 3)						

### **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 year		0	
2. Number of used oil filters collected		30,375	
3. Total number of used oil filters to manage (Line 1 plus Line 2)		30,375	
4. Disposition of used oil filters collected:	a. Transferred to another registered facility	16,275	
	b. Burned for energy recovery at a Waste-To-Energy facility		
	c. Transferred directly to a metal foundry for recycling	14,100	
	d. TOTAL	30,375	
5. End of year, on hand estimate (Line 3 minu	is Line 4d)	0	
6. Gallons of used oil collected as a result of f	îlter processing	55	
7. Gallons of used oil transferred to a used oil handler (transporter or processor)		19,625	
8. Volume of oily waste collected and managed as a result of filter processing gallons cubic yards		55	
9. Description of oily waste management All	waste was sent to recycling facility		

#### DIRECTIONS FOR SECTION C

#### **Conversion Table**

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