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**NATIVE NAME:** SAFETY-KLEEN SYSTEMS INC  
**DOC LOG ID:** 105967 **CHAZ ID:** FLD984171694  
**CITY:** MEDLEY **COUNTY:** MIAMI-DADE

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Document Types

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

Email Addresses

Affiliation-ID	Interest Type	Email	Native ID	Native Name
676972	UOP	<a href="mailto:todd.blake@safety-kleen.com">todd.blake@safety-kleen.com</a>	FLD984171694	Safety-Kleen Systems Inc
677102	HWR	<a href="mailto:todd.blake@safety-kleen.com">todd.blake@safety-kleen.com</a>	FLD984171694	Safety-Kleen Systems Inc
683758	MP	<a href="mailto:Cozzie.Thomas@Safety-Kleen.com">Cozzie.Thomas@Safety-Kleen.com</a>	FLD984171694	Safety-Kleen Systems Inc
687369	HWT	<a href="mailto:gvanstechelman@safety-kleen.com">gvanstechelman@safety-kleen.com</a>	FLD984171694	Safety-Kleen Systems Inc

Processes

Document Type	Process	Date	Author	Delete
HWG	Logged	02/27/2025	CIARAVELLA_J	
RHWT	Logged	02/27/2025	CIARAVELLA_J	
RHWT	Completeness Review	02/27/2025	HORLICK_S	
RHWT	Ready for Data Entry	03/13/2025	HORLICK_S	
RHWT	Data Entry Completed	03/13/2025	HORLICK_S	
RHWT	Final Review	03/13/2025	HORLICK_S	
RHWT	Notification Letter Emailed	03/13/2025	HORLICK_S	
RHWT	Booked into Oculus	03/13/2025	HORLICK_S	
RUOH	Logged	02/27/2025	CIARAVELLA_J	

3/13/25, 1:10 PM

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RUOH	Completeness Review	02/27/2025	ASHWOOD_J	✕
RUOH	Waiting for information	02/27/2025	ASHWOOD_J	✕

Add A New Process

Document Type

Process

Date

Please select

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03/13/2025

Add Process

Comments

Document Type	Date	Comment	Author
General Comment	02/27/2025	Notification has an original signature.	CIARAVELLA_J
RHWT	03/13/2025	Valid Certificate of Liability insurance form on file.	HORLICK_S
RUOH	03/05/2025	Received original 8700 form, registration fee, training manual statement, and Annual Report. Insurance form on file is current.	ASHWOOD_J
RUOH	03/05/2025	Email sent to Greg Van Stechelma: In reviewing your submittal, we noticed additional information is needed. Please correct Insurance form (see attached). Have carrier to correct Insurance carrier name to "Starr Indemnity & Liability Company" on Page 1 & 2. That's all I need. Please submit the following by Wednesday, March 26, 2025 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-PCAP, MS4560 2600 Blair Stone Rd. Tallahassee, FL 32399-2400. Let me know if you have any questions.	ASHWOOD_J

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Document Type

Comments

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