

# FLORIDA DEPARTMENT OF Environmental Protection

Ron DeSantis Governor

Jeanette Nuñez Lt. Governor

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

Shawn Hamilton Secretary

05/28/2024 Vincent Skreba, HSE Director South Oper Cummins Inc 5125 Highway 85 Atlanta, GA 30349

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 Cummins Inc located at **5910 E Hillsborough Ave, Tampa, FL 33610-5419** 

## DEP/EPA Identification Number: FLD046702122

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

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:

https://floridadep.gov/waste/permitting-compliance-assistance/content/hazardous-wastemanagement-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: <a href="https://fldeploc.dep.state.fl.us/www">https://fldeploc.dep.state.fl.us/www</a> RCRA/Reports/handler results.asp?epaid=FLD046702122</a> .

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

Sincerely,

Siplarey Nolonal

Jeff Gregg Environmental Manager Waste Compliance Assistance Program

ME ID: 44923, Email Address: Vincent.Skreba@cummins.com

AND DEPARTMENT						Date Received (for FDEP Official Use Only) DIVISION OF WASTE M '24 FEB 22 AM10:23		
EPAID: F L D C	4 6	7	0 2	1	2 2	2	Please use the instruction * mandatory fields	ons document to complete this form
the correct box*:	btain a new	EPA ID	numbe	er (for ha	zardous	s wa	age 7. Pages 3 through 6 - comp ste, universal waste, used oil acti	ivities, or PCW activities).
if a notification)	provide the solution of the so	final info or updati	ormatio ng an H	on for an EPA ID :	EPA I	D n r fo	umber (to update status and faci umber (closing). (see instructio r conducting Electronic Man for permitted facilities.	ns—must complete pages 1, 2, 3, 7)
FL Registration(s)	UW Mercui	ry (see p	bage 4)			ни	/ Transporter (see page 5)	Used Oil (see page 6)
2. Facility or Business Name:*			СІ	JMMI	NS IN	IC.	- TAMPA	
3. Facility Physical Location Int	ormation:	(No P.O.	Boxes)					
Physical Street Address*:		59	10 E	HILLS	SBOF	RO	UGH AVENUE	Vessel
City or Town:	TAM	1PA					State: FL	Zip Code: 33610
County*: HILLS	SBOROL	JGH			Country	(if	not USA) <sup>*</sup> :	
4. Facility or Business Mailing A	Address:							
Same address as # above o	r*:							
City or Town*:				5125 State		ЧN	/AY 85 Zip/Postal Code*:	Country (if not USA):
ATLA	NTA			State	GA		30349	Country (IT not CON).
5. Facility North American Ind	ustry Classi	ification	System	n (NAIC	CS) Co	de(	s)*: (at least 5 digits)	
A.     _	(require	ed)			В.			
c					D.		_	
6. Facility or Business RCRA C	ontact Pers	son:X	Same a	address a	us #_4	abc	ve or:	
First Name <sup>*</sup> : VINCENT		Last N	lame":	SKR	EBA		Title <sup>*</sup> : HSE D	IRECTOR SOUTH
Phone Number*: 678-294	-4418	Exten	sion*:				Fax*:	
E-Mail*:	10	I	VINC	CENT	SKRI	FR	A@CUMMINS.COM	
Street or P.O. Box (or same addr		* ( ] = = ] = =						
Street of F.O. Box (of Same addi	ess box is cl	iecked)						

,

RCRA Hazardous	Waste Status Notification or Ou	It of Bu	siness No	otificatio	n	EPA ID No.*	FLD046702122
7. Real Property (FI	Land) Owner of the Facility's Phys	sical Loc	cation (List	t additional	owners in	the comments see	ction.)
Name of Owner*:					Date be	came Owner*: _	07 / 03 / 2017
	WESTGATE APARTMENTS OF TAM					New Owner n	nm dd yy
Street or P.O. Box (or	same address box is checked)*:2401	W. MOF	RRISON A	VE OFC	Phone N	Number*:	
City or Town*:	TAMPA	5	State*:	FL	Zip Coc	<sup>le*:</sup> 33629	Country (if not USA):
E-Mail*:							
Owner Type*: 🔀 Comments:	Private 🗌 Federal 🔲 Municipal	Stat	te Cou	inty 🗌 O	ther		
	(List additional Operators in the comments	s section).	). Same add	lress as #_	above	e or:	
Name of Operator*:	CUMMINS INC.				Date be		f: 01 / 01 /2016 mm dd yy
Street or P.O. Box (or	same address box is checked)*: 500	JACK	SON S	REET	Phone	Number*:	678-935-8766
City or Town*:	COLUMBUS		State*:	IN	Zip Co	<sup>de*:</sup> 47202	Country (if not USA):
E-Mail*:	VINC	ENT.	SKREBA	A@CUN	/MINS	.COM	
Operator Type*:	Private Federal Municipa						
	ORATE ADDRESS INCLU	UDES	5 MC 60	805		annly).	
CORP	dous Waste Activities at this lazardous Waste	UDES Facilit	6 MC 60	805		apply):	
CORP 9. RCRA Hazar (1) Generator of Ha XYes \[] No	dous Waste Activities at this azardous Waste (This does not include Universal Waste of	UDES Facilit	6 MC 60	805		apply):	
CORP 9. RCRA Hazar (1) Generator of Ha Yes \[No If YES, Choose o	dous Waste Activities at this azardous Waste (This does not include Universal Waste of nly one of the following three categor	UDES Facilit	6 MC 60	805		apply):	
CORP 9. RCRA Hazar (1) Generator of Ha Yes No If YES, Choose o a. Large Qu - Gener	dous Waste Activities at this azardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes	UDES Facilit or Used O ries. quantitie	<b>5 MC 60</b> <b>y: (Mar</b> Dil)	9805 •k 'X' in	all that		
CORP 9. RCRA Hazar (1) Generator of Ha Yes No If YES, Choose o a. Large Qu - Gener (2,200 - Gener	dous Waste Activities at this a azardous Waste (This does not include Universal Waste of nly one of the following three categor <b>uantity Generator (LQG):</b> rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum	UDES Facilit, or Used O ries. quantitie ste; or nulates at	S MC 60 y: (Mar Dil) es imported t any time,	9805 <b>k 'X' in</b> d by impo	all that rter site)	1,000 kilograms 0 (2.2 lbs/mo) of	acute hazardous waste; or
CORP 9. RCRA Hazar (1) Generator of Ha Yes No If YES, Choose o a. Large Qu - Gener (2,200 - Gener - Gener mate b. Small Qu	dous Waste Activities at this azardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG):	UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at	S MC 60 y: (Man Dil) es imported t any time, t any time,	9805 •k 'X' in d by impor more than more than	<b>all that</b> rter site) 1 1 kg/ma 1 100 kg/	1,000 kilograms ) (2.2 lbs/mo) of mo (220 lb/mo)	acute hazardous waste; or of acute hazardous spill cle
CORP 9. RCRA Hazar (1) Generator of Ha ∑ Yes □ No If YES, Choose o □ a. Large Qu - Gene: (2,200 - Gene: - Gene: - Gene: mate b. Small Qu - Gene: wasto	dous Waste Activities at this azardous Waste (This does not include Universal Waste of nly one of the following three categor <b>uantity Generator (LQG):</b> rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rates in any calendar month, or accum	UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at	S MC 60 y: (Man Dil) es imported t any time, t any time, g/mo but le	9805 k 'X' in d by impor more than more than ess than 1,	all that rter site) n 1 kg/mo n 100 kg/m	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2	Sacute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar
<ul> <li>CORP</li> <li>9. RCRA Hazar</li> <li>(1) Generator of Ha</li> <li>Yes □ No</li> <li>If YES, Choose o</li> <li>If YES, Choose o</li> <li>a. Large Qu</li> <li>- Gener</li> <li>(2,200)</li> <li>- Gener</li> <li>- Gener<!--</td--><td>dous Waste Activities at this is azardous Waste (This does not include Universal Waste of nly one of the following three categor <b>uantity Generator (LQG):</b> rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. <b>antity Generator (SQG):</b> rates in any calendar month greater the e and/or 1 kg (2.2 lbs) or less of acute the properties of acute the properties of acute the properties of acute the set of th</td><td>UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at nulates at nulates at</td><td>S MC 60 y: (Man Dil) es imported t any time, t any time, g/mo but le bus waste an</td><td>9805 •k 'X' in d by import more than more than ess than 1, nd/or no n</td><td>all that rter site) n 1 kg/mo n 100 kg/m n 100 kg/m nore than</td><td>1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (&gt;220 to &lt;2,2 100 kg (220 lbs</td><td>acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp</td></li></ul>	dous Waste Activities at this is azardous Waste (This does not include Universal Waste of nly one of the following three categor <b>uantity Generator (LQG):</b> rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. <b>antity Generator (SQG):</b> rates in any calendar month greater the e and/or 1 kg (2.2 lbs) or less of acute the properties of acute the properties of acute the properties of acute the set of th	UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at nulates at nulates at	S MC 60 y: (Man Dil) es imported t any time, t any time, g/mo but le bus waste an	9805 •k 'X' in d by import more than more than ess than 1, nd/or no n	all that rter site) n 1 kg/mo n 100 kg/m n 100 kg/m nore than	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs	acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp
<ul> <li>CORP</li> <li>9. RCRA Hazar</li> <li>(1) Generator of Ha</li> <li>Yes □ No</li> <li>If YES, Choose o</li> <li>If YES, Choose o</li> <li>a. Large Qu</li> <li>- Gener</li> <li>(2,20)</li> <li>- Gener</li> </ul>	dous Waste Activities at this bazardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG): rates in any calendar month greater the e and/or 1 kg (2.2 lbs) or less of acute up material.	UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at nulates at nulates at	S MC 60 y: (Man Dil) es imported t any time, t any time, g/mo but le bus waste an	9805 •k 'X' in d by import more than more than ess than 1, nd/or no n	all that rter site) n 1 kg/mo n 100 kg/m n 100 kg/m nore than	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs	acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp
9. RCRA Hazar (1) Generator of Ha Yes □ No If YES, Choose o a. Large Qu - Gener (2,200 - Gener - Gener	dous Waste Activities at this bazardous Waste (This does not include Universal Waste of anly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG): rates in any calendar month greater that and/or 1 kg (2.2 lbs) or less of acute up material. all Quantity Generator (VSQG): rates in any calendar month 100 kg/ma	UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at nulates at nulates at nulates at nulates at	S MC 60 y: (Man Dil) es imported t any time, t any time, g/mo but le bus waste an	9805 •k 'X' in d by import more than more than ess than 1, nd/or no n	all that rter site) n 1 kg/mo n 100 kg/m n 100 kg/m nore than	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs	acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp
9. RCRA Hazar (1) Generator of Ha Yes □ No If YES, Choose o a. Large Qu - Geneu (2,200 - Geneu (2,2	dous Waste Activities at this is azardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG): rates in any calendar month greater that e and/or 1 kg (2.2 lbs) or less of acute nup material. all Quantity Generator (VSQG): rates in any calendar month 100 kg/mo dous waste. ate other generator activities that ap n Generator (one-time, not on-going)	UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at nulates at nulates at nulates at nulates at nulates at nulates at nulates at	S MC 60 y: (Man Dil) es imported t any time, t any time, g/mo but le bus waste an	9805 •k 'X' in d by import more than more than ess than 1, nd/or no n	all that rter site) n 1 kg/mo n 100 kg/m n 100 kg/m nore than	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs	acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp
9. RCRA Hazar (1) Generator of Ha Yes □ No If YES, Choose o a. Large Qu - Gene: (2,200 - Gene: (2,200 - Gene: - Gene:	dous Waste Activities at this is azardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG): rates in any calendar month greater the e and/or 1 kg (2.2 lbs) or less of acute nup material. all Quantity Generator (VSQG): rates in any calendar month 100 kg/mo dous waste. ate other generator activities that ap n Generator (one-time, not on-going) ste (hazardous and radioactive) Generator	UDES Facilit or Used O ries. quantitie ste; or nulates at nulates at nulates at nulates at nulates at nulates at nulates at nulates at nulates at	S MC 60 y: (Man Dil) es imported t any time, t any time, g/mo but le bus waste an	9805 •k 'X' in d by import more than more than ess than 1, nd/or no n	all that rter site) n 1 kg/mo n 100 kg/m n 100 kg/m nore than	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs	acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp
9. RCRA Hazar (1) Generator of Ha Yes □ No If YES, Choose o a. Large Qu - Gene: (2,200 - Gene: - Gene:	dous Waste Activities at this is azardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG): rates in any calendar month greater that e and/or 1 kg (2.2 lbs) or less of acute hup material. all Quantity Generator (VSQG): rates in any calendar month 100 kg/mo dous waste. ate other generator activities that ap in Generator (one-time, not on-going) ste (hazardous and radioactive) Generator tes Importer of hazardous waste	UDES Facility or Used O ries. quantitie ste; or nulates at nulates at hazardo hazardo no or less pply. rator	S MC 60 y: (Mar Dil) es imported t any time, t any time, g/mo but la us waste an s (220 lbs.)	9805 k 'X' in d by impo- more than more than ess than 1, nd/or no n of non-ac	all that rter site) h 1 kg/ma h 100 kg/ 000 kg/n nore than ute haza	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs rdous waste and/	acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp /or 1 kg (2.2 lbs) or less of a
9. RCRA Hazar (1) Generator of Ha Yes □ No If YES, Choose o a. Large Qu - Gene: (2,200 - Gene: (2,200 - Gene: (2,200 - Gene: (2,200 - Gene: (2,200 - Gene: - Gene: mate b. Small Qu - Gene: wasta clean C. Very Sm - Gene hazar In addition, indic: d. Short-Term e. Mixed Wat f. United Stat g. LQG notify	dous Waste Activities at this is azardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG): rates in any calendar month greater the e and/or 1 kg (2.2 lbs) or less of acute nup material. all Quantity Generator (VSQG): rates in any calendar month 100 kg/md dous waste. ate other generator activities that ap n Generator (one-time, not on-going) ste (hazardous and radioactive) Genera- tes Importer of hazardous waste ying of VSQG Hazardous Waste Under	UDES Facility or Used O ries. quantities ste; or nulates at nulates at nulate	S MC 60 y: (Mar Dil) es imported t any time, t any time, g/mo but le bus waste an s (220 lbs.) col of the Sa	9805 k 'X' in d by impor more than more than ess than 1, nd/or no n of non-ac	all that rter site) n 1 kg/ma n 100 kg/m nore than ute hazan ute hazan	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs rdous waste and/	acute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp /or 1 kg (2.2 lbs) or less of a
9. RCRA Hazar (1) Generator of Ha Yes □ No If YES, Choose o a. Large Qu - Gene: (2,200 - Gene: - Gene:	dous Waste Activities at this is azardous Waste (This does not include Universal Waste of nly one of the following three categor uantity Generator (LQG): rates in any calendar month (includes 0 lbs/mo.) of non-acute hazardous was rates in any calendar month, or accum rates in any calendar month, or accum rial. antity Generator (SQG): rates in any calendar month greater that e and/or 1 kg (2.2 lbs) or less of acute hup material. all Quantity Generator (VSQG): rates in any calendar month 100 kg/mo dous waste. ate other generator activities that ap in Generator (one-time, not on-going) ste (hazardous and radioactive) Generator tes Importer of hazardous waste	UDES Facility or Used O ries. quantitie ste; or nulates at nulates at hazardo hazardo no or less pply. ator er Contro	S MC 60 y: (Mar Dil) es imported t any time, t any time, g/mo but le bus waste an s (220 lbs.) col of the Sa G (Addendu	9805 k 'X' in d by impor- more than more than ess than 1, nd/or no n of non-ac ame Perso im B Requ	all that rter site) h 1 kg/ma h 100 kg/ 000 kg/n nore than ute hazan ute hazan n pursua	1,000 kilograms o (2.2 lbs/mo) of mo (220 lb/mo) no (>220 to <2,2 100 kg (220 lbs rdous waste and/	Facute hazardous waste; or of acute hazardous spill cle 200 lbs.) of non-acute hazar s) of any acute hazardous sp /or 1 kg (2.2 lbs) or less of a 2.17(f). (Addendum A Req

	s Waste Status N	otification or O	ut of Business N	otification	EPA ID I	<sup>No.*</sup> FLD046702122
). RCRA Haza	ardous Waste A	ctivities at th	is Facility conti	nued: (Mark 'X'		
For Items 3 throu	igh 9, mark 'X' in a	all that apply.				
			aste (at your facility		Note: A hazardous w	vaste permit may be
required fo	or this activity.					
a. Or	perating Commercia	ll TSD				
b. Op	perating Non-Comm	nercial TSD				
. NC	on-Operating: Postc	losure or Correcti	ve Action Permit or	Order (HSWA, etc.)		
	er of Hazardous W					
Specify:						
Specify:	Stores prior Note: A peri	to recycling mit maybe required	Does not store price for storage prior to rec	or to recycling.		
(4) Exem	pt Boiler and/or In	dustrial Furnace				
	Small Quantity On					
	. Smelting, Melting,					
Choo	se this management	activity ONLY it	f you attach	Generated at Other F		
	ves Hazardous Was					
(7) Under	rground Injection (	Control				
	nized Trader— M	ark all that apply				
	. Importer . Exporter					
	-	nent Lead-Acid I	Ratteries (SLARe)	under 40 CFR subpa	rt C- Mark all that	annly
	. Importer	pent Dead-Acid I	Jatteries (SLADs)	under 40 er K subpa		appiy
<b>b</b> .	. Exporter					
						hazardous wastes handled at
				ons (e.g., D001, D003, rted. Use comments o		f more spaces are needed.
	2	3	4	5	6	7
	D002					
D001						
D001	9	10	11	12	13	14
	9					
		10	11	12 19	13 20	14 21
	9					
5	9	17	18		20	21
<sup>5</sup> 1. Other Stat	9	17 Ino longer handlir	18 ng waste or closed, i	19	20	21
5 1. Other State (A) Central Acc	9 16 us Changes (If	17 no longer handlir CAA) or Facility	18 ng waste or closed, i	19	20	21
5 1. Other State (A) Central Acc	9 16 us Changes (If cumulation Area (O Accumulation Area	17 The longer handlin CAA) or Facility (CAA)	18 ng waste or closed, i Closed:	19	20 be left blank and iten	21
5 1. Other State (A) Central Acc Central Acc Facility (B) Closure Da	9 16 us Changes (If cumulation Area (C Accumulation Area Closed (Complete r ites:	<i>17</i> no longer handlir <b>CAA) or Facility</b> (CAA) this section only i	18 ng waste or closed, i <b>Closed:</b> f <u>all</u> business activi	<i>19</i> items 9 and 10 should ties at this facility have	20 be left blank and iten e ceased.)	21
5 1. Other State (A) Central Acc Central Acc Facility (B) Closure Da (1) Ex	9 16 us Changes (If cumulation Area (O Accumulation Area Closed (Complete to tes: pected closure date	<sup>17</sup> no longer handlir CAA) or Facility (CAA) this section only i	18 ng waste or closed, i <b>Closed:</b> f <u>all</u> business activi	items 9 and 10 should ties at this facility have (date in mm/dd/yyy	20 be left blank and iten e ceased.) y)	21
5 1. Other State (A) Central Acc Central Acc Facility (B) Closure Da (1) Ex (2) Re	9 16 us Changes (If cumulation Area (C Accumulation Area (C Accumulation Area (C closed (Complete f ites: pected closure date equesting new closure	<i>17</i> The longer handlin <b>CAA</b> ) or <b>Facility</b> (CAA) this section only i this section only i	18 ng waste or closed, i <b>Closed:</b> f <u>all</u> business activi	items 9 and 10 should ties at this facility have (date in mm/dd/yyy (date in mm/	20 be left blank and iten e ceased.) y)	21
5 1. Other State (A) Central Acc Central Acc Facility (B) Closure Da (1) Ex (2) Re	9 16 us Changes (If cumulation Area (O Accumulation Area Closed (Complete to tes: pected closure date	<i>17</i> The longer handlin <b>CAA</b> ) or <b>Facility</b> (CAA) this section only i this section only i	18 ng waste or closed, i <b>Closed:</b> f <u>all</u> business activi	items 9 and 10 should ties at this facility have (date in mm/dd/yyy (date in mm/	20 be left blank and iten e ceased.) y)	21
1. Other State         (A) Central Acc         Central Acc         Facility         (B) Closure Da         (1) Ex         (2) Re         (3) Da         a	9 16 us Changes (If cumulation Area (C Accumulation Area (C Accumulation Area (C Accumulation Area (C cumulation Area (C) accumulation (C) accum	17 The longer handlin CAA) or Facility (CAA) this section only i re date the closure perfection	18 Ig waste or closed, i Closed: f all business activi (da formance standards	items 9 and 10 should ties at this facility have (date in mm/dd/yyy (date in mm/ te in mm/dd/yyy) in 40 CFR 262.17(a)(8	20 be left blank and iten e ceased.) y) dd/yyyy)	21
5         1. Other State         (A) Central Acc         □ Central Acc         □ Facility         (B) Closure Da         □ (1) Ex         □ (2) Re         □ (3) Da         □ a	9 16 us Changes (If cumulation Area (C Accumulation Area (C Accumulation Area (C Accumulation Area (C cumulation Area (C) accumulation (C) accum	17 The longer handlin CAA) or Facility (CAA) this section only i re date the closure performance of the closure pere	18 Ig waste or closed, i Closed: f all business activi (da formance standards	<i>19</i> tiems 9 and 10 should ties at this facility have (date in mm/dd/yyy (date in mm/ te in mm/dd/yyyy)	20 be left blank and iten e ceased.) y) dd/yyyy)	21

Universal Waste Notification and Mercury Transporter/Handler Registration EPA ID No.* FLI	D046702122
12. Universal Waste (UW) Activities (Mark 'X' and complete all that apply) :	
A. Federal Notification	
Federally Defined Large Quantity Handler (LQH) = Generate/Accumulate: <u>5,000 kg (11,000 lb) or more</u> of of UW accumulated (at any one time)	any combination
Accumulates: . 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 (UPV one time)	V) accumulated (at any
Reverse Distributor of Universal Pharmaceutical Waste (UPW) (must be permitted with the Florida Department of Bus Regulation [DBPR])	iness and Professional
Florida Universal Pharmaceutical Waste (UPW) Transporter	
C. Florida Annual Mercury Handler Registration:	
[Chapter 62-737, F.A.C.]. A one-time fee of \$1,000 is required for first time registration as a Large Quantity for-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 in (1) This form is being submitted as a Florida Registration of Universal Waste Mercury Transporter/Ha Activities 1st Annual Registration Annual Renewal One-time \$1,000 fee for Mercury for-hire first time LQH registration	formation below. Indler <u>for-hire</u>
For-hire Transporter of Universal Waste Mercury-Containing Lamps or Devices	
For-hire <b>Transfer Facility</b> of Universal Waste Mercury-Containing Lamps or Devices	Annual
Mercury-Containing Devices (thermostats, etc.) SQH = less than 100 kg accumulated by for-hire handler	Required
Mercury-Containing Lamps SQH = 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) 1st Annual Registration Annual Renewal	Annual Registration Required
Briefly Describe your Universal Waste Activities:	Top Bulb Crusher(s).
13. Other State Regulated Waste Activities: Petroleum Contact Water (PCW) Recovery Transp	

•

.

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

Hazardous Waste Transporter and Academic Laboratories	EPA ID No.* FLD046702122				
14. HW Transporter Activities: (Mark 'X' and complete all that apply if you need	t o 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 sl	hould 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: I Initial Registration Renewal Notification of a	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	her - 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 It	tem 3) Storage Volume				
This form is: 🔲 Initial Registration 🔲 Renewal 🔲 Notification of a	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 62-730.17 Our mailing (business) address The site (facility) a					
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 Florida Administrative Code (F.A.C.)]:	Waste Transfer Facility [Rule 62-730.171(3),				
<b>C.</b> The following items are required to be submitted with the initial notification for a <b>tran</b> submitted with any subsequent submission [Rule 62-730.171(3), Florida Administration					
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.]					
Evidence of the transporter facility's financial responsibility [Rule 62-730.171(3)(a)2 A brief general description of the transfer facility operations [Rule 62-730.171(3)(a)2					
A copy of the facility closure plan [Rule 62-730.171(3)(a)5., F.A.C.]	+., F.A.C.J				
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 optilaboratory 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 man	nagement of hazardous wastes in laboratories				
See the item-by-item instructions for definitions of types of eligible acade	emic entities. Mark all that apply:				
<ul> <li>a. College or University</li> <li>b. Teaching Hospital that is owned by or has a formal written affiliation age c. Non-profit Institute that is owned by or has a formal written affiliation age</li> </ul>					
2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardou					

•

Used Oil and Hazardous Secondary Material	EPA ID No.*	FLD046702122			
16. Used Oil and Used Oil Filter Activities: (Mark 'X' and complete all that ap	ply)				
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 c	hanges 🔲 Cano	el 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 Environn	nental 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					
b. Transfer Facility c. Processor (Annual Report Required)					
d. End User (see instructions for definition)					
<ul> <li>(8) The records required under the provisions of Rule 62-710.510, FAC, are kept at (check</li> <li>Our mailing (business) address (as listed in Item 4)</li> </ul>	one):				
The site (facility) address (as listed in Item 3)					
(9) Used Oil Transporters: (Exemptions in 40 CFR 279.40(a)(1-4))					
<ul> <li>ALL registered UO transporters must submit an annual report except generator within their own company.</li> </ul>	s transporting UO fro	m noncontiguous operations			
<ul> <li>UO transporters transporting off-site over public highways only within their ov</li> </ul>	vn company must sub	mit proof of insurance.			
• 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)					
The used oil annual report is attached Evidence of Liability Insurance pursu	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 w under 40 CFR 260.30, 40 CFR 261.4(a)(23), (24), or (27). (Addendum C Required		zardous secondary material			
<ul> <li>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 62-737.4	400(3)(a)2., F.A.C. Effe	ctive Date: 12/2019 Page 6 of 10			

		* FLD046702122
8. Comments (attach a page if more space is needed):		
LIABILITY INSURANCE WAS SUBMITTED TO	THE STATE VIA MAIL.	
9. Certification: I certify under penalty of law that this document a accordance with a system designed to assure that qualified personnel submitted is, to the best of my knowledge and belief, true, accurate, false information, including the possibility of fine and imprisonment	properly gather and evaluate the info and complete. I am aware that there an	rmation submitted. The information
I certify as a Used Oil Transporter that I am familiar with the		
tation and have an annual and new employee training program in pla bility is demonstrated by the Used Oil Transporter Certificate of Lia	ce covering the applicable used oil ru	les. Evidence of financial responsi-
Signature of owner, operator, or an authorized representative:	Date Signed (mm-dd-yyyy):	
16	2/5/24	
Print Name (First, Middle Initial, Last):	Title:	
VINCENT SKREBA		OUTH OPERATIONS
	HSE DIRECTOR S	OUTTOF LIVETIONS
Organization:	Used Oil 🗵	
CUMMINS INC.		
Email:		
signature of owner, operator, or an authorized representative:	Date Signed (mm-dd-yyyy):	
Print Name (First, Middle Initial, Last):	Title:	
Drganization:	Used Oil	
Email:	•	
	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
If the person that filled in this form is not the Facility Contact or O	perator, please complete the informa	ation below:
Name of person completing this form) (Phone Numbe	r) (E-mail Addre	ess)

• ,

Addendum A: LQC	G Consolidation of VSQG Haza	EPA ID No.* FLD046702122	
Only fill out this form			
• You are the LQG	receiving hazardous waste from VS	SQGs under the control of the same per	son. Use additional pages if more space is needed.
VSQG 1	New	Update	Delete
A. EPA ID Number	(if assigned)	B. Facility Name	
	(		
C. Facility Street Addr	ress		
D. City		E. State	F. Zip Code
G. Contact Phone Nun	nber	H. Contact Name	
I. Contact Email			
VSQG 2	New	Update	Delete
A. EPA ID Number	(if assigned)	B. Facility Name	
C. Facility Street Addr	ess		
D. City		E. State	F. Zip Code
G. Contact Phone Nun	nber	H. Contact Name	
I. Contact Email			
VSQG 3	New New	Update	Delete
A. EPA ID Number	(if assigned)	B. Facility Name	
C. Facility Street Addr	ess		
D. City		E. State	F. Zip Code
,			
G. Contact Phone Nun	nber	H. Contact Name	
L Contoot Email			
I. Contact Email			
DEP Form 62-730.900(1)	)(b), adopted by reference in rule 62-730	0.150(2)(a), 62-710.500(1), and 62-737.400	(3)(a)2., F.A.C. Effective Date: 12/2019 Page 8 of 10

•

Addendum B: Episodic Generator	EPA ID No.* FLD046702122						
<ul> <li>Only fill out this form if:</li> <li>You are an SQG or VSQG generating hazardous waste from a planned or unplanned episodic event, lasting no more than 60 days, that moves the generator to a higher generator category. Note: Only one planned and one unplanned episodic event are allowed within one year; otherwise, you must follow the requirements of the higher generator category. Use additional pages if needed.</li> </ul>							
Episodic Event							
A. Planned	B. Unplanned						
Excess chemical inventory removal	Accidental spills						
Tank Cleanouts	Production process upsets						
Short-term construction or demolition	Product recalls						
Equipment maintenance during plant shutdowns	"Acts of nature" (Tornado, Hurricane, Flood, etc.)						
Other	Other						
C. Emergency Contact Phone	D. Emergency Contact Name						
E. Beginning Date (mm/dd/yyyy)	F. End Date (mm/dd/yyyy)						
Waste 1							
G. Waste Description	H. Estimated Quantity (in pounds)						
I. Federal Hazardous Waste Codes							
Waste 2							
G. Waste Description	H. Estimated Quantity (in pounds)						
I. Federal Hazardous Waste Codes							
Waste 3							
G. Waste Description	H. Estimated Quantity (in pounds)						
I. Federal Hazardous Waste Codes							

•

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 9 of 10

Addendum C: Notifie	cation of Hazardous Secondary Mat	EPA ID No.*	LD046702122					
Only fill out this form it	<u>f.</u>							
have stopped manag your hazardous was 2015, your manager	nanaging excluded hazardous secondary n ging excluded HSM in compliance with th te activities in this section. Note: if your fa nent of HSM under 40 CFR 260.30 is grad ent activity excluded under 40 CFR 260.30	e exclusion(s) for at least of acility was granted a solid ndfathered under the previo	one year. Do not include any i waste variance under 40 CFR	nformation regarding 260.3 prior to July 13,				
You must submit a completed 8700-12FL, including this Addendum, prior to operating under the exclusion(s) and by								
every March 1 of each even-numbered year to the department pursuant to 40 CFR 260.42. If you stop managing hazardous secondary material in accordance with the exclusions(s) and do not expect to manage any amount of hazardous secondary material under the								
exclusions(s) for at least one year, you must again submit a completed 8700-12FL, including this Addendum, within thirty (30)								
days pursuant to 40	days pursuant to 40 CFR 260.42.							
	r notification. Include dates where requ							
Notifying tha	at the facility will manage hazardous second	ndary material as of (mm/d	d/yyyy)	·				
Re-notifying	that the facility is still managing hazardou	us secondary material.						
Notifying tha	t the facility has stopped managing hazard	dous secondary material as	of (mm/dd/yyyy)	·				
describe your hazardo	zardous secondary material (HSM) actions secondary material activity ONLY (do nal pages if more space is needed.							
a. Facility Code	b. Waste code(s) for hazardous	c. Estimated short	d. Actual short tons	e. Land-based unit				
(answer using codes listed in the	secondary material (HSM)	tons of HSM to be managed annually	of HSM that was managed during the	code (answer using codes				
Code List section of			most recent odd-	listed in the Code				
the instructions)			numbered year	List section of the instructions)				
				instructions)				
	ial assurance pursuant to 40 CFR 261 S			rs and intermediate				
	g hazardous secondary material under 40 oes this facility have financial assurance p							
4. Notifying under 40	) CFR 260.43(a)(4)(iii) that the product	of your recycling process	s has levels of hazardous wa	ste constituents.				
Y N								
Comments:								

,



## **D**EPARTMENT OF ENVIRONMENTAL PROTECTION

Mail Station 4560, 2600 Blair Stone Road, Tallahassee, Florida 32399-2400

DEP Form #62-710.901(3) Form Title <u>Annual Report by Used</u> 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, 2023 through December 31, 2023

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: Cummins, Inc Tampa 2. Site Address:	5910 E.	Hillsborough A	ve, Tampa, F	L 33610				
3. Telephone No: 813-626-1101 Check b	box if any of the abov	e items (1-3) have c	changed since you	r last registration.				
A ID No. FLD046702122 5. Name of person preparing report (please print) Vincent Skreba								
Title:       HSE Director South       7. Phone number (if different from #3, above)       678-294-4418								
8. Type of operation (check all that apply): 9. Email Address:V	incent.skreba@	cummins.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				
<b>a</b> . In Florida	a. In Florida							
<b>b.</b> From out of State								
c. Beginning Inventory	•							
<b>d. Total</b> (sum of totals from Lines a + b + c)				10,380				
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)			10,380					
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 u	init							
Incinerated								
3. Total amount (in gallons) of Used Oil managed			10,380					
4. End of year, on hand estimate (difference between Line 1d and Line 3)			0					

## **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.	In State	Out of State	
1. Number of filters on hand from previous ye	0		
2. Number of used oil filters collected	443		
3. Total number of used oil filters to manage (	3. Total number of used oil filters to manage (Line 1 plus Line 2)		
4. Disposition of used oil filters collected:	443		
	d. TOTAL	443	
5. End of year, on hand estimate (Line 3 minu:	s Line 4d)	0	
6. Gallons of used oil collected as a result of filter processing			
7. Gallons of used oil transferred to a used oil	4,152		
8. Volume of oily waste collected and manage	d as a result of filter processing gallons cubic yards	0	
9. Description of oily waste managementTak	en offsite by Crystal Clean for recycling.		

## DIRECTIONS FOR SECTION C

## **Conversion Table**

One <b>55</b> -gallon drum of <b><u>crushed</u></b> 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 $2.350$ 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.

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.

 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.