

Compliance Assistance Pilot Program (CAPP) Certification Material

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Florida Department of Environmental Protection (FDEP)
Hazardous Waste (RCRA) Compliance Assistance Program

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You must respond within 45 days of receiving this package from FDEP.

CAPP Compliance Certification Instructions

I. What is CAPP Compliance Certification?

Some automotive repair shops that work on passenger cars and light trucks must certify to the Florida Department of Environmental Protection (FDEP), within 45 days of receiving this package, that they meet environmental protection requirements that apply to their operations. For the purposes of this program, "light trucks" are defined as those with gross vehicle weight of 8,500 lbs. or less, such as a Chevy Suburban, Dodge Durango, Ford Explorer, or Toyota Tundra. This package contains materials to help you determine whether your facility must certify, and, if so, to help you fill-out and submit the CAPP Compliance Certification Form.

Please review this material in plenty of time to meet the 45-day deadline.

II. How to Use the Attached Forms and Materials

This compliance certification package has several parts, discussed below. We recommend you read and complete these forms in the following order:

STEP 1. First, complete Section A of the **CAPP Exclusion Statement**. The instructions on the form will tell you whether or not your facility is included in the CAPP. If your facility is excluded from the CAPP, simply complete the CAPP Exclusion Statement and send it to FDEP within 45 days of receipt. If your facility is included in the CAPP, DO NOT send the CAPP Exclusion Statement to FDEP. Instead, go on to Step 2. If you need more information on who must certify, read Section 1.2 of the Compliance Assistance Workbook described in Step 2.

STEP 2. It is important that you read the **Compliance Assistance Workbook** next. The Workbook gives you detailed information on the CAPP and how automotive repair shops can meet environmental requirements. The Workbook also offers suggestions on "best management practices" that are not required by law, but can help your business reduce the potential for environmental and worker health problems and, frequently, save money. The Workbook has detailed worksheets to use as a step-by-step guide. The worksheets will help you fill out the CAPP Compliance Certification Form (described in Step 3). You should read the Workbook and complete the worksheets before continuing.

STEP 3. Once you have read the Compliance Assistance Workbook and completed the worksheets in it, you should fill out the **CAPP Compliance Certification Form**. This form has five sections: (A) *Facility Contact Information* that identifies the repair shop; (B) *Facility Process Information*, which is a series of "yes" or "no" questions about whether or not your shop is meeting appropriate environmental requirements; (C) a compliance *Certification Statement* to be signed by the shop owner or a corporate representative responsible for overall operation of the automotive repair shop; (D) *Best Management Practices* that automotive repair shops can use to better protect the environment; and (E) *Your Suggestions/Comments* on how to improve the certification process. In order to accurately fill out the CAPP Compliance Certification Form, you will need to use the worksheets you filled out in the Compliance Assistance Workbook described in Step 2.

STEP 4. Complete a **Return-to-Compliance Plan** for each environmental requirement on the CAPP Compliance Certification Form that applies to you and that your shop does not meet on the date the form is signed. You do not have to fill out a Return-to-Compliance Plan for a compliance problem if your shop can fix it before signing the CAPP Compliance Certification Form. Each Return-to-Compliance Plan should be initialed by the same person who signs the CAPP Compliance Certification Form. If your shop is included in the CAPP, you must submit any required Return-to-Compliance Plans to FDEP within 45 days of receiving this package.

CAPP Compliance Certification Instructions—continued

III. How do I fill out the CAPP Compliance Certification Form?

1. Read the Compliance Assistance Workbook to understand the environmental requirements that apply to your automotive repair shop, and complete all the relevant worksheets.
2. Using the Workbook and worksheets, answer ALL of the questions on the CAPP Compliance Certification Form (unless the Form directs you to skip).
3. When you have answered all questions on the CAPP Compliance Certification Form except the ones you were directed to skip, sign the Certification, which says that the person signing the form:
 - has reviewed the filled-out CAPP Compliance Certification Form and all associated documents, including Return-to-Compliance Plans,
 - believes the information being submitted is true,
 - assures FDEP that the automotive repair shop has management systems in place to keep the shop in compliance with environmental protection requirements in the future,
 - is fully authorized to sign the document, and
 - understands that there may be serious consequences for submitting false information to FDEP.

The Certification may be signed only by shop owner or a person responsible for overall operation of the automotive repair shop. The person who signs the Certification must also print or type his or her name and title on the appropriate lines, date the Form, and check a box to show his or her authority to sign.

4. Review the Completeness Checklist at the end of these instructions to make sure you have done everything.
5. Make a copy of all forms that you have completed, and keep these forms for your records for three years.
6. Mail the package to the address below, or submit materials on-line (see instructions for electronic submissions in the next section). All required forms are due within 45 days of receiving this package.

**Florida Department of Environmental Protection
Hazardous Waste Regulation Section MS 4560
2600 Blair Stone Road
Tallahassee, FL 32399-2400**

NOTE: It is your responsibility to make sure your automotive repair shop meets environmental protection requirements at all times; otherwise your shop may be subject to enforcement action.

IV. Instructions for Electronic Submissions

If you wish to submit the CAPP forms electronically, please visit

www.dep.state.fl.us/waste/categories/hazardous/pages/autocert.htm and follow the on-line instructions.

V. CAPP Certification Completeness Checklist

Use this checklist to make sure that you have submitted all of the necessary forms and information to FDEP:

- Did you read the Compliance Assistance Workbook and complete all worksheets as instructed by the Workbook?
- Are all Facility Process Information questions answered (except those you were directed to skip)?
- Are all required Return-to-Compliance Plans completed, initialed, and attached?
- Has the Certification been read, understood and signed by an appropriate person?
- Have you made a copy of the complete CAPP Compliance Certification Form for your records?

THANK YOU FOR YOUR TIME AND CO-OPERATION!

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CAPP Exclusion Statement

DEP FORM 62-730.900(7)(a) 10-10-2002

The Compliance Assistance Pilot Project (CAPP) is a pilot project testing the effectiveness of compliance certification as a way to improve environmental compliance in the automotive repair industry. Since this is an initial test of the program, the CAPP is targeting a limited number of types of automotive repair facilities. This form will tell you whether or not your automotive repair shop is included in this pilot project. If you have additional questions on program applicability, see page 5 in the Compliance Assistance Workbook.

Complete Section A below, and then follow the instructions to determine whether:

- ▶ Your facility is **excluded** from the CAPP, so you need to **complete this Exclusion Statement** (pages 5, 6, and 7) and submit it to the Florida Department of Environmental Protection (FDEP)

OR

- ▶ Your facility is **included** in the CAPP, so you need to **complete the CAPP Compliance Certification Form** and submit it to the Florida DEP

Important Note:

Even if you are excluded from the CAPP, you are still responsible for complying with all environmental regulations that may apply to your facility, including federal, state, and local environmental laws.

A. IS YOUR FACILITY EXCLUDED FROM THE CAPP?

Answer **ALL** of the following questions about your facility, and then follow directions below to see which form to submit:

1. Does the facility engage in repair or modification of ANY of the following LIGHT TRUCK (gross vehicle weight of 8,500 pounds or less) AND/OR AUTOMOBILE (passenger car) component systems:

a) engines,

c) mufflers, or

b) brakes,

d) transmissions and/or transmission axles?

Yes **Facility MAY BE INCLUDED**

No **Facility IS EXCLUDED**

2. Does the facility have a paint spray booth?

Yes **Facility IS EXCLUDED**

No **Facility MAY BE INCLUDED**

CAPP Exclusion Statement—continued

3. Is the facility any of the following:

- | | |
|----------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> a) gasoline station, | <input type="checkbox"/> e) new car or truck dealership, |
| <input type="checkbox"/> b) truck stop, | <input type="checkbox"/> f) used car or truck dealership, |
| <input type="checkbox"/> c) automotive auction facility, | <input type="checkbox"/> g) motorcycle dealership, or |
| <input type="checkbox"/> d) salvage dealership, | <input type="checkbox"/> h) recreational vehicle dealership. |

Yes **Facility IS EXCLUDED**

No **Facility MAY BE INCLUDED**

4. Do the services that the facility provides fall ENTIRELY within the following categories (i.e., the facility does not provide services other than those listed below):

- | | |
|--------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> a) car wash, | <input type="checkbox"/> d) electric systems repairs, |
| <input type="checkbox"/> b) diagnostic services, | <input type="checkbox"/> f) glass or window repairs, or |
| <input type="checkbox"/> c) lube/oil change, | <input type="checkbox"/> g) exhaust system repair. |
| <input type="checkbox"/> d) mobile repair, | |

Yes **Facility IS EXCLUDED**

No **Facility MAY BE INCLUDED**

If your facility was **EXCLUDED** by your responses to ANY of the questions above (i.e., you answered "No" to question 1 above, OR if you answered "Yes" to question 2, 3, or 4), you must submit this CAPP Exclusion Statement to Florida DEP. Fill out sections B and C below, and then follow the submission instructions at the end of the form. Note that you may submit this form on-line.

Go to www.dep.state.fl.us/waste/categories/hazardous/pages/autocert.htm for the electronic version of this form.

If your facility was **INCLUDED** in ALL of your responses above (i.e., you answered "Yes" to question 1 above AND you answered "No" to questions 2, 3, and 4) you do not need to submit this form to Florida DEP. Instead, you must fill out and submit the CAPP Compliance Certification Form. Keep this form for your records, and go on to fill out the CAPP Compliance Certification Form included in this package.

B. FACILITY CONTACT INFORMATION

Current Facility Name

Facility EPA ID # (if applicable)

Facility Street Address

City

Zip Code

Ownership Type (check one):

Independent

(i.e., facilities that owe no allegiance to any other company or corporation)

Franchise/Chain

(i.e., facilities under contract to another company that owns more than one automotive repair facility; includes company-owned stores and independent franchise owners)

Government

(includes federal, state, and local government facilities)

C. CERTIFICATION OF NON-APPLICABILITY

"I, _____, on behalf of _____ certify that:
First and Last Name of Responsible Official **Name of Automotive Repair Shop**

1. I am familiar with the information contained in this submittal;
2. Based on my inquiry of those individuals responsible for obtaining the information, the information is to the best of my knowledge true, complete and accurate on the date that I sign; and
3. I am fully authorized to make this certification on behalf of this shop, and I am aware that under Florida law there are significant penalties (e.g. fines up to \$50,000 per day) for knowingly submitting any false statement, representation, or certification.

Signature

Date

Printed First and Last Name

Job Title

Address (Street Address, City, Zip Code)

Phone Number (with Area Code)

Source of Signatory Authority (check appropriate box below):

If a Corporation:

- President
- Secretary
- Vice President
- Treasurer
- Most Senior Manager authorized by corporate vote or terms of employment (specify: _____)

If a Partnership:

- General Partner

If a Sole Proprietorship:

- Proprietor

If a Government Agency:

- Most Senior Manager authorized by terms of employment

CAPP Exclusion Statement—continued

How to Submit this Form:

To submit this form on-line, go to www.dep.state.fl.us/waste/categories/hazardous/pages/autocert.htm and complete the on-line CAPP Exclusion Statement. The form must be submitted within 45 days of the day you receive this package.

Or, to submit this form by mail, complete, sign, and submit this CAPP Exclusion Statement (pages 5, 6, and 7) within 45 days of receipt to the following address:

Florida Department of Environmental Protection
Hazardous Waste Regulation Section MS 4560
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Be sure to keep a copy of the form for your records for three years.

CAPP Compliance Certification Form

DEP FORM 62-730.900(7)(b) 10-10-2002

Instructions:

1. The information on this *CAPP Compliance Certification Form* (pages 10 through 15) is required by law, unless you submitted a *CAPP Exclusion Statement*.
2. Please refer to the *Compliance Assistance Workbook* (the Workbook) as you complete each question on this form to ensure that you correctly answer each compliance question below.
3. Unless otherwise noted below, each question on this form is asking you to certify to the current conditions and operations in your shop. If you find that your shop is currently out of compliance, but you can fix the problem before you submit this form, you should take steps to make sure your shop is in compliance and then certify that your shop is in compliance. You need to fill out a *Return-to-Compliance Plan* if you cannot fix the compliance problem before submitting this form.
4. You are responsible for ensuring compliance with all applicable environmental requirements, even if they do not appear on this certification form. Additional environmental requirements, including more stringent county and municipal requirements, may apply to your shop. To learn more about where to find additional requirements, see Appendix III of the Workbook.
5. This form must be reviewed and signed by an individual authorized to take legal responsibility for facility decisions.
6. How to certify:
To certify on-line, go to www.dep.state.fl.us/waste/categories/hazardous/pages/autocert.htm and complete the on-line *CAPP Compliance Certification Form*. The form must be submitted within 45 days of the day you receive this package. Or, to certify by mail, complete this form, have an authorized individual sign the certification statement in Section C, and submit the original copy within 45 days of receipt to the following address:
**Florida Department of Environmental Protection
Hazardous Waste Regulation Section MS 4560
2600 Blair Stone Road
Tallahassee, FL 32399-2400**
7. Be sure to keep a copy of the form for your records for three years.

The following materials may help you complete this form:

- The CAPP Compliance Certification Instructions
- The Compliance Assistance Workbook

A. FACILITY INFORMATION

Current Facility Name	Previous Facility Name (if applicable)		
Facility Street Address	City	County	Zip Code
Facility Phone Number (with Area Code)	Facility EPA ID # (if applicable)	Years in business	
Facility Representative's First and Last Name		Job Title	
Facility Representative's Street Address (Street Address, City, Zip Code)	Phone Number (with Area Code)	E-Mail Address (if applicable)	
<p>Ownership Type (check one):</p> <p><input type="checkbox"/> Independent (i.e., facilities that owe no allegiance to any other company or corporation)</p> <p><input type="checkbox"/> Franchise/Chain (i.e., facilities under contract to another company that owns more than one auto repair facility; includes company-owned stores and independent franchise owners)</p> <p><input type="checkbox"/> Government (includes federal, state, and local government facilities)</p>			
Average number of vehicles serviced per month, averaged over the last year: _____			

B. FACILITY PROCESS INFORMATION

I. Hazardous Waste

- | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. Has your shop conducted a complete and accurate hazardous waste determination on each waste stream?
<i>Refer to page 12 in the Workbook for instructions on how to conduct a hazardous waste determination.</i></p> | <p><input type="checkbox"/> Yes</p> | <p><input type="checkbox"/> No
<i>You must complete the determination process before proceeding.</i></p> |
| <p>2. Does your shop generate hazardous waste?
<i>Refer to pages 13 and 14 in the Workbook for an explanation of what materials are included in the regulatory definition of hazardous waste.</i></p> | <p><input type="checkbox"/> Yes
<i>Review and complete the worksheet in Section 2.2A of the Workbook.</i></p> | <p><input type="checkbox"/> No
<i>Skip to Question 14</i></p> |
| <p>3. What is the average amount of hazardous waste your shop generates in a month? This amount determines your shop's Hazardous Waste Generator Status.
<i>Refer to pages 14 and 15 in the Workbook.</i>
3a. Put a check next to your generator status</p> | <p><i>Enter number below:</i>
_____</p> <p><input type="checkbox"/> CESQG</p> | <p><i>Circle Correct Units:</i>
Gallons Pounds</p> <p><input type="checkbox"/> SQG <input type="checkbox"/> LQG</p> |
| <p>4. Does your shop mix hazardous waste with used oil?
<i>Refer to page 16 in the Workbook.</i></p> | <p><input type="checkbox"/> Yes</p> | <p><input type="checkbox"/> No
<i>Skip to Question 5</i></p> |
| <p>4a. If your shop mixes hazardous waste with used oil, is it required to be managed as a hazardous waste?</p> | <p><input type="checkbox"/> Yes</p> | <p><input type="checkbox"/> No
<i>Skip to Question 5</i></p> |
| <p>4b. If you answer "Yes" to question 4a, do you manage the mixture of hazardous waste and used oil as a hazardous waste?</p> | <p><input type="checkbox"/> Yes</p> | <p><input type="checkbox"/> No
<i>Fill out a Return-to-Compliance Plan</i></p> |
| <p>5. Does your shop store hazardous waste on-site prior to treatment or disposal?
<i>CESQGs refer to page 17 in the Workbook.</i>
<i>SQGs refer to page 29 in the Workbook.</i></p> | <p><input type="checkbox"/> Yes</p> | <p><input type="checkbox"/> No
<i>Skip to Question 8</i></p> |
| <p>6. Are all containers holding hazardous waste managed to prevent releases according to the requirements of your shop's generator status?
<i>CESQGs refer to page 19 in the Workbook.</i>
<i>SQGs refer to page 31 in the Workbook.</i></p> | <p><input type="checkbox"/> Yes</p> | <p><input type="checkbox"/> No
<i>Fill out a Return-to-Compliance Plan</i></p> |

7. Does your shop comply with the **hazardous waste quantity and time accumulation limits** based on your shop's generator status?
 CESQGs refer to page 19 in the Workbook.
 SQGs refer to page 31 in the Workbook.
- Yes No
 Fill out a Return-to-Compliance Plan
-
8. Have your shop's employees received adequate **hazardous waste training** based on your shop's generator status?
 CESQGs refer to page 21 in the Workbook.
 SQGs refer to page 34 in the Workbook.
- Yes No
 If your shop is a SQG, fill out a Return-to-Compliance Plan
-
9. **Over the last 12 months**, have your hazardous materials been on **fire, exploded, or released** to the environment?
 CESQGs refer to page 23 in the Workbook.
 SQGs refer to page 36 in the Workbook.
- Yes No
 Skip to Question 10
- 9a. If your hazardous materials have been on fire, exploded, or released to the environment, did you **clean up** the hazardous materials and **prevent** future fires, explosions, and releases?
- Yes No
 Fill out a Return-to-Compliance Plan
-
10. Does your shop have required **safety and decontamination equipment**, based on your generator status?
 CESQGs refer to page 25 in the Workbook.
 SQGs refer to page 39 in the Workbook.
- Yes No
 If your shop is a SQG, fill out a Return-to-Compliance Plan
-
11. Is there a list posted near the telephone with all required **emergency information**?
 CESQGs refer to page 25 in the Workbook.
 SQGs refer to page 39 in the Workbook.
- Yes No
 If your shop is a SQG, fill out a Return-to-Compliance Plan
-
12. Is your shop **properly disposing** of all of its hazardous wastes to facilities authorized to accept the waste and **properly documenting** its disposal?
 CESQGs refer to page 28 in the Workbook.
 SQGs refer to page 42 in the Workbook.
- Yes No
 Fill out a Return-to-Compliance Plan
-
13. Does your shop **dispose of hazardous waste on-site** in a septic tank, storm drain, to surface water, to the ground, by burning, in a dumpster, or by evaporation?
 CESQGs refer to page 28 in the Workbook.
 SQGs refer to page 42 in the Workbook.
- Yes No
 Fill out a Return-to-Compliance Plan

II. Waste Batteries

14. Does your shop generate **waste car batteries**?
Refer to page 43 in the Workbook.

 Yes

Review and complete all worksheets in Section 5.1 of the Workbook.

 No

Skip to Question 16

15. Does your shop comply with all requirements for **waste batteries**?
Refer to page 44 in the Workbook.

 Yes

 No

Fill out a Return-to-Compliance Plan

III. Used Oil and Oil Filters

16. Does your shop generate **used oil and/or oil filters**?
Refer to page 45 in the Workbook.

 Yes

Review and complete all worksheets in Section 5.2 of the Workbook.

 No

Skip to Question 20

17. Does your shop properly **dispose of used oil** and properly **manage containers and tanks of used oil**?
Refer to page 48 in the Workbook.

 Yes

 No

Fill out a Return-to-Compliance Plan

18. Does your shop **dispose of used oil on-site**? This means disposing of used oil to a septic tank, storm drain, surface water, the ground, a dumpster, or by open burning.
Refer to page 48 in the Workbook.

 Yes

Fill out a Return-to-Compliance Plan

 No

19. Does your shop **manage containers of used oil filters** properly?
Refer to page 51 in the Workbook.

 Yes

 No

Fill out a Return-to-Compliance Plan

IV. Used Antifreeze

20. Does your shop generate **used antifreeze**?
Refer to page 52 in the Workbook.

 Yes

Review and complete all worksheets in Section 5.4 of the Workbook.

 No

Skip to Question 22

21. Does your shop meet all requirements for **recycling and/or disposing of used antifreeze**?
Refer to page 53 in the Workbook.

 Yes

 No

Fill out a Return-to-Compliance Plan

V. Waste Tires and Solid Waste

22. Does your shop generate **waste tires**?
Refer to page 58 in the Workbook.

Yes

Review and complete all worksheets in Section 5.6 of the Workbook.

No

Skip to Question 24

23. Does your shop comply with requirements for **waste tires**?
Refer to page 60 in the Workbook.

Yes

No

Fill out a Return-to-Compliance Plan

24. Does your shop comply with requirements for **solid waste**?
Refer to page 62 in the Workbook.

Yes

No

Fill out a Return-to-Compliance Plan

VI. Industrial Wastewater

25. Does your shop generate **industrial wastewater**?
Refer to page 63 in the Workbook.

Yes

Review and complete all worksheets in Section 5.8 of the Workbook.

No

Skip to Question 27

26. Does your shop meet requirements for handling **industrial wastewater**?
Refer to page 64 in the Workbook.

Yes

No

Fill out a Return-to-Compliance Plan

VII. Air Emissions

27. Does your shop meet requirements for **Air Emissions**?
Refer to page 67 in the Workbook?

Yes

Go to Section C

No

Fill out a Return-to-Compliance Plan

Then Go to Section C

D. BEST MANAGEMENT PRACTICES

Florida DEP would like to know if your shop is doing more to protect the environment than required by law. Please check the appropriate boxes below to indicate whether your shop uses the following best management practices:

1. Does your shop store hazardous waste containers on **surfaces designed to prevent spills**?
Refer to page 18 or 31 (depending on your status) in the Workbook.

Yes
 No

Not Applicable
(Check this box only if your shop does not generate or store hazardous waste)

2. Does your shop use all, some, or none of the best management practices for **containers of recycled antifreeze** described on page 53 in the *Workbook*?

All
 Some
 None

Not Applicable
(Check this box only if your shop does not recycle used antifreeze)

3. Does your shop follow the best management practices for **air emissions** described on pages 66 and 67 in the *Workbook*?

Yes

No

4. Has your shop implemented any **pollution prevention** activities?
Refer to page 10 in the Workbook.

Yes

No

If yes, please describe your shop's pollution prevention activities in the space below. (Attach another sheet if necessary.)

5. If your shop's status is CESQG, does your shop follow all of the best management practices for **hazardous waste training** described on page 20 in the *Workbook*?

Yes

No

6. If your shop's status is CESQG, does your shop follow all of the best management practices for these listed categories of **emergency preparedness** described on page 24 in the *Workbook*?

Equipment
 Planning
 Notification

7. If your shop's status is CESQG, does your shop follow all of the best management practices for these listed categories of **container management** described on page 18 in the *Workbook*?

Container Storage and Maintenance
 Container Inspections and Recordkeeping

E. YOUR SUGGESTIONS/COMMENTS

Did you find this certification process useful in improving your shop's environmental performance?
Rate the usefulness of this process from 1 to 5, where 1 is not at all useful and 5 is very useful.

Check a box below:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1	2	3	4	5
Not Useful			Very Useful	

Is there a language other than English that you would like used in next year's workbook?
If so, indicate the preferred language below:

Spanish

Other (specify): _____

We welcome any comments you have on how to improve this form or the certification process.
Please provide comments in the space provided below. (Attach another sheet if necessary.)

Comments:

(This page intentionally left blank.)

CAPP RETURN-TO-COMPLIANCE PLAN

DEP FORM 62-730.900(7)(c) 10-10-2002

Instructions:

Complete a Return-to-Compliance Plan in Section B below for EACH question on the CAPP Compliance Certification Form where you are directed to fill out a Return-to-Compliance Plan, UNLESS you can correct the violation before submitting the Compliance Certification Form within 45 days of your receipt of the forms package. You may make copies of the second page of this form if you need space for additional Return-to-Compliance Plans. Each Return-to-Compliance Plan must be initialed by a responsible official. This form should be submitted with the CAPP Compliance Certification Form. Note that you may submit this form on-line. Go to the FDEP Internet site at: www.dep.state.fl.us/waste/categories/hazardous/pages/autocert.htm to submit this form electronically. If you certified on-line, you should submit this form electronically.

The following materials may help you complete this form:

- The CAPP Compliance Certification Instructions
- The CAPP Compliance Certification Form
- The Compliance Assistance Workbook

Note:

Completing this form does not relieve your facility of its responsibility to operate in compliance with applicable regulations. You are required to maintain systems that ensure compliance over time. Failure to operate in full compliance with the applicable regulations may result in enforcement actions that may include fines or penalties.

A. FACILITY CONTACT INFORMATION

<hr/> Current Facility Name	<hr/> Facility EPA ID # (if applicable)
<hr/> Facility Street Address	<hr/> City
	<hr/> Zip Code

What is the total number of compliance questions for which you were directed to complete a Return-to-Compliance Plan in the CAPP Compliance Certification Form? _____

B. RETURN-TO-COMPLIANCE INFORMATION - MAKE ADDITIONAL COPIES OF THIS PAGE IF NEEDED
Return to Compliance Plan #1:

- a. What is the compliance question number on the CAPP Compliance Certification Form for which you are reporting noncompliance? _____
- b. Briefly describe the requirement that your shop is not currently fulfilling:

- c. What corrective action will you take to return to compliance?

- d. Date that you commit to being back in compliance: _____
- e. Responsible Official who signed the CAPP Compliance Certification Form initial here:

Return to Compliance Plan #2:

- a. What is the compliance question number on the CAPP Compliance Certification Form for which you are reporting noncompliance? _____
- b. Briefly describe the requirement that your shop is not currently fulfilling:

- c. What corrective action will you take to return to compliance?

- d. Date that you commit to being back in compliance: _____
- e. Responsible Official who signed the CAPP Compliance Certification Form initial here:

Florida Department of Environmental Protection (FDEP) District Offices

Northwest District

160 Government Center
Pensacola, FL 32501-5794
850/595-8300

Northeast District

7825 Baymeadows Way
Suite 200B
Jacksonville, FL 32256-7590
904/807-3300

Central District

3319 Maquire Blvd.
Suite 232
Orlando, FL 32803-3767
407/894-7555

Southwest District

3804 Coconut Palm Dr.
Tampa, FL 33619-1352
813/744-6100

South District

2295 Victoria Ave.
Suite 364
P.O. Box 2549
Ft. Myers, FL 33902-2549
941/332-6975

Southeast District

400 N. Congress Ave.
P.O. Box 15425
West Palm Beach, FL 33416-5425
561/681-6600

