



## WASTE MANAGEMENT INC. OF FLORIDA

Trail Ridge Landfill, Inc. 5110 U.S. Highway 301 South Baldwin, FL 32234-3608 (904) 289-9100 (904) 289-9013 Fax

6596 A

October 6, 2011

Mr. Emerson Raulerson Department of Environmental Protection **Northeast District** 7825 Baymeadows Way, Suite 200B Jacksonville, FL 32256

> RE: Permit No. 0013493-017-S0

> > Waste Tire Processing Facility Quarterly Report, 3rd Qtr 2011

Dear Mr. Raulerson:

In accordance with specific condition 42e of the above referenced permit, please find enclosed, the Waste Tire Processing Facility Quarterly Report for Trail Ridge Landfill for the 3rd calendar quarter of 2011.

Should you have any questions concerning the report, please call me at (904) 289-9100.

Sincerely,

Edward Schmalfeld P.E.

Site Manager

ES:sn

Enclosures

RECEIVED

OCT 2 0 2011

NORTHEAST DISTRICT DEP-JACKSONVILLE



## Department of Environmental Protection

| DEP Form # 62-701.9   | 900(21)                |
|-----------------------|------------------------|
| Waste Ti              | re Processing Facility |
| Form Title Quarterly  | Report                 |
| Effective Date 3/22/0 | 00                     |
| DEP Application No.   |                        |
|                       | (Filled in by DEP)     |

## Waste Tire Processing Facility Quarterly Report

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

| uarte   | luarter covered by this report 3rd Quarter 2011 (First quarter begins on January 1 of any given year)   |                        |                     |                   |                 |                   |                   |                       |  |  |
|---|---|------------------------|---------------------|-------------------|-----------------|-------------------|-------------------|-----------------------|--|--|
| 1. F  | acility name  | : Trail Ridg           | e Landfill, Inc     | •                 |                 | · · · · · · ·     |                   |                       |  |  |
| 2. F  | acility mailin  | g address:             | 5110 US Hwy         | 301 South         |                 |                   |                   |                       |  |  |
| С   | ity: Baldwi   | n                      | ·                   | County: _D        | )uval           | ;                 | Zip: <u>32234</u> |                       |  |  |
| 3. F  | acility permi   | t number: 0            | 013493-017-9        | SO                |                 |                   |                   |                       |  |  |
| 4. F  | acility teleph  | none number            | (904 ) 289-         | 9100              |                 |                   |                   |                       |  |  |
|   | Authorized person preparing report: Edward Schmalfeld, III, P.E.  |                        |                     |                   |                 |                   |                   |                       |  |  |
|   | 6. Affiliation with facility: District Manager  |                        |                     |                   |                 |                   |                   |                       |  |  |
| 7. T  | elephone nu   | ımber (if diffe        | erent from above    | ve): (904-        | ) 289-910       | 0                 |                   |                       |  |  |
|   | ctivity: Re   |                        |                     | JV                |                 |                   |                   |                       |  |  |
|   |   | Beginning<br>Inventory | Received            | Processed         | Consumed        | Removed           | Adjustments       | Ending<br>Inventory// |  |  |
| Ū   | sed Tires   | 35                     | 545                 |                   |                 | 552               |                   | 28 ′                  |  |  |
| - 1   | ther whole<br>ires  |                        |                     |                   |                 |                   |                   |                       |  |  |
| Pi  | rocessed tires  |                        |                     |                   |                 |                   |                   |                       |  |  |
|   | rocessing<br>/aste  |                        |                     |                   |                 |                   |                   |                       |  |  |
| ō   | ther  |                        |                     |                   |                 |                   |                   |                       |  |  |
| T   | otal  |                        |                     |                   |                 |                   |                   |                       |  |  |
| a. E  | xplain all inv  | entory adjus           | tments.             |                   |                 |                   |                   |                       |  |  |
| b. List any period in which one or more category of inventory exceeded the permitted maximum for the category. How was that condition relieved? |   |                        |                     |                   |                 |                   |                   |                       |  |  |
|   | For any excess inventory at the end of the quarter, state how and when this condition will be relieved. Attach Additional sheets, if necessary. |                        |                     |                   |                 |                   |                   |                       |  |  |
|   | _   | f my knowledg          | ge and belief, I co | ertify the inform | nation provided | In this report is |                   | , ,                   |  |  |
| Print Name of Authorized Agent  Signature of Authorized Agent  Date   |   |                        |                     |                   |                 |                   |                   |                       |  |  |

Mail complete form to the appropriate district office