



Department of Environmental Protection

DEP Form # 62-701.900(21)
Waste Tire Processing Facility
Form Title <u>Quarterly Report</u>
Effective Date <u>3/22/00</u>
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.

Quarter covered by this report 4th (First quarter begins on January 1 of any given year)

1. Facility name: Tire Disposal Services
2. Facility mailing address: P.O. Box 550
City: Cottontale County: Jackson Zip: 32431
3. Facility permit number: 0064386-003-WT
4. Facility telephone number (850) 352-1044
5. Authorized person preparing report: Jim Merrifield
6. Affiliation with facility: Owner
7. Telephone number (if different from above): () T
8. Activity: Report in tons

RECEIVED

FEB 02 2012

NORTHWEST FLORIDA
DEP

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires							
Other whole Tires	6	367	255		112		6
Processed tires							
Processing Waste							
Other							
Total	6	367	255		112		6

- a. Explain all inventory adjustments. _____
- b. List any period in which one or more category of inventory exceeded the permitted maximum for that 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. _____

9. Certification:

To the best of my knowledge and belief, I certify the information provided in this report is true, accurate, and complete.

Jim Merrifield

Print Name of Authorized Agent

Jim Merrifield

Signature of Authorized Agent

1-27-12

Date

Mail complete form to
the appropriate district office

Tire Disposal Services
0064386-003-WT
Attachment 2
Page 1 of 1