



**SARASOTA COUNTY**

*"Dedicated to Quality Service"*

January 7, 2013

5/6/14

Florida Dept of Environmental Protection  
South District  
P.O. Box 2549  
Fort Myers, FL 33902-2549

**Subject:** Central County Solid Waste Disposal Complex  
Waste Tire Processing Facility Quarterly Report  
Permit Number 126775-003-WT/02  
October through December 2012

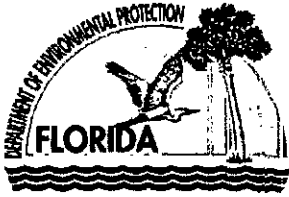
Enclosed is the above-mentioned report in accordance with Specific Condition Number D.3.b.

If you have any questions, please do not hesitate to contact Lois Rose directly at (941) 861-1589, Cell (941) 650-0722, or email at [lerose@segov.net](mailto:lerose@segov.net).

Sincerely,

Lois Rose  
Manager

Enclosure



# Florida Department of Environmental Protection

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

Reset Form

Print Form

DEP Form # 62-701.900(21)  
Form Title: Waste Tire Processing Facility Quarterly Report  
Effective Date: January 6, 2010  
DEP Application No. \_\_\_\_\_  
(Completed 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 Quarter 2012 (First quarter begins on January 1 of any given year)

- Facility name: Central County Solid Waste Disposal Complex
- Facility mailing address: 4000 Knights Trail Road  
City: Nokomis County: Sarasota Zip: 34275
- Facility permit number: 126775-003-WT/02
- Facility telephone number (941) 861-1589
- Authorized person preparing report: Lois Rose
- Affiliation with facility: Manager, Solid Waste Operations
- Telephone number (if different from above): ( )
- Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	243.63	87.47	77.01				254.09
Other Whole Tires							
Processed Tires							
Processing Waste							
Other							
<b>Total</b>	<b>243.63</b>	<b>87.47</b>	<b>77.01</b>				<b>254.09</b>

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.

Lois Rose  
Print Name of Authorized Agent

Signature of Authorized Agent

1-7-13  
Date

Mail completed form to the appropriate District office listed below

Northwest District  
160 Government Center  
Pensacola, FL 32501-5794  
850-595-8380

Northeast District  
7825 Baymeadows Way, Ste. 200 B  
Jacksonville, FL 32256-7590  
904-807-3300

Central District  
3319 McGuire Blvd., Ste. 232  
Orlando, FL 32803-3767  
407-894-7555

Southwest District  
13051 N. Telecom Pky.  
Temple Terrace, FL  
813-632-7800

South District  
2295 Victoria Ave., Ste. 364  
Fort Myers, FL 33902-2549  
239-332-6975

Southeast District  
400 North Congress Ave.  
West Palm Beach, FL 33401  
561-681-6800