



Jeb Bush
Governor

Department of Environmental Protection

Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

David B. Struhs
Secretary

March 24, 2003

Mr. Carl Zalak
Ocala Recycling, LLC
2350 NW 27th Avenue
Ocala, Florida 34475

Dear Mr. Zalak:

Your Application for Registration of a Yard Trash Processing Facility for Ocala Recycling, LLC, is complete. Your facility identification number is 129-02-YT. This registration is valid until **May 1, 2004**. The receipt number for the registration fee you paid is 410755.

You must comply with the following requirements in order to maintain qualification for the registration program:

1. Monthly records of incoming and outgoing material shall be kept on site or at another location as indicated on the registration form for at least three years.
2. An Annual Report for a Yard Trash Processing Facility, DEP Form 62-709.320 (7)(b), shall be submitted by April 1 of each year.
3. A registration renewal, DEP Form 62-709.320(7)(a), shall be submitted by April 1 of each year to renew this registration.
4. The facility shall be operated in accordance with Rules 62-709.320(3) and (4), Florida Administrative Code (F.A.C.). A summary of these requirements is enclosed.

If you need further information, please contact Francine Joyal at the above address, Mail Station 4565, telephone 850/245-8747, or email Francine.Joyal@dep.state.fl.us.

Sincerely,

Francine Joyal
Environmental Specialist

Enclosures

cc: Gloria De Pradine, Central District

"More Protection, Less Process"

Printed on recycled paper.



Department of Environmental Protection

Solid Waste Section, Mail Station 4565
2600 Blair Stone Road, Tallahassee, Florida 32399-2400

DEP Form # 62-709.320(7)(a)
Application for Registration of a
Form Title <u>Yard Trash Processing Facility</u>
Effective Date <u>October 22, 2000</u>
DEP Application No. _____
Filled in by DEP)

Application for Registration of a Yard Trash Processing Facility

1. Type of Application: New Renewal (due April 1) X
2. Type of Facility: Transfer Station Both
Recycling Facility X
3. Facility Name: Ocala Recycling, LLC Facility ID#: 129-02-YT
(Assigned by Department)
4. Registrant (Company or Local Government) Name (if different): Ocala Recycling, LLC
5. Federal Employment Identification Number: 59-3598319
6. Mailing Address: 2350 NW 27th Avenue Solid Waste Section
City Ocala State Florida Zip 34475
7. Street Address (if different): 2350 NW 27th Avenue
City Ocala State Florida Zip 34475
County Marion
8. Contact Person: Carl Zalak Telephone: 352-622-5800
9. Records required by Rule 62-709.320, F.A.C., will be kept at the facility? Yes X No

If no, please indicate where these records will be kept and made available upon Department request to review the records:

10. Does the registrant own the facility site? Yes X No

If you answered no, please provide evidence that the facility owner or operator has permission from the landowner to operate a yard trash recycling facility at this site.

11. Has the facility begun operations? Yes X No

12. Include a check or money order for the \$35.00 registration fee made payable to the Florida Department of Environmental Protection.

I affirm that I have read Rule 62-709.320, F.A.C., and shall comply with the requirements specified in that rule. I also affirm that the information provided in the application is true, accurate, and correct to the best of my knowledge. I have attached all documents and/or authorizations that are required.

CARL ZALAK OWNER

Print Name and Title of Authorized Agent

Carl Zalak

Signature of Authorized Agent

3/10/03

Date

Mail completed form and the \$35.00 registration fee to the address specified above.



Department of Environmental Protection

Solid Waste Section, Mail Station 4565
2600 Blair Stone Road, Tallahassee, Florida 32399-2400

DEP Form # 62-709.320(7)(b)
Annual Report
Form Title for a Yard Trash Processing Facility
Effective Date October 22, 2000
DEP Application No. (Filled in by DEP)

Annual Report for a Yard Trash Processing Facility

1. Facility Name: Ocala Recycling, LLC Facility ID#: 129-02-YT
(Assigned by Department)
2. Street address: 2350 NW 27th Avenue
City Ocala County Marion
3. Federal Employment Identification Number: 59-3598319
4. Contact Person: Carl Zalak Telephone: 352-622-5800
5. Calendar Year (January 1 through December 31) Covered by this Report: 2002
6. Values used in this report are in (CIRCLE ONE): Tons ☐ Cubic Yards ☒
7. For Existing Facilities that have not reported this information in the past, Amount of
 - a. Unprocessed Yard Trash On Site at Beginning of Report Year: 300
 - b. Processed Yard Trash On Site at Beginning of Report Year: 2000
8. Total Quantity of Yard Trash Received During Report Year: 23,000
9. Total Quantity of Yard Trash Lost Due to Processing (e.g. drying, shrinkage, etc.) During Report Year: 8,000
10. Total Quantity of Yard Trash Removed from Site for:
 - a. Use: 14,100
 - b. Disposal: 16,000
 - c. Other (transfer station): 1,000
11. Total Quantity On Site at End of Report Year of:
 - a. Unprocessed Yard Trash: 200
 - b. Processed Yard Trash: 2000

25,300

27,200

Δ 1900 too much

I affirm that the information provided in the report is true, accurate, and correct to the best of my knowledge.

CARL ZALAK OWNER

Print Name and Title of Authorized Agent

Carl Zalak

Signature of Authorized Agent

3/14/03

Date

Mail completed form to the address specified above.