

## Florida Department of Environmental Protection

Rick Scott Governor

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

Herschel T. Vinyard Jr. Secretary

## **Receipt for Submission**

June 28, 2013

JIMMY WISE SUMTER COUNTY SOLID WASTE 319 E. ANDERSON AVENUE

BUSHNELL, FL 33513 0

Dear JIMMY WISE

You indicated that operation of your Yard Trash Processing Facility known as SUMTER COUNTY SOLID WASTE (located at 835 CR 529, Lake Panasoffkee) in Sumter County is addressed under another Department permit, and that you were submitting only the required annual report. Thank you for your submittal, a copy of which is attached for your information. Please note that your facility identification number (WACS ID) is 53008.

If you have any questions, please contact me at the above address, Mail Station 4565, telephone 850-245-8707, or e-mail Lauren. OConnor@dep.state.fl.us.

Sincerely,

Lauren O'Connor

cc: Gloria Depradine; Central District



## Florida Department of Environmental Protection

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

DEP Form # 62-709.901(3)			
Appl for Reg. and Ann Rep for a YT Trans			
Form Title Station or SW Organic Recycling Facility			
Effective Date February 15, 2010			
DEP Facility ID No.			
(Filled in by DEP)			
DEP WACS ID No: <u>53008</u>			
(Filled in by DEP)			
This form is adopted by reference in subsection 62-			
709.901(3), F.A.C.			

Application for Registration and Annual Report for a Yard Trash Transfer Station or a Solid Waste Organics Recycling Facility

PART A - GENERAL INFORMATION						
1.	Type of Application: New Renewal (due July 1) Annual report only for facility	ty opera	ting under permit:			
2.	Type of Facility: Yard trash recycling Yard trash transfer station Vegetative, animal byproducts or manure of	e blendi omposti				
3.	3. Type of Waste Processed: Yard trash <u>v</u> Manure Animal byproducts Pre-consumer Vegetative Vegetative (could/did come into contact with animal products or byproducts or end user)					
4.	Facility Name: SUMTER COUNTY SOLID WASTE					
5.	5. Registrant Name (or Permittee if annual report only): SUMTER COUNTY SOLID WASTE					
6.	6. Federal Employer Identification Number: 596000865					
7.	7. Mailing Address: 319 E. ANDERSON AVENUE					
	City BUSHNELL State FL	Zip	33513 0			
	Street Mailing Address (if different):					
	City State	Zip				
8.	Facility Location - Street Address or Property Number: 835 CR 529	,				
Ο.	City Lake Panasoffkee County Sumter					
0	Contact Person: JIMMY WISE Telephone: (352) 569-1975					
9.	Contact Person. Shall will will a septime. (332) 303-1373	<u>'</u>				
	PART B - ADDITIONAL INFORMATION REQUIRED FOR REGISTRATION APP	LICATION	ON			
10.	Records required by Rule 62-709.320, F.A.C., will be kept at the facility?	Yes	No			
	If no, please indicate where these records will be kept and made available upon Department requi	est to re	view the records:			
11.	Does the registrant own the facility site?	Yes	No			
If you answered no, please attach evidence that the facility owner or operator has permission from the landowner to operate a yard trash transfer station or a solid waste organics recycling facility at this site.						
12.	Has the organic recycling facility begun operations?	Yes	No			
	If this facility was operating in the previous calendar year, the annual report in Part C must be completed.					
13. Include a check or money order for the \$35.00 registration fee made payable to the Florida Department of Environmental						
Protection. Payment of \$35.00 for this registration was received via online transaction.  I affirm that I have read Rules 62-709.320, 62-709.330 and 62-709.350, F.A.C., and shall comply with the requirements specified in those rules. 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.						
Pr	int Name and Title of Registrant or Authorized Agent Signature		Date			
Em	Email address (if available):					

	PART C - ANNUAL REPORT				
14.	Calendar Year (January 1 through December 31) Covered by this Report:	2012			
15.	Values used in this report are in (SELECT ONE):	Tons Cubic Yards			
16.	For Existing Facilities that have not reported this information in the past, Amount of				
	a. Unprocessed Material On Site at Beginning of Report Year:	40			
	b. Processed Material On Site at Beginning of Report Year (total):	0			
17.	Total Quantity of Material Received During Report Year:	2193			
18.	Total Quantity of Material Lost Due to Processing (e.g. grinding, drying, shrinkage, fires, etc.) During Report Year:	0			
19.	Total Quantity of Material Removed from Site for:				
	a. Use (e.g., landfill cover, fuel, mulch, compost, etc.):	0			
	b. Disposal:	0			
	c. Other (transfer stations)	2233			
20.	Total Quantity On Site at End of Report Year of:				
	a. Unprocessed Material:	0			
	b. Processed Material:	0			
Note	, plus 19 a, b and c, plus 20 a and b.  Total of Items 18, 19 and 20 233				
I affirm that the information provided in the annual report is true, accurate, and correct to the best of my knowledge.					
JIMM	Y WISE JIMMY WISE	06/28/2013			
Print Name and Title of Registrant/Permittee or Authorized Agent		Signature Date			
Emai	Email address (if available): becky.segrest@sumtercountyfl.gov				
PART D. MAILING INSTRUCTIONS					

## **PART D - MAILING INSTRUCTIONS**

Remember to include the \$35.00 fee if this is also a registration application. Mail completed form to: This registration was completed and payment of \$35.00 (if applicable) was received via online transaction.

Department of Environmental Protection Solid Waste-Section, MS 4565 2600-Blair Stone Road Tallahassee, Florida 32399-2400