

Department of  
Environmental Protection  
Twin Tower Office Building  
2600 Blair Stone Road  
Tallahassee, FL 32399-2400

WT 0140703-007-WT

Waste Tire General Permit Notification/Quarterly Report  
For Mobile Processing Equipment

Pursuant to Rule 62-711.801, Florida Administrative Code, the owners or operators of a qualifying waste tire mobile shredding, chopping, or cutting equipment shall submit the following information on this form to the Department.

Type of Submittal:  General Permit Notification  Quarterly Report

If submitting notification for use of a general permit, fill out Parts I & II. If making a quarterly report, fill out Parts I & III.

Part I General:

A: Company name: Florida Tire Recycling, Inc.

1. Phone (772) 465-0477
2. Street Address 9675 Range Line Road
3. City Port St. Lucie State 34987 Zip 34987
4. Mailing Address Same
5. City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
6. Contact Person: John J. Wilson

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Solid Waste Section

Part II Notification

A. Status of Operation:  Existing  Proposed

B. Submit information for mobile shredding, chopping, or cutting equipment.

1. Equipment manufacturer: COLUMBUS MCKINNON
2. Equipment Model Number: MOBILE TIRE SHREDDER
3. Equipment serial number: \_\_\_\_\_ 4. Manufacturer's rated capacity \_\_\_\_\_
5. Maximum input size: \_\_\_\_\_ 6. Minimum input size: \_\_\_\_\_
7. Equipment owner: AS ABOVE
8. Address \_\_\_\_\_
9. City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

C. Describe how and where processed tires will be used or disposed of: \_\_\_\_\_

PERMITTED WASTE TIRE FACILITIES

D. Attach a check or money order for the \$100.00 general permit fee required for new or renewal notifications. (Rule 62-4, F.A.C.)

E. Certification for Parts I & II.

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

John J. Wilson  
Name of Authorized Agent

  
Signature of Authorized Agent

2/28/05  
Date