

Name of Authorized Agent

Florida Department of Environmental Regulation

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

DER Form # 17-711.900(2)					
Form Title Wasta Tue General Permy Notification/Questarly Report					
Effective Date Fabouro 28 1994					
DER Application No.					
(Filled in by DER)					

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Date

				GUMPIUENIIAL		
	Waste Tire Gen	eralPermit N	Notification/Qu	arterly Report		
_		For Mobile Proce	ssing Equipment	Ind Gth YE		
shreddin	³ ursuant to Rule 17-711.801, F g, chopping, or cutting equipme	Porida Administrative C nt shall submit the follo	ode, the owners or operato wing information on this for	ers of a qualifying waste tire mobil on to the Department:		
Type of	submittal: General Permit	notification Quarterly	report			
If submit	ting nothication for use of a ger	lerar permit, mi out rart	s i & ii. ii making a quarten	y report mi out naits i ca in.		
Part I Ge						
A. Com	pany name: 7 PORIDAT	IRE RECYCLING,	NC.			
	ione() 501/465-0		·			
2. St	reet Address: 9675 RA	NGE LINE ROA	D			
	ry: Point St. Lucie	_		7		
	ailing address: <u>SAMB</u>					
5. Ci	ty :	State:	Zip:	·		
6. Cc	Contact person: DAVID L. QUARTERSON 7. Phone: (56) 465-0477					
	otification ,	,				
A. Stati	us of operation: 🗆 Existing	☐ Proposed				
B. Subr	nit information for mobile shred	ding, chopping, or cuttin	g equipment.			
1. Eq	uipment manufacturer:					
2. Eq	uipment model number:	<u> </u>	<u> </u>			
3. Eq	uipment serial number:	number:4. Manufacturers rated capacity:				
5. Ma	aximum input size:	e:6. Minimum output size:				
7. Eq	uipment owner:	·····				
8. Ac	idress:					
9. Cit	ty:	State:	Zip:	OCT 1 3 1998		
	cribe how and where processed					
C. Desc	tibe now and where processed	tiles will be used of disp	0360 01	Solid Waste Cootion		
				<u> </u>		
D. Atta	•	ne \$100.00 general perr	nit fee required for new or re	enewal notifications. (Rule 17-4,		
E. Certi	ification for Parts I and II:			·		
To the be	est of my knowledge and belief,	I certify the information	provided in this notification	is true, accurate, and correct.		

Signature of Authorized Agent Page 1 of 2

rarı	m-quarteny neport:	¥				
Α. (Quarterly reporting submissions for mr shredding; chopping, or cutting equipmen	yr.				
1.	Quarter of this report (First quarter begins on January 1, of any given year): 320 Quarter, 1998					
2.	☐ No activity in this quarter.					
в. (Quarterly activity at landfills. (Use additional sheets if necessary)					
3.	,					
4.	Quantity tires processed:					
	(Expressed in tons assuming 100 passenger tires to-a ton, 20 truck tires to a ton)					
5.	Describe how processed tires were used or disposed of:					
List e	(Ex. daily cover, TDF, Landfillable shred ,etc.) Quarterly activity at other sites. (Use additional sheets, if necessary) each site where your equipment operated in the quarter covered by this report.					
1.						
2.	Owner/Operator Telephone number:					
3.	Street Address:					
4.	City:State:Zip:					
5.						
6.	Describe how processed tires were used or disposed of:					
7.	Product removed to:					
8.	Waste removed to:					
	(Ex. daily cover, TDF, Landfillable shred ,etc.)					
D. C	ertification for Parts I and III:					
To correct Day	1/1/VI: (Letting	e an				

Mail completed forms to:

Signature of Authorized Agent

Date

Name of Authorized Agent

Florida Department of Environmental Protection Solid Waste Section / tires 2600 Blair Stone Road Tallahassee, Florida 32399-2407 Page 2 of 2

MOBILE WASTE TIRE PROCESSING FLORIDA TIRE RECYCLING, INC. 3RD QUARTER, 1998

LOCATION	OWNER	PTE'S PROCESSED	APPLICATION
PASCO COUNTY	PASCO COUNTY		CIVILENGINEEDING
SAR AGOTA COUNT	SARASOTA COUNT	43,305	CIVIL ENGINEERING
VOLUSIA COUNTY	VOLUSIA COUNTY	68,373	CIVIL ENGINEERING
OSCEOLA COUNTY	OSCEOLA COUNTY	58,122	CIVIL ENGINEERING

216,572