

## Florida Department of Environmental Regulation

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

.: 1 Form # 17-711.900(2)
Form Title Waste Tre George Parmy Notification Charles Seport
Effective Date Fabourg 28, 1894
DER Application No.
(Filled in by DER)

321 Qta 94

	<b>.</b>		,
Pursuant to Rule 17-711.801, 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 Departmen	nt:

For Mobile Processing Equipment  Pursuant to Rule 17-711.801, Florida Administrative Code, the owners or operators of a qualifying waste tire mobil 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:FIORIDA_TIRE_RECYCLING, INC.
1. Phone(_) 407-465-0477
2. Street Address: 9675 RANGE LINE ROAD
3. City: PORT ST LUCIE State: FL Zip 34987
4. Mailing address: SAME
5. City:State:Zip:
6. Contact person: DAVE QUARTERSON 7. Phone:(407) 465-0477
Part II- Notification
A. Status of operation: 🗆 Existing 🗆 Proposed
B. Submit information for mobile shredding, chopping, or cutting equipment.
1. Equipment manufacturer: COLUMBUS MCKINNON CORPORATION
2. Equipment model number: 3408TA
3. Equipment serial number: 78203778 4. Manufacturers rated capacity: 10 TON/HR
5. Maximum input size: 54" X 16" 6. Minimum output size: 2" NOMINAL
7. Equipment owner:FLORTDA_TTRE_RECYCLINGINC
8. Address: 9675 RANGE LINE ROAD
9. City: PORT ST. LUCIE State: FL Zip: 34987
C. Describe how and where processed tires will be used or disposed of: AS PER OUR CONTRACT, SHREDDED
MATERIAL REMAINS PROPERTY OF BREVARD, HIGHLANDS MARTIN, AND SARASOTA COUNTIES
D. Attach a check or money order for the \$100.00 general permit fee required for new or renewal notifications. (Rule 17-4, F.A.C.)
E. Certification for Parts I and II:
To the best of my knowledge and belief, I certify the information provided in this notification is true, accurate, and correct.  Susan K. Wilser.  10. 19.94
Name of Authorized Agent Signature of Authorized Agent Date

Andrew Control of the	••
or cutting equipment.	
Unarterly Report:  Quarterly reporting submissions for mobile shredding, chopping, or cutting equipment.  Quarterly reporting submissions for mobile shredding, chopping, or cutting equipment.  JULY 1, 1994 TO SEPTEMBER 30, 1994  Quarter of this report (First quarter begins on January 1, of any given year):  Quarterly in this quarter.	
II-Cus submissions (at an Jenuary 1, of any given year):	•
Quarterly of this report (First quarter begins and	
Quarter of this quarter.	
No activity III . Use additional sites	
Quarter of this report.  No activity in this quarter.  Quarterly activity at landfills. (Use additional sheets if necessary)  Ouarterly activity at landfills. (Use additional sheets if necessary)  SHEET	
Leadfill Where	
1. Landfill name:  1. Owner/Operator Telephone number:  2. Owner/Operator Telephone number:  1. Landfill name:  2. Owner/Operator Telephone number:	
1. Landin Telephone number.	
2. Owner/Opered	
3. County:	
<ol> <li>Owner/Operate</li> <li>County:</li></ol>	
(Expressed in tons assurance were used or disposed or	•
the how pro-	
5. Describe shred ,etc.)	
(Ex. daily cover, TDF, Landfillable shred, etc.)  (Ex. daily cover, TDF, Landfillable shred, etc.)	
(Ex. other sites. (Use additions and guarter covered by this top	
(Ex. daily cover, TDF, Landfillable shred, etc.)  C. Quarterly activity at other sites. (Use additional sheets, if necessary)  List each site where your equipment operated in the quarter covered by this report.	
List each site where your equip	
1. Site name:	
1. Site name:  2. Owner/Operator Telephone number:  Zip:	
2. Owner:  3. Street Address:  Coate:  1. sires to a ton )	·
3. Street Address State:	
3. Street Address:  State:  State:  Guantity tires processed:  (Expressed in tons assuming 100 passenger tires to a ton, 20 truck tires to a ton)  (Expressed in tons assuming 100 passenger tires to a ton, 20 truck tires to a ton)	
5. Quantity tires processed: 100 passenger tires to 5. Quantity tires processed in tons assuming 100 passenger tires to 5.	
5. (Expressed in tons used tires were used or disposed on a	
Describe how processor	
7. Product removed to:	. ar
7. Product Top Landfillable shred ,etc.)	Benort is true, accurate a
8. Waste lette (Ex. daily cover, 100, audited in this Quarterly	, nor
note I and III:	10/19/94
D. Certification for Parts I and III:  One of my knowledge and belief, I certify the information provides the provided of the certify the information provided the certification of the certific	Date
To the best of my correct.  SIJSAN K. WILSON Signature of Authorized Agent	
SUSAN K. WILSON Signature of Authorized	
Name of Authorized Agent	
Name to:	•

Mail completed forms to:

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

## WASTE TIRE QUARTERLY REPORT JULY 1, 1994 TO SEPTEMBER 30, 1994

## PART III

В.

- 1. COCOA LANDFILL
- CONTACT PERSON: CHARLES HUNTER 2. 407-633-1888
- 3. BREVARD COUNTY
- 1422.71
- DAILY COVER AND LANDFILLABLE SHREDS
- MELBOURNE LANDFILL
- 407-633-1888 CONTACT PERSON: CHARLES HUNTER 2.
- 3. BREVARD COUNTY
- 4. 122.14
- 5. DAILY COVER AND LANDFILLABLE SHREDS
- HIGHLANDS COUNTY SOLID WASTE LANDFILL
- CONTACT PERSON; CHRISTY REED 813-568-6823 2.
- 3. HIGHLANDS COUNTY
- 137.17 4.
- DAILY COVER AND LANDFILLABLE SHREDS
- 1. MARTIN COUNTY LANDFILL
- CONTACT PERSON: MIKE BACON 407-288-5772 2.
- MARTIN COUNTY 3.
- 4. 47.02
- DAILY COVER AND LANDFILLABLE SHREDS
- BEE RIDGE ROAD LANDFILL 1.
- CONTACT PERSON: PAM NOAH 813-951-5096 2.
- 3. SARASOTA COUNTY
- 401.14 4.
- DAILY COVER AND LANDFILLABLE SHREDS