

<u> </u>
neral Permit Notification
2, 1989
(Filled in by DER)

### Waste Tire General Permit Notification

1. Type and status of operation (check	as many as apply):	IM:	
Existing XX Proposed	•	707	мпv: 5 1992
Waste tire collection center	Mobile shredding, chopping, or	cutting equipment	
Small processing facility	XX Other		EA SOLIR WHOTE
2. Waste tire collection centers and small	all processing facilities must complete	the following facility in	- •
a. Facility name:			
b. Facility location:			
Street address (main entrance)	· · · · · · · · · · · · · · · · · · ·		
City	, County	, Zip	
Section	, Township	, Range	
Latitude	, Longitude _		
c. Name of property owner:		•	
d. Address of property owner:			
City	State	Zip	
e. Telephone number of property ow	ner: ()		
3. Name of operator: FLORIDA TIR	E RECYCLING, INC.		
4. Address of operator: 9675 RANGE	LINE ROAD		
City PORT ST. LUCIE	State FLORIDA	Zip	34987
5. Telephone number of operator: ( 40			
6. Describe the general operation of the	a facility or equipment (attach addition	al sheets, if necessary	/):
MOBILE TIRE SHREDDING			
<ol><li>Describe how the waste tire storage are if necessary):</li></ol>	nd handling requirements of Rule 17-71	1.540, F.A.C. will be me	et (attach additional sheets
<del></del>			

QTR, 3

8.	Date of beginning operation:	JULY 1, 1992 THRU SEPT	TEMBER 30, 1992	
9.	Quantities of waste tires, express	ed in tons (assume there are 10	0 tires per tor or 10 tires per cubic	; yard):
	Received per month:0	tons		
	Stored on site: 0	tons		
	Processed per month: 0	tons	•	
10.	Describe how and where the wa	ste tires, processed tires, and re	siduals from processing will be disp	oosed:
4				
1				
`4	August San Control			
1.			ng locations during preceeding three eu of listing each site). Attach additio	
	Name of facility or site:	ssaring site may be attached in it	so or acting odor site). Added dodaid	The directo, in the descary.
	Site Location (main entrance)			
	,			
			Zip	
		·	ongitude	
	Site property owner:	·	•	
	• •			
		•		
2.	Required attachments:	,		
	a. Letter of notification to fire prot	ection authority		
	b. General permit fee of \$25.00.	·		
3.	Certification:	,		
	₹.	belief. I certify the information	provided in this notification is true, a	accurate, and correct.
	,		1	
	,			
	JOHN J. WILSON	John John	Yeld	NOVEMBER 4, 1992
	Name of Authorized Agent	//Signati	e of Authorized Agent	Date
		// //	-	

Mobile Equipment Operators mail completed form to: Florida Department of Environmental Regulation Solid Waste Section Attention: Tires 2600 Blair Stone Road Tallahassee, Florida 32399-2400

DER Form #_17-	711.900(2)
Form Title Waste	Tire General Permit Notification
Effective Date_Fi	sbruery 22, 1989
DER Application I	Na
	(Filled in by DER)

## Waste Tire General Permit Notification

1.	Type and status of o	peration (check as n	nany as apply):				
	Existing XX Pro	posed	•				
	☐ Waste tire collect	tion center	Mobile shredding, chop	pping, or cutting ed	quipment	•	• •
	☐ Small processing	j facility	Other			•	
2.	. Waste tire collection	centers and small p	ocessing facilities must o	complete the follow	ing facility	/ information:	
	a. Facility name:						• .
	b. Facility location:						
	Street address (ma	ain entrance)					. 40.7
	City		, County		, Zip _		t .
	Section		, Township		Range		, `
	Latitude		, Lo	ngitude		· · · · · · · · · · · · · · · · · · ·	
	c. Name of property	owner:		•			
	d. Address of proper	ty owner:	<u>.</u>				: : :
	City		State	18 J. P. S. C. 198	Zip	•• •• •	
	e. Telephone number	r of property owner:	()		•	. •	1 11
3.			E RECYCLING, I				٠,
	Address of operator:				,		
			StateFLORID	A	Zip	34987	
5.			) 465-0477				
			ility or equipment (attach			*	
	<b>3</b>						
	MOBILE T	IRE SHREDDIN	iG		-		
7			andling requirements of f	Outo 17 711 540 5 A	مط الفيد	mat (attach add	itional shoots
٠.	if necessary):	ste tire storage and n	anding requirements or r	1016 17-711.540, F.A	.C. WIII DE	met (attach add	ilional Sheets,
				<b>.</b>	·	·	
				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
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QTR, 4

EA Form e	17-711.900(2)	
	ste Tire General Permi	t Neiffication
	February 22, 1989	* * ****
A Application	no Mo	
	(Filled in	by DER)

8. Date of beginning operation: OCTOBER 1, 19	992 THRU DECEMBER 31,	1992
9. Quantities of waste tires, expressed in tons (assume the	nere are 100 tires per ton or 10 tires p	er cubic yard):
Received per month:0 tons		
Stored on site: 0 tons		
Processed per month: tons		
10. Describe how and where the waste tires, processed ti	ires, and residuals from processing will	be disposed:
11. List mobile shredding, chopping, and cutting equipmer	nt processing locations during preceedi	ng three months (Photocopies of
Form 17-711.900(3) for each processing site may be att	-	n additional sheets, it necessary:
Name of facility or site:		<u> </u>
Site Location (main entrance)		
Street address:		
City Co	ounty Zip	)
Latitude	, Longitude	
Site property owner:		
Property owner address:	·	
Property owner phone number: ()		
12. Required attachments:	•	
a. Letter of notification to fire protection authority		
b. General permit fee of \$2500. (Rule 17-4, F.A.C.)		
13. Certification:	! 	•
To the best of my knowledge and belief, I certify the in	nformation provided in this notification	is true, accurate, and correct.
•		
JOHN J. WILSON		MARCH 10,199
Name of Authorized Agent	Signature of Authorized Agent	Date

Mobile Equipment Operators mail completed form to: Florida Department of Environmental Regulation Solid Waste Section Attention: Tires 2600 Blair Stone Road Tallahassee, Florida 32399-2400



#### Florida Department of Environmental Regulation

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

DER Form # 17	-711.900(2)
	Tire General Permit Notification
Effective Date_F	ebruary 22, 1989
DER Application	No(Filled in by DER)

## Waste Tire General Permit Notification

Type and status of operation (check Existing    Proposed	as many as apply).		
Waste tire collection center	Mobile shredding, chopping, c	r cutting equipment	
		r cutting equipment	3 .
Small processing facility	₩ Other		
2. Waste tire collection centers and sm			
a. Facility name:			
b. Facility location:			
Street address (main entrance) _			
City	, County	, Zip	
Section	, Township	, Range	
(American Control of C	, Longitude		
produktiva. Nako denaziran errekitarra			_
	State		
		·	
	vner: ()		
3. Name of operator: FLORIDA TI			
4. Address of operator: 9675 RANGE		0.400	
City PORT ST. LUCIE	StateFLORIDA	Zip34987	
5. Telephone number of operator: ( $40$	7) 465-0477		
5. Describe the general operation of th	e facility or equipment (attach addition	onal sheets, if necessary):	
4444			
MOBILE TIRE SHREDDING			
7. Describe how the waste tire storage a	and handling requirements of Rule 17-	711.540, F.A.C. will be met (attach addi	tional she
if necessary):		(	
A Star of	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·		

2TR. 2

DER Form & 17-711.900(2)	
Form Title Waste Tire General Permit Notification	
Elective Date February 22, 1989	
DER Application No(Filed in by DER)	

and the second s	•		
8. Date of beginning operation: API	RIL 1, 1992 THRU JUNE 30,	. 1992	
9. Quantities of waste tires, expressed in t	ons (assume there are 100 tires pe	er ton or 10 tires per cubic	yard):
Received per month:0	_ tons		
Stored on site:	_ tons		
Processed per month:0	_ tons		
0. Describe how and where the waste tire	s, processed tires, and residuals fr	om processing will be disp	oosed:
			***
		······································	
1. List mobile shredding, chopping, and cu			
Form 17-711.900(3) for each processing			mai sneets, ii necessary:
Name of facility or site:			
Site Location (main entrance)			
Street address:			
City	•		
Latitude	, Longitude		
Site property owner:			
Property owner address:			
Property owner phone number: (	)		
2. Required attachments:		•	
a. Letter of notification to fire protection	authority		
b. General permit fee of \$25.00. (Rule 1	7-4, F.A.C.)		
3. Certification:			
To the best of my knowledge and belief	, I certify the information provided	in this notification is true, a	ccurate, and correct.
• *******		7	
		L//	
JOHN J. WILSON	_ JAN	VUIN	NOVEMBER 4, 199
Name of Authorized Agent	Signature of Aut	thorized Agent	Date

Mobile Equipment Operators mail completed form to: Florida Department of Environmental Regulation Solid Waste Section Attention: Tires 2600 Blair Stone Road Tallahassee, Florida 32399-2400



ER Form #_17-711.900(2)	
orm Title Weste Tire General Permit I	Votification
Necive Date February 22, 1989	
ER Application No.	
(Filled in b	y DER)

#### Waste Tire General Permit Notification

1	1. Type and status of operation (check	as many as apply):							
	Existing XX Proposed								
	Waste tire collection center								
	Small processing facility	XX Other							
2	2. Waste tire collection centers and sm	nall processing facilities must comple	ete the following facility information:						
	a. Facility name:								
	b. Facility location:								
	Street address (main entrance) _								
	City	, County	, Zip	·····					
	Section	, Township	, Range						
	Latitude	Longitude							
	c. Name of property owner:								
	d. Address of property owner:								
	City	State	Zip						
	e. Telephone number of property ov	vner: ()							
3.	3. Name of operator: FLORIDA TIRE RECYCLING, INC.								
4.	4. Address of operator: 9675 RANGE	Address of operator: 9675 RANGE LINE ROAD							
	City PORT ST. LUCIE	State FLORIDA	Zip34987						
5.	5. Telephone number of operator: $(40)$	07 ) 465-0477							
6.	Describe the general operation of the facility or equipment (attach additional sheets, if necessary):								
	MOBILE TIRE SHREDDING								
7.	Describe how the waste tire storage and handling requirements of Rule 17-711.540, F.A.C. will be met (attach additional sheets if necessary):								
	<del></del>								

# GTR. 1

DER Form 4_1	17-711.900(2)
Form Title Was	se Tire General Permit Notification
: Effective Date	February 22, 1989
DER Application	n No(Filled in by DER)

8.	Date of beginning operation:	992 THRU M	ARCH 31, 1992				
9.	Quantities of waste tires, expressed in tons (assume	there are 100 t	res per ton or 10 tir	es per cubic yard	):		
	Received per month:0 tons						
	Stored on site: 0 tons		•				
	Processed per month:0 tons				, and		
10.	Describe how and where the waste tires, processed tires, and residuals from processing will be disposed:						
					••		
11.	ist mobile shredding, chopping, and cutting equipment processing locations during preceeding three months (Photocopies of form 17-711.900(3) for each processing site may be attached in lieu of listing each site). Attach additional sheets, if necessary:						
	Name of facility or site:						
	Site Location (main entrance)			•			
	Street address:		· · · · · · · · · · · · · · · · · · ·				
	City						
	Latitude	-					
	Site property owner:						
	Property owner address:						
	Property owner phone number: ()						
12.	Required attachments:		,				
	a. Letter of notification to fire protection authority						
	b. General permit fee of \$25.00. (Rule 17-4, F.A.C.)						
3.	Certification:						
	To the best of my knowledge and belief, I certify the	information pro	vided in this notifica	tion is true, accura	ate, and correct.		
	, , , ,		7		.,		
	,	7/	11/1				
	JOHN J. WILSON	Jan Jan	Mon		NOVEMBER 4, 1992		
	Name of Authorized Agent	Signature	of Authorized Agent	•	Date		

Mobile Equipment Operators mail completed form to: Florida Department of Environmental Regulation Solid Waste Section Attention: Tires 2600 Blair Stone Road Tallahassee, Florida 32399-2400