Florida Department of Environmental Protection

Carlos

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

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Receipt for Submission

June 25, 2015

STEVE STRICKLAND HARDEE COUNTY SOLID WASTE DEPARTMENT 685 AIRPORT ROAD

WAUCHULA, FL 33873 8663

Dear STEVE STRICKLAND

You indicated that operation of your Yard Trash Processing Facility known as HARDEE COUNTY SOLID V DEPARTMENT (located at 685 AIRPORT ROAD, Wauchula) in Hardee County is addressed under another permit, and that you were submitting only the required annual report. Thank you for your submittal, a copy of attached for your information. Please note that your facility identification number (WACS ID) is 40612.

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

Sincerely,

Lauren O'Connor

cc: null; null



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: 40612		
(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 of	operati	ng under permit:		
2.	. Type of Facility: Yard trash recycling Yard trash transfer station Vegetative, animal byproducts or manure con				
3.	3. Type of Waste Processed: Yard trash Manure Animal byproducts Pre-consumer Vegetative Vegetative (could/did come into contact with animal products or byproducts or end user)				
4.	Facility Name: HARDEE COUNTY SOLID WASTE DEPARTMENT				
5.	5. Registrant Name (or Permittee if annual report only): HARDEE COUNTY SOLID WASTE DEPARTMENT				
6.	6. Federal Employer Identification Number: 596000632				
7.	. Mailing Address: 685 AIRPORT ROAD				
	City WAUCHULA State FL	Zip	33873 8663		
	Street Mailing Address (if different):				
	City State	Zip			
8.	. Facility Location - Street Address or Property Number: 685 AIRPORT ROAD				
	City Wauchula County Hardee				
9.	. Contact Person: OFELIA REYNA Telephone: (863) 773-5089				
PART B - ADDITIONAL INFORMATION REQUIRED FOR REGISTRATION APPLICATION					
10.	. Records required by Rule 62-709.320, F.A.C., will be kept at the facility?	es	No		
	If no, please indicate where these records will be kept and made available upon Department request	t to rev	iew the records:		
11.	Does the registrant own the facility site?	es	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?	es	No		
	If this facility was operating in the previous calendar year, the annual report in Part C must be	e comp	oleted.		
<mark>13</mark> .	Include a check or money order for the \$35.00 registration fee made payable to the Florida Departm	nent of I	<u>Environmental</u>		
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.					
Pı	rint Name and Title of Registrant or Authorized Agent Signature		Date		
Email address (if available):					

	PART C - ANNUAL REPORT			
14.	Calendar Year (January 1 through December 31) Covered by this Report:	2014		
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:	186		
	b. Processed Material On Site at Beginning of Report Year (total):	956		
17.	Total Quantity of Material Received During Report Year:	932		
18.	Total Quantity of Material Lost Due to Processing (e.g. grinding, drying, shrinkage, fires, etc.) During Report Year:	88		
19.	19. Total Quantity of Material Removed from Site for:			
	a. Use (e.g., landfill cover, fuel, mulch, compost, etc.):	240		
	b. Disposal:	0		
	c. Other (transfer stations)	0		
20.	Total Quantity On Site at End of Report Year of:			
	a. Unprocessed Material:	261		
	b. Processed Material:	1485		
Note :	opposite to the best of my knowledge.			
I affirm that the information provided in the annual report is true, accurate STEVE STRICKLAND STEVE STRICKLAND		•		
		Signature Date		
Email address (if available): ofelia.reyna@hardeecounty.net				
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