

DEP Form # 62-701.900(21)	
Waste Tire Processing Form Title Quarterly Report	Facility
Effective Date _3/22/00	
DEP Application No.	
(Filled in by	DEP)

Waste Tire Processing Facility Quarterly Report

Pursuant processing fa	to Rule 62-7 cility shall sub	711.530, Florid mit the followin	a Administrat ig information	ive Code, the to the Departr	owner or op nent quarterly	erator of a was	ite tire
uarter covered l	by this report	1st of 2011		(First quarter	begins on Ja	anuary 1 of any	given year)
1. Facility name	e: Miami Wa	aste Tire Proc	. Fac.			_	
2. Facility maili	ng address:	1200 NW 137	7th Ave.			•	
City: Miami			County:	Dade		Zip: 33182	
3. Facility perm	it number:)146251-WT-(03	. 12	1-0//	_ ·	
4. Facility telep	hone number	(305) 221-	7645				
5. Authorized p	erson prepari	ng report: J	ames Sujan	sky	· · · · · · · · · · · · · · · · · · ·		
6. Affiliation wi	th facility:	Production N	Manager				1-1-1-1
7. Telephone nu	umber (if diffe	erent from abo	ve): (305) 228-437	2		TAIL .
3. Activity: Re	port in tons						·
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending
Used Tires	135	1803		1689	247		2
Other whole Tires						,	
Processing				ļ		·	
Waste Other, TILE							
Fluff	34	169		203			0
Total	169	1972		1892	247		2
. Explain all in	ventory adjust	tments.					
List any perio category. Ho	od in which or w was that c	ne or more cat ondition relieve	egory of inve	ntory exceede	ed the permit	ted maximum fo	or that
For any exce Attach Addit	ss inventory a ional sheets, i	at the end of the fraction of	he quarter, st	ate how and	when this co	ndition will be r	elieved.
O. Certification:				nation provided			

Mail complete form to the appropriate district office

Luis G. Lopez

Print Name of Authorized Agent



DEP Form # 62-701.900(21)
Waste Tire Processing Facility Form Title Quarterly Report
Effective Date 3/22/00
DEP Application No(Filled in by DEP)

Waste Tire Processing Facility Quarterly Report

arter covered by	this report	2nd of 2011	1	(First quarter	begins on Ja	nuary 1 of any	given year)
Facility name:	Miami W	aste Tire Prod	. Fac.				
Facility mailing	address:	1200 NW 13	7th Ave.				÷1.
City: Miami			County:	Dade		Zip: 33182	
Facility permit r	umber: ()146251-WT-		· .			
Facility telephor							
Authorized pers			lames Sujan:	skv	W		Service Control
Affiliation with		Production !				VIII	·
	-			۱ 228-437	?		
Telephone num		erent from abo	ve): (303) 220-431	4		
Activity: Repo	Reginning	Received	Processed	Consumed	h		
	Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires 2	· ·	1839		1725	177	118 due to s	57
Other whole Tires				1100 20 50 50 50			
Processed tires				57.			
Processing Waste				1.	, -		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Other 0		2471		2150	7.		321
Total						194	:
				_ 			
Explain all inven	tory adjus	tments. 118	due to scal	e error, scale	calibrated.		
List any period i				entory exceede	d the permitt	ed maximum fo	or that
category. How	was that c	onaition reliev	'ea ?			*	·
				the contraction of the contracti		11.	
For any excess Attach Addition			he quarter, si	tate how and v	when this cor	ndition will be r	elieved.
, ictation , taution							
Certification:							
To the best of m	y knowledg	ge and belief, I c	ertify the infon	mation provided	in this report is	s true, accurate,	and complete
10 110 5050 01 11	~						AND THE RESERVE OF THE PARTY OF



	e Processing Facility
Form Title Quarterly	Report
Effective Date 3/22/0	0
DEP Application No	
•	(Filled in by DEP)

Waste Tire Processing Facility Quarterly Report

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

	4 7 7 7	3rd of 2011		(First quarter	begins on Ja	nuary 1 of any	given year)
		aste Tire Prod					· ·
Facility mailir	ng address:	1200 NW 137	th Ave.	·			
City: Miami	· ·		County: _	Dade	.	Zip; 33182	
Facility perm	it number: _(0146251-WT-	03			तिव	
Facility telepl	hone number	(305) 221-	7645		e de la companya de La companya de la companya de l	MU	
Authorized pe	erson prepari	ng report: J	ames Sujans	sky		, (X)	,
Affiliation wil	th facility:	Production N	<i>l</i> lanager				UJT 17
Telephone nu	ımber (if diffe	erent from abo	ve): (305) 228-437	2	EVAL	NVIKONM
Activity: Re	* **						NVIRUNM ATION & CI SECTIO
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	57	671		639	73	16	0
Other whole Tires							
Processed tires	William Control						
Processing Waste	265				N 4		
Other	321	821		1247		105	0
Total	378	1492		1886	73	212	0
Explain all inv List any perio	d in which o	ne or more cat	egory of inve	s, 105 fiber		s over reportion	***************************************
category. Ho	w was that c	ondition relieve	ed?				'ye' ' ' '
For any exces Attach Additi	ss inventory a onal sheets,	at the end of the state of the	ne quarter, st	ate how and	when this con	dition will be r	elieved,
Certification: To the best of	f my knowledg	e and belief, I co	ertify the inform	nation provided	in this report is	strue, accurate,	and complete.
Luis Lopez			L	is Jane	· ·	10/14	1/11
	e of Authoria			gnature of Au		. 10.7 ()	1 / ' }



DEP Form	# 62-701.900(21)
Form Title	Waste Tire Processing Fac Quarterly Report
Effective D	ate 3/22/00
DEP Applic	cation No.

(Filled in by DEF

Waste Tire Processing Facility Quarterly Report

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly. Quarter covered by this report 4TH OF 2011 (First quarter begins on January 1 of any given year) 1. Facility name: Miami Waste Tire Proc. Fac. 2. Facility mailing address: 1200 NW 137th Ave. City: Miami County: Dade 3. Facility permit number: 0146251-WT-03 4. Facility telephone number (305) 5. Authorized person preparing report: James Sujansky **Production Manager** 6. Affiliation with facility: 7. Telephone number (if different from above): 228-4372 8. Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending
Used Tires	0	222		195	24		Inventory
Other whole Tires							3
Processed tires							
Processing Waste							
Other							
Total	o	222		195	24		3

	List any period in which one or more cotogon of investment
	List any period in which one or more category of inventory exceeded the permitted maximum for that category. How was that condition relieved?
	For any excess inventory at the end of the quarter, state how and when this condition will be relieved.
	Attach Additional sheets, if necessary.
	The state of the s
_	

Mail complete form to the appropriate district office

Luis Lopez

Print Name of Authorized Agent



Quarter covered by this report 1st of 2012

Department of Environmental Protection

DEP Form # 62-701.900(21)
Waste Tire Processing Facili
Form Title Quarterly Report
Effective Date 3/22/00
DEP Application No
(Filled in by DEP)

(First quarter begins on January 1 of any given year)

Waste Tire Processing Facility Quarterly Report

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

_	_{name:} <u>Miami W</u>		O. 1 do.				
Facility n	nailing address:	1200 NW 13	7th Ave.				
City: Mi	ami		County:	Dade		Zip: 331β	70
Facility p	ermit number: _	0146251-WT-	03				7/5(C)s
	elephone number					U	DE DE
Authorize	ed person prepari	ng report:	James Sujans	sky			APR 1
Affiliation	n with facility:	Production I	Manager	***		<i>5</i> 1	EMI
	e number (if diffe	erent from abo	ove): (305) 228-437	2	- SVAL	ENVIRONM UATION & CO SECTIO
Activity:	,		· · · · · · · · · · · · · · · · · · ·	,			SECTION
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	3	1732		1497	83		155
Other whole Tires	•						
Processed ti	íres						
Processing						† 	
Waste					1]	
	0	2251		1703			548
Waste	0 3	2251 3983		1703 3200	83		548 703
Waste Other Total Explain al		3983 tments.	tegory of inver	3200		ed maximum fo	703
Waste Other Total Explain al List any p category.	3 Il inventory adjus	3983 tments. ne or more callondition relievent the end of t	red?	3200	ed the permitti		703 or that
Waste Other Total Explain al List any p category. For any e Attach Ac	3 Il inventory adjustoeriod in which of How was that concerns inventory additional sheets, ion:	3983 tments. ne or more callondition relieved the end of the indicate of the control of the con	he quarter, sta	ate how and	ed the permitti	dition will be re	or that
Waste Other Total Explain al List any p category. For any e Attach Ac	3 Il inventory adjustoeriod in which of How was that concess inventory additional sheets,	3983 tments. ne or more callondition relieved the end of the indicate of the control of the con	he quarter, sta	ate how and	ed the permitti	dition will be re	or that
Waste Other Total Explain al List any p category. For any e Attach Ac	3 Il inventory adjustoeriod in which of How was that concerns inventory additional sheets, ion:	3983 tments. ne or more callondition relieved the end of the indicate of the control of the con	he quarter, sta	ate how and	ed the permitti	dition will be re	or that



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DEP Application No.
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Waste Tire Processing Facility Quarterly Report

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

Qua	rter covered b	y this report	2nd of 2012	2	(First quarter	begins on Jar	nuary 1 of any	given year)		
1.	Facility name	: Miami W	aste Tire Prod	. Fac.		,		•		
2.	Facility mailir	ng address:	1200 NW 137	7th Ave.						
	City: Miami			County: _	Dade		Zip: 33182			
3.	Facility permi	it number: <u>(</u>)146251-WT-	03			·			
4.	Facility telepl	hone number	(305) 221-	-7645				, 191		
5.	Authorized po	erson prepari	ng report: J	ames Sujans	sky					
6.	Affiliation with	th facility:	Production I	Manager				· · · · · · · · · · · · · · · · · · ·		
7.	Telephone nu	ımber (if diffe	erent from abo	ve): (305) 228-437	2				
	Activity: Re	•		-1		<u> </u>				
		Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory		
	Used Tires	155	1573		1553	37		138		
	Other whole Tires									
	Processed tires			i						
	Processing Waste									
	Other	548	1481		1984			135		
	Total	703	3054		3447			273		
a.	Explain all inv	entory adjus	tments.							
h	List any paria	d in which a		ramoni of lave						
D,	category. How	w was that c	ondition reliev	ed?	ntory exceede	ea tne permitti	ed maximum f	or that		
	For any excess inventory at the end of the quarter, state how and when this condition will be relieved. Attach Additional sheets, if necessary.									
9.	Certification:	f my knowledo	e and belief I c	ertify the infor	mation provided	in this report is	true, accurate,	and complete		
	Luis Lopez	e of Authoria			US G	Lopez	07	109/12 Date		



Florida Department of Environmental Protection

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

Print Form

DEP Form #_62-701.900(21)

Form Title: Waste Tire Processing Facility Quarterly

Report

__(First quarter begins on January 1 of any given year)

Effective Date: January 6, 2010

DEP Application No.

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

3rd Quarter 2012

	720		essing racility					
2. Facility mailin	g address: _1	1200 NW 137	th Ave					
City: Miami			County: Fl	ıty: Fl Zip: 33182				
3. Facility permit	number: 01	146251-WT-0				-	- · · -	
I. Facility teleph	one number	(305)221-70	645					
. Authorized pe	rson preparin	g report: C	harles Walz			······································		
Affiliation with	facility:	Environmenta	l Manager					
Telephone nu	mber (if differe	ent from above): (305)	229-2955				
Activity: Rep			· 			····		
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory	
Used Tires	138	1,744		1,514	69		298	
Other Whole Tires								
Processed Tires								
Processing Waste								
Other	135	1,128		1,043	0		220	
Total	273	2,872		2,557	69		518	
Explain all inve							•	
was that condi	tion relieved?	of filore categ	ory of inventory	exceeded the	permitted max	imum for that ca	tegory. Hov	
For any exces Additional she Certification: Tand complete. Luis G Lopez	s inventory at ets, if necessar	the end of the ary. my knowledge	quarter, state h	ow and when th	nis condition w	rill be relieved. A	attach ue, accurat	



Florida Department of Environmental Protection

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

DEP F	orm#	62-701	,900(21)

Form Title: Waste Tire Processing Facility Quarterty Report

Effective Date: January 6, 2010

DEP Application No.

(First quarter begins on January 1 of any given year)

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

4th Quarter 2012

1. Facility name:	CEMEX W	/aste Tire Pro	cessing Facility	/			
2. Facility mailing	g address: _1	1200 N.W. 13	7th Avenue				
City: Miami			County: FI	orida		Zip: 33182	
3. Facility permit	number: 0	146251-WT-0	3				
4. Facility teleph	one number	(305) 221-	7645				
. Authorized pe	rson preparing	g report; <u>C</u>	harles Walz		"		<u> </u>
. Affiliation with	facility:	Environmenta	al Manager				
. Telephone nu	mber (if differe	ent from above): (305	229-2955			
B. Activity: Repo	ort in tons		-				
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	298	1,694		1,908	0		118
Other Whole Tires							
Processed Tires						:	
Processing Waste							
Other	402	1,413		1,802	0	182	12
Total	700	3,107		3,710		182	130
Explain all inve	or (tire fluff)	or more categ	ory of inventory	exceeded the	permitted max	imum for that ca	tegory, How
For any excess Additional she	s inventory at ets, if necessa	the end of the ary.	quarter, state h	ow and when the	nls condition w	vill be relieved. A	ittach
Certification: T and complete.	o the best of r	my knowledge	1			n this report is tr	
Luis G. Lope:	<u>z</u>		<u></u>	5 (1 JE	1002	1-14-201	13
Date t Nieuw	e of Authorize						



Florida Department of Environmental Protection

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 DEP Form #_62-701.900(21)

Form Title: Waste Tire Processing Facility Quarterly Report

Effective Date: January 6, 2010

DEP Application No.

(First quarter begins on January 1 of any given year)

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

2nd Quarter 2013

Facility name:	CEMEX W	aste Tire Prod	essing Facility							
Facility mailing	g address: _1	200 N.W. 137	th Avenue	770						
City: Miami	COMPANIE AND ADMINISTRATION OF THE PARTY OF		County: Fl	orida		Zip: 33182				
Facility permit	number: 01	46251-WT-03	}							
Facility teleph	oné number	(305) 221-7	7 64 5	,		IN IB GU				
Authorized pe	rson preparin	g report: <u>C</u>	harles Walz			an Di	EP S			
Affiliation with	facility:	Environmenta	l Manager			JUL 1	^ 2013 C			
Telephone nu	mber (if differe	ent from above): <u>(</u> 305)	229-2955		PERMITTIN	G SECTIO			
Activity: Rep	ort in tons					PR	ED TO			
	Beginning inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory			
Used Tires	20	1,861		1,861	0		19			
Other Whole Tires										
Processed Tires				-		0.00				
Processing Waste										
Other	62	1,612	Sea.	1,599	0		75			
Total	82	3,473	<u>.</u>	3,460			94			
Explain all inve	entory adjustn	nents.								
List any period was that condi	in which one ition relieved?	or more categ	ory of inventory	exceeded the	permitted max	kimum for that ca	tegory. How			
For any excess inventory at the end of the quarter, state how and when this condition will be relieved Additional sheets, if necessary.										
Certification: T and complete.	Certification: To the best of my knowledge and belief, I certify the information provided in this report is true, accurate, and complete.									
		ed Agent	Luc s	s G. →c ignature of Aut	DEZ horized Agent	7-8-201	3 Date			
	Facility mailing City: Miami Facility permit Facility teleph Authorized pe Affiliation with Telephone nu Activity: Rep Used Tires Other Whole Tires Processed Tires Processed Tires Processing Waste Other Total Explain all invents List any period was that cond For any exces Additional she Certification: Tand complete. Luis G. Lope	City: Miami Facility permit number: 0 Facility telephone number Authorized person preparing Affiliation with facility: Telephone number (if difference of the content of th	City: Miami Facility permit number: 0146251-WT-03 Facility telephone number (305) 221-7 Authorized person preparing report: City: C	City: Miami County: Fix Facility permit number: 0146251-WT-03 Facility telephone number (305) 221- 7645 Authorized person preparing report: Charles Walz Affiliation with facility: Environmental Manager Telephone number (if different from above): (305) Activity: Report in tons Beginning Received Processed	City: Miami County: Florida Facility permit number: 0146251-WT-03 Facility telephone number (305) 221- 7645 Authorized person preparing report: Charles Walz Affiliation with facility: Environmental Manager Telephone number (if different from above): (305) 229-2955 Activity: Report in tons Beginning Received Processed Consumed	Facility mailing address: 1200 N.W. 137th Avenue City: Miami County: Florida Facility permit number: 0146251-WT-03 Facility telephone number (305) 221-7645 Authorized person preparing report: Charles Walz Affiliation with facility: Environmental Manager Telephone number (if different from above): (305) 229-2955 Activity: Report in tons Beginning Inventory Received Processed Consumed Removed Used Tires 20 1,861 1,861 0 Other Whole Tires Processed Tires Processed Tires Processed Tires Processing Waste Other 62 1,612 1,599 0 Explain all inventory adjustments. List any period in which one or more category of inventory exceeded the permitted meawas that condition relieved? For any excess inventory at the end of the quarter, state how and when this condition vaciditional sheets, if necessary.	Facility mailing address: 1200 N.W. 137th Avenue City: Miami County: Florida Zip: 33182 Facility permit number: 0146251-WT-03 Facility telephone number (305) 221-7645 Authorized person preparing report: Charles Walz Affiliation with facility: Environmental Manager JUL 1 Telephone number (if different from above): (305) 229-2955 PERMITTIN Activity: Report in tons Seglanning Inventory Received Processed Consumed Removed Adjustments Used Tires 20 1,861 1,861 0 Other Whole Tires Processed Tires			



Florida Department of Environmental Protection

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

Form Title Waste Tire Processing Facility Quarterly

Effective Date: January 6, 2010

DEP Application No.

(First quarter begins on January 1 of any given year)

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

3rd Quarter 2013

1. Facility name: CEMEX Waste Tire Processing Facility

2.	Facility mailing	g address: _1	1200 N.W. 137	7th Avenue			- P00					
	City: Miami			County: Flo	orida		Zip: <u>33182</u>					
3.	Facility permit	number: 0	146251-WT-0	3								
4.	Facility teleph	one number	(305) 221-	7645			TWILL I					
5.	Authorized pe	rson preparin	g report: <u>C</u>	harles Walz			******					
6.	Affiliation with	facility:	Environmenta	l Manager								
7.	Telephone nu	mber (if differ	ent from above): <u>(305</u>)	229-2955							
В.	Activity: Report in tons											
		Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory				
	Used Tires	19	1,602	· ·	1,622	0		0				
	Other Whole Tires											
	Processed Tires											
	Processing Waste											
	Other	75	1,659		1,679	0		55				
	Total	94	3,261		3,301		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	55				
a.	Explain all inv	entory adjustn	nents.									
). 	List any penoc was that cond	in which one ition relieved?	or more categ	ory of inventory	exceeded the	permitted max	kimum for that ca	tegory. How				
-	For any exces Additional she	For any excess inventory at the end of the quarter, state how and when this condition will be relieved. Attach Additional sheets, if necessary.										
}.	Certification: To the best of my knowledge and belief, I certify the information provided in this report is true, accurate, and complete.											
	Luis G. Lope Print Nam	z ne of Authoriz	ed Agent	— —/s	ignature of Aut	hořízed Agent	<u>10-14-2</u>	013 Date				
	· · · · - w · · ·				3							



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

DEP Form # 62-701.900(21)	
Form Title: Waste Tire Processing Facility Quarterly Report	
Effective Date: January 6, 2010	· 600
DEP 10)4FGCELV	
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WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

JAN 21 2014

	Pursuant processing fac	to Rule 62-7 dity shall sub	11.530, Florida	a Administrative g information to	e Code, the o	wner or opera	ator of WAR (1981	VIKUNMENTAL KON & COMPLIAN SECTION
Qua	irter covered by	this report	4rd Quarter	2013 (First quarter be	gins on Janua	ary 1 of any giver	
1.	Facility name:	CEMEX V	/aste Tire Proc	essing Facility	1			
2.	Facility mailing	g address:	1200 N.W. 137	in Avenue				
	City: Miami	1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,	CONTRACTOR OF THE STATE OF THE	County: Flo	orida		Zip: 33182	
3.	Facility permit	number: 0	146251-WT-03	ATTENDED TO THE PERSON OF THE	December 1966560	designation of the second		
4	Facility teleph	one number	<u>605)221-76</u>	34 5	William Control of the Control of th		and the same of th	ek el sant Provincia karantaria karantaria karantaria karantaria karantaria karantaria karantaria karantaria k
5.	Authorized pe	rson preparin	g report: <u>Cl</u>	harles Walz		-	eraka baharaka barangga persangga kangga pengangga kangga pengangga pengangga pengangga pengangga pengangga pe	COLUMN A VISSO SECTION (VISSO SECTION (VISSO SECTION AND A SECTION ASSOCIATION
6.	Affiliation with	facility:	Environmenta	l Manager	· · · · · · · · · · · · · · · · · · ·			WPTO CODE WATCH STRAKE STRAKE SCHOOL WEEKEN STRAKE WATCH SCHOOL STRAKE STRAKE SCHOOL SCHOOL STRAKE STRAKE SCHOOL S
7.	Telephone nu	mber (if differ	ent from above): <u>(305</u>)	229-2955			
8.	Activity: Rep							
		Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
	Used Tires	0	1,637		1,637	V		0
	Other Whole Tires							
	Processed Tires							
	Processing Waste							
	Other	55	1,762		1,689			129
	Total	55	3,399		3,326			129
a.	Explain all inve	entory adjustn	nents.					
, b.	List any period was that condi	l in which one ition relieved?	or more categ	ory of inventory	exceeded the	permitted max	kimum for that ca	tegory. How
	For any exces Additional she	s inventory at ets, if necess	the end of the ary.	quarter, state h	ow and when t	his condition v	vill be relieved. /	Attach
9.	Certification: T and complete.		my knowledge		~ 1	ation provided	in this report is t	rue, accurate,
	Luis G. Lope			<u> </u>		pez_	<u>1-16-20</u>	
	Print Nam	e of Authoriz	ed Agent	S	ignature of Aut	horized Agent		Date



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

DEP Form#	62-701	.900(21	
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Form Title: Waste Tire Processing Facility Quarterly

Effective Date: January 6, 2010

DEP Application No.

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

Qua	irter covered by	y this report	1st Quarter 2	2014 (First quarter be	egins on Janua	ary 1 of any giver	ı year)	
1.	Facility name:	CEMEX V	laste Tire Prod	essing Facility			****		
2.	Facility mailing	g address: _1	1200 N.W. 137	th Avenue					
	City: Miami			County: Flo	orida		Zip: 33182		
3.	Facility permit	number: 0	146251-WT-03	}	Parkers and the second				
4.	Facility teleph	one number	(305)221-76	345	****				
5.	Authorized pe	rson preparin	g report: Cl	harles Walz					
6.	Affiliation with	facility:	Environmenta	l Manager					
7.	Telephone nu	mber (if differ	ent from above): <u>(305</u>)	229-2955				
8.	Activity: Rep	ort in tons							
	- William Annual Control of the Cont	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory	
	Used Tires	0	975		971			4	
	Other Whole Tires								
	Processed Tires					ilmhiddigada addos ands an			
	Processing Waste				**************************************	TO STATE OF THE ST	4	CAMPAN AND THE AND THE STREET STREET, THE STREET STREET, THE STREE	
	Other	129	2,045		1,128			1,043	
	Total	129	3,020		2,099			1,047	
a.	Explain all inv	entory adjustn	nents.						
b.	List any period was that condi	l in which one tion relieved?	or more catego	ory of inventory	exceeded the	permitted max	imum for that ca	tegory. How	
	For any excess inventory at the end of the quarter, state how and when this condition will be relieved. Attach Additional sheets, if necessary.								
9.	Luis G. Lope.	Ż			K)	- Lunione	in this report is tr 4-17-20	14	
	Print Nam	e of Authorize	ed Agent	91	gnature of Auti	horized Agent		Date	



Florida Department of **Environmental Protection**

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

DEP Form a	62-701.90	0(21
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Form Title: Waste Tire Processing Facility Quarterly

Effective Date: January 6, 2010

DEP Application No.

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

aue	iner covered by	y uns report	Ziio Quaner	<u> </u>	First quaner be	igins on Janua	iry 1 of any giver	ı year)	
1.	Facility name:	CEMEX V	/aste Tire Pro	essing Facility		·	all secretaristic and a second control of the Light		
2.	Facility mailing	g address: 1	200 N.W. 137	th Avenue	OMBONIA MANAGEMENT OF THE OWNER O	THE PROPERTY OF THE PROPERTY O	was a special and the same and	The state of the s	
	City: Miami	- TOP-		County: FI	orida		Zip: <u>33182</u>		
3,	Facility permit	number: 01	146251-WT-03	}	ىلىنى يىرىنىدىنى ئىزىدۇرى رەسىدىنىدىنىڭ ئىلىنىڭ ئىلىنىڭ ئىلىنىڭ ئىلىنىڭ ئىلىنىڭ ئىلىنىڭ ئىلىنىڭ ئىلىنىڭ ئىلىنى		Democratica (1975)	*	
4.	Facility teleph	one number	(305) 221-7	645		() person (services policy are about an all possible for a financiary operators	200	Several later and the second control of the	
5.	Authorized pe	rson preparin	g report: <u>C</u>	harles Walz		market and the second s	·····	- Who is a 7.500 to his house and was	
6.	Affiliation with	facility:	Environments	l Menager	The second secon				
7. Telephone number (if different from above): (305)229-2955									
8.	Activity: Rep	ort in tons							
		Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory	
	Used Tires	4	1,282		1,287	mornous annunomen.		0	
	Other Whole Tires		b						
	Processed Tires								
	Processing Waste								
	Othe <i>r</i>	1,043	2,446		2,368			1,098	
	Total	1,047	3,728		3,655		İ	1,098	
a.	Explain all inve	entory adjustn	nents.						
b.	List any period	I in which one	or more cated	ory of inventory	excesded the	cermitted max	imum for that ca	tegory How	
	was that condi	ition relieved?				p 4 1 2 3 1 4 4 4 4 1 7 1 4 4 4 4 4 4 4 4 4 4 4 4	(diseases the Figure form		
					231134				
For any excess inventory at the end of the quarter, state how and when this condition will be relieved. Attach Additional sheets, if necessary.								Attach	
								records 1	
						<u> </u>			
			***********			····	**************************************		
9.	Certification: T and complete.	tification: To the best of my knowledge and belief, I certify the information provided in this report is true, accurate, complete.							
	Luis G. Lope	z			S DOOG		7-9-201	4	
	Print Nam	ne of Authorize	ed Agent Ma	D) FO	CON TO THE	o ized Agent	* W* DOL W E	Date	

Northwest District 160 Government Center Pensacola, FL 32501-5794 650-595-8360

Northeast District 7825 Baymeadows Way, Ste. 200 B Jacksonville, FL 32258-7590 904-807-3300

appropriate district pffice listen helow 3319 Magure Blys. 584, 232 12051 N. Telecom Pky. Orlando, FL 32631 MIRON Minh Tarsco, FL EVALUATION & COMPLIANCE

South District 2295 Victoria Ave., Ste. 364 Fort Myers, FL 33902-2549 239-332-5975

400 North Congress Ave. West Pelm Beach, FL 33401 561-681-6500



Florida Department of **Environmental Protection**

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 DEP Form #_62-701.900(21)

Form Title: Waste Tire Processing Facility Quarterly Report

(First quarter begins on January 1 of any given year)

Effective Date: Jenusry 6, 2010

DEP Application No.

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

3rd Quarter 2014

	acility name: CEMEX Waste Tire Processing Facility							
2. Facility mailing	j address: <u>1</u>	200 N.W. 137	th Avenue					
City: Miami		County: Florida				Zip: 33182		
3. Facility permit number: 0146251-WT-03								
l. Facility telepho	one number	(305) 221-7	645					
. Authorized per	son preparing	report: <u>C</u>	harles Walz					
. Affiliation with	facility:	<u>Environmenta</u>	l Manager					
. Telephone nur	mber (if differe	ent from above): <u>(</u> 305_)	229-2955				
Activity: Repo	Beginning	Received	Processed	Consumed	Removed	Adjustments	Ending	
Used Tires	Inventory 0	785		714			Inventory 71	
Other Whole Tires								
Processed Tires							40.00	
Processing Waste								
Other	1,098	2,319		2,011			1,399	
Total	1,098	3,104		2,725			1,470	
List any period	in which one	or more categ	ary of inventory	exceeded the	permitted max	dmum for that ca	tegory. How	
was that condi	tion relieved?							

Northwest District 160 Government Center Pensacola, FL 32501-5794

Appropriate District office listed below ENVIRONMENTAL Southwast District Office listed below Norther Type Apple Communication of the ENVIRONMENTAL Southwast District 13051 N. Telecom 13051 N. Telecom 1407-894-7555 813-632-7500

13051 N Telecom Pky. Temple Terrace, FL 813-632-7600

South District 2295 Victoria Ave., Ste. 364 Fort Myers, FL 33902-2549 239-332-6975

Southeast District 400 North Congress Ave. West Palm Beach, FL 33401 561-681-6600



Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 DEP Form #_62-701,900(21)

Form Title: Waste Tire Processing Facility Quarterly

Repor

Effective Date: January 6, 2010

DEP Application No

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire processing facility shall submit the following information to the Department quarterly.

Quarter covered by	this report	4th Quarter	2014 (First quarter be	egins on Janua	ary 1 of any giver	year)
1. Facility name:	CEMEX W	aste Tire Prod	cessing Facility		<u>-</u>		
2. Facility mailing	g address: 1	200 N.W. 137	th Avenue			*****	, ,
City: Miami			County: Flo	orida		Zip: <u>33182</u>	
3. Facility permit	number: 01	46251-WT-06	3.				
4. Facility teleph	one number	(305) 221-7	645				
5. Authorized pe	rson preparing	report: C	haries Walz				
6. Affiliation with	facility:	Environmenta	l Manager				
7. Telephone nui	mber (if differe	ent from above); (305)	229-2955			
8. Activity: Repo	ort in tons				****		
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	71	1,081		1,257			26
Other Whole Tires							
Processed Tires							
Processing Waste							
Other	1,399	1,142		2,512	***		57
Total	1,470	2,223		3,769			83
a. Explain all inve	I in which one	or more categ	ory of inventory	exceeded the	permitted max	dimum for that ca	tegory. How
For any excess Additional she Certification: T and complete. Luis G. Lope.	ets, if necessa	IFY.					rue, accurate
	e of Authorize	d Agent		onature of Aut	horizod Agont	<u>1-15-20</u>	Date Date