



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. _____ (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 covered by this report 2015 (First quarter begins on January 1 of any given year)

1. Facility name: Garden Street Iron + Metal Inc.
2. Facility mailing address: 3350 Old Metro Pkwy
City: Ft Myers County: Lee Zip: 33916
3. Facility permit number: 98386
4. Facility telephone number: (239) 337-5865
5. Authorized person preparing report: John Hoving
6. Affiliation with facility: ops mang.
7. Telephone number (if different from above): ()
8. Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires							
Other whole Tires		<u>746.26</u>	<u>746.26</u>				
Processed tires							
Processing Waste							
Other							
Total			<u>746.26</u>				

- a. Explain all inventory adjustments. _____
- b. 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.

9. Certification:

To the best of my knowledge and belief, I certify the information provided in this report is true, accurate, and complete.

John Hoving
Print Name of Authorized Agent

John Hoving
Signature of Authorized Agent

7-8-15
Date

Mail completed form to
the appropriate District office
listed below

Northwest District
160 Government Center
Pensacola, FL 32501-5794
850-595-8360

Northeast District
7825 Baymeadows Way, Ste. 200 B
Jacksonville, FL 32256-7590
904-807-3300

Central District
3319 Maguire Blvd., Ste. 232
Orlando, FL 32803-3767
407-894-7555

Southwest District
13051 N. Telecom Pky.
Tempe 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



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- Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires							
Other whole Tires		<u>589.62</u>	<u>589.62</u>				
Processed tires							
Processing Waste							
Other							
Total			<u>589.62</u>				

- Explain all inventory adjustments. _____
- 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.

9. Certification:

To the best of my knowledge and belief, I certify the information provided in this report is true, accurate, and complete.

John Hoving
Print Name of Authorized Agent

John Hoving
Signature of Authorized Agent

10-2-15
Date

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the appropriate District office
listed below

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160 Government Center
Pensacola, FL 32501-5794
850-595-8360

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8. Activity: Report in tons

	Beginning Inventory	Received	Process ed	Consumed	Removed	Adjustment s	Ending Inventory
Used Tires							
Other whole Tires		<u>954.22</u>	<u>954.22</u>				
Processed tires							
Processing Waste							
Other							
Total			<u>954.22</u>				

- a. Explain all inventory adjustments. _____
- b. 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.

9. Certification:

To the best of my knowledge and belief, I certify the information provided in this report is true, accurate, and complete.

John Hoving
Print Name of Authorized Agent

John Hoving
Signature of Authorized Agent

1-5-16
Date

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the appropriate District office
listed below

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160 Government Center
Pensacola, FL 32501-5794
850-595-8360

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