## Board of County Commissioners DEPARTMENT OF PUBLIC WORKS SOLID WASTE MANAGEMENT DIVISION

P.O. Box 340, Lecanto, Florida 34460
Telephone: (352) 527-7670 FAX: (352) 527-7672
email: landfillinfo@bocc.citrus.fl.us
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April 4, 2016, 2016

Mr. Steve Morgan Department of Environmental Protection 13051 N Telecom Parkway Temple Terrace, Florida 33637-0926

Re: Quarterly Waste Tire Report – 1<sup>st</sup> Quarter 2016

Dear Steve,

Pursuant to Rule 62-711.530, Florida Administrative Code, enclosed is the Quarterly Waste Tire Report for the months of January, February and March, 2016, for the Citrus County Central Waste Tire Facility.

If you have any questions, please let me know.

Sincerely

Henry C. Norris, Jr., Director

Division of Solid Waste Management

cc: File



## Florida Department of Environmental Protection

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

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Print Form

DEP Form # 62-701.900(21)

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.

. Facility name:	Citrus Cou			•	ogino on bando	ary 1 of any giver	i year)		
2. Facility mailing									
City: Lecanto		County: Ci	trus		Zip: 34460				
Facility permit number: 126602-004-									
. Facility teleph	one number				-				
Authorized pe	rson preparing	g report: He	enry C. Norris,	Jr		***			
Affiliation with	facility:	Director							
Telephone nu	mber (if differe	ent from above	): (	)					
Activity: Rep	ort in tons						-		
<u></u>	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory		
Used Tires	35	129.94	0	0	139.94	0	25		
Other Whole Tires	0	0	0	0	0	0	0		
Processed Tires	0	0	0	0	0	0	0		
Processing Waste	0	0	0	0	0	0	0		
Other	0	0	0	0	0	0	0		
Total	35	129.94	0	0	139.94	0	25		
Explain all inventa	entory adjustn	nents.							
List any period was that cond n/a			ory of inventory	exceeded the	permitted max	kimum for that ca	tegory. Hov		
For any exces Additional she n/a			quarter, state h	now and when t	this condition v	vill be relieved. A	Attach		
and complete.  Henry C. No.		etor		Set	thorized Agent	in this report is t	rue, accurat		