

Florida Department of Environmental Protection

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

Carlos Lopez-Cantera Lt. Governor

> Noah Valenstein Secretary

Source-Separated Organics Processing Facility Registration

Confirmation of Submission

06/29/2018

Waste Registration Section

WEST PASCO COUNTY CLASS III

PASCO COUNTY RESOURCE RECOVERY

14230 Hays Rd Spring Hill, FL 34610 7630

Dear WEST PASCO COUNTY CLASS III

Your application for Registration of a Source-Separated Organics Processing Facility (SOPF) for PASCO COUNTY RESOURCE RECOVERY (located at 14230 Hays Rd, Spring Hill) in Pasco County is complete. Your facility identification number (WACS ID) is 45799. This registration is valid until August 1, 2019. The receipt number for the registration fee you paid is 975943

You must comply with the requirements specified in Chapter 62-709, Florida Administrative Code (F.A.C.) in order to maintain qualification for the registration program. A summary of the operating requirements is attached.

If you have any questions or need further assistance, please contact Waste Registration Section at (850) 245-8707 or by e-mail at Waste.Registration@dep.state.fl.us.

Please retain a copy of this confirmation for your records.

Sincerely,

Waste Registration Section

cc: Melissa Madden, Steven Tafuni; Southwest District, Southwest District



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 - Fahrumu 15, 2010					
Effective Date February 15, 2010					
45799					
(Fills discharped)					
(Filled in by DEP) 45799					
10100					
(Filled in by DEP)					
by reference in subsection 62-					

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	on: New 🔲 Rene	wal (due July 1) 🔽 Annual report only for facility op	perating	g under pe	rmit: 🔲		
2.		Yard trash recycling Yard trash transfer station	✓ Manure bl Vegetative, animal byproducts or manure comp					
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: PASCO COUNTY RESOURCE RECOVERY							
5.	5. Registrant Name (or Permittee if annual report only): PASCO COUNTY RESOURCE RECOVERY							
6.	Federal Employer	r Identification Number:	596000793					
7.	Mailing Address:	14230 Hays Rd						
	City Spring Hill		State FL Z	Zip 3	34610 7630			
	Street Mailing Ad	dress (if different):						
	City		State 2	Zip				
8	-	- Street Address or Propert	14230 Have Rd	. –				
Ο.	City Spring Hill		County					
0		JOHN POWER	(727) 856 0110					
9.	Contact Person:		Telephone: (727) 636-0119					
PART B - ADDITIONAL INFORMATION REQUIRED FOR REGISTRATION APPLICATION								
10.	Records required	by Rule 62-709.320, F.A.0	C., will be kept at the facility?	Ē	✓ No			
	If no, please indicate where these records will be kept and made available upon Department request to review the records:							
11.	Does the registra	nt own the facility site?	Yes	<u>[</u>	<u>✓</u> No			
	•		ce that the facility owner or operator has permission f solid waste organics recycling facility at this site.	rom the	e landowr	ner to		
12			solid waste organics recycling facility at this site.	r	☑ No			
12.	rias tile organic i	acticling tacility baguin and	rations?					
	If this facility wa	ecycling facility begun ope						
10	-	as operating in the previo	us calendar year, the annual report in Part C must be	comple	eted.			
13.	include a check o	as operating in the previo		comple	eted.			
spe	Include a check of Protection. Paymed I affirm that I ecified in those rule	as operating in the previous or money order for the \$35. ent of \$35.00 for this registed have read Rules 62-709.3 es. I also affirm that the inf	us calendar year, the annual report in Part C must be	comple nt of Er	eted. nvironmeni ne requiren	tal		
spe kno	Include a check of Protection. Paymed I affirm that I ecified in those rule	or money order for the \$35. ent of \$35.00 for this registration in the previous formal for the same of	us calendar year, the annual report in Part C must be a consistent on fee made payable to the Florida Departmentation was received via online transaction. 20, 62-709.330 and 62-709.350, F.A.C., and shall comply formation provided in the application is true, accurate, and	comple nt of Er	eted. nvironmeni ne requiren	nents st of my		
spe kno	Include a check of Protection. Paymed I affirm that I ecified in those rule owledge. I have attended to the Chamberlain, According to the chamberlain to the c	or money order for the \$35. ent of \$35.00 for this registration in the previous formal for the same of	us calendar year, the annual report in Part C must be a consideration fee made payable to the Florida Departmentation was received via online transaction. 20, 62-709.330 and 62-709.350, F.A.C., and shall comply ormation provided in the application is true, accurate, and or authorizations that are required. Joanne Chamberlain Joanne Chamberlain Signature	comple nt of Er	nvironment ne requiren t to the bes	nents st of my		

PART C - ANNUAL REPORT							
14.	Calendar Year (January 1 through December 31) Covered by the	nis Report:					
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	: 80					
	b. Processed Material On Site at Beginning of Report Year (to	otal): 0					
17.	7. Total Quantity of Material Received During Report Year:						
18.	8. Total Quantity of Material Lost Due to Processing (e.g. grinding, drying, shrinkage, fires, etc.) During Report Year:						
19.	Total Quantity of Material Removed from Site for:						
	a. Use (e.g., landfill cover, fuel, mulch, compost, etc.):	2966.00					
	b. Disposal:	0					
	c. Other (transfer stations)	0					
20.	. Total Quantity On Site at End of Report Year of:						
	a. Unprocessed Material:	0					
	b. Processed Material:	100.00					
Note that the total sum of items 16 a and b plus 17 must equal to sum of items 18, plus 19 a, b and c, plus 20 a and b. Total of items 16 and 17 3066.00 Total of Items 18, 19 and 20 3066.00							
	I affirm that the information provided in the annual report is true, accurate, and correct to the best of my knowledge.						
Joanne Chamberlain, Accountant II		ne Chamberlain 06/29/2018					
Print Name and Title of Registrant/Permittee or Authorized Agent		Signature Date					
Email	address (if available): jchamberlain@pascocountyfl.net						

PART D - MAILING INSTRUCTIONS

This registration was completed and payment of \$35.00 (if applicable) was received via online transaction.

Remember to include the \$35.00 fee if this is also a registration application. Mail completed form to:

Department of Environmental Protection Solid Waste Section, MS 4565 2600 Blair Stone Road Tallahassee, Florida 32399-2400

