



Florida Department of Environmental Protection

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

DEP Form # 62-701.900(28), F.A.C.
Form Title: Closure Cost Estimating Form
For Solid Waste Facilities
Effective Date: January 6, 2010
Incorporated in Rule 62-701.630(3), F.A.C.

CLOSURE COST ESTIMATING FORM FOR SOLID WASTE FACILITIES

Date of DEP Approval: _____

I. GENERAL INFORMATION:

Facility Name: Friends Recycling, LLC WACS ID: 21012
 Permit Application or Consent Order No.: 0019600-008-SO-24 Expiration Date: 07/26/2013
 Facility Address: 2350 NW 27th Avenue, Ocala, Florida 34475
 Permittee or Owner/Operator: Friends Recycling, LLC
 Mailing Address: 2350 NW 27th Avenue, Ocala, Florida 34475

Latitude: 29° 12' 42.02" Longitude: 82° 10' 07.01"
 Coordinate Method: Digital Aerial Photograp Datum: NAD83
 Collected by: Juan C Guerra Company/Affiliation: Guerra Development Corp.

Solid Waste Disposal Units Included in Estimate:

Phase / Cell	Acres	Date Unit Began Accepting Waste	Active Life of Unit From Date of Initial Receipt of Waste	If active: Remaining life of unit	If closed: Date last waste received	If closed: Official date of closing
Cell 1A	14.1	1980	30 yrs	6 yrs	n/a	n/a
Cell 1B	0.4	2005	5 yrs	2 yrs	n/a	n/a
Cell 2A	7.0	2005	6 yrs	8 yrs	n/a	n/a
Cell 2B	4.4	2005	6 yrs	11 yrs	n/a	n/a
Cell 2C	0.9	2005	6 yrs	11 yrs	n/a	n/a

Total disposal unit acreage included in this estimate: Closure: 26.8 Long-Term Care: 26.8

Facility type: Class I Class III C&D Debris Disposal
 (Check all that apply) Other: _____

II. TYPE OF FINANCIAL ASSURANCE DOCUMENT (Check type)

- Letter of Credit* Insurance Certificate Escrow Account
 Performance Bond* Financial Test Form 29 (FA Deferral)
 Guarantee Bond* Trust Fund Agreement

* - Indicates mechanisms that require the use of a Standby Trust Fund Agreement

Northwest District
160 Government Center
Pensacola, FL 32502-5794
850-595-8360

Northeast District
7825 Baymeadows Way, Ste. B200
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.
Temple Terrace, FL 33637
813-632-7600

South District
2295 Victoria Ave., Ste. 364
Fort Myers, FL 33901-3881
239-332-6975

Southeast District
400 N. Congress Ave., Ste. 200
West Palm Beach, FL 33401
561-681-6600

III. ESTIMATE ADJUSTMENT

40 CFR Part 264 Subpart H as adopted by reference in Rule 62-701.630, Florida Administrative Code, (F.A.C.) sets forth the method of annual cost estimate adjustment. Cost estimates may be adjusted by using an inflation factor or by recalculating the maximum costs of closure in current dollars. Select one of the methods of cost estimate adjustment below.

(a) Inflation Factor Adjustment

(b) Recalculated or New Cost Estimates

Inflation adjustment using an inflation factor may only be made when a Department approved closure cost estimate exists and no changes have occurred in the facility operation which would necessitate modification to the closure plan. The inflation factor is derived from the most recent Implicit Price Deflator for Gross National Product published by the U.S. Department of Commerce in its survey of Current Business. The inflation factor is the result of dividing the latest published annual Deflator by the Deflator for the previous year. The inflation factor may also be obtained from the Solid Waste website www.dep.state.fl.us/waste/categories/swfr or call the Financial Coordinator at (850) 245-8706.

This adjustment is based on the Department approved closing cost estimate dated: N/A

Latest Department Approved Closing Cost Estimate:	x	Current Year Inflation Factor, e.g. 1.02	=	Inflation Adjusted Closing Cost Estimate:
_____		_____		_____

This adjustment is based on the Department approved long-term care cost estimate dated: N/A

Latest Department Approved Annual Long-Term Care Cost Estimate:	x	Current Year Inflation Factor, e.g. 1.02	=	Inflation Adjusted Annual Long-Term Care Cost Estimate:
_____		_____		_____
Number of Years of Long Term Care Remaining:			x	_____
Inflation Adjusted Long-Term Care Cost Estimate:			=	_____

Signature by: <input type="checkbox"/> Owner/Operator <input checked="" type="checkbox"/> Engineer (check what applies)	
_____ Signature	_____ Address
_____ Juan C. Guerra, P.E., President Name & Title	_____ Ocala, Florida 34470 City, State, Zip Code
_____ June 10, 2018 Date	_____ gdc@guerracorp.net E-Mail Address
_____ (352) 629-8060 Telephone Number	

IV. ESTIMATED CLOSING COST (check what applies)

Recalculated Cost Estimate **New Facility Cost Estimate**

- Notes: 1. Cost estimates for the time period when the extent and manner of landfill operation makes closing most exp
 2. Cost estimate must be certified by a professional engineer.
 3. Cost estimates based on third party suppliers of material, equipment and labor at fair market value.
 4. In some cases, a price quote in support of individual item estimates may be required.

Description	Unit	Number of Units	Cost / Unit	Total Cost
1. Proposed Monitoring Wells (Do not include wells already in existence.)				
	EA	_____	_____	_____
			Subtotal Proposed Monitoring Wells:	_____
2. Slope and Fill (bedding layer between waste and barrier layer):				
Excavation	CY	_____	_____	_____
Placement and Spreading	CY	_____	_____	_____
Compaction	CY	_____	_____	_____
Off-Site Material	CY	_____	_____	_____
Delivery	CY	_____	_____	_____
			Subtotal Slope and Fill:	_____
3. Cover Material (Barrier Layer):				
Off-Site Clay	CY	_____	_____	_____
Synthetics - 40 mil	SY	_____	_____	_____
Synthetics - GCL	SY	_____	_____	_____
Synthetics - Geonet	SY	_____	_____	_____
Synthetics - Other (explain) _____	_____	_____	_____	_____
			Subtotal Cover Material:	_____
4. Top Soil Cover:				
Off-Site Material	CY	86,356	\$2.65	\$228,843.40
Delivery	CY	86,356	\$2.50	\$215,890.00
Spread	CY	86,356	\$0.85	\$73,402.60
			Subtotal Top Soil Cover:	\$518,136.00
5. Vegetative Layer				
Sodding	SY	101,958	\$2.75	\$280,384.50
Hydroseeding	AC	12	\$2,500.00	\$30,000.00
Fertilizer	AC	12	\$1,350.00	\$16,200.00
Mulch	AC	_____	_____	_____
Other (explain) _____	_____	_____	_____	_____
			Subtotal Vegetative Layer:	\$326,584.50
6. Stormwater Control System:				
Earthwork	CY	_____	_____	_____
Grading	SY	_____	_____	_____
Piping	LF	2,020	\$28.30	\$57,166.00
Ditches	LF	4,470	\$8.25	\$36,877.50
Berms	LF	_____	_____	_____
Control Structures	EA	21	\$1,750.00	\$36,750.00
Other (explain) _____	_____	_____	_____	_____
			Subtotal Stormwater Control System:	\$130,793.50

Description	Unit	Number of Units	Cost / Unit	Total Cost
7. Passive Gas Control:				
Wells	EA	_____	_____	_____
Pipe and Fittings	LF	_____	_____	_____
Monitoring Probes	EA	_____	_____	_____
NSPS/Title V requirements	LS	1	_____	_____
Subtotal Passive Gas Control:				_____
8. Active Gas Extraction Control:				
Traps	EA	_____	_____	_____
Sumps	EA	_____	_____	_____
Flare Assembly	EA	_____	_____	_____
Flame Arrestor	EA	_____	_____	_____
Mist Eliminator	EA	_____	_____	_____
Flow Meter	EA	_____	_____	_____
Blowers	EA	_____	_____	_____
Collection System	LF	_____	_____	_____
Other (explain) _____	_____	_____	_____	_____
Subtotal Active Gas Extraction Control:				_____
9. Security System:				
Fencing	LF	400	\$14.80	\$5,920.00
Gate(s)	EA	_____	_____	_____
Sign(s)	EA	_____	_____	_____
Subtotal Security System:				\$5,920.00
10. Engineering:				
Closure Plan Report	LS	1	\$10,500.00	\$10,500.00
Certified Engineering Drawings	LS	1	\$8,500.00	\$8,500.00
NSPS/Title V Air Permit	LS	1	\$0.00	_____
Final Survey	LS	1	\$8,500.00	\$8,500.00
Certification of Closure	LS	1	\$2,500.00	\$2,500.00
Other (explain) _____	_____	_____	_____	_____
Subtotal Engineering:				\$30,000.00

Description	Hours	Cost / Hour	Hours	Cost / Hour	Total Cost
11. Professional Services					
	<u>Contract Management</u>		<u>Quality Assurance</u>		
P.E. Supervisor	16	\$175.00	8	\$125.00	\$3,800.00
On-Site Engineer	40	\$125.00	4	\$120.00	\$5,480.00
Office Engineer	24	\$125.00	4	\$120.00	\$3,480.00
On-Site Technician	16	\$75.00	16	\$75.00	\$2,400.00
Other (explain) _____	_____	_____	_____	_____	_____

Description	Unit	Number of Units	Cost / Unit	Total Cost
Quality Assurance Testing	LS	1	\$10,500.00	\$10,500.00
Subtotal Professional Services:				\$25,660.00

V. ANNUAL COST FOR LONG-TERM CARE

See 62-701.600(1)a.1., 62-701.620(1), 62-701.630(3)a. and 62-701.730(11)b. F.A.C. for required term length. For landfills certified closed and Department accepted, enter the remaining long-term care length as "Other" and provide years remaining. (Check Term Length) 5 Years 20 Years 30 Years Other, ___ Years

- Notes: 1. Cost estimates must be certified by a professional engineer.
 2. Cost estimates based on third party suppliers of material, equipment and labor at fair market value.
 3. In some cases, a price quote in support of individual item estimates may be required.

All items must be addressed. Attach a detailed explanation for all entries left blank.

Description	Sampling Frequency (Events / Year)	Number of Wells	(Cost / Well) / Event	Annual Cost
1. Groundwater Monitoring [62-701.510(6), and (8)(a)]				
Monthly	12	_____	_____	_____
Quarterly	4	_____	_____	_____
Semi-Annually	2	8	\$475.00	\$7,600.00
Annually	1	_____	_____	_____
Subtotal Groundwater Monitoring:				\$7,600.00
2. Surface Water Monitoring [62-701.510(4), and (8)(b)]				
Monthly	12	_____	_____	_____
Quarterly	4	_____	_____	_____
Semi-Annually	2	_____	_____	_____
Annually	1	_____	_____	_____
Subtotal Surface Water Monitoring:				_____
3. Gas Monitoring [62-701.400(10)]				
Monthly	12	_____	_____	_____
Quarterly	4	4	\$475.00	\$7,600.00
Semi-Annually	2	_____	_____	_____
Annually	1	_____	_____	_____
Subtotal Gas Monitoring:				\$7,600.00
4. Leachate Monitoring [62-701.510(5), (6)(b) and 62-701.510(8)c]				
Monthly	12	_____	_____	_____
Quarterly	4	_____	_____	_____
Semi-Annually	2	_____	_____	_____
Annually	1	_____	_____	_____
Other (explain) _____	_____	_____	_____	_____
Subtotal Leachate Monitoring:				_____

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
5. Leachate Collection/Treatment Systems Maintenance				
<u>Maintenance</u>				
Collection Pipes	LF	_____	_____	_____
Sumps, Traps	EA	_____	_____	_____
Lift Stations	EA	_____	_____	_____
Cleaning	LS	1	_____	_____
Tanks	EA	_____	_____	_____

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
5. (continued)				
<u>Impoundments</u>				
Liner Repair	SY	_____	_____	_____
Sludge Removal	CY	_____	_____	_____
<u>Aeration Systems</u>				
Floating Aerators	EA	_____	_____	_____
Spray Aerators	EA	_____	_____	_____
<u>Disposal</u>				
Off-site (Includes transportation and disposal)	1000 gallon	_____	_____	_____
Subtotal Leachate Collection / Treatment Systems Maintenance:				_____
6. Groundwater Monitoring Well Maintenance				
Monitoring Wells	LF	<u>8</u>	<u>\$250.00</u>	<u>\$2,000.00</u>
Replacement	EA	<u>0.5</u>	<u>\$3,500.00</u>	<u>\$1,750.00</u>
Abandonment	EA	<u>0.5</u>	<u>\$850.00</u>	<u>\$425.00</u>
Subtotal Groundwater Monitoring Well Maintenance:				<u>\$4,175.00</u>
7. Gas System Maintenance				
Piping, Vents	LF	<u>220</u>	<u>\$25.00</u>	<u>\$5,500.00</u>
Blowers	EA	_____	_____	_____
Flaring Units	EA	_____	_____	_____
Meters, Valves	EA	_____	_____	_____
Compressors	EA	_____	_____	_____
Flame Arrestors	EA	_____	_____	_____
Operation	LS	<u>1</u>	<u>\$3,500.00</u>	<u>\$3,500.00</u>
Subtotal Gas System Maintenance:				<u>\$9,000.00</u>
8. Landscape Maintenance				
Mowing	AC	<u>35</u>	<u>\$350.00</u>	<u>\$12,250.00</u>
Fertilizer	AC	<u>20</u>	<u>\$150.00</u>	<u>\$3,000.00</u>
Subtotal Landscape Maintenance:				<u>\$15,250.00</u>
9. Erosion Control and Cover Maintenance				
Sodding	SY	<u>1,000</u>	<u>\$2.95</u>	<u>\$2,950.00</u>
Regrading	AC	<u>5</u>	<u>\$1,500.00</u>	<u>\$7,500.00</u>
Liner Repair	SY	_____	_____	_____
Clay	CY	<u>400</u>	<u>\$8.60</u>	<u>\$3,440.00</u>
Subtotal Erosion Control and Cover Maintenance:				<u>\$13,890.00</u>
10. Storm Water Management System Maintenance				
Conveyance Maintenance	LS	<u>1</u>	<u>\$10,500.00</u>	<u>\$10,500.00</u>
Subtotal Storm Water Management System Maintenance:				<u>\$10,500.00</u>
11. Security System Maintenance				
Fences	LS	<u>1</u>	<u>\$2,500.00</u>	<u>\$2,500.00</u>
Gate(s)	EA	<u>1</u>	<u>\$100.00</u>	<u>\$100.00</u>
Sign(s)	EA	<u>1</u>	<u>\$100.00</u>	<u>\$100.00</u>
Subtotal Security System Maintenance:				<u>\$2,700.00</u>

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
12. Utilities	LS	<u>1</u>	<u>\$500.00</u>	<u>\$500.00</u>
			Subtotal Utilities:	<u>\$500.00</u>
13. Leachate Collection/Treatment Systems Operation				
<u>Operation</u>				
P.E. Supervisor	HR	<u> </u>	<u> </u>	<u> </u>
On-Site Engineer	HR	<u> </u>	<u> </u>	<u> </u>
Office Engineer	HR	<u> </u>	<u> </u>	<u> </u>
OnSite Technician	HR	<u> </u>	<u> </u>	<u> </u>
Materials	LS	<u>1</u>	<u> </u>	<u> </u>
			Subtotal Leachate Collection/Treatment Systems Operation:	<u> </u>
14. Administrative				
P.E. Supervisor	HR	<u>6</u>	<u>\$175.00</u>	<u>\$1,050.00</u>
On-Site Engineer	HR	<u>10</u>	<u>\$125.00</u>	<u>\$1,250.00</u>
Office Engineer	HR	<u>20</u>	<u>\$125.00</u>	<u>\$2,500.00</u>
OnSite Technician	HR	<u>20</u>	<u>\$85.00</u>	<u>\$1,700.00</u>
Other <u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
			Subtotal Administrative:	<u>\$6,500.00</u>
			Subtotal of 1-14 Above:	<u>\$77,715.00</u>
15. Contingency	<u>10</u>	% of Subtotal of 1-14 Above		<u>\$7,771.50</u>
			Subtotal Contingency:	<u>\$7,771.50</u>

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
16. Site Specific Costs				
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
			Subtotal Site Specific Costs:	<u> </u>


ANNUAL LONG-TERM CARE COST (\$ / YEAR): \$85,486.50

Number of Years of Long-Term Care: 5

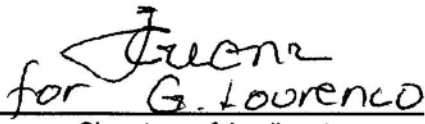
TOTAL LONG-TERM CARE COST (\$): \$427,432.50

VI. CERTIFICATION BY ENGINEER

This is to certify that the Cost Estimates pertaining to the engineering features of this solid waste management facility have been examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgment, the Cost Estimates are a true, correct and complete representation of the financial liabilities for closing and/or long-term care of the facility and comply with the requirements of Rule 62-701.630 F.A.C. and all other Department of Environmental Protection rules, and statutes of the State of Florida. It is understood that the Cost Estimates shall be submitted to the Department annually, revised or adjusted as required by Rule 62-701.630(4), F.A.C.

 _____ Signature	_____ 2817 NE 3rd Street Mailing Address
_____ Juan C. Guerra, P.E., President Name and Title (please type)	_____ Ocala, Florida, 34470 City, State, Zip Code
_____ June 10, 2018 Date	_____ guerracorp@att.net E-Mail address (if available)
_____ 0041000 Florida Registration Number (please affix seal)	_____ (352) 629-8060 Telephone Number

VII. SIGNATURE BY OWNER/OPERATOR

 _____ Signature of Applicant	_____ 2350 NW 27th Avenue Mailing Address
_____ Gerald Lourenco, Operating Manager Name and Title (please type)	_____ Ocala, Florida 34475 City, State, Zip Code
_____ aws97@aol.com E-Mail address (if available)	_____ (352) 266-9497 Telephone Number