

Florida Department of Environmental Protection

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

DEP Form # <u>6</u> 2-701.900(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

arter covered by	this report	(First quarter begins on January 1 of any given year)								
. Facility name:	-									
. Facility mailing	g address: _									
City:		County:			Zip:					
. Facility permit	number:									
. Facility teleph	acility telephone number ()									
	Authorized person preparing report:									
Affiliation with facility:										
Telephone nu	Telephone number (if different from above): ()									
Activity: Rep	ort in tons									
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory			
Used Tires										
Other Whole Tires										
Processed Tires										
Processing Waste										
Other										
Total										
Explain all inv	entory adjustm	nents.								
List any period was that cond	imum for that ca	tegory. How								
For any exces Additional she			quarter, state h	now and when	this condition v	vill be relieved. A	Attach			
Certification: and complete.		my knowledge	and belief, I cer	tify the informa	tion provided i	n this report is tr	ue, accurate			