

From: [Ramirez, Javier](#)
To: [Ramirez, Javier](#)
Subject: FW: 307_18_07 and 12 CEMEX Brooksville South AFM RAI Response and WTP Modification
Date: Wednesday, November 21, 2018 9:11:11 AM
Attachments: [307_18_07_RAI_ResponsePkg_2018_11_16.pdf](#)
[307_18_12_WTP_MinorModPkg_2018_11_16.pdf](#)
[Cemex South Cement Plant WTPF WT-MM 11-16-18.docx](#)

From: Tammy Garcia [<mailto:tgarcia@kooglerassociates.com>]
Sent: Friday, November 16, 2018 3:37 PM
To: Morgan, Steve <Steve.Morgan@FloridaDEP.gov>
Cc: Wargo, Emily <Emily.Wargo@FloridaDEP.gov>; Robin G Simons (robing.simons@cemex.com)
<robing.simons@cemex.com>; Brent C Steele (brentc.steele@cemex.com)
<brentc.steele@cemex.com>; Dr. Max Lee <mlee@kooglerassociates.com>
Subject: RE: 307_18_07 and 12 CEMEX Brooksville South AFM RAI Response and WTP Modification

Steve,

Please find attached an electronic copy of our response to the CEMEX Brooksville South RAI for the AFM SW Permit Renewal, DEP Application No. 22787-006-SO/31 and the minor modification request for the Waste Tire Processing Permit 22787-005-WT addressing the move in location of the outside storage of trailers. A hard copy of each is being sent via USPS Priority along with the \$250 application fee for the WTP modification.

If you have any questions, please contact me.

Thank you,
Tammy

Tammy L. Garcia
Environmental Scientist II
Koogler and Associates, Inc.
www.kooglerassociates.com
Mail: PO Box 5127 |Gainesville, FL 32627-5127
Physical: 4014 NW 13th Street |Gainesville, FL 32609
Office: 352 377 5822 x27 |Direct: 352 792 1104
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tgarcia@kooglerassociates.com

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From: Wargo, Emily <Emily.Wargo@FloridaDEP.gov>
Sent: Monday, October 29, 2018 4:52 PM
To: Tammy Garcia <tgarcia@kooglerassociates.com>

Cc: Morgan, Steve <Steve.Morgan@FloridaDEP.gov>

Subject: RE: 307_18_XX CEMEX Brooksville South WT Processing Permit

Hi Tammy,

I spoke with Steve, and to change the storage location of the trailers we would need to see updated site and operation plans that include the new storage area. It would be considered a minor modification to the permit that you would need to submit an application for with a \$250 fee.

Please let me know if you have any questions.

Regards,

Emily



Emily Wargo

Florida Department of Environmental Protection

Southwest District

Engineering Specialist II

Emily.Wargo@FloridaDEP.gov

Office: 813-470-5942

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Please consider the environment before printing this email.

From: Tammy Garcia [<mailto:tgarcia@kooglerassociates.com>]

Sent: Wednesday, October 24, 2018 1:57 PM

To: Morgan, Steve <Steve.Morgan@FloridaDEP.gov>

Subject: 307_18_XX CEMEX Brooksville South WT Processing Permit

Hi Steve,

What would the Department want submitted to change the storage location of trailers for tires from one area to another for the attached permit for CEMEX Brooksville South? No change in quantities or anything else, just a change in location of trailers for storage. And what would the Department issue - a modified permit?

Thank you,

Tammy

Tammy L. Garcia

Environmental Scientist II

Koogler and Associates, Inc.

www.kooglerassociates.com

Mail: PO Box 5127 |Gainesville, FL 32627-5127
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tgarcia@kooglerassociates.com

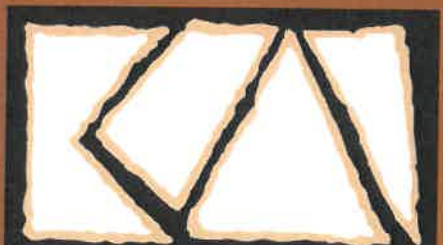
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COST
ESTIMATE
FORM



KOOGLER & ASSOCIATES, INC.
ENVIRONMENTAL SERVICES



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: CEMEX Brooksville South Cement Plant WACS ID: _____
 Permit Application or Consent Order No.: 40778 Expiration Date: _____
 Facility Address: 10311 Cement Plant Road; Brooksville, FL 34601
 Permittee or Owner/Operator: CEMEX Construction Materials Florida, LLC
 Mailing Address: 10311 Cement Plant Road; Brooksville, FL 34601

Latitude: 28° 34' 54" Longitude: 82° 25' 56"
 Coordinate Method: Degrees/Minutes/Sec Datum: NAD83 (assumed)
 Collected by: Unknown/From Original Form Company/Affiliation: N/A

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
N/A	N/A	N/A	N/A	N/A	N/A	N/A

Total disposal unit acreage included in this estimate: _____ Closure: N/A Long-Term Care: N/A

Facility type: ☐ Class I ☐ Class III ☐ C&D Debris Disposal
 (Check all that apply) ☐ Other: N/A

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
561-681-6800

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:

To Be Approved

Latest Department Approved
Closing Cost Estimate:

Current Year Inflation
Factor, e.g. 1.02

Inflation Adjusted Closing
Cost Estimate:

x

=

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:

Current Year Inflation
Factor, e.g. 1.02

Inflation Adjusted Annual
Long-Term Care Cost
Estimate:

x

=

Number of Years of Long Term Care Remaining:

x

Inflation Adjusted Long-Term Care Cost Estimate:

=

Signature by: ☐ Owner/Operator

☒ Engineer

(check what applies)

Signature

P.O. Box 5127

Address

Maxwell R. Lee, Ph.D., P.E.

Name & Title

Gainesville, FL 32627-5127

City, State, Zip Code

Date

mlee@kooglerassociates.com

E-Mail Address

352-377-5822

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			
Delivery	CY			
Spread	CY			
Subtotal Top Soil Cover:				
5. Vegetative Layer				
Sodding	SY			
Hydroseeding	AC			
Fertilizer	AC			
Mulch	AC			
Other (explain)				
Subtotal Vegetative Layer:				
6. Stormwater Control System:				
Earthwork	CY			
Grading	SY	1	\$770.00	\$770.00
Piping	LF			
Ditches	LF			
Berms	LF			
Control Structures	EA			
Other (explain)				
Subtotal Stormwater Control System:				\$770.00

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	\$0.00	_____
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	_____	_____	_____
Gate(s)	EA	_____	_____	_____
Sign(s)	EA	_____	_____	_____
Subtotal Security System:				_____
10. Engineering:				
Closure Plan Report	LS	1	\$0.00	_____
Certified Engineering Drawings	LS	1	\$0.00	_____
NSPS/Title V Air Permit	LS	1	\$0.00	_____
Final Survey	LS	1	\$0.00	_____
Certification of Closure	LS	1	\$0.00	_____
Other (explain) Disposal & _____	_____	1	\$286,000.00	\$286,000.00
Hauling of AFM (CES estimate)	_____	_____	_____	_____
Subtotal Engineering:				\$286,000.00

Description	Hours	Cost / Hour	Hours	Cost / Hour	Total Cost
11. Professional Services					
	<u>Contract Management</u>		<u>Quality Assurance</u>		
P.E. Supervisor	4	\$225.00	4	\$225.00	\$1,800.00
On-Site Engineer	_____	_____	_____	_____	_____
Office Engineer	_____	_____	_____	_____	_____
On-Site Technician	_____	_____	_____	_____	_____
Other (explain)	80	\$11.60	_____	_____	\$928.00
Clean-up Tech	_____	_____	_____	_____	_____

Description	Unit	Number of Units	Cost / Unit	Total Cost
Quality Assurance Testing	LS	1	_____	_____
Subtotal Professional Services:				\$2,728.00

Subtotal of 1-11 Above: \$289,498.00

12. Contingency	<u>10</u>	% of Subtotal of 1-11 Above	\$28,949.80
		Subtotal Contingency:	<u>\$28,949.80</u>

Estimated Closing Cost Subtotal: \$318,447.80

Description	Total Cost
13. Site Specific Costs	
Mobilization	
Waste Tire Facility	
Materials Recovery Facility	
Special Wastes	
Leachate Management System Modification	
Other (explain) _____	

	Subtotal Site Specific Costs: _____

TOTAL ESTIMATED CLOSING COSTS (\$): \$318,447.80

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, 0 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	_____	_____	_____
Annually	1	_____	_____	_____
Subtotal Groundwater Monitoring:				_____
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	_____	_____	_____
Semi-Annually	2	_____	_____	_____
Annually	1	_____	_____	_____
Subtotal Gas Monitoring:				_____
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	_____	_____	_____
Replacement	EA	_____	_____	_____
Abandonment	EA	_____	_____	_____
Subtotal Groundwater Monitoring Well Maintenance:				_____
7. Gas System Maintenance				
Piping, Vents	LF	_____	_____	_____
Blowers	EA	_____	_____	_____
Flaring Units	EA	_____	_____	_____
Meters, Valves	EA	_____	_____	_____
Compressors	EA	_____	_____	_____
Flame Arrestors	EA	_____	_____	_____
Operation	LS	<u>1</u>	<u>\$0.00</u>	_____
Subtotal Gas System Maintenance:				_____
8. Landscape Maintenance				
Mowing	AC	_____	_____	_____
Fertilizer	AC	_____	_____	_____
Subtotal Landscape Maintenance:				_____
9. Erosion Control and Cover Maintenance				
Sodding	SY	_____	_____	_____
Regrading	AC	_____	_____	_____
Liner Repair	SY	_____	_____	_____
Clay	CY	_____	_____	_____
Subtotal Erosion Control and Cover Maintenance:				_____
10. Storm Water Management System Maintenance				
Conveyance Maintenance	LS	<u>1</u>	<u>\$0.00</u>	_____
Subtotal Storm Water Management System Maintenance:				_____
11. Security System Maintenance				
Fences	LS	<u>1</u>	<u>\$0.00</u>	_____
Gate(s)	EA	_____	_____	_____
Sign(s)	EA	_____	_____	_____
Subtotal Security System Maintenance:				_____

Description	Unit	Number of Units / Year	Cost / Unit	Annual Cost
12. Utilities	LS	1	\$0.00	
Subtotal Utilities:				

13. Leachate Collection/Treatment Systems Operation

Operation

P.E. Supervisor	HR			
On-Site Engineer	HR			
Office Engineer	HR			
OnSite Technician	HR			
Materials	LS	1	\$0.00	

Subtotal Leachate Collection/Treatment Systems Operation:

14. Administrative

P.E. Supervisor	HR			
On-Site Engineer	HR			
Office Engineer	HR			
OnSite Technician	HR			
Other _____				

Subtotal Administrative:

Subtotal of 1-14 Above:

15. Contingency

% of Subtotal of 1-14 Above

Subtotal Contingency:

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

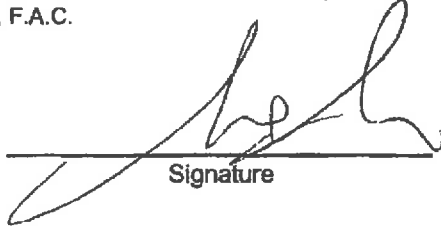
ANNUAL LONG-TERM CARE COST (\$ / YEAR):

Number of Years of Long-Term Care: _____

TOTAL LONG-TERM CARE COST (\$): _____

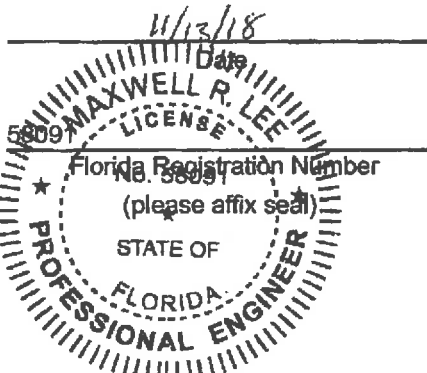
VI. CERTIFICATION BY ENGINEER

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

Maxwell R. Lee, Ph.D., P.E.
Name and Title (please type)



P.O. Box 5127

Mailing Address

Gainesville, FL 32627-5127

City, State, Zip Code

mlee@kooglerassociates.com

E-Mail address (if available)

352-377-5822

Telephone Number

VII. SIGNATURE BY OWNER/OPERATOR



Signature of Applicant

Alberto Calleros, Plant Manager

Name and Title (please type)

alberto.calleros@cemex.com

E-Mail address (if available)

10311 Cement Plant Road

Mailing Address

Brooksville, FL 34601

City, State, Zip Code

352-799-7881

Telephone Number