

KAREN E. RUSHING

Clerk of the Circuit Court and County Comptroller

2000 Main Street · P.O. Box 3079 · Sarasota, FL 34230-3079 · Phone: 941-861-7400 · www.SarasotaClerk.com

March 31, 2020

Tor Bejnar, Environmental Specialist Florida Department of Environmental Protection 2600 Blair Stone Road MS 4565 Tallahassee, FL 32399-2400

Re: Solid Waste Management Letter to Demonstrate Financial Assurance

Dear Mr. Bejnar:

Attached please find the requisite Independent Accountant's Report regarding the Solid Waste Management Facility Letter and the original signed copy of the Solid Waste Management Facility Letter from the Chief Financial Officer to demonstrate financial assurance for the year ended September 30, 2019.

This report addresses compliance with Section 62-701.630(5) of the Florida Administrative Code. Should you have any questions, please contact Christina Papadimitriou at (941) 861-5134 or cpapadim@sarasotaclerkandcomptroller.com.

Please find the County's Consolidated Annual Financial Report (CAFR) for the fiscal year ended September 30, 2019 at the following address: http://www.sarasotaclerk.com/records/financial-reports/annual-financial-reports

Sincerely,

Karen E. Rushing

Clerk of the Circuit Court and County Comptroller

Nicole E. Jovanovski, CPA

Director of Finance



INDEPENDENT ACCOUNTANTS' REPORT ON APPLYING AGREED-UPON PROCEDURES

Board of County Commissioners Sarasota County, Florida

We have performed the procedures enumerated below, which were agreed to by of Sarasota County, Florida, through its Clerk of the Circuit Court and County Comptroller (the County and the specified parties), on the accompanying Solid Waste Management Facility Letter from the Chief Financial Officer to demonstrate financial assurance for closing and long-term care costs prepared in accordance with DEP Rule 62-701.630, Florida Administrative Code (the "Letter") as of and for the year ended September 30, 2019. The County's management is responsible for the Letter. The sufficiency of these procedures is solely the responsibility of the parties specified in this report. Consequently, we make no representation regarding the sufficiency of the procedures enumerated below either for the purpose for which this report has been requested or for any other purpose.

The procedures and the associated findings are as follows:

1. Procedure: We read and understand the requirement for the financial test as found in DEP Rule 62-701.630(6)(c), Florida Administrative Code.

Finding: We performed the procedure without exception.

2. Procedure: We compared the data which the Letter, entitled State of Florida Solid Waste Facility Financial Test (Letter from the Chief Financial Officer) [DEP Form 62-701.900(5)(e)], specifies as having been derived from the independently audited year-end financial statements as of and for the year ended September 30, 2019, (the latest fiscal year) with the amounts in such financial statements. Tangible net worth reported in the Letter agreed to the total net position reported in the audited financial statements plus the landfill closure liabilities and deferred inflows of resources less deferred outflows of resources. This letter is signed by Karen Rushing, Clerk of the Circuit Court and County Comptroller, on March 30, 2020.

Finding: We performed the procedure without exception.

3. Procedure: In connection with procedure number 2, no matters came to our attention which caused us to believe that the specified data should be adjusted.

Finding: We performed the procedure without exception.



Honorable Board of County Commissioners Sarasota County, Florida

Clifton Larson Allen LLP

This agreed-upon procedures engagement was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. We were not engaged to and did not conduct an audit or review, the objective of which would be the expression of an opinion or conclusion, respectively, on the Letter. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of Sarasota County, Florida, and the State of Florida Department of Environmental Protection, and is not intended to be, and should not be, used by anyone other than these specified parties.

CliftonLarsonAllen LLP

Tampa, Florida March 30, 2020 Mail this and supporting documents to: Solid Waste Financial Coordinator Florida Department of Environmental Protection 2600 Blairstone Road MS 4548 Tallahassee, Florida 32399-2400

DEP Form # 62-701.900(5)(e)
Form Title SWM Fac. Financial Test
Form Effective Date February 15, 2015
Incorporated in Rule 62-701.630(6)

STATE OF FLORIDA SOLID WASTE FACILITY FINANCIAL TEST (LETTER FROM CHIEF FINANCIAL OFFICER)

Director, Division of Waste Management Florida Department of Environmental Protection

The term "Required Action," as used in this document means closing, long-term care, or corrective action, or any combination of these, which is checked below. The term "Firm" shall mean the legal or government entity whose chief financial officer is completing this letter. Check Appropriate Box(es): Sarasota County, Florida I am the chief financial officer of Name of Firm 1660 Ringling Blvd, PO Box 8, Sarasota, FL 34230 Business Address This letter is in support of this firm's use of the financial test to demonstrate financial assurance, as specified in Subpart H of 40 CFR Part 264, as adopted by reference in Rule 62-701.630, Florida Administrative Code (F.A.C.). Fill out the following eight paragraphs regarding facilities and associated cost estimates. If your firm has no facilities that belong in a particular paragraph, write "NONE" in the space indicated. For each facility, include its FDEP identification number (WACS or EPA ID), facility name, site address and current facility amount. The facility amount will be the total of facility closing, long-term care and corrective action cost estimates (as applicable), or total of closure, post-closure, corrective action cost estimates and liability coverage (as applicable), or the total of plugging and abandonment cost estimates. This firm is the owner or operator of the following solid waste management facilities in the State of Florida for which financial assurance for the "Required Action" is demonstrated through the financial test specified in Subpart H of 40 CFR Part 264, as adopted by reference in Rule 62-701.630, F.A.C.: WACS 51614, Central County Solid Waste Disposal Complex \$37,413,025.05 4000 Knights Trail Road, Nokomis, FL 34275 WACS 51611, Bee Ridge Landfill Site \$3,652,726.32 8350 Bee Ridge Road, Sarasota, FL 34241 2. This firm guarantees, through the corporate guarantee specified in Subpart H of 40 CFR Part 264, as adopted by reference in Rule 62-701.630, F.A.C., the "Required Action" of the following solid waste management facilities in the State of Florida owned or operated by the guaranteed party: NONE The firm identified above is [Check Appropriate Box] (Complete only when a Corporate Guarantee – Form 62-701.900(5)(f) – is being submitted.) (1) the direct or higher-tier parent corporation of the owner or operator; (2) owned by the same parent corporation as the parent corporation of the owner or operator and receiving the following value in consideration of this guarantee - _ Value received* (3) engaged in the following substantial business relationship with the owner or operator and receiving the following value in consideration of this guarantee - _

DEP Form 62-701.900(5)(e) Page 1 of 3

^{* - (}Attach a written description of the value received or business relationship or a copy of the contract establishing such relationship to this letter.)

3. In states other than Florida, this firm, as owner or operator or guarantor is de the closing, long-term care and/or corrective action (or equivalent terms) of the follow through the use of a test equivalent or substantially equivalent to the financial test specified, as adopted by reference in Rule 62-701.630, F.A.C.: NONE	ring solid waste management facilities
4. This firm is the owner or operator or guarantor of the following solid waste material assurance for the closing, long-term care and/or corrective action (or equivalental government or other state government through the financial test or any other specified in Rule 62-701.630, F.A.C., or equivalent or substantially equivalent federal	lent terms) is not demonstrated to the financial assurance mechanism
5. This firm is the owner or operator or guarantor of the following underground i which financial assurance for plugging and abandonment is required under 40 CFR F.A.C.: NONE	
6. This firm is the owner or operator or guarantor of the following hazardous wa assurance for closure, post-closure care, corrective action and/or liability coverage is and 265, Subpart H and/or Rule 62-730.180, F.A.C.: NONE	
7. This firm is the owner or operator or guarantor of the following underground storage tank (AST) facility(ies) for which financial responsibility for liability coverage a 40 CFR Parts 280 and 281 and/or Rule 62-761.400(3), and 62-762.401(3), F.A.C.: S	and corrective action is required under
8. This firm is the owner or operator or guarantor of the following phosphogypsun assurance for closure and post-closure care is required under Rule 62-673.640, F.A.	
This firmis not required to file a Form 10K with the Securities	es and Exchange Commission
(SEC) for the latest fiscal year. The fiscal year of this firm ends onSeptem	
for the following items marked with an asterisk (*) are derived from this firm's indepen	onth, Day ndently audited, year-end
financial statements and footnotes for the latest completed fiscal year, endedS	Septemeber 30, 2019

DEP Form 62-701.900(5)(e) Page 2 of 3

Complete either Alternative I or Alternative II

Fill in Alternative I if the criteria of Rule 62-701.630 (6)(c) 1., F.A.C., are used. Fill in Alternative II if the criteria of Rule 62-701.630 (6)(c) 2., F.A.C., are used.

ALTERNATI	VEI	✓ <u>ALTERNATIVE</u>	<u>E II</u>
Sum of current facility amounts (Total of all costs listed in paragraphs 1-8 [a		Sum of current facility amounts. (Total of all costs listed in paragraphs 1-8 [abor	
*2. Total liabilities. (If any portion of the current facility amounts you may deduct that portion from this line an		Current investment grade bond: A. CUSIP Number. (or attach copy of first page of bond)	80329KGQ8
*3. Tangible net worth.	\$	B. Rating Service. (Moody's or Standard and Poor's)	Standard & Poor's
*4. Net worth.	\$	C. Bond rating. (Rating must be Underlying or Senior Un	AA+
*5. Current assets.	\$	D. Date of bond issuance.	8/22/2019
*6. Current liabilities.	\$	E. Date of bond maturity.	10/01/2040
7. Net working capital. (Line 5 minus line 6)	\$	*3. Tangible net worth.	\$ 2,220,142,920.00
*8. The sum of net income plus depreciation, depletion, and		(If any portion of the current facility amounts is included in "total liabilities" on your financial statements, you may add that portion to this line.)	
amortization.	\$	*4. Total assets in the U.S.	\$3,391,551,222.00
*9. Total assets in U.S.	\$		YES NO
	YES NO	5. Is line 3 minus line 1 at least \$10	million? X
10. Is line 3 minus line 1 at least \$	10 million?	6. Is line 3 at least 3 times line 1?	_X
11. Is line 3 at least 3 times line 11	?	7. Is line 4 at least 3 times line 1?	_X
12. Is line 7 at least 3 times line 13	?		
13. Is line 9 at least 3 times line 11	?		
14. Is line 2 divided by line 4 less to	than 1.5?		
15. Is line 8 minus \$10 million dividine 2 greater than 0.10?	ded by		
CERTIFICATION			
the wording as adopted and incorp	porated by reference in Ru	3/3/12020	s letter is identical to
Signature V	<i>J</i>	Date (0.44) 964 E434	
Karen E. Rushing Type Name		(941) 861-5134 Telephone Number	A 14 Martin Commission of the
Clerk of the Court & County Com		cpapadim@sarasotaclerkandcomptrolle	er.com
Title		E-mail Address	

DEP Form 62-761.900(3) Part P
Form Title: Financial Mechanisms for Storage Tanks
Part P: ST Certification of Financial Responsibility
Form Effective Date October 2019
Incorporated in Rules 62-761.420 and 62-762.421, F.A.C.

STATE OF FLORIDA STORAGE TANK CERTIFICATION OF FINANCIAL RESPONSIBILITY

Reference: 40 CFR 280.111(b)

The Owner or Operator, _	Owner or Operator, Sarasota County Government - BCC legal entity demonstrating financial responsibility and is one or more of the following: facility owner,			
is the legal entity demons tank owner, facility operat and 376.309, F.S.].	trating financial resp or or tank operator [onsibility pursuant	and is one or more of the following: facility owner, to Rules 62-761.420(2) and 62-762.421(2), F.A.C.,	
The following mechanis	m(s) is (are) used t	o demo	nstrate financial responsibility:	
Primary Mechanism: Part	C - Insurance Endorse	nent	rantee, or financial test w/out guarantee]	
In atomic and No.			rantee, or financial test w/out guarantee]	
Instrument No.:				
Name of Provider (issuing	institution):		Commerce/Industry	
	1202 PG 12121 1101		and without a guarantee is used); guarantor's name if a guarantee is used]	
Period of Coverage:	10/1/2019	to	10/1/2020	
9700832	le [Requ	ired when B	ond, Letter of Credit and most Guarantees are used]:	
Central County Solid W	aste			
4000 Knights Trail Rd.		d when Bon	d, Letter of Credit and some Guarantees (Parts B, K and L) are used	
Nokomis, FL			Account number:	
Financial Test or Fund u	Sed [required for some Gua	arantees (Pa	orts B, L and N)]: Form Partcompleted [Insert A, I, J or O]	
taking corrective action ar	nd compensating third p	arties for	e(s) financial responsibility for bodily injury and property damage caused by	
	tive action" and/or "comper I discharges		parties for bodily injury and property damage caused by"]	
	es" or "sudden accidental dis	charges" or	for UST and/or AST in the amount of:	
accidental discharges" or le	ave blank if only corrective a	ction is cove	red]	
Per Occurrence: \$ 1,000,000	.00	Ann	ual Aggregate: \$ ^{2,000,000} .00	
The person whose signaturassurance mechanism(s) i	re appears below he s (are) in complianc	ereby ce	rtifies that the facility(ies) listed on the financial e financial responsibility requirements of Chapter rt 280 Subpart H by reference.	
Signature of Authorized Representation	ve of owner or operator]	_	Signature of Witness or Notary	
William Motherway, Risk Mana	ager and Ethics Officer		•	
[Type Name and Title]			[Type Name of Witingson or Indiade Nation South	
941-861-5000	/		ANNE M. HOWARD Notary Public-State of Floridal 323 20	
[Phone Number]		_	[Date] Commission # GG 298440	
wmotherway@scgov.net [Email Address]		_	My Commission Expires February 05, 2023	
[Lilian Addicss]				

This certification must be updated whenever the financial assurance mechanism(s) used to demonstrate financial responsibility change(s).