

Florida Department of Environmental Protection

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

Reset Form.

Print Form

DEP Form # 62-701.900(21)

Form Title: Waste Tire Processing Facility Quarterly

Effective Date: January 5, 2010

DEP Application No.

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

Pursuant to Rule 62-711.530, Florida Administrative Code, the owner or operator of a waste tire

processing facility shall submit the following information to the Department quarterly. (First quarter begins on January 1 of any given year) Quarter covered by this report 1st 1. Facility name: MMD Enterprises, Inc. 9975 NW 88th Ave 2 Facility mailing address: Zip: 33178 County: Dade City: Miami 0307930-001-WT 3. Facility permit number: 4. Facility telephone number (305)805-9390 5. Authorized person preparing report: Elee Dammous 6. Affiliation with facility: Manager Telephone number (if different from above): 8. Activity: Report in tons Ending Beginning Removed Adjustments Consumed Processed Received Inventory Inventory 16,599 239 5,661 16,986 **Used Tires** 5.513 Other Whole **Tires** Processed Tires Processina Waste Other 239 5.661 16.599 5,513 16.986 Total a. Explain all inventory adjustments. b. List any period in which one or more category of inventory exceeded the permitted maximum for that category. How was that condition relieved? For any excess inventory at the end of the quarter, state how and when this condition will be relieved. Attach Additional sheets, if necessary.

Mail completed form to the appropriate District office listed below

and complete

Elee

Print Name of Authorized Agent

Certification: To the best of my knowledge and belief, I certify the

Signature of Authorized Agent

ation provided in this report is true, accurate,

1/14/2021

Date