From: Greg M Bridge

To: SWD Waste, Newsome, Kaitlyn

**Subject:** Tire Processing Quarter 4 report 22787-007-WT/MM site Certificate No. PA82-17T

**Date:** Thursday, January 21, 2021 11:04:44 AM

Attachments: <u>image001.jpg</u>

CEMEX 22787-007-WT Q4 2020 Report.pdf

Please find attached Q4 Report for referenced facility.

Regards,

Greg Bridge



## Greg Bridge

Environmental Manager - Brooksville Cement- United States of America Office: (352) 799-7881 ext. 104 Fax: (352) 799-6088 Mobile: (352)-442-5375

Address: 10311 Cement Plant Road, Brooksville, FL 34601

e-Mail: <a href="mailto:gregm.bridge@cemex.com">gregm.bridge@cemex.com</a>

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January 21, 2021

Electronic Submittal

Ms. Kaitlyn Newsome Solid Waste Section Florida Department of Environmental Protection Southwest District 13051 N. Telecom Parkway Temple Terrace, FL 33637-0926

Re:

CEMEX Construction Materials Florida, LLC, Brooksville South Cement Plant Waste Tire Processing Facility Quarterly Report Permit No. 22787-007-WT/MM Site Certification No. PA82-17T

Dear Ms. Newsome:

Please find enclosed the completed Waste Tire Processing Facility Quarterly Report prepared for the aforementioned facility, for the 4th Quarter of 2020.

No tires were consumed in the 4th quarter of 2020. The remaining tires and trailers will be removed from the site by end of Q1 2021.

If there are any questions and/or comments concerning this submittal or you require additional information, please contact me at (352) 799-7881, ext. 104 or gregm.bridge@cemex.com.

Respectfully

Greg Bridge

Environmental Manager

pc: Zahid Iran Rangel Paz, Plant Manager



## Department of Environmental Protection

	# 62-701.900(21) Waste Tire Processing Facility
Form Title	Quarterly Report
Effective D	Date _3/22/00
Effective D	Date _3/22/00
Effective D	

## 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.

			AND THE PROPERTY OF THE PARTY O	(i iist quarter	begins on Ja	nuary 1 of any	given year	
. Facility name				als Florida, Ll		J. 30-23-119	J. 1 5.1. J Cul	
. Facility maili	ing address:	10311 C	ement Plant	Road				
City:	Brooksville		County:	Hernando		Zip: 346	01	
. Facility perm	nit number: _		200 400					
Facility telep	ohone number	(352) 799	-7881 ext. 10	4				
Authorized p	person preparir	ng report:	Greg Bridge	01				
Affiliation w	ith facility:	Environmen	tal Manager					
Telephone n	umber (if diffe	rent from abo	ove): (	)				
Activity: Re								
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory	
Used Tires	60	0.0		0.0	0	No tires were		
Other whole Tires							300,000	
Processed tires								
Processing Waste								
Other								
Total								
		ments No	tires were us	ed during the	quarter.			
Explain all inv	ventory adjust	ments. 140						
Explain all in	ventory adjust	inents. 140						
List any perio	od in which on	ne or more cat	egory of inver	ntory exceeded	the permitt	ed maximum fo	or that	
List any perio		ne or more cat	egory of inver	ntory exceeded	d the permitt	ed maximum fo	or that	
List any perio category. Ho	od in which on www.was.that.co	ne or more cat	ed?					
List any period category. Ho	od in which on www.as that co	ne or more cat ondition relievent	ed?					
List any period category. Ho	od in which on www.was.that.co	ne or more cat ondition relievent	ed?			ed maximum fo		
List any period category. Ho	od in which on www.as that co	ne or more cat ondition relievent	ed?					
List any perio category. Ho For any exce Attach Additi	od in which on ow was that co ss inventory a ional sheets, it	ne or more cat ondition relievent	ed?					
List any period category. Ho  For any excest Attach Addition:	od in which on ow was that co ss inventory a ional sheets, it	t the end of the fracessary.	ed? he quarter, sta	ate how and w	hen this con	dition will be re	elieved.	
List any period category. Ho  For any excest Attach Addition:	od in which on the was that co ass inventory a ional sheets, it	t the end of the fracessary.	ed? he quarter, sta	ate how and w	hen this con		elieved.	

Mail complete form to the appropriate district office