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Date	10/4	# of pages	1
To	Lena Ergon	From	Joe Lurie
Co./Dept	OGC/FLH	Co.	SED
Phone #	904-421-5875	Phone #	681-6669
Fax #	904-488-2439	Fax #	681-6770

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DEP Form # 62-711-9001A1

Form Title Waste Tire Processing Facility Quarterly Report

Effective Date January 1, 1996

DEP Application No.

(Filed in by DEP)

CONFIDENTIAL**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.

Quarter covered by this report: 3RD QUARTER, 1996 (First quarter begins on January 1 of any given year)

- Facility name: FLORIDA TIRE RECYCLING, INC.
- Facility mailing address: 9675 RANGE LINE ROAD
 City: PORT SE LUCIE County: ST LUCIE Zip: 34987
- Facility permit number: WT-56165345
- Facility telephone number: 407 465-0477
- Authorized person preparing report: DAVID L. QUARTERSON
- Affiliation with facility: Chief Operating Officer
- Telephone number (if different from above): 1

8. Activity: Report in tons.

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	180	6.515	5.002		116	326	1.251
Other whole tires	900						900
Processed tires	14,759				3.327		16,414
Processing Waste	400						400
Other	1,340						1,340
Total	17,579	6.515	5.002	0	3.463	326	20,305

a. Explain all inventory adjustments: FIVE PERCENT ALLOWANCE FOR TRAPPED WATER.

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. SEE MONTHLY REPORT FOR SEPTEMBER

9. Certification:

To the best of my knowledge and belief, I certify the information provided in this report is true, accurate and complete.

DAVID L. QUARTERSON

David L. Quarterson

10/1/96