



Jeb Bush
Governor

Department of Environmental Protection

Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

David B. Struhs
Secretary

April 28, 2003

Mr. John Power
West Pasco County Class III
14230 Hays Road
Spring Hill, Florida 34610

Dear Mr. Power:

Your Application for Registration of a Yard Trash Processing Facility for West Pasco County Class III is complete. Your facility identification number is 051-01-YT. This registration is valid until **May 1, 2004**. The receipt number for the registration fee you paid is 415374.

You must comply with the following requirements in order to maintain qualification for the registration program:

1. Monthly records of incoming and outgoing material shall be kept on site or at another location as indicated on the registration form for at least three years.
2. An Annual Report for a Yard Trash Processing Facility, DEP Form 62-709.320 (7)(b), shall be submitted by April 1 of each year.
3. A registration renewal, DEP Form 62-709.320(7)(a), shall be submitted by April 1 of each year to renew this registration.
4. The facility shall be operated in accordance with Rules 62-709.320(3) and (4), Florida Administrative Code (F.A.C.). A summary of these requirements is enclosed.

If you need further information, please contact Francine Joyal at the above address, Mail Station 4565, telephone 850/245-8747, or email Francine.Joyal@dep.state.fl.us.

Sincerely,

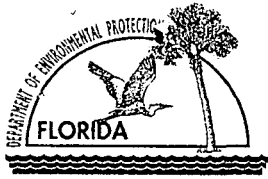
Francine Joyal
Environmental Specialist

Enclosures

cc: Susan Pelz, Southwest District

"More Protection, Less Process"

Printed on recycled paper.



Department of Environmental Protection

Solid Waste Section, Mail Station 4565
2600 Blair Stone Road, Tallahassee, Florida 32399-2400

427996 APR14 2003

DEP Form # 62-709.320(7)(a)
Application for Registration of a
Form Title <u>Yard Trash Processing Facility</u>
Effective Date <u>October 22, 2000</u>
DEP Application No. _____
Filled in by DEP)

Application for Registration of a Yard Trash Processing Facility

1. Type of Application: New _____ Renewal (due April 1) X

2. Type of Facility: Transfer Station _____ Both _____

Recycling Facility X

3. Facility Name: West Pasco County Class III Facility ID#: 051-01-YT

(Assigned by Department)

RECEIVED

4. Registrant (Company or Local Government) Name (if different):
West Pasco County Class III APR 16 2003

5. Federal Employment Identification Number: 596-000-793 Solid Waste Section

6. Mailing Address: 14230 Hays Road

City Spring Hill State Florida Zip 34610

7. Street Address (if different): 14230 Hays Road

City Spring Hill State Florida Zip 34610

County Pasco

8. Contact Person: John Power Telephone: 727-856-0119

9. Records required by Rule 62-709.320, F.A.C., will be kept at the facility? Yes X No _____

If no, please indicate where these records will be kept and made available upon Department request to review the records:

10. Does the registrant own the facility site? Yes X No _____

If you answered no, please provide evidence that the facility owner or operator has permission from the landowner to operate a yard trash recycling facility at this site.

11. Has the facility begun operations? Yes X No _____

12. Include a check or money order for the \$35.00 registration fee made payable to the Florida Department of Environmental Protection.

I affirm that I have read Rule 62-709.320, F.A.C., and shall comply with the requirements specified in that rule. I also affirm that the information provided in the application is true, accurate, and correct to the best of my knowledge. I have attached all documents and/or authorizations that are required.

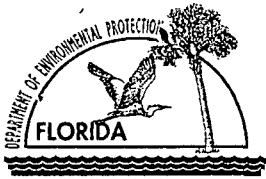
John Power / Solid Waste Manager
Print Name and Title of Authorized Agent

John Power
Signature of Authorized Agent

3/18/03
Date

Mail completed form and the \$35.00 registration fee to the address specified above.

129968



Department of Environmental Protection

Solid Waste Section, Mail Station 4565
2600 Blair Stone Road, Tallahassee, Florida 32399-2400

DEP Form # 62-709.320(7)(b)
Annual Report
Form Title <u>for a Yard Trash Processing Facility</u>
Effective Date <u>October 22, 2000</u>
DEP Application No. _____ (Filled in by DEP)

Annual Report for a Yard Trash Processing Facility

1. Facility Name: West Pasco County Class III Facility ID#: 051-01-YT
(Assigned by Department)

2. Street address: 14230 Hays Road
City Spring Hill County Pasco

3. Federal Employment Identification Number: 596-000-793

4. Contact Person: John Power Telephone: 727-856-0119

5. Calendar Year (January 1 through December 31) Covered by this Report: 2002

6. Values used in this report are in (CIRCLE ONE): Tons Cubic Yards

7. For Existing Facilities that have not reported this information in the past, Amount of

a. Unprocessed Yard Trash On Site at Beginning of Report Year: 300

b. Processed Yard Trash On Site at Beginning of Report Year: 2787

8. Total Quantity of Yard Trash Received During Report Year: 11,477

9. Total Quantity of Yard Trash Lost Due to Processing (e.g. drying, shrinkage, etc.) During Report Year: 757

10. Total Quantity of Yard Trash Removed from Site for:

a. Use: 9,576

b. Disposal: 1,127

Other (transfer station): -0-

11. Total Quantity On Site at End of Report Year of:

a. Unprocessed Yard Trash: 3,104

b. Processed Yard Trash: -0-

RECEIVED
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 TALLAHASSEE, FLORIDA
 10:01 AM
 3/18/03

I affirm that the information provided in the report is true, accurate, and correct to the best of my knowledge.

John Power / Solid Waste Manager

Print Name and Title of Authorized Agent

[Signature]

Signature of Authorized Agent

3/18/03

Date

Mail completed form to the address specified above.

129968

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PASCO COUNTY
PURCHASING DEPT.

2003 MAR 20 AM 10:01

RECEIVED