



Department of Environmental Protection

DEP Form # 62-701.900(21)
 Waste Tire Processing Facility
 Form Title Quarterly Report
 Effective Date 3/27/00
 DEP Application No. _____
 (Filed in by DEP)

Waste Tire Processing Facility Quarterly Report BY: BSHW

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 10/1/09 - 12/31/09 (First quarter begins on January 1 of any given year)

1. Facility name: Global Tire Recycling of Sumter Cty Inc
2. Facility mailing address: 1201 Industrial Drive
 City: Wildwood County: Sumter Zip: 34785
3. Facility permit number: 136806-004-WT
4. Facility telephone number (352) 330-2213
5. Authorized person preparing report: Mark Bailey, VP Plant Operations
6. Affiliation with facility: _____
7. Telephone number (if different from above): () _____
8. Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	413.32	2463.89	<2774.22>				
Other whole Tires							
Processed tires	902.14		2355.50	<2286.26>			
Processing Waste			564.72		<564.72>		
Other							
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.

9. Certification:

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

Mark S. Bailey
 Print Name of Authorized Agent

Mark Bailey
 Signature of Authorized Agent

1/15/10
 Date

Mail complete form to the appropriate district office

Northwest District
 160 Governmental Center
 Pensacola, FL 32501-5794
 850-595-8360

Northeast District
 7825 Baymeadows Way, Ste. 200 B
 Jacksonville, FL 32256-7590
 904-448-4300

Central District
 3319 Maguire Blvd., Ste. 232
 Orlando, FL 32803-3787
 407-894-7555

Southwest District
 3804 Coconut Palm Dr.
 Tampa, FL 33619
 813-744-6100

South District
 2295 Victoria Ave., Ste. 364
 Fort Myers, FL 33902-2549
 941-332-6975

Southeast District
 400 North Congress Ave.
 West Palm Beach, FL 33401
 561-681-6600

Sumter County Fire Rescue Fire & Life Safety Inspection



Date 01/13/2010 Time 11:30AM Date of Last Inspection _____
 Address 1201 Industrial Drive
 Name of Business Global Tire Recycling
 Contact Person Mark Bailey Phone No. 352-330-2213
 Type of Occupancy Industrial NFPA 101 Chap. _____
 Type of Construction Type III Number of Stories 1

1. General	Yes	No	N/A	9. Protection of Vertical Openings	Yes	No	N/A
Bldg. Altered or renovated since last Insp.?		<input checked="" type="checkbox"/>		Ceiling tiles missing or broken?		<input checked="" type="checkbox"/>	
Is building mixed occupancy?		<input checked="" type="checkbox"/>		Ducts and pipes properly sealed at ceiling?	<input checked="" type="checkbox"/>		
What other occupancies?			<input checked="" type="checkbox"/>	10. Interior Finish			
Building construction acceptable?	<input checked="" type="checkbox"/>			Wall and ceiling materials per code?	<input checked="" type="checkbox"/>		
2. Occupant Load and Exits				Is interior finish per code?	<input checked="" type="checkbox"/>		
Are exits per code?	<input checked="" type="checkbox"/>			Fixed Seating			<input checked="" type="checkbox"/>
Number of exits? 1 2 3 <u>4 or more</u>				Are curtains and drapes per code?	<input checked="" type="checkbox"/>		
Is egress capacity adequate?	<input checked="" type="checkbox"/>			Floor finish per code?	<input checked="" type="checkbox"/>		
Fire rating of exit stair enclosure 1 hr 2 hr			<input checked="" type="checkbox"/>	11. Operating Features			
Fire rating of exit stair door 1 hr 1 1/2 hr			<input checked="" type="checkbox"/>	Is there a written emergency plan?	<input checked="" type="checkbox"/>		
Doors self-closing?		<input checked="" type="checkbox"/>		Are fire drills conducted?		<input checked="" type="checkbox"/>	
Latching door hardware?		<input checked="" type="checkbox"/>		Number of fire drills conducted per year		<input checked="" type="checkbox"/>	
Exit enclosures free of storage?	<input checked="" type="checkbox"/>			Are employees instructed in fire ext. use?		<input checked="" type="checkbox"/>	
Do 100% of exits discharge directly outside?	<input checked="" type="checkbox"/>			Has evacuation / relocation been established?		<input checked="" type="checkbox"/>	
Do 50% of exits discharge directly outside?				Is there daily inspection of exits?		<input checked="" type="checkbox"/>	
Is exit discharge level?	<input checked="" type="checkbox"/>			12. Alarm and Detection			
Is exit discharge sprinklered?	<input checked="" type="checkbox"/>			Is there a manual alarm system?	<input checked="" type="checkbox"/>		
Is stair entry per code?			<input checked="" type="checkbox"/>	Is there a fire detection system?	<input checked="" type="checkbox"/>		
3. Doors				Smoke detectors	<input checked="" type="checkbox"/>		
Are doors blocked?		<input checked="" type="checkbox"/>		Heat detectors			
Are doors locked?		<input checked="" type="checkbox"/>		Audible alarm	<input checked="" type="checkbox"/>		
Is ≤15-lb force required to release latch?	<input checked="" type="checkbox"/>			Visual alarm	<input checked="" type="checkbox"/>		
Doors open in direction of travel?	<input checked="" type="checkbox"/>			Alarm system within certification?	<input checked="" type="checkbox"/>		
Is there panic hardware per code?		<input checked="" type="checkbox"/>		Is alarm system monitored 24 hours a day?	<input checked="" type="checkbox"/>		
4. Egress Arrangement				Number and location of pull stations per code?	<input checked="" type="checkbox"/>		
Is egress clear and unobstructed?	<input checked="" type="checkbox"/>			13. Extinguishment			
Are dead-end corridors within limits?	<input checked="" type="checkbox"/>			Is the building sprinklered throughout?	<input checked="" type="checkbox"/>		
Is common path of travel within limits?	<input checked="" type="checkbox"/>			Partial sprinklers			
Is travel through intervening rooms okay?	<input checked="" type="checkbox"/>			Is there a water flow alarm?	<input checked="" type="checkbox"/>		
Is egress blocked?		<input checked="" type="checkbox"/>		Are the valves supervised?	<input checked="" type="checkbox"/>		
Is aisle width adequate?	<input checked="" type="checkbox"/>			Is there a standpipe?	<input checked="" type="checkbox"/>		
Is travel distance per code?	<input checked="" type="checkbox"/>			Is the sprinkler system within certification?			
5. Emergency Lighting				Is there a fire pump?	<input checked="" type="checkbox"/>		
Is emergency lighting per code?	<input checked="" type="checkbox"/>			Date of last pump test		<input checked="" type="checkbox"/>	
Is it tested monthly?	<input checked="" type="checkbox"/>			Number of fire extinguishers within code?	<input checked="" type="checkbox"/>		
6. Exit Marking				Travel distance for fire extinguisher per code?	<input checked="" type="checkbox"/>		
Is exit marking per code?	<input checked="" type="checkbox"/>			Are fire extinguishers within certification?	<input checked="" type="checkbox"/>		
7. Corridors				Are fire extinguishers mounted properly?	<input checked="" type="checkbox"/>		
Is 1 - hr rating required?			<input checked="" type="checkbox"/>	Are fire extinguishers accessible?	<input checked="" type="checkbox"/>		
Is rating 1-hr corridor walls w/ 20 min. doors?			<input checked="" type="checkbox"/>	14. Building HVAC & Utilities			
8. Protection of Hazards				Are Utilities in good working order?	<input checked="" type="checkbox"/>		
Hazards protected by fire rate enclosure?	<input checked="" type="checkbox"/>			Emergency shut-offs/circuit breakers labeled?	<input checked="" type="checkbox"/>		
Hazards protected by ext. sys.?	<input checked="" type="checkbox"/>			Is there an emergency generator?	<input checked="" type="checkbox"/>		
Hazards protected by self-closing door?		<input checked="" type="checkbox"/>		Date last tested			
Is kitchen cooking protected?			<input checked="" type="checkbox"/>	LP Gas Tanks, Location & Condition	<input checked="" type="checkbox"/>		
Kitchen hood and duct last cleaned			<input checked="" type="checkbox"/>	LP Gas Meter & Shutoff	<input checked="" type="checkbox"/>		
9. Protection of Vertical Openings				Electrical MDP per code?	<input checked="" type="checkbox"/>		
Are vertical openings enclosed?	<input checked="" type="checkbox"/>			Electrical wiring	<input checked="" type="checkbox"/>		
Are elevators enclosed?	<input checked="" type="checkbox"/>			Acceptable Use of Electrical Extension Cords	<input checked="" type="checkbox"/>		
Is atrium per code?			<input checked="" type="checkbox"/>	Acceptable Use of Power Strips	<input checked="" type="checkbox"/>		
Are ≤ 3 levels open per code?			<input checked="" type="checkbox"/>	Elevator recall (phase I)?			<input checked="" type="checkbox"/>

14. Building HVAC & Utilities cont.	Yes	No	N/A
Fire Dept. elevator control (phase II)?			✓
Are stages per code?			✓
Are platforms / risers per code?			✓
HVAC system in good working order?	✓		
Interior air intakes cond.?	✓		
Exterior air intakes cond.?	✓		
Smoke removal system function			✓

	Yes	No	N/A
Are Janitor's closets sprinklered?	✓		
Are rescue windows in each classroom per code?			✓
Are smoke barriers per code?			✓
Proper handling of trash and rubbish?	✓		
Proper storage of hazardous materials	✓		
Proper storage of flammable / combustible liquids?	✓		

Comments

Inspection performed by: William Richards Insp. # 127694

Signature [Signature] Date: 01/13/2010

Inspection Passed on 01/13/2010 Inspector's Initials [Initials]

Inspection Failed on _____ Inspector's Initials _____

Re-Inspection scheduled for _____ Time: _____

Re-Inspection Passed on _____ Inspector's Initials _____

Re-Inspection Failed on _____ Inspector's Initials _____

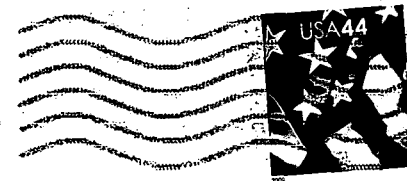
I have received a copy of the results of this inspection. I understand the nature of deficiencies noted during this inspection and that they need to be corrected in the specified time allowed.

Authorized Representative [Signature] Date: 1-13-10



1201 Industrial Drive
Wildwood, FL 34785
Phone: (352) 330-2213
Fax: (352) 330-2214

MID FLORIDA PDC
FL 3273 T
19 JAN 2010 PM



Dept of Environmental Protection
Twin Towers Office Building
2600 Blair Stone Road
Tallahassee, FL 32399-2400

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