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Florida Department of Environmental Protection

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

DEP Form # 62-709.901(3)
Appl for Reg. and Ann Rep for a YT Trans
Form Title <u>Station or SW Organic Recycling Facility</u>
Effective Date <u>February 15, 2010</u>
DEP Facility ID No _____
DEP WACS ID No: <u>67081</u> (Filled in by DEP)
(Filled in by DEP)
This form is adopted by reference in subsection 62-709.901(3), F.A.C.

Application for Registration and Annual Report for a Yard Trash Transfer Station or a Solid Waste Organics Recycling Facility

PART A - GENERAL INFORMATION

- Type of Application: New Renewal (due July 1) Annual report only for facility operating under permit:
- Type of Facility: Yard trash recycling Manure blending
Yard trash transfer station Vegetative, animal byproducts or manure composting
- Type of Waste Processed: Yard trash Manure Animal byproducts Pre-consumer Vegetative
Vegetative (could/did come into contact with animal products or byproducts or end user)
- Facility Name: Vista Landfill, Class III
- Registrant Name (or Permittee if annual report only): Vista Landfill, LLC.
- Federal Employer Identification Number: 593652174
- Mailing Address: C/O Sheree Grant, 242 West Keene Road
City Apopka State FL Zip 32703
Street Mailing Address (if different): _____
City _____ State _____ Zip _____
- Facility Location - Street Address or Property Number: 242 West Keene Road
City Apopka County Orange
- Contact Person: Sheree Grant Telephone: (407) 886-2920, Ext 206

PART B - ADDITIONAL INFORMATION REQUIRED FOR REGISTRATION APPLICATION

- Records required by Rule 62-709.320, F.A.C., will be kept at the facility? Yes No
If no, please indicate where these records will be kept and made available upon Department request to review the records:

- Does the registrant own the facility site? Yes No
If you answered no, please attach evidence that the facility owner or operator has permission from the landowner to operate a yard trash transfer station or a solid waste organics recycling facility at this site.
- Has the organic recycling facility begun operations? Yes No
If this facility was operating in the previous calendar year, the annual report in Part C must be completed.
- 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 Rules 62-709.320, 62-709.330 and 62-709.350, F.A.C., and shall comply with the requirements specified in those rules. 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.

Print Name and Title of Registrant or Authorized Agent _____ Signature _____ Date _____
Email address (if available): _____

PART C - ANNUAL REPORT

14. Calendar Year (January 1 through December 31) Covered by this Report: 2014

15. Values used in this report are in (SELECT ONE): Tons Cubic Yards

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

a. Unprocessed Material On Site at Beginning of Report Year: 9668

b. Processed Material On Site at Beginning of Report Year (total): 3297

17. Total Quantity of Material Received During Report Year: 11633

18. Total Quantity of Material Lost Due to Processing (e.g. grinding, drying, shrinkage, fires, etc.) During Report Year: 15375

19. Total Quantity of Material Removed from Site for:

a. Use (e.g., landfill cover, fuel, mulch, compost, etc.): 1822

b. Disposal: 0

c. Other (transfer stations) 0

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

a. Unprocessed Material: 1231

b. Processed Material: 6170

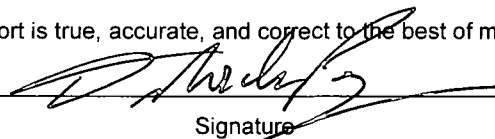
Note that the total sum of items 16 a and b plus 17 must equal to sum of items 18, plus 19 a, b and c, plus 20 a and b.

Total of items 16 and 17 24598

Total of Items 18, 19 and 20 24598

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

Deborah A. Perez, District Manager



1/28/15

Print Name and Title of Registrant/Permittee or Authorized Agent

Signature

Date

Email address (if available): dperez@wm.com

PART D - MAILING INSTRUCTIONS

Remember to include the \$35.00 fee if this is also a registration application. Mail completed form to:

Department of Environmental Protection
Solid Waste Section, MS 4565
2600 Blair Stone Road
Tallahassee, Florida 32399-2400

WACS 87081



WASTE MANAGEMENT INC. OF FLORIDA

Vista Landfill, LLC
242 W. Keene Road
Apopka, FL 32703
P:407-553-4938 F:407-889-8043

January 28, 2015

Florida Department of Environmental Protection
Solid Waste Section – MS 4565
2600 Blair Stone Road
Tallahassee, FL 32399-2400

Subject: Annual Report for Yard Trash Processing Facility
Vista Landfill, LLC. – Facility ID# SO48-0165969-021

Dear Sir/Madam:

Please find enclosed the 2014 Annual Organic Report for the Vista Landfill. Please contact me at (407) 553-4938 if you have any questions or need additional information regarding this submittal.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read 'Deborah B.', written in a cursive style.

Deborah Perez
District Manager
Vista Landfill LLC

cc: Site File