



**LEE COUNTY**  
SOUTHWEST FLORIDA

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July 14, 2010

Mr. Bill Krumbholz  
Florida Department Environmental Protection  
2295 Victoria Avenue  
P. O. Box 2549  
Fort Myers, FL 33902-2549

**SUBJECT: WASTE TIRE FACILITY QUARTERLY REPORT**

Dear Mr. Krumbholz:

Attached, please find the quarterly report for the second quarter of 2010 for the Waste to Energy Facility.

If you have any questions regarding this report, please call me at (239) 533-8000.

Sincerely,

**SOLID WASTE DIVISION**

Lindsey Sampson, P.E.  
Director

LJS/mo

cc: George Ball-Ilovera, Covanta  
Bill Newman  
VIII A 306

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JUL 21 2010  
D.E.P. South District



# Department of Environmental Protection

DEP Form # 62-701 900(21)
Waste Tire Processing Facility
Form Title <u>Quarterly Report</u>
Effective Date <u>3/22/00</u>
DEP Application No. _____ (Filled in by DEP)

## 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 Second Quarter 2010 (First quarter begins on January 1 of any given year)

- Facility name: Lee County Resource Recovery Facility
- Facility mailing address: 10500 Buckingham Road  
City: Fort Myers County: Lee Zip: 33905
- Facility permit number: PA 90-30
- Facility telephone number (239) 533-8000
- Authorized person preparing report: William T. Newman
- Affiliation with facility: Operations Manager
- Telephone number (if different from above): ( )
- Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	56	487	0	457	43	NA	43
Other whole Tires							
Processed tires	0	0		0	0		0
Processing Waste							
Other							
Total	56	487	0	457	43		43

- Explain all inventory adjustments. NA
- List any period in which one or more category of inventory exceeded the permitted maximum for that category. How was that condition relieved?  
NA  
For any excess inventory at the end of the quarter, state how and when this condition will be relieved. Attach Additional sheets, if necessary.  
NA

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

Lindsey J. Sampson, P.E.      *Lindsey Sampson*      7/14/10  
Print Name of Authorized Agent      Signature of Authorized Agent      Date

Mail complete form to the appropriate district office

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Northwest District  
160 Governmental Center  
Pensacola, FL 32501-5794  
850-585-9360

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

Central District  
3319 Maguire Blvd., Ste. 232  
Orlando, FL 32803-3767  
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  
561-681-8600