

**FLORIDA DEPARTMENT OF  
Environmental Protection**

**Ron DeSantis**  
Governor

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

**Jeanette Nuñez**  
Lt. Governor

**Noah Valenstein**  
Secretary

**Source-Separated Organics Processing Facility Registration  
Confirmation of Submission**

**07/01/2020**

**Waste Registration Section**

**Vista Landfill LLC**

**VISTA LANDFILL, LLC (BUTTREY/KEENE RD SOUTH)**

**242 W Keene Rd Apopka, FL 32703 7919**

Dear **Vista Landfill LLC**

You indicated that operation of your Source-Separated Organics Processing Facility known as VISTA LANDFILL, LLC (BUTTREY/KEENE RD SOUTH) (located at 242 W Keene Rd, Apopka) in Orange County is addressed under another Department permit, and that you were submitting only the required annual report. Thank you for your submittal, a copy of which is attached for your information. Please note that your facility identification number (WACS ID) is 87081.

You must comply with the requirements specified in Chapter 62-709, Florida Administrative Code (F.A.C.) in order to maintain qualification for the registration program. A summary of the operating requirements is attached.

If you have any questions or need further assistance, please contact Waste Registration Section at (850) 245-8707 or by e-mail at [Waste.Registration@dep.state.fl.us](mailto:Waste.Registration@dep.state.fl.us).

Please retain a copy of this confirmation for your records.

Sincerely,

Waste Registration Section

cc: null; null



# 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 Station or SW Organic Recycling Facility
Effective Date February 15, 2010
DEP Facility ID No. 87081
(Filled in by DEP)
DEP WACS ID No: 87081
(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

1. Type of Application: New  Renewal (due July 1)  Annual report only for facility operating under permit:
2. Type of Facility: Yard trash recycling  Manure blending   
Yard trash transfer station  Vegetative, animal byproducts or manure composting
3. 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)
4. Facility Name: VISTA LANDFILL, LLC (BUTTREY/KEENE RD SOUTH)
5. Registrant Name (or Permittee if annual report only): VISTA LANDFILL, LLC (BUTTREY/KEENE RD SOUTH)
6. Federal Employer Identification Number: 593965217
7. Mailing Address: 242 W Keene Rd  
City Apopka State FL Zip 32703 7919  
Street Mailing Address (if different):  
City State Zip
8. Facility Location - Street Address or Property Number: 242 W Keene Rd  
City Apopka County Orange
9. Contact Person: ANTHONY ROMAN Telephone: (321) 288-2840

### PART B - ADDITIONAL INFORMATION REQUIRED FOR REGISTRATION APPLICATION

10. 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:
11. 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.**
12. 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.**
13. ~~Include a check or money order for the \$35.00 registration fee made payable to the Florida Department of Environmental Protection. Payment of \$35.00 for this registration was received via online transaction.~~

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:	2019
15. Values used in this report are in (SELECT ONE):	Tons <input checked="" type="checkbox"/> Cubic Yards <input type="checkbox"/>
16. <b>For Existing Facilities that have not reported this information in the past,</b> Amount of	
a. Unprocessed Material On Site at Beginning of Report Year:	0
b. Processed Material On Site at Beginning of Report Year (total):	0
17. Total Quantity of Material Received During Report Year:	14320.00
18. Total Quantity of Material Lost Due to Processing (e.g. grinding, drying, shrinkage, fires, etc.) During Report Year:	1.00
19. Total Quantity of Material Removed from Site for:	
a. Use (e.g., landfill cover, fuel, mulch, compost, etc.):	14319.00
b. Disposal:	0
c. Other (transfer stations)	0
20. Total Quantity On Site at End of Report Year of:	
a. Unprocessed Material:	0
b. Processed Material:	0

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	14320.00	Total of Items 18, 19 and 20	14320.00
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I affirm that the information provided in the annual report is true, accurate, and correct to the best of my knowledge.

Eric Parker, Environmental Manager	<i>Eric Parker</i>	07/01/2020
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Print Name and Title of Registrant/Permittee or Authorized Agent	Signature	Date
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Email address (if available): eparker1@wm.com

**~~PART D - MAILING INSTRUCTIONS~~**

**This registration was completed and payment of \$35.00 (if applicable) was received via online transaction.**

~~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~~