

Johnson, Sabrina O

From: John Arnold <john.phillip.arnold@gmail.com>
Sent: Wednesday, February 3, 2021 1:45 PM
To: SWD_Waste; Newsome, Kaitlyn
Subject: Angelos WACS 87895 3Q20 and 4Q20 waste tire processing facility reports
Attachments: Angelos Dade City WTPF 4Q20 62-701_900_21 WACS 87895.pdf; Angelos Dade City WTPF 3Q20 62-701_900_21 WACS 87895.pdf

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John Arnold, P.E.
Ph. (813) 477-1719



Florida Department of Environmental Protection

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

DEP Form # 62-701.900(21)	
Form Title: Waste Tire Processing Facility Quarterly Report	
Effective Date: January 6, 2010	
DEP Application No. _____	
(Completed 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 3Q2020 (First quarter begins on January 1 of any given year)

1. Facility name: Angelo's Recycled Materials Enterprise Recycling and Disposal WTPF
2. Facility mailing address: 41111 Enterprise Road
 City: Dade City County: Pasco Zip: 33525
3. Facility permit number: 303741-003-WT/02
4. Facility telephone number (352) 567 7676
5. Authorized person preparing report: John Arnold
6. Affiliation with facility: Engineer
7. Telephone number (if different from above): (813) 477-1719
8. Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	200	3709	3709	0	3709		0
Other Whole Tires							
Processed Tires							
Processing Waste							
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.

John Arnold	John Arnold	2/3/21
Print Name of Authorized Agent	Signature of Authorized Agent	Date

Mail completed form to the appropriate District office listed below

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

Northeast District
7825 Baymeadows Way, Ste. 200 B
Jacksonville, FL 32256-7590
904-807-3300

Central District
3319 Maguire Blvd., Ste. 232
Orlando, FL 32803-3767
407-894-7555

Southwest District
13051 N. Telecom Pky.
Temple Terrace, FL
813-632-7600

South District
2295 Victoria Ave., Ste. 364
Fort Myers, FL 33902-2549
239-332-6975

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



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- Affiliation with facility: Engineer
- Telephone number (if different from above): (813) 477-1719
- Activity: Report in tons

	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory
Used Tires	0	3612	3612	0	3612		0
Other Whole Tires							
Processed Tires							
Processing Waste							
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.

John Arnold

Print Name of Authorized Agent

John Arnold

Signature of Authorized Agent

Digitally signed by John Arnold
Date: 2020.04.20 10:51:02 -0400

2/3/21

Date

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