FLORIDA DEPARTMENT OF Environmental Protection

Ron DeSantis Governor

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400 Jeanette Nuñez Lt. Governor

Shawn Hamilton Interim Secretary

Source-Separated Organics Processing Facility Registration Confirmation of Submission

07/13/2021

Waste Registration Section

ANGELO'S AGGREGATE MATERIALS, LTD.

ENTERPRISE LF & RECYC (FKA SID LARKIN & SON, INC.)

41111 Enterprise Rd Dade City, FL 33525 1589

Dear ANGELO'S AGGREGATE MATERIALS, LTD.

Your application for Registration of a Source-Separated Organics Processing Facility (SOPF) for ENTERPRISE LF & RECYC (FKA SID LARKIN & SON, INC.) (located at 41111 Enterprise Rd , Dade City) in Pasco County is complete. Your facility identification number (WACS ID) is 87895. This registration is valid until August 1, 2022. The receipt number for the registration fee you paid is 67369

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.

Please retain a copy of this confirmation for your records.

Sincerely,

Waste Registration Section

cc: Steven Tafuni, Melissa Madden; Southwest District, Southwest District



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.	87895					
DEI Tuomity ID No.	(Filled in by DEP)					
DEP WACS ID No:	87895					
	(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 . Type of Facility: Yard trash recycling Yard trash transfer station	_	_	report only for fac Mar oducts or manure	nure blend	ing 🔲	er permi	<u> </u>		
3.		nure <u></u>	Animal by	products 🔲	Pre-cons	umer Ve				
4.	. Facility Name: ENTERPRISE LF & RECYC (FKA SI	D LARKIN &	SON, INC.)							
5.	5. Registrant Name (or Permittee if annual report only): ENTERPRISE LF & RECYC (FKA SID LARKIN & SON, INC.)									
6.	. Federal Employer Identification Number: 593448	8428								
7	. Mailing Address: 855 28th St S									
, .	City Saint Petersburg	State _	īL		_ Zip	33712	1916			
	Street Mailing Address (if different):									
	City	State _								
8.	. Facility Location - Street Address or Property Numb	per: 41111	Enterprise Rd							
	City Dade City	County	Pasco							
9.	. Contact Person: Phillip Curtin		Telephone:	(727) 242-0291						
	PART B - ADDITIONAL INFORMA	TION REQ	JIRED FOR RE	GISTRATION A	PPLICATION	ON				
10.	. Records required by Rule 62-709.320, F.A.C., will be	e kept at th	e facility?		Yes	V	No			
10.	Records required by Rule 62-709.320, F.A.C., will be left no, please indicate where these records will be keeping.		-	n Department re						
			-	n Department red						
	If no, please indicate where these records will be ke	ept and mad	e available upo	ator has permis	quest to re Yes sion from	view the	records			
11.	If no, please indicate where these records will be keep. Does the registrant own the facility site? If you answered no, please attach evidence that	ept and mad the facility aste organ	e available upo	ator has permis	quest to re Yes sion from	view the	records			
11.	If no, please indicate where these records will be keep. Does the registrant own the facility site? If you answered no, please attach evidence that operate a yard trash transfer station or a solid we	the facility	e available upo	ator has permis	Yes sion from e. Yes	the land	No downer			
11.	If no, please indicate where these records will be keep. Does the registrant own the facility site? If you answered no, please attach evidence that operate a yard trash transfer station or a solid we have the organic recycling facility begun operations?	the facility vaste organ	owner or operics recycling f	ator has permis acility at this sit ort in Part C mu	Yes sion from e. Yes st be con	the land	No downer			
11. 12.	If no, please indicate where these records will be keep. Does the registrant own the facility site? If you answered no, please attach evidence that operate a yard trash transfer station or a solid we. Has the organic recycling facility begun operations? If this facility was operating in the previous cale. Include a check or money order for the \$35.00 register.	the facility vaste organics endar year, stration feer as received 709.330 and provided	owner or operics recycling for the annual reprinade payable to via online translation of the application of	rator has permis acility at this sit ort in Part C muother Florida Departion. A.C., and shall of the control of the Florida Departion.	Yes sion from e. Yes st be con partment of	the land	No downer No mental	to		
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11. 12. 13. spekno	If no, please indicate where these records will be keep. Does the registrant own the facility site? If you answered no, please attach evidence that operate a yard trash transfer station or a solid we have the organic recycling facility begun operations? If this facility was operating in the previous cale include a check or money order for the \$35.00 register Protection. Payment of \$35.00 for this registration we have that I have read Rules 62-709.320, 62-ecified in those rules. I also affirm that the information owledge. I have attached all documents and/or authorized.	the facility vaste organics received as received to provided in provided prizations the second secon	owner or operics recycling for the annual reprinade payable to via online translational for the application at are required.	rator has permis acility at this sit ort in Part C muother Florida Departion. A.C., and shall of the control of the Florida Departion.	Yes sion from e. Yes st be con partment of	the land	No downer No mental uiremen e best o	to		

	PART C - A	NNUAL REPORT						
14.	4. Calendar Year (January 1 through December 31) Covered by this Report:		2019					
15.	Values used in this report are in (SELECT ONE):	e in (SELECT ONE):		rds				
16.	6. For Existing Facilities that have not reported this information in the past, Amount of							
	a. Unprocessed Material On Site at Beginning of Repor	t Year:	0					
	b. Processed Material On Site at Beginning of Report Y	ear (total):	0					
17.	Total Quantity of Material Received During Report Year:	7414.00						
18.	Total Quantity of Material Lost Due to Processing (e.g. gr shrinkage, fires, etc.) During Report Year:	0						
19.	Total Quantity of Material Removed from Site for:							
	a. Use (e.g., landfill cover, fuel, mulch, compost, etc.):		6000.00					
	b. Disposal:		0					
	c. Other (transfer stations)		0					
20.	Total Quantity On Site at End of Report Year of:							
a. Unprocessed Material:			1414.00					
	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 7414.00 Total of Items 18, 19 and 20 7414.00								
	I affirm that the information provided in the annual repo	ort is true, accurate, an	d correct to the best of my	/ knowledge.				
John Arnold, Authorized Agent		John Arnold		07/13/2021				
Print Name and Title of Registrant/Permittee or Authorized Agent		Signature		Date				
Email address (if available): john.phillip.arnold@gmail.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 Biair Stone Road Tallahassee, Florida 32399-2400