Smith, George

From: John Arnold <john.phillip.arnold@gmail.com>

Sent: Monday, August 29, 2022 11:28 AM

To: SWD_Waste; Roach, Joshua

Cc: Agustin Moreno

Subject: 2Q22 WTPF WACS 87895 Angelos Recycled Materials Dade City

Attachments: 2Q22 WASTE TIRE QUARTERLY REPORT WACS 87895 ENTERPRISE ROAD 62-701_900_21.pdf

EXTERNAL MESSAGE

This email originated outside of DEP. Please use caution when opening attachments, clicking links, or responding to this email.

Enclosed, please find the referenced WTPF quarterly report.

Sincerely,

__

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



Florida Department of **Environmental Protection**

2600 Blair Stone Road Tallahassee, Florida 32399-2400

DEP	Form	# 62	!-701.9	900(21)	

Form Title: Waste Tire Processing Facility Quarterly

Effective Date: January 6, 2010

DEP Application No.

(Completed by DEP)

WASTE TIRE PROCESSING FACILITY QUARTERLY REPORT

			Administrative (information to			or a waste tire			
uarter covered by this report		(First quarter begins on January 1 of any given year)							
1. Facility name:	Angelo's Recyc	cled Materials Enterp	rise Recycling and Dis	sposal WTPF					
2. Facility mailin	g address: _	41111 Enterprise Roa	ad						
City: Dade City		County: Pasco			Zip: 33525				
3. Facility permi	t number: 30	03741-003-WT/02							
4. Facility teleph	none number	(352) 567 7676	3						
5. Authorized pe	erson preparin	greport:	hn Arnold						
6. Affiliation with	facility:	Engineer							
7. Telephone nu	ımber (if differ	entfrom above): <u>(813)</u>	477-	1719				
B. Activity: Rep	oort in tons								
	Beginning Inventory	Received	Processed	Consumed	Removed	Adjustments	Ending Inventory		
Used Tires	0	2887	2887	0	2887	0	0		
Other Whole Tires									
Processed Tires									
Processing Waste									
Other									
Total									
a. Explain all inv	ventory adjustn	nents.							
	d in which one dition relieved?		ory of inventory	exceeded the	permitted max	imum for that cat	egory. How		
	ss inventory at eets, if necessa		quarter, state h	now and when	this condition	will be relieved. A	Attach		
9. Certification: and complete		my knowledge	and belief, I cer	tify the informa	tion provided	n this report is tru	ue, accurate		
John Arnold			JOHN A	RNOLD /	Digitally signed by JOHN ARNOLD Date: 2022.08.29 11:23:49 -04'00'	8/29/22			
Drint No.	me of Authoriz	od Agont		ignature of Aut		Date			