

Department of Environmental Protection

DEP Form # <u>62-701.900(25)</u> Waste TireCollection Center Form Title <u>Permit Application</u>

Effective Date

DEP Application No. ________(Filled in by DEP)

Waste Tire Collection Center Permit Application

A Waste Tire Collection Center Permit allows up to 1,500 waste tires to be stored at the facility at any on time. If this quantity is exceeded, a Waste Tire Processing Facility Permit is required.

Perr	mit No.						
Renewal Modification Existi			Existing unpermi	tted facility \Box	Proposed nev	w facility □	
Part	t I-General Informatio	on:					
Α.	Applicant Informat	ion:					
1.	Applicant Name:						
2.	Applicant Street Add	ress:					
3.	City:		County:		Zip:		
4.	. Applicant Mailing Address:						
5.	City:		County:		Zip:		
6.	Contact person:		Phone:	()	FEID No:		
7.	 Y. Have any enforcement actions been taken by the Department against the applicant relating to the operation of any solid waste management facility in this state? This includes any Complaint, Notice of Violation, or revocation of a permit or registration, as well as any Consent Order in which a violation of Department rules is admitted. It does not include a Warning Letter, Warning Notice, Notice of Noncompliance, or other similar document which does not constitute agency action. YesNoIf yes, attach a history and description of the enforcement actions. 						
В.	Facility Information:						
1.	Facility Name:						
2.	. Facility Street Address (Main Entrance):						
3.	City:		County:		Zip:		
4.	Facility Mailing Addre	ess:					
5.	City:		State:		Zip:		
6.	Contact Person:			Phone:	()		
Fac	ility Location Coordina	tes:					
7.	Section:		Townsh	ip:	Range:		
8.	Latitude:		Longitude:				
9.	Anticipated date for s	starting constru	ction	and for completion of construction			
10.	Anticipated date for r	eceipt of tires					
			Mail complet appropriate district o				

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

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C.	Land Owner Information (if different from applicant):								
1.	Owner's name:								
2.									
3.	3. City:State:	Zip:							
4.	4. Authorized Agent:	Agent's phone: ()							
5.	5. Current lease expires:								
D.	Facility Operator Information (if different from applicant):								
1.	1. Operator's name:								
2.	2. Operator's mailing address:								
3.	3. City: State:	Zip:							
4.	4. Contact person:	Phone: ()							
E.	Preparer of Application:								
1.	1. Name of person preparing application:								
2.	2. Mailing address:								
3.	3. City:State:	Zip:							
4.	4. Phone: ()								
5.	5. Affiliation with facility:								
Par	art II Operations:								
A .	Describe the general operation of the collection center								
В.	. Describe how and where the waste tires will be used, sold,	or disposed of							

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Part III-Attachments:

Please attach the following information to this application:

- A. A plot plan of the collection center showing:
- 1. Boundaries of the area being permitted, easements, and rights of way.
- 2. All wetlands and water bodies in or within 200 feet of this area
- 3. The waste tire storage area.
- 4. All structures including buildings, fences, roadways, stormwater control devices, and water wells.
- B. A copy of a fire safety survey of the collection center
- C. A copy of the emergency preparedness manual.
- **D.** A letter from the landowner (if different from applicant) authorizing the use of the land as a waste tire collection center.
- E. A check for the application fee.
- NOTE: The record keeping requirements of 62-711.400(5) apply to collection centers. However, reports to the Department are not required.

Part IV Certification:

To the best of my knowledge and belief, I certify the information provided in this application is true, accurate, and correct. I have attached all documents and/or authorizations that are required.

Print Name of Authorized Agent

Signature of Authorized Agent

Date