



Public Works and Environmental Services Department
ENVIRONMENTAL PERMITTING DIVISION
1 North University Drive, Mailbox #201 Plantation, Florida 33324
954-519-1483 FAX 954-519-1412

Application For Waste Regulation (Check all that apply)

Please type or print in ink. All applicable items must be filled in or marked "not applicable" in order to avoid delay in processing this application. Attach here a check for the license filing fee, in accordance with the Broward County Code of Ordinances Chapter 27-216(b)(1) and payable to the Broward County Board of Commissioners. Please submit to Environmental Permitting Division (EPD) one original copy of the application along with supporting documents and engineering plans/drawings or electronically through [ePermits](https://www.broward.org/Environment/pages/Notice.aspx). If you are applying for a license to construct, operate or make a major modification to a significant environmental impact facility, you may be required to provide public notices pursuant to Chapter 27 Section 27.170 of the Broward County Administrative Code. For additional information visit [Broward.org/Environment/pages/Notice.aspx](https://www.broward.org/Environment/pages/Notice.aspx).

Purpose of application (check one): ☐ New ☐ Renewal ☐ Modification

- ☐ **BORROW PIT RECLAMATION PROJECTS** (Complete Sections A, B, C, I & J)
- ☐ **LANDFILLS** (Complete Sections A, B, D, I & J)
- ☐ **MATERIAL RECOVERY FACILITY OR TRANSFER STATION** (Complete Sections A, B, E, I & J)
- ☐ **COMPOST FACILITY** (Complete Sections A, B, F, I & J)
- ☐ **WASTE TIRE FACILITY** (Complete Sections A, B, G, I & J)
- ☐ **CONSTRUCTION AND DEMOLITION DEBRIS DISPOSAL FACILITY**
(Complete Sections A, B, H, I & J)

A. General Information for All Facilities

1. Facility Name: _____
Address: _____
City: _____ State: _____ ZIP: _____ Tel: _____
Name of On-site Contact: _____
Email Address: _____
2. Applicant Name (Business Owner or Representative): _____
Address: _____
City: _____ State: _____ ZIP: _____ Tel: _____
Email Address: _____
3. Authorized Agent Name: _____
Address: _____
City: _____ State: _____ ZIP: _____ Tel: _____
Letter of Authorization (check if attached) ☐
Email Address: _____

4. Facility Operator Name (if different than applicant): _____
 Address: _____ Company Name: _____
 City: _____ State: _____ ZIP: _____ Tel: _____
 Letter of Authorization (check if attached) ☐
 Email Address: _____
5. Landowner Name: _____
 Address: _____
 City: _____ State: _____ ZIP: _____ Tel: _____
 Email Address: _____
6. List PWESD, Florida Department of Environmental Protection, and all other permits or licenses for this facility:

7. Facility is a: Significant Environmental Impact Facility ☐
8. Site located in: ☐ Wetlands ☐ Flood plain ☐ Other: _____
9. Area within property boundary: _____ Area within facility boundary: _____
10. Number of operating staff: _____
11. Final residue is _____ % of waste intake.
 Residue is disposed of at (site name and location): _____
12. Spotters: ☐ Yes ☐ No Number of spotters used: _____
13. Security to prevent unauthorized use: ☐ Yes ☐ No
14. Weighing scales used: ☐ Yes ☐ No

B. General Information for All Facilities

Note: The information required in this section does not have to be resubmitted for a renewal license if the information has not changed since the last license was issued. All engineering drawings shall be signed and sealed by a professional engineer registered with the State of Florida.

(check if attached)

1. _____ A vicinity map or aerial photograph current within one year. This map shall show all airports located within five (5) miles, and the land use and zoning category within one (1) mile of the facility;
2. _____ A site plan showing dimensions and details of the proposed areas for receiving, processing, production, storage, and disposal;
3. _____ Topographic maps showing contour interval used, original elevations and proposed final contours, general outline of facility area, access roads, grades required for proper drainage, any special drainage devices, and all other pertinent information;
4. _____ Designed capacity (volumetric) of the proposed facility, including the receiving, processing, storage, and disposal areas;
5. _____ Anticipated type, quantity, and source of material to be received;
6. _____ Detailed engineering drawings of the site that indicate location of roads, buildings, equipment to be installed or used, fences and gates, landscaping, sewer and water lines, fire lanes, storm water system, and monitoring wells, if required. The drawings shall show final grade contours, as applicable;
7. _____ A copy of permit applications or permit(s) for storm water control issued by the appropriate federal, state, regional, or local agencies, or documentation that no such permit is required;

8. ____ Documentation that the applicant either owns the property or has notarized authorization from the property owner to use the land and conduct long term care, as applicable, for the activity proposed in the application. Such authorization shall include proof of ownership;
9. ____ Documentation from the local zoning authority stating that the facility is in conformance with local zoning requirements;
10. ____ An operation plan which includes at a minimum:
 - a. Designation of persons responsible for operation, control and maintenance of the facility;
 - b. Proposed equipment and manufacturers specifications;
 - c. Description of the facility's in-house training program to operate the facility and to identify any hazardous or prohibited materials received at the facility;
 - d. Inspection procedures for controlling waste at the facility;
 - e. Number and location of spotters and procedures to be followed if prohibited wastes are discovered;
 - f. Vehicle traffic control and unloading;
 - g. An emergency plan which shall contain, at minimum, the following elements:
 - 1) A list of names and telephone numbers of persons to be contacted in the event of a fire, flood, or other emergency;
 - 2) A list of the emergency response equipment at the site, its location, and how it should be used. In the event of a fire or other emergency; and
 - 3) A description of the procedures that should be followed in the event of a fire, including procedures to contain and dispose of the material generated as a result of the fire; and
 - 4) Contingency operations, including reserve or alternate equipment, or alternate waste handling and disposal methods in case of emergency such as a natural disaster, equipment failure or receipt of prohibited materials; and
 - 5) Describe the flow of solid waste expected during regular facility operations, including procedures for start up and shut down and inspection procedures for controlling waste at the facility; and
 - h. Discussion of potential safety hazards and control methods;
 - i. Identification and capacity of temporary on-site storage areas for materials handled and provisions for solid waste and leachate containment;
 - j. Identification of potential ground water and surface water contamination;
 - k. Plan for disposal of unmarketable recyclables and residue; and
 - l. Other necessary details to support the engineering report.

C. Borrow Pit Reclamation Projects

Note: Requirements of Chapter 27 of the Broward County Code apply to all borrow pit reclamation projects. (check one).

- | | |
|---|--|
| ☐ Less than 100 yd3 of fill material | ☐ 10,001 to 100,000 yd3 of fill material |
| ☐ 101 to 1,000 yd3 of fill material | ☐ greater than 100,000 yd3 of fill material |
| ☐ 1,001 to 10,000 yd3 of fill material | |

1. Directions to locate site: _____
2. Names, addresses and zip codes of adjacent property owners whose property also adjoins the pit (excluding applicant):
 - a. _____ b. _____ c. _____
3. Describe the general operation of the borrow pit reclamation project: _____
4. Describe how the incoming material will be inspected prior to depositing in the borrow pit and what will be done with unacceptable material which may inadvertently be received on site:

5. Turbidity, erosion, and sedimentation controls proposed: _____
6. Fill Area: _____ sq.ft. _____ acres _____
7. Amount of fill required for the project: _____ cu. yds. Provide calculations used to determine the amount of fill required.
8. Type of fill: _____ Source of fill: _____
9. Provide four sets of drawings on 8½" x 11" sheets and include:
 - a. A site plan clearly identifying the existing boundaries of the borrow pit and the proposed area to be filled.
 - b. Plan view and cross-sectional view drawings which identify existing and proposed water depth and borrow pit banks and slopes.
10. Provide a ground water monitoring plan (include the following):
 - a. A site plan with the proposed monitoring well locations.
 - b. Proposed monitoring well construction specifications.

D. Landfills

Note: Requirements of Chapter 27 of the Broward County Code and Sec. 62-701 FAC, apply to all landfills.
(check one) ☐ Class I ☐ Class III

1. Describe the general operation of the landfill: _____
2. Types of waste received:

☐ Residential	☐ Construction and Demolition Debris
☐ Commercial	☐ Shredded/cut tires
☐ Incinerator/WTE ash	☐ Yard trash
☐ Treated biomedical waste	☐ Septic tank waste
☐ Water treatment sludge	☐ Industrial ☐ Other _____
3. Number of spotters used: _____ Days working face covered: _____
4. Number of monitoring wells: _____ Number of surface monitoring points: _____
5. Gas controls used: ☐ Yes ☐ No Type of controls: ☐ Active ☐ Passive
 Gas flaring: ☐ Yes ☐ No Gas recovery ☐ Yes ☐ No
6. Storm water collected: ☐ Yes ☐ No
 Type of treatment: _____ Name of class of receiving water: _____
7. Landfill Unit - liner type:

☐ Natural soils	☐ Double geomembranes	☐ Single composite
☐ Single clay liner	☐ Geomembrane & composite	☐ Slurry wall
☐ Single geomembrane	☐ Double composite	☐ None
☐ Other _____		
8. Leachate collection method:

☐ Collection pipes	☐ Sand layer	☐ Geonets
☐ Gravel layer	☐ Well points	☐ Interceptor trench
☐ Perimeter ditch	☐ Other _____	
9. Process water/leachate management: Recycled: ☐ Yes ☐ No
 Storage method: Tanks: Type _____ Size _____ ☐ Other _____
 Treatment method used: _____
10. Leachate disposal method:

☐ Recirculated	☐ Pumped to WWTP	☐ Transported to WWTP
☐ Discharged to surface water	☐ Injection well	☐ Evaporation
☐ Other _____		

E. Material Recovery Facility or Transfer Station

Note: Requirements of Chapter 27 of the Broward County Code and Sec. 62-701 FAC, apply to all material recovery facilities and transfer stations. (check all that apply).

- ☐ Construction and demolition debris ☐ Vegetative debris and yard trash
☐ Commercial waste ☐ Residential bulky waste
☐ Industrial waste ☐ Household waste
☐ Other _____

1. Describe the general operation of the material recovery facility or transfer station: _____
2. Disposal area: Total _____ acres Used _____ acres Available _____ acres
3. Processing rate: _____ yd³/day _____ ton/day _____ gal/day
4. Attach proof of financial responsibility as required by Sec. 62-701 FAC or a calculation showing that financial assurance documents currently on file with the Division are sufficient to assure closing of the material recovery facility as well as any other solid waste management facility at the location.

F. Compost Facilities

Note: Requirements of Chapter 27 of the Broward County Code, and Sections 62-701 and 709 FAC, apply to all compost facilities. (check all that apply).

- ☐ Vegetative debris or yard trash ☐ Manure
☐ Other solid waste Specify _____

1. Facility type: ☐ In-vessel ☐ Static pile ☐ Windrow ☐ Other: _____
2. Describe the general operation of the compost facility: _____

G. Waste Tire Facilities

Note: Requirements of Chapter 27 of the Broward County Code; and Sections 62-701 and 711, FAC, apply to all waste tire facilities. (check all that apply).

- ☐ Waste Tire - Processing Facility (> 1,000 tires are stored or processed during a 30 day period)
☐ Waste Tire - Small Processing Center (<= 1,000 waste tires to be stored at any one time and <= 1,000 waste tires to be processed during any 30 day period)
☐ Waste Tire - Collection Center (<=1,000 tires to be stored at any one time)

1. Describe the general operation of the waste tire facility: _____
2. Type of processing facility: (check all that apply):
☐ Shredder ☐ Cutter ☐ Incinerator only ☐ Pyrolysis ☐ Chopper
☐ Supplemental fuel user ☐ Incinerator with energy recovery
☐ Other (explain): _____
3. For reporting quantity of tires in tons, tires will be (check all that apply):
☐ weighted on site ☐ weighed off site ☐ weights will be calculated
4. Indicate the maximum quantities of whole waste tires, processed waste tires, and processing residuals, expressed in tons, to be stored at the facility, in accordance with Rule 62- 711.530(2), F.A.C.

	Outdoor Storage (tons)	Outdoor Storage (sq. ft.)	Indoor Storage (tons)	Indoor Storage (sq. ft.)	Total Storage (tons)
Whole waste tires:					
Processed tires:					
Processing residuals:					
TOTALS					

5. Provide copy of the fire safety survey.
6. Provide a description of how 75% of the annual accumulation of waste tires will be removed for disposal or recycling.
7. Attach proof of financial responsibility as required by Sec. 62-701 FAC or a calculation showing that financial assurance documents currently on file with the Division are sufficient to assure closing of the waste tire facility as well as any other solid waste management facility at the location.

H. Construction and Demolition Debris Disposal Facility

Note: Requirements of Chapter 27 of the Broward County Code, and Sec. 62-701 FAC, apply to all construction and demolition debris disposal facilities.

1. Describe the general operation of the construction and demolition debris disposal facility:

2. Engineering Report
 - a. Geotechnical investigation
 - b. Hydrogeological investigation
 - c. Design/planned active life
3. Operational Plan
 - a. Description of operations
 - b. Operation manual
 - c. Training plan
4. Ground Water Monitoring Plan
5. Financial Assurance
 - a. Closure cost estimate
 - b. Financial assurance instrument
 - c. Long-term care documentation

I. Certification by Applicant

I, the owner/authorized representative, am aware that statements made in this form and attached exhibits are an application for a license from the EPD and certify that the information in this application is true, correct, and complete to the best of my knowledge and belief. Further, I, the undersigned, agree to comply with all the rules and regulations of Broward County. It is understood that the license is not transferable and, if granted, the EPD will be notified prior to the sale or legal transfer of this licensed establishment.

Signature of Owner or *Authorized Agent

Name and Title (Please Print)

Date

Email Address

* Attach letter of authorization if agent is not a governmental official, owner, or corporate officer.

J. Certification by Engineer

Professional Engineer Registered in Florida or Public Officer as required in Section 403.707 and 403.707(5), Florida Statutes.

This is to certify that the engineering features of this solid waste management facility have been designed / examined by me and found to conform to engineering principals applicable to such facilities. In my professional judgment, this facility, when properly maintained and operated, will comply with all applicable provisions of the Broward County Code of Ordinances, statutes of the State of Florida, and rules of Florida Department of Environmental Protection. It is agreed that the undersigned will provide the applicant with a set of instructions of proper maintenance and operation of the facility.

Signature

Mailing Address

Name and Title (please print)

City, State, Zip Code

Florida Registration Number (*affix seal*)

Telephone Number

Date

Email Address

* Attach letter of authorization if agent is not a governmental official, owner, or corporate officer.