



Application for Permit to Operate or Modify a Resource Recovery and Management Facility (RRMF)

GENERAL REQUIREMENT: In accordance with Sections 24-5 and 24-18 of the Code of Miami-Dade County, a Resource Recovery and Management Facility Permit is required for facilities which engage in the disposal, recycling, incineration, processing, storage, transfer or treatment of solid or liquid waste, excluding sewage treatment, industrial waste treatment, or facilities exclusively within State or Federal jurisdiction.

FILING INSTRUCTIONS: Two (2) copies of a complete RRMF permit application and applicable supporting information, including the appropriate permit application review fee in accordance with the latest RER approved operating permit fee schedule (made payable to "Miami-Dade County"), shall be submitted/mailed to the RER Pollution Regulation Division at the above referenced address.

A. APPLICANT INFORMATION

- 1. Applicant ¹ (Operating Authority, Corp/LLC/LP): _____
- 2. Mailing Address: _____
Street / P.O. Box City State Zip
- 3. Authorized Representative: _____ 4. Title: _____
- 5. Email Address: _____ 6. Phone: _____
- 7. Emergency Contact: _____ 8. Phone: _____

B. FACILITY INFORMATION

- 1. Full Facility Address: _____
Street Unit/Bay City Zip
- 2. Facility Folio No(s): _____
(List All Applicable Numbers)
- 3. Indicate proposed business use at the subject property: _____
- 4. Existing Zoning Land Use Classification / Zoning Resolution: _____
- 5. Domestic sewage disposal method available at the facility (select one):
 Public Sanitary Sewer System Septic Tank Other (specify): _____
- 6. Potable water source available at the facility (select one):
 Public Water Main System Well System Other (specify): _____

C. PROPERTY OWNER INFORMATION

- 1. Property Owner Name: _____
- 2. Mailing Address: _____
Street / P.O. Box City State Zip
- 3. Contact Person: _____ 4. Title: _____
- 5. Email Address: _____ 6. Phone: _____

D. AUTHORIZED AGENT / CONSULTANT INFORMATION

- 1. Authorized Agent / Consultant: _____
- 2. Mailing Address: _____
Street / P.O. Box City State Zip
- 3. Contact Person: _____ 4. Title: _____
- 5. Email Address: _____ 6. Phone: _____

E. CLASSIFICATION OF APPLICATION (select one)

- New (Annual Operating Permit)* New (One - Time Permit) New (Pilot Study) Modification of Permitted Facility

If applying for a one-time permit or pilot study, indicate length of time of proposed operations: _____ Days

*The relocation of an existing permitted facility must be filed as a "New" application.

Notes:

1. For corporate entities, name specified shall match State of Florida Division Division of Corporation records.

F. FACILITY TYPE (check all that apply)

Note: C & D = Construction and Demolition Debris WT = Waste Tire MRF = Materials Recovery Facility P & C = Paper & Cardboard
 TS = Transfer Station UT = Used Tire BW = Biomedical Waste YT = Yard Trash (vegetative waste)

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> C & D MRF * | <input type="checkbox"/> Class I MRF * | <input type="checkbox"/> YT Mulching / Composting * | <input type="checkbox"/> Concrete Crushing |
| <input type="checkbox"/> C & D TS * | <input type="checkbox"/> Class III MRF * | <input type="checkbox"/> WT Storage / Processing * | <input type="checkbox"/> UT Storage / Processing * |
| <input type="checkbox"/> C & D Landfill * | <input type="checkbox"/> Class I TS * | <input type="checkbox"/> P & C Recycling | <input type="checkbox"/> Plastics Recycler |
| <input type="checkbox"/> Class I Landfill * | <input type="checkbox"/> Class III TS * | <input type="checkbox"/> Ferrous Metal Recycler | <input type="checkbox"/> Non-Ferrous Metal Recycler |
| <input type="checkbox"/> Class III Landfill * | <input type="checkbox"/> BW Storage / Processing | <input type="checkbox"/> Electronics Recycler | |
| <input type="checkbox"/> Other : _____ | | | |

* Pursuant to Chapters 62-701, 62-709, 62-711, Florida Administrative Code (FAC), the submittal of a separate FDEP Solid Waste Management Facility permit application may also be required.

G. OPERATIONAL INFORMATION

1. In the space below provide a description of the operations to be conducted at the subject property/facility, or modification of operation as applicable.

2. In the space below describe the types and quantities of each material/waste stream to be stored/processed at the subject property

3. Will all incoming waste stream(s) be source separated?..... Yes No
 If No, describe method(s) for segregation of commingled incoming waste streams at the facility (if any).

4. Will facility be open to accept material from the general public? Yes No

5. If proposing a metal recycling operation, will white goods be accepted the with the incoming scrap metal waste stream?..... Yes No N/A

6. Daily maximum quantity of waste to be stored / processed at the facility: _____ tons/day or _____ yd³/day or _____ Lbs / day

7. Operation includes the storage / processing of Waste Tires ? Yes No If Yes, indicate maximum quantity to be stored at any time: _____ tires

8. Indicate total available area for all indoor and/or outdoor areas for the storage of the proposed incoming material / waste stream(s).

Indoor : _____ ft² or _____ acres Outdoor : _____ ft² or _____ acres

9. Maximum combined storage capacity at the subject property (in/outdoor): _____ tons or _____ yd³ or _____ Lbs

H. SUPPLEMENTAL INFORMATION

NEW PERMIT APPLICATIONS: ALL ITEMS OUTLINED IN THIS SECTION SHALL BE INCLUDED AND ATTACHED WITH THE PERMIT APPLICATION.

PERMIT MODIFICATIONS: SHALL INCLUDE ALL APPLICABLE ITEMS OUTLINED IN THIS SECTION BASED ON SCOPE OF MODIFICATION.

1. Letter of Authorization From Registered Corporate Officer

If the individual listed in section A of this form is not a registered officer of the applicant (corporate entity) as shown on State of Florida Division of Corporation records (<http://www.sunbiz.org>), a notarized letter from a valid corporate officer granting said individual authorization to act as a representative for the applicant shall be attached.

2. Proof of Connection to Public Water & Sewer Utility

If the subject facility/property is served by both a public water main and public sanitary sewers then copies of one of the following must be provided to establish proof of connection to said systems:

(i) Utility water & sewer service agreement(s) or; (ii) Signed water & sewer verification form from utility or; (iii) Copy of plumbing permit from building department for connection to water/sewer utilities and corresponding proof of final inspections.

Note: Pursuant to Sections 24-43.1(4) and 24-43.1(6) of the Code of Miami-Dade County, and prior to the approval of a RRMF application, if the facility is served by a potable water supply system other than a public water main and/or a sewage disposal/treatment method other than public sanitary sewers, a variance from the Environmental Quality Control Board (EQCB) may be required pursuant to Sections 24-12 and 24-13 of the Code.

3. Authorization from Unincorporated or Municipal Zoning Authority

A determination from the applicable zoning authority indicating that the operation of a Resource Recovery and Management Facility at the subject property is in conformance with zoning requirements shall be provided. Due to restrictions associated with various zoning classifications, and prior to the submittal of a RRMF permit application, RER recommends that both the applicant and applicable zoning authority consider relevant aspects of the proposed operation as part of said determination including: 1) scope of proposed operation(s), 2) types of materials/waste streams to be stored and/or processed, 3) storage and processing locations (both indoor and outdoor), 4) type of equipment to be used.

4. Land Use Authorization

Documentation (e.g., a warranty deed, certified copy of a lease agreement, operating agreement or contract, etc.) that the applicant either owns the property or has legal authorization from the property owner to use the site for a RRMF operation shall be provided with the application.

5. Boundary Survey & Legal Description of Property

A signed/sealed boundary survey of the property prepared by a Professional Land Surveyor and Mapper registered in the State of Florida under Chapter 472, F.S., shall be provided with the application.

6. Facility Site Plan(s)

A signed and sealed site plan prepared by a Professional Engineer registered in the State of Florida under Chapter 471, F.S., at an appropriate size and scale, shall be provided with the application. At a minimum, said plan shall depict the following:

- i) Location of facility relative to adjacent properties, street(s) and intersection(s).
- ii) Total acreage of facility.
- iii) Relevant features such as water bodies or wetlands on or within 200 feet of the site, or note indicating that no such features are present.
- iv) Location of potable water wells on or within 500 feet of the site, or note indicating that no such wells are present.
- v) Location of septic tank system(s) serving the property, or note indicating that no such system(s) are present.
- vi) Facility layout including identification of all proposed and existing to remain structures.
- vii) Identification / Delineation of all loading, unloading, storage and processing areas, including identification of enclosed/roofed structures and areas subject to impacts from rainfall events.
- viii) Identification of storage capacities of all loading, unloading, storage, processing areas.
- ix) Identification of all existing and proposed pervious and impervious surfaces (e.g., concrete, asphalt, gravel, etc) for all processing/storage areas.
- x) Stormwater runoff direction and point(s) of discharge to groundwater based on site topography.
- xi) Location of existing and/or proposed groundwater monitoring wells relative to tipping, processing and storage locations, and stormwater management structures (e.g., catch basins, french drains, exfiltration trenches, etc.).

7. Description of Waste Storage/Processing Activities

A description of the facility's waste storage/processing activities shall be provided with the following information:

- i) The types of wastes, recyclable or recovered materials to be accepted, managed and/or processed at the facility.
- ii) The expected daily average and maximum weights/volumes of materials to be managed or processed.
- iii) Description of how incoming materials will be stored, managed and/or processed.
- iv) Description of how the incoming materials will flow through the facility including locations of all loading, unloading, sorting, processing and storage areas.
- v) The maximum quantity of material that will be stored at the facility at any one time, including supporting calculations to substantiate said quantity based on the maximum storage/processing capacity of the facility.
- vi) The maximum time materials will be stored at the facility.
- vii) The expected disposition of materials after leaving the facility, including a listing of expected / contracted disposal locations.
- viii) Access control features/measures to prevent unauthorized disposal of material at the facility.
- ix) Listing of the types of equipment that will be used at the facility.
- x) Description of maintenance and/or repair activities to be undertaken at the facility, including secondary containment provisions for hazardous materials / wastes handled and/or generated as a result of said activities.

8. Operations Plan

- i) Provide an operations plan that describes all aspects of the facility operations in detail. At a minimum, the Operations Plan shall include:
- ii) A listing of the person(s) responsible for the operations (e.g. facility manager, supervisor, etc.), including relevant contact information.
- iii) A description of the operation and functions of all processing equipment that will be used, including design criteria and expected performance.
- iv) A description of the procedures to inspect/monitor materials received at the facility, including identification of hazardous and prohibited materials.
- v) A description of the procedures to control the flow of material through the facility, including the management, storage and disposition of any unacceptable material inadvertently received. A listing of companies/locations used for the disposal/transport of unacceptable materials shall also be included.

9. Contingency / Emergency Plan

A contingency plan covering operational interruptions and emergencies such as fires, explosions, or natural disasters adequate for the operations being permitted, shall be provided with this application. The contingency plan shall be kept at the facility at all times and shall be accessible to facility operators. At a minimum, the contingency plan shall include:

- i) Designation of persons responsible for implementation of the contingency plan.
- ii) Notification procedures to appropriate local emergency response agencies, including RER's 24-hour emergency response line (305-372-6955).
- iii) A description of emergency procedures to be followed, including the location of fire-fighting equipment and explanations of how to use this equipment.
- iv) Provisions for the immediate shut down of those parts of the facility affected by the emergency.

10. Closure Plan

Submit a facility closure plan in the event of permanent closure or excessively long closure periods of the facility that identifies the steps needed to shut down the specific operations pertaining to waste processing and management of any on site solid waste.

11. Department of Public Works and Waste Management (PWWM) Approval of RRMF Operation(s)

In accordance with Section 24-18(A) of the Code of Miami-Dade County (the Code), no Resource Recovery and Management Facility permit shall be granted without the written recommendation and approval of the Director of the Department of Solid Waste Management (now known as the Department of Public Works and Waste Management - PWWM), issued pursuant to the provisions of Chapter 15 of the Code. The Director of the Department of Environmental Resources Management (now known as the Department of Regulatory and Economic Resources - RER) or his designee, in his discretion, may require conditions, limitations or restrictions as part of the operating permit if said conditions, limitations and restrictions are consistent with the requirements of Chapter 24 of the Code.

Pursuant to the above requirements, the RER will forward a copy of the RRMF permit application and accompanying supplemental information to the PWWM for its review and recommendations.

I. ADDITIONAL REQUIREMENTS

THE ITEMS OUTLINED IN THIS SECTION MAY BE REQUIRED BY UPON REVIEW OF THE PROPOSED OPERATION OR PERMIT MODIFICATION.

1. Topographic Survey

A signed/sealed topographic survey of the property prepared by a Professional Land Surveyor and Mapper registered in the State of Florida under Chapter 472, F.S.

2. Groundwater Monitoring Plan (GWMP)

Upon review of the RRMF permit application and proposed facility operations, RER may require the submittal of a GWMP covering all areas where waste is proposed to be stored or processed at the facility. If deemed applicable, the GWMP shall be prepared by a State of Florida registered Professional Engineer or Professional Geologist knowledgeable in hydrogeologic investigations. Said GWMP shall be prepared and finalized in accordance with the steps outlined below.

i) A preliminary GWMP, to be reviewed and approved by RER, shall be submitted to include :

- (A) A proposal for the installation of upgradient and downgradient groundwater monitoring wells for the detection and monitoring of any potential on site ground pollution based on the nature of the operation.
- (B) A detailed description/rationale for the proposed number of wells and corresponding locations based on on-site grading, storm water run off direction, groundwater flow direction, potential groundwater contamination and location of stormwater management structures.
- (C) Well location plan(s) and construction details.
- (D) Monitoring and Reporting frequency at an interval not to exceed one hundred eighty (180) calendar days.
- (E) Proposed analytical suite for the assessment of ground water quality at the proposed well locations which, at a minimum, shall include:
 - (1) Volatile Organic Aromatics (VOAs) and Volatile Organic Halocarbons (VOHs) by EPA method 8260 or 624.
 - (2) Benzene, Toluene, Ethylbenzene and Total Xylenes (BTEX) by EPA method 8260 or 624
 - (3) Polycyclic Aromatic Hydrocarbons (PAHs) by EPA Method 8270 or 625.
 - (3) Total Recoverable Petroleum Hydrocarbons (TRPHs) by FL-PRO method.
 - (4) Ammonia as Nitrogen (N)
 - (5) RCRA metals (Silver, Arsenic, Barium, Cadmium, Chromium, Mercury, Lead and Selenium).
 - (6) In addition to RCRA metals, metal recycling facilities shall also monitor for Iron, Aluminum, Nickel, Copper and Zinc.
 - (7) Additional parameters based on site history, site conditions, and as deemed appropriate by the consultant and/or RER.

ii) Upon obtaining RER approval for the preliminary GWMP, a Baseline Groundwater Monitoring Report (BGWMR) that includes the items outlined below shall be submitted to RER for review:

- (A) Original laboratory reports prepared in accordance with the requirements of Rule 62-160.340, FAC. Said reports shall include analytical results for all monitoring wells in accordance with the analytical suite approved as part of the preliminary GWMP.
- (B) Water levels recorded prior to evaluating wells or sample collection. Elevation reference shall include the top of the well casing and land surface at each well site at a precision of plus or minus 0.01 feet (using a consistent nationally recognized datum).
- (C) Summary of any water quality criteria standards or criteria that are exceeded.
- (D) A signed and sealed ground water table contour map, with contours at no greater than one-foot intervals unless site specific conditions dictate otherwise, which indicates ground water elevations and flow direction.

iii) Upon review of the BGWMR results, the RER will conduct one of the following:

- (A) Approve the preliminary GWMP as the final GWMP for the proposed operation/facility or;
- (B) Request the submittal of an amended GWMP that addresses any additional RER comments/recommendations based on the BGWMR results obtained.

3. Prohibition of RRMF Operations within Wellfield Protection Areas

Variance(s) from the Environmental Quality Control Board (EQCB) may be required pursuant to Sections 24-12 and 24-13 of the Code of Miami-Dade County (the Code) prior to the approval of a proposed RRMF operations located within a Wellfield Protection Area in accordance with the provisions of Section 24-43(11) of the Code.

4. Requirements For Metal Recycling Facilities

In addition to the requirements stipulated in the previous sections of this permit application, any prospective metal recycling operator shall provide information specifically demonstrating how it intends to comply with the requirements of Section 24-47 of the Code of Miami-Dade County "Regulations for the operation of metal recycling facilities".

5. Class VI Permit or Equivalent Stormwater Management Permit

Upon review of the RRMF permit application and proposed facility operations, a determination regarding the applicability of a RER Class VI permit (or other applicable permit) may be requested from the RER Water Control Section (WCS). If deemed applicable, the applicant will be responsible for obtaining all necessary permits and approvals from the WCS prior to the completion and approval of a RRMF permit application.

J. APPLICATION CERTIFICATIONS

1. Certification by Applicant

NOTE: THIS DOCUMENT MUST BE NOTARIZED

The undersigned authorized representative for the Operating Authority is fully aware that the statements made in this application for an operating permit are true, correct, and complete to the best of his/her knowledge. Furthermore, the undersigned agrees to maintain and operate the facility in such a manner as to comply with the provisions of Chapter 24 of the Code of Miami-Dade County and all applicable State and Federal regulations. The representative also acknowledges that a permit, if granted by the Department, will be non-transferable and that a prompt notification shall be provided to the Department upon sale, change of location, or legal transfer of the permitted facility.

Authorized Representative: _____ Title: _____
 Signature: _____ Date: _____

Before me, a Notary Public duly qualified under the laws of the State of _____ to administer oaths, personally appeared _____ Being by me duly sworn, deposes and says that he/she has read the foregoing application and knows the contents thereof, and that the same is true of his/her own knowledge. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal this _____ day of _____ A.D., (year) _____.

My Commission Expires: _____

Notary Public Name: _____

NOTARY SEAL

2. Certification by Professional Engineer Registered in the State of Florida

This is to certify that the engineering features of this resource recovery and management facility have been designed / examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgment, this facility, when properly maintained and operated, will comply with all applicable statutes of the State of Florida and Chapter 24 Code of Miami-Dade County, Florida. It is agreed that the undersigned will provide the applicant with a set of instructions of proper maintenance and operation of the facility.

Name: _____
 Florida Registration No: _____ Phone: _____
 Email: _____
 Date: _____ Signature: _____



(affix seal)

K. PERMIT APPLICATION SUBMITTAL CHECKLIST (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Completed, Notarized, Signed and Sealed RRMF Permit Application Form | <input type="checkbox"/> Facility Site Plan |
| <input type="checkbox"/> Permit Application Processing Fee (payable to "Miami-Dade County") | <input type="checkbox"/> Boundary Survey |
| <input type="checkbox"/> Notarized Letter of Authorization From Valid Corporate Officer (if applicable) | <input type="checkbox"/> Description of Waste Storage/Processing Activities |
| <input type="checkbox"/> Proof of Connection to Public Water & Sewer Utility | <input type="checkbox"/> Operations Plan |
| <input type="checkbox"/> Zoning Determination from Applicable Zoning Authority | <input type="checkbox"/> Contingency / Emergency Plan |
| <input type="checkbox"/> Land Use Authorization from Property Owner (if applicable) | <input type="checkbox"/> Closure Plan |

NOTE: TWO COPIES OF THE ABOVE ITEMS MUST BE PROVIDED AS PART OF THE SUBMITTAL.