

RECEIVED

DEC 17 2010

RECIPROCATING INTERNAL COMBUSTION ENGINES
AIR GENERAL PERMIT REGISTRATION FORM

Bureau of Air Monitoring
& Mobile Sources

Part II. Notification to Permitting Office

(Detach and submit to appropriate permitting office; keep copy onsite)

Instructions: To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050, F.A.C. (\$100 as of the effective date of this form)

0951294-002

Registration Type

Check one:

INITIAL REGISTRATION - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit).

RE-REGISTRATION (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C., or any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only

If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.

- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s): _____
- No air operation permits currently exist for this facility.

General Facility Information

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

E & H Car Crushing Company Inc.

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)

E & H Car Crushing Company Inc.

Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: 106 Gloucester Street

City: Orlando

County: Orange

Zip Code: 32833-3459

Facility Start-Up Date (Estimated start-up date of proposed new facility.) (N/A for existing facility)

N/A

Owner/Authorized Representative

Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: Harold Erb, Owner

Owner/Authorized Representative Mailing Address

Organization/Firm: E & H Car Crushing Company, Inc.

Street Address: 106 Gloucester Street

City: Orlando

County: Orange

Zip Code: 32833-3459

Owner/Authorized Representative Telephone Numbers

Telephone: (407) 568-5255

Fax: (407) 568-8675

Cell phone (optional): (407) 963-3978

Facility Contact (If different from Owner/Authorized Representative)

Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: Jim Erb, Facility Operations Manager

Facility Contact Mailing Address

Organization/Firm: E & H Car Crushing Company, Inc.

Street Address: 106 Gloucester Street

City: Orlando

County: Orange

Zip Code: 32833-3459

Facility Contact Telephone Numbers

Telephone: (407) 568-5255

Fax: (407) 568-8675

Cell phone (optional): (407) 963-3978

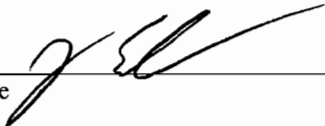
Owner/Authorized Representative Statement

This statement must be signed and dated by the person named above as owner or authorized representative

I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.

I will promptly notify the Department of any changes to the information contained in this registration form.

Signature



Date

12-15-2010

Fuel Consumption

If this is an **initial registration** for reciprocating internal combustion engine operations, provide an estimate of the total amount of fuel expected to be consumed over a 12-month period. Note: the general permit limits fuel consumption by all reciprocating internal combustion engines at the facility to 20,000 gallons per year of gasoline, 250,000 gallons per year of diesel fuel, 1.15 million gallons per year of propane, 40 million standard cubic feet per year of natural gas, or an equivalent prorated amount if multiple fuels are used

If this is a **re-registration** for reciprocating internal combustion engine operations, provide the highest 12-month total fuel consumption amount, in appropriate units, for the last five years. Indicate the 12-month period over which this fuel consumption occurred.

13,160 gallons

11-30-09 - 11-30-10

Description of Facility

Below, or as an attachment to this form, provide a description of the reciprocating internal combustion engine operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

Whole Tires are brought into the facility on scrap vehicles or by truck. Good tires are stored inside for weekly shipment. Scrap tires are derimed and shredded. Tire shreds go to Keene Road landfill. Scrap tires are stored outside in walled area. (<1500 tires) with fire lane. Equipment consists of 1) Tire Easter - tire shredder (max 110 tires/hour.) 2) EZ Rim Crusher - rim crusher (approx. 50 rims/hour.) 3) Coats Tire machine - Tire Processor (approx. 30 tires/hour) 4) Homemade tire machine - tire derimer & tire shredder (approx. 50 tires/hour.) The tire shredder is powered by a 1440 hp diesel engine, see facility layout.

1) NEED ENGINE DATA

- a. MAKE
- b. MODEL #
- c. S/N
- d. HP - 1440
- e. FUEL TYPE DIESEL

FORM SAYS:

TIRE SHREDDER - 1440 HP

ARMB SAYS:

1800 HP - METAL SHREDDER



SITE LOCATION MAP

BITHLO QUADRANGLE 7.5 MINUTE SERIES 1953
PHOTOREVISED 1980

E & H CAR CRUSHER CO., INC.
ORLANDO, FLORIDA

James
Environmental
Management, Inc.
Round Rock, TX

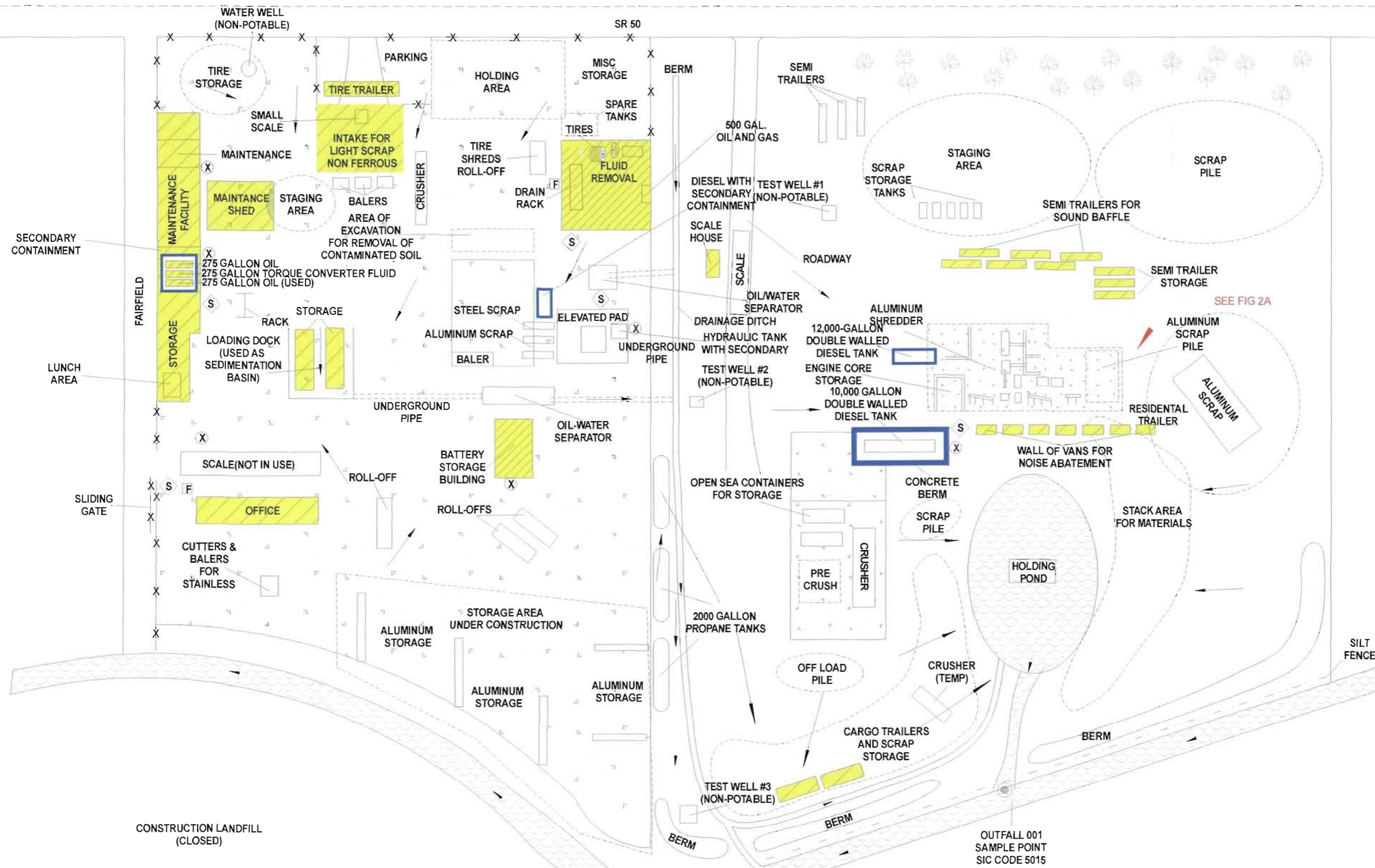
FIGURE 1

DWG. NO.

00255

DATE: 12/10
MTK

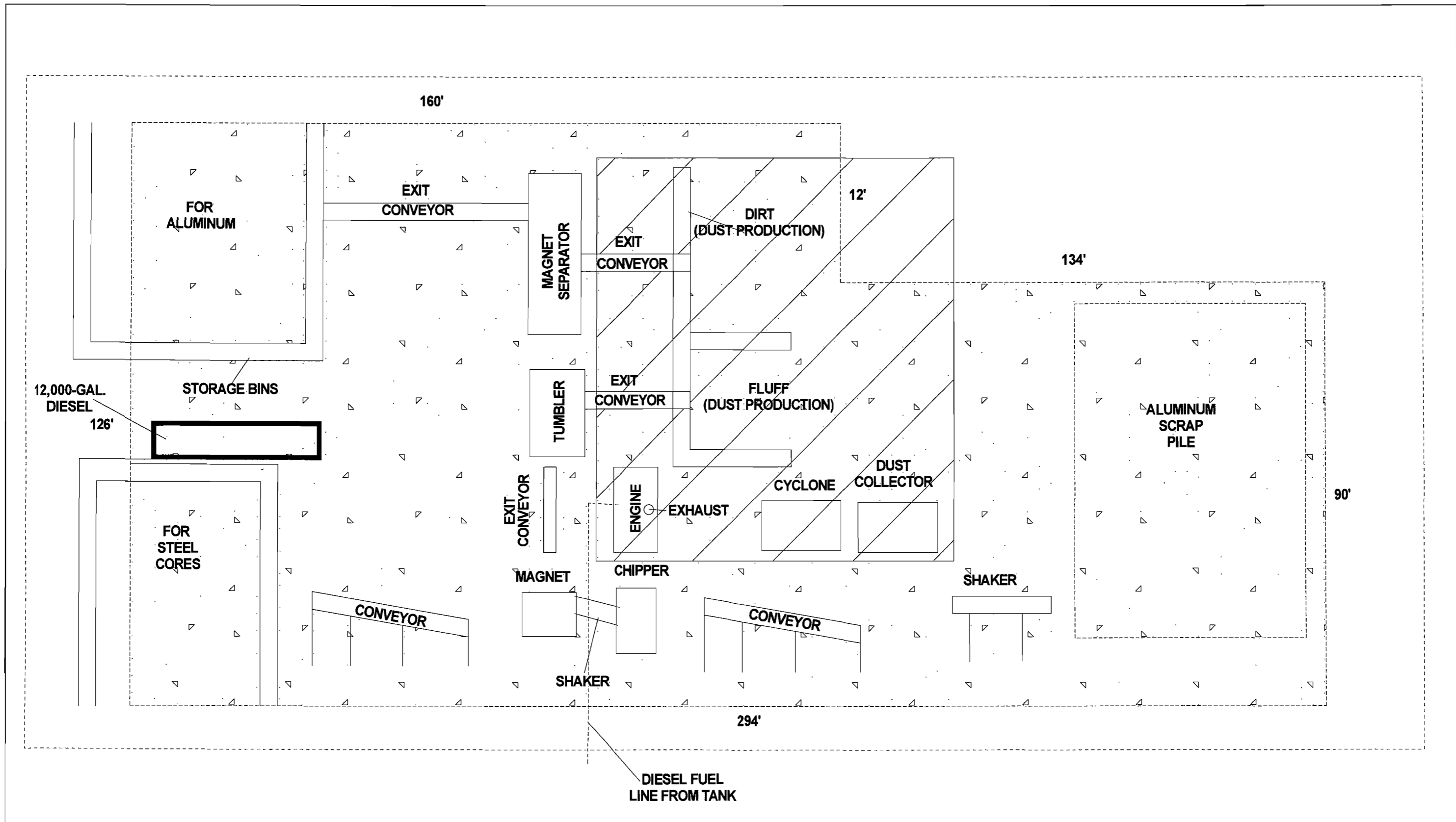
SCALE: 1" = 2000'




LEGEND

- DIRECTION OF SURFACE RUNOFF
- DIRECTION OF SEDIMENT RUNOFF
- BUILDING OR COVERED AREA
- CONCRETE
- SECONDARY CONTAINMENT OR DOUBLE-WALLED TANKS
- FIRE EXTINGUISHER
- SPILL KIT
- FIRST AID KIT
- ACRES 5.0
- IMPERVIOUS 75%

James Environmental Management, Inc. Round Rock, Texas	 N	SITE PLAN E & H CAR CRUSHING CO., INC. ORLANDO, FLORIDA	N.T.S. MTK 07/10	00255 FIG 2
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James Environmental Management, Inc. Round Rock, Texas		SITE PLAN		N.T.S.	00255
		E & H CAR CRUSHING CO., INC.		MTK	FIG 2A
		ORLANDO, FLORIDA		07/10	

Dibble, Dickson

Subject: Processed AIRS ID# 0951294-002, E&H CAR CRUSHING CO INC dba E&H CAR CRUSHING COMPANY, 106 GLOUCESTER ST, ORLANDO 32833-3459
Location: RECIPROCATING INTERNAL COMBUSTION ENGINES-Orlando
Start: Wed 12/22/2010 12:00 AM
End: Thu 12/23/2010 12:00 AM
Show Time As: Free
Recurrence: (none)
Organizer: Dibble, Dickson
Categories: PENDING

PENDING

12/22/10, 1135 HRS – Called for Mr. Jim Erb ((407) 963-3978) and left VM message. Request for add'l information (engine data):

1. Make
2. Model
3. S/N

Additional note – ARMS records do not agree with submitted form. Form says this is a 1440 Hp diesel engine for tire shredder, ARMS says it is an 1800 hp diesel engine powering a metal shredder. Need clarification.



EG204567295US



Addressee Copy
Label 11-B, March 2004

UNITED STATES POSTAL SERVICE®

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)		
PO ZIP Code 32709	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	Postage \$ 18.30
Date Accepted 12 15 10	Scheduled Date of Delivery Month 12 Day 16	Return Receipt Fee \$
Mo. 12 Day 15 Year 10	Scheduled Time of Delivery <input checked="" type="checkbox"/> Noon <input type="checkbox"/> 3 PM	COD Fee Insurance Fee \$ \$
Time Accepted 2:32 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Total Postage & Fees \$ 18.30
Flat Rate <input type="checkbox"/> or Weight <input checked="" type="checkbox"/>	Int'l Alpha Country Code	Acceptance Emp. Initials AY
lbs. ozs.		

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day		
Delivery Attempt	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day		
Delivery Date	Time <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. 12 Day 16 1:30		

CUSTOMER USE ONLY	
<input checked="" type="checkbox"/> WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if customer requests waiver of signature. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.	12/16/10
<input type="checkbox"/> NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday <input type="checkbox"/> Mailer Signature	

FROM: (PLEASE PRINT) PHONE **312 211-3631**

JAMES ENVIRONMENTAL Mgmt., INC.
600 Round Rock West Drive, Ste 201
Round Rock, TX 78681

TO: (PLEASE PRINT) PHONE ()

NPDES Stormwater Notices County, MS#250
FL Dept of Environmental Protection
2600 Blair St. Stone Rd.
Tallahassee, FL **AIN**

ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES.)
3 2 3 7 7 + 2 4 0 8

FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW.

ATTENTION - DELIVERY PERSONNEL

SENDER HAS WAIVED SIGNATURE REQUIREMENT

PLEASE DELIVER PER DMM M500.4.3

EXPRESS MAIL - WE DELIVER



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