



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

November 4, 2008

Mr. William D. Richardson  
President  
Crush-It, Incorporated  
6000 East Hanna Road  
Tampa, Florida 33610

Dear Mr. Richardson:

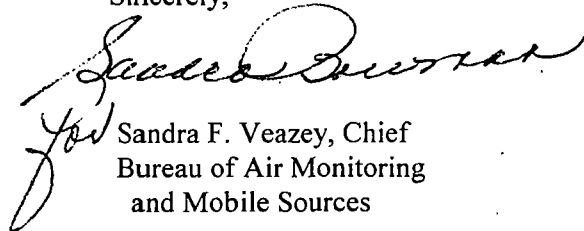
This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on October 3, 2008. We have assigned ARMS No. 7775229-002 to this facility.

As you know, pursuant to Florida Statutes section 403.814, authority to operate under general permits commences thirty (30) days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after five (5) years. Therefore, a new registration form must be received no later than five (5) years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have any additional questions, please contact Dickson Dibble at 850/921-9586.

Sincerely,



Sandra F. Veazey, Chief  
Bureau of Air Monitoring  
and Mobile Sources

SFV/pg

cc: Mr. Lynn Robinson, Hillsborough County

**NONMETALLIC MINERAL PROCESSING PLANTS (CRUSHERS)  
AIR GENERAL PERMIT REGISTRATION FORM**

Bureau of Air Monitoring  
Mobile Services

RECEIVED  
OCT 03 2008

**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*)

7775229-002

**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):  
7775229-001-AG \_\_\_\_\_
- 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.)

Crush-It, 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.)

Coreslab Structures

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

Street Address: 6000 E. Hanna

City: Tampa

County: Hillsborough

Zip Code: 33610

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

**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: William D. Richardson, President

Owner/Authorized Representative Mailing Address  
Organization/Firm:Crush-It, Inc.  
Street Address:P.O. Box 18539  
City:Sarasota County:Sarasota Zip Code:34276

Owner/Authorized Representative Telephone Numbers  
Telephone:941-926-8814 Fax:941-926-8827  
Cell phone (optional):941-809-6900

**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:

Facility Contact Mailing Address  
Organization/Firm:  
Street Address:  
City: County: Zip Code:

Facility Contact Telephone Numbers  
Telephone: Fax:  
Cell phone (optional):

**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.*

*William D. Richardson*  
\_\_\_\_\_  
Signature

*09/29/08*  
\_\_\_\_\_  
Date

**Type of Facility**

Check one:

Stationary Facility

Relocatable Facility

**Type(s) of Precautions Used to Prevent Unconfined Emissions**

Check all that apply for the management of roads, parking areas, stock piles and yards:

Maintain Roads/Parking/Yards

Use Water Application

Use Dust Suppressant

Remove Particulate Matter

Reduce Stock Pile Height

Install Wind Breaks

Check the location of spray bars at the nonmetallic mineral processing plant:

Feeders

Entrance to "Crusher"

Exit of "Crusher"

Classifier Screens

Conveyor Drop Points

**Description of Reasonable Precautions**

Below, or as an attachment to this form, provide details of all types of reasonable precautions to be used to prevent unconfined emissions at the facility.

**Crush-It, Inc. strives to maintain a high level of dust control at each job site. We keep traffic at a low speed in the yards and keep roadways around the crusher and the equipment watered to suppress dust. Crush-It, Inc. requires our customers to have water available at each job site. Also- we have newer equipment with highly efficient Tier 3 Diesel engines.**

### **Description of Facility**

Below, or as an attachment to this form, provide a description of the nonmetallic mineral processing 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.

The daily process the crusher performs is as follows:

1. The excavator loosen and sorts the rubble pile which consists of either concrete or asphalt rubble.
2. The rubber tire loader then scoops up the loosened and sorted pile and drops the material into the feed hopper in the crusher.
3. The material is then run thru the crusher and screened.
4. After screening the material is deposited onto the radial stacker and stock piled.

Water is continually run during the crusher process to eliminate dust.



# Arlington Environmental Services, Inc.

"Specializing in Visible Emission and Stack Testing"

September 22, 2008

## ELECTRONIC CORRESPONDENCE

Mr. Jason Waters  
Hillsborough County  
Department of Environmental Protection  
3629 Queen Palm Drive  
Tampa, Florida 33619

Re: Crush It, Crusher #2  
AIRS ID: 7775229

Dear Mr. Waters:

On September 08, 2008, EPA Method 9, Visible Emission Testing was conducted at Crush It, Crusher #2, ID 7775229 located at 6000 East Hanna Road in Tampa, Florida.

The tests were performed in order to comply with the requirements as specified in the Air General Permit Registration Form.

The tests were conducted by Ryan Peterson, a certified Visible Emission Evaluator. A copy of the certification is attached.

The following Emission Points were tested:

- Hopper loading
- Exhaust pipe
- Belt transfer
- Belt drop

To the best of my knowledge, this completes all of the required annual tests. If, for any reason, this is incorrect, please contact me as soon as possible.

Sincerely,

William Arlington

WDA/dc

Electronic copy to: Lisa Richardson, Crush It

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Post Office Box 657 ~ Okeechobee, Florida 34973  
Telephone (863) 467-0555 ~ Facsimile (863) 357-0810  
Email [info@arlingtonenvironmental.com](mailto:info@arlingtonenvironmental.com) ~ Website [www.arlingtonenvironmental.com](http://www.arlingtonenvironmental.com)

**Arlington Environmental Services, Inc.**  
(863) 467-0555

**VISIBLE EMISSION TEST**

Method Used (Circle One) 203A 203B Report 2240-V-1

Company Name Crush It  
 Facility Name Crusher #2 AFS 7775229  
 Street Address 6000 East Hanna rd.  
 City Tampa Zip  
 Phone No. (941) 926-8814

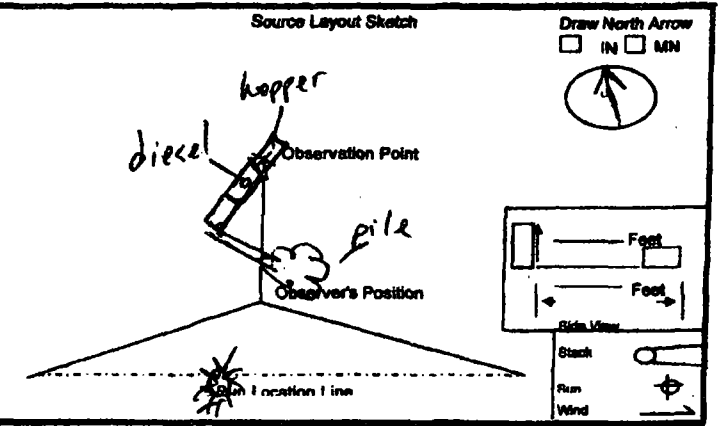
Process rock crusher Unit # SN# 11212 Operating Mode Normal  
 Control Equipment Water spray Operating Mode Normal

Describe Emission Point loading hopper  
 Ht of Emis. Point ~15' Ht Ref to Observer ~10'  
 Distance to Emis. Pt. ~80' Direction to Emis. Pt (Degrees) 005°

Vertical Angle to Obs. 6° Direction to Obs. Pt. (Degrees) ---  
 Distance and Direction to Obs. Pt from Emission Pt ---

Describe Emissions  
 Emission Color None Water Droplet Plume Attached Detached None

Describe Plume Background trees  
 Background Color green Sky Conditions broken  
 Wind Speed ~7-8 mph Wind Direction variable  
 Ambient Temp. 90° Wet Bulb Temp. --- % RH ---



Latitude Longitude Declination

Comments

Observation Date		Start Time				Stop Time			
9/8/08		1:10 PM				2:10 PM			
Sec	0	15	30	45	Min	0	15	30	45
1	○	○	○	○	31	○	○	○	○
2	○	○	○	○	32	○	○	○	○
3	○	○	○	○	33	○	○	○	○
4	○	○	○	○	34	○	○	○	○
5	○	○	○	○	35	○	○	○	○
6	○	○	○	○	36	○	○	○	○
7	○	○	○	○	37	○	○	○	○
8	○	○	○	○	38	○	○	○	○
9	○	○	○	○	39	○	○	○	○
10	○	○	○	○	40	○	○	○	○
11	○	○	○	○	41	○	○	○	○
12	○	○	○	○	42	○	○	○	○
13	○	○	○	○	43	○	○	○	○
14	○	○	○	○	44	○	○	○	○
15	○	○	○	○	45	○	○	○	○
16	○	○	○	○	46	○	○	○	○
17	○	○	○	○	47	○	○	○	○
18	○	○	○	○	48	○	○	○	○
19	○	○	○	○	49	○	○	○	○
20	○	○	○	○	50	○	○	○	○
21	○	○	○	○	51	○	○	○	○
22	○	○	○	○	52	○	○	○	○
23	○	○	○	○	53	○	○	○	○
24	○	○	○	○	54	○	○	○	○
25	○	○	○	○	55	○	○	○	○
26	○	○	○	○	56	○	○	○	○
27	○	○	○	○	57	○	○	○	○
28	○	○	○	○	58	○	○	○	○
29	○	○	○	○	59	○	○	○	○
30	○	○	○	○	60	○	○	○	○

Number of Readings Above 0 % were 0  
 Average Opacity for Highest 6 Min Period 0%  
 Range of Opacity Readings Min 0% Max 0%  
 Average Opacity for 2nd Highest 6 Min ---

Observer's Name (Print) Ryan Peterson  
 Observer Signature Ryan Peterson Date 9/8/08  
 Organization Arlington Environmental Services, Inc.  
 Certified By ETA Date 8/13/08

**Arlington Environmental Services, Inc.**  
(863) 467-0555

**VISIBLE EMISSION TEST**

Method Used (Circle One) 203A 203B Report 2240-V-2

Company Name Crush It  
 Facility Name Crusher # 2 AERS 7775229  
 Street Address 6000 E. Hanna rd.  
 City Tampa Zip \_\_\_\_\_  
 Phone No. (941) 926-8814

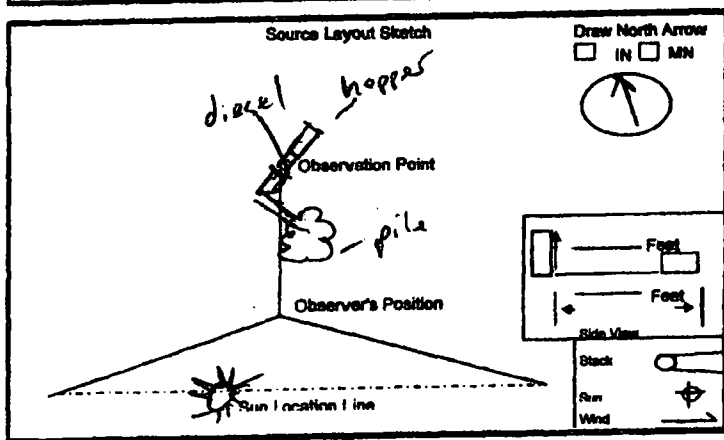
Process diesel engine Unit # SN# 11212 Operating Mode Normal  
 Control Equipment exhaust manifold Operating Mode Normal

Describe Emission Point exhaust pipe  
 Ht of Emis. Point ~10' Ht Ref to Observer ~5'  
 Distance to Emis. Pt ~60' Direction to Emis. Pt (Degrees) 005°

Vehicle Angle to Obs. 5° Direction to Obs. Pt (Degrees) \_\_\_\_\_  
 Distance and Direction to Obs. Pt from Emission Pt \_\_\_\_\_

Describe Emissions None  
 Emission Color None Water Droplet Phase None  
 Attached Detached \_\_\_\_\_

Describe Plume Background trees  
 Background Color green Sky Conditions broken  
 Wind Speed 2-8 mph Wind Direction variable  
 Ambient Temp. 90° Wet Bulb Temp. \_\_\_\_\_ % RH \_\_\_\_\_



Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Declination \_\_\_\_\_

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Min Sec	Start Time <u>1:40 PM</u>				Stop Time <u>1:40 PM</u>			
	0	15	30	45	Min	15	30	45
1	0	0	0	0	31			
2	0	0	0	0	32			
3	0	0	0	0	33			
4	0	0	0	0	34			
5	0	0	0	0	35			
6	0	0	0	0	36			
7	0	0	0	0	37			
8	0	0	0	0	38			
9	0	0	0	0	39			
10	0	0	0	0	40			
11	0	0	0	0	41			
12	0	0	0	0	42			
13	0	0	0	0	43			
14	0	0	0	0	44			
15	0	0	0	0	45			
16	0	0	0	0	46			
17	0	0	0	0	47			
18	0	0	0	0	48			
19	0	0	0	0	49			
20	0	0	0	0	50			
21	0	0	0	0	51			
22	0	0	0	0	52			
23	0	0	0	0	53			
24	0	0	0	0	54			
25	0	0	0	0	55			
26	0	0	0	0	56			
27	0	0	0	0	57			
28	0	0	0	0	58			
29	0	0	0	0	59			
30	0	0	0	0	60			

Number of Readings Above \_\_\_\_\_ % were \_\_\_\_\_  
 Average Opacity for Highest 6 Min Period 0%  
 Range of opacity Readings Min 0% Max 0% Average Opacity for 2nd Highest 6 Min \_\_\_\_\_  
 Observers Name (Print) Ryan Peterson  
 Observers Signature Ryan Peterson Date 9/8/08  
 Organization Arlington Environmental Services, Inc.  
 Certified By ETA Date 8/13/08



**Arlington Environmental Services, Inc.**  
(863) 467-0555

**VISIBLE EMISSION TEST**

Method Used (Circle One) Method 9 203A 203B Report 2240-V-3

Company Name Crush It  
 Facility Name Crusher #2 AIRS 7775229  
 Street Address 6000 E. Howard  
 City Tampa Zip \_\_\_\_\_  
 Phone No. (941) 926-8814

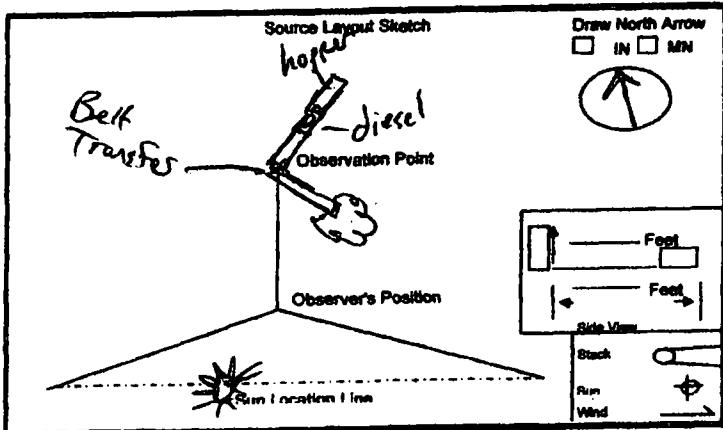
Process rock crusher Unit # SN # 11212 Operating Mode normal  
 Control Equipment water spray Operating Mode normal

Describe Emission Point Belt Transfer  
 Ht of Emis. Point ~ 5' Ht Rel to Observer ~ 2'  
 Distance to Emis. Pt ~ 40' Direction to Emis. Pt (Degrees) 005°

Particle Angle to Obs. 10 Direction to Obs. Pt. (Degrees) —  
 Distance and Direction to Obs. Pt from Emission Pt —

Describe Emissions none  
 Emission Color none Water Droplet Phase Attached Detached None

Describe Plume Background ground  
 Background Color brown Sky Conditions broken  
 Wind Speed ~ 2-8 mph Wind Direction variable  
 Ambient Temp. 90° Wet Bulb Temp. — % RH —



Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Declination \_\_\_\_\_

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Observation Date		9/8/08				Start Time		1:10 P.M.				Stop Time		2:10 P.M.																																																																																																																																																																																																																																																																																													
Min	Sec	0 15 30 45				Min	Sec	0 15 30 45																																																																																																																																																																																																																																																																																																			
		1	0	0	0			0	31	0	0	0	0	2	0	0	0	0	32	0	0	0	0	3	0	0	0	0	33	0	0	0	0	4	0	0	0	0	34	0	0	0	0	5	0	0	0	0	35	0	0	0	0	6	0	0	0	0	36	0	0	0	0	7	0	0	0	0	37	0	0	0	0	8	0	0	0	0	38	0	0	0	0	9	0	0	0	0	39	0	0	0	0	10	0	0	0	0	40	0	0	0	0	11	0	0	0	0	41	0	0	0	0	12	0	0	0	0	42	0	0	0	0	13	0	0	0	0	43	0	0	0	0	14	0	0	0	0	44	0	0	0	0	15	0	0	0	0	45	0	0	0	0	16	0	0	0	0	46	0	0	0	0	17	0	0	0	0	47	0	0	0	0	18	0	0	0	0	48	0	0	0	0	19	0	0	0	0	49	0	0	0	0	20	0	0	0	0	50	0	0	0	0	21	0	0	0	0	51	0	0	0	0	22	0	0	0	0	52	0	0	0	0	23	0	0	0	0	53	0	0	0	0	24	0	0	0	0	54	0	0	0	0	25	0	0	0	0	55	0	0	0	0	26	0	0	0	0	56	0	0	0	0	27	0	0	0	0	57	0	0	0	0	28	0	0	0	0	58	0	0	0	0	29	0	0	0	0	59	0	0	0	0	30	0	0	0	0	60

Number of Readings Above 0% were 0  
 Range of opacity Readings Min 0% Max 0%  
 Observers Name (Print) Ryan Peterson  
 Observers Signature Ryan Peterson Date 9/8/08  
 Organization Arlington Environmental Services, Inc.  
 Certified By ETA Date 8/13/08

**Arlington Environmental Services, Inc.**  
(863) 467-0555

**VISIBLE EMISSION TEST**

Method Used (Circle One) 203A 203B Report 22404-4

Company Name Crush-It  
 Facility Name crusher #2 AERS 9775229  
 Street Address 6000 E. Hanna rd.  
 City Tampa Zip \_\_\_\_\_  
 Phone No. (941) 926-8814

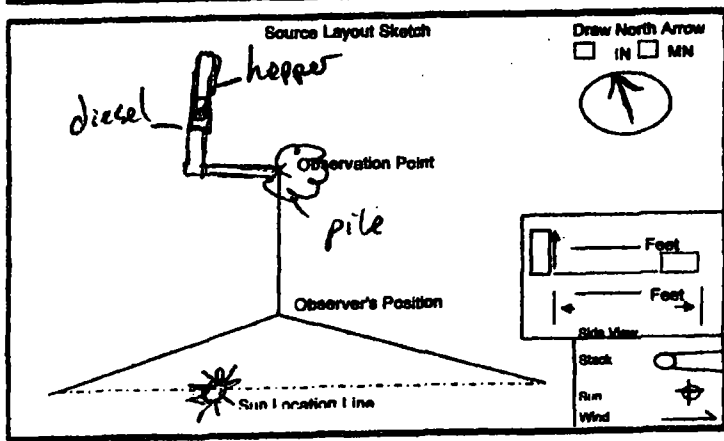
Process rock crusher Unit # SN# 11212 Operating Mode Normal  
 Control Equipment water spray Operating Mode Normal

Describe Emission Point Belt Drop  
 Ht of Emis. Point ~10' Ht Rel to Observer ~5'  
 Distance to Emis. Pt. ~20' Direction to Emis. Pt (Degrees) 020°

Vertical Angle to Obs. 10° Direction to Obs. Pt. (Degrees) -  
 Distance and Direction to Obs. Pt from Emission Pt -

Describe Emissions None  
 Emission Color None Water Droplet Plume None  
 Attached Detached \_\_\_\_\_

Describe Plume Background hill  
 Background Color brown Sky Conditions broken  
 Wind Speed ~2-8 mph Wind Direction variable  
 Ambient Temp. 90° Wet Sub Temp. \_\_\_\_\_ % RH \_\_\_\_\_



Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Declination \_\_\_\_\_

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Sec	Min				Sec	Min			
	0	15	30	45		0	15	30	45
1	0	0	0	0	31	0	0	0	0
2	0	0	0	0	32	0	0	0	0
3	0	0	0	0	33	0	0	0	0
4	0	0	0	0	34	0	0	0	0
5	0	0	0	0	35	0	0	0	0
6	0	0	0	0	36	0	0	0	0
7	0	0	0	0	37	0	0	0	0
8	0	0	0	0	38	0	0	0	0
9	0	0	0	0	39	0	0	0	0
10	0	0	0	0	40	0	0	0	0
11	0	0	0	0	41	0	0	0	0
12	0	0	0	0	42	0	0	0	0
13	0	0	0	0	43	0	0	0	0
14	0	0	0	0	44	0	0	0	0
15	0	0	0	0	45	0	0	0	0
16	0	0	0	0	46	0	0	0	0
17	0	0	0	0	47	0	0	0	0
18	0	0	0	0	48	0	0	0	0
19	0	0	0	0	49	0	0	0	0
20	0	0	0	0	50	0	0	0	0
21	0	0	0	0	51	0	0	0	0
22	0	0	0	0	52	0	0	0	0
23	0	0	0	0	53	0	0	0	0
24	0	0	0	0	54	0	0	0	0
25	0	0	0	0	55	0	0	0	0
26	0	0	0	0	56	0	0	0	0
27	0	0	0	0	57	0	0	0	0
28	0	0	0	0	58	0	0	0	0
29	0	0	0	0	59	0	0	0	0
30	0	0	0	0	60	0	0	0	0

Number of Readings Above \_\_\_\_\_ % were \_\_\_\_\_  
 Range of opacity Readings Min 0% Max 0%  
 Average Opacity for Highest 8 Min Period 0%  
 Average Opacity for 2nd Highest 6 Min \_\_\_\_\_

Observers Name (Print) Ryan Peterson Date 9/8/08

Observers Signature Ryan Peterson Organization Arlington Environmental Services, Inc.

Certified By ETA Date 8/13/08

# VISIBLE EMISSIONS EVALUATOR

This is to certify that

**RYAN PETERSON**

met the specifications of Federal Reference Method 9 and qualifies as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, NC. This certificate is valid for six months from date of issue.

**365229**

CERT NUMBER

**8/13/2008**

DATE OF SCHOOL

**TAMPA, FL**

SCHOOL LOCATION

**2/12/2009**

CERTIFICATION EXP DATE

**PET910498**

STUDENT ID NUMBER

## EASTERN TECHNICAL ASSOCIATES

**RYAN PETERSON**

**PET910498** STUDENT ID NUMBER

met the specifications of Federal Reference Method 9 and qualifies as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, NC. This certificate is valid for six months from date of issue and expires on the date below.

**TAMPA, FL**

SCHOOL LOCATION

**8/13/2008**

DATE OF SCHOOL

**365229**

CERT NUMBER

**JAXS07**

LAST LECTURE

**2/12/2009**

CERTIFICATION EXP DATE

BEARER

Customer Support

Debbie or Sheila

919-878-3188

[www.eta-is-opacity.com](http://www.eta-is-opacity.com)

Florida Department of Environmental Protection  
**Cash Receiving Application (CRA)**  
 Cashlisting by Deposit #: 291188 thru 291188  
 Printed: 10/7/2008 9:03:33 AM - Page 14

Cashlisting: 71342 Cashlist Area: 3755 Description: DIV OF AIR RESOURCES MGMT.  
 Deposit No: 291188 Date Deposited: 10/06/2008 Contact: E. WALKER

Object	Transmittal	Dep	DDN	Receipt Number	Pre- Numbered Receipt	Name	Check Number	Payment Amount	Reference Account	Payment Number	Remittance Number	Fund	Grant	
002272	50818			639082		CRUSH-IT, INC.	6249	\$100.00	7175229-002 10/10/2008 - AIME	902829	798240	PFTF		
<b>Object Code 002272 Subtotal:</b>								\$100.00						
002278	50807	486152		639007		ARWOOD WASTE AND DEMO	10119	\$100.00	49808	902778	798165	APCTF		
	50807	486153		639008		ACT	5745	\$200.00	50007	902783	798166	APCTF		
	50807	486153		639008		ACT	5745	\$200.00	50414	902782	798166	APCTF		
	50807	486161		639016		SAL'S ABATEMENT CORP	5302	\$200.00	50679	902801	798174	APCTF		
<b>Object Code 002278 Subtotal:</b>								\$700.00						
<b>Cashlisting 71342 Total:</b>								\$800.00						

**Florida Department of Environmental Protection  
Cash Receiving Application (CRA)  
Transmittal Sheet  
Printed: 10/6/2008 11:07:26 AM - Page 1**

Transmittal Number: **50818**                      Collection Point: **3755**  
Total: **\$100.00**  
Number of Items: **1**  
Date Created: **06-OCT-2008**  
Deposit/Verified Date:

WALKER E                      WALKER E                      \_\_\_\_\_  
Lister                              Witness                              Received By  
Accounting & Budgeting

**DEPOSITED**

Remittance Number	Received Date	PNR/ DEP DDN	Receipt Number	Check Number	Name	Remittance Amount	Payment Number	Payment Amount	Reference Account
798240	03-OCT-2008		639082	6249	CRUSH-IT, INC.	\$100.00	902829	\$100.00	
<b>Total To Be Deposited:</b>						\$100.00			

**NOT DEPOSITED**

Remittance Number	Received Date	PNR/ DEP DDN	Receipt Number	Check Number	Name	Remittance Amount	Payment Number	Payment Amount	Reference Account
<b>Total Not Deposited</b>						\$0.00			

**CRUSH-IT, INC.**

P.O. BOX 18539  
SARASOTA, FL 34276  
(941) 926-8814



63-1506-631

9/29/2008

PAY  
TO THE  
ORDER OF FDEP

\$\$\$100.00

One Hundred and 00/100\*\*\*\*\* DOLLARS

FDEP  
2600 Blair Stone Rd.  
Mail Station 5500  
Tallahassee, Fl 32399-2400

AUTHORIZED SIGNATURE

MEMO  
DEP Air Permit #7775229-001-AG



**CRUSH-IT, INC.**

FDEP  
Licenses and Permits:CR 1212

renewal of Air Permit

9/29/2008

100.00

The Bank of Commer DEP Air Permit #7775229-001-AG

100.00

Security features. Details on back.

