

**LEE COUNTY BOARD OF COUNTY COMMISSIONERS**  
**AGENDA ITEM SUMMARY** **BLUE SHEET NO 20040714**

**1. REQUESTED MOTION:**

**ACTION REQUESTED:**

Approve and authorize Chairman to sign a Waste Tire Grant Application for FY 04-05.  
 Matching funds are not required.

**WHY ACTION IS NECESSARY:**

The State requires certification that the person signing the grant application possesses the authority to apply for the grant on behalf of the County. Additionally, FDEP requires the person signing acceptance forms be authorized by the governing Board.

**WHAT ACTION ACCOMPLISHES:**

Satisfies State guidelines for grant applicants and recipients

**2. DEPARTMENTAL CATEGORY:** 08  
**COMMISSION DISTRICT #:** CW

C8B

**3. MEETING DATE:**

06-22-2004

**4. AGENDA:**

- CONSENT
- ADMINISTRATIVE
- APPEALS
- PUBLIC
- WALK ON
- TIME REQUIRED:

**5. REQUIREMENT/PURPOSE:**

*(Specify)*

- STATUTE
- ORDINANCE
- ADMIN. CODE
- OTHER Waste Tire Grant

**6. REQUESTOR OF INFORMATION:**

- A. COMMISSIONER:
- B. DEPARTMENT: Lee County-Public Works
- C. DIVISION/SECTION: Solid Waste Division
- BY: Lindsey Sampson, Solid Waste Director
- DATE:

Lindsey Sampson 5/27/04

**7. BACKGROUND:**

The State Department of Environmental Protection (FDEP) is anticipating \$2.64 million will be available to counties with populations greater than 100,000. Each eligible county shall receive a pro-rata share based on total incorporated and unincorporated population.

**8. MANAGEMENT RECOMMENDATIONS:** Approve the requested motion.

**9. RECOMMENDED APPROVAL**

(A) DEPARTMENT DIRECTOR	(B) PURCH. OR CONTRACTS	(C) HUMAN RESOURCES	(D) OTHER	(E) COUNTY ATTORNEY	(F) BUDGET SERVICES				(G) COUNTY MANAGER
					OA	QM	Risk	GC	
<p style="font-size: 1.2em; font-family: cursive;">J. Lavender</p> <p>Date: 6-1-04</p>				<p style="font-size: 1.2em; font-family: cursive;">J. Lavender</p> <p>Date: 6/1/04</p>	<p style="font-size: 1.2em; font-family: cursive;">CA</p> <p>6/2/04</p>	<p style="font-size: 1.2em; font-family: cursive;">JL</p> <p>6/3/04</p>	<p style="font-size: 1.2em; font-family: cursive;">vs delay</p>	<p style="font-size: 1.2em; font-family: cursive;">JL</p> <p>6/3/04</p>	<p style="font-size: 1.2em; font-family: cursive;">J. Lavender</p> <p>Date: 6-1-04</p>

**10. COMMISSION ACTION:**

- APPROVED
- DENIED
- DEFERRED
- OTHER

Rec. by CoAtty

Date: 6/1/04

Time: 1:55 pm

Forwarded To:

to Admin 6/1/04

RECEIVED BY  
COUNTY ADMIN:

6/1/04

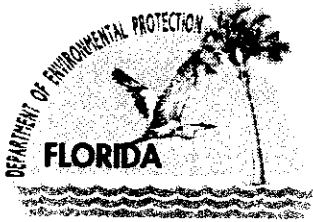
3:30 pm SC-1

COUNTY ADMIN

FORWARDED TO: PL

6-3-04

3 pm



# Department of Environmental Protection

Jeb Bush  
Governor

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Colleen M. Castille  
Secretary

## SOLID WASTE TIRE GRANT APPLICATION

1. Name of Applicant: Lee County Solid Waste

2. Address of Applicant: 10000 N. University Dr.  
Tallahassee, FL 32310

3. Federal Employer Identification Number: 97-000100

4. Telephone Number for Applicant: (904) 933-3300

5. List of Counties Included in the Application: Lee

6. Contact Person (person handling program on daily basis): Tommy Adams

7. Address of Contact Person: 10050 N. University Dr.  
Tallahassee, FL 32310

8. Telephone Number of Contact Person: (904) 333-3300

9. Name and Title of Authorized Representative:  
Name: Tommy Adams (OR NAMED FUTURE CHAIRMAN)  
Title: Supervisor (Current)

10. Purpose for which grant money is requested. (Indicate by checkmarks): Rule 62-716.620

- |  |                                     |   |                                     |
|--|-------------------------------------|---|-------------------------------------|
| a. Construction of waste tire processing facility: | <input checked="" type="checkbox"/> | g. Research to facilitate waste tire recycling:                       | <input type="checkbox"/>            |
| b. Operation of waste tire processing facility:    | <input checked="" type="checkbox"/> | h. Establishing waste tire collection centers:                        | <input type="checkbox"/>            |
| c. Contract for waste tire facility service:       | <input checked="" type="checkbox"/> | i. Incentives for establishing private waste tire collection centers: | <input type="checkbox"/>            |
| d. Equipment for waste tire processing facility:   | <input checked="" type="checkbox"/> | j. Perform or contract for enforcement activities:                    | <input type="checkbox"/>            |
| e. Removal of waste tires:                         | <input checked="" type="checkbox"/> | k. Purchase materials made from waste tires:                          | <input checked="" type="checkbox"/> |
| f. Contract for removal of waste tires:            | <input checked="" type="checkbox"/> |   |                                     |

11. This application is due by July 1 of each year.

12. E-MAIL Address: County@solidwaste.com

I CERTIFY that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete and accurate. I further certify that I possess the authority to apply for this grant on behalf of this county.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

Please return form to:  
Department of Environmental Protection  
Solid Waste Section \*Mail Station # 4565\* 2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

5/04-FY04-05



Jeb Bush  
Governor

# Department of Environmental Protection

REC'D MAY 18 2004

Twin Towers Office Building  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Colleen M. Castille  
Secretary

TO: All Interested Parties

FROM: Bobby Adams, Operations and Management Consultant  
Solid Waste Section

DATE: May 11, 2004

SUBJECT: Waste Tire Grant Applications

An application for the Waste Tire Grant is enclosed for your review and response. The recently concluded legislative session budgeted \$2,639,999 for these grants to be used in counties with populations larger than 100,000. There are 33 eligible counties based on the Governor's population estimates. Grant awards are made on a per capita basis. The uses of the grant will remain the same as in the current year.

**APPLICATION DUE DATE: July 1, 2004**

All grant applications must have an original signature of the county's authorized representative. The completed application should be sent to:

Bobby Adams, MS 4565  
Department of Environmental Protection  
2600 Blair Stone Road  
Tallahassee, FL 32399-2400

If you have any questions, please contact:

Bobby Adams (850) 245-8736 [Bobby.Adams@dep.state.fl.us](mailto:Bobby.Adams@dep.state.fl.us) ; OR

Tony Partin (850) 245-8737 [Tony.Partin@dep.state.fl.us](mailto:Tony.Partin@dep.state.fl.us)

INSTRUCTIONS FOR SOLID WASTE TIRE GRANT APPLICATION

1. Name of Applicant: Any State of Florida County with a total population greater than 100,000.
2. Address of County: Include both mailing address and street address, if applicable.
3. Federal Employer Identification Number: Nine-digit number assigned by the Internal Revenue Service, (example 59-6000349). This number can be obtained from your accounting office.
4. Telephone Number of Applicant: Please include Area Code. Also include SUNCOM Number if applicable.
5. List of Counties included in the Application: This section must be complete and accurate in order for us to determine the per-capita amount. Please supply copy of the Inter-local Agreement if more than one county is applying.
6. Contact Person: Person handling Solid Waste and Recycling Functions on a daily basis. Person who can also answer questions about Reimbursement Request.
7. Address of Contact Person: Please include both mailing address and street address, if applicable.
8. Telephone Number of Contact Person: Please include Area Code. Also include SUNCOM Number if applicable.
9. Name and Title of Authorized Representative: Person legally authorized to sign Grant Agreements (usually the Chairman of the Board of County Commissioners, Mayor, or City Manager unless a resolution has been passed to designate another person). Please provide a copy of the Resolution designating authority to another individual with application.
10. Purpose for which grant money is requested: Please check mark categories (a. – k.), you may check more than one.
11. This Application is due by July 1 of each year: Self Explanatory.
12. E-Mail Address: Please provide the contact person's current computer E-Mail address.
13. NOTE: Signature of Authorized Representative: Please provide an original signature, a stamp will not be accepted.