F		Audit Control:		
For:		Permit Number:		
xxx Issued		County: Issue Date: kpires On:		
	The facility shown above has been inspected by a duly authorized representative of the Department of I conformance with those rules promulgated by the department under the authority of Chapters 381, 386, in Rule 62-6, Florida Administrative Code.	Environmental Protection, and was found in , and 489 Part III, Florida Statutes, and set forth		
	This permit grants authority to operate the above referenced facility, service, or system in conformance conditions of operation shown below. This permit is revokable, upon service of notice, when it is determoperational conditions and department standards are not being maintained.	with department rules and the nined by the department that the		
Issued	by: DIRECTOR OF ENVIRONMENT	TAL HEALTH		
	DO NOT DETATCH HERE DO NOT SEPARATE FROM OPERATING PERMIT	(Non-Transferable)		
For:		Audit Control: Permit Number:		
xxx Issued	To: Permit Ex	xpires On:		
The operating permit for the facility shown above has been issued with the following conditions of operation:				
DH-4013, 06	DISPLAY OPERATING PERMIT AND CONDITIONS OF OPERATION IN A CODETATCH HERE - RETAIN THIS PORTION FOR YOUR RECO			

RECEIPT Audit Control: Permit Number:

XXX

County: Issued To:

Payment For:

XXXIssue Date: Amount Paid: Date Paid: \$ Mailed To:

Check Number: Receipt Number: Operator ID:

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Issued by: RETAIN FOR YOUR RECORDS