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| **Scrap Tire Dump Reporting Form** | | | |
| **I. LOCATION & CONTACT INFORMATION** | | | |
| Site Name: | | | |
| Site Address: | | | |
| County: | | EPD District (if known): | |
| Site Contact: | | Site Contact Phone #: | |
| E-Mail: | | | |
| **II. SITE DETAILS** | | | |
| Reported By: | | | |
| Date of Initial Site Visit: | | | |
| # Truck Tires: | # Passenger Tires: | # Other Tires: | Total # Tires: |
| Latitude (DD.dddd): N | | Longitude (DDD.dddd): W | |
| Estimated Cost to Clean Up: | | | |
| Local Government Scrap Tire Abatement Reimbursement Program:  Yes  No  If yes, please submit this form with your application. | | | |
| Comments: | | | |
|  | | | |
| CTS # (if applicable): | | | |

Please email to [recycle@dnr.ga.gov](mailto:recycle@dnr.ga.gov).

If you have any questions, please call 404-363-7027.