

## GEORGIA EPD SCRAP TIRE PROCESSOR QUARTERLY REPORT

**This report must be filed by the 30th day of the month following the quarter for which the report is due.**  
*Not reporting is a violation of Georgia Scrap Tire Management Rule 391-3-4-.19. Incomplete reports are considered "not reporting."*

<b>PART 1</b>	Complete the following for the scrap tire processor submitting this report.	<b>PART 2</b>	
<b>Business Name:</b>	_____	<b>Calendar Year of this Report:</b>	[ ]
<b>Street Address:</b>	_____	<b>Calendar Quarter of this Report (check one):</b>	
<b>City, State, Zip:</b>	_____	<input type="checkbox"/>	Jan, Feb, Mar
<b>County:</b>	_____ <b>GA Permit No.:</b> _____	<input type="checkbox"/>	Apr, May, Jun
<b>Telephone Number:</b>	_____ <b>Fax Number:</b> _____	<input type="checkbox"/>	Jul, Aug, Sep
<b>Email Address:</b>	_____	<input type="checkbox"/>	Oct, Nov, Dec

<b>PART 3</b>	<ul style="list-style-type: none"> <li>a. Number/tons of scrap tires on hand at start of quarter:</li> <li>b. Number/tons of tire products (e.g., TDF, primary shreds, etc.) on hand at start of quarter:</li> <li>c. Number/tons of scrap tires received during the quarter:</li> <li>d. Number/tons of processed tires and tire products (e.g., metal, fibers, chips, crumbs, etc.) shipped to recyclers/users during the quarter:</li> <li>e. Number/tons of whole tires (e.g., used, casings, construction projects, etc.) shipped to users during the quarter:</li> <li>f. Number/tons of whole tires or processing residuals transported to disposal facilities (landfills):</li> <li>g. Percentage of tires and tire products shipped for recycling and/or disposal (use formula below):  <math>(d+e+f) \times 100 / (a+b+c) = g</math></li> </ul>		
		[ ]	
		[ ]	
		[ ]	
		[ ]	
		[ ]	
		[ ]	

<b>PART 4</b>	Name, address, and phone number of each end user/recycler where processed tires were shipped.				
<b>Name</b>	<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Telephone No.</b>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

*For additional entries, please use additional pages.*

<b>PART 5</b>	I hereby certify that this report has been examined by me and is, to be best of my knowledge and belief, a true and complete report for the period stated.			
<b>Signature</b>	<b>Print/Type Name</b>	<b>Date</b>	<b>Title</b>	
_____	_____	_____	_____	