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| **EPD Use Only:** Permit #\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |
| **Tire Carrier Permit Application***(Please type or print)* | | | | | | | | | | | | | | | |
| Persons in Georgia who transport tires must complete and submit this form to Georgia EPD per the Georgia Comprehensive Solid Waste Management Act, O.C.G.A. 12-8-20, as amended. By signing this document, the applicant agrees to comply with all applicable local, state, and federal laws, rules, and regulations. **Items marked with an asterisk (\*) are required.** Incomplete applications will be returned. | | | | | | | | | | | | | | | |
| **I. Applicant InformatioN:** Applicants must complete a separate application for each business location. | | | | | | | | | | | | | | | |
| \*Business Name: | | | | | | | | | | Business License # (if applicable): | | | | | |
| Other Business Names (DBA): | | | | | | | | | | | | | | | |
| \*Business Owner Name(s): | | | | | | | | | \*Title/Position: | | | | | | |
| Business Owner Name(s): | | | | | | | | | Title/Position: | | | | | | |
| \*Business Street Address: | | | | | | | \*City: | | | | | | | \*County: | |
| \*State: | \*ZIP: | | \*Phone(s): | | | Business: | | | | | Fax: | | | Email: | |
| Or Cell: | | | | |
| Mailing Address (if different): | | | | | | | City: | | | | | | | County: | |
| State: | ZIP: | | Phone(s): | | Business: | | | | | | Fax: | | | | |
| Or Cell: | | | | | |
| Contact Name at Mailing Address: | | | | | | | | | Title/Position: | | | | | | |
| **II. ownership information:** Attach additional pages if necessary. | | | | | | | | | | | | | | | |
| Type of Ownership:  Individual  Partnership  Corporation  Government  If a partnership or corporation, list the names of persons with 5% or greater ownership of the business: | | | | | | | | | | | | | | | |
| **III. Processing, Disposal, or beneficial reuse information:** tires must be transported to EPD-approved facilities (see epd.georgia.gov/scrap-tires for current list). All tire shipments must be accompanied by a manifest containing information required by EPD. Carriers must return the completed manifest to the generator within 30 days of the initial manifest date. | | | | | | | | | | | | | | | |
| List the EPD-approved facilities where you will be transporting tires for processing, disposal, or end use: | | | | | | | | | | | | | | | |
| *Facility Name* | | *Street Address* | | *City* | | | | *State* | | | | *ZIP* | *Phone* | | *GA Permit #* |
|  | |  | |  | | | |  | | | |  |  | |  |
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| **IV. financial assurance** | | | | | | | | | | | | | | | |
| Tire carriers are required to maintain financial assurance, in a format provided by EPD, for each business location. Carriers transporting up to 5,000 scrap tires per month must have financial assurance in the amount of $10,000. Carriers transporting more than 5,000 scrap tires per month must have financial assurance in the amount of $20,000. Failure to receive or retain financial assurance will result in either denial of the permit application or revocation of the existing permit. Call 404-363-7027, or go to epd.georgia.gov/scrap-tires, for more information on the financial assurance requirements. Attach appropriate form to application:  $10,000 (up to 5,000 scrap tires)  $20,000 (more than 5,000 scrap tires) | | | | | | | | | | | | | | | |
| **V. SIGNATURE** | | | | | | | | | | | | | | | |
| *I certify, under penalty of law, that I have personally examined and am familiar with the information submitted on this document. I believe, warrant, swear, or affirm that the submitted information is true, accurate, and complete.* | | | | | | | | | | | | | | | |
| Authorized Signature: | | | | | | | | | | Date: | | | | | |
| Print Name: | | | | | | | | | | Title: | | | | | |
| Sworn to and subscribed before me this \_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_.  Notary Public:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My commission expires:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | |

**Send completed application to:** Environmental Protection Division, Waste Reduction Unit, 4244 International Parkway,

Suite 104, Atlanta, GA 30354-3902. **PLEASE ALLOW AT LEAST 30 DAYS FOR PROCESSING.**

If you have questions about this form, call EPD at 404-363-7027.