GEORGIA DEPARTMENT OF NATURAL RESOURCES
ENVIRONMENTAL PROTECTION DIVISION

Application
for
Out-of-State Scrap Tire Disposal Approval

The undersigned hereby applies for approval to landfill Georgia Generated Scrap Tires:

Application Information

1. Name of Applicant _____
2. Name of Business _____
   Applicant's Telephone Number (home) _____
   Applicant's Telephone Number (business) _____
   Applicant's Fax Number _____
3. Applicant's Mailing Address _____
4. Applicant's Street Address _____
5. Disposal Facility Street Address_____
   (Please attach street or highway map indication location of the facility).
6. Is this a permitted landfill? ☐ Yes ☐ No
   (Please enclose a copy of the permit).
7. Is the landfill in full compliance with the permit? ☐ Yes ☐ No
   If not please explain _____
   _____
8. Does your permit allow you to accept out-of-state scrap tires for disposal? ☐ Yes ☐ No
9. Please provide your state's landfill permitting authority contact name and telephone number
   Contact Name: _____ Telephone #_____
10. What types of tires do/will you accept for disposal? _____

_____

_____

_____
Signature of Applicant

_____
Date

Return completed Application with attachments to:

Environmental Protection Division
Scrap Tire Management Program
4244 International Parkway, Suite 104
Atlanta, Georgia 30354
(404) 363-7027