Instructions for Completing Tire Storage Facility Annual Report Form

Review and complete each section of the form and respond to all questions. If a question does not apply to your facility, please enter NA on the line for that question.

Additional copies for the form can be obtained on the Division of Waste Management and Radiation Control’s web page at:


or at


Upon completion of the Tire Storage Facility Annual Report, the form must be delivered electronically, or by the U.S. Postal Service or a commercial carrier. Ensure that copies are signed, and if delivering electronically, they should be scanned after signing or e-signed using a secure digital signature application. Persons signing the report should have authority to sign for the permit holder as designated in UAC R315-310-2(4). Forms that are not signed cannot be accepted.

For electronic delivery, please email to:

dwmrcsubmit@utah.gov

For USPS delivery, use the following:

Douglas J. Hansen, Director
Division of Waste Management and Radiation Control
P.O. Box 144880
Salt Lake City, Utah 84114-4880

For commercial carrier delivery, use the following:

Douglas J. Hansen, Director
Division of Waste Management and Radiation Control
195 N 1950 W
Salt Lake City, UT 84116
TIRE STORAGE FACILITY ANNUAL REPORT
For Calendar year 2021

Administrative Information (Please enter all the information requested below - type or print legibly)

Facility Name: ________________________________________________________________
Facility Mailing Address: ________________________________________________________
   (Number & Street, Box and/or Route)
   City: ____________________________ Zip Code: __________________
   County: _______________________

Owner
Name: __________________________ Phone No.: (__ ) ___________________________
Mailing Address: ________________________________________________________________
   (Number & Street, Box and/or Route)
   City: __________________ State: Utah Zip Code: __________________
Contact's Name: __________________ Title: ________________________________
Contact's Mailing Address: ________________________________________________________
Phone No.:(__ ) Contact's Email Address: ____________________

Operator (Complete this section only if the operator is not an employee of the Owner shown above)

Name: __________________________ Phone No.: (__ ) ___________________________
Mailing Address: ________________________________________________________________
   (Number & Street, Box and/or Route)
   City: __________________ State: Utah Zip Code: __________________
Contact's Name: __________________ Title: ________________________________
Contact's Mailing Address: ________________________________________________________
Phone No.:(__ ) Contact's Email Address: ____________________

Facility Status

☐ Currently in Operation ☐ Closed - Date: __________________
   (The "Closed - Date" is the date that all compost was removed from the site)

Annual Waste Tire Activity

Number of waste tires received in reporting period: ____________________________
Number of waste tires removed in reporting period: ____________________________
Current number of waste tires at facility: ____________________________
Tons of waste tires currently stored at the facility: ____________________________
Tons or tires allowed by permit: ____________________________
Financial Assurance

Current Clean-up Cost: 

Current Financial Assurance Mechanism: 

(ie. Bond, Trust Fund, etc.)

Financial Assurance Mechanism Holder: 

(ie. Name of Bond Company, Bank etc.)

Clean-up Cost: Clean-up costs are based on $150.00 per ton of tires. The tons that the must be covered are the total tons of tires allowed by the permit.

Signature: ___________________________ Date: ________________

Signature should be by an executive officer, general partner, proprietor, elected official, or a duly authorized representative. A duly authorized representative must meet the requirements of the solid waste rules (UAC R315-310-2(4)(d)).

Print name: ___________________________ Title: ___________________________