



UTAH DEPARTMENT of  
ENVIRONMENTAL QUALITY  
**WASTE MANAGEMENT  
& RADIATION CONTROL**

## Solid Waste Management Program – Waste Tires

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### APPLICATION INSTRUCTIONS FOR A WASTE TIRE REIMBURSEMENT

The following instructions are intended to assist in completing the application for a waste tire transporter or recycler to receive reimbursements from the Waste Tire Recycling Fund.

#### **Part I Instructions**

##### *Section I - Reimbursement Type*

Check the appropriate box.

This application can be used by a registered waste tire transporter, registered waste tire recycler, or a landfill located in a county with a population of 175,000. This application is for reimbursement for an abandoned waste tire pile cleanup or a landfill waste tire pile cleanup reimbursement. **A reimbursement can only be issued if proper approval is granted by the Division to pursue the desired waste tire pile removal as designated in UCA 19-6-811(1) through 19-6-811(5).**

A Waste Tire Pile is defined in UCA 19-6-803(3):

"Waste tire pile" means a pile of 200 or more waste tires at one location.

**Only state and local government landfills or transfer stations** are able to receive a reimbursement for the removal of waste tire piles from its landfill and deliver to a registered waste tire recycler.

An Abandoned Waste Tire Pile is defined in UCA 19-6-803(1):

"Abandoned waste tire pile" means a waste tire pile regarding which the local department of health has not been able to:

- (a) locate the persons responsible for the tire pile; or
- (b) cause the persons responsible for the tire pile to remove the tire pile.

Section II - Facility Type Seeking Reimbursement

Check the appropriate box.

The applicable facility types that can receive reimbursement for removal of a waste tire pile and delivery to a registered waste tire recycler include:

- 1) A waste tire transporter with a current annual registration with the Division.
- 2) A waste tire recycler with a current annual registration with the Division.
- 3) A landfill located in a county of the first or second class as defined by UCA 17-50-501(2): a county with a population of 175,000 or more.

Section III - Location of Waste Tire Pile

Record the exact location of the waste tire pile. If the location has a physical address, please include it. If there is no physical address, include cross streets and/or directions to the site. If the removal is taking place at a landfill, include the name of the landfill under NAME OF THE FACILITY.

Section IV - Landfill Operator Information

Record the individual, governmental entity, or other legal entity that provides daily operations at the facility.

Section V - Registered Transporter / Recycler Information (Who Removed the Waste Tire Pile)

The person listed as CONTACT NAME AND TITLE should be the individual that the Division can communicate with for general information and questions about the reimbursement request. If the company is the same as the one who removed the waste tire pile in section V or the landfill is who transferred the tires to the register recycler, enter SAME AS SECTION IV or V in the space labeled CONTACT NAME and TITLE. The applicant's address is the business mailing address. Where the owner, operator, and landowner are the same enter the contact information for the owner contact only.

Section VI - Registered Recycler Information (Location Waste Tires Were Delivered)

The person listed as CONTACT NAME AND TITLE should be the individual that the Division can communicate with for general information and questions about the reimbursement process.

## **Part II Additional Information**

### **Section I - Required Supplemental Documents**

The company requesting a reimbursement must supply these documents for a complete application in compliance with UCA 19-6-811(5) and (6). The recycler, waste tire transporter, or landfill that removed the waste tires pursuant to the approved bid shall submit to the director a copy of the manifest/invoice, which shall state:

- (a) the number or tons of waste tires transported;
- (b) the location from which they were removed;
- (c) the recycler to which the waste tires were delivered; and
- (d) the amount charged by the transporter or recycler (if applicable).

To verify the number of tires removed on the submitted manifest/invoice, the submission of weight tickets taken at either the scale house of the landfill or the recycler that the tire pile is sent to is also required.

### **Section II – Amount of Tires**

Fill in the number of tires (by weight) which are removed from the waste tire pile and the weight of tires which are received at the recycler. The weight entered in this section needs to match the submitted documents in Section I.

### **Authorized Signature**

The applicant for waste tire reimbursement must sign the application form. An application submitted with no signature will not be considered complete and will not be issued a reimbursement. In signing this section, the applicant is certifying that all information entered on this form, and all submitted supplemental documentation is accurate and complies with the requirements of UCA 19-6-801 through 19-6-823.

If additional help is needed to complete the form, please contact the Division of Waste Management and Radiation Control (Division) Waste Tire Recycling Program representative at 801-536-0200.

**Part I General Information**      APPLICANT: PLEASE COMPLETE ALL SECTIONS.

<b>I. Reimbursement Type</b>	<input type="checkbox"/> Abandoned Waste Tire Pile <input type="checkbox"/> Landfill Tire Pile	<b>II. Facility Type Seeking Reimbursement</b>	<input type="checkbox"/> Waste Tire Transporter <input type="checkbox"/> Waste Tire Recycler <input type="checkbox"/> Landfill
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**III. Location of Waste Tire Pile**

Name of Facility (If located at a landfill)			
Site Address (street or directions to site)			County
City		Zip Code	Telephone
Latitude	degrees	minutes	seconds
Longitude	degrees	minutes	seconds

**IV. Landfill Operator Information (if applicable)**

Name of Facility Operator			
Address (mailing)			
City	State	Zip Code	Telephone

**V. Registered Transporter / Recycler Information (who removed the waste tire pile)**

Company Name		Contact Name and Title	
Address (mailing)			
City	State	Zip Code	Telephone
Email Address		Alternative Telephone (cell or other)	

**VI. Registered Recycler Information (location waste tires were delivered to)**

Contact Name		Title	
Address (mailing)			
City	State	Zip Code	Telephone
Email Address		Alternative Telephone (cell or other)	

**Part II Additional Information**

**I. Required Supplemental Documents**

Documents Attached to This Application (required)

- Weight Tickets       Invoices

**II. Amount of Tires**

Total Tonnage Removed.....           

Total Tonnage Received at Registered  
Recycler.....           

I HEREBY CERTIFY THAT THIS INFORMATION AND ALL ATTACHED PAGES ARE CORRECT AND COMPLETE.

\_\_\_\_\_  
Signature of Registered Waste Tire Transporter, Recycler, or Landfill Representative

\_\_\_\_\_  
Name typed or printed

\_\_\_\_\_  
Email Address

Title

Date

Address

\_\_\_\_\_  
Alternative Telephone (cell or other)