



State of Oregon
**Department of
 Environmental
 Quality**

Application

Waste Tire Carrier Permit

(Attach Additional Sheets If Necessary)
 Authority: Oregon Revised Statutes (ORS) 459.712

**DEQ USE ONLY –
 Business Office**

Date Received: _____

Amount Received: _____

Check No.: _____

Deposit No.: _____

Application No.: _____

New ___ Renew ___ Modify ___

A. REFERENCE INFORMATION *(Please Print clearly. SEE ATTACHED INSTRUCTIONS.)*

<p>1. _____ Legal Name of Applicant Registered (see instructions)</p> <p>2. Ph. _____ FAX _____</p> <p>3. _____ Doing Business As (DBA)</p> <p>4. _____ Mailing Address of Applicant</p> <p>_____ City State Zip</p> <p>5. _____ E-Mail Address of Applicant</p>	<p>6. <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other _____ Type of Ownership</p> <p>7. Incorporated in the State of _____ (Businesses incorporated in Oregon or with Oregon addresses using assumed business names must be registered with the Oregon Corporation Commissioner's office and attach a copy of the certification with this application. If you are incorporated in another state, attach a copy of your corporate certificate.)</p> <p>8. This permit application is for calendar year _____</p>
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B. FULL NAME OF INDIVIDUAL OWNER, ALL PARTNERS OR CORPORATE OFFICERS:

	Last Name	First Name	Title
1.			
2.			
3.			
4.			

C. DELIVERY SITES

Please provide the following information for **all locations** where you deliver waste tires for storage, processing or disposal.

Name of Storage, Processing or Disposal Site _____

Address _____

Phone _____

Name of Storage, Processing or Disposal Site _____

Address _____

Phone _____

Name of Storage, Processing or Disposal Site _____

Address _____

Phone _____

You must list all sites where you send waste tires. Attach additional sheets, if necessary.

D. FEE SCHEDULE:	Permit application fee:	_____ <u>\$25</u>
	Annual compliance fee (for current year)	_____ <u>\$175</u>
	Annual fee for each vehicle	
	Number of vehicles: _____ x \$25/vehicle=	\$ _____
	Short-term leased vehicle fee (if applicable): \$25	\$ _____
Total fee		\$ _____

Make checks payable to **Oregon Department of Environmental Quality or Oregon DEQ.**

E. SIGNATURE I hereby certify by my signature below that the information contained in this application, and the documents that I have attached, are true and correct to the best of my knowledge and belief. I will abide by the waste tire laws and DEQ's Waste Tire regulations, Oregon Administrative Rules (OAR) 340-64-0010-0080. By my signature, I grant permission to DEQ and its authorized representatives to enter my property or business location.

Signature of Legally Authorized Representative (see instructions) Print Name	Title	Date
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Return completed application with all attachments to:

<p>1. Eastern Region DEQ Solid Waste Program 400 E Scenic Drive, Suite 307 The Dalles, OR 97058 (541) 298-7255 ext. 221</p> <p>3. Western Region DEQ Solid Waste Program 750 Front St. NE Suite 120 Salem OR 97301 (503) 378-5047</p>	<p>2. Northwest Region DEQ Solid Waste Program 2020 SW 4th Ave. Suite 400 Portland OR 97201 (503) 229-5353</p>	
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Please **keep a copy** of all documents for your file. **Incomplete applications** will be returned.

Waste tire administrative rules can be found at
http://arcweb.sos.state.or.us/rules/OARs_300/OAR_340/340_tofc.html
Oregon Revised Statutes, Chapter 459 (relating to solid waste management) can be found at
<http://landru.leg.state.or.us/ors/459.html>

INSTRUCTIONS FOR COMPLETING APPLICATION FORM

A. REFERENCE INFORMATION:

Enter the applicant's official or legal name. This name must be the same as the business name that is registered with the Oregon Corporation Division and is on your bond. Do not use a colloquial name. If the business is a partnership, list each partner in Section B.

Complete all items or enter "none."

B. FULL NAME OF INDIVIDUAL, PARTNERS OR CORPORATE OFFICERS: -- Self explanatory

C. DELIVERY SITES:

List the name, address, and phone numbers for all locations where you deliver waste tires, either for storage, processing or disposal. Delivery sites must be DEQ approved sites.

D. FEE SCHEDULE:

Use this schedule to figure out how much your application and compliance fees will be for this application. Don't forget to include the \$25 per-vehicle fee, including vehicles under short-term lease.

E. SIGNATURE:

Don't forget to sign and date your application.

Definition: Legally Authorized Representative

- Corporation: A principal executive officer of at least the level of vice president;
- Partnership or sole proprietorship: A general partner or the proprietor (owner), respectively
- Municipality, state, federal or other public facility: A principal executive officer or ranking elected official.

ATTACHMENTS – The following attachments and documents must be submitted with your completed application (please keep a copy of all documents for your file):

- Attachment 1 – Operating Plan (describes the vehicle fleet you will use to carry waste tires)
- Attachment 2 – Financial Assurance (describes your business's bond and/or insurance)
- Business name certification from Oregon Corporation Division (If you need to get a business name registered, online forms are available at <http://www.filinginoregon.com/forms/index.htm>).
- Payment of required fees (see fee schedule). Make checks payable to **Oregon Department of Environmental Quality or Oregon DEQ.**

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