



# WASTE TIRE GENERATOR NOTIFICATION FORM

LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY  
OFFICE OF ENVIRONMENTAL SERVICES  
WASTE PERMITS DIVISION  
P.O. Box 4313  
Baton Rouge, Louisiana 70821-4313

## FOR OFFICE USE ONLY

Agency Interest #: \_\_\_\_\_

DEQ Facility #: R-\_\_\_\_\_

In order for the Department to process this form, all sections must be completed and the original signed copy must be mailed to the Department at the address above. A *guidance* document has been prepared by the Department of Environmental Quality (LDEQ) to assist in completing this form and should be consulted prior to providing responses to the information required to be contained in this application. If you have questions concerning this form, please email [wastetires@la.gov](mailto:wastetires@la.gov).

### 1. TYPE OF APPLICATION

- |  |   |                                   |
|--|---|-----------------------------------|
| <input type="checkbox"/> New Application                 | <input type="checkbox"/> Change in Ownership*         | Date Business Opened: _____       |
| <input type="checkbox"/> Name Change                     | <input type="checkbox"/> Change in Physical Location* | Date of Tire/Vehicle Sales: _____ |
| <input type="checkbox"/> Information Update <sup>†</sup> |   |                                   |

\*Section 3 must be completed for changes in ownership or location    †Explanation must accompany form

### 2. APPLICANT INFORMATION

<b>Name of Business or Governmental Organization:***</b> _____	<b>Property Owner:</b> (if leased, a copy must be provided) _____
<b>Name of Business Owner:</b> _____	<b>Waste Tire Contact Person:</b> _____
<b>Facility Physical Address:</b> (street) _____ (city, state, zip) _____	<b>Business Mailing Address:</b> (street) _____ (city, state, zip) _____
<b>Parish:</b> _____	<b>Waste Tire Contact Phone Number:</b> _____
<b>Phone Number:</b> _____	<b>Waste Tire Contact Email Address:</b> _____
<b>Number of Locations Owned:</b> _____	<b>Driver's License Number:</b> _____ <b>State:</b> _____ (attach copy)
<b>Federal Tax ID or Social Security Number:</b> _____	<b>State Tax ID:</b> _____

\*\*\*Attach copy of SOS Certificate

### 3. PREVIOUS OWNERSHIP OR LOCATION INFORMATION

<b>Previous Owner Business Name:</b> _____	<b>Date of Change:</b> _____
<b>Previous Physical Location Address:</b> _____	<b>Previous AI Number:</b> _____

### 4. GENERATION OF TIRES

**Functions of Business:**  
(check all that apply)

<input type="checkbox"/> New Tire Dealer	<input type="checkbox"/> Used Tire Dealer	<input type="checkbox"/> Wholesale Tire Sales
<input type="checkbox"/> New Vehicle/ATV/UTV Dealer	<input type="checkbox"/> Used Vehicle/ATV/UTV Dealer	<input type="checkbox"/> Tire Generator – No Sales <sup>‡</sup>
<input type="checkbox"/> Retread Facility	<input type="checkbox"/> Fleet Operator	<input type="checkbox"/> Ineligible
<input type="checkbox"/> Landfill	<input type="checkbox"/> Authorized Collection Center	<input type="checkbox"/> Parish/DOTD Collection Center
<input type="checkbox"/> Salvage <sup>‡</sup> (attach copy of Auto Dismantler or Crusher License)	<input type="checkbox"/> Other <sup>‡</sup>	

**Explanation must be provided<sup>‡</sup>:** \_\_\_\_\_

**Exemptions:**  
(check all that apply)

<input type="checkbox"/> Go/Golf-Cart Tires	<input type="checkbox"/> Small Lawn/Yard Equipment	<input type="checkbox"/> Bicycle
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### 5. CERTIFICATION

I personally examined and am familiar with the information submitted in this document, and I hereby certify under penalty of law that this information is true, accurate, and complete to the best of my knowledge. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

**GUIDANCE FOR  
WASTE TIRE GENERATOR NOTIFICATION FORM**

**INTRODUCTION**

This *guidance* document has been prepared by the Department of Environmental Quality (LDEQ) to assist in completing this form and should be consulted prior to providing responses to the information required to be contained in this application. If you have questions concerning this form, please contact the Waste Permits Division at (225) 219-5337 or via email [wastetires@la.gov](mailto:wastetires@la.gov).

Authority to request this information is contained in the Louisiana Administrative Code, Title 33, Part VII, Subpart 2, Chapter 105. Copies of this regulation are available from the LDEQ Rules and Regulations of the **Legal Division** or on the LDEQ website at:

<http://www.deq.louisiana.gov/portal/DIVISIONS/LegalAffairs/RulesandRegulations/Title33.aspx>.

**SCOPE**

A Waste Tire Generator Notification Form shall be submitted within 30 days of commencement of business operations for the generation of waste tires.

**WHAT SHOULD BE SUBMITTED**

Submit one original copy of the application and associated attachments addressed to the attention of the current Assistant Secretary of the Office of Environmental Services or the current Administrator of the Waste Permits Division at the following address:

Louisiana Department of Environmental Quality  
Office of Environmental Services  
Waste Permits Division  
Post Office Box 4313  
Baton Rouge, LA 70821-4313

A copy of the application and attachments should be kept for your records.

**ACCEPTABLE ANSWERS**

If certain questions or fields in the application are not applicable, indicate "none" or "not applicable" (N/A). Terms such as "not significant," "nil," "trace," etc. are not appropriate.

The applicant must submit a completed application containing all relevant required information at the time the application is submitted. Submission of insufficient or undefined responses and/or information will result in the inability of the LDEQ to issue approval based on an incomplete application. Failure to accurately complete the application may subject the application to suspension, Notice of Deficiency(ies) (NODs), and/or potential enforcement action.

**COMPLETING THE APPLICATION**

Do not alter the application form in any way, except as directed by this *guidance* and instructions included in the Waste Tire Generator Notification Form.

The following instructions should be used in completing the application form. The numbers, letters, and headings provided in this *guidance* correspond to the numbers, letters, and headings contained in the application form.

## 1. TYPE OF APPLICATION

Indicate the type of notification that is submitted.

**New Applications** –The Department will assign the Agency Interest and DEQ Facility Number to appear at the top right of the page.

**Name Change** – If you have changed your company name with the Secretary of State or are doing business as (dba) a different company name, the Department should be notified on this form.

**Change in Ownership/Location** – If you are relocating your facility or taking over operations at an existing facility, this form should be filled out in order to close the previous account and reopen a new account for future business. Section 3 must be completed in order to process this type of application.

**Information Update** – If you are updating your information with the Department, this form should be submitted with an explanation of any changes attached.

**Date Business Opened/Date of Tire/Vehicle Sales** – These dates should be filled out as appropriate to reflect accurate effective dates, as appropriate (MM/DD/YYYY).

## 2. APPLICANT INFORMATION

**Name of Business/Government or Organization** – Indicate name of business or dba if not registered with the Secretary of State.

**Name of Business Owner** –Indicate the name of business owner.

**Property Owner** –Indicate the name of the property owner, and provide copy of the lease agreement. Also, indicate if you are in the process of owning the property (no need to attach proof).

**Waste Tire Contact Person** –Indicate the name of the person LDEQ should contact with information requiring the waste tire program.

**Waste Tire Contact Phone Number, Email Address** – Enter the waste tire contact person’s phone number and email address for official communication purposes.

**Facility Physical Address** – Enter the physical address of the business.

**Business Mailing Address** –Enter the business mailing address

**Parish** – Enter the parish where the business is located.

**Number of Locations Owned** – Indicate the number of locations for this facility owned by the business owner (include AI numbers)

**Federal Tax ID /Social Security Number** – Provide Federal Tax ID Number of the business, or Social Security Number of the business owner

**State Tax/Sales Tax ID** – Provide the State Tax ID number. You may also provide the Sales Tax Registration Certificate number issued by the Department of Revenue. If applied for, but not yet received, provide proof of application.

**Secretary of State (SOS)**—To register with the SOS and obtain a copy of the SOS Certificate, you may access the following web site: <https://coraweb.sos.la.gov/CommercialSearch/CommercialSearch.aspx>.

**Driver’s License** – Provide driver’s license number and state. Also provide a copy of driver’s license. Corporate ID is acceptable.

**Email** – Provide a valid email address

## 3. PREVIOUS OWNERSHIP OR LOCATION INFORMATION

**Previous Owner Business Name, Previous Physical Address, Previous AI Number** – If there has been a change of ownership or new location, indicate by completing this section which will include the name of the previous owner, the physical address of the location (no post office box), and the previous Agency Interest Number .

**Date of Change** -- This date should be filled out as appropriate to reflect accurate effective dates (MM/DD/YYYY).

#### 4. GENERATION OF TIRES

**Functions of Business:** Completion of this section is mandatory.

New Tire Dealer  
Used Tire Dealer  
Wholesale Tire Sales  
New Vehicle/ATV/UTV Dealer  
Used Vehicle/ATV/UTV Dealer  
Tire Generator – No Sales  
Retread Facility  
Fleet Operator  
Ineligible  
Landfill  
Authorized Collection Center  
Parish/DOTD Collection Center  
Salvage (attach copy of Auto Dismantler or Crusher License)  
Other

An **explanation** must be provided if you generate tires from no tire sales or operate a salvage, auto dismantling, or auto crushing operation.

**Exemptions** – If you operate a business that generates tire that are exempted, please indicate which type of tires you generate Go/Golf Cart Tires, Small Lawn/Yard Equipment, or Bicycle tires.

#### 5. CERTIFICATION

**Authorized Signature, Date, and printed Name** – Enter the name and date of the person authorized to prepare the application. The form should be signed with a wet ink signature to ensure authenticity.

## COMMON DEFINITIONS

Terms used in the application and/or in this *guidance* document shall have the same meanings as defined in the solid waste regulations in LAC 33:VII.115. Relevant terms from LAC 33:VII.115 and LAC 33:VII.10505 are included below. Additional terms shall have the following meanings:

Agency Interest (AI) Number – A unique identifier assigned to each facility by LDEQ. Existing facilities in the state have AI numbers assigned to them. New facilities will be assigned an AI Number after LDEQ receives the application.

Collection Center – A permitted or authorized location denoted on an authorization certificate where waste tires and waste tire material can be stored and/or collected.

Facility – Any land and appurtenances thereto used for collection, storage, processing, or recycling of whole waste tires and/or waste tire material.

Generator – A facility that generates waste tires as a part of its business operations.

Waste Tire – A whole tire that is no longer suitable for its original purpose because of wear, damage, or defect and/or has been discarded by the consumer.