



# MONTHLY WASTE TIRE COLLECTION CENTER REPORT

LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY  
WASTE PERMITS DIVISION  
P.O. Box 4313  
BATON ROUGE, LA 70821-4313

Agency Interest #: \_\_\_\_\_  
Facility # **R-** \_\_\_\_\_  
Month: \_\_\_\_\_  
Year: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

MAILING ADDRESS: STREET: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHYSICAL ADDRESS: (if different than mailing) STREET: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

\*if any of the above contact information has changed, it can be corrected by emailing [facupdate@la.gov](mailto:facupdate@la.gov).

Check this box if you are no longer in business of collecting tires. Indicate the date you no longer operated at this location here: \_\_\_\_/\_\_\_\_/\_\_\_\_

- **File a separate report for each month**
- Report is due no later than the 15<sup>th</sup> of month after the reporting month (Example: January report is due by February 15<sup>th</sup>)
- Mail form with attachments to address at top of form
- Questions? Call (225) 219-5337 or 1-866-896-LDEQ

**TOTAL NUMBER OF TIRES DROPPED OFF AT FACILITY** \_\_\_\_\_

\*per attached waste tire collection log sheet

**TOTAL NUMBER OF TIRES/TIRE WEIGHT SENT TO LANDFILL FOR DISPOSAL** \_\_\_\_\_

\*Tire drop offs must be documented on the waste tire collection log available on the Department’s website. The logs and reports shall be maintained by the collection center for a minimum of five years and shall be made available for audit and/or inspection at the collection center’s place of business during regular business hours.

Government agencies operating processing equipment under the authority of LAC 33:VII.10517.C must also comply with LAC 33:VII.10525.J.

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: \_\_\_\_\_



**WASTE TIRE COLLECTION LOG SHEET**  
 LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY  
 WASTE PERMITS DIVISION  
 P.O. Box 4313  
 BATON ROUGE, LA 70821-4313

Agency Interest #: \_\_\_\_\_  
 Facility # **R-** \_\_\_\_\_  
 Month: \_\_\_\_\_  
 Year: \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_ EMPLOYEE WITNESS \_\_\_\_\_

INDIVIDUAL'S NAME \_\_\_\_\_

MAILING ADDRESS STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ DRIVER'S LICENSE STATE \_\_\_\_\_ NUMBER \_\_\_\_\_

LICENSE PLATE STATE \_\_\_\_\_ NUMBER \_\_\_\_\_

NUMBER OF TIRES COLLECTED		PASSENGER	MEDIUM TRUCK	OFF ROAD	EXEMPT
		ELIGIBLE			
	INELIGIBLE				

How were the tire generated? \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_ EMPLOYEE WITNESS \_\_\_\_\_

INDIVIDUAL'S NAME \_\_\_\_\_

MAILING ADDRESS STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ DRIVER'S LICENSE STATE \_\_\_\_\_ NUMBER \_\_\_\_\_

LICENSE PLATE STATE \_\_\_\_\_ NUMBER \_\_\_\_\_

NUMBER OF TIRES COLLECTED		PASSENGER	MEDIUM TRUCK	OFF ROAD	EXEMPT
		ELIGIBLE			
	INELIGIBLE				

How were the tire generated? \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_ EMPLOYEE WITNESS \_\_\_\_\_

INDIVIDUAL'S NAME \_\_\_\_\_

MAILING ADDRESS STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ DRIVER'S LICENSE STATE \_\_\_\_\_ NUMBER \_\_\_\_\_

LICENSE PLATE STATE \_\_\_\_\_ NUMBER \_\_\_\_\_

NUMBER OF TIRES COLLECTED		PASSENGER	MEDIUM TRUCK	OFF ROAD	EXEMPT
		ELIGIBLE			
	INELIGIBLE				

How were the tire generated? \_\_\_\_\_

SIGNATURE \_\_\_\_\_



# WASTE TIRE COLLECTION CENTER LOG SHEET: GOVERNMENTAL ROADSIDE PICKUP

LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY  
WASTE PERMITS DIVISION  
P.O. Box 4313  
BATON ROUGE, LA 70821-4313

Agency Interest #: \_\_\_\_\_  
Facility # **R-** \_\_\_\_\_  
Month: \_\_\_\_\_  
Year: \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_

EMPLOYEE'S NAME \_\_\_\_\_

TIRE(S) LOCATION STREET: \_\_\_\_\_ STATE: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ LICENSE PLATE NUMBER \_\_\_\_\_

NUMBER OF TIRES COLLECTED

PASSENGER	MEDIUM TRUCK	OFF ROAD	EXEMPT

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_

EMPLOYEE'S NAME \_\_\_\_\_

TIRE(S) LOCATION STREET: \_\_\_\_\_ STATE: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ LICENSE PLATE NUMBER \_\_\_\_\_

NUMBER OF TIRES COLLECTED

PASSENGER	MEDIUM TRUCK	OFF ROAD	EXEMPT

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_

EMPLOYEE'S NAME \_\_\_\_\_

TIRE(S) LOCATION STREET: \_\_\_\_\_ STATE: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ LICENSE PLATE NUMBER \_\_\_\_\_

NUMBER OF TIRES COLLECTED

PASSENGER	MEDIUM TRUCK	OFF ROAD	EXEMPT

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_

EMPLOYEE'S NAME \_\_\_\_\_

TIRE(S) LOCATION STREET: \_\_\_\_\_ STATE: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ LICENSE PLATE NUMBER \_\_\_\_\_

NUMBER OF TIRES COLLECTED

PASSENGER	MEDIUM TRUCK	OFF ROAD	EXEMPT

SIGNATURE \_\_\_\_\_