

## USED TIRE MANAGEMENT, MARKETING & INCENTIVE GRANT APPLICATION

<b>1. Regional Solid Waste Management Board/Inter-District:</b>		d.	Federal Employer Tax ID Number:	
a.	RSWMB/Inter-District Applicant:	e.	Telephone Number:	
		f.	Fax Number:	
b.	Mailing Address:	g.	District Contact:	
c.	City/State/Zip:	h.	E-Mail:	
i.	Has the applicant public noticed their intent to apply for used tire grant funding? <input type="checkbox"/> Attach copy of proof of publication and any comment letters			<input type="checkbox"/> Yes <input type="checkbox"/> No
j.	Is there a fee in place to charge for the management of non-fee paid tires?			<input type="checkbox"/> Yes <input type="checkbox"/> No
k.	Has an e-manifest system been implemented within the service area?			<input type="checkbox"/> Yes <input type="checkbox"/> No
l.	Does the District award only per tire or per ton amounts needed to cover the costs of winning bids on contracts for services?			<input type="checkbox"/> Yes <input type="checkbox"/> No
m.	Is this funding request for <input type="checkbox"/> recycling, <input type="checkbox"/> reuse, or <input type="checkbox"/> both? <input type="checkbox"/> If No, attach a narrative explaining tire recycling feasibility	Amount Requested \$ _____		<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>2. Purpose(s) For Which Grant Money Is Requested:</b>			
a.	Construct or operate or contract for the construction or operation of a tire processing facility and equipment.		<input type="checkbox"/> Yes <input type="checkbox"/> No
b.	Contract for a tire processing facility service within or outside the regional solid waste management district/Inter-District.		<input type="checkbox"/> Yes <input type="checkbox"/> No
c.	Remove or contract for the removal of waste tires from waste tire sites within the regional solid waste management district/Inter-District.		<input type="checkbox"/> Yes <input type="checkbox"/> No
d.	Perform or contract for the performance of research designed to facilitate tire recycling.		<input type="checkbox"/> Yes <input type="checkbox"/> No
e.	Establish tire collection centers at solid waste disposal facilities, tire processing facilities or tire generators that shall accept automobile and truck or specialty tires from registered tire dealers at no charge, provided the tires had a tire management fee collected at the time of retail sale.		<input type="checkbox"/> Yes <input type="checkbox"/> No
f.	Establish at least one (1) tire collection center within the district that may accept all tires for which a management fee was not previously collected, including, but not limited to, mining, farming, or off-the-road vehicle tires. Any fee charged for the tires must not be in excess of the costs of properly removing and disposing of the tires.		<input type="checkbox"/> Yes <input type="checkbox"/> No
g.	Provide incentives for establishing privately operated tire collection centers for the public. This provision does not pertain to off-the-road tires that are exempt from the tire management fee.		<input type="checkbox"/> Yes <input type="checkbox"/> No
h.	Establish educational programs designed to inform the public of available recycling options and programs.		<input type="checkbox"/> Yes <input type="checkbox"/> No
i.	Funding for additional transportation costs incurred as a result of using tire disposal alternatives as a preference over landfill disposal.		<input type="checkbox"/> Yes <input type="checkbox"/> No
j.	Use moneys for other purposes approved by the Department.		<input type="checkbox"/> Yes <input type="checkbox"/> No

Explain:

### 3. Project Information:

a.	Is this a joint application with another RSWMB/Inter-District? <input type="checkbox"/> If yes, complete below and attach a copy of the inter-district agreement	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	RSWMB or Inter-Districts Name	Authorized Signature	Title
b.	<input type="checkbox"/> Attach tire management plan		
c.	<input type="checkbox"/> Attach ADEQ approved Business Plan		
<b>Contractor Information: (Attach copies of all contracts, proof of public notice publications and bids)</b>			
Contractor Name		Site Address	City/State/Zip
#1			
State length of the current contract, including beginning and ending dates and roll over options.			
Beginning Date		Ending Date	Length of Current Contract      yr(s)
			Roll Over Option(s)      yr(s)
Type of Contractor: <input type="checkbox"/> Transporter <input type="checkbox"/> Processor <input type="checkbox"/> End User <input type="checkbox"/> Other:			
Contractor Name		Site Address	City/State/Zip
#2			
State length of the current contract, including beginning and ending dates and roll over options.			
Beginning Date		Ending Date	Length of Current Contract      yr(s)
			Roll Over Option(s)      yr(s)
Type of Contractor: <input type="checkbox"/> Transporter <input type="checkbox"/> Processor <input type="checkbox"/> End User <input type="checkbox"/> Other:			
Contractor Name		Site Address	City/State/Zip
#3			
State length of the current contract, including beginning and ending dates and roll over options.			
Beginning Date		Ending Date	Length of Current Contract      yr(s)
			Roll Over Option(s)      yr(s)
Type of Contractor: <input type="checkbox"/> Transporter <input type="checkbox"/> Processor <input type="checkbox"/> End User <input type="checkbox"/> Other:			
Contractor Name		Site Address	City/State/Zip
#4			
State length of the current contract, including beginning and ending dates and roll over options.			
Beginning Date		Ending Date	Length of Current Contract      yr(s)
			Roll Over Option(s)      yr(s)
Type of Contractor: <input type="checkbox"/> Transporter <input type="checkbox"/> Processor <input type="checkbox"/> End User <input type="checkbox"/> Other:			
Contractor Name		Site Address	City/State/Zip
#5			
State length of the current contract, including beginning and ending dates and roll over options.			
Beginning Date		Ending Date	Length of Current Contract      yr(s)
			Roll Over Option(s)      yr(s)
Type of Contractor: <input type="checkbox"/> Transporter <input type="checkbox"/> Processor <input type="checkbox"/> End User <input type="checkbox"/> Other:			
d.	Project services conducted by Applicant: <input type="checkbox"/> Collection <input type="checkbox"/> Transportation <input type="checkbox"/> Processing <input type="checkbox"/> Other:		
e.	Are the District and/or contractors in compliance with and have the current necessary permits and licenses required by state law?		<input type="checkbox"/> Yes <input type="checkbox"/> No

### 4. Certification:

To the best of my knowledge, I certify the above information provided is true and correct.

\_\_\_\_\_  
Signature of Board Chairman

\_\_\_\_\_  
Print or Type Name and Title

\_\_\_\_\_  
Date