

## USED TIRE PROCESSING FACILITY PERMIT APPLICATION

Pursuant to APC&EC Rule 36, tire processing facilities shall submit the following information to the Division:

1.	1. Application Information							
	Type of Facility:	Tire Processing Facility		d.		Permit Number:		
a.				e.		AFIN:		
b.	Type of Application:	Proposed New Facility Existing				rmitted Facility	Other:	
0.	(Check One)	Renewal of Permitted Facility		Modification of Permit Facility			cility	
c.	Type of Processor:	Shredder	Cutter	Tire Derived Fuel User				
	(Check all that Apply)	🗌 Baler	Chopper	Ot	the	r:		

2. Owner and Operator Information							
	Name of				i.	Telephone Number:	
a.	Property Owner:				j.	Fax Number:	
b.	Mailing Address:				k.	E-mail Address:	
c.	City/State/Zip:						
d.	Type of Owner:	Individual	Partnership	Corpor	ratio	n Government	Other
e.	Name of				1.	Telephone Number:	
с.	Site Operator:				m.	E-mail Address:	
f.	Operator Address:						
g.	City/State/Zip:						
h.	Type of Operator:	Individual	Partnership	Corpor	ratio	n 🗌 Government	Other

3.	Site Information	on			
a.	Site Name:		f.	County:	
b.	Site Address:		g.	Site Telephone Number:	
c.	City/State/Zip:		h.	LAT/LONG:	
d.	Section, Township & Range:				
e.	Site Directions from Major Intersection:				

## 4. Quantities of Tires Processed, Stored, or Disposed at the Site

(Note: Processed tires must be expressed in tons, assuming auto tires weigh 22.5 lbs., tire residuals weigh 33.3 lbs., and truck tires weigh 120 lbs.)								
			Current Storage (Tons)	Storage	e Are	ea (Square Ft.)	Maxin	mum Storage (Tons)
a.	Waste Tires:							
b.	Used Tires Culled fo	or Resale:						
c.	Recycled Tires:							
d.	Processed Tires:							
e.	Totals:							
	If not to be disposing of processed tires or processing residual on the facility site, indicate the permitted solid waste management facility where processed tires or residuals will be disposed:							
f.	Facility Name:				j.	Telephone Nur	mber:	
g.	Street Address:				k.	E-mail Addres	s:	
Form TAP-4 02-2023 Payment			t of Fees: □Initial Fee \$	S250 □	Ann	ual Fee \$250		Page 1 of 3

h.	City/State/Zip:			1.	County:				
i.	If delivering processed tires to a recycling facility, describe the existing or proposed markets for processed tires:								
	Required Atta	achments in the application. If not applicable, give expla	nation	1.)					
equ		<b>PAREDNESS:</b> Owners and operate and provide to the Division a written							
	Proof of no	tification to local fire protection auth	oriti	es of the	emergency plan;				
	Proof of an	annual fire safety survey being cond	lucte	d;					
	Proof of a	written mosquito control plan;							
	🗌 Map showi	ng location of fire or other emergenc	y eq	uipment;	and				
	Disclosure	Statement							
prof narr	NOTE: All maps, plan sheets, drawings, isometrics, cross sections, or aerial photographs shall be legible; be signed and sealed by a registered professional engineer responsible for their preparation; be of appropriate scale to show clearly all required details; be numbered, reference to narrative, titled, have a legend of symbols used, contain horizontal and vertical scales, (where applicable), and specify drafting or origination dates; and use uniform scales as much as possible, contain a north arrow, and use National Geodetic Vertical Datum (NGVD) for all elevations.								
5a	a. Facility Desig	gn							
1.	A typographic or section map of the facility, including the surrounding area for one mile, no more than one year old, showing land use and zoning within one mile of the facility.								
2.	Evidence that the facility is in conformance with local zoning.								
3.	A plot plan of the facility on a scale of not less than one inch equals 200 feet. At a minimum, the plot plan shall include:								
	of all storage a	sign, including the location and size and processing areas for waste tires, s, and residuals from processing;	f)	construe		gs that are or will be include those used in ations;			
	b) All wetlands a	nd water bodies;	g)	All area	s used for loading an	d unloading;			
	c) Storm water c dikes and other	control measures, including ditches, r structures;	h)	All accollanes;	ess roads and intern	al roads, including fire			
	, <u> </u>	ies, easements and right of ways; wells, operating and abandoned	i)		n of all fences, ga measures; and	ates, and other access			
	e) Lecation of an	went, operaning and dounderied	j)	Location areas.	n of all processed t	ire or residual disposal			
5	b. Facility Oper	ration							
1.	Description of the f and processed.	Description of the facility's operation, including how processed tires will be collected, stored, recycled, disposed,							
2.	Description of how	Description of how each of the storage requirements in Rule 36.1602 will be met.							
3.	Copy of the emergency preparedness manual for the facility.								
4.	Copy of the fire safety survey.								

Description of how 75% of the annual accumulation of processed tires will be processed and removed for disposal

Permit fee required by Rule 36.1507 & 36.1601 (Must be included at time of application submittal).

6. Completed **closure plan** for the facility as required by Rule 36.1613.

Proof of financial responsibility as required by Rule 36.1615.

5.

7.

8.

or recycling.

## 6. Certification

The undersigned applicant or authorized representative of \_\_\_\_\_

is aware that statements

made in this form and attached information are an application for a waste tire processing facility permit from the Division of Environmental Quality (DEQ). The undersigned below certifies that the information in this application is true, correct, and complete to the best of his/her knowledge and belief. Further, the undersigned agrees to comply with the provisions of Act 317 Rule 36, Arkansas statutes, and all rules and regulations of the DEQ. DEQ shall be notified prior to the sale or legal transfer of the facility.

Signature of Authorized Agent

Print/Type Authorized Agent Name and Title

Date

Note: Attach letter of authorization if agent is not a governmental official, owner, or corporate officer.

## 7. Professional Engineer Registered in Arkansas

This is to certify that the engineering features of this tire collection and processing facility have been designed and/or examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgement, this facility, when properly maintained and operated will comply with all applicable statutes of the State of Arkansas and rules of DEQ. It is agreed that the Professional Engineer will provide the applicant with a set of instructions for proper maintenance and operation of the facility.

Signature:	
Printed Name and Title:	
Mailing Address:	
City/State/Zip:	
Telephone Number:	
Arkansas P.E. Registration Number:	