



Solid Waste and Compliance, 280 South Decatur Blvd, Las Vegas, NV 89107 Phone (702) 759-0600 Fax (702) 759-1427

## Waste Tire Hauler Application

*Type or print clearly - Incomplete Applications may be denied*

|                                                                                                                                                                                                            |                        |                                                                                                                                                      |       |                  |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------|-------|
| <b>Application Type (Check which apply):</b> <input type="checkbox"/> NEW APPLICATION <input type="checkbox"/> UPDATE PERMIT INFO                                                                          |                        |                                                                                                                                                      |       |                  |       |
| <b>I. Business Information</b>                                                                                                                                                                             |                        |                                                                                                                                                      |       |                  |       |
| Business Name                                                                                                                                                                                              |                        |                                                                                                                                                      |       |                  |       |
| Owner's Name                                                                                                                                                                                               |                        |                                                                                                                                                      |       |                  |       |
| Name of Facility                                                                                                                                                                                           |                        |                                                                                                                                                      |       |                  |       |
| Physical Business Address                                                                                                                                                                                  |                        |                                                                                                                                                      |       |                  |       |
| Mailing Address of Business<br>(if different from physical address)                                                                                                                                        |                        |                                                                                                                                                      |       |                  |       |
| Business Website                                                                                                                                                                                           |                        | Phone                                                                                                                                                |       | Fax              |       |
| <b>II. Operator Contact Information</b>                                                                                                                                                                    |                        |                                                                                                                                                      |       |                  |       |
| Name                                                                                                                                                                                                       |                        | Title                                                                                                                                                | Phone | Email Address    |       |
|                                                                                                                                                                                                            |                        |                                                                                                                                                      |       |                  |       |
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| <b>III. License Information</b>                                                                                                                                                                            |                        |                                                                                                                                                      |       |                  |       |
| Business License Jurisdiction:                                                                                                                                                                             |                        | <input type="checkbox"/> Clark County <input type="checkbox"/> Las Vegas <input type="checkbox"/> Henderson <input type="checkbox"/> North Las Vegas |       |                  |       |
|                                                                                                                                                                                                            |                        | License #:                                                                                                                                           |       | Expiration Date: |       |
| <b>IV. Permitted Disposal Facilities</b>                                                                                                                                                                   |                        |                                                                                                                                                      |       |                  |       |
| Provide a list of all disposal sites where waste tires will be dropped off for final disposition.                                                                                                          |                        |                                                                                                                                                      |       |                  |       |
| Facility ID                                                                                                                                                                                                | Name of Waste Facility | Address                                                                                                                                              |       | City             | State |
|                                                                                                                                                                                                            |                        |                                                                                                                                                      |       |                  |       |
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| <b>V. Waste Tire Hauling Methodology</b>                                                                                                                                                                   |                        |                                                                                                                                                      |       |                  |       |
| <b>How will your waste tire hauling business transport waste tires?</b>                                                                                                                                    |                        |                                                                                                                                                      |       |                  |       |
| <input type="checkbox"/> Dropbox <input type="checkbox"/> Route Truck <input type="checkbox"/> Other, describe: _____                                                                                      |                        |                                                                                                                                                      |       |                  |       |
| If your business uses route trucks or "other" for transporting waste tires, please proceed to Section VI below and provide the vehicle information for all vehicles that will be transporting waste tires. |                        |                                                                                                                                                      |       |                  |       |

**VI. Vehicle Information**

Please provide the following information for each vehicle used under your permit number for hauling waste tires or tire-derived material in Nevada. If you add or remove vehicles from your fleet, contact us with the information below and your permit will be amended. A list of the vehicle information may also be printed out and attached.

| Vehicle # | Vehicle Make & Year | License Plate # State | Registered Owner | US DOT # | Max load allowed by USDOT (Tons) |
|-----------|---------------------|-----------------------|------------------|----------|----------------------------------|
|           |                     |                       |                  |          |                                  |
|           |                     |                       |                  |          |                                  |
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|           |                     |                       |                  |          |                                  |

**VII. Comments****VIII. Attachments**

**Please attach a current copy of your business license(s), a blank waste tire hauling manifest, and any other pertinent information necessary to complete the application. Failure to include the required documents in your submittal may result in a rejected application and associated resubmittal fees.**

**IX. Applicant (Authorized Representative)**

The applicant acknowledges that they understand all applicable laws regarding waste tire hauling and are responsible for receiving and properly offering for disposal all waste tires collected for hauling. The applicant also understands that they are responsible for ensuring vehicles used to transport waste tires must meet the requirements and regulations of the USDOT. Applicant is aware that non-compliance with laws and regulations governing waste tire hauling may result in revocation of permit, issuance of an Order of corrective actions, and/or a Notice of Violation seeking administrative penalties.

A copy of applicable regulations can be found at <https://www.southernnevadahealthdistrict.org/solid-waste/regulations>.

Print name and job title:

Signature

Date:

PLEASE NOTE THAT THE ACCEPTANCE OF THIS APPLICATION, BY SOUTHERN NEVADA HEALTH DISTRICT, DOES NOT CONSTITUTE APPROVAL. APPLICATIONS CAN BE SUBMITTED BY MAIL, EMAIL OR FAX.

**OFFICE USE ONLY**

Date Received:

Permit Status:  Issued  Denied

Reviewed By:

Permit Number: \_\_\_\_\_