



K A N S A S

DEPARTMENT OF HEALTH AND ENVIRONMENT

WASTE TIRE PERMIT RENEWAL APPLICATION FOR MOBILE WASTE TIRE PROCESSOR

Facility Name _____ Permit Number _____

Mailing Address _____

Print Contact Name _____ E-Mail _____

Telephone Number (____) ____-____ Fax Number (____) ____-____

1. The total number of waste tires processed for period ending ____/____/____ = _____
2. Submit \$1,000 financial assurance.
3. Submit \$100.00 renewal fee.
4. What method(s) of processing is being used to meet the processing requirements listed below?

K.A.R. 28-29-29 (b) Processing of waste tires for disposal as set forth in paragraphs (a)(1) and (a)(2) shall be accomplished by any of the following means:

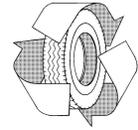
- (1) shredding;
- (2) cutting in half circumferentially;
- (3) cutting into at least four parts, with no part being greater than 1/3 of the original tire size;
- (4) chipping;
- (5) crumbing;
- (6) baling in a manner that reduces the volume of the waste tires by at least 50 ; or
- (7) an equivalent volume reduction process that has received prior approval, in writing, from the department.

This report along with the requested information must be submitted to this department not less than 30 days prior to expiration of your current permit.

Print Name of Responsible Person

Signature of Responsible Person

Form #wt201



**MONTHLY WASTE TIRE REPORT
FOR MOBILE WASTE TIRE PROCESSOR PERMIT
This Form Or A Similar Form Will Be Needed At Inspection Time**

Facility Name _____ Permit Number _____

Mailing Address _____
(Street) (City) (State) (Zip) (County)

Contact Name (Printed) _____

Telephone Number (____) ____-____ Fax Number (____) ____-____ E-mail _____

Activity:

The total number of waste tires processed for month ending ____/____/____ = _____
MM DD YY

Location of Tires	Owner Name and Address	Number of Waste Tires Processed	Dates of Arrival and Departure	Environmental Concerns In Connection With Tire Processing	Disposition of Tires

Use reverse side and additional pages if necessary to provide one line per site visited.

(Print Name of Responsible Person)

(Signature of Responsible Person)

