

MONTHLY WASTE TIRE FEE REPORT

LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY
 FINANCIAL SERVICES DIVISION
 POST OFFICE BOX 4311
 BATON ROUGE, LA 70821-4311

PLEASE MAKE CHECK PAYABLE TO:

LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY
 AND MAIL TO THE LISTED ADDRESS

NATIONAL ACCOUNT:

CONSOLIDATED REPORT:

AGENCY INTEREST #: _____

****QUESTIONS CONCERNING THIS FORM MAY BE DIRECTED TO (225) 219-5337**

BUSINESS NAME: _____

MAILING ADDRESS: _____

CONTACT NAME AND NUMBER: _____

MONTH: _____

YEAR: _____

Check this box if changes have been made to the primary business name, contact name, phone #, or mailing address. Changes in status of ownership, location, and/or facility name for any of the listed sites will require a new waste tire generator notification form be filed with the DEQ within 30 days of the change.

If one of your sites is terminating operations and/or no longer selling tires, indicate the location's AI# below and the date the change will occur.
 Site AI#: _____ Status Change date: _____

AI #	Street Address	City	WT#	New Tires Sold Through Retail				Used Tires Sold Through Retail			New Motor Vehicle Sales			Exempted Tires ⁽¹⁾			Total per site
				Passenger Light Truck	Medium Truck	Off Road	Retread Tires	Passenger Light Truck	Medium Truck	Off Road	Passenger Light Truck	Medium Truck	Off Road	Passenger Light Truck	Off Road	Other	
																	\$ -
																	\$ -
																	\$ -
																	\$ -
																	\$ -
																	\$ -
Totals tires:				0	0	0	0	0	0	0	0	0	0	0	0	0	\$ -
Multiply Total tires by \$/tire				\$ 2.00	\$ 5.00	\$ 10.00	\$ 1.25	\$ 2.00	\$ 5.00	\$ 10.00	\$ 2.00	\$ 5.00	\$ 10.00				
Total \$'s:				\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -				\$ -

Total \$'s owed: \$ -

(1) - MUST BE REGISTERED WITH DEQ AS A SELLER OF EXEMPT TIRES

A COPY OF THIS COMPLETED FORM MUST BE RETAINED AND MADE AVAILABLE FOR INSPECTION/AUDIT FOR A MINIMUM OF THREE YEARS

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: _____