



Illinois Environmental Protection Agency

2520 West Iles Avenue • P.O. Box 19276 • Springfield • Illinois • 62794-9276 • (217) 782-3397

Application for a Used Tire Storage and/or Processing Permit

Persons requesting a permit to operate a used tire storage or processing facility must use this application form. Completed applications must be submitted to:

Bureau of Land, Used Tire Unit
2520 West Iles Avenue, P.O. Box 19276
Springfield, IL 62794-9276

You may also complete this form online, save a copy locally, print, sign and submit it to the Bureau of Land, Used Tire Unit at the above address.

Attach any necessary plans, specifications, reports, etc. to fully support and describe the activities and modifications being proposed. Attach sufficient information to demonstrate the compliance with all regulatory requirements. Incomplete applications will be rejected. **Note:** Applicants must provide a physical address; the post office will not deliver a certified letter (final action letter) to a P.O. Box only. Please provide an extended ZIP+4 code for the site identification and owner/operator information.

I. Site Identification

Site Name: _____ IEPA BOL No.: _____
Street Address: _____ P.O. Box: _____
City: _____ State: IL Zip + 4: _____ County: _____
*Notification letters will not be sent without a 9-digit zip code.

II. Applicant Identification

1. Owner	Operator (if different)
Name: _____	Name: _____
Street Address: _____	Street Address: _____
PO Box: _____	PO Box: _____
City: _____ State: _____	City: _____ State: _____
Zip + 4: _____ Phone: _____	Zip + 4: _____ Phone: _____
Contact: _____	Contact: _____
Email Address: _____	Email Address: _____
FEIN ID No. _____	FEIN ID No. _____

2. Ownership and Operator Status:

	Owner	Operator
Corporation (ILL)	<input type="checkbox"/>	<input type="checkbox"/>
Government Body	<input type="checkbox"/>	<input type="checkbox"/>
Individual	<input type="checkbox"/>	<input type="checkbox"/>
Partnership	<input type="checkbox"/>	<input type="checkbox"/>
Sole Proprietor	<input type="checkbox"/>	<input type="checkbox"/>
Trust	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>

Land is Owned by:

☐ Owner ☐ Operator
☐ Leased by Applicant
Leased by Applicant for _____ years
Years of Lease Remaining: _____
Beginning Date of Lease: _____
Expiration Date of Lease: _____
☐ Held in Trust* Name of Trust: _____

*(Note: Lands that are held in trust and owners and operators of disposal sites must complete form LPC-PA9)

III. Location Information

Attach a copy of the United States Geological Survey (USGS) quadrangle map (7.5 minute quadrangle, if published) and/or a topographic map of the area which contains the site. Also provide a legal description of the site.

Name of Quadrangle Map provided: _____ Date: _____
_____ Acres in _____ Quarter, _____ Quarter, _____ Quarter, of Section _____, Township _____
Range _____ P.M. Local Description: Lot _____ Block _____
Present Zoning Classification and Restrictions (if any): _____

IV. Description of this Permit Request: (Note: The box below will expand as needed)

V. Facility Background

This is an existing facility (registered as a used tire storage site prior to July 1, 2016)

☐ Operation began: _____

This will be a new facility

☐ Operation to begin: _____

Operation of the facility is being modified

☐ IEPA BOL No. _____

Other existing environmental facility permits

☐ _____

The following information must accompany the application. Please indicate the location in the application for the document being submitted for this application.

Consult instructions for the contents of Sections V- VIII.

VI. General Facility Information

Page number or location of information:

- | | |
|---|-------|
| 1. A plan sheet of the site. | _____ |
| 2. A process flow diagram of the storage/processing operation (including product storage). | _____ |
| 3. A narrative description of the site's operation, including the days and hours of operation. | _____ |
| 4. Used tire characterization plan (identify wastes to be accepted and how they are to be managed). | _____ |
| 5. Description of processing equipment used at the site. | _____ |
| 6. Used tire storage plan (a description of analysis methods used to screen and test waste types). | _____ |
| 7. Residuals - a description of methods used to treat, transfer or dispose of residual wastes generated from the operation of the site. | _____ |
| 8. Contingency plan. | _____ |
| 9. Containment system/run-off. | _____ |
| 10. Tire transportation registration/placarding. | _____ |
| 11. A description of inspection procedures to monitor compliance. | _____ |
| 12. Daily Tire Record/Annual Tire Summary/Tire Tracking Receipts. | _____ |
| 13. Removal cost estimate/financial assurance. | _____ |
| 14. Closure plan. | _____ |
| 15. Site suitability. | _____ |

VII. Incineration/Thermal Treatment

Is an incinerator or thermal treatment unit included in this application? ☐ Yes ☐ No
(Refer to the instructions).

VIII. 39(i) Certification

A 39(i) certification must be submitted for each owner and operator business entity, and each person who signed for each entity, and each person who signed or may sign any application for this facility.

IX. Signatures

Original signatures are required. Signature stamps or applications transmitted electronically or by FAX are not acceptable.

All applications shall be signed by the person designated below as a duly authorized representative of the owner an/or operator. A printed name for each signature should also be provided.

Corporation - By a principal executive officer of the level of vice-president or above.

Partnership or Sole Proprietorship - By a general partner or the proprietor, respectively.

Government - By either a principal executive officer or a ranking elected official.

A person is a duly authorized representative of the owner and operator only if:

1. They meet the criteria above or the authorization has been granted in writing by a person described above; and
2. Is submitted with this application (a copy of a previously submitted authorization can be used).

I hereby affirm that all information contained in this application is true and accurate to the best of my knowledge and belief. I do herein swear that I am a duly authorized representative of the owner/operator and I am authorized to sign this permit application form.

Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))

Owner Printed Name:

Title:

Owner Signature:

Date:

Notary: Subscribed and Sworn before me this ____ day of _____ 20__ .

My commission expires on: _____

Signature & Stamp/Seal of Notary Public

Operator Printed Name:

Title:

Operator Signature:

Date:

Notary: Subscribed and Sworn before me this ____ day of _____ 20__ .

My commission expires on: _____

Signature & Stamp/Seal of Notary Public