



Scrap Tire Facility Registration Application

Application Type

Check One: New Facility Amendment

If an amendment:
 Registration Number: ____ - ____ - _____

Section(s) Being Amended:

Facility Information Emergency Contact(s) Fire Contingency Plan Facility Operator
 Property Owner Financial Assurance Plan View Drawings Closure Information

Applicant Information

This must be the Facility Owner or Operator and person who is completing the registration form.

Applicant Type: Facility Owner Facility Operator Facility Owner/Operator

Name: _____ Phone Number: _____

Mailing Address: _____

City: _____ State/Province: _____ Zip: _____

Email: _____

Facility Type

Please check one

Scrap Tire Collection Scrap Tire Storage – Class 2 Scrap Tire Recovery – Class 2 Mobile Scrap Tire Recovery

Facility Information

Name: _____ Phone Number: _____

Address: _____

City: _____ Zip: _____ County: _____

Latitude: ____° ____' _____ Longitude: ____° ____' _____

Local Health Department: _____

Note: If you do not know your local health department, you can look it up on line at www.odh.ohio.gov and then select **Local Health Dept.** Alternately, you may also call the Ohio Department of Health at 614-466-3543.

Facility Operator Information

Name: _____ Phone Number: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Email: _____

Emergency Contact

Person(s) authorized to commit resources necessary for emergency response, equipment, material, and services for the facility.

Name: _____ Phone Number: _____
Address: _____
City: _____ State/Province: _____ Zip: _____
E-mail: _____

Note: If there is more than one Emergency Contact, please attach an additional sheet listing those contacts with the above information.

Property Owner Information

Name: _____ Phone Number: _____
Address: _____
City: _____ State/Province: _____ Zip: _____
Parcel Number(s): _____

All Property Owners must be included on this application. Please make additional entries for each Property Owner where the facility is located. Please attach additional entries on a separate piece of paper if needed.

A certified copy of the title (i.e. a copy of the recorded deed with county, volume, and pages clearly identified) to the property on which the facility is located must be enclosed with initial registrations or amendments where the business location has moved.

Notifications

Have notifications of the new facility been sent to the following Ohio EPA Divisions:

Division of Air Pollution Control Yes No Division of Surface Water Yes No

If you answered no, you may want to contact Ohio EPA's Office of Compliance Assistance and Pollution Prevention (OCAPP) to help you determine if you need an air permit or a storm water permit. OCAPP provides free and confidential services to businesses that need help with Ohio EPA compliance requirements. For more information, call (800) 329-7518 or visit <http://epa.ohio.gov/ocapp>.

Licensed Motor Vehicle Salvage Dealer

If you are a licensed motor vehicle salvage dealer (MVSD) under ORC Chapter 4738, please provide the following information:

MVSD License Number: _____ MVSD License Issue Date: ____/____/____

Name of MVSD License: _____

If an applicant is a MVSD under ORC Chapter 4738, then **No Application Fee** is required in accordance with ORC Section 3734.83.

Scrap Tire Collection Only

Describe any portable containers in which scrap tires shall be stored including the number and types of containers and capacity of each container.

Security Measures and Vector Control

For all Scrap Tire Facilities

Please provide a narrative description of the security measures that will be used at the facility.

Please check this box if answers are attached on a separate piece of paper.

Please provide a narrative description of the method(s) used at the facility to control mosquitoes.

Please check this box if answers are attached on a separate piece of paper.

Scrap Tire Storage Class 2 & Scrap Tire Recovery Class 2

Maximum number of whole tires to be stored on site: _____

Maximum surface area to be used for the tire storage on site (in square feet): _____

Note: Plan view drawings are required; please see the **Plan View Drawing** section below for requirements.

a) Describe the equipment and methods to be used in the operation and maintenance of the facility. Include: performance capabilities, scrap tire processing rates and specifications of each piece of powered equipment to be used for loading, unloading, handling or processing scrap tires.

b) List proposed hours of operation.

c) Describe inspection procedures to prevent any material other than scrap tires from being accepted at the facility. Include descriptions of how tires mounted on wheel rims and the associated lead weights shall be segregated, stored, and managed for recycling or proper disposal.

d) Describe all activities to be performed on the site, including but not limited to, receiving, unloading, handling, storing, compacting, bailing, shredding, processing rates, order of operations, operational methods used to handle bulky and dusty materials, and any other processing operations.

e) Describe measures used to control dust and erosion at the facility.

Scrap Tire Recovery Class 2 Only: Facilities must calculate their Daily Designed Input Capacity (DDIC), in Tons and provide narrative describing the basis for the DDIC calculation:

The initial DDIC shall be calculated as an estimated average of the total daily processing amount for all operating days in each month, expressed in weight. This amount shall be updated for each new licensing year to determine the need for an amendment. Updated calculations shall be based on the amounts recorded in the facility's operating log, expressed either by weight (for the facilities using scales), number count, or volume per day. Use the conversion factors table between weight and volume or number in Appendix I of OAC Rule 3745-27-61.

Financial Assurance

Scrap Tire Storage Class 2 & Scrap Tire Recovery Class 2

Calculations of the amount of financial assurance must be based on the cost of a third party to complete closure of the facility.

The financial assurance calculation shall be based on the maximum number of scrap tires and the maximum amount of scrap tire material to be stored at the facility. Please use passenger tire equivalents to calculate the maximum number of scrap tires.

Total number of whole scrap tires (including baled tires and rough tire shreds) currently stored plus those tires to be stored at the facility or planned to be stored at the facility.	X	\$1.00	=
Total number of processed scrap tires (excluding baled tires and rough tire shreds captured above) to be stored at the facility.	X	The cost for transportation and disposal at a scrap tire monocell or monofill facility	=
All other processed scrap tires, manufacturing by-products, and manufacturing residuals from scrap tires (including all component parts, partially assembled, and fully assembled products made from scrap tires).	X	The cost of removal from the facility to a recycling or disposal facility	=

Financial Assurance required for Closure Costs. (sum of all boxes on the right) \$

For initial applications, an **unexecuted draft** of the financial assurance instrument must be submitted in this the application.

Financial Assurance

Mobile Scrap Tire Recovery

All mobile scrap tire recovery facilities shall submit to Ohio EPA – Division of Materials and Waste Management (DMWM) an executed and funded financial assurance instrument(s) in the amount of no less than **Fifty Thousand Dollars (\$50,000)** before issuance of the initial registration certificate(s).

General guidelines for all financial assurance mechanisms can be found in OAC Rule 3745-25-15 (http://epa.ohio.gov/portals/34/document/currentrule/3745-27-15_current.pdf) The wording required for all financial assurance forms for “instruments” can be found in each relevant section of OAC 3745-27-17 (http://epa.ohio.gov/portals/34/document/currentrule/3745-27-17_current.pdf).

For renewal applications, ensure financial assurance is maintained an on file with the Ohio EPA – DMWM. The financial assurance instrument(s) must be in the name of the business as stated above on this application.

Mobile Scrap Tire Recovery

Describe portable equipment to be used:

Describe processing methods to be used:

Calculate the Daily Designed Input Capacity (DDIC), in Tons and provide narrative describing the basis for the DDIC calculation:

The initial DDIC shall be calculated as an estimated average of the total daily processing amount for all operating days in each month, expressed in weight. This amount shall be updated for each new licensing year to determine the need for an amendment. Updated calculations shall be based on the amounts recorded in the facility's operating log, expressed either by weight (for the facilities using scales), number count, or volume per day. Use the conversion factors table between weight and volume or number in Appendix I of OAC Rule 3745-27-61.

Plan View Drawing

For Scrap Tire Storage and Recovery only

The Plan View Drawing defines where material can be placed at the facility. Any changes to the location of the materials placement area or boundary lines of the facility must be documented by submission of an amended scrap tire facility registration and a revised Plan View Drawing.

Plan view drawings and detailed engineering plans must be submitted showing the following items inside the facility boundaries and within 500 feet of the proposed processing facility:

- Location of the property lines where the facility is to be located
- Location and size limits of proposed portable scrap tire containers including maximum height of all scrap tire storage piles
- Location and width of all fire breaks
- Location and dimensions of all buildings, fencing, gates or structures, including the location and dimension of all domiciles in the facility's boundaries and within 500 feet of the facility's boundaries
- Location of all access roadways
- Existing direction of flow and points of concentration of all surface water
- Any berms and/or other structures that are required by OAC Rule 3745-27-62(C)(2-3), or to control run-off from the facility in accordance with OAC Rule 3745-27-65(I)(2)(d)
- Location of bridges, elevated trestles, elevated roadways, elevated railroads or electric power lines having voltage in excess of 750 volts or that supply power to fire emergency systems
- Limits of the regulatory floodplain

Plan view drawings must meet the following criteria:

- a. Minimum dimension of 24 inches by 36 inches
- b. Scale with one inch equaling a maximum of 200 feet
- c. North arrow included

Letter(s) of Intent

Letter(s) of intent to be sent by certified mail or any other form of mail accompanied by a receipt to the following individual(s) or organization(s):

- The governments of the general purpose political subdivisions where the facility is proposed to be located including but not limited to county commissioners, legislative authority of a municipal corporation, or the board of township trustees.
- The single or joint county solid waste management district or districts or regional solid waste management authority or authorities where the facility is proposed to be located.
- The owner or lessee of any easement or right of way bordering or within the proposed facility boundaries which may be affected by the proposed solid waste facility.
- The local zoning authority having jurisdiction.
- The national or state park system administrator, if any part of the proposed facility is to be located within or shares any portion of the national or state park boundary.
- The conservancy district, if any part of the proposed facility is to be located within or will share the conservancy district boundary.
- The fire department having responsibility for providing fire control services where the proposed facility is to be located. Note this letter shall include a copy of the fire contingency plan.
- The approved health department.

Letters of intent need to communicate to the recipient that the individual plans to establish and/or modify a scrap tire facility at a specified location and describe the property and facility boundaries. **Copies of the letters of intent and return receipts must be included in this application.**

Fire Contingency Plan

For Scrap Tire Storage and Recovery only

Submit a copy of the fire contingency plan that shall include, but is not limited to, the following information:

- An updated list of names, address, and phone numbers of all:
 - Local Police Departments
 - Local Fire Departments
 - Ohio EPA Emergency Response Team
 - Ohio EPA District Office
 - Local Health Department
 - Local Solid Waste Management District
 - Contractors
 - Local Emergency Response Teams
- An updated list of names, addresses, and phone numbers of all persons designated to act as emergency coordinators for the facility. This list shall include at least one person authorized to commit resources necessary to procure equipment, materials, and services.
- A copy of arrangements or agreements with the local police department, local fire department, contractors, and local emergency response teams to coordinate emergency services in the event of a fire at the facility.
- An updated list of all emergency equipment at the facility, including but not limited to, fire extinguishing systems and equipment, spill control equipment, and communications equipment.

The fire contingency plan kept on site shall be updated at least annually and comply with any local and state fire codes.

A copy of this fire contingency plan should also be submitted to the local Fire Chief.

Closure Plan Information

Facility Information

Name: _____
Address: _____
City: _____ Zip: _____ County: _____

Provide a schedule of all steps necessary to close the facility per OAC Rule 3745-27-66 as well as a description of the steps needed to close the scrap tire facility as detailed in paragraphs (C) and (D) of OAC Rule 3745-27-66.

Contact During Closure

Name: _____ Phone Number: _____
Address: _____
City: _____ State/Province: _____ Zip: _____
Email: _____

Please check this box if answers are on a separate piece of paper.

Submission Instructions

A **non-refundable** application fee for initial applications of:

- A Scrap Tire Collection Facility owned or operated by a MVSD: \$0
- A Scrap Tire Storage Facility owned or operated by a MVSD: \$0
- All other Scrap Tire Facility Applicants: \$15

Please send check or money order payable to **Treasurer – State of Ohio** and the completed application to:

Ohio EPA – DMWM
P.O. Box 1049
Columbus, Ohio 43216-1049

Please use the same address above to submit all amendments. No application fee is required for an amended application. Additionally, you may also complete and submit this registration online at <http://ebiz.epa.ohio.gov>

For regulatory purposes, the initial application and any subsequent revisions of the application shall be submitted in duplicate to the director of the Ohio EPA with a third copy sent to the Board of Health of the health district where the facility is or shall be located. Any revisions to the application shall be accompanied by an index listing the change and the page(s) where the change occurred.

Registration Certification

The owner or operator signing a document shall be one of the following:

1. In the case of a corporation, a principal executive officer of at least the level of vice president or a duly authorized representative, if such representative is responsible for the overall operation of the facility.
2. In the case of a partnership, a general partner.
3. In the case of a limited liability company, a manager, member, or other duly authorized representative of the limited liability company, if such representative is responsible for the overall operation of the facility.
4. In the case of a sole proprietorship, the owner.
5. In the case of a municipal, state, federal, or other governmental facility, the principal executive officer, the ranking elected official or other duly authorized employee.

By signing this document, I hereby certify that all statements and all assertions of fact made in the document are true, accurate, include all required information, and comply fully with applicable rules.

Authorized Representative of Company

Signature

Date

Sworn to and subscribed to before me on this _____ day of, _____, _____

Notary Public

Only applications containing "notarized" original signatures will be processed.