



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

Do I have to be permitted as a waste tire hauler?

Complete the eligibility questionnaire.

- | | | |
|-------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Are you hauling waste tires that you or your business generated? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 2. Are you a government agency? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 3. Are you transporting used tires to be resold or retreadable casings to be retreaded only? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 4. While traveling through Clark County, are planning on stopping to load or unload tires in the State of Nevada? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 5. Have you been directed by the Solid Waste Management Authority to transport tires for disposal? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 5. Are you transporting products made from recycled waste tires for sale or other distribution? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

If you answered NO to any of the statements above, you or your facility must be permitted as a waste tire hauler. Please complete and submit the following application to the Southern Nevada Health District, Solid Waste and Compliance section at least 14 days before operation as a waste tire hauler.

Application Type (Check which apply): NEW APPLICATION RENEWAL APPLICATION UPDATE PERMIT INFO

I. Facility Information:

Business Name:			
Owner's Name:			
Type of Ownership	<input type="checkbox"/> Sole Prop <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other : _____ (Specify)		
Name of Facility:			
Physical Business Address:			
Mailing Address of Business: (if different from physical address)			
Hours of Operation:		Phone:	
		Fax:	

II. Contact Information Owners, Individuals, Partners, or Corporate Officers

Name	Title	Phone	Address

III. License Information

Nevada Secretary of State Business ID:		Expiration Date:	
Is the business status listed as "Active":	<input type="checkbox"/> YES <input type="checkbox"/> NO		
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:
Is the business license status listed as "Active":	<input type="checkbox"/> YES <input type="checkbox"/> NO		

IV. 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)

V. Comments:

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VI. Attachments

When submitting an application for a waste tire hauler permit, please submit a current copy of your business license(s), Nevada Secretary of State information, a blank waste tire hauling manifest and any other pertinent information necessary to complete the application.

VII. 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: <input type="checkbox"/> Issued <input type="checkbox"/> Denied
Reviewed By:		Permit Number: _____

Mailing address:
 Southern Nevada Health District
 Solid Waste and Compliance Section
 PO BOX 3902
 Las Vegas, Nevada 89127

Fax: (702) 759-1427