GOVERNMENT OF THE U.S. VIRGIN ISLANDS
DEPARTMENT OF PLANNING & NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL PROTECTION
(340) 773-1082 / 774-3320

DPNR use only: Payment Type ____ Check ____Cash

Date Received_____ Receipt No._____

Permit No._____ Date Issued_____

SPECIAL SOLID WASTE PERMIT TO COLLECT/STORE WASTE TIRE

Pursuant to the Solid & Hazardous Waste Management Act 19 V.I.C. {1557 *et. seq.*} and the Rules and Regulations promulgated thereunder, the owners or operators of a qualifying waste tire collection center, small processing facility or shredding, chopping, or cutting equipment are required to submit the following information to DPNR

Status of Operation:

__ Existing

__ Proposed

Type of Operation:

__ Waste Tire Collection Center

__ Small Processing Facility

__ Shredding, Chopping, or Cutting Equipment

__ Other: _____

Waste Tire Collection Centers and Small Processing Facilities must provide the following facility information:

Facility Name: _____

Street Address: _____ City:_____ Zip:_____

Name of Operator: _____ Telephone Number: _____

Operator Address:_____City:_____ Zip:_____

Name of Property Owner (if different):_____ Telephone Number:_____

Operator Address:_____City:_____ Zip:_____

Parcel Identification Number_____ Date Operation Began:_____

Quantities of Waste Tires Received Per Month:

_____tires

Quantities of Waste Tire Stored On-site:

_____tires

Quantities of Waste Tire Processed Per Month

_____tires

Describe in sufficient detail how and where the waste tires, processed tires, and residuals from processing will be disposed:

_____

_____

_____

Required Attachments:

a. Certificate of Inspection from the VI Fire Services

CERTIFICATION:

I certify, to the best of my knowledge and belief, that the information provided in this application is true and accurate.

_____	_____	_____
Signature of Authorized Representative	Name of Authorized Representative (**Print or type**)	Date