



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 SOLID WASTE MANAGEMENT PROGRAM
SCRAP TIRE HAULER INSPECTION CHECKLIST

PERMITEE PERMITTEE					
PERMIT NUMBER PERMIT NUMBER		EXPIRATION DATE EXPIRATION DATE		TELEPHONE NUMBER TELEPHONE NUMBER	
CHECK ONE <input type="checkbox"/> OWNER <input type="checkbox"/> MANAGER <input type="checkbox"/> EMPLOYEE		NAME OF CONTACT NAME OF CONTACT			
MAILING ADDRESS MAILING ADDRESS					
CITY Click here to enter text.		STATE MO	ZIP ZIP	COUNTY COUNTY	
NUMBER OF SCRAP TIRES ON-SITE AND LOCATION SCRAP TIRES AND LOCATIONS					
OPERATING REQUIREMENTS 10 CSR 80-8.030				YES	NO
RECORDKEEPING					
Records available for inspection upon request				<input type="checkbox"/>	<input type="checkbox"/>
Records maintained for the last three (3) years				<input type="checkbox"/>	<input type="checkbox"/>
Original, current permit kept in hauling vehicle(s)				<input type="checkbox"/>	<input type="checkbox"/>
SCRAP TIRE TRACKING RECORDS					
Is the hauler maintaining detailed scrap tire records?				<input type="checkbox"/>	<input type="checkbox"/>
Records maintained on forms <input type="checkbox"/> provided <input type="checkbox"/> approved by the department (check one)					
• Scrap Tire Tracking Records include					
1. Name, address and telephone number of scrap tire hauler				<input type="checkbox"/>	<input type="checkbox"/>
2. Scrap Tire Hauler Permit Number				<input type="checkbox"/>	<input type="checkbox"/>
3. Hauler's signature and date				<input type="checkbox"/>	<input type="checkbox"/>
4. Name, address and telephone number of scrap tire generator				<input type="checkbox"/>	<input type="checkbox"/>
5. Generator's authorized signature and date				<input type="checkbox"/>	<input type="checkbox"/>
6. Number or weight of scrap tires shipped				<input type="checkbox"/>	<input type="checkbox"/>
7. Number or weight of tires given to end-user or held for resale				<input type="checkbox"/>	<input type="checkbox"/>
8. Name, address and telephone number of receiver				<input type="checkbox"/>	<input type="checkbox"/>
9. Receiver authorized signature and date				<input type="checkbox"/>	<input type="checkbox"/>
10. Tracking records submitted to the department by the 15 th of each month				<input type="checkbox"/>	<input type="checkbox"/>
Is the hauler maintaining monthly summary tracking records?				<input type="checkbox"/>	<input type="checkbox"/>
Records maintained on forms <input type="checkbox"/> provided <input type="checkbox"/> approved by the department (check one)					
• Monthly Summary Tracking Records include					
1. Name, address and telephone number of scrap tire hauler				<input type="checkbox"/>	<input type="checkbox"/>
2. Scrap Tire Hauler Permit Number				<input type="checkbox"/>	<input type="checkbox"/>
3. Month or period of operation				<input type="checkbox"/>	<input type="checkbox"/>
4. Number or weight of scrap tires hauled				<input type="checkbox"/>	<input type="checkbox"/>
5. Receiver's name, address, telephone number and permit number				<input type="checkbox"/>	<input type="checkbox"/>
FINAL DISPOSITION OF SCRAP TIRES					
FINAL DESTINATION OF SCRAP TIRES (NAME, ADDRESS, TELEPHONE NUMBER AND PERMIT NUMBER Click here to enter text.					

AVERAGE NUMBER OR WEIGHT OF SCRAP TIRES HAULED PER WEEK
Click here to enter text.

COMMENTS/RECOMMENDATIONS

Click here to enter text.

SIGNATURE OF INSPECTOR



DATE
DATE

Photograph Addendum

		<p>Photograph: #1 Date Taken: date By: Photographer County: Click here to enter text. Location: Click here to enter text. Description: Description</p>
		<p>Photograph: #2 Date Taken: date By: Photographer County: Click here to enter text. Location: Click here to enter text. Description: Description</p>
		<p>Photograph: #3 Date Taken: date By: Photographer County: Click here to enter text. Location: Click here to enter text. Description: Description</p>

		<p>Photograph: #4 Date Taken: date By: Photographer County: Click here to enter text. Location: Click here to enter text. Description: Description</p>
		<p>Photograph: #5 Date Taken: date By: Photographer County: Click here to enter text. Location: Click here to enter text. Description: Description</p>
		<p>Photograph: #6 Date Taken: date By: Photographer County: Click here to enter text. Location: Click here to enter text. Description: Description</p>