

Environmental Health

NORTHERN NEVADA PUBLIC HEALTH ENVIRONMENTAL HEALTH SERVICES

1001 E. Ninth St. • Reno, NV 89512 Phone: (775) 328-2434

WASTE TIRE HAULER MANIFEST

PART 1. TO BE COMPLETED BY REPRESENTATIVE OF TIRE DEALER OR WASTE TIRE GENERATOR. INSTRUCTIONS ARE ON REVERSE SIDE OF FORM.

Tire Dealer/Generator				
Name & Address				
County (Area Code) Telephone Number				
Date of Pickup (Month/Day/Year)				
Whole Tires in this Shipment OR → Volume of Tires in this Shipment			Weight of Tires in This Shipment	
	(cubic yards) OR →		(Check One) pounds tons	
I certify that the information provided above is true Waste Tire Dealer/Generator Represe				
Date Pri	inted Name			
PART 2. TO BE COMPLETED BY REPR	ESENTATIVE OF WAS	STE TIRE HAULER. I	NSTRUCTIONS ARE ON REVERSE	SIDE
OF FORM.				
(a) NNPH Waste Tire Hauler Vehicle Regist	ration Number	Vahiela Licansa Nu	mbor (including State/Country)	
While the flader vehicle Registration Number				
(b)				
ADJUSTMENT: Waste Tires removed fo		Re	maining waste tires for delivery	
Name and address of site receiving was	te tires:			
I certify that the information provided above is true				
load must be accompanied by its own manifest. I Waste Tire Hauler registration.	an aware that faishcation	or this mannest may result	in suspension, revocation, or deniar or renewar	лпу
Waste Tire Hauler Representative Si	gnature			
Date Printe	ed Name			
PART 3. TO BE COMPLETED BY REPR				
ARE ON REVERSE SIDE OF FORM.	LOLINIANVES OF W		AND DESTINATION SITE. INSTRUC	10143
(a) TO BE COMPLETED BY WASTE TIR	E HAULER. TO BE CO	RRECTED BY DEST	INATION SITE IF DIFFERENT.	
Destination Site				
Name & Address				
County (Area Code) Telephone Number				
(b) TO BE COMPLETED BY DESTINATION	ON SITE			
Date Tires Received (Month/Day/Year)				
Are the number of tires received the sa the box(es) below:	me as the number of ti	res shipped in Part 1?	□ Yes □ No If NO, please comp	
Whole Tires in this Shipment OR	Volume of tires in t	his Shipment	Weight of tires in this Shipment	lete
	(cubic yards)	OR	(Check one) pounds tons	lete
				lete
				lete
I certify that the information provided above is tru reuse or disposal.	e and correct and that I have	e been authorized by North	ern Nevada Public Health to accept waste tires t	
reuse or disposal.	ure		·	

INSTRUCTIONS FOR COMPLETING WASTE TIRE HAULER MANIFEST

ALL PARTIES MUST KEEP COPIES OF THE MANIFESTS FOR THREE YEARS AND MAKE THEM AVAILABLE TO AUTHORIZED REPRESENTATIVES OF NORTHERN NEVADA PUBLIC HEALTH UPON REQUEST.

PART 1. TO BE COMPLETED BY WASTE TIRE DEALER/TIRE GENERATOR REPRESENTATIVE

- 1. Representative of the tire dealer/waste tire generator completes this section.
- 2. Complete the name of the company, address, city, state, zip, county, and phone number (address stamp is acceptable on each copy).
- 3. Show the number of whole tires and/or processed tires in this shipment. For example, a shipment may contain 100 whole tires and/or 100 pounds of processed tires.
- 4. Certify that the information provided is true and correct in Part 1 and Part 2(a) and Part 3(a), sign, and date.
- 5. Keep a copy of the manifest for record keeping.

PART 2. TO BE COMPLETED BY WASTE TIRE HAULER REPRESENTATIVE

- 1. Driver representing the registered waste tire hauler completes this section.
- 2. Complete Section 2(a) PRIOR TO LEAVING THE TIRE GENERATOR'S PREMISES.
- 3. Complete Section 3(a) PRIOR TO LEAVING THE TIRE GENERATOR'S PREMISES (address stamp is acceptable on each copy).
- 4. Complete Section 2(b) PRIOR TO ARRIVAL AT THE WASTE TIRE DESTINATION SITE.
- 5. Certify that the information provided is true and correct, sign and date.
- 6. Keep a copy of the manifest for record keeping.

PART 3. WASTE TIRE DESTINATION SITE CERTIFICATION

- 1. Representative of the receiving facility completes this section.
- 2. Verify Section 3(a) information.
- 3. Complete Section 3(b).
- 4. Verify number/quantity of tires received.
- 5. Certify that the information provided is true and correct, sign and date.
- 6. Keep a copy of the manifest for record keeping.