



SCRAP TIRE PROGRAM

CONSOLIDATED LOAD SCRAP TIRE TRANSPORTATION RECORD

This form provides the information required by Part 169, Scrap Tires, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended.

THIS IS THE ONLY FORM APPROVED FOR CONSOLIDATED LOAD USE BY THE DEPARTMENT AND IS TO BE USED IN CONJUNCTION WITH THE SCRAP TIRE TRANSPORTATION RECORD EQP 5128.

This form shall be completed and signed by a scrap tire generator or hauler each time that he provides scrap tires for transportation to another facility. A copy shall be retained by the generator before the hauler leaves his site. The receiving location to which the tires are delivered shall complete this form upon receipt of the scrap tires, retain a copy for their records, and **within thirty (30) days, forward a copy of the completed Scrap Tire Transportation Record with the Consolidated Load Record to the generator.** The original copy shall be retained by the hauler.
PLEASE SEE INSTRUCTIONS (EQP 5128i) FOR ADDITIONAL INFORMATION.

PART 1: SCRAP TIRE GENERATOR CERTIFICATION

I hereby certify that the below indicated scrap tires were collected in the normal course of business and are destined to be transported to the facility indicated in Part 3 of the Scrap Tire Transportation Record. I certify under penalty of law that the information contained on this form, to the best of my knowledge and belief, is true, accurate, and complete. I am aware that there are significant penalties for submitting false or incomplete information, including the possibility of a fine and imprisonment for knowing violations.

GENERATOR #1 – NAME		PHYSICAL ADDRESS	CITY	STATE	ZIP CODE	PHONE
DATE	SCRAP TIRE GENERATOR AUTHORIZED SIGNATURE	PRINT NAME	NUMBER/WEIGHT/VOLUME OF TIRES			
			PASSENGER	TRUCK	OVERSIZE	CUT/SHREDDED
GENERATOR #2 – NAME		PHYSICAL ADDRESS	CITY	STATE	ZIP CODE	PHONE
DATE	SCRAP TIRE GENERATOR AUTHORIZED SIGNATURE	PRINT NAME	NUMBER/WEIGHT/VOLUME OF TIRES			
			PASSENGER	TRUCK	OVERSIZE	CUT/SHREDDED
GENERATOR #3 – NAME		PHYSICAL ADDRESS	CITY	STATE	ZIP CODE	PHONE
DATE	SCRAP TIRE GENERATOR AUTHORIZED SIGNATURE	PRINT NAME	NUMBER/WEIGHT/VOLUME OF TIRES			
			PASSENGER	TRUCK	OVERSIZE	CUT/SHREDDED
GENERATOR #4 – NAME		PHYSICAL ADDRESS	CITY	STATE	ZIP CODE	PHONE
DATE	SCRAP TIRE GENERATOR AUTHORIZED SIGNATURE	PRINT NAME	NUMBER/WEIGHT/VOLUME OF TIRES			
			PASSENGER	TRUCK	OVERSIZE	CUT/SHREDDED
GENERATOR #5 – NAME		PHYSICAL ADDRESS	CITY	STATE	ZIP CODE	PHONE
DATE	SCRAP TIRE GENERATOR AUTHORIZED SIGNATURE	PRINT NAME	NUMBER/WEIGHT/VOLUME OF TIRES			
			PASSENGER	TRUCK	OVERSIZE	CUT/SHREDDED
GENERATOR #6 – NAME		PHYSICAL ADDRESS	CITY	STATE	ZIP CODE	PHONE
DATE	SCRAP TIRE GENERATOR AUTHORIZED SIGNATURE	PRINT NAME	NUMBER/WEIGHT/VOLUME OF TIRES			
			PASSENGER	TRUCK	OVERSIZE	CUT/SHREDDED
GENERATOR #7 – NAME		PHYSICAL ADDRESS	CITY	STATE	ZIP CODE	PHONE
DATE	SCRAP TIRE GENERATOR AUTHORIZED SIGNATURE	PRINT NAME	NUMBER/WEIGHT/VOLUME OF TIRES			
			PASSENGER	TRUCK	OVERSIZE	CUT/SHREDDED

DISTRIBUTION: Original must be retained by the Hauler; Copies must be retained by: 1) Generator; 2) Receiving location; Receiving location must within 30 days from receipt of tires send a copy of completed record to the Generator. **Additional copies of this page may be attached if more than seven generators contribute to a consolidated load. The number of pages attached must be indicated. Additional information required by the generator and/or hauler may be printed on the reverse.** See attached instructions on how to complete this form. EGLE-ScrapTire@Michigan.gov