

TIRE SUPPLEMENT

Applicant's Name: _____

1. Does the applicant sell, install and/or repair any tires manufactured more than:
 - a) 5 years prior to the date of services? Yes No
 - b) 6 years prior to the date of services? Yes No
 - c) 10 years prior to the date of services? Yes No

2. What are the applicant's gross receipts for:
 - a) All operations? \$ _____
 - b) Tire sales, installation and/or repair (including wheel/rims)? \$ _____

3. Complete the following table according to the percentage of receipts from tire sales, installation, and or repair associated with each tire type. The sum total must equal 100%.

Tire Type	% of Total Tire Receipts		
	New Tires	Used Tires	Recapped, Retreaded or Regrooved Tires
Private Passenger Vehicle	%	%	%
Heavy Truck Tractor or Trailer, or Extra-Heavy Truck	%	%	%
Motorcycle	%	%	%
Recreational Vehicle	%	%	%
Farm & Contractor Equipment	%	%	%
Bus (any vehicle designed to transport 16 or more passengers)	%	%	%
Other:	%	%	%
Sum Total:	100%		

4. If you repair tires for heavy trucks:
 - a) Do you use a safety cage when working with split rim or locking ring wheels? Yes No N/A
5. Does the applicant reclaim, recycle and/or repurpose scrapped tires/rubber waster for purposes other than use on a vehicle? Yes No If yes:
 - a) What are the applicant's gross receipts from scrapped tire/rubber waste for purposes other than use on a vehicle? \$ _____
 - b) Please describe the scrapped tire/rubber waste reclamation, recycling, and/or repurposing operations in more detail: _____
6. Do you rent or lease tires to customers? Yes No
7. Do you perform rim repair? Yes No
 - If yes: a) Are tires removed? Yes No b) Types of repair: Structural Cosmetic
8. Describe your quality assurance precautions to ensure tires are properly installed & inflated, and that all lug nuts are properly tightened: _____

Applicant Signature

Date