



**environment
& tourism**

Department:
Environmental Affairs and Tourism
REPUBLIC OF SOUTH AFRICA

**WASTE TYRE REGULATION, 2009
(Reg No. 31901) TYRE PRODUCER
REGISTRATION APPLICATION**

Introduction

- ✍ This application is required in terms of Regulation 6 of the Waste Tyre Regulation, 2009. In terms of the Regulation “**tyre producer**” means any person or institution engaged in the commercial manufacture or import of tyres and retreadable casings, and the import of vehicles fitted with tyres for distribution in South Africa.
- ✍ Incomplete applications may be returned to the applicant for revision
- ✍ Completed forms must be either posted to Director: Waste Stream Management, Private Bag X447 Pretoria 0001 or scanned and e-mailed to TMohapi@deat.gov.za or faxed to 012 320 0024.

1. APPLICANT DETAILS

Name of company				
Company Registration No.				
Importer Code No:				
Registered Address:				
	Code			
Physical Address:				
	Code			
Postal Address:				
	Code			
Province				
Municipality				
Contact Person				
Contact Details	Tel		Cell	
	Fax		email	

2. ADDRESS DETAILS FOR HEAD OFFICE IF APPLYING ON BEHALF OF A GROUP

Physical Address			

		Code	
Person responsible for environmental matters			
Telephone:		Cell:	
Email:		Fax:	

3. CLASS OF TYRE PRODUCER IN TERMS OF WASTE TYRE REGULATION, 2009 (tick the appropriate box applicable to this application)

Tyre		Vehicles & Implements	
Manufacturer		Assembler	
Importer	New	Importer	CBU
	Used		CKB
	Retreaded		Other

4. Integrated Industry Waste Tyre Management Plan (IIWTMP) as contemplated in Regulation 6(3) of Waste Tyre Regulations, 2009

Are you planning to submit your own IIWTMP		Yes		No	
If answer above is no, which plan are you subscribing to?					
Name of person responsible for IIWTMP in your company					
Capacity in the company					
Telephone			Cell		
Email:			Fax:		

5. DECLARATION

I, _____ declare that I have read the completed registration form and hereby confirm that the information provided is to the best of my knowledge true and correct.

Applicant's signature _____ Date: _____

6. FOR OFFICE USE ONLY

Date Received:

Registration Number: