



ALABAMA DEPARTMENT OF REVENUE
BUSINESS & LICENSE TAX DIVISION

B&L: TEFA
5/17

P.O. Box 327495 • Montgomery, AL 36132-7495 • (334) 353-7827 • Fax (334) 353-1809

www.revenue.alabama.gov

Application For An Alabama Scrap Tire Environmental Fee

A. APPLICANT INFORMATION

| | | | |
|-------------------|-------------------------|-------------------|--------------------------|
| APPLICANT | | | FEIN/SSN |
| TRADE NAME OR DBA | | | ALABAMA SALES TAX NUMBER |
| CONTACT PERSON | TELEPHONE NUMBER () | FAX NUMBER () | E-MAIL ADDRESS |

B. ADDRESS INFORMATION

| | | | |
|---|------------------------------|-------|----------|
| PHYSICAL LOCATION (DO NOT USE P.O. BOX) | CITY | STATE | ZIP CODE |
| MAILING ADDRESS (IF DIFFERENT FROM ABOVE) | CITY | STATE | ZIP CODE |
| COUNTY WHERE BUSINESS LOCATED | EFFECTIVE DATE OF TIRE SALES | | |

C. TYPE OF BUSINESS

Sole Owner
 Partnership
 Corporation
 Association
 LLC
 Other (Specify) _____

State of incorporation/organization: _____

If LLC, have you elected to be taxed as a corporation under federal income tax laws? Yes No. If yes, please attach a copy of Form 8832

SOLE PROPRIETORSHIP: provide owner. **PARTNERSHIP:** provide all partners. **CORPORATION:** provide all corporate officers.

ALL OTHERS: provide all general partners, members, or managers. (Attach additional pages if necessary.)

| | | |
|-----------------|-------|------------------------|
| FULL LEGAL NAME | TITLE | SOCIAL SECURITY NUMBER |
| HOME ADDRESS | CITY | STATE ZIP CODE |
| FULL LEGAL NAME | TITLE | SOCIAL SECURITY NUMBER |
| HOME ADDRESS | CITY | STATE ZIP CODE |
| FULL LEGAL NAME | TITLE | SOCIAL SECURITY NUMBER |
| HOME ADDRESS | CITY | STATE ZIP CODE |

D. OTHER LOCATIONS

Are you filing for multiple locations? Yes No If yes, list physical locations below or attach separate listing:

| | | |
|---------|------|----------|
| ADDRESS | CITY | ZIP CODE |
| ADDRESS | CITY | ZIP CODE |
| ADDRESS | CITY | ZIP CODE |

Signature of Applicant _____

Date _____

You must contact the ADEM Scrap Tire Program at (334) 271-7988 to register as a scrap tire receiver.

OFFICE USE ONLY

Approval by Manager _____

ACCOUNT
NUMBER _____