

ATTACHMENT A

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY  
P. O. BOX 2369  
JACKSON, MS 39225-2369  
ATTN: GRANTS AND CONTRACTS

REQUEST FOR PAYMENT

Name of Grantee: Madison County Board of Supervisors Grant Agreement No.: WT618  
Address: P.O. Box 608 Person preparing report: Danny Lee  
Canton, Ms 39046-0608 Telephone Number: 601-855-5533  
Request period: From 6/01/2019 To 9/30/2019

1. Amount of this payment request: \$ 11,369.50  
2. Total amount of grant: \$ 50,000.00  
3. Total prior payments approved: \$ 8,792.50  
4. Total funds requested to date (line 1 plus line 3): \$ 20,162.00  
5. Balance of grant funds remaining after this request (line 2 minus line 4): \$ 29,838.00

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**TO BE COMPLETED ONLY IF GRANTEE IS PROVIDING FUNDS TO THE GRANT PROJECT.**

6. Total funds to be contributed by grantee: \$ \_\_\_\_\_  
7. Amount contributed by grantee to date: \$ \_\_\_\_\_  
8. Balance to be contributed by grantee (line 6 minus line 7): \$ \_\_\_\_\_

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I hereby certify that the amount requested is for reimbursement of allowable costs consistent with the terms of this agreement, that request for reimbursement of these costs has not previously been made, and that the amounts requested herein do not exceed budgeted amounts stipulated in the award.

**NOTE: Please attach appropriate documentation that supports this payment request (for example, payroll records for Enforcement officer, billing records, volume of tires disposed, volume of solid wastes disposed, location of solid waste sites cleaned-up, etc.)**

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Signature of Authorized Official  
Trey Baxter, President Madison County Board of Supervisors  
Typed Name and Title of Authorized Official  
10/7/2019  
Date

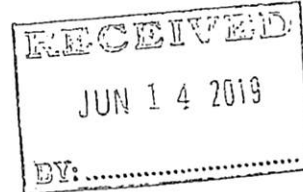
**APPROVED**

*By Helen Keller at 2:08 pm, Jun 21, 2019*



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com

**Invoice**



BILL TO  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE	ENCLOSED
15774	05/25/2019	\$555.00	

DATE	ACTIVITY	QTY	RATE	AMOUNT
05/25/2019	WASTE CAR TIRES	185	3.00	555.00

Cleanup day May 25, 2019

BALANCE DUE

**\$555.00**

**APPROVED**

*By danny.lee at 1:46 pm, Jun 24, 2019*

105-340-587

THANK YOU FOR YOUR BUSINESS!

\* Cleanup Day, May 25, 2019 \*

Form SW-03  
Manifest # \_\_\_\_\_  
(optional)

## WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

### Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: Madison County Road Dept.  
Mailing Address: 3137 South Liberty Street  
City: Canton State: MS Zip: 39046  
Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Number of whole waste tires to be transported: 185 car  
Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
Destination of tires: Name: \_\_\_\_\_  
Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_ County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.

Signed: \_\_\_\_\_ Date: 5/25/2019  
Waste Tire Generator

### Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
Mailing Address: P. O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.

Signed: Steve Williamson Date: 5/25/2019  
Waste Tire Hauler

### Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
Mailing Address: P. O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
Permit No. (if applicable): \_\_\_\_\_

I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.

Signed: Steve Williamson Date: 5/25/2019  
Collector/Processor/Disposer

Mississippi Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261, Jackson, MS 39225

03/08

**APPROVED**

By Helen Keller at 1:46 pm, Jun 06, 2019



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com

**Invoice**

RECEIVED  
JUN 03 2019  
BY: .....

BILL TO  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE		ENCLOSED
15705	05/30/2019	\$882.00		

DATE	ACTIVITY	QTY	RATE	AMOUNT
05/30/2019	WASTE CAR TIRES	150	3.00	450.00
05/30/2019	WASTE TRUCK TIRES	42	8.50	357.00
05/30/2019	WASTE TRACTOR TIRES	1	75.00	75.00

BALANCE DUE

**\$882.00**

**APPROVED**

By danny.lee at 2:18 pm, Jun 11, 2019

105-340-587

THANK YOU FOR YOUR BUSINESS!

# WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

## Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: MADISON COUNTY ROAD DEPT  
Mailing Address: 3137 SOUTH LIBERTY STREET  
City: CANTON State: MS Zip: 39046  
Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Number of whole waste tires to be transported: 150 CARS - 42 TRUCKS  
Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
Destination of tires: Name: 1-TRACTOR  
Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in  
County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.  
Signed: R. Sanders Date: 5-30-2019  
Waste Tire Generator

## Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
Mailing Address: P.O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.  
Signed: Steve Williamson Date: 5-30-2019  
Waste Tire Hauler

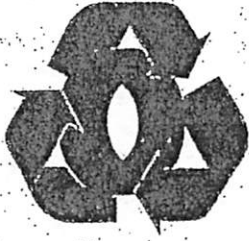
## Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
Mailing Address: P.O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
Permit No. (if applicable): \_\_\_\_\_

I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.  
Signed: Steve Williamson Date: 5-30-2019  
Collector/Processor/Disposer

15705

**RECEIVED**  
 JUN 18 2019  
 BY: .....



**SOUTHERN TIRE RECYCLING LLC**  
 P O BOX 1246  
 FLORENCE, MS 39073  
 (601) 259-6900  
 swilliamson2@aol.com

**Invoice**

**BILL TO:**  
 Gina Kelley  
 MADISON COUNTY ROAD  
 DEPT  
 3137 SOUTH LIBERTY STREET  
 CANTON, MS 39046

**APPROVED**  
 By Helen Keller at 2:34 pm, Jun 21, 2019

INVOICE #	DATE	TOTAL DUE	ENCLOSED
15793	06/13/2019	\$1,048.50	

DATE	ACTIVITY	QTY	RATE	AMOUNT
06/13/2019	WASTE CAR TIRES	48	3.00	144.00
06/13/2019	WASTE TRUCK TIRES	27	8.50	229.50
06/13/2019	WASTE TRACTOR TIRES	9	75.00	675.00

BALANCE DUE **\$1,048.50**

**APPROVED**  
 By danny.lee at 1:47 pm, Jun 24, 2019

105-640-587

THANK YOU FOR YOUR BUSINESS!

Manifest #

(optional)

**WASTE TIRE TRANSPORTATION CERTIFICATION**

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

**Part I: Certification by Waste Tire Generator**

Name of Waste Tire Generator: MADISON COUNTY ROAD DEPT  
 Mailing Address: 3137 SOUTH LIBERTY STREET  
 City: CANTON State: MS Zip: 39046  
 Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_  
 Number of whole waste tires to be transported: 48-CARS - 27-TRUCKS - 9-TRACTORS  
 Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
 Destination of tires: Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_ County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.

Signed: [Signature] Date: 6-13-2019  
 Waste Tire Generator

**Part II: Certification by Waste Tire Transporter/Hauler**

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
 Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
 If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.

Signed: [Signature] Date: 6-13-2019  
 Waste Tire Hauler

**Part III: Certification by Collector/Processor/Disposer**

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900  
 Permit No. (if applicable): \_\_\_\_\_

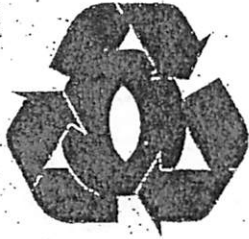
I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.

Signed: [Signature] Date: 6-13-2019  
 Collector/Processor/Disposer

Mississippi Department of Environmental Quality, Office of Pollution Control  
 P. O. Box 2261, Jackson, MS 39225

03/08

15793



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com

**Invoice**

<b>BILL TO</b>
Gina Kelley MADISON COUNTY ROAD DEPT 3137 SOUTH LIBERTY STREET CANTON, MS 39046

**APPROVED**  
*By Helen Keller at 7:13 am, Jul 12, 2019*

INVOICE #	DATE	TOTAL DUE		ENCLOSED
15902	06/27/2019	\$1,476.50		

DATE	ACTIVITY	QTY	RATE	AMOUNT
06/27/2019	WASTE CAR TIRES	342	3.00	1,026.00
06/27/2019	WASTE TRUCK TIRES	53	8.50	450.50

BALANCE DUE **\$1,476.50**

**APPROVED**  
*By danny.lee at 3:22 pm, Jul 19, 2019*

105-340-587

THANK YOU FOR YOUR BUSINESS!



\*Manifest #

(optional)

# WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

## Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: MADISON COUNTY ROAD DEPT  
 Mailing Address: 3137 SOUTH LIBERTY STREET  
 City: CANTON State: MS Zip: 39046  
 Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_  
 Number of whole waste tires to be transported: 342-CARS - 53-TRACKS  
 Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
 Destination of tires: Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in  
 County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.

Signed: Shirley H. Brown Date: 6-27-2019  
 Waste Tire Generator

## Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
 Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
 If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
 Mailing Address: P.O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.

Signed: Steve Williamson Date: 6-27-2019  
 Waste Tire Hauler

## Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
 Mailing Address: P.O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900  
 Permit No. (if applicable): \_\_\_\_\_

I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.

Signed: Steve Williamson Date: 6-27-2019  
 Collector/Processor/Disposer

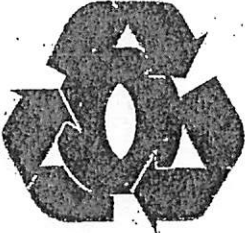
Mississippi Department of Environmental Quality, Office of Pollution Control  
 P.O. Box 2261, Jackson, MS 39225

03 08

15902

**APPROVED**

*By Helen Keller at 8:09 am, Jul 26, 2019*



**SOUTHERN TIRE RECYCLING LLC**

P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com

**Invoice**

PAID  
JUL 23 2019

**BILL TO**  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE	ENCLOSED
16006	07/17/2019	\$867.00	

DATE	ACTIVITY	QTY	RATE	AMOUNT
07/17/2019	WASTE CAR TIRES	213	3.00	639.00
07/17/2019	WASTE TRUCK TIRES	18	8.50	153.00
07/17/2019	WASTE TRACTOR TIRES	1	75.00	75.00

**BALANCE DUE**

**\$867.00**

**APPROVED**

*By danny.lee at 11:42 am, Jul 29, 2019*

105-340-587

THANK YOU FOR YOUR BUSINESS!

# WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

## Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: MADISON COUNTY ROAD DEPT  
Mailing Address: 3137 SOUTH LIBERTY STREET  
City: CANTON State: MS Zip: 39046  
Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Number of whole waste tires to be transported: 273 - Cars - 18 - Trucks - 1 - Tractor  
Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
Destination of tires: Name: \_\_\_\_\_  
Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_ County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.

Signed: R. Daniels Date: 7-17-2019  
Waste Tire Generator

## Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
Mailing Address: P.O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.

Signed: Steve Williamson Date: 7-17-2019  
Waste Tire Hauler

## Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
Mailing Address: P. O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
Permit No. (if applicable): \_\_\_\_\_

I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.

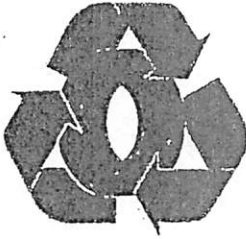
Signed: Steve Williamson Date: 7-17-2019  
Collector/Processor/Disposer

Mississippi Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261, Jackson, MS 39225

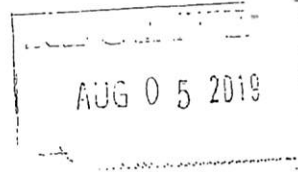
11.10.19

**APPROVED**

*By Helen Keller at 10:33 am, Aug 09, 2019*



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com



**Invoice**

BILL TO  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE	ENCLOSED
16086	07/31/2019	\$737.00	

DATE	ACTIVITY	QTY	RATE	AMOUNT
07/31/2019	WASTE CAR TIRES	63	3.00	189.00
07/31/2019	WASTE TRUCK TIRES	38	8.50	323.00
07/31/2019	WASTE TRACTOR TIRES	3	75.00	225.00

BALANCE DUE

**\$737.00**

**APPROVED**

*By danny.lee at 1:48 pm, Aug 13, 2019*

105-340-587

THANK YOU FOR YOUR BUSINESS!

Manifest #

(optional)

**WASTE TIRE TRANSPORTATION CERTIFICATION**

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

**Part I: Certification by Waste Tire Generator**

Name of Waste Tire Generator: MADISON COUNTY ROAD DEPT  
 Mailing Address: 3137 SOUTH LIBERTY STREET  
 City: CANTON State: MS Zip: 39046  
 Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_  
 Number of whole waste tires to be transported: 38 TRUCKS - 63 CARS  
 Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
 Destination of tires: Name: 3 TRACTORS  
 Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_ County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.

Signed: Wiley A. I. [Signature] Date: 7-31-2019  
 Waste Tire Generator

**Part II: Certification by Waste Tire Transporter/Hauler**

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
 Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
 If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.

Signed: Steve Williamson [Signature] Date: 7-31-2019  
 Waste Tire Hauler

**Part III: Certification by Collector/Processor/Disposer**

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900  
 Permit No. (if applicable): \_\_\_\_\_

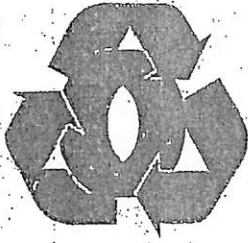
I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.

Signed: Steve Williamson [Signature] Date: 7-31-2019  
 Collector/Processor/Disposer

Mississippi Department of Environmental Quality, Office of Pollution Control  
 P.O. Box 2261, Jackson, MS 39225

03/08

11/08/19  
 ✓



SOUTHERN TIRE RECYCLING LLC  
 P O BOX 1246  
 FLORENCE, MS 39073  
 (601) 259-6900  
 swilliamson2@aol.com

RECEIVED  
 AUG 21 2019  
 BY:.....

Invoice

**APPROVED**

*By Helen Keller at 7:40 am, Aug 26, 2019*

BILL TO  
 Gina Kelley  
 MADISON COUNTY ROAD  
 DEPT  
 3137 SOUTH LIBERTY STREET  
 CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE	ENCLOSED
16185	08/15/2019	\$3,205.00	

DATE	ACTIVITY	QTY	RATE	AMOUNT
08/15/2019	WASTE CAR TIRES	604	3.00	1,812.00
08/15/2019	WASTE TRUCK TIRES	58	8.50	493.00
08/15/2019	WASTE TRACTOR TIRES	12	75.00	900.00

BALANCE DUE

**\$3,205.00**

**APPROVED**

*By danny.lee at 2:38 pm, Sep 03, 2019*

105-340-581

THANK YOU FOR YOUR BUSINESS!

**WASTE TIRE TRANSPORTATION CERTIFICATION**

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

**Part I: Certification by Waste Tire Generator**

Name of Waste Tire Generator: MADISON COUNTY ROAD DEPT  
 Mailing Address: 3137 SOUTH LIBERTY STREET  
 City: CANTON State: MS Zip: 39046  
 Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_  
 Number of whole waste tires to be transported: 124 - Cars - 28 TRUCKS - 8 TRACTORS  
 Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
 Destination of tires: Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in  
 County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.

Signed: [Signature] Date: 8-15-2019  
 Waste Tire Generator

**Part II: Certification by Waste Tire Transporter/Hauler**

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
 Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
 If no Waste Tire Hauler ID No. is required, then provide:  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.

Signed: [Signature] Date: 8-15-2019  
 Waste Tire Hauler

**Part III: Certification by Collector/Processor/Disposer**

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900  
 Permit No. (if applicable): \_\_\_\_\_

I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.

Signed: [Signature] Date: 8-15-2019  
 Collector/Processor/Disposer

Mississippi Department of Environmental Quality, Office of Pollution Control  
 P.O. Box 2261, Jackson, MS 39225

# WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

## Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: MOADISON (MAYT YROAK) DEPT (CAMD-A)  
Mailing Address: 3127 SOUTH LIBERTY STREET  
City: CANTON State: MS Zip: 39046  
Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Number of whole waste tires to be transported: 57-CARS - 17-TACKS  
Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
Destination of tires: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_  
County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.  
Signed: [Signature] Date: 8-15-2019  
Waste Tire Generator

## Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
Mailing Address: P.O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.  
Signed: [Signature] Date: 8-15-2019  
Waste Tire Hauler

## Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
Mailing Address: P.O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
Permit No. (if applicable): \_\_\_\_\_  
I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.  
Signed: [Signature] Date: 8-15-2019  
Collector/Processor/Disposer

Mississippi Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261, Jackson, MS 39225



# WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

## Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: MADISON COUNTY ROAD DEPT (CAMDEN)  
Mailing Address: 3137 SOUTH LIBERTY STREET  
City: CANTON State: MS Zip: 39046  
Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Number of whole waste tires to be transported: 423 CARS - 13 TRUCKS - 4 TRACTORS  
Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
Destination of tires: Name: \_\_\_\_\_  
Address: \_\_\_\_\_

I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_ County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.  
Signed: [Signature] Date: 8-15-2019  
Waste Tire Generator

## Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
If no Waste Tire Hauler ID No. is required, then provide:  
Mailing Address: P. O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900

I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.  
Signed: [Signature] Date: 8-15-2019  
Waste Tire Hauler

## Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
Mailing Address: P. O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
Permit No. (if applicable): \_\_\_\_\_

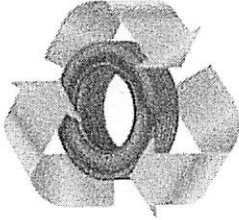
I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.  
Signed: [Signature] Date: 8-15-2019  
Collector/Processor/Disposer

16185

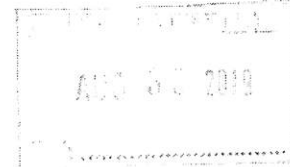
**APPROVED**

*By Helen Keller at 3:10 pm, Sep 06, 2019*

Invoice



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com



BILL TO  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE
16251	08/27/2019	\$239.00

ENCLOSED

DATE	DESCRIPTION	QTY	RATE	AMOUNT
08/27/2019	WASTE CAR TIRES	40	3.00	120.00
08/27/2019	WASTE TRACTOR TIRES	14	8.50	119.00
BALANCE DUE				<b>\$239.00</b>

**APPROVED**

*By danny.lee at 8:26 am, Sep 16, 2019*

105-340-587

THANK YOU FOR YOUR BUSINESS!

Manifest # \_\_\_\_\_

(optional)

# WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

## Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: Manison County Road Dept.  
 Mailing Address: 3137 South E. Bundy Street  
 City: AAnton State: MS Zip: 39046  
 Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_  
 Number of whole waste tires to be transported: 40 - CMC 14 - Truck  
 Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
 Destination of tires: Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_  
 County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.  
 Signed: Michael Steele Date: 8-27-19  
 Waste Tire Generator

## Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
 Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
 If no Waste Tire Hauler ID No. is required, then provide: \_\_\_\_\_  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900  
 I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.  
 Signed: Steve Williamson Date: 8-27-19  
 Waste Tire Hauler

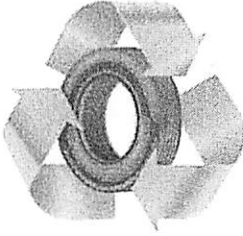
## Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
 Mailing Address: P. O. BOX 1246  
 City: FLORENCE State: MS Zip: 39073  
 Telephone No.: (601) 259-6900  
 Permit No. (if applicable): \_\_\_\_\_  
 I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.  
 Signed: Steve Williamson Date: 8-27-19  
 Collector/Processor/Disposer

Mississippi Department of Environmental Quality, Office of Pollution Control  
 P.O. Box 2261, Jackson, MS 39225

WHITE - GENERATOR'S COPY, YELLOW - TRANSPORTER/HAULER'S COPY, PINK - COLLECTOR/PROCESSOR/...

116257



SOUTHERN TIRE RECYCLING LLC  
 P O BOX 1246  
 FLORENCE, MS 39073  
 (601) 259-6900  
 swilliamson2@aol.com

Invoice

BILL TO  
 Gina Kelley  
 MADISON COUNTY ROAD  
 DEPT  
 3137 SOUTH LIBERTY STREET  
 CANTON, MS 39046

**APPROVED**  
*By Helen Keller at 2:48 pm, Sep 25, 2019*

INVOICE #	DATE	TOTAL DUE	ENCLOSED
16363	09/12/2019	\$1,159.50	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
09/12/2019	WASTE CAR TIRES	58	3.00	174.00
09/12/2019	WASTE TRUCK TIRES	63	8.50	535.50
09/12/2019	WASTE TRACTOR TIRES	6	75.00	450.00
			BALANCE DUE	<b>\$1,159.50</b>

**APPROVED**  
*By danny.lee at 11:23 am, Sep 26, 2019*

105-340-587

THANK YOU FOR YOUR BUSINESS!

# WASTE TIRE TRANSPORTATION CERTIFICATION

As required by the Mississippi Waste Tire Transportation Regulations, this form shall be completed and signed by a waste tire generator each time that waste tires are provided for transportation to another facility, and shall also be completed and signed by the waste tire transporter/hauler, and the collector, processor, or disposer to whom the tires are delivered.

## Part I: Certification by Waste Tire Generator

Name of Waste Tire Generator: MADISON COUNTY FORD DEPT  
Mailing Address: 3137 SOUTH LIBERTY STREET  
City: Canton State: MS Zip: 39046  
Street Address: \_\_\_\_\_ County: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Number of whole waste tires to be transported: 552-7005-63-Trucks  
Volume of processed tires (cut, shredded, etc) to be transported: \_\_\_\_\_  
Destination of tires: Name: 6-1500 WTS  
Address: \_\_\_\_\_  
I hereby certify that the above indicated waste tires were collected in the normal course of business in \_\_\_\_\_  
County, \_\_\_\_\_ (State) and are destined to be transported to the facility indicated above.  
Signed: \_\_\_\_\_ Date: 9-12-2014  
Waste Tire Generator

## Part II: Certification by Waste Tire Transporter/Hauler

Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC  
Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398  
If no Waste Tire Hauler ID No. is required, then provide:  
Mailing Address: P. O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.  
Signed: Steve Williamson Date: 9-12-2014  
Waste Tire Hauler

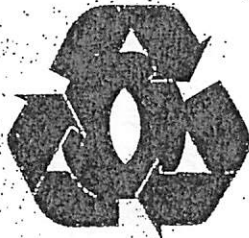
## Part III: Certification by Collector/Processor/Disposer

Name of Collector/Processor/Disposer: SOUTHERN TIRE RECYCLING, LLC  
Mailing Address: P. O. BOX 1246  
City: FLORENCE State: MS Zip: 39073  
Telephone No.: (601) 259-6900  
Permit No. (if applicable): \_\_\_\_\_  
I hereby certify that I am authorized to receive waste tires and that I have received the above indicated waste tires in Part I in accordance with that authorization.  
Signed: Steve Williamson Date: 9-12-2014  
Collector/Processor/Disposer

16362

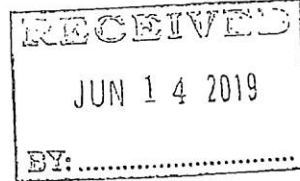
**APPROVED**

By Helen Keller at 2:43 pm, Jun 21, 2019



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com

**Invoice**



BILL TO  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE		ENCLOSED
15716	06/01/2019	\$300.00		

DATE	ACTIVITY	QTY	RATE	AMOUNT
06/01/2019	CONTAINER RENTAL	2	150.00	300.00

CONTAINER RENTAL  
LOCATIONS- CANTON / CAMDEN

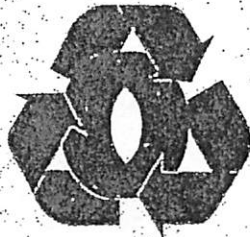
**BALANCE DUE**  
**\$300.00**

**APPROVED**

By danny.lee at 1:47 pm, Jun 24, 2019

105-340-581

THANK YOU FOR YOUR BUSINESS!



SOUTHERN TIRE RECYCLING LLC  
 P O BOX 1246  
 FLORENCE, MS 39073  
 (601) 259-6900  
 swilliamson2@aol.com

RECEIVED  
 JUL 10 2019  
 BY: .....

Invoice

BILL TO:  
 Gina Kelley  
 MADISON COUNTY ROAD  
 DEPT  
 3137 SOUTH LIBERTY STREET  
 CANTON, MS 39046

**APPROVED**  
 By Helen Keller at 7:13 am, Jul 12, 2019

INVOICE #	DATE	TOTAL DUE	ENCLOSED
15871	07/01/2019	\$300.00	

DATE	ACTIVITY	QTY	RATE	AMOUNT
07/01/2019	CONTAINER RENTAL	2	150.00	300.00

CONTAINER RENTAL BALANCE DUE **\$300.00**  
 LOCATIONS- CANTON / CAMDEN

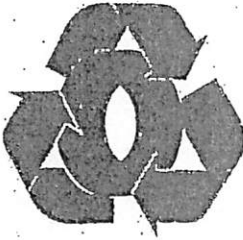
**APPROVED**  
 By danny.lee at 3:22 pm, Jul 19, 2019

105-340-581

THANK YOU FOR YOUR BUSINESS!

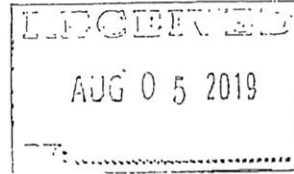
**APPROVED**

*By Helen Keller at 10:31 am, Aug 09, 2019*



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com

**Invoice**



BILL TO  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046

INVOICE #	DATE	TOTAL DUE	ENCLOSED
16072	08/01/2019	\$300.00	

DATE	ACTIVITY	QTY	RATE	AMOUNT
08/01/2019	CONTAINER RENTAL	2	150.00	300.00

CONTAINER RENTAL  
LOCATIONS- CANTON / CAMDEN

BALANCE DUE

**\$300.00**

**APPROVED**

*By danny.lee at 1:47 pm, Aug 13, 2019*

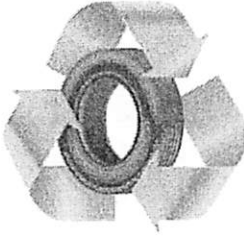
105-340-581

THANK YOU FOR YOUR BUSINESS!



**APPROVED**

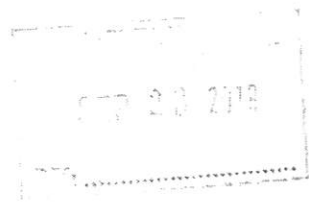
*By Helen Keller at 2:48 pm, Sep 25, 2019*



SOUTHERN TIRE RECYCLING LLC  
P O BOX 1246  
FLORENCE, MS 39073  
(601) 259-6900  
swilliamson2@aol.com

Invoice

BILL TO  
Gina Kelley  
MADISON COUNTY ROAD  
DEPT  
3137 SOUTH LIBERTY STREET  
CANTON, MS 39046



INVOICE #	DATE	TOTAL DUE	ENCLOSED
16278	09/01/2019	\$300.00	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
09/01/2019	CONTAINER RENTAL	2	150.00	300.00
	CONTAINER RENTAL LOCATIONS- CANTON / CAMDEN		BALANCE DUE	<b>\$300.00</b>

**APPROVED**

*By danny.lee at 11:23 am, Sep 26, 2019*

105-340-581

THANK YOU FOR YOUR BUSINESS!