

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 4/01/2020 To 7/31/2020

1. Amount of this payment request: \$ 5,960.00
2. Total amount of grant: \$ 50,000.00
3. Total prior payments approved: \$ 29,579.00
4. Total funds requested to date (line 1 plus line 3): \$ 35,539.00
5. Balance of grant funds remaining after this request (line 2 minus line 4): \$ 14,461.00

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): \$ _____

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.)

Signature of Authorized Official

Gerald Steen, President Madison County Board of Supervisors

Typed Name and Title of Authorized Official

8/17/2020

Date

\$ 50,000.00 \$ 14,461.00

January - May

Tires	
1/28/2019	\$ 294.00
1/28/2019	\$ 471.50
3/8/2019	\$ 978.50
3/27/2019	\$ 727.50
4/10/2019	\$ 774.00
4/10/2019	\$ 855.00
4/16/2019	\$ 308.00
5/2/2019	\$ 2,057.00
5/9/2019	\$ 1,063.50
5/20/2019	\$ 363.50
	\$ 7,892.50

Container Rental	
2/1/2019	\$ 300.00
4/1/2019	\$ 300.00
5/1/2019	\$ 300.00
	\$ 900.00

Payment #1 \$ 8,792.50

June - September

Tires	
5/25/2019	\$ 555.00
5/30/2019	\$ 882.00
6/13/2019	\$ 1,048.50
6/27/2019	\$ 1,476.50
7/17/2019	\$ 867.00
7/31/2019	\$ 737.00
8/15/2019	\$ 3,205.00
8/27/2019	\$ 239.00
9/12/2019	\$ 1,159.50
	\$ 10,169.50

Container Rental	
6/1/2019	\$ 300.00
7/1/2019	\$ 300.00
8/1/2019	\$ 300.00
9/1/2019	\$ 300.00
	\$ 1,200.00

Payment #2 \$ 11,369.50

Subtotal \$ 20,162.00

October - December

Tires	
9/26/2019	\$ 720.00
10/16/2019	\$ 842.50
11/7/2019	\$ 754.00
11/21/2019	\$ 400.00
12/5/2019	\$ 849.50
12/11/2019	\$ 125.00
12/19/2019	\$ 212.00
	\$ 3,903.00

Container Rental	
10/1/2019	\$ 300.00
11/1/2019	\$ 300.00
12/1/2019	\$ 300.00
	\$ 900.00

Payment #3 \$ 4,803.00

Subtotal \$ 24,965.00

January - March 2020

Tires	
1/16/2020	\$ 848.00
2/11/2020	\$ 481.00
3/10/2020	\$ 1,710.00
3/25/2020	\$ 675.00
	\$ 3,714.00

Container Rental	
1/1/2020	\$ 300.00
2/1/2020	\$ 300.00
3/1/2020	\$ 300.00
	\$ 900.00

Payment #4 \$ 4,614.00

Subtotal \$ 29,579.00

April - June 2020

Tires	
4/6/2020	\$ 312.00
4/17/2020	\$ 358.50
5/7/2020	\$ 1,238.50
6/8/2020	\$ 1,144.50
6/20/2020	\$ 495.00
6/22/2020	\$ 716.00
7/21/2020	\$ 795.50
	\$ 5,060.00

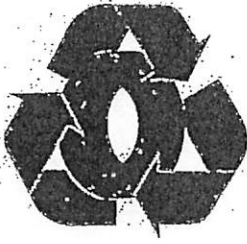
Container Rental	
4/1/2020	\$ 300.00
5/1/2020	\$ 300.00
6/1/2020	\$ 300.00
	\$ 900.00

Payment #5 \$ 5,960.00

Subtotal \$ 35,539.00

APPROVED

By Helen Keller at 11:46 pm, Apr 11, 2020



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

RECEIVED
APR 06 2020
BY:

INVOICE #	DATE	TOTAL DUE	ENCLOSED
17461	04/01/2020	\$300.00	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	CONTAINER RENTAL	2	150.00	300.00

CONTAINER RENTAL
LOCATIONS- CANTON / CAMDEN

BALANCE DUE

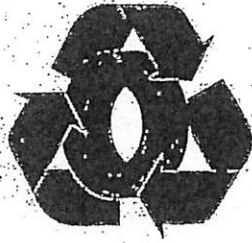
\$300.00

APPROVED

By danny.lee at 1:32 pm, Apr 13, 2020

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

Invoice

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

RECEIVED
MAY 06 2020
BY:

INVOICE #	DATE	TOTAL DUE		ENCLOSED
17630	05/01/2020	\$300.00		

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	CONTAINER RENTAL	2	150.00	300.00

CONTAINER RENTAL
LOCATIONS- CANTON / CAMDEN

BALANCE DUE

\$300.00

APPROVED

By Shelton Vance at 4:16 pm, May 12, 2020

THANK YOU FOR YOUR BUSINESS!



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

Invoice

RECEIVED
 JUN 04 2020
 BY:

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

INVOICE #	DATE	TOTAL DUE	ENCLOSED
17783	06/01/2020	\$300.00	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	CONTAINER RENTAL	2	150.00	300.00

CONTAINER RENTAL
 LOCATIONS- CANTON / CAMDEN

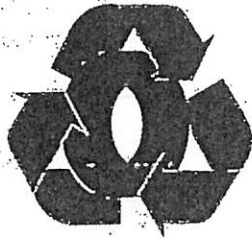
BALANCE DUE

\$300.00

APPROVED
 By danny.lee at 1:49 pm, Jun 05, 2020

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

Invoice

RECEIVED
APR 06 2020

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

INVOICE #	DATE	TOTAL DUE	ENCLOSED
17509	04/06/2020	\$312.00	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
04/06/2020	WASTE CAR TIRES	36	3.00	108.00
04/06/2020	WASTE TRUCK TIRES	24	8.50	204.00

BALANCE DUE

\$312.00

APPROVED

By danny.lee at 9:35 am, Apr 16, 2020

105-340-587

THANK YOU FOR YOUR BUSINESS!

Manifest #

Form SW-03

(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 B Road Dept.
 Mailing Address: 3137 S Liberty Street
 City: Canton State: MS Zip: 39046
 Street Address: _____ County: _____
 Telephone No.: _____
 Number of whole waste tires to be transported: 36 cars 24 trucks
 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: XK Sanders Date: 4/6/2020
 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: 4/6/2020
 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: 4/6/2020
 Collector/Processor/Disposer

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

03/08

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

17509



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

Invoice

RECEIVED
APR 23 2020
BY: _____

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

INVOICE #	DATE	TOTAL DUE		ENCLOSED
17569	04/17/2020	\$358.50		

DATE	DESCRIPTION	QTY	RATE	AMOUNT
04/17/2020	WASTE CAR TIRES	43	3.00	129.00
04/17/2020	WASTE TRUCK TIRES	27	8.50	229.50

BALANCE DUE **\$358.50**

APPROVED
By danny.lee at 9:55 am, Apr 27, 2020

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 Co. Road Dept.
 Mailing Address: 11033 W. Peace Street
 City: CANTON State: MS Zip: 39046
 Street Address: _____ County: _____
 Telephone No.: _____
 Number of whole waste tires to be transported: 43 cars 27 Trucks
 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: 4-17-20
 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: 4-17-20
 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: 4-17-20
 Collector/Processor/Disposer

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

17569



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

RECEIVED
MAY 14 2020
BY:.....

INVOICE #	DATE	TOTAL DUE	ENCLOSED
17681	05/07/2020	\$1,238.50	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
05/07/2020	WASTE CAR TIRES	63	3.00	189.00
05/07/2020	WASTE TRUCK TIRES	97	8.50	824.50
05/07/2020	WASTE TRACTOR TIRES	3	75.00	225.00

BALANCE DUE

\$1,238.50

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 Co. Road Dept.
Mailing Address: 3137 S Liberty Street
City: Clinton State: MS Zip: 39046
Street Address: _____ County: _____
Telephone No.: _____
Number of whole waste tires to be transported: 97-TACKS - 63 Cars - 3-TACKERS
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. Danders Date: 5-7-2020
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: 5-7-2020
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: 5-7-2020
Collector/Processor/Disposer

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

17681



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

Invoice

RECEIVED
JUN 15 2020
BY:

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

INVOICE #	DATE	TOTAL DUE	ENCLOSED
17852	06/08/2020	\$1,144.50	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
06/08/2020	WASTE CAR TIRES	52	3.00	156.00
06/08/2020	WASTE TRUCK TIRES	81	8.50	688.50
06/08/2020	WASTE TRACTOR TIRES	4	75.00	300.00

BALANCE DUE **\$1,144.50**

APPROVED
By danny.lee at 10:15 am, Jun 18, 2020

105-340-581

THANK YOU FOR YOUR BUSINESS!

Manifest #

Form SW-03

(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: Panola State: MS Zip: 39046
 Street Address: _____ County: _____
 Telephone No.: _____
 Number of whole waste tires to be transported: 81 truck 4 tractor 52 cars
 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: 6-8-2020
 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: 6-8-2020
 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: 6-8-2020
 Collector/Processor/Disposer

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

03/08

17852



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
18073	06/20/2020	\$495.00	

DATE	DESCRIPTION	QTY	RATE	AMOUNT
06/20/2020	WASTE CAR TIRES	165	3.00	495.00

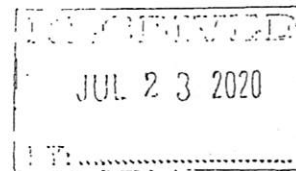
BALANCE DUE

\$495.00

APPROVED

By danny.lee at 2:05 pm, Aug 03, 2020

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 (Clean up job)
 Mailing Address: _____
 City: Canton State: MS Zip: _____
 Street Address: _____ County: _____
 Telephone No.: _____
 Number of whole waste tires to be transported: 165 car tires
 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: 6/20/20
 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: 6/20/20
 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: 6/20/20
 Collector/Processor/Disposer

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

18073



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

RECEIVED
JUN 29 2020
BY:

INVOICE #	DATE	TOTAL DUE		ENCLOSED
17925	06/22/2020	\$716.00		

DATE	DESCRIPTION	QTY	RATE	AMOUNT
06/22/2020	WASTE CAR TIRES	80	3.00	240.00
06/22/2020	WASTE TRUCK TIRES	56	8.50	476.00

BALANCE DUE **\$716.00**

APPROVED
By danny.lee at 1:44 pm, Jul 08, 2020

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 Rd. Dept.
 Mailing Address: 3137 South Liberty St
 City: Canton State: MS Zip: 39046
 Street Address: _____ County: _____
 Telephone No.: _____
 Number of whole waste tires to be transported: 56 truck 80 cars
 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: 6-22-2020
 Waste Tire Generator

Part II: Certification by Waste Tire Transporter/Hauler

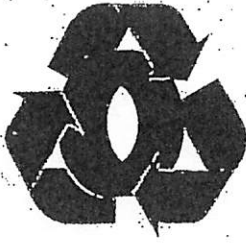
Name of Waste Tire Transporter/Hauler: SOUTHERN TIRE RECYCLING, LLC
 Waste Tire Hauler ID No.: STEVE WILLIAMSON WTH 398
 If no Waste Tire Hauler ID No. is required, then provide:
 Mailing Address: P. O. BOX 1246
 City: FLORENCE State: MS Zip: 39073
 Telephone No.: (601) 259-6900
 I hereby certify that the above indicated waste tires were received from the waste tire generator identified in Part I of this form.
 Signed: Steve Williamson Date: 6-22-2020
 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: 6-22-2020
 Collector/Processor/Disposer

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

03/08



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

Invoice

RECEIVED
 JUL 10 2020
 BY:.....

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

INVOICE #	DATE	TOTAL DUE		ENCLOSED
17940	07/01/2020	\$300.00		

DATE	DESCRIPTION	QTY	RATE	AMOUNT
	CONTAINER RENTAL	2	150.00	300.00

CONTAINER RENTAL
 LOCATIONS- CANTON / CAMDEN

BALANCE DUE **\$300.00**

APPROVED
By danny.lee at 3:35 pm, Jul 17, 2020

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

Invoice

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

INVOICE #	DATE	TOTAL DUE			ENCLOSED
18099	07/21/2020	\$795.50			

DATE	DESCRIPTION	QTY	RATE	AMOUNT
07/21/2020	WASTE CAR TIRES	64	3.00	192.00
07/21/2020	WASTE TRUCK TIRES	71	8.50	603.50

BALANCE DUE **\$795.50**

APPROVED
By danny.lee at 2:06 pm, Aug 03, 2020

105-340-581

RECEIVED
JUL 24 2020
BY:

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 Co. Road Dept.
Mailing Address: 3137 S. Liberty Street
City: Canton State: MS Zip: 39046
Street Address: _____ County: _____
Telephone No.: _____

Number of whole waste tires to be transported: 64 tires 71 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: X Vance B. Date: 7/21/2020
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: 7/21/2020
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: 7/21/2020
Collector/Processor/Disposer

11099