



WASTE TIRE GRANT PROGRAM APPLICATION

State Form 57241 (R / 03-26)
Approved by State Board of Accounts, 2025

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF LAND QUALITY

100 North Senate Avenue
Indianapolis, IN 46204
Telephone: (317) 234-6923
Toll-Free: (800) 451-6027

WasteTireGrants@idem.IN.gov



COVER SHEET

Please be sure to include the exact spelling of your organization name and matching Federal Identification Number as it is listed with the Indiana Secretary of State.

Organization name			
Address (number and street)			
City	County	State	ZIP code
Website		Federal Identification Number	
Primary Contact Name and Title			
Telephone with area code		E-mail	
Secondary Contact Name and Title			
Telephone with area code		E-mail	
Registered vendor with the state? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Project street address (number and street) (if different from above)			
City	County	State	ZIP code

TYPE OF APPLICANT (Check one)

Solid waste management district (SWMD) Municipality County

GRANT DATA (Required)

Target number of tires or lbs. to be collected	
Total project cost	Amount requested

Check all that are applicable.

Your Organization will

Self-Process tires Self-Transport tires

Your Organization will hire [Registration # Format e.g., XXX-(P,T, or S)-XXXX]

Waste Tire Processor -- Registration # -P-

Waste Tire Transporter -- Registration # -T-

Waste Tire Storage -- Registration # -S-

I acknowledge that my submission of this proposal has been duly authorized by the governing body of the organization listed above and that **any** changes to your application must be submitted to IDEM in writing. I also acknowledge that I must receive approval in writing from IDEM for the changes before implementing the changes in order to receive reimbursement for funds spent.

Signature (Type name.)	Date (month, day, year)
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Applications will be evaluated on the criteria listed below. Applicants must provide complete responses to all applicable questions. Incomplete responses may result in a determination that the application is incomplete and, therefore, not eligible for funding. All application material must be *typed* and formatted for Microsoft Word or Adobe PDF and submitted via e-mail to WasteTireGrants@idem.IN.gov. **The agency will accept hand-written forms in special circumstances only, such as undue burden for the applicant. Additional sheets may be attached.**

1. Provide brief (three to four sentences) summary of your project. What are the primary purchases and goals?

2. What is the need or motivation behind your project?

3. How will the outcomes and effectiveness of the project be **measured**? Measurable outcomes vary, but ideally should be quantifiable measures that document the number of tires removed.

4. What will be the method for evaluating, and, if necessary, modifying project operations during its implementation?