

**TIRE STEWARDSHIP BRITISH COLUMBIA ASSOCIATION (TSBC)**

**ADVANCE DISPOSAL FEES (ADF) RETURN**

Revised: 11/30/18

<b>Registrant Name</b> (Operating name)	<b>Registration Number</b>

<b>Reporting Period</b> (Calendar month in which tire sales occurred)	<b>Due Date</b> The ADF Return and related payment are due by the <b>15<sup>th</sup> day of the month following the Reporting Period</b> . Interest is payable on all overdue amounts. A Return <b>must</b> be submitted for every month, even if there were no ADF applicable sales in the Reporting Period.
<b>YEAR</b>	

**SALES & ADF IN REPORTING PERIOD**

Tire Types	# Tires Sold	ADF Rate Per Tire	\$ ADF Due
Passenger & Light Truck / Motor Cycle / ATV / Free Rolling Farm Tires	X	\$ 5.00 =	, . 0 0
Medium Truck Tires	X	\$ 9.00 =	, . 0 0
Agricultural Drive Tires	X	\$ 15.00 =	, . 0 0
Logger / Skidder Tires	X	\$ 35.00 =	, . 0 0
<b>TOTAL ADF DUE</b>			, . 0 0
<b>GST @ 5%</b>			, .
<b>TOTAL REMITTANCE PAYABLE (ADF + GST)</b>			, .

**WHERE TO REMIT:**

A cheque or money order for the total amount should be made payable to **Tire Stewardship B.C. Association**, attached to this ADF Return, and forwarded to the following address:

**Tire Stewardship B.C. PO Box 5366, Victoria B.C., V8R 6S4**

Note: Nil Returns can be faxed to 1 877 598 9119 or emailed to [ecofees@tsbc.ca](mailto:ecofees@tsbc.ca)

**CERTIFICATION:**

I certify that the amounts indicated above are the amounts of the Advance Disposal Fees that I am required to remit for the reporting period indicated. I certify and agree that I hold Advance Disposal Fees **in trust** for Tire Stewardship B.C. Association (TSBC) and that TSBC is entitled to examine my records relating to sales of new tires and the remittance of the Advance Disposal Fees.

**Authorized signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Month                      Day                      Year



**TIRE STEWARDSHIP BC'S COMMUNITY GRANT PROGRAM**

New Value from Old Tires – another great use for BC’s scrap tires!

The TSBC Community Grant Program provides financial support to communities who have decided to use and benefit from a wide range of BC recycled tire products in their projects. More details on the “**Nechako Elementary Accessible Playground**” community grant project here: <http://www.iheartradio.ca/ez-rock/ez-rock-terrace/news/accessible-playground-grand-opening-in-kitimat-1.7320272>

**Return to Retailer (R2R)**

If you haven’t already, please consider signing up to be a Return to Retailer (R2R).

More details found here: <https://www.tsbc.ca/pickupdropoff.php> . Please call the office at 1-866-759-0488 or email: [kvantreight@tsbc.ca](mailto:kvantreight@tsbc.ca) to sign up.

**Scrap Tire Collections -High season time**

Please note, pickups are done in as timely a manner as possible but waits may occur as TSBC serves all of BC.

**Scrap Tire Pickup**

If you require scrap tire pick up please call 1-866-497-0281.

**Please sign your Tire Collection Manifest- Form A**

This helps to ensure your tires are collected and recycled properly.

**Tipping / Collection fees policy**

A reminder that tipping/ collection fees on tires attracting an Advance Disposal Fee cannot be charged to Retailers and Generators that:

- Have a minimum of 50 scrap tires, clean and off rims for pickup; and
- Make scrap tires easily and readily accessible in that they are stored in a location that is clean of any obstructions and/or debris, allowing the tires to be directly loaded onto the Hauler’s truck.

Retailers and Generators who desire a higher standard of service than the norm should expect to pay additional service fees to cover the added expense incurred by Haulers and/or investigate their options for the best combination of rates and service.

**Any Changes?**

New Address	
New Email	
New Contact Person	
New Retailer Name	
Closing Business	
Selling Business	
Sign Up as a Return to Retailer (R2R)	
Other	

**Please check applicable box and email [kvantreight@tsbc.ca](mailto:kvantreight@tsbc.ca) or fax back to us and we will contact you:**

Retailer Name
_____
Your Name
_____
Your Phone #
_____
Retailer Registration#
_____
Date
_____