



DEPARTMENT OF RESOURCES RECYCLING AND RECOVERY

1001 I STREET, SACRAMENTO, CALIFORNIA 95814 • WWW.CALRECYCLE.CA.GOV • (916) 322-4027

P.O. BOX 4025, SACRAMENTO, CALIFORNIA 95812

April 4, 2019

TO ALL OPERATORS OF MAJOR WASTE TIRE FACILITIES

Title 14, California Code of Regulations (CCR), Division 7, Chapter 6, Article 9, section 18472(c), requires you to submit a report to the California Department of Resources Recycling and Recovery (CalRecycle). The report calculates the inflationary increase in the closure cost estimate for the previous calendar year.

Based on information obtained from the U.S. Department of Commerce, Bureau of Economic Analysis, Table 4, dated March 28, 2019, the inflation factor for **2018 is 1.022 (2.2%)**. Please complete the form on the reverse side of this letter for each major waste tire facility you operate, and send it to the **Financial Assurances Unit** at the following email address by **June 1, 2019**:

FAU@CALRECYCLE.CA.GOV

If you would prefer to mail it, please send it to:
CalRecycle, Financial Assurances Unit, MS 10A-15
P.O. Box 4025, Sacramento, CA 95812-4025

Previous years' Inflation Factor Reports can be found at:

<https://www.calrecycle.ca.gov/SWFacilities/Financial/Bulletins>

Following are previous years' inflation factors:

1994---1.020 **1995**---1.024 **1996**---1.020 **1997**---1.020 **1998**---1.010 **1999**---1.015 **2000**---1.021 **2001**---1.022
2002---1.011 **2003**---1.017 **2004**---1.021 **2005**---1.028 **2006**---1.029 **2007**---1.027 **2008**---1.022 **2009**---1.012
2010---1.010 **2011**---1.021 **2012**---1.018 **2013**---1.015 **2014**---1.015 **2015**---1.010 **2016**---1.013 **2017**---1.018

If you have not made the previous years' adjustments, please do so before calculating the 2019 adjusted total cost estimates. Apply subsequent inflation factors to the previous year's total cost estimate, beginning with the inflation factor that corresponds with the year the plan was prepared. For example, if the plan was prepared in 1994, apply the 1994 inflation factor to your 1994 initial certified total closure cost estimates and so forth until the current inflation factor is applied. According to 14 CCR, section 18472(d), the financial assurance mechanism used to demonstrate financial responsibility for closure of your major waste tire facility, must be updated no more than 60 days after a change in the amount of the current closure cost estimate.

Do not disregard the cost estimate information in this notice, if you recently revised your estimates due to changes in your closure plan, and the revised estimates reflect 2019 dollars. Please report your updated 2019 estimates.

If you have any questions regarding this report, please contact Karisa Carlos of the Financial Assurances Unit at (916) 341-6373, or at karisa.carlos@calrecycle.ca.gov. Thank you for your cooperation.





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ANNUAL INFLATION FACTOR 2018

FACILITY NAME: _____ FACILITY NO.: _____

Multiply each cost estimate by the inflation factor to determine the new adjusted cost estimates as illustrated below.

The ABC Major Waste Tire Facility *cost estimate* for *CLOSURE* in 2018 was \$2,000,000. Using the 2018 inflation factor of 1.022, they recalculated their *ADJUSTED CLOSURE COST* for 2019 to \$2,044,000.

	2018 Cost Estimate	2018 AIF	2019 Cost Estimate
Closure Cost Estimate	\$2,000,000	x 1.022	= \$2,044,000

Identify the highest approved or subsequently submitted cost estimate on record and the date of the plan then multiply the cost estimate by the inflation factor to determine the new adjusted amount. If the cost estimate was prepared in 2019 dollars, do not inflate and only fill in the top row.

\$ _____
Highest Closure Cost Estimate Approved or Subsequently Submitted Date of Plan

\$ _____ x 1.022 = \$ _____
Closure Costs (2018 Dollars) Estimate in 2019 Dollars

I certify under penalty of perjury under the laws of the State of California that the information in this document is true and correct to the best of my knowledge and is being provided in accordance with the regulations. To sign, click the "Fill & Sign" button on the right pane. Click "Sign" at the top and click "Add Signature".

Operator/Owner Signature	Printed Name of Person Signing
Mailing Address	Title of Person Signing
Phone Number and Email	Date of Report

