



April 2, 2024

TO ALL OPERATORS OF MAJOR WASTE TIRE FACILITIES

Title 14, California Code of Regulations (14 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, 2024, the inflation factor for **2023** is **1.036 (3.6%)**. Please complete the **2023 Annual Inflation Factor Report** for each major waste tire facility you operate, and send it to the **Financial Assurances Unit** at the following email address by **June 1, 2024**:

FAU@CALRECYCLE.CA.GOV

If you would prefer to mail it, please send it to:
CalRecycle, Financial Assurances Unit, MS 10A, 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
2018 - 1.022	2019 - 1.018	2020 - 1.012	2021 - 1.041
2022 - 1.070			

If you have not made the previous years' adjustment, please do so before calculating the 2024 adjusted total cost estimate. 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 estimate and so forth with each corresponding year inflation factor, until the current inflation factor is applied.

ANNUAL INFLATION FACTOR REPORT 2023

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 estimate due to changes in your closure plan and the revised estimate reflects 2024 dollars, please report your updated 2024 estimate. If you have any questions, 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.

FACILITY NAME: _____

TPID NUMBER: _____

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

The ABC Major Waste Tire Facility cost estimate for CLOSURE in 2023 was \$2,000,000. Using the 2023 inflation factor of 1.036, they recalculated their ADJUSTED CLOSURE COST for 2024 to \$2,072,000.

$$\text{Closure Cost Estimate} - \$2,000,000 \times 1.036 = \$2,072,000$$

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 2024 dollars, do not inflate and only fill in the top row.

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

\$ _____	x 1.036 =	\$ _____
Closure Cost (2023 Dollars)		Estimate in 2024 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	Email	Date of Report