

ORGANIC WASTE RECYCLING WAIVER APPLICATION

Please submit completed form to Republic Services at SanFernando@RepublicServices.com

APPLICANT INFORMATION

LAST NAME		FIRST NAME	
BUSINESS NAME <i>If applicable</i>			
STREET ADDRESS		CITY	STATE & ZIP CODE
PHONE NO	BUSINESS PHONE NO	EMAIL ADDRESS	

WAIVER INFORMATION *Please check the box for the waiver in which you are applying*

- DE MINIMIS WAIVER** – Eligible commercial/business customers must demonstrate the business generates below a certain amount of organic waste material pursuant to S.F.M.C. (Chapter 70). The City’s franchise waste hauler or City staff will conduct an inspection for verification.
- Total solid waste collection is two cubic yards or more per week and organic waste comprises less than 20 gallons per week per applicable container of the commercial/business’ total waste;
- OR
- Total solid waste collection is less than two cubic yards per week and organic waste comprises less than 10 gallons per week per applicable container of the commercial/business’ total waste.
- PHYSICAL SPACE WAIVER** – Eligible commercial/business customers and multi-family residential properties must demonstrate their property lacks the physical space to accommodate a three-container collection system. The City’s franchise waste hauler or City staff will conduct an inspection for verification.
- THIRD-PARTY WAIVER FOR PROPERTIES WITH LANDSCAPE CONTRACTORS/ORGANICS RECYCLERS** – Eligible commercial/business customers and multi-family residential properties must demonstrate a third party is tasked with managing organic waste.
- Properties that have organics recycling by a landscaper or third-party recycler may apply.
 - Third-party recyclers must maintain disposal/recycling records and divert organics from landfills as required by state law.
 - Your Property must agree to submit information to the City periodically to verify ongoing programs (copy of agreement specifying organic waste is diverted).

Please provide the following information to request a Third-Party Recycling Waiver:

RECYCLER(S)	BUSINESS LICENSE NO.	SELF-HAUL PERMIT NO.	PHONE NO.
MATERIAL TYPE(S)	ESTIMATED RECYCLED PER WEEK	GALLONS	CUBIC YARDS
FACILITY(IES) WHERE THIS MATERIAL IS TAKEN FOR RECYCLING			

ACKNOWLEDGEMENT *I hereby understand that all waiver applications are subject to verification and are approved on a case-by-case basis. Submission of an application for waiver does not imply the waiver will be granted.*

If a De Minimis or Physical Space Waiver is approved, the waiver is valid for five years from the approval date. After five years, verification is required to demonstrate the applicant is still eligible for the waiver. The City reserves the right to revoke any of the above waivers at any time if the generator is found to be in violation of any section of SFMC Chapter 70.

APPLICANT SIGNATURE	DATE
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FOR OFFICE USE ONLY

INSPECTED BY		WAIVER STATUS <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	
NAME (PRINT)	TITLE	CITY STAFF NAME (PRINT)	TITLE
SIGNATURE	DATE	SIGNATURE	DATE

NOTES *Enter any information regarding approval or denial of waiver application. Attach any supporting documentation or photographs to support final determination.*
