

* Also known as the Sonoma County Waste Management Agency (SCWMA)

EXEMPTION REQUEST FOR A BUSINESS, NON-PROFIT, OR MULTIFAMILY

Information on this report will not be disclosed except as required under the law

This request pertains to (sele	ect one):			
\square AB 341 (Recycling)	☐ AB 1826 (Orga	anics)	Both	
General information (must b	e filled out completely)):		
Property name:	. , , ,			
☐ Business ☐ Non-pro	ofit	complex (Please list	# of units)
Street address (No P.O. Boxe	es):	-		
City:		State:	Zip:	
Mailing address (if different)):			
City:		State:	Zip:	
Contact name:		Phone number	Phone number:	
Email address:				
We use a drop-off or buy- Please provide a descripti well as a contact name an	ion of the material, the o	amount generated e	each week (weight in pound	ds), as
Our regional distribution center disposes of our \square Recyclables \square Organics Please provide a description of the material, the amount generated each week (weight in pounds), as well as a contact name and phone number at the center.				ds), as
	ons to people or animals week (weight in pounds)	s. Please provide a c , the name and con	organics lescription of the material, tact info of the collector, an	

Please submit completed forms by email or postal mail to:					
Si	gnature (digital ID accepted)	Date			
fac	eclare that I, the owner or property manager or their designee, have ts stated herein are true to the best of my knowledge. I understand t oject to an annual site visit from City or County staff to confirm the fa	hat by submitting this form, I am			
8.	The amount of organic material generated per week is less than a ½ Please provide an explanation or description of the material general compostable (e.g., steel, medical waste). A site-visit and/or follow-u exemption is granted.	ted if the majority is not			
7.	We compost our organic material on-site. Please provide information on the type of materials being composte pile location, the approximate amount of material added to the pile to this form.	The state of the s			
6.	We and/or our landscaping contractor(s) haul away our organic materials please provide a description of the material, the amount generated the contractor name and contact info (if applicable), and any other of your case (e.g., compost facility receipt or landscaping contract).	each week (weight in pounds),			
5.	There is insufficient space for storage or service of containers for □ Please describe the set-up, reasons for lack of space, and attach pict Follow-up and/or site visits may be required before an exemption is	ures that may support your case.			
4.	We use a shared container for our □ Recyclables □ Organics Please describe the sharing arrangement/parties involved, description size(s), and container location(s).	on of the material, container			

Please submit completed forms by email or postal mail to: Sonoma County Resource Recovery, Attn: Justin Wilcock justin@sonomacorr.com PO Box 1471, Windsor, CA 95492