

City of Turlock AB 1826 Exemption and Self-Haul/Backhaul Form

Mandatory Commercial Organics Recycling Program

State law (AB 1826) requires that certain businesses and multi-family properties subscribe to organics collection services. This form is required by any business or multi-family property with 5 or more units that subscribes to 2 or more cubic yards of solid waste per week (recycling, garbage, and organics combined) and chooses to apply for an exemption or self-haul/backhauls organic waste.

Section 1 – Business and Multi-Family Property Information				
Facility Type: Business Multi-Family Property				
Business or Multi-Family Property Name:				
Site Address:				
Mailing Address:				
Type of Business:		Contact Name:		
Contact Phone Number:		Contact Email:		
Section 2 – Alternative Compliance Program (Mark all that apply and provide information as necessary) *Please skip to Sections 4 and 5 if you think your business and/or multifamily property may be exempt*				
☐ Organics	Our facility <u>self-hauls</u> organic materials by one of our employees to a drop-off or buyback center or other type of recovery facility. Please provide receipts of recent transactions with this form to verify this arrangement.			
☐ Organics	*Please complete Section 3 if you are self-hauling. Our facility back-hauls organic materials in a company vehicle to a centralized location for on-site processing or shipping to another facility. Please provide weight tickets, invoices or other documentation with this form to verify this arrangement. *Please complete Section 3 if you are back-hauling.			
☐ Organics	Our facility uses a contracted third-party recycler to collect organic materials. Please provide a copy of the current contract or recent invoice from each third-party recycler with this form to verify service.			
☐ Organics (Donation of edible food)	Please provide facility name:			
☐ Organics	Other – Please explain			
Section 3 – Self-Hauling or Back-Hauling Organic Waste				
My business or multifamily property self-hauls or back-hauls organic materials. Please fill out all that apply: (Please skip this section if none apply)				
Please list the type of organic recyclable materials and estimated quarterly amount being self-hauled or backhauled, if applicable:				
Please list the type of organic recyclable materials and quarterly amount being self-hauled or backhauled, if applicable:				

[&]quot;Organic recyclable material" means food waste, green waste, landscape and pruning waste, nonhazardous wood waste, paper products, and food-soiled paper waste.

		d address of each organics recycling facility and identify which organics received to:	cycling facility that the organic			
		Section 4 – Exemption from Organics Collection Services *Please complete Section 5 if you are claiming an Organics Exem				
-		amily property is exempt from organic materials collection requirements lease skip this section if none apply)	for the following reason(s).			
	There is not adequate storage space on our property for automatic lift containers, rolling carts, bins or roll-off bins for the collection of designated organic materials, and it is infeasible to share containers, carts or bins with an adjoining property.					
	Our facility generates more than 2 cubic yards per week combined of garbage, recyclables and organics, <u>and</u> less than 20 gallons per week of organics.					
		our facility generates less than 2 cubic yards per week combined of garbage, recyclables an organics, <u>and</u> less than 0 gallons per week of organics.				
	Organics collection at our facility would result in a zoning code violation due to loss of parking space(s)					
		Section 5 – Landscape Maintenance Services				
	scape ma	intenance contractor at our facility?				
Frequency		☐ Weekly ☐ Bi-Weekly ☐ Seasonally				
Name of Lands	scaper:					
Contact Name	:	Contact Number:				
		r list any other reason(s) as to why your business or multifamily residentia aterial collection services:	l property may be exempt from			
true and correct there is a chang	t. I agree e in circu	r penalty or perjury under the laws of the State of California that the information to comply and I understand and agree that I have a continuing obligation to this form. I am the owner, chief executive, or a massufficiently knowledgeable as to the nature, scope, and operations of the	o advise the City of Turlock if anager of the business/multi-			
Signature:		Date:				
Please	submit f	orm electronically - email all completed forms and documents to municip	alservices@turlock.ca.us			
			For City Use Only Received By:			

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Date Received: Application Complete: Approved By: