



## Yolo County Planning and Public Works Department

### Return Completed Application To:

Integrated Waste Management Division  
44090 County Road 28H - Woodland, CA 95776  
Phone: (530) 666-8813 Fax: (530) 666-8853 - [www.yolocounty.org](http://www.yolocounty.org)

### **Self Haul Garbage Exemption Application**

#### **OWNER INFORMATION:**

Please check one:

**NEW**

**RENEWAL**

Property Address (Location) \_\_\_\_\_

Property Owner Name: \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

#### **RECYCLING OR DISPOSAL METHOD:**

**Garbage:** \_\_\_\_\_

Glass, Metal, Plastic and Aluminum Containers: \_\_\_\_\_

Cardboard, Newspapers and Magazines: \_\_\_\_\_

Yard/Green Waste: \_\_\_\_\_

Household Hazardous Waste, Paints, Oils, Pesticide Cans, etc.: \_\_\_\_\_

#### **TYPES OF CONTAINERS:**

Garbage containers must be waterproof, rodent proof, fly-proof, and equipped with tight-fitting lids suitable for receiving and holding, without leakage or escape of odors, all garbage which is produced, created or accumulated upon the premises. Any questions please call (530) 666-8852 and ask for the Waste Reduction Manager.

Garbage: \_\_\_\_\_

Recycling: \_\_\_\_\_

Yard Waste (If any) \_\_\_\_\_

**FREQUENCY AND METHODOLOGY OF REMOVAL:** How do you plan to remove garbage from your property?

\_\_\_\_\_

Do you plan to burn yard wastes? \_\_\_\_\_

If yes, please use the reverse side of this form to explain how you obtain advance approval before you burn.

I agree to utilize the Esparto Convenience Center or Yolo County Central Landfill or I will provide waste receipts from a permitted disposal or transfer facility or evidence of commercial trash service provided in my name within Yolo County as proof of proper **weekly** disposal and recycling and that my property may be inspected for compliance with this Exemption Program. I also understand that reasonable notice will be given prior to inspections. I understand that failure to comply with this Agreement may cause revocation of the exemption from the mandatory garbage service requirements of Yolo County Code, Chapter 17.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

For office use only:

**APPROVED**     **DENIED**

\_\_\_\_\_  
Division Director

\_\_\_\_\_  
Date