



County of Fresno Non-Exclusive Waste Hauler Permit Application

Business Information

Business Name: _____

Entity Type: Sole Proprietorship General Partnership Limited Partnership

Limited Liability Company (LLC) Corporation

State of Incorporation: _____ Corporation No: _____

Fictitious Business Name: _____ Number: _____

Business Address: _____

Mailing Address: _____

Primary Contact: Owner/Officer Co-Owner/Officer

Owner/Officer Name: _____

Phone: _____ Email: _____

Co-Owner/Officer Name: _____

Phone: _____ Email: _____

Contact for Official Notifications (If different than Owner/Co-Owner above)

Name: _____

Address: _____

Mailing Address: _____

Phone: _____ Email: _____

Background Information

1. Has your business ever been the subject of any criminal investigation, prosecution, and/or conviction?

Yes No

If yes, please disclose **detailed** information on a separate sheet.

2. Has your business ever been the subject of any regulatory action by a local, State, or Federal Agency?

Yes No If yes, please disclose **detailed** information on a separate sheet.

3. Has your business ever been the subject of any civil litigation or had negative judgment rendered against it resulting in penalties, liquidated damages, liens, etc.?

Yes No If yes, please disclose **detailed** information on a separate sheet.

4. Municipal References: Please attach on a separate sheet 3 municipal or government agencies familiar with your company's performance of duties.

5. Customer References: Please attach on a separate sheet 3 customer references familiar with your company's performance of duties.

Business Operations

Processing sites, solid waste facilities, and/or landfills to be utilized by your company (attach separate sheet if needed). Per Fresno County Ordinance 8.24, collected waste shall only be deposited at a permitted facility.

Name of facility: _____

Address: _____

Name of facility: _____

Address: _____

Name of facility: _____

Address: _____

Name of facility: _____

Address: _____

Name of facility: _____

Address: _____

Name of facility: _____

Address: _____

Types of waste your company hauls and/or processes:

Solid Waste	Recyclable	Construction/Demolition
<input type="checkbox"/> Municipal/Residential	<input type="checkbox"/> Beverage Containers (CRV)	<input type="checkbox"/> Asphalt
<input type="checkbox"/> Commercial	<input type="checkbox"/> Paper	<input type="checkbox"/> Brick
<input type="checkbox"/> Industrial	<input type="checkbox"/> Glass	<input type="checkbox"/> Concrete
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Cardboard	<input type="checkbox"/> Dry Wall
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Plastic	<input type="checkbox"/> Soil
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Metal (Iron, Aluminum, etc.)	<input type="checkbox"/> Stone (Gravel, Rock, Granite, etc.)
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Green Waste (Yard Waste)	<input type="checkbox"/> Wood (Lumber, Sheet, etc.)
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Organics (Including Green Waste)	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Rubber (Including Tires)	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

Number and types of vehicles and vessels/containers in operation:

Vehicle/Vessel	Quantity	Vehicle/Vessel	Quantity
Side Loader		Roll-Off Truck	
Front Loader		Roll-Off Bins (10+ Yard)	
Rear Loader		Transfer Trailer	
Mechanical Loader		Dump Trailer	
Cargo Trailer		Other: _____	

Acknowledgment/Certification

By signing this application, I certify, under penalty of perjury, that all information included in this application is true and correct and that I have not omitted any pertinent details that allow County of Fresno to determine the suitability of my application. I acknowledge that I have read, fully understand, and agree to operate in accordance with the requirements outlined in Fresno County Ordinance Code, Section 8.20, Garbage and Rubbish Disposal; Section 8.24, Non-Exclusive Waste Hauler Agreement Program; and the California Code of Regulations Title 14, Article 5, Solid Waste Storage and Removal Standards. I agree to pay any fees or payments required of me to operate within the jurisdiction of the County of Fresno as outlined in the County of Fresno Master Schedule of Fees, Charges, and Recovered Costs and/or my Non-Exclusive Waste Hauling Agreement ("Hauling Agreement"). I understand that failure to follow any of the requirements outlined in the aforementioned regulations will result in the suspension or revocation of my hauling permit, and/or termination of my Hauling Agreement.

Signature

Date

For County Use Only		<input type="checkbox"/> New Application	<input type="checkbox"/> Renewal
Application Reviewed By: _____		Date: _____	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied: _____		
EH Inspection Complete By: _____		Date: _____	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied: _____		
Permit Number: N _____		NEWHA Date: _____	