



DEPARTMENT OF PUBLIC WORKS

965 Fir Street (530) 896-7220
P.O. Box 3420 Fax: (530) 895-2634
Chico, CA 95927-3420 <http://www.ci.chico.ca.us>

City of Chico Green Waste Recycling Exemption Application

Dear Resident:

You have requested a **Green Waste Recycling Exemption Application**. In order to be approved for a green waste recycling exemption, which will result in a **\$5.79** per month reduction on your garbage bill, one of the following conditions must be met:

- You must maintain a backyard compost pile and recycle all green waste generated on-site; or
- Your lawn service takes the green waste to a permitted facility where the material is recycled, such as the City of Chico Compost Facility at 4441 Cohasset Rd, Chico, CA,; or
- Your yard consists of drought tolerant plants, aggregate, or other landscaping that does not generate any green waste.

If your residence meets one of these criteria and you are interested in receiving a green waste exemption, please complete the information below and return the completed application to the mail or email address listed on page two.

Please Note: A green waste exemption will NOT be granted if a lawn service hauls green waste away from the property to a disposal facility where it will not be diverted or recycled (e.g. landfill). Additional information about a green waste exemptions is included on the reverse side of this application.

Sincerely,

Linda Herman
Public Works Administration Manager

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1. This residence is occupied by: _____ Owner _____ Tenant
 2. Resident's Name: _____ Phone #: _____ - _____ - _____
Address: _____ City: _____ Zip: _____
E-mail address: _____
 3. The residence is: _____ Single-Family _____ Duplex _____ Mobile Home
 4. Does the residence generate green waste (grass, leaves, etc.) _____ Yes _____ No
 5. If yes, please explain how the green waste from your residence is recycled. If applicable, please list permitted recycling facility.

 6. Comments: _____

Green Waste Exemption Application

I declare under penalty of perjury that I am the owner and/or occupant of this residence, that I have an account with Waste Management for the collection of garbage, recycling and organic green waste at this residence, that the above information is true and correct and I request an exemption from green waste collection.

Resident's Name (please print): _____

Signature: _____

Date: _____

Return completed application to:

City of Chico Department of Public Works

Attn: Green Waste Exemption Requests

P.O. Box 3420

Chico, CA 95927

Email: Linda.herman@chicoca.gov

Additional Information Concerning Green Waste Exemptions:

- Assembly Bill 939 (D-Sher, Palo Alto), signed into law in 1989, requires municipalities in the State of California to reduce landfilled waste by 50%. On August 15, 2017, the City of Chico City Council voted to implement a franchise agreement with Waste Management, effective October 1, 2017, to exclusively supply residential garbage, recycling and organic green waste services in the City of Chico. As a part of the agreement, mandatory curbside green waste collection is part of a bundled three-cart system to support the city's efforts to comply with AB 939.
- Requests for a green waste exemption are evaluated based on the information submitted on this form and may include an inspection of your yard by City staff who may require additional information.
- Exemptions are valid only as long as the ownership status and other conditions remain unchanged.
- Once submitted, your application will be reviewed for compliance which may take approximately 10 working days.
- If your exemption request is approved, you will be notified through the mail or by email. Waste Management will also be notified and will be responsible for adjusting the charges on your garbage bill. You may contact them at (530) 893-4777, Monday - Friday, 8:00 am – 5:00 pm to check on the status of this deduction or if you have further questions.
- If your exemption request is denied, you will be notified through the mail or by email. Unless you provide additional supporting evidence for approval, Waste Management will not be notified and, there will be no reduction on your garbage bill.

OFFICIAL USE ONLY

Account #: _____

_____ **Green Waste Exemption Granted**

_____ **Green Waste Exemption Denied**

Reason Denied: _____

Public Works Signature: _____ **Title:** _____ **Date:** _____