



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

At Home **COMPOSTING** Exemption Application

OWNER INFORMATION:

Please check one:

☐ NEW

☐ RENEWAL

Property Address (Location) _____

Property Owner Name: _____ Phone _____

Mailing Address: _____ Email: _____

COMPOSTING METHOD:

Please describe the method of at home composting that you use (ex. Loose piles, compost tumbler, vermicomposting, etc.) and what you do to minimize odor and vector issues.

BURN OPTION:

Please let us know if you plan to burn any of green wastes? ____YES or ____NO

If yes, please explain how you obtain advance approval before you burn.

SIGNATURE AND ATTACHED PHOTO:

In order to have Waste Management remove the organics services and fees from my account, I _____ agree to continue to divert my food and green waste materials from the trash by utilizing the at home composting program described above. I have attached a photograph of my current at home composting as evidence of compliance with this exemption. If requested, annually I will resubmit this application with proper documentation that I continue to divert organic materials from my trash cart. I also acknowledge that my property may be inspected for compliance with this Exemption Program with the understanding that reasonable notice must be given prior to inspections. I understand that failure to comply with this Agreement may cause revocation of the exemption from the organics program.

Signature of Owner

Date

For office use only:

☐ APPROVED ☐ DENIED

Director of Integrated Waste Management

Date