## MONTEREY COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH BUREAU Page 1 of 3 APPLICATION / CHANGE OF REQUEST FOR SOLID WASTE SERVICES PROGRAMS

Last Name:		First Name:		Middle Ir	nitials:
Title:	Phone #:		E-mail <u>:</u>		
APPLICATION TYPE	New Business	Closing Business	Add Vehicle	Special Event	Other:
BUSINESS TYPE	Body Art Fa	acility	Culls Feede	r / Transporter	
Medical Waste G	enerator	Liquid Waste	e Hauler	Solid	Waste Hauler
FACILITY INFORMAT					
Facility Owner:	Same as Contact List	ed Above If No	t the Same, List	Owner:	
Facility Name:					
Facility Address:			City, State, Z	ip:	
Mailing Address:			City, State, Z	ip:	
Facility Phone #:		E-mail:			
Facility Fax #:		If Closing Business	s Selected, Lis	t Date of Closure:	
BODY ART FACILITY ( Indicate the Services (Check all that apply)		*Tempora viding Mont	ary Events shall i	or <b>Temporar</b> nform all operators Ith Permit to submit Branding	without a valid
THE FOLLOWING SHA					
Aftercare (Post-proce			ess License	<ul> <li>Consent</li> </ul>	Form
• Infection Prevention a	and Control Plan (1	PCP) • Schem	natic Map / Lay	out of Facility	
• List of all Pracitioners *This List Shall be S		Facility (include Nar Day of Each Month			
CULLS OPERATIONS	DNLY				
Indicate the Type of Cul	Is Activities (Check	k All that Apply)	Feeding / U	lsing Dump	ing / Disposing
Storage F	Receiving	Hauling / Transport	(If Hauling S	elected, Attach List	of Vehicles)
1. Location where	the culls are sp	read or disposed:			
2. Total acreage a	vailable for proc	essing / spreading	j:		
3. Feeding area is	divided into how	w many lots:		Lots	
4: Approximate nu	umber of livesto	ck to be fed:			
		able at the operation Safety Code, Title 10			er to comply
Health and Safety C	ode, Title 10, Chap	cedures will be imple oter 10.32 (e.g. disci ctra sheets if necessa	ng, plowing, tu		
MEDICAL WASTE GEN					
Registration Type (se		itions)			
Small Quantity Genera			l Quantity Gener	ator with Materials o	f Trade Exemption
Large Quantity Genera				ator with Materials of	
Small Quantity Genera			non Storage Fac		·····
Large Quantity Genera			e Generated Con		
Types of Regulated M					(for definitions)
			Chemotherapy		(outdated, unused)

MEDICAL WASTE GENERAT	OR ONLY (Continue)			Page 2 of 3
Method of Medical Was	te Disposal Used: (Ch	eck All that Apply)		
Medical Waste Hauler	If Checked, List Name	e of Hauler:		
(Hauler shall be from the C	Transporter)			
Sharps Mail-Back	If Checked, List Name of			
(Sharps Mail-Back	shall be provided by vendo Frequency of Mailing Sha	r from the CDPH List of Appr rps:	oved Medical Waste T	Transporter)
<b>On-site Treatment:</b> (If	Checked, Identify which O	n-site Treatment Used)		
Isolyser	Autoclave Other:			
	Frequency of Treatment:			
Does your Business Tra	ansport Medical Waste	e Generated from a Mot	ile Service?	
Yes No If	Trade Exemption Log For	g Each Time Medical Waste I m) and Shall Only Transport ansported to Any Other Facili	the Medical Waste to	the Facility
LIQUID WASTE HAULER (\				
Inventory of Vehicles:	-			
<u>Year/Make/Model</u>	<u>License No.</u>	<u>VIN No.</u>	Tank Size(Gallo	<u>ons)</u>
List All Locations where Li Monterey One Water (Marina List All Types of Liquids your Other Counties or Jurisdiction Does your Business Provide C **To Renew your Health Perr Operate in the New Fiscal SOLID WASTE HAULER (VE	Soledad Waste W Company Hauls: s your Business Holds P hemical Toilet Service? nit, your Business Shall Year in the Month of Ma EHICLE) ONLY	Vater Treatment Facility	Waste Hauling: Tr Chemical(s) Shall be tment a List of Vehi le an Inspection.**	cles that Will
Is your Business a Franchi	se Hauler for the Citie	es Selected Below:	Yes	No
Identify All Cities Serviced:         Bradley       Carmel-by-         King City       Marina         Sand City       Seaside	the-Sea Carmel Valle Monterey Soledad	y Del-Rey Oaks Pacific grove Other Cities:	Gonzales San Ardo	Greenfield San Lucas
Attach List of Solid Waste	Vehicle that will be O	perating		
**To Renew your Health Perr Operate in the New Fiscal				
The undersigned hererby applies and belief, the information I have to provide Services in Monterey ( I also agree to conform to all cor governing Body Art Facilities, Cul <b>Print Name:</b>	e provided is true and accu County, I must pay the ann Iditions, laws, orders & dire Is Feeder/Transporter, Mec	rate. I understand that to be ual registration fee establish ection in accordance with all	come and remain reg ed by the County und applicable state and lo d Waste Hauler or Sol	istered and eligible er applicable law. ocal requirements
FOR MONTEREY COUNTY C			Permit:	\$
Program (PE):	Authorized by REHS:		1st Responder:	Ψ \$
· · · ·			Penalty:	\$
PR:	FA:		Total: \$	
Comments:			Date Paid:	

IN

#### **APPLICANT INFORMATION**

Provide business name, address, and mailing information for the facility or hauler to be registered. Owner information must also be provided as well as the name, phone and title of the contact at the facility. If information changes due to new ownership, the new owner shall submit a new registration application. Businesses with has multiple locations, must register each site

the new owner shall submit a new registration application. Dusinesses with has multiple locations, must register each site.					
<b>PERMIT FEES:</b> Please contact the Environmental Health	<b>RETURN APPLICATION TO:</b> Monterey County Health Department,				

Bureau at (831) 755-4505 for the current fee schedule.	Environmental Health Bureau, 1270 Nativ	vidad Road, Salinas,	CA 93906	
BODY ART FACILITY				

# Type of Body Art (§ 119301)

Body Art Facility owner applicant shall identify all the services that will be provided within the facility.

TATTOOING means the insertion of pigment in human skin by piercing with a needle.

**BODY PIERCING** means the creation of an opening in a human body for the purpose of inserting jewelry or other decoration. "Body piercing" includes, but is not limited to, the piercing of an ear, including the tragus, lip, tongue, nose, or eyebrow. "Body piercing", does not include the piercing of an ear, except for the tragus, with a disposable, single-use, presterilized clasp and stud or solid needle that is applied using a mechanical device to force the needle or stud through the ear. **PERMANENT COSMETICS** means the application of pigments in human skin tissue for the purpose of permanently changing the color or appearance of the skin. This includes, but is not limited to, permanent eyeliner, eyebrow, or lip color. **BRANDING** means the process in which a mark or marks are burned into human skin tissue with a hot iron or other instrument, with the intention of leaving a permanent scar.

## CULLS OPERATIONS

#### **CONDITIONS OF PERMIT**

- Only material to be consumed by livestock may be utilized at cull feeding sites. Any packaging material that is discharged into the ground is a violation.
- Vehicle loads containing feed material must be covered with a tarp or enclosed while on public roadways.
- Loads contaminated with any waste material other than vegetable culls must not be accepted.
- Odor impact minimization plan must be submitted if the facility receives a public complaint. Business can request assistant from Health Department.
- Do not bring onto the feeding site more culls than the animal(s) can eat in a 48 hour period.
- Use spreader trucks or spread culls by hand. Culls should be spread in a thin layer (6-8 inches). Do not allow culls to pile up.
- To prevent fly breeding and odors, harrow or disc the feeding areas at least once within twenty four (24) hours of cull feeding. This procedure will spread the remaining culls and allow them to dry more readily.
- Culls shall be fed in designated areas. These areas shall be rotated every few days to allow control measures to be carried out.
- Routine spraying is allowed, with approved materials and methods, of barns or other agricultural buildings within 1000 yards of the feeding area.
- Dead animals shall be removed immediately. Inspection of feeding sites should be made at least once every ten (10) days.

### MEDICAL WASTE GENERATOR REGULATED MEDICAL WASTE

**SHARPS**-Devices that have acute rigid corners, edges, or protuberances capable of cutting or piercing, including, but not limited to hypodermic needles, needles with syringes, lancets, blades, acupuncture needles, blood vial contaminated with biohazardous waste, root canal files, & broken glass.

**BIOHAZARDOUS**—Laboratory waste including human or animal specimen cultures; stocks of infectious wastes and mix cultures; human or animal from production of bacteria, viruses, spores, discarded animal vaccines, and devices used to transfer, inoculate, surgical specimens or tissue, and fluids suspected to be infected with agents known to be contagious to humans; waste containing recognizable fluid blood, fluid blood products.

**PATHOLOGY**—Biohazardous waste including surgical specimens or tissue that have been fixed in formaldehyde or other fixatives; human body parts.

**CHEMOTHERAPY**—Vials, IV tubing, gowns and gloves contaminated with chemotherapy agents.

PHARMACEUTICAL—Outdated and unused pharmaceuticals that are classified by Chapter 11, Title 22, California Code of Regulations. CERTIFIED MEDICAL WASTE HAULER

Hauler shall be from the California Department of Public Health (CDPH) List of Approved Medical Waste Transporter

### REGISTRATION TYPE

SMALL QUANTITY GENERATOR (SQG)-Generate 200 pounds or less of regulated medical waste.

LARGE QUANTITY GENERATOR (LQG)-Generate 200 pounds or more of regulated medical waste.

ONSITE TREATMENT—SQG or LQG utilizing an approved method or process that renders medical waste to solid waste. ANY GENERATOR WITH MATERIALS OF TRADE EXEMPTION - A parental organization or small or large quantity generator

that employs healthcare professionals who generate medical waste may transport less than 35.2 lbs of medical waste at any one time to the central location of accumulation.

COMMON STORAGE FACILITY— Location where <11 registered facilities store regulated medical waste.

HOME GENERATED CONSOLIDATION POINT—Site that accepts generated sharps or pharmaceuticals from the public for proper disposal.

## LIQUID WASTE HAULER (VEHICLE) & SOLID WASTE HAULER (VEHICLES)

### CONDITIONS OF PERMIT

- Business license from any city in which business is conducted. Pick-u
  - Pick-up and disposal records shall be retained for 3 years.
- All waste shall be disposed of at a permitted facility.
- All vehicles shall carry a fire extinguisher, shovel & first aid kit.
- All mechanical parts of vehicle shall be in working order, not leaking, not containing any temporary repair materials such as duct tape.

**ADDITIONAL CONDITIONS OF PERMIT FOR LIQUID WASTE HAULER (VEHICLES)** • Guages shall indicate tank contents.

• Business name, address, phone # & tank capacity shall be displayed on BOTH SIDES of the vehicle in letters size of 3 inches or larger.

- Tanks shall be of metal construction, watertight & have watertight covers or manholes & fitted with an automatic shut-off system.
- Vehicle shall carry a minimum of 5 gallons of clean water, 1 gallon of bleach, and hand cleaner.
   All caps attached to vehicle with chain or rope.
   Vehicle yard shall be we well maintained & zoned for industrial or agricultural.
- ADDITIONAL CONDITIONS OF PERMIT FOR SOLID WASTE HAULER (VEHICLES) Vehicle shall have broom. • Franchise Agreement Section 4.03 (c.)(2): Liquid Waste; Section 4.03 (e.): Noise; Section 5.02 (a): Vehicle Specifications;

Section 5.02 (b): Vehicle Registration; Certifications; Section 5.02 (c.): Vehicle Safety Markings;

Section 5.02 (d): Vehicle Identification; Section 5.02 (e.): Vehicle Recycling Promotion Signage; Section 5.02 (H): Field Supervisor