



# County of Yolo

DEPARTMENT OF COMMUNITY SERVICES  
DIVISION OF INTEGRATED WASTE MANAGEMENT

Taro Echiburú  
DIRECTOR

44090 County Road 28H, Woodland, CA 95776  
(530) 666-8852 Fax (530) 666-8853 [www.yolocounty.org](http://www.yolocounty.org)

COMMERICAL  
**RECYCLING, ORGANICS** or **"DE MINIMUS"**  
EXEMPTION APPLICATION

Return completed Application to:  
Yolo County Central Landfill  
44090 County Road 28H, Woodland, CA 95776  
Fax (530) 666-8853 or [mjuhler@yolocounty.org](mailto:mjuhler@yolocounty.org)

**BUSINESS INFORMATION:**

Business Name \_\_\_\_\_  
Business Address \_\_\_\_\_  
Contact Name \_\_\_\_\_ Contact Phone \_\_\_\_\_  
Contact Email \_\_\_\_\_  
Mailing Address if no email is available \_\_\_\_\_

**RECYCLING METHOD:**

For each recyclable material generated onsite, please check the appropriate box and write in the location where you haul the material to for recycling. Ex. Cardboard – Green Zone Recycling

- |   |   |
|---|---|
| <input type="checkbox"/> Plastic _____      | <input type="checkbox"/> Paper _____      |
| <input type="checkbox"/> Cardboard _____    | <input type="checkbox"/> Glass _____      |
| <input type="checkbox"/> Wood/Pallets _____ | <input type="checkbox"/> Cans/Metal _____ |

\*Attach a photo of your segregated recyclables to be consideration for exemption.

**COMPOSTING METHOD:**

Please describe the method used for diverting or composting your food waste and green waste from your business.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Attach a photo of your composting method to be consideration for exemption.

**"DE MINIMUS"** Check YES  or NO

The County may determine a property is exempt from the requirements of AB 1826 if it has a 2-cubic yard MSW bin, where the property is both used for commercial agricultural (ag) purposes as well as residential use, and it has been determined that 1-cubic yard belongs to the home and 1-cubic yard belongs to the ag business, thus creating a "de minimus" amount of organic waste.



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Continued...

SIGNATURE:

In order to have Yolo County waive the recycling and/or organics collection requirements provided by the solid waste franchise hauler in your area, I \_\_\_\_\_ agree to continue to self-haul my recyclables to an approved diversion facility and/or continue to divert my food waste and green waste materials from the trash by utilizing the alternative methods as described in this application. I will resubmit this application annually if requested, with proper documentation that I continue to divert recyclables and/or food waste and green waste from my trash upon request from the County. I also acknowledge that my property may be inspected for compliance with the Exemption Program with the understanding that reasonable notice must be given prior to inspections. I understand that failure to comply with these terms may cause revocation of the exemption and recycling and/or organics collection service(s) will be initiated by the County and solid waste franchised hauler.

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

\_\_\_\_\_  
Date

*For more information on California Assembly Bill 341 which Mandates Commercial Recycling (MCR) and Assembly Bill 1826 which Mandates Commercial Organics Recycling (MORe) please visit: <https://www.calrecycle.ca.gov/Recycle/Commercial/>  
<https://www.calrecycle.ca.gov/Recycle/Commercial/Organics/>*

<i>For Office Use Only</i>	
Approved	Denied
<input type="checkbox"/>	<input type="checkbox"/>
_____ Waste Reduction Manager	_____ Date