



# UTILITIES DEPARTMENT

(951) 736-2234  
www.CoronaCA.gov/Recycle

Mail Completed Form to:  
City of Corona  
755 Public Safety Way  
Corona, CA 92878

OR Email to:  
CoronaRecycles@CoronaCA.gov

## SOLID WASTE & RECYCLING REGULATIONS WAIVER REQUEST FORM

APPLICANT INFORMATION			PROPERTY OWNER		
BUSINESS OR MULTI-FAMILY PROPERTY PHYSICAL ADDRESS			PROPERTY OWNER, MANAGER OR LEASE HOLDER		
BUSINESS OR MULTI-FAMILY PROPERTY NAME			PHONE		
BUSINESS LICENSE NO.			EMAIL		
BUSINESS OFFICE MAILING ADDRESS			OWNER ADDRESS		
CITY	STATE	ZIP	CITY	STATE	ZIP
CORONA	CA				
TYPE OF BUSINESS (RESTAURANT, MANUFACTURER, OFFICE, PRINTING COMPANY, ETC.):					

CONTACT INFORMATION		
Provide the designated business representative where waiver approval or rejection notice is to be delivered.		
NAME/TITLE	PHONE	EMAIL

WAIVER TYPES							
Check the appropriate box(es) and provide answers to ALL questions for the requested waiver type(s).							
<input type="checkbox"/> <b>DE MINIMIS WAIVER (Organic Waste)</b>							
1. Average number of employees onsite: _____							
2. Average number of employees that eat meals/snacks onsite: _____							
3. Does your business have a cafeteria providing meals to employees? <input type="checkbox"/> YES <input type="checkbox"/> NO							
4. Does your business have a contracted landscape service provider? <input type="checkbox"/> YES <input type="checkbox"/> NO							
If so, provide contracted landscape service provider name: _____							
And landscape service provider contact/representative (including phone #): _____							
Current Weekly trash and recycling collection service levels, if applicable:							
	BIN TYPES	QUANTITY	COLLECTIONS (PER WEEK)		BIN TYPES	QUANTITY	COLLECTIONS (PER WEEK)
TRASH	DUMPSTERS			RECYCLING	DUMPSTERS		
	CARTS				CARTS		

<input type="checkbox"/> <b>DE MINIMIS WAIVER (Recycling)</b>	
1. Please check off the recyclable materials down below that your business generates:	2. Please check off the recyclable materials down below that your business recycles:
<input type="checkbox"/> metal (specify type: scrap metal, aluminum cans, etc): _____	<input type="checkbox"/> metal (specify type: scrap metal, aluminum cans, etc): _____
<input type="checkbox"/> paper	<input type="checkbox"/> paper
<input type="checkbox"/> cardboard	<input type="checkbox"/> cardboard
<input type="checkbox"/> plastic bottles	<input type="checkbox"/> plastic bottles
<input type="checkbox"/> glass bottles	<input type="checkbox"/> glass bottles
<input type="checkbox"/> other* (please specify): _____	<input type="checkbox"/> other* (please specify): _____

**\*Please note that plastic bags and plastic wrapping and/or plastic film are not considered recyclable materials.\***

The City of Corona takes your privacy seriously. This forms asks you to provide the City with certain personal information. Such information is being requested and will be utilized by the City for the specific and limited purpose of future City correspondence regarding the subject-matter of this form.



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## WAIVER REQUEST FORM

### DE MINIMIS WAIVER (Recycling) CONTINUED...

3. Does your business have a recycling roll off?  YES  NO

4. Frequency of recycling service (collections per week, size of recycling container, etc.): \_\_\_\_\_

If so, provide contracted recycling service provider name: \_\_\_\_\_

5. Description of internal recycling efforts including type and quantity of material being recycled AND facility where material is taken for recycling:

6. Provide any contracted third-party recycling service provider name(s): \_\_\_\_\_

### SPACE CONSTRAINT WAIVER

1. Have you ever worked with your solid waste collection service provider to adjust container sizes to resolve space constraint issues? (i.e. requested smaller bin sizes or split bins for recycling and trash, etc. to resolve space constraints)  YES  NO

2. Do you have documentation from your hauler showing that space constraints preclude placement of required recycling and/or organic waste recycling containers?  YES  NO

3. Specific program(s) you are requesting waiver for (e.g. recycling and/or organic waste recycling):

RECYCLABLES ONLY

ORGANIC WASTE ONLY

RECYCLABLES AND ORGANIC WASTE

By signing this form, you are attesting that you have full understanding of your businesses' obligations to provide information, report to, and otherwise fully cooperate with the City, as detailed in the instructions herein which accompany this form.

\_\_\_\_\_  
AUTHORIZED BUSINESS REPRESENTATIVE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME

\_\_\_\_\_  
TITLE

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