



## CASTRO VALLEY SANITARY DISTRICT GARBAGE EXEMPTION FORM

Applicant's Name		Date
Property Address		Account Number
Email		Phone
Number of Occupants	Number & Type of Pets_	

## Note: If approved, this garbage exemption is valid for a one-year period for the current owner/occupant of the property. You must re-apply for an exemption, annually.

A customer who is granted a garbage exemption is excluded from participation in garbage service and receives only recycling and organics services (Canyonlands customers do not receive organics services). The garbage cart will be removed from the property. The customer will be billed at the Garbage Exempt rate for recycling and organics services only. For the current Garbage Exempt rate, visit **cvsan.org/rates**.

If you wish to be considered for an exemption from Castro Valley Sanitary District (CVSan)'s mandatory garbage service, you must complete this form and mail or email it to:

Alameda County Industries CVSan - Exemption Request PO Box 1878 San Leandro, CA 94577-0277 BillingCV@AlamedaCountyIndustries.com

This form must be completed in its entirety, including all written descriptions and all receipts and letters enclosed as described below. Exemptions may be granted to residents who meet one of the following three criteria.

I am applying for an exemption because no garbage is generated, and food is not prepared or consumed on this premises.

[Please provide a detailed, written description of the reasons no garbage is generated on the premises, how you live without a kitchen, and where you consume your meals.]

I am applying for an exemption because I deliver my garbage to an authorized disposal facility. [Please submit at least four receipts, or a monthly bill that prove your garbage is being discarded, at least weekly, in a safe and legal manner. In addition, describe how your garbage is handled until taken to be discarded.]





	I am applying for an exemption because I share my gray garbage cart service with another owner/occupant in CVSan. [Please provide the name, address and telephone number of the person with whom you share service, a brief description of your agreement, a letter from the person stating they share service with you, and a copy of the person's last recycling, organics, and garbage bill.]
inspec inspec By sig	ble between 8:00 a.m. and 5:00 p.m., Monday through Friday. Failure to permit a random exterior ction may result in denial of an exemption request. An interior inspection may be required if the exterior ction is insufficient. An interior inspection (if needed) shall be arranged with the property owner. gning this form and requesting an exemption from regular weekly garbage collection, the undersigned, , hereby authorizes an Alameda County Industries and/or a Castro (Print Name)
Valley	/ Sanitary District staff person to perform an inspection of my property located at:
	,, CA (Print Address) (City) (Zip)
	Applicant's Signature
ACI w	vill contact you to provide an update on the status of your application (granted or denied).
	d you have questions about how to complete this form or about your application status, please call o Valley Sanitary District at (510) 537-0757 or Alameda County Industries at (510) 483-1400.
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	TO BE COMPLETED BY ACI
For re	e-applicants, this form and supporting documentation must be received no later than