



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 <u>one-year period</u> for the current owner/occupant of the property. You must re-apply for an exemption, annually.

A customer, whose account is and remains in good standing and does not have a past due balance, and 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 / or food is not prepared or consumed on the property.

[Please provide a detailed, written description of the reasons that no garbage is generated on the premises (ex. how do you not use your kitchen, how do you buy or acquire food without packaging that is not recyclable or compostable, or where do 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 proves 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.]





	owner/occupa [Please provid service, a brief	for an exemptio ant in CVSan. e the name, addr description of yo a copy of the pers	ess and telepho ur agreement, a	one number of th letter from the pe	e person with erson stating th	whom you sha	are		
occup availa inspec	ant/owner does ble between 8: ction may result	be granted, a brie not need to be 00 a.m. and 5:00 in denial of an ea nt. An interior insp	present for the p.m., Monday cemption reques	inspection, but through Friday st. An interior ins	the property's . Failure to pe pection may be	exterior must ermit a randor e required if th	be made n exterior		
By sig	ning this form a	nd requesting an o			•		gned,		
	(Print Name)	, hereby a	authorizes an Al	ameda County Ir	dustries and/o	r a Castro			
Valley	Sanitary Distric	t staff person to p	erform an inspe	ction of my prope	erty located at:				
		(Print Address)		_,(City)	, CA				
Applicant's Signature									
ACI w	ACI will contact you to provide an update on the status of your application (granted or denied).								

Should you have questions about how to complete this form or about your application status, please call Castro 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-applicants, this form and supporting documentation must be received no later than