

City of Irwindale - Public Works Engineering / Building & Safety 5050 N Irwindale Avenue, Irwindale, CA 91706

CONSTRUCTION AND DEMOLITION DEBRIS RECYCLING AND REUSE PROGAM

FORM 2 – WASTE DIVERSION PLAN (WDP) AMENDMENTS

Cit 16	ete and submit to: y of Irwindale - Public Works Engineering / Building & Safety 102 Arrow Highway, Irwindale, CA 91706 ice Hours: 8 a.m. – 6 p.m. Monday through Thursday	Date:						
debris g	of Irwindale Municipal Code, Chapter 8.20, requires construction enerated and submittal of this Waste Diversion Plan documental information is available by calling (626) 430-2205.							
L C	Waste Diversion Plan ID Number (RRP):							
PROJECT	Project Street Address:							
A N	City, Zip:							
	n for change or delay (all changes <u>must</u> be approved in adva							
Please be sure to sign Page 2.								
ll l	FOR PUBLIC WORKS USE ONLY as 65 percent requirement: Yes No andment approved: Yes Date:	Date Received						
	oved By: Sign Print	(626) 430						



Signature if Project Manager

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WASTE DIVERSION PLAN (WDP) AMENDMENT SIGNATURE PAGE

APPLICANT INFORMATION	_	Name:						
	TION	Mailing Address:						
	ZMA.	City, Zip:						
	FOF	Phone:			Fax:			
	_	Relation to Project:	Owner	Authorize	ed Contractor	Project	Manager	
sub Mu adr of a adr ma Cha	iject nicip ninis any a ninis y be apte	at any violation of the toenforcement in act and Code in addition strative citation is issued all WDPs submustrative penalty has be declared a lien on a 1.16 of the Municipal dersigned fully acknowage of recyclable manual contracts.	to any other to any other to any other the bitted by the been paid. It any real paid Code.	with Chapte er enforcem cuilding Office responsible n addition, to property on	r 1.16 (Admin ent provisions cial or his/her e person on he amount of which the p	istrative C s permitted designee any projed any unpai roject tool	itations) of the d by Chapter & may withhold ct(s) until the a d administrativ k place, as pr	Irwindale 3.20. If ar approva applicable re penalty ovided in
X _	Owner'	s signature		Print Name			Date	
X -	Signatu	ure if Authorized Contractor		Print Name			Date	
V								

Print Name

Date