Welcome to the City of Irwindale

The City of Irwindale welcomes you to the business community. We are pleased that you have selected our City for your business enterprise. We are here to assist you through the occupancy and business license process.

Occupancy Permit Information

Required for New Business Licenses and New Tenants/Building Occupancy
Any business that proposes to occupy a building, space, or an empty lot within the boundaries of the City of Irwindale must apply for and obtain an Occupancy Permit from the Building & Safety Division prior to receiving your Business License. Questions: Please contact the Building & Safety Division at (626) 430-2205.

Building & Safety and Business License Divisions
16102 Arrow Hwy., Irwindale, CA 91706
Office Hours: Monday – Thursday from 8:00 a.m. to 4:30 p.m. By appointment only.

Business License Information

The City of Irwindale requires a business license to operate any type of business in the City. You may not operate your business until such time that all City requirements are met, business license fees are paid, and you have been issued a business license. Questions: Please contact the Business License Division at (626) 430-2252.

Applying for an Irwindale Business License

The Occupancy Permit Application Packet consists of the following:
   a. City of Irwindale Building & Safety Application for Occupancy Permit
   b. Planning Department, Preliminary Zoning Approval Form
   c. South Coast, Air Quality Management District (SCAQMD) Form
   d. County of Los Angeles, Statement of Intended Use Forms

The PROCESS is as follows:
1. Fill out the entire Occupancy Permit Application packet.
2. Email L.A. County Fire Department and SCAQMD for approval.
3. Return packet to the Planning Department for approval and fee.
4. Occupancy Permit issuance will occur with payment to the City of Irwindale and approval from all required agencies. Cash or Checks ONLY!
5. Now move into the facility and call (626) 430-2254 to schedule an inspection.
6. Once the County Building Inspector signs off on the permit please bring the signed paperwork to the Building & Safety Division where the Permit Technician will stamp the signed permit “READY FOR BUSINESS LICENSE.”
7. Upon completion, you may fill out the business license application online at www.irwindaleca.gov. The cost of the business license fee will be provided to you via email. Once the license fee is paid and all required documents are received, the Business License will be processed and mailed to the business

* Please note: (1) The Occupancy Permit must be finaled prior to the release of the business license. (2) Penalties are incurred Each Month the business does not have a business license. (3) We highly encourage that you DO NOT begin any tenant improvements until the occupancy permit is finalized. *
City of Irwindale
Occupancy Fee Schedule

Effective July 1, 2022, Occupancy Permit fees in the City of Irwindale will be as follows:

Permit Issuance Fee $72.00

Plus (+) Amount of Affected Floor Area:

- Up to 5,000 square feet $1,405.70
- 5,001 to 10,000 square feet $1,763.70
- 10,001 to 100,000 square feet $2,812.50
- above 100,000 square feet $4,263.00

Plus (+):
Planning Occupancy Permit Fee $200.00
*(must be paid by separate check or cash)*

- Please note: These are “one-time fees” provided your business stays in the same location. Change of location, unit number, suite number, building or address requires an additional occupancy permit(s).
- Businesses expanding into additional suites or units also require an occupancy permit for each new unit occupied.
Los Angeles County Fire Department

Due to COVID-19, the Local Fire Prevention Office at 605 N. Angeleno Avenue, Azusa, CA 91702 is closed to the public.

The completed Form 30 (8/08) needs to be scanned as a pdf document and submitted by email to FFS Raul Salazar at: raul.salazar@fire.lacounty.gov

Any questions regarding the Form 30 (8/08) submittal should be directed to FFS Raul Salazar at the email address above or by phone at (626) 969-7876.
CITY OF IRWINDALE
APPLICATION FOR OCCUPANCY PERMIT

<table>
<thead>
<tr>
<th>PERMIT NO.</th>
<th>ASSESSOR I.D. NO.</th>
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BUILDING ADDRESS: ____________________________ SUITE NO: ______ CROSS STREET: ________________
(S STREET ADDRESS / CITY / ZIP CODE)

TENANT: ____________________________ TENANT’S PHONE (______)
(BUSINESS NAME)

SQUARE FOOTAGE: ____________________________ NO. OF STORIES: ______ NO. OF EMPLOYEES: ______

TYPE OF BUSINESS: ____________________________ NO. OF PARKING SPACES: ____________________________

OCCUPANCY GROUP: ____________________________
(CIRCLE ALL THAT APPLY) OFFICE WAREHOUSE RESTAURANT INDUSTRIAL RESIDENTIAL OTHER __________

BUILDING OWNER’S NAME: ____________________________ OWNER’S PHONE: (______)
(LAST NAME / FIRST NAME / BUSINESS NAME)

ADDRESS: ____________________________ OWNER / BUILDER?: YES NO (CIRCLE ONE)
(STREET ADDRESS / CITY / STATE / ZIP CODE)

APPLICANT: ____________________________ APPLICANT’S PHONE: (______)
(LAST NAME / FIRST NAME & BUSINESS NAME)

ADDRESS: ____________________________ WORKER’S COMP. POLICY NO.: ____________________________
(STREET ADDRESS / CITY / STATE / ZIP CODE)

FOR OFFICE USE ONLY

<table>
<thead>
<tr>
<th>PERMIT ISSUANCE FEE: $ ___________</th>
<th>FORM OF PAYMENT</th>
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</thead>
<tbody>
<tr>
<td>OCCUPANCY PERMIT FEE: $ ___________</td>
<td>CHECK □</td>
</tr>
<tr>
<td>TOTAL AMOUNT PAID $ ___________</td>
<td>CASH □</td>
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BUILDING & SAFETY DEPARTMENT STAMP
CITY OF IRWINDALE
PRELIMINARY ZONING APPROVAL FORM

Before a business license application can be accepted applicant must receive preliminary zoning approval.

Date: _________________________

Applicant Name: ____________________________________________________________

Applicant Address: __________________________________________________________

Applicant Phone #: __________________________________________________________

Proposed Business Address: __________________________________________________

Proposed business Zone: ______________________________________________________

Description of Proposed Business (be specific): _________________________________

_____________________________________________________________________

1.) Will the business sell or prepare food or have any entertainment (i.e.: dancing, singing modeling…)? Yes / No* 

2.) Will the business use, sale, or store and materials classified as toxic or hazardous by either the federal or state government as a substantial part of the total use? Yes / No*

3.) Will the business store materials, vehicles, and/or equipment outdoors? Yes / No

4.) Will the business sell or provide: A.) Alcohol Yes / No B.) Sexually Oriented Materials Yes / No C.) Live Entertainment Yes / No

*If you answered yes to any of the above please give full explanation: _______________________

_____________________________________________________________________

I certify under penalty of perjury that the above information contained herein is true and complete to the best of my knowledge.

Applicants signature________________________________________________________ Date_____________________

If the preliminary zoning is not approved, a business license application will not be accepted until zoning approval is obtained.

For office use only:

Approved_______ Denied__________ CUP Required Yes / No ________________

Planner______________________________________________ Date____________________

Code Enforcement____________________________________ Date__________________
NOTICE TO PROSPECTIVE BUSINESSES
STATEMENT OF INTENDED USE

Various processes and situations in commercial and industrial establishments can create fire and life safety hazards. In order to provide a reasonable degree of safety to life and protection of property, specific requirements have been established in the Fire, Building, and Life Safety Codes. To help us assess what particular laws apply to your business, please provide the following information:

PART I – Building Information

Business Name:__________________________________________________________

Business Address: ______________________________________________________

Number of Buildings: ______ Type of Construction: _________________________ Square footage: __________

PART II – Questionnaire

1. Will you have over 500 square feet of high-piled combustible storage? (> 12’ or > 6’ for High Hazard Commodities) See Part V of this form for more information.  

2. Will you be storing more that 2500 cubic feet of miscellaneous combustible materials?  

3. Will you store, transport on site, dispense, use, or handle hazardous materials? (FC Table 105.6.20)  

4. Will you store, handle, use, apply, or dispense flammable or combustible liquids or powder coating?  

5. Will you store, handle, or use compressed gases including liquefied petroleum gases? (FC Table 105.6.8)  

6. Will you produce, store, handle, or transport onsite cryogenic fluids? (FC Table 105.6.10)  

7. Will you store, use, or handle radioactive materials more than 1 microcurie or any amount that requires a permit from The Nuclear Regulatory Commission?  

8. Will you store or handle more than 25 lbs of pyroxylin plastics or use any such material in a manufacturing process?  

9. Will you melt, cast, heat treat, or grind more than 10 lbs of magnesium or other combustible metals?  

10. Will your store or handle an aggregate quantity aerosol products in excess of 500 lbs. net weight?  

11. Will you manufacture more than one gallon of organic coating per day?  

12. Will you store, handle, sell, or use any model rocket engines, pyrotechnic materials or fireworks?
13. Will you have a refrigeration system with >220 lbs Group A1 or 30 lbs of any other refrigerant?

14. Will you store or handle loose combustible fibers in excess of 100 cubic feet?

15. Will you install or operate a stationary lead-acid battery system with more than 100 gallons of liquid capacity?

16. Will you conduct fruit or crop ripening operations using ethylene gas?

17. Will you produce combustible dust?

18. Will you operate a place of assembly (drinking, dining, or gathering) with a single room occupant capacity of 50 or more people?

19. If YES to #18, Will you have liquid or gas fueled vehicles or equipment; use open flames or candles; or store, use, or handle cellulose nitrate film in an assembly occupancy?

20. Will you operate a carnival or a fair, or an amusement, covered mall, exhibit or trade show building?

21. Will you use dry cleaning equipment?

22. Will you operate an industrial baking oven, or a power coating or spray finish booth or room?

23. Will you be conducting welding, cutting, or other hot work operations?

24. Will you be using open-flame devices including torches, candles, lanterns, or portable cooking appliances?

25. Will you conduct any form of open burning, or create a bonfire, rubbish, or recreational fire?

26. Will you be conducting activities or create a condition near a hazardous fire area (wildfire area) that could accidentally ignite a wildfire?

27. Will you have a lumber yard or wood working plant which stores or processes 100,000 board feet of lumber?

28. Will you store wood chips, hogged material, lumber, or plywood in excess of 200 cubic feet?

29. Will you conduct any fumigation or thermal insecticidal fogging operations?

30. Will you operate an auto wrecking, waste handling, or commercial rubbish handling facility?

31. Will you remanufacture tires or store over 2,500 cubic feet of tires or tire byproduct?

32. Will you operate a repair garage or fuel dispensing facility for automotive, marine, or fleet equipment?

33. Will you perform floor finishing over 350 sq ft using Class I or II liquids?

34. Will you operate a temporary sales lot for the sale of Christmas trees or pumpkins?

35. Will you install or use any type of temporary membrane structure, tent, or canopy?

36. Will you conduct any motion picture, television, commercial, or related film production?

37. Will you be removing or using a privately owned fire hydrant?
38. Is your building equipped with automatic fire sprinklers?  

   YES  NO  

   If YES provide the following information: (The following information can usually be found on the main sprinkler system riser for each system or the Fire Department Connection (FDC) or can sometimes be obtained from the property owner.)

   a) Date of last fire sprinkler system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): ____________________________

   b) Below is a list of common types of sprinkler systems. Complete the information for the type of system installed in your building:

      ♦ CALCULATED: ____________ GPM/SqFt ____________ Design Area (i.e. .3/3000)

      ♦ PIPE SCHEDULE (non-calculated): ___Light Hazard ___Ordinary Hazard ___Extra Hazard

      ♦ EARLY SUPPRESSION FAST-RESPONSE (ESFR): ____________ PSI ESFR K Factor ______

   c) Is the sprinkler system electronically supervised? If YES then:  

   Fire sprinkler alarm monitoring company: ____________________________

39. Is your building equipped with a standpipe system (fire hose or fire hose connections)? If YES:  

   YES  NO  

   a) Type and location: ____________________________

      (Certification information can usually be found on labels on the main standpipe system riser for each system)

   b) Date of last standpipe system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): ____________________________

40. Is your building equipped with any other type of manual or automatic fire extinguishing system? (Halon, Clean Agent, FM-200, Kitchen Hood System, Spray Booth) If YES then:  

   YES  NO  

   a) Type and location: ____________________________

   b) Date of last automatic extinguishing system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): ____________________________

41. Is your building equipped with a manual or automatic fire alarm system? If YES then: (smoke detector, heat detector, or manual pull)  

   YES  NO  

   a) Date of last alarm system test: ____________________________

   b) Is the fire alarm system electronically supervised? If YES:

      Fire alarm monitoring company: ____________________________

42. Maximum number of employees working at one time: ____________________________  

43. Hours of operation: ____________________________ To ____________________________  

44. Describe the method of disposing of combustible or hazardous waste materials:

   ________________________________________________________
PART III – Intended Use Statement

1. **SUBMIT A LETTER:** Submit a signed, legible letter (preferably typewritten and on your company's letterhead) stating your intended use for the property. In the letter, describe materials you will be storing and using on the property. Explain the method of storage (e.g., racks, pallets), storage dimensions, and where the materials will be located on the property. Describe how you will be using the materials. Provide details to any item(s) marked “yes” in Part II and explain any planned alterations to the building. (See attached example).

2. **SUBMIT SITE PLAN / FLOOR PLAN:** Submit site plan drawn to rough scale showing the property size and location, building size and location on property, both in square feet. Show all exit doors, fire extinguishers, fire hose cabinets, special fire or life safety systems, and any item(s) marked “yes” in Part II. (See attached example).

PART IV – Hazardous Materials Non-Handler Declaration:

HAZARDOUS MATERIALS NON-HANDLER DECLARATION (FORM 585)

{ } THIS BUILDING WILL USE HAZARDOUS MATERIALS IN EXCESS OF NON-REPORTABLE AMOUNTS.

{ } THIS BUILDING WILL NOT USE HAZARDOUS MATERIALS OR USES NON-REPORTABLE AMOUNTS.

A hazardous material may be broadly defined as any material that because of its quantity, concentration, or physical or chemical characteristics, poses a significant, present, or potential hazard to human health and safety, property, or to the environment. A hazardous material includes, but is not limited to, any substance or material which the handler or the administering agency has a reasonable basis for believing would be injurious to a person’s health and safety or harmful to the environment if released into the work place or surrounding areas.

By signing below, I declare that the above named business, organization, or occupant will not handle a hazardous material or mixture containing hazardous material which has a quantity at any one time during the reporting year equal to, or greater than, a total weight of 500 pounds, or a total of 55 gallons, or 200 cubic feet at standard temperature and pressure for compressed gas.

Print Name and Title of Declarer: ________________________________ Date: __________________

Declarer Signature: __________________________________________ Fire Department Representative: ______________________________

PART V – High-Piled Combustible Storage:

In Chapter 23 of the County of Los Angeles Fire Code, high-piled combustible storage is defined as: Storage of combustible materials [product and/or packaging] in closely packed piles (floor storage) or combustible materials on pallets, in racks, or on shelves where the top of storage is greater than 12 feet in height. High-piled combustible storage also includes certain high hazard commodities, such as rubber tires, ‘Group A’ plastics, flammable liquids, idle pallets, and similar commodities, where the top of the storage is greater than six feet in height.

It is very important to contact a fire inspector prior to consideration of storing high-piled combustible storage. Many of the permit requirements must be built into your building. If your building is not approved for high-piled combustible storage it may be cost prohibitive. For example, if you have a pipe schedule sprinkler system no high-piled storage is permitted until the system is calculated. A fire inspector can assist you with fire department requirements.

{ } THIS BUILDING WILL NOT BE USED FOR HIGH-PILED COMBUSTIBLE STORAGE.

{ } THIS BUILDING WILL BE USED FOR HIGH-PILED COMBUSTIBLE STORAGE. “Permit Required.” Contact a Fire Inspector for permit requirements.

{ } THIS BUILDING IS A SPECULATION BUILDING WITHOUT A TENANT AT THIS TIME. The tenant will be notified to contact the Fire Department prior to use of the building.
TO GET A STAMP FROM THE FIRE DEPARTMENT YOU MUST BRING THE FOLLOWING ITEMS TO THE JURISDICTIONAL FIRE PREVENTION OFFICE:

- The Statement of Intended Use Form 30, Completely Filled Out
- A Signed Letter from the Business Owner, or Authorized Agent (See Page 4)
- A Floor Plan / Site Plan of the Building
- The Occupant Emergency Information, Completely Filled Out (Page 7)

THE FOLLOWING PERMITS ARE REQUIRED:

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PERMIT INFORMATION SHEETS WILL BE PROVIDED FOR REQUIRED PERMITS. (Permit Information Sheets are also available for viewing on our website. Go to www.fire.lacounty.gov, under Fire Prevention Division look for “Permit Requirements.”)

PERMITS WILL ONLY BE ISSUED BY A FIRE INSPECTOR. PLEASE CONTACT YOUR FIRE INSPECTOR TO SCHEDULE AN INSPECTION.
FIRE EXTINGUISHER REQUIREMENTS
(This section to be completed by Fire Department personnel.)

Primarily Class A Fire Hazards (Ordinary Combustibles):

( ) Light Fire Hazard: Provide a minimum of (1) 2A10BC rated fire extinguisher mounted in an accessible, conspicuous area. One extinguisher is required for every 6,000 square feet and the travel distance to a fire extinguisher shall not exceed 75 feet from any point hazard involved. Mount in an accessible and conspicuous location.

( ) Ordinary Fire Hazard: Provide a minimum of (1) 2A10BC rated fire extinguisher mounted in an accessible, conspicuous area. One extinguisher is required for every 3,000 square feet and the travel distance to a fire extinguisher shall not exceed 75 feet from any point of the hazard involved. Mount in an accessible and conspicuous location.

( ) Extra Fire Hazard: Provide a fire extinguisher with a minimum Class A rating of 4. One extinguisher is required for every 4,000 square feet. Travel distance to a fire extinguisher shall not exceed 75 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.

Class B Fire Hazards Present (Flammable/Combustible Liquids with depths .25” or less):

( ) Light Fire Hazard: Provide a fire extinguisher with a minimum Class B rating of 10 mounted in an accessible, conspicuous area. The travel distance to a fire extinguisher shall not exceed 50 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.

( ) Ordinary Fire Hazard: Provide a fire extinguisher with a minimum Class B rating of 10 with an allowable a maximum or 30 feet travel distance or a fire extinguisher with a minimum Class B rating of 20 with a maximum allowable travel distance of 50 feet from the hazard involved. Mount in an accessible and conspicuous location.

( ) Extra Fire Hazard: Provide a fire extinguisher with a minimum Class B rating of 40 with a maximum feet travel distance of 30 feet or a fire extinguisher with a Class B rating of 80 with allowable maximum travel distance of 50 feet from the hazard involved. Mount in an accessible and conspicuous location.

Special Hazard Protection (Grease and Combustible Metal):

( ) Commercial Kitchen Hood System – One Class K fire extinguisher shall be placed within 30 feet of all grease cooking operations in a commercial kitchen. Protection of a multiple deep fat fryer appliance installation shall be as per Fire Code 904.11.5.2. Mount in an accessible and conspicuous location. Care shall be used to insure that the K Class extinguisher and not the other type of extinguishers will be used in the event of a grease fire involving cooking equipment. Multi-purpose fire extinguishers may compromise the effectiveness in wet chemical kitchen hood extinguishing systems.

( ) Hazards involving the ignition of Class D combustible metals such as magnesium, titanium, zirconium, sodium, lithium, and potassium shall be protected as per NFPA 10 standard for areas where combustible metal powders, flakes, shavings, chips, or similarly sized products are generated. Travel distance to a fire extinguisher/fire extinguishing agent shall not exceed 75 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.

See Fire Code Table 906.1 for additional specified areas for required fire extinguisher placement.
## GENERAL INFORMATION:

Business Name: ________________________________________________________________

DBA/AFA/FKA: ________________________________________________________________ Effective Date: _______________

Street Address: __________________________________________________________________ Suite/Apt ____________________

City: ___________________________________________________________ State: __________ ZIP+4: ______________________

___ new construction, name change, or ownership change: __________________________________________________________

___ a new occupant moving in and the previous occupant/business has moved out ________________________________________

___ sharing the above address with another occupant/business by the name of: ___________________________________________

Mailing Address (only if different than above): __________________________________________________________________________

Phone: (_____) _____________________________ ext __________ Fax: (_____) _______________________________________

Generic E-mail: ____________________________________________________________________ Number of employees: ____________

Senior Person: ________________________________________________________________ Title: ______________________________

Describe Property Use: _____________________________________________________________________________________________

Hazardous Material: _______________________________________________________________________________________________

Notes/Special Concerns: ____________________________________________________________________________________________

Thomas Guide: _____________ Cross Street: __________________________________________________________________________

City License/Permit #: ______________________ Zone: ____________________________________________ Fire Station #: _________

Water Company : _____________________________________________________________ Phone: (_____) ______________________

## PROPERTY INFORMATION:

Landlord/Property Owner Name: _________________________________________________  Phone: (_____) ______________________

Address: _________________________________________________________________________________________________________

Contact Person Name: __________________________________________________________ Title: ______________________________

Occupancy Code: ____ Roof Type: ________  SQFT:  __________ Stories: _______ High Piled: _____ Fire Sprinklers: _____

Basement: ____ Target Hazard: _____ HM Handler: _____ FD Permit: ____

## EMERGENCY CONTACT INFORMATION: (24 Hour number – usually home phone)

1st Person to contact: _____________________________________ Title: _____________________ Phone: (_____) _______________

2nd Person to contact: ____________________________________ Title: _____________________ Phone: (_____) _______________

3rd Person to contact: _____________________________________ Title: _____________________ Phone: (_____) _______________

Alarm Company: __________________________________________________________________ Phone: (_____) __________________
April 26, 2002

To Whom It May Concern:

The following information is in answer to your request regarding the business operation to be conducted at the above address.

1. Operations conducted in the building are as follows:
   a) Upholstery – manufactures loose cushions for wood and metal furniture as well as some fully upholstered furniture.
   b) Plastic furniture – manufacture plastic furniture out of extruded plastic tubing. Operations include cutting, thermoforming and assembly.
   c) Spray painting – painting of all necessary items. All spray painting to take place in spray booth.
   d) Warehousing of wood and metal furniture components.
   e) General office activities.

2. See attached plot plan.

3. Materials to be stored include the following.
   a) Metal and wood furniture frames stacked upon themselves
   b) Wood furniture parts palletized.
   c) Upholstery materials in racks 6 feet high.
   d) Plastic tubing and furniture parts in racks 6 feet high.

4. Materials are stored both in racks, on pallets, and free standing. Maximum height of storage is 10 feet.

5. No alterations are planned at this time.

Sincerely,

John J. Jones
President

JJJ:ab
South Coast Air Quality Management District developed this Air Quality Permit Checklist (checklist) as a screening evaluation tool in the process required by California Government Code Section 65850.2.

Please submit this checklist to the Small Business Assistance Office by email, mail, or in person for review. If you have any questions or need assistance completing this checklist, contact the Small Business Assistance Office. Provide a response to all sections of this checklist as South Coast AQMD may decline to approve this checklist due to lack of information from the applicant.

NOTE: This checklist is not intended for the approval of demolition or renovation activities. If there are any demolition or renovation activities that may disturb building materials, please contact the Asbestos Hotline at 909-396-2336.

### Section A – Operator and Business Information

1. Business Name:

2. Address:  
   Street  
   City  
   CA  
   Zip  
   Phone:

3. Contact Name:  
   Title:  
   Email:

### Section B – Business and Equipment Description

Please provide a detailed description of the ongoing business operations performed and equipment used at this location, including both new and existing equipment. Provide the existing South Coast AQMD facility ID and/or permit numbers, if any.
Section C – Equipment List

Select from the list below equipment currently in operation or to be installed.
(Select all that apply and provide the specifications)

☐ Abrasive Blasting Cabinet/Room
☐ Air Conditioning Systems (> 50 lbs of refrigerant)
☐ Application of Paints/Adhesives/Resins
☐ Baghouse/Dust Collector
☐ Bakery Oven (gas-fired, excluding eating establishments)
☐ Boiler/Water Heater
  (max. heat input = or > 1 million BTU/hr)
☐ Charbroiler
☐ Coffee Roaster (excluding eating establishments)
☐ Deep Fryer (excluding eating establishments)
☐ Dry Cleaning
☐ Electrostatic Precipitator
☐ Etching/Plating/Casting/Melting/Forging/Grinding/Cutting
☐ Fermentation
☐ Gasoline Storage & Dispensing
☐ Internal Combustion Engine
  (rated > 50 bhp; e.g. back-up generator, fire pump)
☐ Mixing/Bleding of Liquids and/or Powders
☐ Molding/Extruding/Curing of Plastics
☐ Pharmaceutical/Nutraceutical
☐ Plasma/Laser Cutter
☐ Printing/Coating/Drying
☐ Refrigeration Systems (containing >50 lbs of refrigerant)
  Contact the CA Air Resources Board to register the systems.
  916-324-2517 or rmp@arb.ca.gov

☐ Soldering Oven
☐ Spray Booth
☐ Storage Tanks
☐ Storage Silos
☐ Fuel-burning equipment
☐ OTHER equipment which may have the potential to emit or control air contaminants:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Section D - Business Self Certification

7. Owner or Authorized Representative*: 

Title: 

Signature:  Date:  Phone: 

I hereby certify by my signature above that, I am a duly authorized representative of the above-named business, and that all information contained herein is true and correct.

Approved By:

☐ Applicant has permit(s) or registration(s):

☐ Applicant has filed for permit(s) or registration(s):

☐ Applicant is exempt from permit requirements:

☐ Based on the information provided, no equipment/process requiring a permit or registration.

*An Authorized Representative is an employee of the business described in Section A, who is authorized to sign on behalf of the owner.
Background and Overview

In October of 2014 Governor Brown signed Assembly Bill 1826 Chesbro (Chapter 727, Statutes of 2014), requiring businesses to recycle their organic waste on and after April 1, 2016, depending on the amount of waste they generate per week. Organic waste (also referred to as organics) means food waste, green waste, landscape and pruning waste, nonhazardous wood waste, and food-soiled paper waste that is mixed in with food waste.

Key Elements of the Law for Businesses. A business that meets the waste generation threshold must engage in one of the following organic recycling activities:

- Source separate organic waste from other waste and participate in a waste recycling service that includes collection and recycling of organic waste.
- Recycle its organic waste on site, or self-haul its organic waste off site for recycling.
- Subscribe to an organic waste recycling service that may include mixed waste processing that specifically recycles organic waste.

Note: A business generating organic waste shall arrange for the recycling services in a manner that is consistent with state and local laws and requirements, including a local ordinance or local jurisdiction’s franchise agreement, applicable to the collection, handling, or recycling of solid and organic waste.

Why Organics? Mandatory recycling of organic waste is the next step toward achieving California’s aggressive recycling and greenhouse gas (GHG) emission goals. California disposes approximately 30 million tons of waste in landfills each year, of which some 30 percent could be used for compost or mulch. Organic waste such as green materials and food materials are recyclable through composting and mulching, and through anaerobic digestion, which can produce renewable energy. Greenhouse gas (GHG) emissions resulting from the decomposition of organic wastes in landfills have been identified as a significant source of emissions contributing to global climate change.

For more information on AB 1826, please visit CalRecycle’s Web Site at www.calrecycle.ca.gov.
MANDATORY COMMERCIAL RECYCLING

Why recycle?

State law “AB 341” mandates all businesses with 4 or more cubic yards of trash per week of service and multi-family complexes of five or more units have a recycling program in place effective July 1, 2012.

- Recycling may provide opportunities for your business to save money.
- Recycling helps conserve resources and extends the life of California’s landfills. It also helps create a healthy environment for our community and future generations.

Let’s Get Started!

It’s easy to recycle at your business. Make sure your business has arranged for recycling services. Use the list on the side to educate employees on what items can be recycled.

Option 1: Businesses may donate, sell and/or make other arrangements for recycling of the materials. This includes self-hauling materials to recycling facilities.

Separate Recyclables by commodity and place in containers.

- Visit LA County’s Smart Business Recycling website at [dpw.lacounty.gov/epd/brtap/recyclingsite/](http://dpw.lacounty.gov/epd/brtap/recyclingsite/) to search for more than 330 recycling facilities available to your business. Please contact the recycler first to verify pertinent information and to arrange for delivery.

Option 2: Contact the franchised hauler. Athens Services offers mixed waste collection services where waste and recyclable materials are mixed together and then separated and processed at the Athens Services Materials Recovery Facility. For more information, visit [www.AthensServices.com](http://www.AthensServices.com).

For a FREE WASTE STREAM ANALYSIS or to obtain more information on source separated recycling, please call (888) 336-6100 or visit [www.AthensServices.com](http://www.AthensServices.com).

WHERE TO GO FOR INFORMATION

To learn more, visit [www.ci.irwindale.ca.us](http://www.ci.irwindale.ca.us) or contact Elizabeth Rodriguez in the Irwindale Public Works Department at 626-430-2211.

Visit [www.businessrecycling.com](http://www.businessrecycling.com) for more information from LA County Smart Business Recycling or call 1-888-CLEANLA.

For additional general information about recycling and waste reduction, visit the California Department of Resources Recycling and Recovery (CalRecycle) at [www.calrecycle.ca.gov](http://www.calrecycle.ca.gov).