Public Health

NORTHERN NEVADA PUBLIC HEALTH ENVIRONMENTAL HEALTH SERVICES DIVISION

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APPLICATION FOR EXEMPTION FROM GARBAGE SERVICE

Washoe County Code (§90.037), City of Reno Municipal Code (§5.90.065), and Sparks Municipal Receipt No. Code (§7.12.030) require that every owner/occupant of real property subscribe to the collection, hauling and disposal of garbage unless the person qualifesforanexemption.

Office	Use	Only	

Fee Paid
Date Paid
Cash/CC/Check
ReceiptNo

l,	, a (Print Applicant's Name)	m applying for an exemption from garbag	e service because (check one):			
A. T	There is <u>no</u> garbage produced or stored upon the prem	no garbage produced or stored upon the premises. Number of people in household:				
		ndition exists that presents a signifi cant hardship for the resident of the property or for the franchised collector curbside collection of garbage, namely (explain below):				
	I wish to haul and dispose of my own residential garba	• •	ns governing the storage.			
	recycling, hauling, and disposal of my garbage, including the requirements that I maintain weekly receipts as proof of my					
•	garbage was disposed of at an approved disposal site and that receipts be turned into the disposal company at the end of each quarter.					
L	Listed below are applicable District Board of Health Regulations Governing Solid Waste Management. I specifi cally understand that I must:					
Properly store my garbage and not cause a health hazard; attract or propagate vectors, vermin, or pests; create unpleasant odors; or create a nuisance (040 .005);						
	 Not store garbage on my property for more t Haul my garbage to an approved disposal si Prevent littering and nuisances at the loading Tightly cover the waste and the vehicle durir Haul only my own garbage and not provide g 	te not less than once every seven (7) day g point, during transport, and at the dispos g transport to the disposal site (050.045);	sal site (050.015); and			
D. I	I have Business Account No		with the disposal company.			
	The property meets vacancy adjustment requirements Code or Washoe County Code.	per City of Reno Municipal Code, City of S	Sparks Municipal			
Street Addr	lress:	Mailing Address:				
City/State/2	Zip:	City/State/Zip:				
Assessor's	s Parcel No:	_Telephone:				
Date:		Signature:				
I agree and understand that if I fail to comply with any of the above-listed conditions, this exemption may be revoked and I will be required to subscribe to regular garbage service. I further agree and understand that this exemption is not transferable from person to person or from parcel to parcel.						
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	and Approved By:					