



City of San Ramon

Recycling Transporter Permit Application

Section I - Company Information

Date: _____

New Applicant []

Renewal Applicant []

Company Name: _____

dba (if applicable) _____

Contact: _____ Title: _____

Mailing Address: _____

Business Address: _____
(if different)

Website _____
(for publication purposes)

Telephone No.: _____ Fax: _____
(for publication purposes)

Emergency No.: _____
(Where the City can reach a representative of the company after hours and holidays)

Type of Business: Corporation [] State of incorporation _____

Partnership [] Type _____

Individual [] Name of Owner _____

Other [] Explanation _____

San Ramon City Business License No.: _____

Name of contact for permit inquiries & reporting: _____

Direct Phone Number: _____

Direct Email: _____

Section III - Material Collection, Processing and Disposal

Materials being transported (check all that apply):

Aluminum	_____	Cardboard	_____	Construction/Demolition	
Glass	_____	HDPE	_____	Debris	_____
Paper-Mixed	_____	Paper-Newspaper	_____	- Lumber	_____
PET	_____	Tin	_____	- Brick	_____
Wood	_____	Tires	_____	- Drywall	_____
Scrap Metal	_____	Mixed Recycles	_____	- Metals	_____
Ferrous		(list accepted materials)		- Masonry	_____
Scrap Metal	_____			- Concrete	_____
Non-Ferrous				- Plastic	_____
E-Waste	_____			- Pipe	_____
				- Dirt	_____
				- Rocks	_____

Final destination(s) for the recyclable materials (broken down by material type):

Destination (Name, Address)	Materials

Intended location(s) of all residual disposal: _____

Section IV - References

List businesses and municipalities where the applicant has provided recycling collection services. List at least one municipality and two business references:

	<u>Business/Municipality</u>	<u>Contact</u>	<u>Telephone No.</u>
(1)	_____		
(2)	_____		
(3)	_____		

Section V - Application Completion

I, the undersigned, agree to the following:

- (1) To notify the City of San Ramon in writing if any of the information in the application changes, in any material respect, and to file a new application if required by the City of San Ramon.
- (2) To furnish a copy of the applicant's insurance certificate showing the proper level of maintenance as specified by the City of San Ramon and naming the City of San Ramon as "Additionally Insured;"
- (3) To furnish a quarterly report as required by the City of San Ramon and to provide verification receipts of all recyclable materials and their final destination.
- (4) To pay the City of San Ramon 12% of the gross revenues for revenues generated in the City of San Ramon: and
- (5) To operate in accordance with all applicable laws.

I declare, under penalty of perjury, that all statements and information contained herein are, to the best of my knowledge and belief, true and that all necessary permits required by law have been secured for the recycling transporter business that is the subject of this application.

Name of Applicant

Title

Signature of Applicant

Date

**Mail completed application and appropriate non-refundable fee
(New applicant \$65/Renewal applicant \$40) to:**

**Public Services
City of San Ramon
5000 Crow Canyon Road
San Ramon, California 94582**

Enclosure: Quarterly Recycling Report Form