DEPARTMENT OF RESOURCE MANAGEMENT

TERRY SCHMIDTBAUERDirector (Interim)
(707) 784-6765

JAGJINDER SAHOTA Environmental Health Manager (707) 784-6765



675 Texas Street, Suite 5500 Fairfield, CA 94533-6342 (707) 784-6765 Fax (707) 784-4805

www.solanocounty.com

Environmental Health Division

SolanoCountyRecovers.org

Official website for the LNU Lightning Complex fire response and recovery.

Solano County Disaster Debris Removal Program Exemption Application

WHO IS ELEGIBLE FOR AN EXEMPTION?

Property owners may apply for a Disaster Debris Removal Program Exemption if there is only burn debris on a parcel from non-residential structures less than 120 square feet, fences, and non-structural wood material and the structures did not contain paint, pesticides, herbicides, propane or other similar hazardous substances. No work plan is required if an exemption is issued. A verification inspection by Solano County Environmental Health will occur after receipt of the application and prior to exemption approval. Property owners receiving approval of their exemption status are not eligible for any potential government sponsored Phase I or Phase II Cleanup of the property.

| Property Owner Name: | Phone(s): | |
|--|--|-----|
| Property Address: | City: | |
| Assessor's Parcel Number (APN): | Email: | |
| Mailing Address: | | |
| Mailing City: | State:ZIP: | |
| Description of Debris Being Removed (h | ow many structures, type of waste, etc.): | |
| A. Property Owner Acceptance | | |
| Requirements" document. I certify that the | the "Conditional Exemption from Solano County Debris Removerable burn debris on my parcel is from non-residential structures le ructural wood material, and said structures did not contain painilar hazardous substances. | ess |
| | imited to between dawn to dusk and, in accordance with the Cour e shall be no temporary occupation or camping on this property County of Solano. | าty |
| Property Owner Signature (Required): | Date: | |
| Contractor Signature: | Date: | |
| Solano County Acknowledgement: | Date: | |
| Office use only: Record FA2020: | Entered Date Entered By | |