



Stanislaus County
Department Of Environmental Resources
 3800 Cornucopia Way, Suite C, Modesto, California 95358

**PERMIT APPLICATION FOR MEDICAL WASTE GENERATORS
 TREATING WASTE ON-SITE**

State License Type: _____ State License Number: _____
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GENERATOR NAME: _____

Generator **Facility** Address: _____ (City/Zip)

Phone Number: (_____) _____

Generator **Mailing** Address: _____ (City/Zip)

Type of Business: _____

Authorized Representative: _____

Title: _____

Emergency Phone Number: (_____) _____

APPLICATION FOR:

- Small Quantity Generator with Onsite Treatment (Generates less than 200 lbs/month).
- Large Quantity Generator with Onsite Treatment (Generates 200 lbs or more/month).

<u>OFFICIAL USE ONLY</u>		
Business I.D. No. _____	Service Code _____	Date Received _____
Date Approved: _____	Approved by: _____	Date Expired _____