



BUSINESS LICENSE APPLICATION

Community Development Department
 220 E Mountain View St., Suite A, Barstow, CA 92311
 Phone: (760) 255-5161

BUSINESS INFORMATION

BUSINESS NAME		TYPE OF OWNERSHIP <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Co. (LLC) <input type="checkbox"/> Trust <input type="checkbox"/> Limited Liability Partnership (LLP) <input type="checkbox"/> Sole Proprietorship (ID #* _____) *Social Security, California Driver's License, California ID, Individual Taxpayer ID, or Municipal ID Number <input type="checkbox"/> Non-Profit Organization (Provide Copy of IRS Exemption)	
ADDITIONAL BUSINESS NAME (DOING BUSINESS AS (DBA))			
BUSINESS ADDRESS		SUITE	BUSINESS PHONE NUMBER
CITY	STATE	ZIP CODE	BUSINESS FAX NUMBER
MAILING ADDRESS (SERVICE OF PROCESS) <input type="checkbox"/> Same As Business Address		SUITE	E-MAIL ADDRESS
CITY	STATE	ZIP	BUSINESS' WEB ADDRESS
FEDERAL EMPLOYER ID (FEIN) (EXAMPLE: XX-XXXXXX) <input type="checkbox"/> N/A	STATE EMPLOYER ID (EDD #) (EXAMPLE: XXX-XXXX-X) <input type="checkbox"/> N/A	STATE SALES TAX NO. (A.K.A. RESALE NO.) <input type="checkbox"/> N/A	

DESCRIPTION OF BUSINESS (Only One(1) Business Activity Per Application (i.e. Physician, General Contractor, Cosmetologist, Retail Sale of Hair Products, Grocery Store, etc.))

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OWNER INFORMATION

LIST RESIDENCE ADDRESS, PHONE, TITLE, AND DRIVER'S LICENSE NUMBER OF OWNER, PRESIDENT, PARTNER, CEO, CFO, ETC. IF NECESSARY, PLEASE ATTACH A LIST OF ADDITIONAL OWNERS.				
LAST NAME		FIRST NAME		TITLE
MAILING ADDRESS (SERVICE OF PROCESS)		CITY	STATE	ZIP
PHONE NUMBER	DRIVER'S LICENSE / ID NUMBER		STATE OF DRIVER'S LICENSE / ID ISSUANCE	

ADDITIONAL OWNER INFORMATION

LAST NAME		FIRST NAME		TITLE
MAILING ADDRESS (SERVICE OF PROCESS)		CITY	STATE	ZIP
PHONE NUMBER	DRIVER'S LICENSE / ID NUMBER		STATE OF DRIVER'S LICENSE / ID ISSUANCE	

Continued On Reverse Side

ZONING: _____

PLANNING DEPARTMENT APPROVAL: _____



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EMERGENCY CONTACT INFORMATION

PLEASE INDICATE WHOM THE CITY SHOULD CONTACT (OTHER THAN THE OWNER) IN THE EVENT OF AN EMERGENCY (I.E. FIRE, SECURING THE BUILDING, ETC.) - IF NECESSARY, PLEASE ATTACH A LIST OF ADDITIONAL CONTACTS.

NAME	PHONE NUMBER	TITLE	
ADDRESS	CITY	STATE	ZIP

STATE LICENSED BUSINESSES / OCCUPATIONS

IS YOUR OCCUPATION LICENSED BY THE STATE OF CALIFORNIA OR OTHER STATE AGENCY? YES** NO (IF NO, PROCEED TO HOME OCCUPATION SECTION) **IF YES, PLEASE PROVIDE A COPY OF YOUR MOST RECENT **UNEXPIRED LICENSE THAT HAS BEEN ISSUED BY THE STAT AGENCY.**

STATE LICENSE TYPE	STATE LICENSE NUMBER	CLASSIFICATION NO(S).	EXPIRATION DATE
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STORMWATER DISCHARGE COMPLIANCE (SENATE BILL 205)

Effective January 1, 2020, The State of California requires that prior to issuance and/or renewal of a business license, applicants provide specified information, under penalty of perjury, including, among other things, the Standard Industrial Classification (SIC) Code for cities/counties to determine whether business activity(ies) fall into one of the regulated categories of the Industrial Stormwater General Permit required by the State Water Resources Control Board and whether a Water Discharge Identification (WDID) Number is required. **The City of Barstow CANNOT issue a business license without the SIC Code.** To find out your SIC Code, visit <http://naics.com>.

SIC CODE:	NAICS CODE:	WDID # <input type="checkbox"/> N/A
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HOME OCCUPANCIES

IS THIS BUSINESS CONDUCTED FROM YOUR HOME?

YES (IF YES AND YOU LIVE WITHIN THE INCORPORATED BARSTOW CITY LIMITS, A HOME OCCUPATION PERMIT IS REQUIRED)
 NO (IF NO, PROCEED TO THE OCCUPANCY CLASSIFICATIONS AND BUSINESS ACTIVITIES SECTION)

OCCUPANCY CLASSIFICATIONS AND BUSINESS ACTIVITIES

DOES YOUR BUSINESS CONDUCT ANY OF THE FOLLOWING TYPES OF ACTIVITIES?

<input type="checkbox"/> YES (IF YES, A BARSTOW FIRE PROTECTION PERMIT IS REQUIRED)	<input type="checkbox"/> NO (IF NO, PROCEED TO SALES OF ALCOHOL AND/OR CIGARETTES / TOBACCO PRODUCTS.)
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Place of Assembly (Occupant Loads > 50 Persons)(i.e. restaurant, churches, banquet/conference rooms)

<input type="checkbox"/> Amusement Bldg./Carnival/Fair	<input type="checkbox"/> Covered Mall	<input type="checkbox"/> Cryogenic Fluids	<input type="checkbox"/> Dry Cleaning
<input type="checkbox"/> Flammable/Combustible Liquids	<input type="checkbox"/> Explosives	<input type="checkbox"/> Fumigation/Thermal Insecticidal Fogging	<input type="checkbox"/> Combustible Storage
<input type="checkbox"/> Lumber Yard/Woodworking Plant	<input type="checkbox"/> Industrial Oven	<input type="checkbox"/> Storage/Use of LP Gas	<input type="checkbox"/> Vehicle Repair/Fuel Dispensing
<input type="checkbox"/> Warehouse/Wholesaling	<input type="checkbox"/> Flammable Liquids (Storage/Handling)	<input type="checkbox"/> Waste Handling (Includes Wrecking & Junkyard)	<input type="checkbox"/> Storage of Scrap Tires
<input type="checkbox"/> Spraying/Dipping	<input type="checkbox"/> Dust Producing Operations	<input type="checkbox"/> Use of Compressed Gas (Including Oxygen)	<input type="checkbox"/> Plastic (Storage/Handling)
<input type="checkbox"/> High Pile Storage (>' or >500 sqft in size)	<input type="checkbox"/> Use of Hood & Duct	<input type="checkbox"/> Outside Storage/Impound Yard (Including Vehicles)	<input type="checkbox"/> Refrigeration Equipment
<input type="checkbox"/> Hotel (# of Rooms _____)	<input type="checkbox"/> Heliport	<input type="checkbox"/> Childcare <6 Children/Residential Care Facility	<input type="checkbox"/> Hospital
<input type="checkbox"/> Christmas Tree Lot	<input type="checkbox"/> Private School	<input type="checkbox"/> Create, Store, Generate, or Use Hazardous Substances or Products that are Corrosive, Reactive, Ignitable, Toxic, and/or Ozone Depleters	<input type="checkbox"/> Rifle Range

Other Business Activity Regulated by the California Fire Code (Please Describe Below)

IF YOU ANSWERED YES AND CHECKED ANY OF THE ABOVE BOX(ES), PLEASE EXPLAIN:

SALES OF ALCOHOL AND/OR CIGARETTES/TOBACCO PRODUCTS

DOES YOUR BUSINESS SELL ALCOHOL AND/OR TOBACCO PRODUCTS?

YES (IF YES, PLEASE PROVIDE ABC OR CALIFORNIA CIGARETTE AND/OR TOBACCO PRODUCT RETAILER'S LICENSE NO(S).)

Alcohol Beverage Control (ABC) License #:	California Cigarette and Tobacco Retailer's License #:
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NO (IF NO, PROCEED TO THE SALES OF CANNABIS PRODUCT SECTION)

SALES OF CANNABIS PRODUCTS

DOES YOUR BUSINESS SELL CANNABIS PRODUCTS?

YES (IF YES, PLEASE PROVIDE THE CALIFORNIA CANNABIS LICENSE NUMBER AND THE CITY OF BARSTOW CANNABIS LICENSE NUMBER)

Dept. of Cannabis Control License #:	City of Barstow Cannabis License #:
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NO (IF NO, PROCEED TO THE ALARM PERMIT SECTION)



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CITY OF BARSTOW ALARM PERMIT

IF YOUR BUSINESS IS LOCATED IN BARSTOW, DOES IT HAVE A SECURITY, BURGLAR, AND/OR FIRE ALARM?

- YES (IF YES, A CITY OF BARSTOW ALARM PERMIT IS REQUIRED)
- NO (IF NO, PROCEED TO THE CITY OF BARSTOW SIGN PERMIT SECTION)
- BUSINESS IS NOT LOCATED IN BARSTOW. (PROCEED TO WORKER'S COMPENSATION ACKNOWLEDGEMENT)

CITY OF BARSTOW SIGN PERMIT

IF YOUR BUSINESS IS LOCATED IN BARSTOW, WILL YOU BE INSTALLING BUSINESS SIGNAGE??

- YES (IF YES, A CITY OF BARSTOW SIGN PERMIT IS REQUIRED)
***ALL** SIGNANGE **MUST BE** REVIEWED, PERMITTED, AND INSPECTION **PRIOR TO** ISSUANCE OF BUSINESS LICENSE.
- NO (IF NO, PROCEED TO WORKER'S COMPENSATION ACKNOWLEDGMENT)

WORKERS' COMPENSATION ACKNOWLEDGEMENT

I UNDERSTAND THAT UNDER CALIFORNIA LAW, I AM REQUIRED TO CARRY WORKERS' COMPENSATION INSURANCE FOR MY EMPLOYEES AT ALL TIMES.

- I HAVE AND WILL MAINTAIN THE NECESSARY WORKERS' COMPENSATION INSURANCE AS REQUIRED BY THE STATE OF CALIFORNIA. **PLEASE LIST # OF EMPLOYEES:** _____
- I HAVE NO EMPLOYEES AT THIS TIME, BUT UNDERSTAND THAT IF I EMPLOY ANY PERSON(S) I MUST IMMEDIATELY OBTAIN THE NECESSARY WORKERS' COMPENSATION COVERAGE REQUIRED BY CALIFORNIA LAW.

DISABILITY ACCESS

UNDER FEDERAL AND STATE LAW, COMPLIANCE WITH DISABILITY ACCESS LAWS IS A SERIOUS AND SIGNIFICANT RESPONSIBILITY THAT APPLIES TO ALL CALIFORNIA BUILDING OWNERS AND TENANTS WITH BUILDINGS OPEN TO THE PUBLIC. YOU MAY OBTAIN INFORMATION ABOUT YOUR LEGAL OBLIGATIONS AND HOW TO COMPLY WITH DISABILITY ACCESS LAWS AT THE FOLLOWING AGENCIES:

- DIVISION OF THE STATE ARCHITECT: www.dgs.ca.gov/dsa/Home.aspx
- DEPARTMENT OF REHABILITATION: www.rehab.cahwnet.gov/
- CALIFORNIA COMMISSION ON DISABILITY ACCESS: www.cdda.ca.gov/

APPLICATION SUBMITTAL REQUIREMENTS

THE FOLLOWING DOCUMENT(S) SHALL BE SUBMITTED TO THE CITY OF BARSTOW AS PART OF THE BUSINESS LICENSE APPLICATION SUBMITTAL:

- COMPLETED AND SIGNED CITY OF BARSTOW BUSINESS LICENSE APPLICATION
- PAYMENT OF FEES

THE FOLLOWING DOCUMENT(S) SHALL ACCOMPANY A COMPLETED AND SIGNED BUSINESS LICENSE APPLICATION AND FEE WHEN APPLICABLE. **INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

- COPY OF VALID GOVERNMENT-ISSUED IDENTIFICATION OF THE BUSINESS OWNER, OFFICER, OR AUTHORIZED AGENT MAKING APPLICATION FOR A CITY OF BARSTOW BUSINESS LICENSE.
- COPY OF STATE ISSUED LICENSE, IF APPLICABLE (I.E. COSMETOLOGIST, CONTRACTOR, REALTOR, ETC.)
- COPY OF RECORDED FICTITIOUS BUSINESS NAME STATEMENT (IF REQUIRED BY BUSINESS AND PROFESSIONS CODE 17910).
- COPY OF THE ARTICLES OF INCORPORATION OR ARTICLES OF ORGANIZATION AS APPLICABLE.
- IRS EXEMPTION LETTER / 501(C)(3) - REQUIRED FOR NON-PROFIT ORGANIZATIONS.
- IF THIS APPLICATION IS COMPLETED BY AN AGENT, THE CITY OF BARSTOW'S AUTHORIZATION OF AGENT TO ACT ON BEHALF OF THE BUSINESS OWNER" FORM, CONTAINING THE SIGNATURE OF THE BUSINESS OWNER OR BUSINESS OFFICER. **PLEASE NOTE:** THE AUTHORIZATION FORM MUST BE NOTARIZED OR ACCOMPANIED BY A COPY OF A GOVERNMENT-ISSUED IDENTIFICATION OF THE PERSON WHO IS GRANTING THE AUTHORIZATION (BUSINESS OWNER OR OFFICER).

THE CITY OF BARSTOW TAKES YOUR PRIVACY SERIOUSLY. YOUR PERSONAL INFORMATION WILL NOT BE SHARED WITH OTHER AGENCIES, BUSINESSES, OR INDIVIDUALS UNLESS REQUIRED BY LAW. UNDER THE CALIFORNIA PUBLIC RECORDS ACT, THIS APPLICATION WILL BECOME A PUBLIC RECORD ONCE SUBMITTED TO THE CITY. THE CITY WILL REDACT ANY CONFIDENTIAL PERSONAL INFORMATION BEFORE DISCLOSING THIS DOCUMENT.



BUSINESS LICENSE APPLICATION

ACKNOWLEDGEMENT

I ACKNOWLEDGE AND UNDERSTAND THAT IT IS THE RESPONSIBILITY OF THE APPLICANT/LICENSEE TO ENSURE THEIR BUSINESS COMPLIES WITH ALL APPLICABLE CITY OF BASTOW MUNICIPAL CODES, CITY ZONING ORDINANCES, AND STATE AND FEDERAL LAWS. NON-COMPLIANCE MAY RESULT IN THE REVOCATION OF YOUR CITY OF BARSTOW BUSINESS LICENSE.

I FURTHER UNDERSTAND THAT THE FOLLOWING APPLIES TO BUSINESSES WHO ARE APPLYING FOR A CITY OF BARSTOW BUSINESS LICENSE (**PLEASE INITIAL BESIDE EACH ITEM TO ACKNOWLEDGE YOU HAVE READ AND UNDERSTAND**):

1. _____ All signage must be reviewed, approved, and permitted by the City of Barstow's Building and Planning Departments. Please contact (760) 255-5161 regarding sign permits **PRIOR TO** the installation of **ANY** signage.
All modifications, other than aesthetic changes (i.e. painting, flooring), to a structure located within the City of Barstow are subject to approval and issuance of a City of Barstow Building Permit and/or Barstow Fire Protection District Fire Permit. These include, but are not
2. _____ limited to, repairs and improvements to plumbing, electrical, and mechanical systems. Please contact the City of Barstow's Building Department at (760) 255-5161 **PRIOR TO** any alteration or modification of any building or structure to determine if a building and/or fire permit is required.
3. _____ Trash and recycling services ARE MANDATORY in the City of Barstow (BMC Article IV, 6.20.340). Please contact Utility Billing at (760) 255-5162 or utilitybilling@barstowca.org to establish service.
4. _____ There shall be no sales, distribution or cultivation of marijuana unless an issued City of Barstow Cannabis License is approved under BMC 19.27. Any such application shall be denied (Ref.: BMC 19.44.050).
5. _____ There shall be no sales or distribution of psychoactive bath salts, psychoactive herbal incense, or other synthetic drugs (Ref.: BMC 9.27)
6. _____ A business license will not be issued until the application has been reviewed by the Planning Department to determine if any land use approvals (i.e. discretionary permits) are necessary for compliance with zoning regulations. To confirm the zoning of your business, please contact the City of Barstow's Planning Department at (760) 255-5161.
7. _____ Based upon a review of the application, a permit issued by the Barstow Fire Protection District may be required.
8. _____ The business location will be required to maintain parking lots and existing landscaping if they are determined to be in need of repair. The City of Barstow's Planning Department may require landscaping for sites that do not have current landscaping.
9. _____ Depending on the type of tenant improvements which are proposed as part of your business, the site may be required to conform to the business and/or property owner, from potential litigation. Consultation with a Certified Access Specialist (CASp) is strongly advised.
10. _____ Contractors shall provide verification of Worker's Compensation Insurance coverage if required by California law.
11. _____ To determine if an interceptor is required or if an existing inceptor needs to be serviced in relation to the type of business operation you will be conducting (i.e. restaurant, food preparation, car/truck wash, etc.), please contact the Industrial Pretreatment Department at (760) 252-2538.
12. _____ Businesses that generate hazardous materials MUST CONTACT the City of Barstow's Environmental Services Department at (760) 255-5126. If you are unsure whether your business generates hazardous materials, please contact the Environmental Services Department for clarification.

PRIOR TO THE ISSUANCE OF A BUSINESS LICENSE, THE CITY WILL CONDUCT AN INSPECTION OF THE BUSINESS LOCATION, IF LOCATED WITHIN THE INCORPORATED CITY LIMITS OF BARSTOW. THE CITY OF BARSTOW RECOMMENDS BUSINESS OWNERS CONTACT THE CITY OF BARSTOW'S PLANNING DEPARTMENT AT (760) 255-5161 PRIOR TO RENTING, LEASING, OR PURCHASING A PROPERTY TO VERIFY THEIR PROPOSED USE COMPLIES WITH THE CITY OF BARSTOW'S ZONING ORDINANCE. THE PREMISES WILL BE INSPECTED PRIOR TO THE BUSINESS OPENING FOR BUSINESS AND MUST BE SET UP AND/OR STOCKED.

IF THE CITY TRIES TO BUT CAN NOT CONTACT THE APPLICANT WITHIN 60 DAYS OF THE APPLICATION DATE, THE APPLICATION WILL BE CONSIDERED WITHDRAWN, AND ALL FEES PAID WILL BE NONREFUNDABLE.

SUBMITTAL OF A BUSINESS LICENSE APPLICATION AND PAYMENT OF FEE(S) DOES NOT CONSTITUTE AN APPROVAL OF A LICENSE TO OPERATE A BUSINESS. **NO BUSINESS SHALL OPERATE UNTIL THE BUSINESS LICENSE HAS BEEN APPROVED AND ISSUED BY THE CITY OF BARSTOW. BY SIGNING BELOW, I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

SIGNATURE	PRINTED NAME	DATE
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BUSINESS NAME

COMPUTATION OF FEES

- ANNUAL FEE (As per Title 5 of the Barstow Municipal Code). Please contact (760) 255-5161 for fee. \$ _____
- DISABILITY ACCESS
 - On September 19, 2021, Governor Brown signed into law Senate Bill 1186 which adds a state fee of \$1.00 on any applicant for a local business license or renewal effective January 1, 2013, This fee will be required from all new business licenses or renewals. The purpose of the fee is to provide a funding source for increased disability access and compliance with construction-related accessibility requirements and to develop educational resources for businesses in order to facilitate compliance with federal and state disability laws. \$ _____ \$4.00 _____
- BUSINESS LICENSE PROCESSING (\$40) AND TECHNOLOGY (\$15) FEES \$ _____ \$55.00 _____
- TOTAL FEE (ADD LINES A + B + C = TOTAL FEE) \$ _____

ALARM PERMIT IS REQUIRED IF YOUR PROPERTY IS REGISTERED WITH AN ALARM COMPANY



Initial Application Fee: \$25.00

Annual Renewal Fee: \$10.00

COMMERCIAL ALARM PERMIT APPLICATION

BUSINESS INFORMATION							
Business Name:							
Business Owner's Name:							
Business Address:				Bldg / Suite #			
City / State / Zip:							
Mailing Address:				Bldg / Suite #			
City / State / Zip:							
Business Site #		Owner's #		Email:			
ALARM COMPANY INFORMATION							
Alarm Company Name:							
Alarm Company Address:				Bldg / Suite #			
City / State / Zip:							
Phone #		Fax #		Email:			
TYPE OF ALARM SYSTEM							
Robbery:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Burglary:	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
ALARM SOUNDS							
Alarm Company	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Business:	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
BUSINESS & EMPLOYEE HOURS							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Business Opens:							
Business Closes:							
Employees Arrive:							
Employees Depart:							
EMERGENCY CONTACT INFORMATION							
(Please provide the name of 3 persons who are capable of promptly responding during an alarm event)							
1.	Name:				Phone #		
2.	Name:				Phone #		
3.	Name:				Phone #		
APPLICANT INFORMATION							
Applicant's Signature			Applicant's Printed Name			Applicant's Phone #	
OFFICE USE ONLY							
Date Received By Staff:				Date Forwarded to BPD:			

220 E Mountain View St • Ste A • Barstow, CA 92311 • Phone (760) 256-3531

Revised 9/13/2023

BUSINESS WASTE MANAGEMENT COMPLIANCE FORM

SOLID WASTE & RECYCLING DEPARTMENT

Phone: 760.255.5126 / Email: tbritt@barstowca.org



BUSINESS INFORMATION

BUSINESS NAME

BUSINESS ADDRESS

POINT OF CONTACT NAME ---- Please identify the person who would be responsible to address waste/recycling related questions/concerns.

MAILING ADDRESS (IF DIFFERENT)

PHONE NUMBER

EMAIL ADDRESS

TYPES OF WASTE GENERATED

PLEASE CHECK ALL THAT APPLY:

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> General Trash | <input type="checkbox"/> Food Waste | <input type="checkbox"/> Tires |
| <input type="checkbox"/> Recyclables (cardboard, glass, metal, plastic, etc.) | <input type="checkbox"/> Green Waste (landscape/pruning waste, grass clippings, leaves, etc.) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Inedible Kitchen Grease / Used Cooking Oil | <input type="checkbox"/> Hazardous Waste | _____ |

MANDATORY SERVICE (SOLID WASTE – RECYCLABLES – ORGANICS)

Pursuant to the Barstow Municipal Code, trash, recyclables and organic waste collection service is mandatory for all properties in the City in support of Assembly Bill 341 (Mandatory Commercial Recycling), Assembly Bill 1826 (Mandatory Commercial Organics Recycling), and Senate Bill 1383 (Reduction of Short-Lived Climate Pollutants in CA). These requirements may also apply to multi-family dwellings of 5+ units. These laws are intended to mitigate adverse environmental impacts such as methane emissions and climate change.

Prior to issuance of a City business license, verification of adequate service is required. Service level changes require the authorization of the property owner. Charges for all solid waste services are the responsibility of the property owner.

To establish or update trash & sewer utility account, contact 760.255.5162 or email utilitybilling@barstowca.org

CUSTOMER ACCESS TO RECYCLING LAW (AB 827)

Assembly Bill 1276 requires businesses that generate two or more cubic yards of commercial solid waste per week and sell products meant for immediate consumption* to provide recycling and organics containers alongside trash bins at front-of-house of a business to be visible, where they shall be easily accessible and clearly marked. AB 827 is intended to educate and involve customers in achieving the state's recycling goals by requiring businesses to make recycling and/or organic recycling bins available to customers.

**Full service restaurants do not have to provide properly labeled containers for patrons, but must provide properly labeled containers next to trash containers for employees to separate post-consumer recyclables and organics for customers.*

For more information, visit: <https://www.calrecycle.ca.gov/Recycle/>

EDIBLE FOOD RECOVERY REQUIREMENTS FOR FOOD GENERATORS

Pursuant to SB 1383, commercial edible food generators are required to recover the maximum amount of their edible food that would otherwise go to landfills. **Edible food generators include, but are not limited to: supermarkets, grocery stores, food service providers & distributors, restaurants, and hotels.** These entities must enter into written agreements with food recovery organizations (ie: churches, food banks, non-profits who distribute food to those in need, etc.) to re-distribute food for human consumption in an effort to meet the state-mandated targets for food recovery. Generators must also maintain records of food recovery activities.

The City of Barstow and its partners have a program to assist these entities with compliance. For more information, please contact High Desert Food Collaborative at 444.267.4444 or visit <https://www.highdesertfoodcollaborative.com/>

INEDIBLE KITCHEN GREASE (IKG)

The Barstow Municipal Code requires that businesses who generate inedible kitchen grease / used cooking oil must comply with the CA Department of Food & Agriculture regulatory requirements for the proper collection, transportation and rendering of the material. **Prior to issuance of a City business license, IKG service provider information must be provided and verified by City staff.**

IKG SERVICE PROVIDER COMPANY NAME	<input type="checkbox"/> N/A	PHONE NUMBER
ADDRESS	CITY OF BARSTOW BUSINESS LICENSE NUMBER	

SINGLE-USE FOODWARE ACCESSORIES AND STANDARD CONDIMENTS (AB 1276)

Effective June 1, 2022, Assembly Bill 1276 prohibits a food facility, for on-premises dining or when using a third-party food delivery platform, from providing any single-use food ware accessory or standard condiments packaged for single-use to a consumer unless requested by the consumer. The City of Barstow may enforce this law on a local level; violators are subject to fines as described under Public Resource Code Section 42272 (b).

LANDSCAPING / GARDENING BUSINESSES

Landscapers generating organic waste such as grass clippings, pruning's, or similar landscaping material incidental to providing its services are required to source-separate the material to be diverted from the landfill and haul it to a permitted processing facility for recycling/composting. Additionally, **landscapers who self-haul shall maintain diversion records (recycling/weight receipts) and provide the diversion tonnage data to the city annually (by January 10 each year) or upon request in support of compliance with state law.**

NAME OF PERMITTED PROCESSING FACILITY ACCEPTING LANDSCAPE MATERIAL N/A

FACILITY ADDRESS

PHONE NUMBER

HAZARDOUS WASTE

Hazardous waste is a waste with properties that make it potentially dangerous or harmful to human health or the environment. In California, entities generating such waste must determine if the material meets the criteria of hazardous waste as defined in 22 CCR section 66261.3. These regulations are implemented by the CA Department of Toxic Substances Control (DTSC). A hazardous waste facility permit is required for any person who stores, treats or disposes of hazardous waste.

San Bernardino County Fire Protection District offers a Very Small Quantity Generator (VSQG) Program which is a hazardous waste pick-up disposal service for eligible businesses in San Bernardino County. The VSQG program is permitted and registered with the DTSC to accept limited types and quantities of hazardous waste.

For more information on the VSQG program, visit: <https://sbcfire.org/smallbusinesshazardouswaste/>

For DTSC Regulatory Assistance, visit: <https://dtsc.ca.gov/regulatory-assistance-office/>

TIRES

CalRecycle regulates and manages waste tires within the state using the Waste Tire Manifest System Program (WTMP), which applies to all persons, businesses, non-profits, and government agencies that generate, transport, or receive waste or used tires. The WTMP is a tracking system used to monitor the ultimate disposal of used/waste tires. Among several responsibilities, waste tire generators are required to obtain a Tire Program ID (TPID) Number from the State if tires will be transported from the business location to the landfill, recycler, or other location. Storage/accumulation of tires onsite may prompt a permit by the State. **Prior to issuance of a City business license, verification of TPID Number is required for applicable businesses.**

PROVIDE TPID # _____ N/A – NO MORE THAN 9 TIRES WILL BE TRANSPORTED AT ONE TIME

ACKNOWLEDGEMENT

I acknowledge and understand that it is the responsibility of the applicant/licensee to ensure the business complies with all applicable City of Barstow Municipal Codes, as well as State and Federal laws. Periodic waste audits may be conducted to ensure compliance with applicable regulations. Non-compliance may result in the revocation of the City of Barstow business license or the issuance of an administrative fine.

In addition to the regulations explained on this form, examples of other applicable solid waste codes include, but are not limited to:

- Waste containers shall be kept secure with lids closed and/or locked at all times. Trash must be properly bagged.
- Overflowing containers are considered public nuisance; repeat offenses may result in automatic increase to service level and/or construct or improve waste enclosure(s) for the protection of public health and safety. Additional charges apply.
- Waste containers must be kept clear of parked vehicles and/or other obstructions.
- Recycle and/or organics containers which are found to be contaminated with trash are subject to contamination fees.

I hereby declare under penalty of perjury that I have read and understand the contents of this form and that the information provided is true and correct to the best of my knowledge.

BUSINESS OWNER SIGNATURE

PRINTED NAME

DATE

PROPERTY OWNER SIGNATURE (IF DIFFERENT)

PRINTED NAME

DATE

FORM CHECKLIST – FOR OFFICE USE

- ALL FIELDS COMPLETE –INCLUDING BUSINESS OWNER AND PROPERTY OWNER SIGNATURE
- VERIFICATION OF PROPER SOLID WASTE/RECYCLE/ORGANICS SERVICE
- IKG STATE AND CITY LICENSE VERIFICATION
- VERIFICATION OF LANDSCAPER SELF-HAUL INFORMATION
- VERIFICATION OF TPID #
- VERIFICATION OF FINAL CONDITIONS OF PERMIT (FOR NEW DEVELOPMENT/ TENANT IMPROVEMENT PROJECTS ONLY)

Solid Waste Dept. Initial: _____



MANDATORY AMERICANS WITH DISABILITIES ACT (ADA) DISCLOSURE

ATTENTION: You may be subject to liability for failure to meet your legal obligation to comply with state and federal disability access laws. The recent issuance or renewal of a business license, or equivalent instrument or permit, does not mean that your business has been determined to be in compliance with state and federal disability access laws.

ENSURING EQUAL ACCESS TO YOUR BUSINESS

The State of California wants to ensure that all people have equal access to public and private services. Many people with disabilities do not have equal access to services because many business owners do not take the time to ensure that their businesses are accessible. Some common problems disabled people encounter are:

- (1) The building has architectural barriers that make it difficult or impossible for someone using a wheelchair, walker, or other mobility device to get inside or move around.
- (2) The business uses a website that does not work with screen reading devices and other assistive technology.
- (3) The business does not allow people with disabilities to enter the building with their service animals.
- (4) The staff do not receive ADA training and do not know about the requirements to modify practices or to provide auxiliary aids and services.

As the operator of a business, it is your responsibility to ensure that your business provides equal access to people with disabilities. Refusing to make your business accessible is discrimination under state and federal law. People with disabilities and the government have the right to sue businesses that discriminate.

The best way to protect yourself from a lawsuit is to make your business accessible. Here are some important steps you should take:

- (1) Schedule an inspection with a Certified Access Specialist. A Certified Access Specialist (CASP) is a person who the State of California recognizes as having specialized knowledge of accessibility standards. They can inspect your business and tell you what changes you need to make for your business to be accessible to disabled people. Getting a CASP inspection has important benefits, like giving you extra protection in a lawsuit.

To find a CASP in your area, contact the CASP Program at the Division of the State Architect. You can also visit www.apps2.dgs.ca.gov/DSA/casp/casp_certified_list.aspx. Additionally, you should contact your local government and ask what resources it has to help businesses comply with disability access laws. The State of California makes money available to local governments to create programs that help business owners comply with disability access laws.

- (2) Learn about accessibility laws from reliable sources. There is a lot of misinformation about accessibility laws. Get information about your rights and responsibilities as a business owner from reliable, trustworthy sources. California has several agencies that provide fact sheets, trainings, and other educational materials about accessibility. In fact, one of these agencies, the California Commission on Disability Access, was created by the Legislature for the purpose of helping businesses comply with accessibility laws. You should contact the following agencies and ask for information on how to comply with accessibility laws:

The California Commission on Disability Access: www.cdda.ca.gov

The Division of the State Architect: www.dgs.ca.gov

The Department of Rehabilitation: www.dor.ca.gov

- (3) Making your business accessible is good for everyone. It makes your business available to more customers. It also promotes fair and equal access. We thank you for doing your part to help make California a great place for everyone!