

KERN COUNTY ENVIRONMENTAL HEALTH PERMIT APPLICATION FORM

Environmental Health Division
2700 "M" Street, Suite 300, Bakersfield, CA 93301

661-862-8740
661-862-8701(fax)

<input type="checkbox"/> New Business	<input type="checkbox"/> Ownership Change Date: _____	<input type="checkbox"/> Information Change	<input type="checkbox"/> Date: _____
Type of Ownership: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other: _____			
Check all that apply:	<input type="checkbox"/> Medical Waste Facility Type 1	<input type="checkbox"/> Medical Waste Common Storage	<input type="checkbox"/> Body Art Facility
	<input type="checkbox"/> Medical Waste Facility Type 2	<input type="checkbox"/> Medical Waste	<input type="checkbox"/> LEA Facility
OWNER INFORMATION			
Owner Name:	_____		
Owner Address:	_____		
City:	_____	State:	_____
Home Phone:	() _____	Business Phone:	() _____
Partner(s)/Corp Name:	_____		
Care Of:	_____	E-Mail Address:	_____
Mailing Address:	_____		
City:	_____	State:	_____
FACILITY/BUSINESS INFORMATION			
Facility Name (DBA):	_____		
Address:	_____		
City:	_____	State:	_____
Phone:	() _____	Alternate phone:	() _____
Care Of:	_____	E-Mail Address:	_____
Mailing Address:	_____		
City:	_____	State:	_____
Water Provider	_____		
BILLING INFORMATION			
Mailing Address for invoice to renew annual permit: <input type="checkbox"/> Business Mailing Address <input type="checkbox"/> Owner Address <input type="checkbox"/> Other			
If you checked other, what is the address? _____			
Care of: _____			
Approval of this application and issuance of an Environmental Health Permit is required before commencing operation. Failure to obtain both may result in a misdemeanor citation and/or closure. The undersigned applicant agrees to operate in accordance with all applicable state laws and local ordinances.			
_____	_____	_____	
Signature of Applicant	Print Name	Date	
PERMIT(S) AND FEE(S) ARE NOT TRANSFERABLE. PERMIT FEE(S) MUST BE SUBMITTED WITH PERMIT APPLICATION.			

FOR OFFICIAL USE ONLY			
Program ID	PE	Date Mailed	Facility ID
Previous Owner ID	New Owner ID	Map #	Service Request #
Total Fees Paid	Received By	Date Paid	Accounting ID

FEES EFFECTIVE 06/22/2018

1. The health permit fee is based on a fiscal year. The annual health permit fee is paid at the time you open and every July of every year you are in operation. If you start your business between January and June, your permit fee is prorated, and you only pay 50% of the annual permit fee. However, each July you will pay the full annual permit fee. In addition to the permit fee, there is a one-time application fee of \$125.00.
2. Medical waste generator fixed facility Type 1: means a facility which generates two hundred (200) or more pounds of medical waste in any month of a twelve (12) month period. These facilities also provide inpatient care at locations composed of more than one floor and/or more than two (2) buildings, or provide outpatient care services at a facility composed of more than two (2) buildings.
3. Medical waste generator fixed facility Type 2: means a facility which may provide inpatient care at locations composed of a single level and less than three (3) buildings, outpatient services at locations of less than three (3) buildings, and generates two hundred (200) pounds of medical waste per month in a twelve (12)-month period. This may also be a facility that generates less than two hundred (200) pounds per month of medical waste but uses onsite treatment of the medical waste.

ENVIRONMENTAL HEALTH DIVISION FEES

Permit Fee(s) Must be Submitted with Permit Application

DESCRIPTION		Full Permit Fee			Prorated Permit Fee		
		Application Fee	Permit Fee	Total Fees	Application Fee	Prorated Fee	Total Prorated Fees
MEDICAL WASTE							
FACILITY TYPE 1	MW20	\$125.00	\$2,455.00	\$2,580.00	\$125.00	\$1,227.50	\$1352.50
FACILITY TYPE 2	MW21	\$125.00	\$790.00	\$915.00	\$125.00	\$395.00	\$500.00
COMMON STORAGE	MW14	\$125.00	\$595.00	\$720.00	\$125.00	\$297.50	\$422.50
AMBULANCE	MW16	\$125.00	\$665.00	\$790.00	\$125.00	\$332.50	\$457.50
BODY ART FACILITY	BA07	\$125.00	\$645.00	\$770.00	\$125.00	\$200.00	\$290.00
BODY ART ANNUAL REGISTRATION	BA03	N/A	\$140.00	\$140.00	N/A	\$70.00	\$70.00
BODY ART TEMPORARY FACILITY SPONSOR	BA10	N/A	\$375.00	\$375.00	N/A	N/A	N/A
BODY ART TEMPORARY FACILITY DEMONSTRATION BOOTH (10'x10')	BA11	N/A	\$130.00	\$130.00	N/A	N/A	N/A
FULL SOLID WASTE FACILITY PERMIT							
HAZARDOUS WASTE CO-DISPOSAL	WF42	\$125.00	\$9,400.00	\$9,525.00	\$125.00	\$4,700.00	\$4,825.00
CLASS II LANDFILL	WF04	\$125.00	\$15,000.00	\$15,125.00	\$125.00	\$7,500.00	\$7,625.00
CLASS III LANDFILL	WF05	\$125.00	\$25,175.00	\$25,300.00	\$125.00	\$12,587.50	\$12,712.50
OTHER (COMPOSTING, ECT)	WF27	\$125.00	\$15,410.00	\$15,535.00	\$125.00	\$7,705.00	\$7,830.00
GREEN MATERIAL COMPOSTING							
MONTHLY INSPECTION FACILITY	WF30	\$125.00	\$9,910.00	\$10,035.00	\$125.00	\$4,955.00	\$5,080.00
QUARTERLY INSPECTION OPERATION	WF31	\$125.00	\$3,565.00	\$3,690.00	\$125.00	\$1,782.50	\$1,907.50
LARGE VOLUME TRANSFER STATION	WF06	\$125.00	\$14,955.00	\$15,080.00	\$125.00	\$7,477.50	\$7,602.50
MEDIUM VOLUME TRANSFER STATION	WF07	\$125.00	\$11,330.00	\$11,455.00	\$125.00	\$5,665.00	\$5,790.00
CHIPPING & GRINDING FACILITY PERMIT							
MONTHLY (≥200 TPD & ≤500 TPD)	WF36	\$125.00	\$4,930.00	\$5,055.00	\$125.00	\$2,465.00	\$2,590.00
QUARTERLY (≤200 TPD)	WF37	\$125.00	\$2,520.00	\$2,645.00	\$125.00	\$1,260.00	\$1,385.00
AGRICULTURAL COMPOSTING OPERATION							
QUARTERLY INSPECTION	WF28	\$125.00	\$3,565.00	\$3,690.00	\$125.00	\$1,782.50	\$1,907.50

ANNUAL INSPECTION	WF29	\$125.00	\$890.00	\$1,015.00	\$125.00	\$445.00	\$570.00
NON-HAZARDOUS PETROLEUM CONTAMINATED SOIL OPERATION	WF44	\$125.00	\$4,040.00	\$4,165.00	\$125.00	\$2,020.00	\$2,145.00
LIMITED VOLUME TRANSFER OPERATION							
QUARTERLY INSPECTION	WF09	\$125.00	\$4,820.00	\$4,945.00	\$125.00	\$2,410.00	\$2,535.00
ANNUAL INSPECTION	WF10	\$125.00	\$1,200.00	\$1,325.00	\$125.00	\$600.00	\$725.00
HAZARDOUS WASTE DISPOSAL MONTHLY	WF42	\$125.00	\$9,400.00	\$9,525.00	\$125.00	\$4,700.00	\$4,825.00
INERT DEBRIS ENGINEERED FILL	WF22	\$125.00	\$1,700.00	\$1,825.00	\$125.00	\$850.00	\$975.00
CLOSED DISPOSAL SITE							
QUATERLY INSPECTION	WF24	\$125.00	\$4,010.00	\$4,135.00	\$125.00	\$2,005.00	\$2,130.00
ANNUAL INSPECTION	WF25	\$125.00	\$1,005.00	\$1,130.00	\$125.00	\$502.50	\$627.50