



County of Sonoma Department of Health Services
Environmental Health
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www.sonoma-county.org/eh

HHW COMPLETE



SONOMA COUNTY DEBRIS REMOVAL EXEMPTION APPLICATION

Name of Fire: _____

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 - **Include number of structures, square footage, type of waste, etc.**

Property Owner Acceptance

I have reviewed the protocols as stated in the "Conditional Exemption from Sonoma County Debris Removal Requirements" document. I certify that the only burn debris on my parcel is from non-residential structures less than 120 square feet, fences, and non-structural wood material, and said structures did not contain paint, pesticides, herbicides, propane or other similar hazardous substances. Additional exemptions may be granted on a case by case basis where the structure is greater than 120 square feet and all material contained within the structure was inert.

Property Owner Signature (Required): _____ Date: _____

Sonoma County Approval: _____ Date: _____

NOTES:

***This will serve as your permit – Please keep on site and carry with you when transporting debris**

For office use only: FA _____ SR _____ Entered Date _____ Entered By _____