

## HAZARDOUS WASTE MANAGEMENT PROGRAM DISCLOSURE STATEMENT INSTRUCTIONS

Please read these instructions carefully. Applicants are required to comply with all applicable requirements. These instructions are intended to assist applicants in completing the Disclosure Statement (Form 1365), which can also be found on the Department of Toxic Substances Control (DTSC) website. Please note although the completed Disclosure Statement can be typed or printed legibly in ink; an original, signed copy must be submitted to the Disclosure Statement Coordinator.

In answering questions applicants should remember the following:

- You must complete all of the sections of the Disclosure Statement. If a section does not apply to you, do not leave it blank. Instead write "Does Not Apply" in the section and include it with your Disclosure Statement. Failure to respond to any portion of the Disclosure Statement will result in the Disclosure Statement being rejected and returned to the applicant. Misrepresentations are subject to enforcement action.
- Make sure all of the pages included with the Disclosure Statement are numbered, including the total number of pages. The page numbers are located at the bottom of each page.
- The Declaration must be signed by an authorized person as follows:

Sole Proprietorship:

The individual who owns the business.

Partnerships:

The general or managing partner.

Corporations:

A Corporate officer authorized to make management decisions that govern the conduct of hazardous waste activities.

Limited Liability Company:

A manager who is authorized to make management decisions that govern the conduct of hazardous waste activities.

If you have any questions regarding completion of the Disclosure Statement, please contact the DTSC Disclosure Statement Coordinator at the contact information provided in the renewal letter. A properly completed Disclosure Statement will reduce the likelihood of delay in processing.

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**INFORMATION PRACTICES NOTICE**

The Disclosure Statement Form requires personal and confidential information.

- (a) This information is required by the Hazardous Waste Management Program of DTSC which is within the California Environmental Protection Agency.
- (b) Maintenance of this information is the responsibility of:

Branch Chief  
Permitting Division  
Hazardous Waste Management Program  
Department of Toxic Substances Control  
8800 Cal Center Drive  
Sacramento, California 95826-3200

- (c) The requirement for submittal of the Disclosure Statement is authorized by California Health and Safety Code sections 25112.5, 25169.5, 25200.4 and 25358.3.
- (d) Submission of the requested personal and confidential information is mandatory, except as provided in California Health and Safety Code section 25112.5(c) pertaining to a qualified corporation or subsidiary.
- (e) Failure to provide complete information on the Disclosure Statement will likely result in delays in processing and return of the incomplete forms for revision. Failure to provide statutorily required information that is both complete and accurate may also result in denial of an application for a hazardous waste facility permit or hazardous waste transporter registration and/or may result in administrative, civil or criminal prosecution.
- (f) The information in the Disclosure Statement is to be used principally for purposes of determining the approval of an application for a hazardous waste facility permit, hazardous waste transporter registration, or other hazardous waste facility grant of authorization.
- (g) Personal and confidential information included on the Disclosure Statement will be released only to appropriate agencies with law enforcement responsibility. No other persons may receive the information without explicit statutory authority or a court order.

Individuals who are described in a Disclosure Statement will have a right to access personal information pertinent to them in accordance with the California Information Practices Act, California Civil Code section 1798.34.

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Health and Safety Code section 25169.5 authorizes DTSC to receive criminal history summaries for the purpose of performing background checks by the Department of Justice (DOJ) as part of the Disclosure Statement requirement pursuant to Health and Safety Code section 25112.5. A Disclosure Statement cannot be approved until DTSC has received DOJ clearance of fingerprint images and related identification information on all individuals listed within the Disclosure Statement.

In order to meet this requirement, the following individuals listed within the Disclosure Statement must complete both the fingerprint requirement and the background summary check:

- (a) The sole proprietor;
- (b) The partners;
- (c) Any officers, directors, or partners, if the applicant is a business concern;
- (d) All persons or any officers, partners, or any directors, if there are no officers, of a business concern holding more than five percent of the equity in, or debt liability of the applicant (if the debt liability is held by a lending institution, the applicant shall only supply the name and address of the lending institution).

**NOTE:** In some instances, individuals or businesses may be exempt from either the fingerprint and/or the background summary requirements. To determine if you meet the exemption criteria, please refer to Corporate Exemptions from Disclosure Statement and Fingerprint Requirements provided below.

**FINGERPRINT IMAGES AND BACKGROUND CHECK REQUIREMENT**

California Residents:

In order to complete the fingerprint/background check requirement, applicants residing in California can visit any Applicant Live Scan satellite location where fingerprint images and related data are electronically transmitted to DOJ. [Applicant Live Scan information and fingerprint locations \(including hours of operation and costs related to live scan fingerprinting\) can be obtained on the DOJ website.](#)

Live Scan operators must verify the identity of the applicant prior to fingerprinting by requiring valid photo identification. Examples of valid identification are a California driver license, valid out-of-state driver license, California Department of Motor Vehicles ID card, military card, passport and alien registration card/immigration/green card. Applicants are encouraged to contact the Live Scan location to determine if an appointment for fingerprinting is recommended.

Following receipt by DOJ, the fingerprint images and background summaries are electronically processed by the DOJ Networked AFIS Transaction Management System. Live Scan submissions, which have no data or quality errors and do not result in possible criminal history matches, are processed automatically and DOJ will provide an electronic response to a secured fax machine within DTSC's Hazardous Waste Management Program. DOJ will also coordinate other electronic processes resulting from the automated submissions of fingerprints including forwarding the fingerprints to the FBI.

Applicants are to inform the Applicant Live Scan operator of ORI Code Number **A0517**, and Mail Code **09166**, which identifies DTSC as the agency to which DOJ will provide responses related to fingerprints and criminal background summaries.

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Other States:

For applicants residing in states other than California, “rolled” fingerprint cards will need to be submitted to DOJ and the FBI. In order to obtain needed fingerprint cards ([Form FD-258](#)), please visit [California’s Department of Justice, Office of the Attorney General](#). Each applicant will be required to submit two fingerprint cards (one for DOJ and one for the FBI). Please note that a check, made payable to the Department of Justice in the amount of \$49.00 is required for each applicant submitting fingerprint cards (see the [Applicant Fingerprint Processing Fees chart](#) for more information).

**NOTE: Due to the large volume of Live Scan requests/fingerprint cards (Form FD-258) being submitted to DOJ and the FBI, it can take as long as 90 days for DTSC to receive background clearance results from both of these agencies. It is also not unusual for an individual’s fingerprints to be rejected by DOJ and/or the FBI due to the quality of fingerprint characteristics. If this occurs, DTSC will notify the applicant by telephone to request that Live Scan or fingerprint cards be resubmitted. It generally takes 30 to 60 days for DTSC to receive results from DOJ and/or the FBI on resubmitted fingerprint cards.**

Guidelines for DTSC Use and Storage of Fingerprints/Background Checks

In order to review the contents of a facility or transporter Disclosure Statement, all applicable DTSC employees have been fingerprinted and received criminal background clearance by the Department of Justice. In addition, DOJ mandates that DTSC employees having access to information related to fingerprint analysis and background criminal checks be trained.

DOJ also requires that, prior to receiving documentation related to fingerprints/background criminal histories, that HWMP identify a locked office with a fax machine designated for use by DOJ to electronically transmit information. This secured office, which is locked at all times, contains all facility and transporter Disclosure Statements files.

CORPORATE EXEMPTIONS FOR SUBMITTAL OF DISCLOSURE STATEMENT AND FINGERPRINT REQUIREMENTS

Some corporations are exempt from submitting the Disclosure Statement and/or from the fingerprint/criminal background summary requirements. Public corporations that are listed by the Securities and Exchange Commission (SEC) or are wholly owned subsidiaries of a SEC listed company are exempt from the requirement to submit fingerprints. To also be exempt from the Disclosure Statement requirement, a corporation must have operated a hazardous waste facility or interim status facility in California as of January 1, 1984.

Corporations claiming these exemptions must still report all missing hazardous wastes of concern and must meet all of the requirements of Health and Safety Code section 25112.5(b) and (c). If a company believes that it qualifies for these exemptions, it is required to submit a letter to DTSC providing an explanation of its exemption eligibility.

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The following corporations are exempt from one or both of these requirements:

- (a) A corporation, the stock of which is listed on a national securities exchange and registered under the Securities Exchange Act of 1934 (Title 15 of the United States Code sec. 78a et seq.) or a subsidiary of such a corporation, is not subject to the fingerprint requirement of Health and Safety Code section 25112.5(a).
- (b) Corporations with stock listed on a national securities exchange or on the National Market System of the NASDAQ Stock Market and registered under the Securities Exchange Act of 1934 (15 U.S.C. Sec. 78a et seq.) or a subsidiary of that corporation, in lieu of submitting a Disclosure Statement, may submit to DTSC copies of all period reports, including, but not limited to, those reports required by section 78m of Title 15 of the United States Code and Part 229 (commencing with section 229.10) of Chapter II of Title 17 of the Code of Federal Regulations that the corporation or subsidiary has filed with the Securities and Exchange Commission the three years immediately preceding the submittal. **This exemption only applies if the corporation or subsidiary has held a hazardous waste facilities permit or operated a hazardous waste facility under interim status in California as of January 1, 1984, pursuant to section 25200 or 25200.5.**

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**Section I: Cover Page**

- Filing Status:** Check the hazardous waste facility box.
- Business Type:** Check the applicable box to specify whether applicant is a corporation, general partnership, sole proprietor, or limited liability company.
- Filing with SEC Exemption?** See instructions, page 4, "CORPORATE EXEMPTIONS FOR SUBMITTAL OF DISCLOSURE STATEMENT AND FINGERPRINT REQUIREMENTS."
- Exempt from Fingerprint Requirement?** See instructions, page 4, "CORPORATE EXEMPTIONS FOR SUBMITTAL OF DISCLOSURE STATEMENT AND FINGERPRINT REQUIREMENTS."
- Applicant Legal Name:** The name of the business if your business is a corporation, limited liability company or partnership. If you are a sole proprietorship (including DBA's) you should put the name of the individual who owns the business. List any other names that you have used in the past.
- Registration No.:** This is the number (up to 4 digits) issued to you by DTSC on your hazardous waste transporter registration. If you are a new transporter, write in the word "new".
- Federal Employer ID No.:** This is the 9 digit number issued to your business by the Internal Revenue Service. This number is also known as a federal tax identification number. If you are a sole proprietor and do not have any employees, or are otherwise exempt, write in "not applicable".
- Business Address:** This is a physical address. You may not use a post office box or the address of a commercial mail receiving business. This must be an actual address where the business is located.
- Business Phone Number:** This may be a phone number for general business, i.e., answered by a receptionist or dispatcher.
- Business Fax Number:** If you do not have a Fax number, write "not applicable".
- Mailing Address:** You may use a post office box or a commercial mail receiving business for this address.

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**Section II: Facility Identification**

Provide the EPA ID Numbers that apply to the business entity. Include the name that is associated with the EPA ID Number. Use the provided boxes to identify the number as pertaining to a facility, generator, or transporter.

If there is not enough space to list all EPA ID Numbers, make copies of this section and attach.

**Section III: Business Entity Disclosure**

Identify all individuals that are associated with your business and are required to be identified by Health and Safety Code section 25112.5.

Fictitious Names: Identify all DBAs (doing business as) and any other names the business may operate under. Identify names that the business has operated under in the past.

If there is not enough space to list all names, make copies of this section and attach.

**For Transporters**

You must submit a photocopy of a valid driver license for each person listed in this section.

**Section IV: Background Information**

Read the questions very carefully. Answer the questions completely and honestly. An incomplete or untruthful answer may result in the return of your Disclosure Statement or initiation of an enforcement action against you.

**Section V: Declaration**

Make sure to write in the date and location where the declaration was signed. An unsigned or incomplete declaration will result in your Disclosure Statement being returned. The declaration must be signed in ink. Do not complete using an electronic or duplicated signature. A declaration must be signed in ink. Do not complete using an electronic or duplicated signature. A declaration without an original signature will result in your Disclosure Statement being returned.

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**Attachment 1 – Record of Criminal Cases (within the last five years)**

Complete and attach as many sheets as necessary. A separate sheet must be submitted for each individual with a criminal record identified in Sections I and II.

If you are an individual and have not already completed this information in Section I, provide the following personal identification information:

Driver License No.: Provide both the license number and the issuing state.

Sex: Use the following abbreviations: Male: M, Female: F

Height: Height in feet and inches. Example: 5'6", 6'2"

Weight: Weight in Pounds. Do not list fractions of a pound.

Eyes: Use the following abbreviations for eye color: Black: BLK, Brown: BRN, Blue: BLU, Green: GRN, Gray: GRY, Hazel: HAZ, Maroon: MAR, Pink: PNK

Hair: Use the following abbreviations for hair color: Bald: BAL, Black: BLK, Blond or Strawberry Blond: BLN, Brown: BRN, Gray or partially gray: GRY, Red or Auburn: RED, Sandy: SDY, White: WHI

Date: List the date of the arrest.

Arresting Agency: Identify the arresting agency, including the location as appropriate.

Charge: List the charge that was on the booking or arrest document. Include the applicable statute; for example, Health and Safety Code, Penal Code, Vehicle Code, United States Code, Arizona Revised Statutes, Nevada Revised Statutes, Oregon Revised Statutes. Abbreviations may be used.

Disposition: The disposition should indicate whether the charge was dropped or changed to another charge. If the case was resolved, indicate the result, conviction, plea, finding of not-guilty, release, dismissal, etc. Indicate the date of the action.

**Note:** Arrests and dispositions that have been ordered by a court to be deleted, destroyed, or sealed do not have to be disclosed. **Convictions dismissed or set aside pursuant to California Penal Code section 1203.4 must be disclosed.**

**Attachment 2 – Record of Civil Cases (within the last five years)**

Identify all Civil Actions filed against the applicant or business entities or individuals initiated by a local, state, or federal regulatory agency for violations of environmental laws, regulations or requirements. Identify all civil actions filed by a regulatory agency for violations of transportation related laws and regulations.

**Note:** you must identify all civil actions regardless of resolution.



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**Attachment 3 – Record of Administrative Actions (within the last five years)**

Identify all administrative actions taken by a local, state or federal regulatory agency for violations of environmental laws, regulations, or requirements, including permit conditions. Identify all administrative actions taken by any local, state, or federal agency to suspend, revoke or deny the issuance of a permit, license, registration or certificate.

**Note:** You must identify all administrative actions regardless of resolution.

**Attachment 4 – Record of Permits, Licenses, and Registrations (within last five years)**

Identify and describe all permits, licenses and registrations (applied for or held by) for the generation, transportation, treatment, storage, recycling, disposal, or handling of hazardous waste or hazardous materials. Include the name of the issuing agency and any permit, license, or registration number.

**Note:** List all permits, licenses, and registrations applied for or held under any other previous name.

**Attachment 5 – Record of Regulatory Agencies (within last five years)**

Identify and describe all agencies outside of the State of California that regulate or have regulated the business entity in the generations, treatment, storage, recycling, disposal, or handling of hazardous waste of hazardous material.

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### Section I: Cover Page

<b>Filing Status:</b> Facility <input type="checkbox"/> *Transporter <input type="checkbox"/> <small>*Transporters must submit a photocopy of a valid driver license for each person listed in Section III, Business Entity Disclosure.</small>	<b>Business Type (check only one)</b>	
	Corporation <input type="checkbox"/>	General Partnership <input type="checkbox"/>
	Sole Proprietor <input type="checkbox"/>	Limited Liability Company <input type="checkbox"/>
<b>Filing with SEC Exemption?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Exempt from fingerprint Requirement?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Applicant Legal Name &amp; Previous Name(s)</b>		<b>Registration No.</b>
<b>Federal Employer ID No.</b>		
<b>Business Address (P.O. Box is Not Acceptable)</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Business Phone Number</b>	<b>Business Fax Number</b>	<b>E-mail Address (optional)</b>
<b>Mailing Address (If different from Business Address. P.O. Box is Acceptable)</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Is the applicant required to submit a Disclosure Statement for a hazardous waste facility permit?</b>		Yes      No
<b>If “Yes,” was a Disclosure Statement previously submitted?</b>		Yes      No
<b>If “Yes,” when was the Disclosure Statement submitted?</b>		
<b>List the names on the Disclosure Statement:</b>		
<hr/> <b>Submit the Disclosure Statement to:</b>  Disclosure Statement Coordinator Permitting Division Department of Toxic Substances Control 8800 Cal Center Drive Sacramento, California 95826-3200		

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### Section II: Facility Identification

*Provide the EPA ID number(s) for the business entity. Identify the name associated with each EPA ID Number. Identify the type of facility in the applicable box.*

EPA ID #	Name	Type
		<input type="checkbox"/> Facility <input type="checkbox"/> Transporter <input type="checkbox"/> Generator
		<input type="checkbox"/> Facility <input type="checkbox"/> Transporter <input type="checkbox"/> Generator
		<input type="checkbox"/> Facility <input type="checkbox"/> Transporter <input type="checkbox"/> Generator
		<input type="checkbox"/> Facility <input type="checkbox"/> Transporter <input type="checkbox"/> Generator
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		<input type="checkbox"/> Facility <input type="checkbox"/> Transporter <input type="checkbox"/> Generator

*Attach as many copies of this sheet as necessary. Provide a separate sheet for each individual or entity identified in Sections I and II.*

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### Section III: Business Entity Disclosure

*Identify all partners, members, officers, directors, managers, trustees, controlling persons, or any person holding more than 5% equity or debt liability in the business entity. For transporters, you must submit a photocopy of a valid driver license for each person listed below.*

*\*See Information Practices Notice, Page 2 of the Disclosure Statement Instructions for information related to the disclosure of personal and confidential information.*

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Ownership \_\_\_\_\_  
 SSN \_\_\_\_\_ Driver License # \_\_\_\_\_ Issuing State \_\_\_\_\_

**Fictitious Names:**

List all fictitious (DBA) names that the business operates under: (add additional pages as necessary)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has the business every operated under another name(s)?                      Yes       No

If yes, list the name(s) here: (Add additional pages as necessary)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*If additional space is needed, attach as many copies of this sheet as necessary.*

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### Section IV: Background Information

***Please read the following questions very carefully and answer every question.***

Has the business entity or any of its partners, members, controlling persons, officers, directors, managers, trustees, or any person holding more than 5% equity or debt liability in the business entity ever been convicted of committing a crime within the last five years? Yes  No

*A conviction for the purposes of this disclosure statement includes a plea of guilty or nolo contendere, or a verdict or finding of guilt, regardless of whether sentence is imposed by the courts. You do not have to disclose arrests that did not result in a conviction and for which you are not awaiting final adjudication; any arrest conviction or other proceeding the record of which has been sealed or destroyed by order of a court.*

If you answer Yes, you must include ATTACHMENT 1 – *Record of Criminal Cases* (making as many copies as necessary) for each conviction.

Has the business entity or any of its partners, members, controlling persons, officers, directors, managers, trustees, or any person holding more than 5% equity or debt liability in the business entity ever been involved in a civil proceeding regarding any violation of or non-compliance with the California Health and Safety Code, Water Code, Vehicle Code, RCRA (42 USC section 6901 et seq.), HMTA (49 USC section 1801 et seq.), CERCLA (42 USC section 9601 et seq.), TSCA (15 USC section 2601 et seq.) or any other equivalent state or federal statute or any requirement or regulation adopted pursuant and relating to the generation, transportation, treatment, storage, recycling, disposal or handling of a hazardous waste, hazardous substance or hazardous material within the last five years? Yes  No

*A civil proceeding for the purposes of this disclosure statement includes any civil action filed in a court of law, regardless of whether a judgment is issued by the courts.*

If you answer Yes, you must include ATTACHMENT 2 – *Record of Civil Cases* (making as many copies as necessary) for each civil proceeding.

Has the business entity or any of its partners, members, controlling persons, officers, directors, managers, trustees, or any person holding more than 5% equity or debt liability in the business entity ever been involved in an administrative proceeding regarding any violation of or non-compliance with the California Health and Safety Code, Water Code, Vehicle Code, RCRA (42 USC section 6901 et seq.), HMTA (49 USC section 1801 et seq.), CERCLA (42 USC section 9601 et seq.), TSCA (15 USC section 2601 et seq.) or any other equivalent state or federal statute or any requirement or regulation adopted pursuant and relating to the generation, transportation, treatment, storage, recycling, disposal, or handling of a hazardous waste, hazardous substance or hazardous material within the last five years? Yes  No

*An administrative action for the purposes of this disclosure statement includes any action taken by a regulatory agency regardless of whether a hearing was held. Administrative actions include administrative orders issued by local, state and federal regulatory agencies.*

If you answer Yes, you must include ATTACHMENT 3 – *Record of Administrative Actions* (making as many copies as necessary) for each administrative action.

***Section IV: Background Information (Continued next page)***

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### Section IV: Background Information (continued)

<p>Has the business entity or any of its partners, members, controlling persons, officers, directors, managers, trustees, or any person holding more than 5% equity or debt liability in the business entity ever had a license, permit, registration or certificate suspended, revoked or denied relating to the generation transportation, treatment, storage, recycling, disposal or handling of hazardous waste, hazardous substance or hazardous material within the last five years?</p> <p><i>A license, permit, registration, or certificate for the purposes of this disclosure statement includes any authority or privilege granted by local, state and federal regulatory agencies.</i></p> <p>If you answer Yes, you must include ATTACHMENT 3 – <i>Record of Administrative Actions</i> (making as many copies as necessary) for each administrative action.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Has the business entity or any of its partners, members, controlling persons, officers, directors, managers, trustees, or any person holding more than 5% equity or debt liability in the business entity held or applied for a license, permit, registration or certificate relating to the generation transportation, treatment, storage, recycling, disposal or handling of hazardous waste, hazardous substance or hazardous material within the last five years?</p> <p><i>A license, permit, registration, or certificate for the purposes of this disclosure statement includes any authority or privilege granted by local, state and federal regulatory agencies.</i></p> <p>If you answer Yes, you must include ATTACHMENT 4 – <i>Record of Permits, Licenses and Registrations</i> (making as many copies as necessary).</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>Are there any agencies outside the state of California who regulate, or who have regulated the business entity in the generation, treatment, storage, recycling, disposal, or handling of hazardous waste or hazardous material, within the last five years?</p> <p>If you answer Yes, you must include ATTACHMENT 5 – <i>Record of Regulatory Agencies</i> (making as many copies as necessary).</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>

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### Section V: Declaration

The person named as the applicant in the foregoing disclosure statement, declares:

I have carefully read the questions in the foregoing disclosure statement and have answer them truthfully, fully and completely, without mental reservations of any kind.

I declare under penalty of perjury under the laws of the State of California that my answers to the foregoing disclosure statement and all statements made by me herein are true and correct.

Executed on \_\_\_\_\_ At \_\_\_\_\_  
Date Street and Number  
City, State Zip

Applicant Name and Title: \_\_\_\_\_

SIGN HERE: \_\_\_\_\_  
Signature of Declarant

*The completed Disclosure Statement (including all applicable attachments) shall be submitted to:*

Disclosure Statement Coordinator  
Permitting Division  
Department to Toxic Substances Control  
8800 Cal Center Drive  
Sacramento, California 95826-3200

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### ATTACHMENT 1 – Record of Criminal Cases

Name							
<div style="display: flex; justify-content: space-between; width: 100%;"> <span>Last</span> <span>First</span> <span>Middle</span> </div>							
If this individual is different from the applicant, please provide the following identifying information <i>*See Information Practices Notice, Page 2 of the Disclosure Statement Instructions for information related to the disclosure of personal and confidential information.</i>							
Social Security Number	Driver's License No.	Issuing State	Sex	Height	Weight	Eye	Hair
<b>Dates</b>	<b>Arresting Agency</b>	<b>Charge</b>			<b>Disposition</b>		

*Attach as many copies of this sheet as necessary. Provide a separate sheet for each individual identified in Sections I and II.*



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### ATTACHMENT 2 – Record of Civil Cases

Name						
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Last</td> <td style="width: 33%; border: none;">First</td> <td style="width: 33%; border: none;">Middle</td> </tr> <tr> <td colspan="3" style="text-align: center; border: none;"><b>OR</b></td> </tr> </table>	Last	First	Middle	<b>OR</b>		
Last	First	Middle				
<b>OR</b>						
Name of Business Entity						

Date(s)	Agency bringing action	Nature of Case	Disposition

*Attach as many copies of this sheet as necessary. Provide a separate sheet for each individual identified in Sections I and II.*

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### ATTACHMENT 3 – Record of Administrative Actions

Name <hr/> <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Last</span> <span>First</span> <span>Middle</span> </div> <p style="text-align: center; margin: 5px 0;"><b>OR</b></p> Name of Business Entity <hr/>			
Date(s)	Agency bringing action	Nature of Action	Disposition

*Attach as many copies of this sheet as necessary. Provide a separate sheet for each individual identified in Sections I and II.*

## HAZARDOUS WASTE MANAGEMENT PROGRAM DISCLOSURE STATEMENT

Applicant Legal Name	Registration No.	Federal Employer ID No.
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### ATTACHMENT 4 – Record of Permits, Licenses, and Registrations

Name				
<hr/> <div style="display: flex; justify-content: space-around;"> <span>Last</span> <span>First</span> <span>Middle</span> </div>				
<b>OR</b>				
Name of Business Entity				
<hr/>				
Date(s)	Issuing Agency	Name of Applicant/Holder	Description of Permit, License, Registration	Status

**Status: A = applied, D = denied, H = held, S = suspended, R = revoked.**

*Attach as many copies of this sheet as necessary. Provide a separate sheet for each individual identified in Sections I and II.*

**HAZARDOUS WASTE MANAGEMENT PROGRAM  
 DISCLOSURE STATEMENT**

Applicant Legal Name	Registration No.	Federal Employer ID No.
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**ATTACHMENT 5 – Record of Regulatory Agencies**

Name		
Last	First	Middle
<b>OR</b>		
Name of Business Entity		
<b>Date(s)</b>	<b>Name of Regulatory Agency</b>	<b>Address of Regulatory Agency</b>

*Attach as many copies of this sheet as necessary. Provide a separate sheet for each individual identified in Sections I and II.*