



# Applying for Your City of Industry Use Permit (A.K.A. Business License): A Step-by-Step Guide

Welcome to the City of Industry. We look forward to helping you make your business a success – and making sure your required paperwork goes smoothly.

## Step 1 → **Contact the Planning Department**

Contact the Planning Department to discuss your proposal. The Planning Department will determine if your proposed use is permitted and which application is required. A copy of the zoning code can be found on the City of Industry website.

15625 Stafford Street, Suite 100  
City of Industry, CA 91744  
Phone: (626) 333-2211  
www.cityofindustry.org  
Hours: 9:00 a.m. to 5:00 p.m.  
(Closed daily from 12:00 pm – 1:15 pm)

## Step 2 → **Obtain Use Permit Application**

- Download application from City Website: [cityofindustry.org](http://cityofindustry.org)
- Request an application by email: [planning@cityofindustry.org](mailto:planning@cityofindustry.org)
- Request an application by phone: 626-333-2211
- Visit us at City Hall (address above)

## Step 3 → **Fill Out Use Permit Application**

Please make sure you have completed all sections of the application prior to moving on to next step. Incomplete applications will not be accepted.

## Step 4 → **Fill Out Subleasing Acknowledgement**

## Step 5 → **Complete and Notarize Property Owner Consent Affidavit**

## Step 6 → **Obtain Los Angeles County Fire Department Approval**

Take your completed application to the Los Angeles County Fire Department to obtain approval. You must obtain a stamp of approval on “Use Permit Supplement A” prior to submittal.

5200 Irwindale Ave. #210  
Irwindale, CA 91706  
Phone: (626) 430-3050

## Step 7 → **Fill Out Solid Waste Generator (Form 104)**

Please make sure you have completed the application prior to moving to next step.

## Step 8 → **Obtain Valley Vista Services Approval**

Take your completed application to Valley Vista Services to obtain approval. You must obtain a signature of approval on “Application for Commercial/Industrial Waste Service” prior to submittal.

17445 Railroad Street  
City of Industry, CA 91745  
(800) 442-6454

## Step 9 → **Comply with statewide Industrial General Permit for Storm Water**

See: [http://www.waterboards.ca.gov/water\\_issues/programs/stormwater/industrial.shtml](http://www.waterboards.ca.gov/water_issues/programs/stormwater/industrial.shtml)

## Step 10 → **Submit Completed Application to City Hall**

Submit the completed application to the Planning Department for approval. The normal processing time for a new Use Permit is one to two weeks. You will be contacted if any additional information is needed. You will receive notice of approval and a certificate by mail when your application has been approved.

## Step 11 → **Display Use Permit Certificate in Prominent Location**



# CITY OF INDUSTRY

15625 East Stafford Street • Suite 101 • City of Industry • CA • 91744  
Phone: (626) 333-2211 • Fax: (626) 961-6795  
[www.cityofindustry.org](http://www.cityofindustry.org) • [planning@cityofindustry.org](mailto:planning@cityofindustry.org)

**USE PERMIT APPLICATION**  
**A.K.A. Business License**

It is the business owner's responsibility to complete this application and checklist and notify the City of Industry Planning Department immediately if there are any changes to the business entity which differs from the information provided on this application.

### PROPOSAL

Location Address: \_\_\_\_\_  
Street City Zip + 4

Describe *in detail* the type of business to be conducted and the daily operations of the business.

NAICS Code: \_\_\_\_\_ <http://www.naics.com/search/> SIC Code: \_\_\_\_\_ <https://www.osha.gov/pls/imis/sicsearch.html>

Days of operation: \_\_\_\_\_ Business Hours: \_\_\_\_\_ Number of Employees \_\_\_\_\_

### APPLICANT INFORMATION

Applicant: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip + 4

### BUSINESS INFORMATION

Business Name (DBA): \_\_\_\_\_ Federal Tax ID No.: \_\_\_\_\_

Corporation Name: \_\_\_\_\_ State Tax ID No.: \_\_\_\_\_

Ownership Type:  Sole Proprietorship  Partnership  Corporation  Other \_\_\_\_\_

Mailing Address (if different then location address): \_\_\_\_\_  
Street City State Zip + 4

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Business Owner Contact (If different than applicant): \_\_\_\_\_ Phone: \_\_\_\_\_

### PROPERTY OWNER INFORMATION (MUST COMPLETE AND NOTARIZE THE ATTACHED PROPERTY OWNER CONSENT AFFIDAVIT)

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip + 4

### BUSINESS OWNER DECLARATION

I declare that the statements and information contained in this application are true and correct to the best of my knowledge and belief. I agree to conform with all requirements of zone, building, fire and all other applicable laws, ordinances and regulations pertaining to the operations of such business. Furthermore, I agree to notify the City of Industry Planning Department within ten (10) days of any change in the facts stated herein.

Name (print or type): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### SUBMITTAL CHECKLIST – MAKE SURE THE BELOW ITEMS ARE COMPLETE BEFORE SUBMITTING APPLICATION FOR APPROVAL

- 1) Verify use is permitted (contact Planning Department at 626-333-2211)
- 2) Provide copy of Owner's Affidavit
- 3) Complete IMC Information Sheet
- 4) Obtain approval on Refuse Application Form from Valle Vista Services
- 5) Obtain approval on Supplement A Form from LA County Fire Department
- 6) Provide Floor and Site Plan
- 7) Understand and accept standard conditions of approval (IMC Section 17.44.030)

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:

The Division of the State Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx)  
The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov)  
The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov).

### To Be Completed By City Staff

Use Permit No. \_\_\_\_\_ Filing Date: \_\_\_\_\_ Accepted by: \_\_\_\_\_

Date Deemed Complete: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Approved by: \_\_\_\_\_

Zoning/GP Designation: \_\_\_\_\_ Use Limitations: \_\_\_\_\_

## Subleasing Acknowledgement

Please read and sign to acknowledge understanding the responsibility to adhere to the City of Industry Municipal Code.

All business located within the City of Industry are required to obtain approval of a Use Permit (Section 17.44.010 of the Municipal Code). This includes any business subleasing space within another business and is regardless of any contract or third party agreement. Every business and property owner, regardless of any contract or third party agreement, is also required to comply with the provisions of the Municipal Code and may be held responsible for the failure to comply, even if the violation stems from a tenant (Sections 17.44.020 and Chapter 1.30 of the Municipal Code).

Provisions of the Municipal Code to be aware of include the:

- Maintenance of the property (e.g. removal of trash and graffiti and the maintenance of landscaping, lighting, parking lots, and the building itself)
- Utilization of approved trash and recycling services
- Prevention of criminal activities on the premises
- Elimination of hazards (structural, materials, etc...)
- Compliance with exterior storage requirements
- Control of the parking of vehicles and storage of vehicles
- Acquisition of proper permits prior to the physical alteration of the property, storage and use of hazardous materials, installation of signs or banners, or the scheduling of special events (e.g. parking lot sales, outdoor parties and promotional events, etc...)

If you desire additional details, please contact the Planning Department or view the Municipal Code online at [cityofindustry.org](http://cityofindustry.org).

I have read and understand my responsibilities as a business operator and property owner/manager in the City of Industry.

### Business Operator (Applicant for Use Permit)

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Print name

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Signature

### Property Owner or Authorized Agent (e.g. Property Manager)

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Print name

---

Signature



# CITY OF INDUSTRY

15625 East Stafford Street Suite 101 City of Industry CA 91744  
(626) 333-2211 FAX (626) 961-6795  
[www.cityofindustry.org](http://www.cityofindustry.org)  
[planning@cityofindustry.org](mailto:planning@cityofindustry.org)

**PROPERTY OWNER  
CONSENT AFFIDAVIT FOR  
USE PERMIT  
APPLICATION**

**\*\*THIS FORM MUST BE NOTARIZED\*\***

**BUSINESS DESCRIPTION** \_\_\_\_\_

**BUSINESS LOCATION** \_\_\_\_\_

STATE OF CALIFORNIA )  
COUNTY OF LOS ANGELES ) SS DATE:  
CITY OF INDUSTRY )

I/We, \_\_\_\_\_, \_\_\_\_\_, the **OWNER(s)** of the Real Property involved in this application, do hereby consent to the filing of this application. I/We do hereby appoint the following person(s) as my agent(s) to act on my behalf on the foregoing application:

**OWNER'S AGENT:** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_  
*(e.g. Property Manager) (Printed Name of Agent)*

**Address of Owner's Agent:** \_\_\_\_\_  
*(Number) (Street) (City) (State) (Zip)*

**OWNER:** \_\_\_\_\_ **OWNER:** \_\_\_\_\_  
*(Signature) (Printed Name)*

**Address:** \_\_\_\_\_ **Address:** \_\_\_\_\_  
*(Number) (Street) (Number) (Street)*  
\_\_\_\_\_  
*(City) (State) (Zip) (City) (State) (Zip)*

**NOTE:** A NOTARIZED OWNER'S AFFIDAVIT IS REQUIRED AS PARTY OF ALL APPLICATIONS. IF OWNERSHIP IS HELD OTHER THAN BY AN INDIVIDUAL, PROOF, IN THE FORM OF A SPECIAL POWER OF ATTORNEY, AUTHORIZED CORPORATE RESOLUTION, PARTNERSHIP AGREEMENT OR OTHER ACCEPTABLE DOCUMENT(S) SHALL BE SUBMITTED TO THE CITY ALONG WITH THE NOTARIZED SIGNATURES OF THOSE OFFICERS AUTHORIZED TO SIGN ON BEHALF OF THE CORPORATION OR PARTNERSHIP. PLEASE NOTE THAT OUR APPLICATION MAY NOT BE DETERMINED TO BE COMPLETE UNLESS AND UNTIL OWNERSHIP CAN BE VERIFIED.

**FOR NOTARY USE ONLY**

STATE OF \_\_\_\_\_ )

COUNTY OF \_\_\_\_\_ )

Subscribed and sworn to (or affirmed) before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

by \_\_\_\_\_, by \_\_\_\_\_,  
*(Printed Name of Owner As Signed Above) (Printed Name of Owner As Signed Above)*

*proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.*

\_\_\_\_\_  
NOTARY PUBLIC (Signature) **(SEAL)**



**CITY OF INDUSTRY  
USE PERMIT  
SUPPLEMENT A**

Before any application for a can be accepted as complete, the applicant must obtain a Fire Department stamp of approval on this form. In order to obtain approval, the applicant must submit a **COMPLETED** application to the LOS ANGELES COUNTY FIRE PREVENTION DIVISION located at:

5200 IRWINDALE AVE., #210  
IRWINDALE, CA 91706  
PHONE: (626) 430-3050

The Fire Prevention Bureau has reviewed the application for \_\_\_\_\_  
proposed at \_\_\_\_\_, City of Industry.  
*street zip code*

**OFFICE USE ONLY**

**Recommendation is:**

- APPROVAL - The proposed use and building meets Fire Prevention requirements.
- DENIAL - The proposed use and/or building failed the minimum Fire Prevention requirements.

**Comments:**

- Provide U.L. approved, fire extinguisher(s) - minimum rating: \_\_\_\_\_  
within \_\_\_\_\_ feet travel distance.
- Sprinkler system shall be monitored by a fire alarm company (100 sprinkler heads or more).
- Provide a 5-year certification test on the sprinkler system.
- Contact the Fire Department within 2 weeks after occupancy for field inspection.  
\_\_\_\_\_ occupancy only.

File for the following permits:

- Flammable Liquids Storage or Use
- High-pile Stock. Commodity classification
- Other
- Do not occupy building until all Fire Department requirements are met.

**Fire Department Stamp**

*Checklist (completed by applicant)*

- |  |  |
|--|--|
| <input type="checkbox"/> Complete Statement of Intended Use                          | <input type="checkbox"/> Complete Hazardous Materials Declaration            |
| <input type="checkbox"/> Complete Fire Extinguisher Requirements                     | <input type="checkbox"/> Complete High-Piled Combustible Storage Declaration |
| <input type="checkbox"/> Complete Occupant Emergency Information Form                | <input type="checkbox"/> Include Floor and Site Plan                         |
| <input type="checkbox"/> Provide Statement of Intended Use Letter signed by Business | <input type="checkbox"/> Obtain stamp on Use Permit Supplement A             |
| <input type="checkbox"/> Owner or Authorized Agent                                   |  |



# COUNTY OF LOS ANGELES FIRE DEPARTMENT FIRE PREVENTION DIVISION

## East Region Office

5200 Irwindale Ave. #210, Irwindale, CA 91706

Office (626) 430-3050

Hours of Operation M-F 8am – 4pm Closed Daily 12-1pm

Form 30 (5/14)

## NOTICE TO PROSPECTIVE BUSINESSES STATEMENT OF INTENDED USE

Various processes and situations in commercial and industrial establishments can create fire and life safety hazards. In order to provide a reasonable degree of safety to life and protection of property, specific requirements have been established in the Fire, Building, and Life Safety Codes. To help us assess what particular laws apply to your business, please provide the following information:

### PART I – Building Information

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Number of Buildings: \_\_\_\_\_ Type of Construction: \_\_\_\_\_ Square footage: \_\_\_\_\_

### PART II – Questionnaire

	YES	NO
1. Will you have over 500 square feet of <u>high-piled combustible storage</u> ? (> 12' or > 6' for High Hazard Commodities) See Part V of this form for more information.	<input type="checkbox"/>	<input type="checkbox"/>
2. Will you be storing more than 2500 cubic feet of miscellaneous <u>combustible materials</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will you store, transport on site, dispense, use, or handle <u>hazardous materials</u> ? (FC Table 105.6.20)	<input type="checkbox"/>	<input type="checkbox"/>
4. Will you store, handle, use, apply, or dispense <u>flammable or combustible liquids or powder coating</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will you store, handle, or use <u>compressed gases including liquefied petroleum gases</u> ? (FC Table 105.6.8)	<input type="checkbox"/>	<input type="checkbox"/>
6. Will you produce, store, handle, or transport onsite <u>cryogenic fluids</u> ? (FC Table 105.6.10)	<input type="checkbox"/>	<input type="checkbox"/>
7. Will you store, use, or handle <u>radioactive materials</u> more than 1 microcurie or any amount that requires a permit from The Nuclear Regulatory Commission?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will you store or handle more than 25 lbs of <u>pyroxylin plastics</u> or use any such material in a manufacturing process?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will you melt, cast, heat treat, or grind more than 10 lbs of <u>magnesium or other combustible metals</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
10. Will your store or handle an aggregate quantity <u>aerosol products</u> in excess of 500 lbs. net weight?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will you manufacture more than one gallon of <u>organic coating</u> per day?	<input type="checkbox"/>	<input type="checkbox"/>
12. Will you store, handle, sell, or use any <u>model rocket engines, pyrotechnic materials, or fireworks</u> ?	<input type="checkbox"/>	<input type="checkbox"/>

	<b>YES</b>	<b>NO</b>
13. Will you have a <u>refrigeration system</u> with >220 lbs Group A1 or 30 lbs of any other refrigerant?	<input type="checkbox"/>	<input type="checkbox"/>
14. Will you store or handle loose <u>combustible fibers</u> in excess of 100 cubic feet?	<input type="checkbox"/>	<input type="checkbox"/>
15. Will you install or operate a stationary <u>lead-acid battery system</u> with more than 100 gallons of liquid capacity?	<input type="checkbox"/>	<input type="checkbox"/>
16. Will you conduct fruit or crop ripening operations using <u>ethylene gas</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
17. Will you <u>produce combustible dust</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
18. Will you operate a <u>place of assembly</u> (drinking, dining, or gathering) with a single room occupant capacity of 50 or more people?	<input type="checkbox"/>	<input type="checkbox"/>
19. If YES to #18, Will you have <u>liquid or gas fueled vehicles or equipment</u> ; use <u>open flames or candles</u> ; or store, use, or handle <u>cellulose nitrate film</u> in assembly occupancy?	<input type="checkbox"/>	<input type="checkbox"/>
20. Will you operate a <u>carnival or a fair, or an amusement, covered mall, exhibit or trade show building</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
21. Will you use <u>dry cleaning equipment</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
22. Will you operate an <u>industrial baking oven or a power coating or spray finish booth or room</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
23. Will you be conducting <u>welding, cutting, or other hot work operations</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
24. Will you be using <u>open-flame devices including torches, candles, lanterns, or portable cooking appliances</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
25. Will you conduct any form of <u>open burning, or create a bonfire, rubbish, or recreational fire</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
26. Will you be conducting activities or create a condition near a <u>hazardous fire area</u> (wildfire area) that could accidentally ignite a wildfire?	<input type="checkbox"/>	<input type="checkbox"/>
27. Will you have a <u>lumberyard or wood working plant, which</u> stores or processes 100,000 board feet of lumber?	<input type="checkbox"/>	<input type="checkbox"/>
28. Will you store <u>wood chips, hogged material, lumber, or plywood</u> in excess of 200 cubic feet?	<input type="checkbox"/>	<input type="checkbox"/>
29. Will you conduct any <u>fumigation or thermal insecticidal fogging operations</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
30. Will you operate an <u>auto wrecking, waste handling, or commercial rubbish handling facility</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
31. Will you <u>remanufacture tires</u> or store over 2,500 cubic feet of tires or <u>tire byproduct</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
32. Will you operate a <u>repair garage or fuel dispensing facility</u> for automotive, marine, or fleet equipment?	<input type="checkbox"/>	<input type="checkbox"/>
33. Will you perform <u>floor finishing</u> over 350 sq ft using Class I or II liquids?	<input type="checkbox"/>	<input type="checkbox"/>
34. Will you operate a <u>temporary sales lot</u> for the sale of Christmas trees or pumpkins?	<input type="checkbox"/>	<input type="checkbox"/>
35. Will you install or use any type of <u>temporary membrane structure, tent, or canopy</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
36. Will you conduct any <u>motion picture, television, commercial or related film production</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
37. Will you be removing or using a <u>privately owned fire hydrant</u> ?	<input type="checkbox"/>	<input type="checkbox"/>

**PART II – Questionnaire continued...**

**YES NO**

38. Is your building equipped with automatic fire sprinklers?

If YES, provide the following information: *(The following information can usually be found on the main sprinkler system riser for each system or the Fire Department Connection (FDC) or can sometimes be obtained from the property owner.)*

- a) Date of last fire sprinkler system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): \_\_\_\_\_
- b) Below is a list of common types of sprinkler systems. Complete the information for the type of system installed in your building:
  - ♦ **CALCULATED:** \_\_\_\_\_ GPM/SqFt \_\_\_\_\_ Design Area (i.e. .3/3000)
  - ♦ **PIPE SCHEDULE (non-calculated):** \_\_\_\_\_ Light Hazard \_\_\_\_\_ Ordinary Hazard \_\_\_\_\_ Extra Hazard
  - ♦ **EARLY SUPPRESSION FAST-RESPONSE (ESFR):** \_\_\_\_\_ PSI ESFR K Factor \_\_\_\_\_
- c) Is the sprinkler system electronically supervised? If YES then:    
Fire sprinkler alarm monitoring company: \_\_\_\_\_

39. Is your building equipped with a standpipe system (fire hose or fire hose connections)? If YES:

- a) Type and location: \_\_\_\_\_  
(Certification information can usually be found on labels on the main standpipe system riser for each system)
- b) Date of last standpipe system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): \_\_\_\_\_

40. Is your building equipped with any other type of manual or automatic fire extinguishing system?    
*(Halon, Clean Agent, FM-200, Kitchen Hood System, Spray Booth)* If YES then:

- a) Type and location: \_\_\_\_\_
- b) Date of last automatic extinguishing system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): \_\_\_\_\_

41. Is your building equipped with a manual or automatic fire alarm system?    
*(smoke detector, heat detector, or manual pull)*

- a) Date of last alarm system test: \_\_\_\_\_
- b) Is the fire alarm system electronically supervised? If YES:  
Fire alarm monitoring company: \_\_\_\_\_

42. Maximum number of employees working at one time: \_\_\_\_\_

43. Hours of operation: \_\_\_\_\_ To \_\_\_\_\_

44. Describe the method of disposing of combustible or hazardous waste materials:  
\_\_\_\_\_  
\_\_\_\_\_

## PART III – Intended Use Statement

1. **SUBMIT A LETTER:** Submit a signed, legible letter (**Must be typewritten and on your company's letterhead**) stating your intended use for the property. In the letter, describe materials you will be storing and using on the property. Explain the method of storage (e.g., racks, pallets), storage dimensions, and where the materials will be located on the property. Describe how you will be using the materials. Provide details to any item(s) marked “yes” in Part II and explain any planned alterations to the building. (**See attached example**).
2. **SUBMIT SITE PLAN / FLOOR PLAN:** Submit site plan drawn to rough scale showing the property size and location, building size and location on property, both in square feet. Show all exit doors, fire extinguishers, fire hose cabinets, special fire or life safety systems, and any item(s) marked “yes” in Part II. (**See attached example**). **MUST BE IN 8 ½” X 11”**

## PART IV – Hazardous Materials Non-Handler Declaration:

### HAZARDOUS MATERIALS NON-HANDLER DECLARATION (FORM 585)

{ } THIS BUILDING WILL USE HAZARDOUS MATERIALS IN EXCESS OF NON-REPORTABLE AMOUNTS.

{ } THIS BUILDING WILL NOT USE HAZARDOUS MATERIALS OR USES NON-REPORTABLE AMOUNTS.

A hazardous material may be broadly defined as any material that because of its quantity, concentration, or physical or chemical characteristics, poses a significant, present, or potential hazard to human health and safety, property, or to the environment. A hazardous material includes, but is not limited to, any substance or material which the handler or the administering agency has a reasonable basis for believing would be injurious to a person's health and safety or harmful to the environment if released into the work place or surrounding areas.

**By signing below, I declare that the above named business, organization, or occupant will not handle a hazardous material or mixture containing hazardous material which has a quantity at any one time during the reporting year equal to, or greater than, a total weight of 500 pounds, or a total of 55 gallons, or 200 cubic feet at standard temperature and pressure for compressed gas.**

Print Name and Title of Declarer: \_\_\_\_\_ Date: \_\_\_\_\_

Declarer Signature: \_\_\_\_\_ Fire Department Representative: \_\_\_\_\_

## PART V – High-Piled Combustible Storage:

In Chapter 23 of the County of Los Angeles Fire Code, high-piled combustible storage is defined as: Storage of combustible materials [product and/or packaging] in closely packed piles (floor storage) or combustible materials on pallets, in racks, or on shelves where the top of storage is **greater than 12 feet in height**. High-piled combustible storage also includes certain high hazard commodities, such as rubber tires, ‘Group A’ plastics, flammable liquids, idle pallets, and similar commodities, where the top of the storage is greater than six feet in height.

It is very important to contact a fire inspector prior to consideration of storing high-piled combustible storage. Many of the permit requirements must be built into your building. If your building is not approved for high-piled combustible storage, it may be cost prohibitive. For example, if you have a pipe schedule sprinkler system no high-piled storage is permitted until the system is calculated. A fire inspector can assist you with fire department requirements.

{ } THIS BUILDING WILL NOT BE USED FOR HIGH-PILED COMBUSTIBLE STORAGE.

{ } THIS BUILDING WILL BE USED FOR HIGH-PILED COMBUSTIBLE STORAGE. **“Permit Required.”** Contact a Fire Inspector for permit requirements.

{ } THIS BUILDING IS A SPECULATION BUILDING WITHOUT A TENANT AT THIS TIME. The tenant will be notified to contact the Fire Department prior to use of the building.

## **FIRE DEPARTMENT STAMP**

TO GET A STAMP FROM THE FIRE DEPARTMENT YOU MUST BRING THE FOLLOWING ITEMS TO THE JURISDICTIONAL FIRE PREVENTION OFFICE:

- THE STATEMENT OF INTENDED USE FORM 30, COMPLETELY FILLED OUT
- A SIGNED LETTER FROM THE BUSINESS OWNER, OR AUTHORIZED AGENT (SEE PAGE 4)
- A FLOOR PLAN / SITE PLAN OF THE BUILDING
- THE OCCUPANT EMERGENCY INFORMATION, COMPLETELY FILLED OUT (PAGE 7)

### **FIRE DEPARTMENT STAMP:**

### **THE FOLLOWING PERMITS ARE REQUIRED:**

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PERMIT INFORMATION SHEETS WILL BE PROVIDED FOR REQUIRED PERMITS. (Permit Information Sheets are also available for viewing on our website. Go to [www.fire.lacounty.gov](http://www.fire.lacounty.gov), under Fire Prevention Division look for "Permit Requirements.")

PERMITS WILL ONLY BE ISSUED BY A FIRE INSPECTOR. PLEASE CONTACT YOUR FIRE INSPECTOR TO SCHEDULE AN INSPECTION.

## **FIRE EXTINGUISHER REQUIREMENTS**

**(This section to be completed by Fire Department personnel.)**

### **Primarily Class A Fire Hazards (Ordinary Combustibles):**

- { } Light Fire Hazard: Provide a minimum of (1) 2A10BC rated fire extinguisher mounted in an accessible, conspicuous area. One extinguisher is required for every 6,000 square feet and the travel distance to a fire extinguisher shall not exceed 75 feet from any point hazard involved. Mount in an accessible and conspicuous location.
- { } Ordinary Fire Hazard: Provide a minimum of (1) 2A10BC rated fire extinguisher mounted in an accessible, conspicuous area. One extinguisher is required for every 3,000 square feet and the travel distance to a fire extinguisher shall not exceed 75 feet from any point of the hazard involved. Mount in an accessible and conspicuous location.
- { } Extra Fire Hazard: Provide a fire extinguisher with a minimum Class A rating of 4. One extinguisher is required for every 4,000 square feet. Travel distance to a fire extinguisher shall not exceed 75 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.

### **Class B Fire Hazards Present (Flammable/Combustible Liquids with depths .25" or less):**

- { } Light Fire Hazard: Provide a fire extinguisher with a minimum Class B rating of 10 mounted in an accessible, conspicuous area. The travel distance to a fire extinguisher shall not exceed 50 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.
- { } Ordinary Fire Hazard: Provide a fire extinguisher with a minimum Class B rating of 10 with an allowable a maximum or 30 feet travel distance or a fire extinguisher with a minimum Class B rating of 20 with a maximum allowable travel distance of 50 feet from the hazard involved. Mount in an accessible and conspicuous location.
- { } Extra Fire Hazard: Provide a fire extinguisher with a minimum Class B rating of 40 with a maximum feet travel distance of 30 feet or a fire extinguisher with a Class B rating of 80 with allowable maximum travel distance of 50 feet from the hazard involved. Mount in an accessible and conspicuous location.

### **Special Hazard Protection (Grease and Combustible Metal):**

- { } Commercial Kitchen Hood System – One Class K fire extinguisher shall be placed within 30 feet of all grease cooking operations in a commercial kitchen. Protection of a multiple deep fat fryer appliance installation shall be as per Fire Code 904.11.5.2. Mount in an accessible and conspicuous location. Care shall be used to insure that the K Class extinguisher and not the other type of extinguishers will be used in the event of a grease fire involving cooking equipment. Multi-purpose fire extinguishers may compromise the effectiveness in wet chemical kitchen hood extinguishing systems.
- { } Hazards involving the ignition of Class D combustible metals such as magnesium, titanium, zirconium, sodium, lithium, and potassium shall be protected as per NFPA 10 standard for areas where combustible metal powders, flakes, shavings, chips, or similarly sized products are generated. Travel distance to a fire extinguisher/fire extinguishing agent shall not exceed 75 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.

See Fire Code Table 906.1 for additional specified areas for required fire extinguisher placement.

# Occupant Emergency Information

## GENERAL INFORMATION:

Business Name: \_\_\_\_\_

DBA/AFA/FKA: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite/Apt \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP+4: \_\_\_\_\_

\_\_\_\_ new construction, name change, or ownership change: \_\_\_\_\_

\_\_\_\_ a new occupant moving in and the previous occupant/business has moved out \_\_\_\_\_

\_\_\_\_ sharing the above address with another occupant/business by the name of: \_\_\_\_\_

Mailing Address (only if different than above): \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Generic E-mail: \_\_\_\_\_ Number of employees: \_\_\_\_\_

Senior Person: \_\_\_\_\_ Title: \_\_\_\_\_

Describe Property Use: \_\_\_\_\_

Hazardous Material: \_\_\_\_\_

Notes/Special Concerns: \_\_\_\_\_

Thomas Guide: \_\_\_\_\_ Cross Street: \_\_\_\_\_

City License/Permit #: \_\_\_\_\_ Zone \_\_\_\_\_ Fire Station #: \_\_\_\_\_

Water Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

## PROPERTY INFORMATION:

Landlord/Property Owner Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person Name: \_\_\_\_\_ Title: \_\_\_\_\_

Occupancy Code: \_\_\_\_\_ Roof Type: \_\_\_\_\_ SQFT: \_\_\_\_\_ Stories: \_\_\_\_\_ High Piled: \_\_\_\_\_ Fire Sprinklers: \_\_\_\_\_

Basement: \_\_\_\_\_ Target Hazard: \_\_\_\_\_ HM Handler: \_\_\_\_\_ FD Permit: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION: (24 Hour number – usually home phone)

1st Person to contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

2nd Person to contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

3rd Person to contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Alarm Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**(Sample Statement of Intended Use Letter)**  
**MUST BE TYPEWRITTEN**

Big Ben Furniture Company  
1000 South Anyplace  
Your City, CA 00000

April 26, 2002

To Whom It May Concern:

The following information is in answer to your request regarding the business operation to be conducted at the above address.

1. Operations conducted in the building are as follows:
  - a) Upholstery – manufactures loose cushions for wood and metal furniture as well as some fully upholstered furniture.
  - b) Plastic furniture – manufacture plastic furniture out of extruded plastic tubing. Operations include cutting, thermoforming and assembly.
  - c) Spray painting – painting of all necessary items. All spray painting to take place in spray booth.
  - d) Warehousing of wood and metal furniture components.
  - e) General office activities.
2. See attached plot plan.
3. Materials to be stored include the following.
  - a) Metal and wood furniture frames stacked upon themselves
  - b) Wood furniture parts palletized.
  - c) Upholstery materials in racks 6 feet high.
  - d) Plastic tubing and furniture parts in racks 6 feet high.
4. Materials are stored both in racks, on pallets, and free standing. Maximum height of storage is 10 feet.
5. No alterations are planned at this time.

Sincerely,

John J. Jones  
President

JJJ:ab

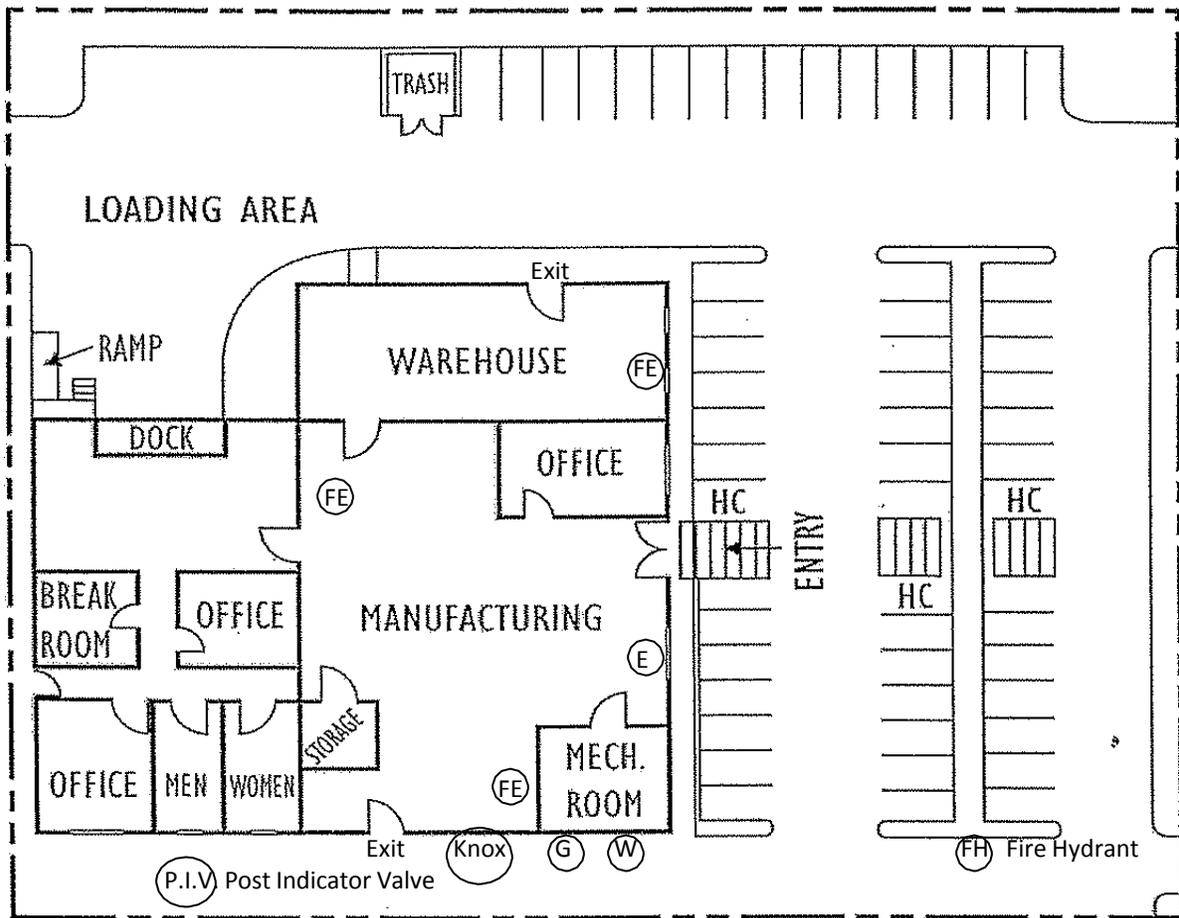
# County of Los Angeles Fire Prevention Division

## Floor Plan Example

Please submit an 8 1/2" x 11" site plan and floor plan for your site. The plan needs to show site layout, size, and location on property: both in square feet, cross streets, parking and storage areas. The floor plan needs to indicate how the interior floor plan will be used. If you are sharing the space with others, please indicate how the space will be divided. Show all exit doors, fire extinguishers, fire hose cabinets, special fire, or life safety systems. This will be used for both the Use Permit requirement and Los Angeles County Fire Department requirement. Please see example below:

Big Ben Furniture Company  
 12345 Gale Avenue, City of Industry

Gale Avenue



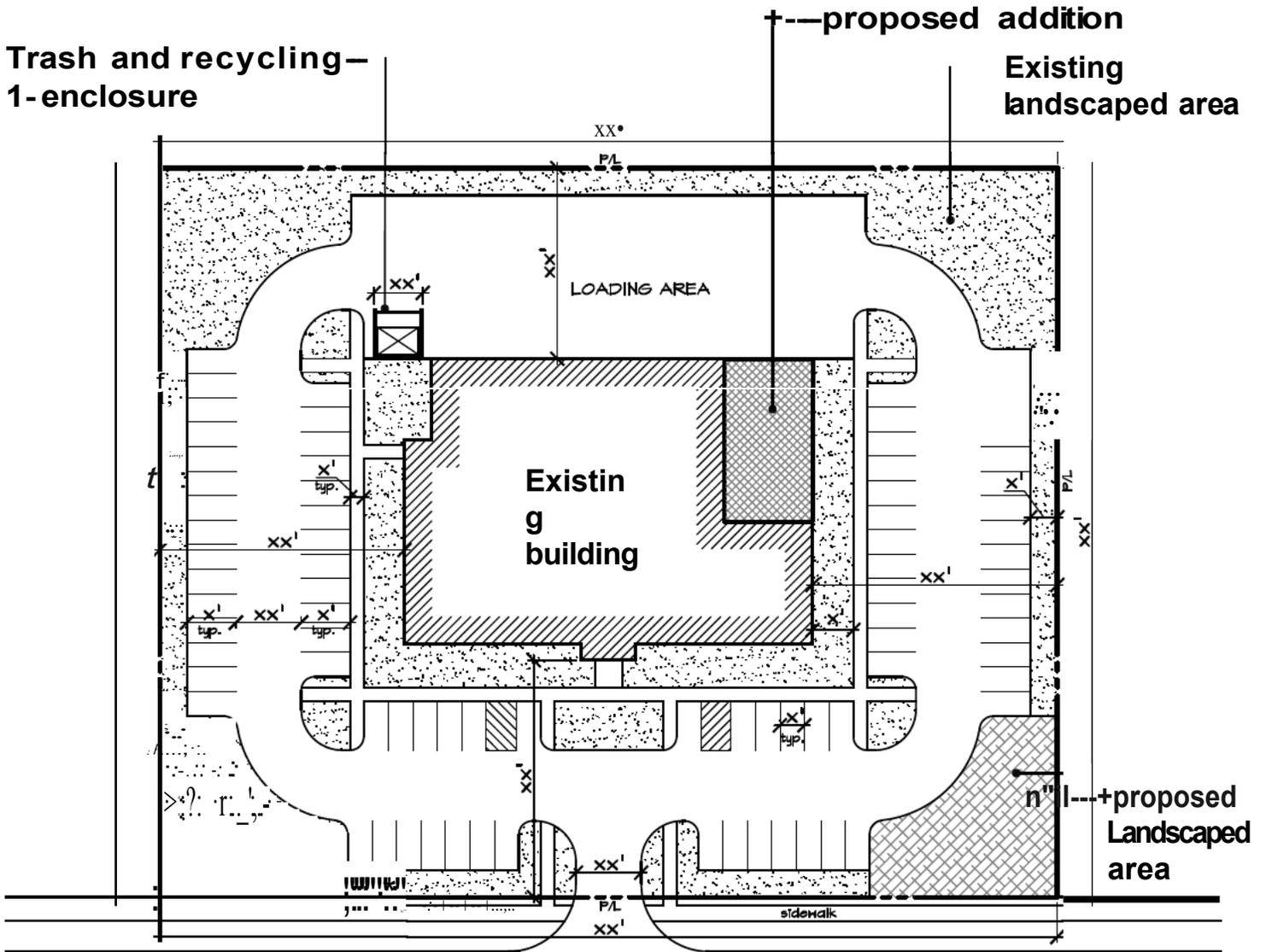
- (G) Gas Shut-Off
- (FE) Fire Extinguisher
- (Knox) Access Keys
- (W) Water Shut-Off
- (E) Electrical Panel
- (FH) Fire Hydrant

### Gross Building Area:

Office	12,600 SF
Manufacturing Area:	12,600 SF
Warehousing Area:	6,825 SF
<b>Total Area:</b>	<b>32,025 SF</b>

# Fire Prevention Division - Industry

## Example Site Plan



### LEGEND

#### SITE PLAN DATA

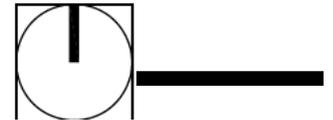
TOTAL SITE AREA:	XX AC
Existing BUILDING AREA:	XX AC
PROPOSED BUILDING AREA:	XX AC
TOTAL Building AREA:	XX%
REGIRED BUILDING/LOT RATIO:	XX%
PROPOSED BUILDING/LOT RATIO:	

#### LANDSCAPE DATA

TOTAL LANDSCAPED AREA:	XX AC.
REGIRED LANDSCAPE RATIO:	XX%
PROPOSED LANDSCAPE RATIO:	XX%

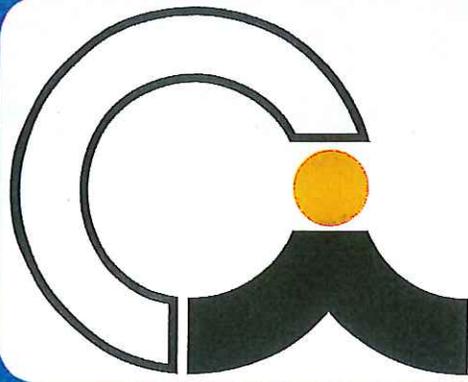
#### PARKING DATA

TOTAL PARKING REQUIRED:	
TOTAL PARKING PROVIDED	XX SPACES XX SPACES



#### NOTE:

This is an example of the minimum information required on site plans submitted in conjunction with applications for development. Failure to provide the necessary information may result in the rejection of applications and time delays. In some instances such as minor interior modifications, staff may waive the requirements to provide some information that is not relevant to the proposal however this may only be determined by planning staff prior to application submittal. It is strongly advised that all applicants meet with planning staff prior to submittal to review the proposed project and submittal requirement. Ten minutes can save a lot of time and expense.



# CITY OF INDUSTRY

## Commercial Recycling and Use Permit Policies

*This brochure provides a summary of the requirements for commercial recycling, electronic waste, and generator permits in the City of Industry. In addition, the back page of this brochure provides information about the city use permits (or "business license") required to establish any business in the City of Industry.*

### MANDATORY COMMERCIAL RECYCLING

#### Background

- In 1989, the State of California enacted the Integrated Waste Management Act (AB 939), which requires all municipalities to develop and implement programs aimed at diverting waste from landfills by 50% by the year 2000.
- In 2011, Governor Brown signed into law a mandatory commercial recycling bill (AB 341), requiring all businesses that generate at least four cubic yards of waste per week to implement a commercial recycling program in an effort to reach the goal of 75% recycling by the year 2020.
- These acts require that each jurisdiction in California implement a mandatory commercial recycling program consisting of: (1) education and outreach to explain the recycling requirements and methods, and (2) monitoring to identify businesses that are not meeting their requirement to recycle and to inform them of recycling requirements.

#### Requirements

In response, the City of Industry City Council updated Chapter 8.20 of the Industry Municipal Code. Chapter 8.20 covers all entities that engage in the generation, collection, conveyance, salvage, or transportation of any solid waste, semi-solid waste, or recyclable material from any location within the City. Chapter 8.20 requires those entities to obtain a permit from the City and adhere to the requirements of the ordinance.

Chapter 8.20 requires businesses within the City of Industry to:

1. Obtain a **Solid Waste Generator Permit**; and
2. Identify the recycling method that the business chooses to employ.

*More details about this two-step process are included on the following page.*

**More information about recycling, please contact the program consultant:**

Waste Systems Technology, Inc. • Jeff Duhamel • (562) 432-3700 • JD@WasteSystemsTech.com

Visit the City of Industry's website at [www.cityofindustry.org](http://www.cityofindustry.org)  
to review the Municipal Code or obtain applications.

## CITY OF INDUSTRY COMMERCIAL RECYCLING REQUIREMENTS

***Chapter 8.20 requires businesses within the City of Industry to follow two steps to ensure their commercial recycling complies with city and state requirements.***

### **Step 1: Obtain a Solid Waste Generator Permit.**

- Each business that generates at least four cubic yards of solid waste per week, or chooses the "Recyclable Materials Collector Option" below, must obtain a **Solid Waste Generator Permit** by submitting a **Solid Waste Generator Permit** application, available at City Hall and on the City's website at <http://www.cityofindustry.org> (Form 104).
- You will not be charged a fee to apply for a **Solid Waste Generator Permit**.
- Your **Solid Waste Generator Permit** application will be reviewed within 30 days. If your application is incomplete, you will be advised in writing about what additional information or material is needed to complete your application.
- The **Solid Waste Generator Permit** must be updated if there is any change in the location of your business, contact personnel, or types of recyclable materials generated.

### **Step 2: Choose between three options for the collection of recyclable materials generated at the site.**

1. **Regular Solid Waste Disposal Option** – The generator may include the recyclable materials with the normal solid waste disposal through Valley Vista Services, the City's franchised collector. Valley Vista will separate, recycle, and prepare the required monthly reports. ***Should a generator not indicate a preference, this option will be the default program.***
2. **Self-Haul Option** – The generator may obtain a **Self-Haul Permit** and assume responsibility for placing the recyclable materials in bins, hauling the materials, and preparing the required monthly reports. Self-haulers must obtain a **Self-Haul Permit** from the City.
3. **Recyclable Materials Collector Option** – The generator may hire one of the City's permitted collectors to recycle the material and prepare the required monthly reports. Contact Waste Systems Technology for a list of permitted commercial recyclers. All diversion, including cardboard, synthetics, fibrous materials, plastics, wood, construction materials, food waste or organic waste, must be reported to the City via the recycling permit program. Each recycler is required to obtain a **Recycling Permit** and submit monthly reports indicating the type and quantity of materials recycled. Each generator that selects the recyclable materials collector option must place the recyclable materials in approved bins. (Please note that failure to procure necessary permits and comply with the reporting requirements of Chapter 8.20 may result in legal actions against the recycler.)



# CITY OF INDUSTRY

Incorporated 1957

## SOLID WASTE GENERATOR REGISTRATION - (Form 104)

### GENERATOR INFORMATION: (PLEASE TYPE OR PRINT)

\*Company Name: \_\_\_\_\_

\*Site Address: \_\_\_\_\_ \*City: City of Industry State: California

\*Zip Code: \_\_\_\_\_

\*Mailing Address: \_\_\_\_\_ \*City: \_\_\_\_\_ \*State: \_\_\_\_\_

\*Zip Code: \_\_\_\_\_

\*Primary Contact: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Email: \_\_\_\_\_ \*Title: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Title: \_\_\_\_\_

**\* Required Information**  *I opt-out of receiving City of Industry official information via email.*

- Does your location have an existing “Commercial Recycling Program” serviced by a collector?  **Yes**  **No**
- Does your location have an existing “Organics Recycling Program” serviced by a collector?  **Yes**  **No**
- If you answered yes to either 1 or 2 above, please identify your collector(s): \_\_\_\_\_  
(Then check the option “C” below)
- If you answered “NO” to either 1 or 2, please identify either option “A” or “B” for managing your recyclable materials.

Chapter 8.20 of the City of Industry Municipal Code requires that **each business** located in the City **register** as a solid waste generator (trash/rubbish/refuse) and choose between the three options below (A, B, or C) for the collection of recyclable materials generated on site.

**Please indicate your preferred option for managing recyclables:**

- A) Solid Waste Option** – The generator may include the recyclable materials with their solid waste disposal through Valley Vista Services. Valley Vista will separate, recycle, and prepare the required reports.
- B) Self-Haul Option** – The generator may obtain a self-haul permit and assume full responsibility for placing the recyclable materials in approved bins, hauling the materials, and preparing the required monthly reports. Self-haulers must obtain a Self-Haul Permit from the City and haul the recyclable materials to a registered recycling facility.
- C) Recyclable Collector Option** – The generator may contract with one of the City’s permitted collectors to recycle the material(s) per the requirements of chapter 8.20 of the I.M.C.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please remit via fax to: (866) 963-0137, or email: [info@WasteSystemsTech.com](mailto:info@WasteSystemsTech.com), or  
Mail to: City of Industry, P.O. Box 3366, City of Industry, California 91744-0366



# The TO DO LIST

## Complying with the Industrial General Permit for Storm Water Associated with Industrial Activities ([2014-0057-DWQ<sup>1</sup>](#))

**What is this permit?** The Industrial General Permit regulates industrial storm water discharges and authorized non-storm water discharges from industrial facilities in California. The Industrial General Permit is called a general permit because many industrial facilities are covered by the same permit, but comply with its requirements at their individual industrial facilities. The State Water Resources Control Board (State Water Board) and Regional Water Quality Control Boards (collectively, the Water Boards) implement and enforce the Industrial General Permit.

**Who needs this permit?** Industrial facilities such as manufacturers, landfills, mining, steam generating electricity, hazardous waste facilities, transportation with vehicle maintenance, larger sewage and wastewater plants, recycling facilities, and oil and gas facilities that do not qualify for an exemption. See Attachment A of the permit for a complete list of facilities covered by the Industrial General Permit.

### Water Board Contact Information

Storm Water Section  
PO Box 1977  
Sacramento, CA 95812-1977

#### General Storm Water Questions:

Email: [stormwater@waterboards.ca.gov](mailto:stormwater@waterboards.ca.gov)  
Phone: 1-866-563-3107  
Fax: (916) 341-5543

### Key Terms

**Best Management Practices** – Techniques, measures, or structural controls used to manage the quantity and improve the quality of storm water runoff, in this case, from an industrial facility.

**Storm Water Pollution Prevention Plan**- The document that lays out how an industrial facility will meet the permit's requirements and achieve the goal of keeping storm water clean.

**No Exposure Certification (NEC)** – If an industrial facility does not have industrial activities or materials that are exposed to storm water, it may qualify for a conditional exclusion from specific permit requirements by submitting a No Exposure Certification and other required documents in SMARTS.

### Storm Water Multiple Application And Report Tracking System ([SMARTS<sup>2</sup>](#))

**Qualifying Storm Event** – A storm event that produces a discharge for at least one drainage area and is preceded by 48 hours with no discharge from any drainage area at the industrial facility.

**Qualified Industrial Storm Water Practitioner (QISP)** – A professional who has completed a State Water Board-approved training course who is required to assist dischargers in Level 1 or Level 2 status or new dischargers that will discharge to a water body with a 303(d) listed impairment with permit compliance.

### DEADLINES



Dischargers applying for general permit coverage must file the required documents by July 1, 2015. If you currently have a permit, you must re-enroll by July 1, 2015. Dischargers filing for NEC coverage must submit the required documents on or before October 1, 2015.

Submit first annual report via SMARTS no later than July 15, 2016.

Submit sampling results via SMARTS within 30 days of obtaining lab results.

If you made significant revisions to your SWPPP, report these changes via SMARTS within 30 days. Report any non-significant revisions at least once every three months. SWPPP updates are required to be uploaded in SMARTS, at least once a quarter.

<sup>1</sup> [http://www.waterboards.ca.gov/board\\_decisions/adopted\\_orders/water\\_quality/2014/wqo2014\\_0057\\_dwq.pdf](http://www.waterboards.ca.gov/board_decisions/adopted_orders/water_quality/2014/wqo2014_0057_dwq.pdf). You are responsible for reviewing the requirements set forth in the permit. This document does not provide an exhaustive summary of the permit's requirements.

<sup>2</sup> <https://smarts.waterboards.ca.gov/smarts/faces/SwSmartsLogin.jsp>



### MONITORING

<input type="checkbox"/>	Monthly visual observations – Have you conducted observations each month to identify the presence of any unauthorized non-storm water discharges, assess the effectiveness of your BMPs, and observe all potential sources of industrial pollutants? Have you documented these observations?
<input type="checkbox"/>	Have you sampled the storm water leaving the industrial facility, visually observed the discharge, and sent the samples to a lab? Every year you must sample: 2 QSEs within the first half of each reporting year (July 1 to December 31), and 2 QSEs within the second half of each reporting year (January 1 to June 30).
<input type="checkbox"/>	Have you kept monitoring documentation on your site and reported the sampling data via SMARTS?



### STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

<input type="checkbox"/>	Do you have a SWPPP developed and stored at the industrial facility?
<input type="checkbox"/>	Have you submitted your SWPPP via SMARTS?
<input type="checkbox"/>	Have you developed a site map and submitted it in SMARTS?
<input type="checkbox"/>	Does the SWPPP describe your pollutant source assessment, minimum BMPs, and other advanced BMPs at your site?
<input type="checkbox"/>	Have you trained employees at your industrial facility on sampling and storm water BMPs?



### RECERTIFICATION AND ENROLLMENT – SMARTS

<input type="checkbox"/>	To enroll in this permit, you must pay the annual fee and submit the following permit registration documents via SMARTS: -Completed notice of intent form and signed certification statement; -SWPPP; and -Complete and updated site map.
<input type="checkbox"/>	To apply for NEC coverage, you must pay the annual fee and submit the following permit registration documents via SMARTS: -Completed NEC form and signed certification statement; -Completed NEC checklist; and -Complete and updated site map.
<input type="checkbox"/>	If you have coverage under the old permit, you need to re-enroll under the new Industrial General Permit by July 1, 2015 because the permit has changed. To re-enroll, you must: -Obtain a Secret Code Number from the State Water Board and recertify the facility's notice of intent; and -Submit your SWPPP and facility site map in SMARTS.



### OTHER INFORMATION

<input type="checkbox"/>	Annual Fee – Have you paid your invoice? (invoices are sent out to the industrial facility by U.S. mail)
<input type="checkbox"/>	Did you compare your sampling data to the numeric action levels in the permit? If your results indicate an exceedance of a numeric action level, you must take exceedance response actions. Baseline – All industrial facilities start here. Level 1/Level 2 – If your results exceed the numeric action level, you must select a QISP to assist with conducting a facility evaluation and completing the necessary exceedance response action reports.



# South Coast Air Quality Management District

21865 Copley Drive, Diamond Bar, CA 91765-4182  
(800) 388-2121 • [http:// www.aqmd.gov](http://www.aqmd.gov)

## Air Quality Permit Checklist

California Government Code Section 65850.2 prohibits cities from issuing an occupancy permit to a business without clearance from the local air quality agency. This Checklist will determine if you need to obtain clearance from the South Coast Air Quality Management District (SCAQMD).

Company Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax Number: \_\_\_\_\_ e-mail address: \_\_\_\_\_

Applicant (print name): \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

- Will the facility have any of the following equipment? Yes  No

Charbroiler

Dry cleaning machine

Spray booth

Printing press (screen/lithographic/flexographic)

Internal combustion engine greater than 50 HP (excluding motor vehicles)

Boiler/combustion equipment (greater than 1 million BTU/hr. maximum input)

Abrasive blasting cabinet/room

Baghouse/cartridge-type dust filter/scrubber

Motor fuel storage and dispensing equipment

- Will any of the following operations be performed? Yes  No

Application of paints or adhesives

Etching, plating, casting, or melting of metals

Molding, extruding, or curing of plastics

Mixing and blending of liquids and/or powders

Storage of acids, solvents, organic liquids, or fuels

Production of fumes, dust, smoke, or strong odors

**If you answered “No” to both questions, this checklist is your clearance from SCAQMD.** If you answered “Yes” to either question, you must contact SCAQMD to determine if air quality permits are required. If permits are needed, SCAQMD will assist you in submitting permit application(s) and then provide you with a clearance letter. You can contact SCAQMD’s Small Business Assistance Office at **1-800-388-2121** or by email at: [smallbizassistance@aqmd.gov](mailto:smallbizassistance@aqmd.gov).

# FREE

## Help for Small Businesses

The South Coast Air Quality Management District has a team of engineers and inspectors specifically designated to help small businesses (100 or fewer employees or with annual gross revenues up to \$5 million) understand and comply with air quality rules and regulations.

### The Small Business Assistance team can help you:

- Understand the rules that apply to your business.
- Identify equipment that requires a permit.
- Apply for air quality permits.
- Properly keep required records.
- Make sure the coatings, inks, solvents, and other materials you are using meet SCAQMD rules.
- Seek a temporary variance from rules if needed.
- Apply for financial assistance for environmentally friendly dry cleaning equipment.
- Seek assistance with fee related issues.



### No Fault On-Site Inspections

For assistance, or a free on-site consultation,

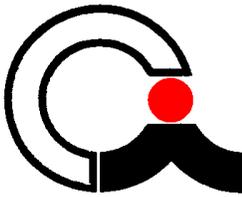
# Call 1-800-388-2121

Staff available Tuesday through Friday



South Coast Air Quality Management District  
[www.aqmd.gov](http://www.aqmd.gov)

*Cleaning the air that we breathe...™*



# INDUSTRY MANUFACTURERS COUNCIL

Chamber of Commerce for the City of Industry

15651 Stafford Street City of Industry, CA 91744-4497

(626) 968-3737 Fax: (626) 330-5060

[www.industrychamber.org](http://www.industrychamber.org)

## DIRECTORY LISTING INFORMATION FORM

All businesses in the City of Industry are included in a directory of businesses which is maintained by the Chamber of Commerce. The information provided on this form will be published in a printed and on-line version of the *City of Industry Business Directory*. Membership in the Chamber is not required and not implied by completion of this form.

DATE: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

CORPORATE OFFICER: \_\_\_\_\_ TITLE (C.E.O., PRES. ETC.): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PO BOX: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP+4: \_\_\_\_\_

DESCRIPTION OF BUSINESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MAIN INDEX CATEGOTRY (I.E., ADHESIVES, CHEMICALS, PLASTICS, ETC.)

\_\_\_\_\_

AREA OF PRODUCT DISTRIBUTION:

CNTY: \_\_\_\_\_ STATE \_\_\_\_\_ REG \_\_\_\_\_ NAT~~L~~ \_\_\_\_\_ IMPORT \_\_\_\_\_ EXPORT \_\_\_\_\_ INT~~L~~ \_\_\_\_\_

COMPANY HEADQUARTERS LOCATED: \_\_\_\_\_

(City and State)

MFG: \_\_\_\_\_ NON-MFG: \_\_\_\_\_ NUMBER OF BRANCHES: \_\_\_\_\_ NUMBER OF EMPLOYEES: \_\_\_\_\_

(This location only)