



Used Oil Payment Program Application Certification

El Dorado County

Fiscal Year: 2018-19

Cycle: OPP9

Program Requirements Summary

1) Public Resources Code 48691(a)(1)(2)

Provides a combination of used oil curbside collection and Ensuring Certified Used Oil collection center are available.

2) Public Resources Code 48691(b)

Our program has a public education component that informs the public of locally available used oil recycling opportunities.

3) Are you currently participating in mediation mandated by AB506, have attempted to initiate such mediation or have you declared a fiscal emergency within the last 12 months?

No

Acceptance of Used Oil Payment Program Provisions

Applicant acknowledges that submittal of this application constitutes acceptance of all provisions as contained in the Used Oil Payment Program Guidelines. The Guidelines document is available at:

<http://www.calrecycle.ca.gov/UsedOil/LGPayments/>

Payment Information

Payment Option: April Payment Requested: Standard payment request

Payment Address: County of El Dorado Environmental Management Depart , 2850 Fairlane Ct, Bldg. C, Placerville , CA 95667

Contact Type	Name	Title
Consultant	Joline Davison	Hazardous Materials/Recycling Tech
Primary	Mark Moss	Supervising Waste Specialist
Secondary	Barbara Houghton	Environmental Management Program Manager
Signatory Authority	Greg Stanton	Director

Document Type	Date*	Title
Resolution	5/25/2018	BOS Resolution
Application Certification		Pending Upload
Letter of Designation (LOD)		Pending Upload

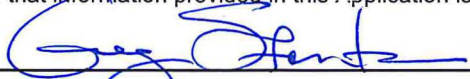
* Document Due Date: 07/26/2018

Participant Jurisdiction	Document Type	Date
City of Placerville	Letter of Authorization/Resolution	06/07/2018
City of South Lake Tahoe	Letter of Authorization/Resolution	06/07/2018

Penalty of Perjury Statement:

"I certify under penalty of perjury, under the laws of the State of California that I am authorized to sign this application on behalf of Applicant, that I have read the Used Oil Payment Guidelines and that to the best of my knowledge and belief that information provided in this Application is true and correct."

X


Signature of Signature Authority (as authorized in Resolution) or Authorized Designee (as authorized in Letter of Designation)

6/8/18
Date

GREG STANTON
Print Name

DIRECTOR
Print Title

IMPORTANT! Applicant must print out this page, obtain Signature of Signature Authority, upload signed document to the LoGOPP system, and retain the original document in Applicant's cycle file.