California Medical Waste Management Program
Small Quantity Generator with Onsite Treatment
Registration Application

Facility Name			County*
Address (number, street)	City	ZIP code	Telephone ( )
Mailing address (if different from above)	City	ZIP code	Fax ( )

*Consult with CDPH prior to applying if you are unsure if CDPH is the enforcement agency for medical waste in your county.

1. Type of Treatment

☐ Steam sterilization; include brand & model of sterilizer(s)

Brand: _____Model:_____ Related capacity/cycle: _____

Average Monthly Quantity of Waste Treated: _____

☐ Other treatment type; provide description _____

Alternative technology treatment methods approved by CDPH do not require an onsite treatment permit.

2. Type of Application

☐ New Registration ☐ Registration Renewal

☐ Transfer of Facility Ownership ☐ Registration Revision

3. Plan: For new registrations, provide a Medical Waste Management Plan, as requested in the Medical Waste Management Act (MWMA), Health and Safety Code (HSC) §117935(a-f).

The registration conditions include biennial inspection and compliance with storage and treatment procedures set forth in HSC §§117943,118215, 118275, & 118280.

I certify under penalty of perjury that the information contained in this application is true and accurate to the best of my knowledge and belief.

Authorized Representative	Title

Signature **Date**

The registration is valid for 2 years. Ninety (90) days prior to the expiration date, the applicant shall file for renewal of the registration. There is no fee for a registration revision or renewal, or for a transfer of ownership. The fee for a SQGOST registration is $100 (paid every 2 years).

Mail the application and fee (if applicable) to:

California Department of Public Health
Medical Waste Management Program
MS 7405
P.O. Box 997377
Sacramento, CA 95899-7377

Or courier to:

California Department of Public Health
Medical Waste Management Program
MS 7405
1616 Capitol Ave., 2nd Floor
Sacramento, CA 95814

Or Fax to: (916) 449-5665

Visit the website at http://www.cdph.ca.gov/certlic/medicalwaste or phone (916) 449-5671.