



## California Medical Waste Management Program HOME-GENERATED SHARPS CONSOLIDATION APPLICATION

Applicant Information	Transporter
Applicant	Name
Contact Person/ Title	Contact Person
Address	Address
Phone (     )                      FAX (     )	Phone (     )
Application Type <input type="checkbox"/> Pharmacy <input type="checkbox"/> Clinic <input type="checkbox"/> Hospital <input type="checkbox"/> Lab <input type="checkbox"/> Landfill <input type="checkbox"/> Household Hazardous Waste Facility <input type="checkbox"/> Transfer Station <input type="checkbox"/> Other _____	Hazardous Waste Registration Number

Site Name (if different from above)	Accept waste from <input type="checkbox"/> General Public <input type="checkbox"/> County <input type="checkbox"/> City <input type="checkbox"/> Members <input type="checkbox"/> Patients <input type="checkbox"/> Others _____
Address	
Contact Person/ Title	Days of Operation <input type="checkbox"/> 5 days/week <input type="checkbox"/> 7 days/week <input type="checkbox"/> Other _____
Phone (     )                      FAX (     )	
Type of Collection Unit <input type="checkbox"/> Kiosk <input type="checkbox"/> Wall-mounted <input type="checkbox"/> Mail-Back Sharp System: (Company) _____ <input type="checkbox"/> Other _____	
Description of Secured Storage Area:	

List this consolidation point on the CDPH website? <input type="checkbox"/> yes <input type="checkbox"/> no	Public Contact Phone:
---	-----------------------

<b>Applicant Signature</b>	Please notify the Department if you stop accepting home-generated sharps at an approved consolidation point.
PRINT NAME	TITLE
SIGNATURE _____	DATE _____

**\*NOTE:** If pick-up from the consolidation point is to be less frequent than once every thirty (30) days, this document will serve as a request that the Department approves less frequent service by the transporter. Department approval of this application is your authorization to extended storage.

The Board of Pharmacy does authorize pharmacies to accept the return of sharps waste in an approved sharps container.

For more information, the Medical Waste Management Act (California Health and Safety Code, Section 117600, et seq. is available at <http://www.cdph.ca.gov/certlic/medicalwaste>) states the operational requirements for Home-Generated Sharps Consolidation Points in Sections 117904 and 118147.

If you are a registered medical waste generator, the Medical Waste Management Act, Section 118147, provides a mechanism for your facility to accept home-generated sharps. Please contact your enforcement agency for more information.

Upon completion, mail this form to: **California Department of Public Health  
 Medical Waste Management Program, MS 7405  
 P.O. Box 997377, Sacramento, CA 95899-7377**

FOR DEPARTMENT USE ONLY			
Reviewed by	Date	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
		Reason:	