

CITY OF CHICO  
 BUTTE COUNTY ENVIRONMENTAL HEALTH DEPARTMENT  
**HAZARDOUS MATERIALS AND EMISSIONS QUESTIONNAIRE**  
 (A BUILDING PERMIT CANNOT BE APPROVED WITHOUT THIS COMPLETED FORM)

PROJECT ADDRESS \_\_\_\_\_ A.P. # \_\_\_\_\_ BLDG. PERMIT # \_\_\_\_\_  
 FIRM NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_  
 NATURE OF BUSINESS \_\_\_\_\_  
 CONTACT PERSON \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

1. Does your business or that of your tenants handle, store, or transport hazardous materials? NO ( ) YES ( )

**NOTE:** Hazardous materials are 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 or to the environment if released into the workplace or the environment. "HAZARDOUS MATERIALS" include, but are not limited to: hazardous chemicals, hazardous waste, paints, oils, lubricants, fuels, flammables, combustibles, corrosives, gases, and any material which a handler or the administering agency has a reasonable basis for believing to be injurious to the health and safety of persons or harmful to the environment if released.

2. Do you or will your future tenants handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at standard temperature or pressure), of formulation containing hazardous material? NO ( ) YES ( )

If you answer YES to 1 or 2, contact the Butte County Environmental Health Department at (530) 891-2727 for a review of the project.

3. Is the business/facility/operation to be located within 1,000 feet of the outer boundary of a school or a school site? NO ( ) YES ( )

IF YES, Name of school: \_\_\_\_\_

4. Does the business/facility/operation have the potential to emit any air pollutants: e.g. dust, soot, odors, fumes, vapors, or other volatile compounds? NO ( ) YES ( )

IF YES, contact the Butte County Air Quality Management District at (530) 891-2882 for permit requirements.

Owner or Authorized Company Representative \_\_\_\_\_ Date \_\_\_\_\_

BCEHD	BCAQMD	
<input type="checkbox"/>	<input type="checkbox"/>	The applicant has met or is meeting the applicable requirements of Section 25505, 25533, and 25534 of the Health and Safety Code and the requirements for a permit from the Butte County Air Quality Management District.
<input type="checkbox"/>	<input type="checkbox"/>	The above regulations <b>DO NOT</b> apply to this facility.

BCEHD Signature \_\_\_\_\_ Date \_\_\_\_\_

BCAQMD Signature \_\_\_\_\_ Date \_\_\_\_\_