CIWMB 1000

NOTICE OF DESIGNATION OF LOCAL AGENCY (14CCR SECTION 18051)

		(Name of Agency		
		(Street Address))	
(City)		(State)		(Zip)
		(Date)		
: CALIFORNIA INTEGRATED WASTE M	IANAGEMENT BOA	ARD		
EASE TAKE NOTICE that the				has
en designated as the local agency in:	(Name of	f Local Agency)		
(County, City, or Special District)		on	(Date)	
			(Date)	
Attached is a sheet listing additional juris	sdictions:			
1.The designation was made in accordance v	with California Public	Resources Code	Section 43203, usin	g the following procedure:
a. The local agency was designated by which contain a majority of the pop				najority of the cities within the cour
b. A joint exercise of powers agreement Code Section 43203(b);	nt pursuant to Goverr	nment Code Section	n 6500 was formed	as referenced in Public Resources
c. The local agency was designated by designate a separate enforcement ag	thegency;	(City)	since the city has	decided to
d. The County Board of Supervisors d	esignated the local ag	gency for the uninc	corporated areas of	the county.
2. The above designation ☐ (is) ☐ (is not) Waste Management Plan.) in specific accordan	ce with the design	ation indicated in th	ne County-wide Integrated
3. The following are exceptions to our territoridentifying the jurisdictional boundaries)	orial jurisdiction show	vn in the first para	graph of this NOTI	CE: (Please include a map clearly
4. The name and address of the governing be	ody of this local agen	cy is:		
		(Name)		
(Street Address)	(City)		(State)	(Zip Code)
(Telephone Number)				

(Name (s))						
(Street Address)	(City)	(State)	(Zip Code)			
()	<u></u>					
(Telephone Number)						
6. The person responsible for direct	ion or management of the local ag	ency and its designated persons are:				
	(Name of Local Enforcer	nent Agency Program Manager)				
(Telephone Number)						
(Name of Contact Person)						
(Telephone Number)						
	ents relevant to compliance with Po 18052 have been certified and are	ublic Resources Code Section 43203, enclosed.	and Title 14 California Code of			
8. The undersigned certifies that the solid waste facility, or disposal s		e operating unit for any solid waste ha	ndling or disposal operation,			
9. Attached is a listing of every per agency jurisdiction.	mitted, closed, abandoned, exempt	, illegal, and inactive solid waste facil	lity and disposal site in the loc			
gned by:						
(Local Governing Body or Authoriz	ed Representative)					
(Typed or Printed Name)						
(Title)						

NOTE: New information necessary to update the contents of this form, other than the designated agency or its jurisdiction, may be provided in letter format. Local governing body signature is not required for minor change(s).