



# FIRE DEPARTMENT SANTA CLARA COUNTY

14700 Winchester Blvd., Los Gatos, CA 95032-1818  
(408) 378-4010 • (408) 378-9342 (fax) • www.sccfd.org

## HAZARDOUS MATERIALS DISCLOSURE

PLEASE ANSWER ALL QUESTIONS ON THIS SIDE OF THE FORM, FOR THE PROJECT LOCATED AT, \_\_\_\_\_, AND RETURN TO THE BUILDING DEPARTMENT 3 DAYS FROM \_\_\_\_\_, AT WHICH TIME THE FIRE DEPARTMENT WILL BEGIN THEIR PLAN CHECK. INCOMPLETE, INCORRECT, OR CONFLICTING INFORMATION WILL DELAY PROCESSING. COPIES OF ALL CODE REFERENCES STATED BELOW ARE AVAILABLE FOR REVIEW AT THE BUILDING AND FIRE DEPARTMENTS; QUESTIONS CONCERNING THIS FORM MAY BE ADDRESSED TO THE, HAZARDOUS MATERIALS DIVISION OF THE SANTA CLARA COUNTY FIRE DEPARTMENT AT (408) 378-4010.

PLEASE PRINT OR TYPE:

1. Dear Business owner: All business owners are required to submit a Hazardous Materials Disclosure form for each business location in the City, in order to allow for Fire Department review and recommendations or requirements, to mitigate potential hazards. If not completed by the business owner, see the bottom paragraph.

Occupant's Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Occupant's Facility Address: \_\_\_\_\_

Occupant's Mailing Address: \_\_\_\_\_

Nature of Occupant's Business: \_\_\_\_\_

2. Will the applicant, or future building occupant, store or handle a Hazardous Materials, as defined by the Morgan Hill Municipal Code, Chapter 8.40?

Yes  No

3. Will the applicant, or future building occupant, handle a Regulated Substance, as defined in Health and Safety Code Section 25532(g)?

Yes  No

Santa Clara County Health Dept. (408) 918-3400  
Hazardous Materials Compliance Division  
1555 Berger Dr, Bldg 2, 3<sup>rd</sup> Floor  
San Jose, CA 95112

4. Will the applicant, or future building occupant, use equipment or devices that emit hazardous air contaminants as defined by the Bay Area Air Quality Management District (BAAQMD)?

Yes  No

BAAQMD - (415) 749-4990  
939 Ellis Street  
San Francisco, CA 94109

6. In the case of tenant improvements, list the name and telephone number(s) of all other occupants at the facility address listed in #1.

I UNDERSTAND THE PROVISIONS OF CHAPTER 6.95 OF THE CALIFORNIA HEALTH & SAFETY CODE, SECTIONS 25505, 25535, AND 25536. I UNDERSTAND THAT IF THE BUILDING DOES NOT CURRENTLY HAVE A TENANT, THAT IT IS MY RESPONSIBILITY TO NOTIFY THE OCCUPANT OF THE REQUIREMENTS THAT MUST BE MET PRIOR TO ISSUANCE OF A CERTIFICATE OF OCCUPANCY, AND MAINTAINED THEREAFTER. I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING INFORMATION IS TRUE, CORRECT, AND COMPLETE.

BUSINESS OWNER: (Print) \_\_\_\_\_  
(or Business Safety Coordinator)

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

Organized as the Santa Clara County Central Fire Protection District

Serving Santa Clara County and the communities of Campbell, Cupertino, Los Altos,  
Los Altos Hills, Los Gatos, Monte Sereno, Morgan Hill, and Saratoga

**\*\*OFFICE USE ONLY\*\***

ROUTE TO: Santa Clara County Fire Department  
Attn: Hazardous Materials Specialist  
14700 Winchester Blvd.  
Los Gatos, CA 95032  
(408) 378-4010 (408) 378-9342 fax

COMMENTS:

- \_\_\_\_\_ Hazardous Materials Business Plan (HMBP) approval required, prior to issuance of final occupancy clearance.
- \_\_\_\_\_ California Accidental Release Program (CalARP) approval required by the County Health Department's Hazardous Materials Compliance Division, prior to issuance of the "Certificate of Occupancy".
- \_\_\_\_\_ Permits and approvals are required by Bay Area Air Quality Management District (BAAQMD), prior to issuance of the "Certificate of Occupancy".

Okay to issue? \_\_\_\_\_ (YES) \_\_\_\_\_ (NO)

ADDITIONAL COMMENTS:

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REVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**APPLICANT RETURN TO:** City of Morgan Hill  
Attn: Building Division  
17555 Peak Avenue  
Morgan Hill, CA 95037

CITY OFFICE HOURS: 8 - 12 NOON; 1 - 4 PM, MONDAY - FRIDAY