



NORTHERN NEVADA PUBLIC HEALTH  
 ENVIRONMENTAL HEALTH SERVICES DIVISION 1001  
 East Ninth Street, Bldg B, Reno, Nevada 89512  
 Telephone (775) 328-2434 • Fax (775) 328-6176

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**GARBAGE EXEMPTION SUPPLEMENTAL  
 QUESTIONNAIRE**

**THIS QUESTIONNAIRE MUST BE COMPLETED FOR "A" or "E" GARBAGE EXEMPTIONS:**

A - There is no garbage produced or stored upon the property.

E - The property meets vacancy adjustment requirements per City of Reno Municipal Code, City of Sparks Municipal Code or Washoe County Code.

1. Why should you be exempt from the mandatory garbage service requirement?

\_\_\_\_\_  
 \_\_\_\_\_

2. How many meals are eaten at home per week? \_\_\_\_\_

a. How are papers, cans, food products, etc. disposed of?

\_\_\_\_\_  
 \_\_\_\_\_

3. Do you compost?  Yes  No

a. Where? (Describe Location)

\_\_\_\_\_  
 \_\_\_\_\_

4. Do you recycle?  Yes  No

a. What items are recycled?

\_\_\_\_\_  
 \_\_\_\_\_

b. Where? (Describe Location)

\_\_\_\_\_  
 \_\_\_\_\_

5. Does this property have a lawn?  Yes  No

a. What is done with the grass clippings?

\_\_\_\_\_  
 \_\_\_\_\_

6. How is the small amount of trash during your visits/stays at this residence disposed of?

\_\_\_\_\_  
 \_\_\_\_\_

7. If applying for an "E" Exemption, submit utility bills (gas, electric, water) for the past 90 days (bills **must** indicate minimum usage).

Street Address:	Mailing Address:
City/State/Zip:	City/State/Zip:
Assessor's Parcel No:	Phone No:
Signature:	Date:

**If you have questions regarding this questionnaire, please call 328-2434.**

**FOR STAFF USE ONLY**

Reviewed/Inspected By:	Date:
Remarks: _____ _____	