

**County of Santa Clara
 Department of Environmental Health
 Hazardous Materials Compliance Division
 Solid Waste Programs**



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LIMITED QUANTITY HAULING EXEMPTION (LQHE) CONDITIONS AND FACILITY INFORMATION

This Limited Quantity Hauling Exemption (LQHE) Application applies pursuant to Health and Safety Code (HSC), Division 104, Part 14, Section 118030, if any facility personnel are authorized to transport regulated medical waste from the point of generation to a point of storage or treatment. Your facility must also be registered as a LQG or a SQG. LQHE is obtainable if the following conditions are met:

1. An agency that generates less than 20 pounds of medical waste per week per staff member, each of who transports less than 20 pounds of medical waste at any one time as specified in Section 118030.
OR
2. A healthcare professional whose practice generates less than 20 pounds of medical waste per week per staff member, each of who transports less than 20 pounds of medical waste at any one time as specified in Section 118030. **AND**
3. The practice or agency maintains a **tracking document** or **log sheet** with the required contents as specified in Section 118040. (See example.)
4. The generator or a designated staff member of your facility transports the medical waste to a permitted medical waste treatment facility, a permitted transfer station, or another point of consolidation as defined in Sections 118140 or 118145. Home health care facilities may accept medical waste only from their staff members operating under this exemption.
5. A copy of a current LQHE certificate, a staff list, and a **tracking document/log sheet, MUST** be in the specified employee's possession while transporting the medical waste.
6. The practice or agency notifies the Department of any changes in the information supplied on this form.
7. The practice or agency submits an annual fee along with this application.
8. Consolidation arrangements other than pick-up by a permitted medical waste transporter (such as deposit for consolidation with another facility not part of your organization) must be verified with a letter of acknowledgement from that facility. Please ensure that this letter includes the full name, address, and telephone number for the facility, as well as the name of a contact person, and submit a copy with this application.

Please complete and return the following:

Generator Information		Permitted Treatment Facility	
Name		Name	
Address		Address	
City, St., Zip		City, St. ZIP	
County		Transporter to Treatment Facility	
Phone	Fax	Name	Phone

Employees authorized to transport medical waste:	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

MEDICAL WASTE LOG SHEET EXAMPLE

(Per California Health and Safety Code Section 118030)

To be used by home agencies, private practices, or other professional health care facilities with a Limited Quantity Hauling Exemption (LQHE) approved by a county or state medical waste management program. No more than 20 pounds of medical waste may be transported at any time, and *only* by staff whose names were submitted along with the LQHE application. Storage of medical waste, except in a designated and/or approved storage area at the place of generation or consolidation, is *not* allowed under any circumstance. Completed log sheets must be kept on-site for at least three years along with tracking documents from the commercial medical waste transporter.

Name of health care agency		Phone	
Address	City	State	Zip

Container Type* - Amount (weight or volume) (e.g. sharps container, biohazardous waste etc.)	Sign Out By	Date Sign Out	Date Returned for Disposal
Ex.: One three gallon Sharps	John Doe, RN	Dec. 10, 2009	Jan. 10, 2010

***Enter one medical waste container per line on this tracking form, as per HSC Section 118030**