

PERMANENT STATE ID NUMBER APPLICATION

Please type or neatly print in ink. Please review the line-by-line instructions carefully.

To check on the status of your request, go to <http://www.hwts.dtsc.ca.gov> and click on Reports.**NEW NUMBER REQUESTS** Check all that apply.

(See instructions.)

- ☐ 1. I am applying for a new permanent California ID number as a hazardous waste: ☒ **Generator** ☐ **Transporter**

Reason for new number: A. ☒ **Never had a number** B. ☐ **Business moved** C. ☐ **Legal owner of business changed**

If your business generates greater than 100 kg of RCRA hazardous waste other than those hazardous waste listed in 40 CFR 261.5 subparts (c) and (d), per month, complete Form 8700-12 for an EPA (federal) ID number.

CHANGES TO STATUS OR INFORMATION FOR AN EXISTING STATE ID NUMBER

(See instructions.)

For existing ID number: C A

- ☐ 2. I am updating the mailing address and/or contact information only.
- ☐ 3. I am inactivating this ID Number.
- ☐ 4. I am reactivating this ID Number. Reason (please select one): A. ☐ **Verification Questionnaire** B. ☐ **Other**
- ☐ 5. I am changing the business name only, no ownership change.

6. Site/Facility/Business Name (Include DBA): LAGUNA SHOOTING CENTER (See instructions.)7. Site Location: 2220 KAUSEN DRIVE

ELK GROVE CALIFORNIA SACRAMENTO

City State Zip County

8. (a) Federal Employer ID Number 82-1453316 (b) Board of Equalization Fee Account Number SRKH 28-721081
(b) is only required from generators of greater than 5 tons per calendar year.9. Mailing Address: 2220 KAUSEN DRIVE (See instructions.)

ELK GROVE CALIFORNIA 95758

City State Zip

10. Site Contact Person: ANDREW TONIS (See instructions.)
First Name Last NameContact Person Address: 7390 POCKET ROAD

SACRAMENTO CALIFORNIA 95831

City State Zip

Contact Person Phone Number: (916) 832-1117 Fax Number: (916) 478-2893
Area Code Phone Number Area Code Fax NumberContact Person Business Email Address: LAGUNA GUN AND KNIFE @ GMAIL.COM Preferred Primary Communication: ☐ Mail ☒ Email11. Legal Business Owner (not property owner): ANDREW TONIS (See instructions.)
NameOwner Address: 7390 POCKET ROAD SACRAMENTO CA 95831

(916) 832-1117 (916) 478-2893

Area Code Phone Number Area Code Fax Number

12. Standard Industrial Classification (SIC) Code for the Site: _____ (4-Digit Number) (See instructions.)

13. Certification: I certify under penalty of law that the information on this document was prepared to the best of my knowledge and belief to be true, accurate and complete.

SIGNATURE [Signature] DATE 4/30/2018

NAME (print) ANDREW D. TONIS TITLE OWNER PHONE (916) 832-1117