



**COUNTY OF ORANGE  
HEALTH CARE AGENCY**

MAILING ADDRESS:  
1241 E. DYER ROAD STE 120  
SANTA ANA, CA 92702

TELEPHONE: (714) 433-6000  
FAX: (714) 433-6424

**ENVIRONMENTAL HEALTH**  
<http://ochealthinfo.com/eh>

**REQUEST FOR ENVIRONMENTAL HEALTH RECORDS  
INSTRUCTION SHEET**

**1. Complete the “Request for Environmental Health Records” form**

- ✓ Please **Print** all information on request forms.
- ✓ Describe the reason the records are being requested so that our staff may be able to narrow your search.
- ✓ If you require site-specific information, give the exact address of the site.
- ✓ If you are asking for information on multiple sites (for example, all sites on a street) you must give an address for each location (for example, 1001, 1003, 1009, etc.).
- ✓ Note that we cannot enter a “range” of addresses as search criteria.

**2. Complete the appropriate “Information Checklist” form**

- ✓ Check only the desired records associated with the site you have submitted.
- ✓ Remember that you will be charged for each page of copied records, so be sure to specify which records you want.
- ✓ Please note that lists of information can be very lengthy and therefore costly. You can ask about the length of the list before completing the request form to ensure a list is what you desire.

**3. Return the completed forms to the Custodian of Records Representative at 1241 E. Dyer Road, Ste. 120, Santa Ana, CA 92705.**

- ✓ Blank Records Request forms can be downloaded from the Records page on the Environmental Health website at <http://ochealthinfo.com/eh/home/records>.
- ✓ Please note that you can ask for an appointment to review multiple records.

**4. Most requests take approximately ten (10) days to process. However, if your request requires more processing time, we will notify you of the extension and the estimated date.**

**5. Upon completion of the search, we will notify you by phone or by mail. You may return to the Environmental Health office to pick up the requested records, or arrange to have them mailed to your address.**

**6. RECORDS THAT HAVE NOT BEEN PICKED UP WITHIN 60 DAYS OF NOTIFICATION WILL BE DESTROYED.**



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**REQUEST FOR ENVIRONMENTAL HEALTH RECORDS**

The undersigned hereby requests a copy of the records prepared and maintained by the Health Care Agency in the ordinary course of business, at or near the time of the act, condition, or event which they depict.

The records requested are maintained under the Public Records Act Government Code § 6250 – 6276.48. Some information held in the documents may be exempt from release pursuant to the Public Records Act.

The undersigned understands that the Health Care Agency will charge \$0.15 per page copied. In the case of a request for a large number of copies, the Health Care Agency may provide the requestor an estimate of copy costs prior to making said copies. If any request is to be canceled, this office must be notified at the above number within ten (10) days of receipt of request, otherwise cost incurred will be charged to the undersigned.

**In order to assist you, please describe the reason for your request:**

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**Please list addresses here (no more than 10 addresses per request):**

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**Check here if you would like a review only or to review before copies are made**

\_\_\_\_\_  
**SIGNATURE** of Requester

\_\_\_\_\_  
**PRINT** Name of Requester (and Company Name - if applicable)

\_\_\_\_\_  
**PRINT** Street Address

\_\_\_\_\_  
Area Code and Phone Number

\_\_\_\_\_  
**PRINT** City, State and Zip Code

\_\_\_\_\_  
**Date**

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**HAZARDOUS WASTE / OTHER PROGRAM INFORMATION CHECKLIST**

**Please check only the records you need.** This will enable us to search only the actual files that pertain to your request, cutting down time spent on searching for records that you may not want.

<b>Site Specific Information</b>	
<input type="checkbox"/>	Above Ground Petroleum Storage Tank File
<input type="checkbox"/>	California Accidental Release Prevention Program File
<input type="checkbox"/>	Certified Unified Program Agency (CUPA) records
<input type="checkbox"/>	*Hazardous Materials Business Plan File, Chemical Disclosure, Electronic Submittal
<input type="checkbox"/>	Complaints regarding Hazardous Waste or Underground Storage Tank Facility
<input type="checkbox"/>	Hazardous Waste Generator Facility File
<input type="checkbox"/>	Hazardous Waste Industrial Cleanup Site File
<input type="checkbox"/>	Hazardous Waste Spill Response Log (Emergency Incidents Log)
<input type="checkbox"/>	Leaking Underground Storage Tank Cleanup Site File
<input type="checkbox"/>	Medical Waste Facility Record
<input type="checkbox"/>	Proposition 65 Notification
<input type="checkbox"/>	Recycling Program
<input type="checkbox"/>	Solid Waste Facility File (large files – need to be specific)
<input type="checkbox"/>	Spill Prevention, Control and Countermeasure (SPCC) File
<input type="checkbox"/>	Tiered Permit Facility File
<input type="checkbox"/>	Underground Storage Tank File
<input type="checkbox"/>	Water Quality Information

<b>Available on Environmental Health Website</b>	
<a href="http://ochealthinfo.com/eh/home/reports">http://ochealthinfo.com/eh/home/reports</a>	
Aboveground Petroleum Storage Tank Listing	
Hazardous Waste Facilities Listing	
Industrial Cleanup Program Cases by City	
Local Oversight Program (LOP) Lead Cases	
Underground Tank Facilities Listing	

\*If requiring the Hazardous Materials Business Plan File, Chemical Disclosure, and Electronic Submittal for the following cities, please contact them directly: **Costa Mesa, Fountain Valley, Fullerton, Garden Grove, Huntington Beach, La Habra, Newport Beach and Orange.**