Food Recovery Partnership Form

What is SB 1383?

Senate Bill 1383 (Short-lived Climate Pollutants: Organic Waste Reductions) establishes targets to reduce organic waste disposal by 75% by 2025, and to increase edible food recovery by 20% by 2025. The California Department of Resources Recycling and Recovery (CalRecycle) requires cities and counties to implement a food recovery program and requires enforcement for non-compliance.

How to Complete This Form

This form is to be completed by both Commercial Edible Food Generators (Tier 1 and Tier 2) and Food Recovery Organizations. Use the table below to identify which sections your organization is required to complete:

Commercial Edible Food Generator	Food Recovery Organization
Section 1 Section 2	Section 3 Section 4

Important Information

Food Safety: All food recovery activities should be executed in compliance with all federal, State, and local regulations for safe food handling.

Donation Dumping: Knowingly providing unusable or inedible food, or intentionally delivering food outside of the agreed upon food recovery windows ("donation dumping") is unacceptable and grounds for intervention by the City of Oceanside.

Federal Tax Incentives: Charitable food donation is eligible for federal tax incentives and enhanced tax deductions, provided that donations meet eligibility criteria. Please seek legal counsel for tax filing and consult with your partnering food recovery organizations to obtain the necessary donation receipts required to claim any tax incentives and/or deductions.

Section 1: Commercial Edible Food Generator Information

This section should be completed by the business that will be providing food.

General Information

1. Please complete the following fields about your organization.

Organization Information

Organization name

_____

Street Address

_____

City _____ State _____ Zip Code _____

Primary Contact

First Name _____ Last Name _____

Email Address _____ Phone Number (___) ___ – ___

Title _____

Organization Type

- [ ] Supermarket
- [ ] Grocery Store
- [ ] Food wholesaler
- [ ] Food distributor
- [ ] Large food service provider

- [ ] Restaurant
- [ ] Fast-food or fast-casual dining
- [ ] Corporate cafeteria
- [ ] Hotel
- [ ] Hospital/ Health facility
- [ ] School
- [ ] State agency cafeteria
- [ ] Event venue
- [ ] Other

Organization Size

Business Square Footage _____ Number of Seats _____

Hours of Operation

Monday _____ Friday _____

Tuesday _____ Saturday _____

Wednesday _____ Sunday _____

Thursday _____

Food Donation Logistics

2. Indicate all of the potential types of food your business generates and can donate.

Category	Food Type	
Non-perishable food	Shelf stable packaged food (canned, boxed, packaged food)	☐
Perishable food	Fresh Produce (fruits, vegetables)	☐
	Dairy (milk, cheese, yogurt) and eggs	☐
	Meat, seafood	☐
	Bread, baked goods	☐
	Beverages (sparkling water, juice, coffee, soda)	☐
Prepared food	Hot prepared food	☐
	Cold prepared food	☐
	Frozen prepared food	☐
Other		☐
		☐
		☐
		☐

3. Approximately how much food is available for donation per week? *Please provide a range in pounds.*

Category	Range in Pounds
Non-perishable food	
Perishable food	
Prepared food	
Other	

4. My business can donate food on the following days and times:

Days and Times of Donation	
Monday	Friday
Tuesday	Saturday
Wednesday	Sunday
Thursday	

Section 2: Commercial Edible Food Generator Questionnaire

This section should be completed by the business that will be providing food.

Existing Food Recovery Relationships

1. Do you have any current food recovery relationships established?

☐ Yes

☐ No *(If No, please skip to Question #5)*

2. Please list each food recovery organization that is currently rescuing food from your business in the table below. If there are contracts or written agreements in place with these food recovery organizations, please email those contracts to [Recycle@sdcounty.ca.gov.](mailto:Recycle@sdcounty.ca.gov)

Food Recovery Organization	Contact Information *(name, email, phone number)*	Affiliation	Food Recovery Schedule *(pick-up days and times)*
		☐ San Diego Food Bank ☐ Feeding San Diego ☐ Food Donation Connection ☐ None of the above ☐ Unknown ☐ Other	
		☐ San Diego Food Bank ☐ Feeding San Diego ☐ Food Donation Connection ☐ None of the above ☐ Unknown ☐ Other	
		☐ San Diego Food Bank ☐ Feeding San Diego ☐ Food Donation Connection ☐ None of the above ☐ Unknown ☐ Other	
		☐ San Diego Food Bank ☐ Feeding San Diego ☐ Food Donation Connection ☐ None of the above ☐ Unknown ☐ Other	
		☐ San Diego Food Bank ☐ Feeding San Diego ☐ Food Donation Connection ☐ None of the above ☐ Unknown ☐ Other	

3. Do you have edible/excess food that is *not* currently being donated?

- [ ] Yes

- [ ] No

4. What are some of the reasons why this food is not being donated? *Please select all that apply*

- [ ] It isn't safe for donation

- [ ] I don't know whom to contact to pick it up

- [ ] The organization that usually recovers my extra food is not available on certain days of the week

- [ ] Other

5. What happens to food that is not being donated or recovered? *Please select all that apply*

- [ ] The food is processed into another product

- [ ] The food is disposed of in the brown food scraps bin

- [ ] The food is disposed of in the landfill bin

- [ ] Other

I hereby certify that the information provided in Sections 1 and 2 of this Food Recovery Partnership Form is true and correct to the best of my knowledge.

Signature
Commercial Edible Food Generator

Printed Name   Date

Section 3: Food Recovery Organization Information

This section should be completed by the Food Recovery Organization that will be recovering food from the Commercial Edible Food Generator listed in Sections 1 and 2 of this form.

General Information

1. Please complete the following fields about your organization.

Organization Information
Organization name
Street Address
City   State   Zip Code

Primary Contact
First Name   Last Name
Email Address   Phone Number (   )   −
Title

2. Please indicate the types of food your organization can recover:

Category	Food Type	
Non-perishable food	Shelf stable packaged food (canned, boxed, packaged food)	☐
Perishable food	Fresh Produce (fruits, vegetables)	☐
	Dairy (milk, cheese, yogurt) and eggs	☐
	Meat, seafood	☐
	Bread, baked goods	☐
	Beverages (sparkling water, juice, coffee, soda)	☐
Prepared food	Hot prepared food	☐
	Cold prepared food	☐
	Frozen prepared food	☐
Other		☐
		☐
		☐
		☐

Food Recovery Logistics

3. Approximately how much food can be recovered per week? *Please provide a range in pounds.*

Category	Range in Pounds
Non-perishable food	
Perishable food	
Prepared food	
Other	

4. Please indicate the possible days and times that food can be recovered from the Commercial Edible Food Generator. If you will establish food recovery on a regular, weekly basis, specify the days and time in the table below. If your organization is open to recovering food through an on-call basis, indicate the days and times you are available for on-call donations.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Possible days/ times							
Weekly pick-ups							
On-call avail-ability							

5. Food will be recovered via:

☐ **On-site pick-ups:** Your organization will travel to the Commercial Edible Food Generator site, pick-up the food, and transport it back for distribution

☐ **Self-haul:** The Commercial Edible Food Generator will transport and deliver the food to our organization

☐ Other

6. Total pounds of food per month collected from this Commercial Edible Food Generator will be reported back to the Generator on a monthly basis via:

☐ Email

☐ Other

Section 4: Food Recovery Organization Questionnaire

1. Please indicate which of the following food recovery equipment and supplies your organization already uses, and which items are an organizational need.

Note: If an item is currently in use but there is a need for additional units (e.g. cold storage—refrigerators), please mark both "In-Use" and "Need".

Equipment/Supplies	In Use	Need
Cold storage (refrigerators)	☐	☐
Cold storage (freezers)	☐	☐
Vehicles / Trucks (refrigerated)	☐	☐
Vehicles / Trucks (not refrigerated)	☐	☐
Forklift / pallet jacks	☐	☐
Food Recovery supplies (boxes, crates, tote bags, etc.)	☐	☐
Food packaging supplies	☐	☐
Food preserving supplies	☐	☐

2. For the equipment and supplies identified as being used by your organization: *Please select all that apply*

☐ Owned by our organization

☐ Rented/borrowed from another organization

☐ Granted through the San Diego Food Bank/Feeding San Diego

☐ Other

3. For the equipment and supplies identified as needed by your organization, what are some of the barriers that make them hard to acquire? *Please select all that apply*

☐ Finances: We don't have funding to purchase or rent certain equipment

☐ Storage: We don't have space to keep them

☐ Maintenance: We don't have the resources to keep up with the maintenance required

☐ Other

4. I hereby certify that the information provided in Sections 3 and 4 of this Food Recovery Partnership Form is true and correct to the best of my knowledge.

Signature

Printed Named   Date

Food Recovery Organization

Section 5: For County of San Diego Use Only

1. Commercial Edible Food Generator — SB1383 Tier Identification

Tier 1	Tier 2
☐ Grocery Stores (≥ 10,000 sq.ft.) and Supermarkets	☐ Restaurant Facilities (≥ 5,000 sq.ft or 250+ seats)
☐ Wholesale Food Vendors	☐ Health Facilities (with on-site food facility and 100+ beds)
☐ Food Distributors	☐ Hotels (with on-site food facility and 200+ rooms)
☐ Food Service Providers	☐ State Agency Cafeterias (≥ 5,000 sq.ft or 250+ seats)
	☐ Large Venues and Events
	☐ Local Education Agencies (with on-site food facility)

2. Form Completion Status

☐ Complete

☐ Incomplete

3. Follow-up Inspection Needed?

☐ Yes

    ☐ Scheduled Inspection: _____

☐ No

4. Food Recovery Gaps

5. Follow-up Strategy