RECEIPT

DATE 7/6/26 **No.** 735838

RECEIVED FROM Bio-Haz Solutions, Inc. $ 350.00

Three hundred fifty and 00/100 ———— DOLLARS

○ FOR RENT

⊗ FOR DE-SW-1079

ACCOUNT		
PAYMENT		
BAL. DUE		

○ CASH

⊗ CHECK

○ MONEY ORDER

○ CREDIT CARD

FROM 002289 TO

BY M.M.

3-11

DELAWARE DEPARTMENT OF
NATURAL RESOURCES AND
ENVIRONMENTAL CONTROL

89 Kings Highway
Dover, DE 19901
302-739-9403
dnrec.delaware.gov

RECEIVED
JUL 06 2026
DNREC - WHS

SOLID WASTE TRANSPORTER PERMIT APPLICATION

Language Preference:

Instructions: You must complete this application in its entirety and attach all applicable documentation. (**Note:** For applicants renewing an existing permit, this application requires the submission of updated information and documentation. References to material submitted under previous applications are no longer accepted.)

The application must be signed by the company owner or a corporate officer. A check or money order payable to the **"State of Delaware"** must accompany this application and be sent to:

Delaware Department of Natural Resources and Environmental Control
Compliance and Permitting Section
89 Kings Highway
Dover, DE 19901

1. **Type of Permit**

☐ New – **SCRAP TIRES ONLY** Submit a check or money order, payable to the "State of Delaware," in the amount of $75.00.

☐ New – **ALL OTHERS** Submit a check or money order, payable to the " State of Delaware" in the amount of $350.00.

☑ Renewal: Permit # DE-SW- 1079 Expiration Date 09/30/2026

Please indicate the term for which you desire your permit to be issued. Submit a check or money order, payable to the "State of Delaware," for the indicated permit fee.

SCRAP TIRES ONLY	**ALL OTHERS**
☐ One Year - $75.00	☑ One Year - $350.00
☐ Two Years - $125.00	☐ Two Years - $650.00
☐ Three Years - $175.00	☐ Three Years - $950.00
☐ Four Years - $225.00	☐ Four Years - $1250.00
☐ Five Years - $275.00	☐ Five Years - $1550.00

2. Release to Public

Do you wish to be included on the list of transporters that is provided to persons requesting a list of Delaware permitted solid waste transporters? ☑ Yes ☐ No

3. Company Information

Company Name Bio-Haz Solutions, Inc

Location Address:	Mailing Address:
23 Tonoli Rd Nesquehoning, PA 18240	Same

Contact: David Henritzy Title: President/CEO

Business Phone: 570-645-2180 Fax: 570-645-2181

E-mail: biohaz@ptd.net

24 hr Emergency Contact Pho[redacted]

4. Company Ownership Information

(a). Please indicate the company type:
☐ Proprietorship
☐ Partnership
☑ Corporation - If company is a corporation, indicate city, state, and date of incorporation.

City: Lehighton State: PA Date: 07/17/1995
☐ Municipality
☐ Public institution
☐ Limited Liability Corporation (LLC) State: ____________
☐ Other: (must specify) ____________

(b). For each Owner, Partner, or Corporate Officer, attach a list with name, title, mailing address, date of birth, and % ownership. Include all stockholders owning greater than 5% outstanding shares.

☑ Attachment 1

(c). If company is owned by or affiliated with a parent company, attach parent company name, address & mailing address, and % ownership.

☐ Attachment ____________
☑ No parent company

5. Company locations in Delaware

List name and *street* address of each company location, including freight terminals, within the State of Delaware.

☐ Attachment ________
☑ No Delaware locations

6. Company Affiliates

List name, location and mailing addresses, nature of business relationship of all company Affiliates, which affiliates are engaged in the business of waste transport, treatment, storage, disposal, recovery or reclamation. (Affiliated companies are defined as those companies owned by the same owners, corporate officers, or parent company.)

☐ Attachment ________
☑ No affiliates

7. Type of Waste to be Transported

(a). Check all that apply. Refer to Delaware's *Regulations Governing Solid Waste* for definitions of waste categories.

☐ Residential waste
☐ Commercial waste (from **non-manufacturing, non-processing** businesses and offices
☐ Industrial waste (from a manufacturing or industrial process)
☐ Dry waste: ☐ construction/demolition debris
☐ trees/stumps
☐ other (must specify) ______________________
☐ Ash: ☐ municipal incinerator
☐ coal ash
☐ other (must specify) ______________________
☑ Infectious waste
☐ Non-hazardous petroleum-hydrocarbon contaminated soils
☐ Asbestos-containing waste
☐ Scrap Tires

(b). Does your company collect and transport residential (household) waste from single family homes, condominiums and apartment complexes in Delaware? ☐ Yes ☑ No

(c). If you answered "YES" to question 7.b., above, does your company provide recycling services to those customers? ☐ Yes ☐ No ☑ N/A

(d). If you offer recycling services, does your company collect and transport the recyclables separately from the waste generated by your customers? ☐ Yes ☐ No

(e). If you offer recycling services, are the recyclables ultimately taken to an incinerator (waste-to- energy) or landfill? ☐ Yes ☐ No

8. Treatment, Storage, and Disposal Facilities

(a). Do you cross state lines with the waste? ☑ Yes ☐ No

(b). Identify in an attachment ***all*** solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities and Transfer Stations to which the waste will be transported.

☐ Delaware Solid Waste Authority locations: (attachment) _____
☐ Clean Earth of New Castle, Inc. (thermal treatment facility for PHC-soils)
☐ Delaware Recyclable Products, Inc. (dry waste, commercial, industrial, and PHC-soils)
☐ Other in-state solid waste facilities, including private facilities: (attachment) ________
☑ Out of state solid waste TSD facilities: (attachment) _________

9. Other Transporter Permits

(a). Attach a copy of your home state solid waste transporter permit. (N/A if Delaware is your home state.)

☑ Attachment ___________
☐ Not applicable-No transporter permit required for these solid waste types in our home state.

(b). List solid waste transporter permits held in other states.

☑ Attachment ___________
☐ No transporter permits in other states

(c). Indicate your Federal DOT number and Motor Carrier number:

DOT# 942094 MC# ____________________

☐ N/A If N/A, please provide an explanation, on the following page, as to why you are not required to have a DOT or MC number.

10. Proof of Financial Responsibility

The transporter must submit proof of financial responsibility as established in section 7.2.4 of Delaware's *Regulations Governing Solid Waste*. This proof may be established by a Certificate of Insurance, with MCS-90 endorsement where applicable, or by other means approved by the Department. (The Certificate of Insurance must identify the **Department of Natural Resources and Environmental Control, Compliance and Permitting Section** as the certificate holder.)

(a). Are you for-hire in interstate commerce? ☐ Yes ☑ No (For-Hire means you are in the business of transporting, for compensation or payment, wastes generated by a company other than your own.)
(b). Do you transport in the State of Delaware <u>Only</u> (Intrastate)? ☐ Yes ☑ No
(c). Do you transport Interstate? ☑ Yes ☐ No

(d). Certificate of Insurance must be attached and include minimum automobile liability coverage as follows:

	FOR-HIRE INTERSTATE	ALL OTHERS
Residential Waste	$750,000.00 + MCS-90 ☐	$300,000.00 ☐
Commercial Waste	$750,000.00 + MCS-90 ☐	$300,000.00 ☐
Industrial Waste	$750,000.00 + MCS-90 ☐	$300,000.00 ☐
Dry Waste	$750,000.00 + MCS-90 ☐	$300,000.00 ☐
Ash	$750,000.00 + MCS-90 ☐	$350,000.00 ☐
Infectious Waste	$1,000,000.00 + MCS-90 ☐	$750,000.00 + MCS-90 ☑
Non-Hazardous Petroleum Contaminated Soils	$750,000.00 + MCS-90 ☐	$300,000.00 ☐
Asbestos	$1,000,000.00 + MCS-90 ☐ (For Hire & Private)	$300,000.00 ☐
Scrap Tires Only	$300,000.00 ☐	$300,000.00 ☐

11. Spill Control and Safety

List all spill control and safety equipment that will be carried on each vehicle. (**Note:** Separate lists by type of vehicle and type of waste may be required.) Attach a copy of the Spill Control Plan. The Spill Control Plan **must** contain the following elements: (1) List of safety and spill control equipment carried in the vehicle, (2) Driver preventive measures, (3) Driver immediate corrective actions, (4) Company internal communications, (5) Company external communications including the **Delaware Emergency Reporting Numbers: 1-800-662-8802 and 302-739-9401**, and (6) Cleanup and decontamination measures.

Spill Control Plan: Attachment ✓

12. Driver Training

IN SUMMARY OR OUTLINE FORM, describe the procedures that your company takes to ensure that all company drivers are safe and competent drivers. Small owner-operators may describe their years of experience and driving record in lieu of a formal program.

(a). Include requirements for special licenses (e.g. CDL, including any special endorsements), any special training received, including dates training was received (e.g. asbestos training), and any ongoing company programs. (e.g. weekly safety meetings or annual refresher courses);

(b). Include your company procedure for periodic checks of the driver's records for moving violations, and your company policy on progressive counseling/discipline based on points;

(c). Describe how drivers are instructed in the following:

(i) Knowledge of proper handling procedures for the type of solid waste being transported.

(ii) Familiarity with the approved accidental discharge containment plan. (Spill Control Plan)

(iii) Familiarity with the conditions of the solid waste transporter's permit.

Driver Training, attachment ✓

13. Vehicle Identification

On the form provided with this application, list **MAKE, MODEL, YEAR, SERIAL NUMBER, LICENSE PLATE NUMBER, STATE OF REGISTRATION, MANUFACTURER'S GVWR and OWNERSHIP** of all vehicles used for the transportation of solid waste. You must list both motorized and container units. (If you maintain a list of company vehicles in a computer database you may submit a print out of the vehicles provided it contains the information requested herein.)

NOTE: You must notify CAPS in writing of any changes to information contained within this application, such as additions or deletions of vehicles, in accordance with conditions of the issued permit.

☑ Vehicle List Attached

14. Vehicle Operator Information

Is a list of all vehicle operators attached? ☑ Yes

What tax form do you submit to the IRS for your vehicle operators?

☑ Form W-2
☐ Form 1099-Misc
☐ Other

15. Environmental Record

List all criminal citations, arrests, convictions, civil or administrative violations, and civil or administrative enforcement actions, and the disposition(s) thereof for the violation or alleged violation of any environmental statute, regulation, permit, license, approval, or order, regardless of the state in which it occurred. Indicate whether it was a local, state, or federal violation or alleged violation. List all such items for the applicant, and if the applicant is other than an individual, for any employee while employed by the applicant, or any partner, officer, or director of the applicant as an individual or for any former business of such partner, officer, or director. For civil or administrative violations or alleged violations, list all such items for the last five (5) years from the date of the application. Information submitted under this section is subject to verification. **Failure to submit complete and accurate information may lead to permit denial or revocation.**

☑ Attachment ___________
☐ No violations within the specified time period

16. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, upon personal knowledge and information, the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

*****Signature*** [signature] Date 06/26/24

Print Name DAVID E. HENRITZY Title CEO/PRESIDENT

*****A legal owner or corporate officer must sign the application*****

VEHICLE INFORMATION - See Item 13 of the application.

Use this form, or other format which provides the same information, to answer the VEHICLE IDENTIFICATION requirement of the application. List all vehicles, both motorized and container (if a license plate is required on the container) to be used to haul solid waste in the state of Delaware. In addition, list the vehicle owner, owner's address, and domicile address if different from the company address provided in the application.

MAKE - MODEL - YEAR	TYPE	VIN # (Serial Number)	LICENSE PLATE # and STATE of REGISTRATION	mfgr's GVWR	OWNERSHIP
Ford Transit 250 - 2025	VAN	1FTBR3UG2SKB08456	PA ZGZ9865	9150	Owned
Ford Transit 250 - 2018	VAN	1FTYR3XM0JKB27579	PA ZGZ9867	9000	Owned

SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

(1) Spill control and safety equipment carried in each vehicle:
- 1). Reflectors and/or flares
- 2). Fire extinguisher
- 3). First aid kit
- 4). Heavy-duty gloves, hard hat
- 5). Flashlight
- 6).

(2) All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.

(3) The driver will perform the following pre-trip inspections:
- 1). Pre Trip Inspection List Attached
- 2).

(4) If there is an accident or other emergency which causes a portion of the load to be spilled, the driver, if uninjured, will contact the follo[redacted]pany coordinator:
Name: David E Henritzy Phone[redacted]

(5) The designated coordinator will contact the state and municipal authorities where the accident occurred. If the accident or spill has the potential to cause environmental damage, (either due to the nature of the waste, location of the accident, or additional factors such as leaking oil, gasoline, or hydraulic fluid) the person contacted will notify the state emergency response team, by calling one of the following numbers:

Delaware: 911, (302) 739-9401 or 1-800-662-8802 (*Other numbers may be listed as follows, however, the listed Delaware numbers* ***must*** *be included in the spill control plan.*)
Maryland:
New Jersey:

(6) The designated coordinator will contract for clean-up services with another company. (*This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.*)

(7) This plan will be carried in all vehicles, along with the permit.

Bio-Haz Solutions, Inc Ownership

David E Henritzy

President / CEO

100% Ownership

[redacted]

2510-CD-LRWM0056B Rev. 04/00 PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

REGULATED MEDICAL AND CHEMOTHERAPEUTIC TRANSPORTER LICENSE

PA-HC0191	08/31/2027	15
AUTHORIZATION NO.	EXPIRATION DATE	NO. OF COPIES

-VOID UNLESS VALIDATED

VALIDATED
07/09/2025

NAME & ADDRESS OF LICENSEE	
BIO-HAZ SOLUTIONS, INC. 23 TONOLI RD NESQUEHONING PA 18240-2317	
BUSINESS PHONE NO.	24-HOUR PHONE NO.
570-645-2180	610-554-1702

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

THIS LICENSE AUTHORIZES THE LICENSEE TO TRANSPORT REGULATED MEDICAL AND CHEMOTHERAPEUTIC WASTES WHICH ARE NOT "HAZARDOUS WASTES" UNDER PENNSYLVANIA REGULATIONS.

SEE REVERSE FOR ADDITIONAL CONDITIONS -

2510-CD-LRWM0056B Rev. 04/00 PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

REGULATED MEDICAL AND CHEMOTHERAPEUTIC TRANSPORTER LICENSE

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SEE REVERSE FOR ADDITIONAL CONDITIONS -

Name	Date of Birth	Drivers License #
[redacted]		

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 6/29/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	
Highstreet Insurance & Financial Services 111 E Harrison Street, Suite 1 Emmaus PA 18049-2946	CONTACT NAME: Tina Afif PHONE (A/C, No, Ext): 610-628-9799 FAX (A/C, No): 610-433-1492 E-MAIL ADDRESS: easternpa.coi@highstreetins.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Maxum Indemnity Company	26743
INSURER B : GEICO Marine Insurance Company	37923
INSURER C : BrickStreet Mutual Insurance Company	12372
INSURER D :	
INSURER E :	
INSURER F :	

INSURED BIO-SOL-01
Bio-Haz Solutions Inc
23 Tonoli Rd
Nesquehoning PA 18240-2317

COVERAGES **CERTIFICATE NUMBER:** 141338261 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY			BDG313409801	12/12/2025	12/12/2026	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	X POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY			9300268050	1/15/2026	1/15/2027	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY X SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			WCN6013155	1/27/2026	1/27/2027	X PER STATUTE OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

Department of Natural Reousrces and Environmental Control
Compliance and Permitting Section
Richardson & Robbins Building
89 Kings Highway SW
Dover DE 19901

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Tina Afif

2026 UCR Registration is VALID!

Receipt # 000-0556-2114

Registered on: 10/02/2025 07:59 EST

Generated: 10/02/2025 08:04 EST

Year:	2026					
Paid:	**Date**	**Bracket**	**UCR Fee**	**Conv. Fee**	**Total**	
	10/02/2025	Bracket 3 [10 veh.]	$276.00	$8.20	$284.20	Auto-renew
Bracket:	6 to 20 vehicles [10 vehicle(s)]					
USDOT #:	942094					
Classifications:	Motor Carrier					
Legal Name:	BIO HAZ SOLUTIONS					
Base State:	Pennsylvania					
Principal:	23 TONOLI ROAD NESQUEHONING, PA 18240 US					
Payor:	BIO HAZ SOLUTIONS					

*** Expires: 12/31/2026 ***

Processing Facilities Used By Bio-Haz Solutions, Inc

- Bio-Haz Solutions, Inc

  23 Tonoli Rd

  Nesquehoning, PA 18240

  Ozone Sterilization

  Permit #400695

2540-FM-LRWM0009 4/2003

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Permit
For
Solid Waste Disposal and/or Processing Facility
FORM NO. 8

Permit No.	400695
Date Issued	December 6, 2018
Date Expires	December 6, 2028

Under the provisions of the Pennsylvania Solid Waste Management Act of July 7, 1980, Act 97, a permit for a solid waste disposal and/or processing at (municipality) Nesquehoning Borough in the County of Carbon

is granted to (applicant) Bio-Haz Solutions

(address) 23 Tonoli Road

Nesquehoning

This permit is applicable to the facility named as and Bio-Haz Solutions, Inc.

and described as:

Latitude 40°, 50', 54.35"
Longitude - 75°, 52', 50.95"

This permit is subject to modification, amendment and supplement by the Department of Environmental Protection and is further subject to revocation or suspension by the Department of Environmental Protection for any violation of the applicable laws or the rules and regulations adopted thereunder, for failure to comply in whole or in part with the conditions of this permit and the provisions set forth in the application no. 400695 which is made a part hereof, or for causing any condition inimical to the public health, safety or welfare.

See attachment for waste limitations
and/or special conditions

FOR THE DEPARTMENT OF
ENVIRONMENTAL PROTECTION

This Permit is Non-TRANSFERABLE

Section 12 a. b. c. Bio-Haz Solutions Inc. employees (Truck drivers) are experienced drivers of no less than 6 years. Clean driving records check 2X a year and medicals once a year. Suspension of employment can occur when regulations are broken or driving laws not followed. Route for Me is installed in all trucks. Real time information is provided with its use. Cameras are used for monitoring as well as enforcement action. Safety meetings are initiated weekly

Driver Training includes but not limited to the following:

1. Includes initial company diving test one time per year with unannounced periodic testing. CDl is not needed for our drivers. Commercial endorsement and DOT medical are required.
2. Mandatory meetings during the four seasons.
   Spring meetings include written testing for blood pathogens; driving conditions; icy conditions, potholes, school buses stopping and pedestrian crossings, following all traffic laws.
   Summer meeting include deer crossings, heat exhaustion and staying hydrated, driving breaks. Sanitation of trucks weekly sooner if needed.
   Fall meetings include discussions on traffic and self-control.
   Winter meetings driving in snowy areas and conditions.
   Use of traction and familiarizing drivers with truck safety features.
   Emergencies; breakdowns, an accident, or any questions not necessarily during a specific season.
3. All trucks have check lists to follow before beginning their day driving. Attached
4. All trucks have spill kits. Drivers check daily if sealed. If not return for a dated and sealed kit. All kits are company provided and checked by senior management for mandatory items, example; water, gloves, Clorox bleach, googles, booties, absorbent, white suits, eyewash, spray bottle dust pan and brush. The drivers are educated on their usage and application as well as spill control plan.
5. DEP PA, Del division of waste and Hazardous Substances entails a 2 hour review annually.
6. Container handling ; corrugated boxes, reusable containers and lifting practices are demonstrated for driver/ technician safety.

7. Needle stick policy discussed. Procedures to follow if stuck; clean, cover and document. Contact management.

COMMONWEALTH of VIRGINIA

DEPARTMENT OF ENVIRONMENTAL QUALITY

W. Tayloe Murphy, Jr.
Secretary of Natural Resources

Street address: 629 East Main Street, Richmond, Virginia 23219
Mailing address: P.O. Box 10009, Richmond, Virginia 23240
Fax (804) 698-4500 TDD (804) 698-4021
www.deq.state.va.us

Robert G. Burnley
Director

(804) 698-4000
1-800-592-5482

CERTIFICATION OF REGISTRATION

REGULATED MEDICAL WASTE TRANSPORTER

Bio-Haz Solutions is hereby registered in the Commonwealth of Virginia in accordance with Chapter 14, Title 10.1, § 10.1-1400 through 10.1-1457 of the Code of Virginia (1950), as amended, and 9 VAC 20-120-480.A of the Regulated Medical Waste Management Regulations (RMWMR) as codified in Title 9 of the Virginia Administrative Code. The transporter or regulated medical waste must meet all of the provisions of Part VI of the RMWMR.

Bio-Haz Solutions has been assigned the registration number shown below which will appear on all correspondences related to the transport of infectious waste. This registration number may not be transferred without the approval of the Department of Environmental Quality.

Pursuant to § 9 VAC 20-120-480.C the transporter will notify the Department in writing within thirty (30) days of any changes to the data supplied in accordance with 9 VAC 20-120-480.B of the RMWMR as codified in Title 9 of the Virginia Administrative Code. Failure to notify the Department nullifies the registration and invalidates the registration number. Use of a false or invalid registration number is prohibited.

Regulated Medical Waste Transporter Number: **IWT0000010154**

Date of Registration: **May 31, 2002**

Leslie A Romanchik
f/ Robert G. Burnley X4390
Director

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

INSPECTION REPORT COMMENTS

Date of Inspection 9/3/25 **Identification Number** 400695

Company/Facility/Site Name Bio-Haz Solutions, Inc.

Comments:

On September 3, 2025 the PA Department of Environmental Protection ("Department") conducted a routine complete regulated medical waste (RMW) transfer facility and RMW processing facility at Bio-Haz Solutions, Inc. ("Bio-Haz"). Representing the Department was Ed McNulty ("this inspector"). David Henritzy provided a site tour and was interviewed on behalf of Bio-Haz. Records were provided for review by Denine McCarthy and April Hauser, office administrators.

SITE TOUR:

During this site tour, the following areas were viewed: the RMW loading dock/receiving area, the RMW scale, the waste storage areas, the ozone disinfection system, the shredder, treatment bin, the container washing area, and the maintenance area. Bio-Haz does not have a refrigerator onsite.

Bio-Haz is currently permitted for a maximum accepted weight of 13504 tons/year. The Clean Waste OMW-1000 is capable of processing up to 36 tons/day. The bio-indicator test is run on all finished loads. Bio-Haz is processing one to 1-2 bins per day in the ozone catchment system. Bio-Haz uses Decon-7 for cleanups.

The Clean Waste system was operating at full capacity at the time of this inspection. Mr. Henritzy showed this inspector the worn bearings, shafts, blades, and other parts which had been replaced in the shredder to allow it to run more efficiently.

Dave Henritzy discussed plans to treat trace chemotherapeutic waste, this inspector informed him that he would need special approval from the Department beforehand. No containers of chemotherapeutic wastes were present during this inspection. Pathological and Chemotherapeutic wastes are sent to Curtis Bay Energy for incineration.

The stationary and handheld radiation monitors were last calibrated on 8/2/24 by Health Physics Associates, Inc. The monitors were over one year since their last calibration at the time of this inspection. Mr. Henritzy said an expert was scheduled to calibrate them soon. An employee demonstrated the monitor's effectiveness using their radioactive Cesium source used in daily checks.

Bio-Haz had their weight scales calibrated 2/25/25, Dave Henritzy said a technician was due to calibrate them soon.

Two pallets of RMW were observed in the storage area dated 9/3, this inspector watched them get unloaded from a transport vehicle. No RMW was being stored longer than 72 hours.

Outside the facility were pallets of empty plastic containers.

RECORDS:

Select records were reviewed: Incoming and outgoing RMW manifests, spore/biological indicator tests, ozone concentration log, daily inspections, pest control bills.

Daily inspections were reviewed from 4/20/25 through 9/3/25. Daily inspections include radiation source checks, health and safety checks, maintenance checks, ozonator checks, start-up checks and cleaning. Mr. Henritzy said that he has employees cover a daily safety topic during these inspections/safety meetings to foster a good culture of safety at Bio-Haz.

Spore tests and ozone concentrations to comply with the 40-hour biological indicator requirement were reviewed.

Employee training for the processing unit was not reviewed during this inspection. No new employees have been retained since the last inspection in April 2025 who require this training.

Bio-Haz has switched pest control providers from Herritt's to Evergreen. Exact dates of service were not available, but Evergreen is providing service monthly.

VIOLATIONS:

1. Bio-Haz failed to calibrate their radiation monitoring equipment at least once per year, in violation of 25 PA Code §§ 279.201(a), 283.201(a), 279.222(f) and 283.220(f).

This concludes this inspection report.

Person Interviewed Dave Henritzy — Sent to facility via Email (Signature) — Date 9/19/2025

Inspector — Ed McNulty (Signature) — Date

Driver Pre-Trip Inspection Checklist

Driver Information

- Date: _________
- Driver: _________
- Vehicle Number: _________
- Odometer: _________

1. Exterior Walkaround

☐ No fluid leaks under vehicle

☐ Vehicle sits level (no obvious suspension issues)

☐ Body damage noted

☐ Mirrors secure and adjusted

☐ Windshield clean and free of major cracks

☐ Windows clean

☐ Wipers in good condition

☐ License plates secure

---

2. Tires & Wheels

For all four tires:

☐ Proper inflation

☐ Adequate tread depth

☐ No cuts, bulges, or exposed cords

☐ Lug nuts present and tight

☐ Wheels/rims undamaged

☐ Valve stems and caps present

---

3. Lights

Turn ignition on and check:

☐ Headlights (low beam)

☐ High beams

☐ Parking lights

☐ Turn signals (front and rear)

☐ Hazard flashers

☐ Brake lights

☐ Reverse lights

☐ Tail lights

☐ License plate light

---

4. Engine Compartment (if applicable)

☐ Engine oil level

☐ Coolant level

☐ Brake fluid level

☐ Washer fluid

☐ No loose belts or hoses

☐ Battery secure with clean terminals

---

5. Cab Inspection

☐ Seat adjusted

☐ Seat belt operates properly

☐ Mirrors adjusted

☐ Horn works

☐ Steering operates normally

☐ Windshield washer works

☐ Heater/defroster operates

☐ Air conditioning (if needed)

☐ Dashboard warning lights off after startup

☐ Backup camera functioning (if equipped)

---

6. Brakes

☐ Brake pedal feels firm

☐ Parking brake holds vehicle

☐ No unusual brake noises

☐ ABS warning light off

---

7. Safety Equipment

☐ Registration and insurance

☐ Fire extinguisher (if required)

☐ First aid kit

☐ Reflective triangles/flares (if required)

☐ Spare tire and jack (if equipped)

---

8. Cargo Area

☐ Cargo secured

☐ Doors latch properly

☐ Floor free of hazards

☐ No loose equipment

---

9. Final Operational Check

☐ Engine starts normally

☐ Gauges operating normally

☐ No warning lights

☐ Transmission shifts properly

☐ Steering normal

☐ Brakes function properly during initial movement

☐ No unusual noises or vibrations

Defects Found

Driver Signature: ______________________

Supervisor (if required): ______________________

Bio-Haz Solutions, Inc.

REGULATED MEDICAL WASTE PROCESSING AND TRANSFER FACILITY

EMERGENCY RESPONSE PLAN

PREPAREDNESS, PREVENTION AND CONTINGENCY (PPC) PLAN

SPILL PREVENTION RESPONSE PLAN

23 Tonoli Road

Nesquehoning Borough, Carbon County

Pennsylvania

October 20, 2015

Revised March 3, 2017

Revised August 10, 2020

Revised April 13, 2021

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(continued)

A. DESCRIPTION OF FACILITY

1. Description of the Industrial Activity

a. This facility is a transfer and processing facility for Regulated Medical Waste. The Regulated Medical Waste is transferred to this facility from off–site generators by licensed medical waste transporters (either BIO-HAZ SOLUTIONS, INC. or licensed medical waste transporters). The Regulated Medical Waste is sterilized on-site using an OMW-1000 Ozone Medical Waste System as supplied by CLEAN WASTE SYSTEMS, LLC, 3535 Plymouth Boulevard, Suite 112, Plymouth, MN 55447 (phone: 1-877-478-5195). Medical waste not requiring sterilization is stored on-site until transferred to a licensed landfill. Sterilized waste is stored on-site in an enclosed compacting dumpster until being transferred to a licensed landfill by licensed waste transporters.

b. See 'Carbon County Type 10 Map' attached to the PA DEP Permit Application for a Facility Location Map

c. See CARBON ENGINEERING INC. Plan G-2087 for Facility Site Plan

d. See CARBON ENGINEERING INC. Plan G-2013 for Facility Building Plan

2. Description of Existing Emergency Response Plans

a. This plan is the only Emergency Response Plan developed for this Regulated Medical Waste processing and transfer facility. BIO-HAZ SOLUTIONS, INC. has developed an Operations and Maintenance Plan in conjunction with this plan. Training is done for the state regulation of Pennsylvania Code Municipal Waste, Title 25, Environmental Protection, Chapter 284, Regulated Medical Waste and Chemotherapeutic Waste. All personnel who handle biomedical waste shall receive training prior to handling and monthly thereafter. Training shall consist of information regarding hazards of exposure to biomedical waste, protective methods, decontamination, disposal, Department of Transportation Regulations, Department of Environmental Protection Regulations, Department of Health Regulations, OSHA Workplace Safety Regulations, and emergency procedures including the Emergency Management Plan. Also discussed in monthly training is industry news, recent incidents, and an open session for employee comments, questions or concerns. In addition to new employee training orientation and monthly training, random quizzes will give direct feedback to weak areas that need to be addressed individually or with the entire company. Start up and training services for the ozone system is provided by Clean Waste Systems for up to (3) eight hour working days if necessary.

3. Material and Waste Inventory

a. This facility accepts, handles, processes and/or transfers Medical Waste, Regulated Medical Waste (including Sharps, Cultures, and Stocks), Non-Hazardous Pharmaceutical, Pathological, and Chemotherapeutic Waste.

b. Figure 1, as provided within the BIO-HAZ SOLUTIONS, INC. Operation and Maintenance Manual, and found immediately below, provides a decision tree for medical waste acceptance, processing and transfer at this facility as described below. This only represents the management of particular waste streams.

Medical Waste
Brought to Facility

Medical Waste Regulated Medical Waste Pathological, Non-Hazardous Pharma	Chemotherapeutic Waste and Recognizable Human Body Parts	Unacceptable Waste - NRC, RCRA, etc
Treated at this Facility	Transferred to another Processing Facility	Transferred in Accordance to the Unacceptable Waste Policy

c. DEFINITIONS:

Types of waste to be accepted:

Regulated Medical Waste is municipal and residual waste which is generated in the diagnosis, treatment, immunization or autopsy of human beings or animals, in research pertaining thereto, in the preparation of human or animal remains for interment or cremation, or in the production or testing of biologicals, and which falls under one or more of the following categories:

Sharps. Used sharps that have been in contact with infectious agents or that have been used in animal or human patient care or treatment, at medical, research or industrial laboratories.

Cultures and stocks of infectious agents and associated biologicals, including the following: cultures from medical and pathological laboratories; cultures and stocks of infectious agents from research and industrial laboratories; wastes from the production of biologicals; discarded live and attenuated vaccines except for residue in emptied containers; and culture dishes, assemblies and devices used to conduct diagnostic tests or to transfer, inoculate and mix cultures.

Pathological wastes. Human pathological wastes, including tissues, organs and body parts and body fluids that are removed during surgery, autopsy, other medical procedures or laboratory procedures, except human corpses, remains and anatomical parts that are intended for interment or cremation, or are donated and used for scientific or medical education, research or treatment. The term does not include hair, nails or extracted teeth.

Human blood and body fluid waste.

Liquid waste human blood.

Blood products.

Items saturated or dripping with human blood.

Items that were saturated or dripping with human blood that are now caked with dried human blood, including serum, plasma and other blood components, which were used or intended for use in patient care, specimen testing or the development of pharmaceuticals.

Intravenous bags that have been used for blood transfusions.

Items, including dialysate, that have been in contact with the blood of patients undergoing hemodialysis at hospitals or independent treatment centers.

Items saturated or dripping with body fluids or caked with dried body fluids from persons during surgery, autopsy, other medical procedures or laboratory procedures.

Specimens of blood products or body fluids, and their containers.

Animal wastes. Contaminated animal carcasses, body parts, blood, blood products, secretions, excretions and bedding of animals that were known to have been exposed to zoonotic infectious agents or non-zoonotic human pathogens during research (including research in veterinary schools and hospitals), production of biologicals or testing of pharmaceuticals.

Isolation wastes. Biological wastes and waste contaminated with blood, excretion, exudates or secretions from:

- Humans who are isolated to protect others from highly virulent diseases.
- Isolated animals known or suspected to be infected with highly virulent diseases.

Non-hazardous Pharmaceutical Waste. Expired drugs and other pharmaceutical wastes used in a hospital or clinic setting, which are not defined as Federal Hazardous Wastes.

Chemotherapeutic Waste. Waste resulting from the production or use of neoplastic agents used for the purpose of inhibiting or stopping the growth of malignant cells or killing malignant cells.

Types of waste to NOT be accepted:

Hazardous Waste as defined and regulated by the Federal Environmental Protection Agency.

Radioactive Waste as defined and regulated by the Nuclear Regulatory Commission

d. PROCESS WASTE: Only Boxed/Bagged Medical /Regulated Medical Waste can be treated with ozone at this facility.

(1) **Boxed/Bagged Solid Medical Waste**

(a) Solid Medical Waste will remain in the red bag and/or bag when carted into the OMW-1000 for processing and transported to a permitted solid waste acceptance facility.

(2) **Disposal**. Regulated Medical Waste is shredded and treated with the OMW-1000 and disposed at a permitted landfill.

e. TRANSFERRED WASTE: Hazardous and chemotherapeutic wastes, and any other medical waste requiring incineration must be transferred to another processing facility. All transferred waste is kept on a Waste Transfer Log.

f. UNAUTHORIZED WASTE. Wastes such as any hazardous waste (RCRA) and any waste regulated by the Nuclear Regulatory Commission cannot be processed at this facility. Such wastes are managed in accordance with Section 4.0 of the BIO-HAZ SOLUTIONS, INC. Operation and Maintenance Manual.

g. LIQUID WASTE: There is no liquid waste generated during the operation of this facility.

The building is connected to the sanitary sewer system for the disposal of all sanitary waste. The only other discharge into the sanitary system is from wash water entering from floor drains.

All processes will be conducted inside the building in order to control/prevent ground water, surface water or storm water pollution. All liquid waste is collected and properly disposed of in compliance with the Nesquehoning Regional Wastewater Treatment Facility.

4. Pollution Incident History

a. This is a new Regulated Medical Waste processing and transfer facility and has no history of pollution incidents.

5. Implementation Schedule for Plan Elements Not Currently in Place

a. This ER, PPC and SPR Plan was implemented upon the opening of this facility for processing in the middle of 2017.

B. Description of How Plan is Implemented by Organization

1. Organizational Structure of Facility for Implementation

The protocols established in this Plan apply to all personnel managing Regulated Medical Waste at this facility.

Facility Manager – will assure that personnel have the required training and are competent in the practices for managing the waste streams. The Facility Manager is responsible for training of all workers and ensuring that Regulated Medical Waste is handled, stored, treated, and disposed of properly and safely. They must also provide the equipment necessary to maintain compliance with this Operations Manual.

The Facility Manager is ultimately responsible for ensuring proper handling, storage, treatment, and disposal of all Regulated Medical Waste managed at this facility.

Regional Operations Manager (currently the same as Facility Manager) - is responsible to provide support and resources to the Facility Manager in order to ensure proper handling, storage, treatment, and disposal of all Regulated Medical Waste managed at this facility.

Production workers - are responsible for following the instruction of the Facility Manager concerning handling, storage, process, and transfer of Regulated Medical Waste.

Director of Compliance - is responsible for providing guidance, and for monitoring site compliance with mandated Regulated Medical Waste guidelines. COMPLIANCE is available to provide training when requested.

2. List of Emergency Coordinators

Primary Contact Person:
Facility Manager – David E. Henritzy [redacted]

Backup Contact:
[redacted]
Director of Compliance – Cindy Henritzy [redacted]

3. Duties and Responsibilities of the Emergency Coordinator – See "Appendix D - Duties and Responsibilities of the Emergency Coordinator" of this report.

4. Chain of Command – President or Emergency Coordinator (Commander): see Exhibit 1.3 within the BIO-HAZ SOLUTIONS, INC. Emergency Management Plan

C. Spill Leak Prevention and Response

1. Pre-release Planning: The building is designed for separation of personnel.

Office personnel are in the front of the building, processing personnel are in the back of the building. The floor is sealed concrete, walls are also sealed concrete. There are designated areas in the processing area which will be marked on the floor to separate clean and dirty areas. Clean areas will not be subjected to spills. Dirty areas may be subjected to spills and have ready response equipment in those areas. The potential for spill or leakage is minimal. The potential for fires is minimal due to daily cleaning of floors. No explosive chemicals or materials are handled. No land or water contamination can occur because the operations are contained within the building.

a. Source Areas of Potential Spills and Leaks (off-loading areas, staging areas, cart loading areas)

See Plans prepared by CARBON ENGINEERING INC. (G-2013 and G-2087)

b. Pollution Prevention Practices (careful handling of containers, routine inspection of containers, ensuring spill containment equipment is close at hand)

(1) **PREVENTION**

(a) Visual Observations of:

1) Storage facilities: daily observation
2) Loading and unloading areas: maintain separation of clean and dirty areas, clean and disinfect daily (more often if necessary)
3) Waste handling and storage areas: continuously throughout hours of operation

(b) Detailed Inspections of:

1) Processing equipment for leaks: daily inspection, shut down and repair if needed
2) Tanks for corrosion (propane tank): daily inspection
3) Tank supports or foundations for deterioration: daily inspections, primed and painted when needed
4) Walls for stains: daily inspection, cleaned and sanitized daily
5) Primary or secondary containment for deterioration: daily inspection
6) Housekeeping practices: floors cleaned and sanitized daily, keep areas clean of debris inside and out
7) Shipping containers for damage: inspected every cycle
8) Material or waste conveyance systems for leaks, spills, or overflows: constant monitoring
9) Integrity of stormwater collection systems: All processes are conducted inside the building in order to control/prevent ground water, surface water or

stormwater pollution. All liquid waste is collected and sent to the sanitary sewer system.

10) Waste storage, treatment, or disposal sites for leaks, seeps, and overflows: daily inspection

(c) Monitoring

1) Alarm systems: daily checking of fire, intruder, and equipment
2) Pressure and temperature gauges: monitoring during operations
3) Equipment operational lights: checked and replaced as needed
4) Routine sample collection: The proposed CLEAN WASTE SYSTEMS, LLC OMW-1000 Medical Waste Processing System has separate internal and external monitoring systems which function continuously throughout the usage of the machines. These systems are tested once per year and are also recalibrated manually. The external monitoring system checks for ambient air ozone surrounding the equipment and is fixed with an alarm.
5) Redundant instrumentation: check as needed
6) Records (all monitoring results/findings): The OMW-1000 continuously records all processing data.

(2) **CONTAINMENT** – See "Appendix E - Emergency Contingency Plan" of this report

(a) Secondary Containment

1) Curbs: checked daily (some curbing inside the building)
2) Sewer collection systems: Checked every month or when necessary, no standing water on the floors, all pushed immediately into sanitary drain.

(b) Vapor Control

1) Vacuum exhaust: There is an alarm for ambient Ozone build-up

(3) **MITIGATION**

(a) Physical Clean-up: a designated area for the organized storage of clean up tools and materials that can be easily accessed, which will contain at least spill kits, brooms, shovels, pans, Clorox, and absorbents.

(b) Labeling

1) Warning signs: present

(c) Vehicle Positioning: designated areas for employee parking, incoming trucks for off- loading, staging area for transient departures and visitor parking

1) Physical barriers: wheel chocks for trailers, parking stops for other vehicles
2) Underlying drains: see Facility Site Plan G-2087 prepared by CARBON ENGINEERING INC.
3) Designated loading and unloading areas: signs posted, see Facility Site Plan G-2087 prepared by CARBON ENGINEERING INC.

(d) Preventive Maintenance – As per manufacturer's recommendations and as per DEP/DOT/OSHA compliance.

1) Periodic inspections: monthly biological testing
2) Periodic testing to determine soundness of system: annually
3) Identification of equipment and systems that need to be upgraded, repaired, or replaced: subsequent to inspections
4) Appropriate adjustment, repair, or replacement of parts: subsequent to identified repairs needed
5) Complete recordkeeping of all repairs, upgrading, replacements, and adjustments; and all testing findings/results after system modifications were made: subsequent to repairs made

(e) Good Housekeeping – Done daily and more often if needed.

1) Neat and orderly storage of chemicals: in chemical storage area near process equipment
2) Prompt removal of small spillage: done immediately
3) Regular garbage pickup and disposal: weekly
4) Maintenance of dry, clean floors: tended to daily with a riding powered floor cleaner.
5) Maintenance of proper spacing for pathways and walkways between containers and drums: markings on floor for pathways and walkways
6) Stimulation of employee interest in good housekeeping: thorough training and frequent inspections of facility and professionalism of staff

(f) Employee Training Programs

1) Materials Inventory Systems: office staff/management
2) Safety Data Sheets: stored in a binder in the process area for easy reference

(g) Mechanical Clean up

1) Vacuum systems: powered floor washers are used to clean floor areas daily or more frequently if necessary
2) Blowers: visual check for air leak or air leaks

(h) Chemical Clean up

1) Sorbents
   - i) vermiculite
   - ii) paper towels
2) Disinfection
   - i) Decon 7
   - ii) 10% Bleach solution

(4) **ULTIMATE DISPOSITION**

(a) Land disposal: sanitized waste is accumulated in the treatment bin (compacting dumpster) which is then transported to a permitted land-fill

(b) Recycle: Boxes are not recycled, but placed directly into the ozone system where they are shredded with the waste

(c) Reuse: bins for collection of Regulated Medical Waste are thoroughly cleaned and reused.

2. Material Compatibility

a. All materials used in equipment assemblies for handling, treating, and storing treated and un-treated medical waste are made of corrosion-resistant materials, such as plastic or stainless steel.

b. Re-useable containers used for transfer of waste are thoroughly cleaned prior to re-use.

c. Disposable plastic cart liners are used for processing waste within the treatment facility.

d. The treatment bins (compacter dumpsters) used for storing waste prior to transfer to a licensed landfill are made of corrosion resistant materials.

3. Inspection and Monitoring Program

a. All equipment and storage facilities are inspected in accordance with the BIO-HAZ SOLUTIONS, INC. Operations and Maintenance Manual.

b. An *Inspection Schedule* is contained in the BIO-HAZ SOLUTIONS, INC. Operations and Maintenance Manual for all facility equipment. This maintenance is by Manufacturer's recommendations.

c. See "Appendix G - Emergency Equipment List" of this report for a list of Spill Control Equipment.

4. Preventive Maintenance

a. Preventative Maintenance for all equipment and storage facilities is included with the BIO-HAZ SOLUTIONS, INC. Operations and Maintenance Manual.

b. *Preventative Maintenance Schedule* is contained in the BIO-HAZ SOLUTIONS, INC. Operations and Maintenance Manual for all equipment and facility piping.

c. See "Appendix G - Emergency Equipment List" of this report for a list of Spill Control Equipment.

5. Housekeeping Program

a. The BIO-HAZ SOLUTIONS, INC. facility at 23 Tonoli Road is divided into areas physically demarcated in the building as 'Clean Area' and 'Dirty Area'. The 'Dirty Area' is utilized to neatly store waste that is to be processed in the OMW-1000 and transfer containers that are to be washed. The 'Clean Area' is utilized to neatly store clean containers used for transferring waste.

b. Daily cleaning of the processing area is completed to keep processing area neat and free of potential obstacles which may cause spills or interruptions to the treatment process.

c. Wet and dry spills not involving Regulated Medical Waste will immediately be cleaned up and properly disinfected in the OMW-1000.

d. See "Appendix G - Emergency Equipment List" of this report for a list of Spill Control Equipment.

6. Security

a. The site of the processing facility is enclosed by a six (6) foot chain link fence.

b. A sliding security entry gate restricts access to the site. The security gate is controlled by a keypad requiring an access code.

c. Security cameras are installed throughout the site as noted on the Site Plan G-2087 prepared by CARBON ENGINEERING INC.

7. External Factor Planning

a. The OMW-1000 is equipped with an automatic shutdown in case of external emergencies, such as power outages. The OMW-1000 starts from the beginning of the treatment cycle when manually reactivated.

b. The building and site used for the processing of Regulated Medical Waste is not within a flood prone area.

c. State and Local building codes were followed in the development of the site and construction of the processing facility.

8. Employee Training Program

Initially, new employee training, and training of existing employees, consists of orientation, PA DEP regulation education, PennDOT and OSHA training. Testing is one time per year. Reviews are monthly during employee safety meetings. Employees are provided with Safety Handbooks.

D. COUNTERMEASURES

1. Countermeasures to be Undertaken by Facility

See "Appendix E – Emergency Contingency Plan" of this report

2. Countermeasures to be Undertaken by Contractors

If Contractors are used to mitigate emergencies, provide contact info, description of service, and response time. See "List of Emergency Response Contractors" in the BIO-HAZ SOLUTIONS, INC. Emergency Management Plan.

3. Internal and External Communications and Alarm Systems

a. External communications are handled through telephone communication and/or internet communication.

b. Internal communications are handled through corporate issued cellular phones.

4. Evacuation Plan for Installation Personnel

See "Appendix F – Evacuation Plan" of this report

5. Emergency Equipment Available for Response

See "Appendix G - Emergency Equipment List" of this report for a list of Spill Control, Emergency, and Decontamination Equipment.

E. Emergency Spill Control Network

1. Arrangements with Local Emergency Response Agencies and Phone Numbers

a. The local police department, fire department, and County Emergency Management Agency are provided with a copy of this plan. - Local Fire Dept. is Hauto Fire Dept. located approx. 150 yards from facility and is dispatched through 911.

b. Carbon County Emergency Communications Center
Emergency Fire, Police, and Ambulance Services
911

c. Carbon County Emergency Management Agency
(570) 325-3097

d. St. Luke's Hospital – Miners' Campus
360 W. Ruddle St.
Coaldale, PA 18218
(570) 645-2131

e. St Luke's Hospital – Lehighton Campus
(Gnaden Hutten Campus)
211 N. 12th St.
Lehighton, PA 18235
(610) 377-1300

(610) 377-7080 (24-Hour Emergency Care)

f. Nesquehoning Borough Office (Police Department Non-Emergency)
(570) 669-9951

g. Nesquehoning Hose Co. No. 1
(570) 669-6684

h. Nesquehoning Borough Office
(570) 669-9588

i. Nesquehoning Borough Sewage Treatment Plant
(570) 669-9951

2. Notification Lists

a. Pennsylvania Department of Environmental Protection Regional Office
NORTHEAST REGION
Wilkes-Barre
(570) 826-2511
(24 Hour Phone Number)

b. Statewide Emergency Notification Number (If unable to contact Region)
(800)541-2050 (PA only) or
(717)787-4343

c. Pennsylvania Department of Environmental Protection
Field Operations – Environmental Cleanup Program
Northeast Regional Office
Ron Brezinski
2 Public Square
Wilkes-Barre, PA 18711-0790
(570) 826-2511

d. Carbon County Emergency Communications Center
Emergency Fire, Police, and Ambulance Services
911

e. Carbon County Emergency Management Agency
(570)325-3097

f. Delaware Emergency Reporting Numbers: 1-800-662-8802 and 302-739-9401

3. Downstream Notification Requirement for Storage Tanks

Propane tanks to fuel facility heating are the only storage tanks located on-site. These tanks are less than 21,000 gallons. No Downstream Notification Requirements are necessary.

Appendix A
Facility Location Map

See 'Carbon County Type 10 Map' attached to the PA DEP Permit Application for a Facility Location Map

Appendix B
Facility Site Plan

See CARBON ENGINEERING INC. Plan G-2087 for Facility Site Plan

Appendix C
Facility Building Plan

See CARBONENGINEERING INC. Plan G-2013 for Facility Building Plan

Appendix D
Duties and Responsibilities of Emergency Coordinator

Duties and Responsibilities of Emergency Coordinator

Whenever there is an imminent or actual emergency situation, the Emergency Coordinator must immediately:

a. Activate facility alarms or communications systems, where applicable, to notify facility personnel; and

b. Notify local emergency response agencies including the Department. Whenever there is an emission or discharge, fire, or explosion, the Emergency Coordinator must immediately identify the character, exact source, amount, and a real extent of emitted or discharged materials. He may do this by observation or review of records and, if necessary, by chemical analysis.

Concurrently, the Emergency Coordinator must assess possible hazards to human health or the environment that may result from the emission or discharge, fire or explosion. This assessment must consider both direct and indirect effects of the emission, discharge, fire or explosion.

If the Emergency Coordinator determines that the installation has had an emission, discharge, fire or explosion which would threaten human health or the environment, he must immediately notify the applicable local authorities including the county emergency management agency and indicate if evacuation of local areas may be advisable; and immediately notify the Department; the National Response Center; and the Pennsylvania Emergency Management Agency; and report the following:

a. Name of the person reporting the incident

b. Name and location of the installation:
Bio-Haz Solutions Inc
23 Tonoli Rd
Nesquehoning, PA 18240

c. Phone number where the person reporting the spill can be reached:
Bio-Haz Solutions Inc
570-645-2180

d. Date, time, and location of the incident

e. A brief description of the incident, nature of the materials or wastes involved, extent of any injuries, and possible hazards to human health or the environment

f. The estimated quantity of the materials or wastes spilled, and

g. The extent of contamination of land, water, or air, if known.

When there is a release from an aboveground storage tank which threatens the water supply of downstream users, these downstream users (on the Downstream Notification List) must be notified within two (2) hours of the release. Priority for notification is by closest proximity to the release site.

During an emergency, the Emergency Coordinator must take all reasonable measures necessary to ensure that fire, explosion, emission, or discharge do not occur, reoccur, or spread to other materials or wastes at the installation. These measures shall include where applicable, stopping manufacturing processes and operations, collecting and containing released materials or wastes, and removing or isolating containers.

If the installation stops operations in response to a fire, explosion, emission, or discharge, the Emergency Coordinator must ensure that adequate monitoring is conducted for leaks, pressure buildup, gas generation, or ruptures in valves, pipes, or other equipment, wherever this is appropriate.

Immediately after an emergency, the Emergency Coordinator, with Departmental approval, must provide for treating, storing, or disposing of residues, contaminated soil, etc., from an emission, discharge, fire or explosion at the installation.

The Emergency Coordinator must insure that in the affected areas of the installation, no material or waste incompatible with the emitted or discharged residues is processed, stored, treated, or disposed of until cleanup procedures are completed; and, all emergency equipment listed in the plan is cleaned and fit for its intended use before operations are resumed.

Within fifteen (15) days after the incident, the installation must submit a written report on the incident to the Department. The report must include the following:

a. Name, address, and telephone number of the individual filing the report

b. Name, address, and telephone number of the installation:
Bio-Haz Solutions Inc
23 Tonoli Rd
Nesquehoning, PA 18240
570-645-2180

c. Date, time, and location of the incident

d. A brief description of the circumstances causing the incident

e. Description and estimated quantity by weight or volume of materials or wastes involved

f. An assessment of any contamination of land, water, or air that has occurred due to the incident

g. Estimated quantity and disposition of recovered materials or wastes that resulted from the incident, and

h. A description of what actions the installation intends to take to prevent a similar occurrence in the future.

Appendix E
Emergency Contingency Plan

DO NOT attempt any cleanup or decontamination procedures alone or without wearing Personal Protective Equipment (PPE), including respiratory protection if respiratory pathogens may be present. Unless the spill is minor and well-defined do not clean up the material without Supervisor approval. Notify COMPLIANCE immediately of any spills that have the potential for serious health or safety implications.

1. Determine the nature and the extent of the spill—what has been spilled (i.e., the chemical or biological agent), its concentration, quantity, and location.

2. Evacuate the area immediately (if necessary to prevent exposure of additional persons to a particularly toxic or virulent agent).

3. Provide immediate medical treatment to those exposed (if warranted by the nature of the exposure).

4. Secure and post the spill area to prevent additional exposures and spread of the spill.

5. Put on appropriate personal protective equipment (PPE).

    a. Always: glasses, gloves, lab coat or apron, shoe coverings.

    b. As appropriate (depending on the nature of the spill): face shield or goggles, respirator, boots.

6. Contain the spill (e.g., by dyking or ringing with absorbent material).

7. Decontaminate the spilled material if warranted (i.e., it is often prudent to decontaminate the spilled material before it is picked up). Disinfect using 10% bleach solution or another approved disinfectant (see section 10.6) for a thirty-minute contact time.

8. Pick up the spilled material:

   a. Solids:

      1) Pick up by mechanical means (e.g., pan and brush, forceps).

      2) Discard as Regulated Medical Waste or hazardous waste as appropriate.

   b. Liquids:

      1) Absorb the spill with absorbent material as appropriate (e.g., paper towels, vermiculite).

      2) Discard as Regulated Medical Waste or hazardous waste as appropriate.

   c. Broken glass and other sharps:

      1) Pick up by mechanical means (e.g., forceps, pan and brush), never by hand.

      2) Dispose as Regulated Medical Waste.

9. Decontaminate the area using an appropriate disinfectant (see Section 10.6).

10. Rinse/clean the area (if necessary) and absorb and collect waste materials.

11. Dispose of collected material and cleanup materials as Regulated Medical Waste or hazardous waste as appropriate.

12. Decontaminate reusable items (such as dust pans, brushes, forceps).

13. Remove personal protective equipment (PPE).

   a. Discard disposable items as Regulated Medical Waste or hazardous waste as appropriate.

   b. Decontaminate reusable items (such as heavy rubber gloves, boots, aprons, gowns) before cleaning or laundering.

14. Wash all exposed skin thoroughly.

15. Perform medical treatment and follow up as appropriate for the particular type of material.

16. Personnel Exposures or Contamination

a. Remove the exposed or contaminated personnel from the contaminated area, unless it is unsafe to do so due to the medical condition of the victim or potential hazard to the rescuer.

b. If the incident occurs during normal working hours, notify COMPLIANCE or the site operations manager.

c. Administer first aid as appropriate.

d. Remove any contaminated clothing.

e. Proceed to the nearest emergency eyewash/shower to flush contamination from the eyes and skin.

f. Stand by to provide emergency information.

17. Contamination of Equipment and Facilities

a. DO NOT attempt any cleanup or decontamination procedures alone or without wearing Personal Protective Equipment (PPE), including respiratory protection if respiratory pathogens may be present. Unless the spill is minor and well defined do not clean up the material without Compliance or facility management approval.

b. Avoid spreading contamination by limiting access to the contaminated equipment or area only to individuals who are properly protected and trained to respond to all types of hazards that exist (e.g., biological or chemical).

c. Report details and request assistance by contacting COMPLIANCE if the incident is during normal working hours. If the incident occurs after hours contact the Site Operations Manager.

d. If the spill involves a liquid, place absorbent material on the spill and decontaminate with an approved disinfectant for a minimum of a 10-minute contact time.

e. If sharps are involved, pickup using a mechanical means, such as tongs, forceps, or dustpan and broom. Do not use your hands to pick up any sharp items, even if gloves are worn.

f. Decontaminate the equipment and area under a Supervisor's direction using appropriate methods.

g. Stand by to provide emergency information and assistance to Emergency Response Personnel, if required.

18. Release to the Environment (air, water, soil)

a. Stop the release, if safe to do so.

b. Follow procedures described above for contamination of equipment and facility.

c. Make immediate notifications. Any information of a release or discharge of Medical Waste from or of a fire or explosion at a Medical Waste facility which could threaten the environment or human health outside the facility. The description of the occurrence and its cause shall include:

Name, address, and telephone number of the owner or operator;

Name, address, and telephone number of the facility;

Date, time, and type of incident;

Name and quantity of material(s) involved;

The extent of injuries, if any;

An assessment of actual or potential hazards to the environment and human health outside the facility, where this is applicable; and

Estimated quantity and disposition of recovered material that resulted from the incident.

19. Equipment Failure

a. In the unlikely event that Medical Waste must be transported off site, all Medical Waste and sharps are moved in compliant containers for processing.

b. Waste would be taken to the following back-up location:

c. Baltimore Transfer/Treatment Facility 6611 Chandlery Rd., Baltimore, MD 21224 Permit # 2008-WPT-0633

d. BIO-HAZ SOLUTIONS, INC. will not store biohazardous or sharps waste at the facility for not more than thirty (30) days without obtaining prior written approval of the PA DEP.

20. Natural Disasters

a. The on-site employee will immediately notify, by his/her cell phone, the local emergency services or 911, if necessary. The employee will immediately notify BIO-HAZ SOLUTIONS INC. corporate office of any emergency occurrence.

b. Implement Emergency Notification Plan.

Appendix F
Evacuation Plan

Personnel Accountability during emergencies:

Employee safety is priority: The Emergency Response Coordinator will determine if implementation of evacuation is appropriate. Employees are notified of evacuation by loudspeaker or yelling.

Tonoli Road near our employee parking area is used to rally employees for accountability and availability.

Personnel accountability is the initial responsibility of the employee in charge:

1. Identify all personnel.

2. Locate all personnel and get them to the rally point on Tonoli Road.

3. Know the name and last known location of anyone who does not rally.

4. BIO-HAZ SOLUTIONS, INC. personnel will not engage in rescue operations. This is left to Emergency Management Services.

Appendix G
Emergency Equipment List*

(If below Emergency Equipment is provided on site, list the storage location as noted on the building or site plan)

Absorbent materials – Designated warehouse area.
Air compressor - Designated warehouse area.
Bullhorn – Designated warehouse area.
Cameras – Permanently mounted in office area and warehouse areas, exterior and interior.
Emergency Eye Wash/ Shower – Centrally located between Warehouse and Process Area
Fans –Warehouse area.
Firefighting equipment (including portable fire extinguisher) – Designated warehouse and office areas.
First aid supplies - Office and warehouse areas.
Forklift – Warehouse.
Geiger counter- Warehouse, docking areas.
Heaters, portable - Warehouse storage.
Lighting equipment, portable - Warehouse storage.
Tool box - Utility area in warehouse.
Welding/cutting equipment – Utility area in warehouse

* Fire control equipment for a Landfill is not applicable. Portable Gas Explosimeters are not necessary because this facility does not include explosive substances.

Davis, DaQuan (DNREC)

From:	Natasha Yurchak <Natasha@bio-haz.com>
Sent:	Monday, July 20, 2026 1:50 PM
To:	WHStransporters
Subject:	RE: Delaware Solid Waste Transporter Permit Renewal
Attachments:	MCS90 D.pdf

Good afternoon! I finally received the MCS90 in the mail today. See attached. Thank you!

Natasha Yurchak

Administrative Specialist
570-645-2180 Option 1

BIO-HAZ SOLUTIONS

From: WHStransporters <WHStransporters@delaware.gov>
Sent: Wednesday, July 15, 2026 11:21 AM
To: Natasha Yurchak <Natasha@bio-haz.com>
Subject: RE: Delaware Solid Waste Transporter Permit Renewal

Thank you!

DaQuan L. Davis
Environmental Scientist
Division of Waste and Hazardous Substances
302-739-9403
WHStransporters@delaware.gov
89 Kings Hwy SW, Dover, DE 19901
dnrec.delaware.gov

From: Natasha Yurchak <Natasha@bio-haz.com>
Sent: Wednesday, July 15, 2026 11:19 AM
To: WHStransporters <WHStransporters@delaware.gov>
Subject: RE: Delaware Solid Waste Transporter Permit Renewal

Good morning DaQuan! I have requested the MCS-90 for the second time from our insurance carrier Tuesday 07/14. I will forward as soon as I receive this. Thank you!

Natasha Yurchak

Administrative Specialist
570-645-2180 Option 1

BIO-HAZ SOLUTIONS

From: WHStransporters <WHStransporters@delaware.gov>
Sent: Wednesday, July 15, 2026 10:24 AM
To: Natasha Yurchak <Natasha@bio-haz.com>
Subject: RE: Delaware Solid Waste Transporter Permit Renewal

Hello,

Thank you for submitting your application for your Delaware solid waste transporter permit. Upon review, I have found that some information is missing or needs to be updated. Please address the items listed below:

- **Section 10**- Please provide an MCS-90 endorsement form with policy number 9300268050.

Please provide the information requested above via e-mail within five (5) days.

Thank you,

DaQuan Davis

DaQuan L. Davis
Environmental Scientist
Division of Waste and Hazardous Substances
302-739-9403
WHStransporters@delaware.gov
89 Kings Hwy SW, Dover, DE 19901
dnrec.delaware.gov

From: Natasha Yurchak <Natasha@bio-haz.com>
Sent: Monday, June 29, 2026 12:11 PM
To: WHStransporters <WHStransporters@delaware.gov>
Subject: RE: Delaware Solid Waste Transporter Permit Renewal

Good afternoon,

Attached is our license application from Bio-Haz Solutions, inc. The original along with the check has been mailed today.

Thank you and have a great day!

Natasha Yurchak
Administrative Specialist
570-645-2180 Option 1
BIO-HAZ SOLUTIONS

From: WHStransporters <WHStransporters@delaware.gov>
Sent: Monday, June 22, 2026 2:10 PM
Cc: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>
Subject: Delaware Solid Waste Transporter Permit Renewal

Good afternoon,

This is a reminder that your company's Delaware Solid Waste Transporter Permit renewal application is due.

For your convenience, I have attached the permit application to this email. Please print and complete the application. Mail the completed form along with payment (by check or money order) to:

Delaware Department of Natural Resources and Environmental Control, Compliance and Permitting Section, 89 Kings Highway, Dover, DE 19901.

If you have any questions, feel free to contact me using the phone number or email in my signature below.

Regards,

DaQuan L. Davis
Environmental Scientist
Division of Waste and Hazardous Substances
302-739-9403
WHStransporters@delaware.gov
89 Kings Hwy SW, Dover, DE 19901
dnrec.delaware.gov

DaQuan L. Davis
Environmental Scientist
Division of Waste and Hazardous Substances
302-739-9403
daquan.davis@delaware.gov
89 Kings Hwy SW, Dover, DE 19901
dnrec.delaware.gov

OMB No.: 2126-0008 Expiration: 06/30/2027

Form FMCSA Use	Date Received: ________

Please note, the expiration date as stated on this form relates to the process for renewing the Information Collection Request for this form with the Office of Management and Budget. This requirement to collect information as requested on this form does not expire. For questions, please contact the Office of Registration and Safety Information, Registration, Licensing, and Insurance Division.

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting for this collection of information is estimated to be approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.

United States Department of Transportation
Federal Motor Carrier Safety Administration

Endorsement for Motor Carrier Policies of Insurance for Public Liability under Sections 29 and 30 of the Motor Carrier Act of 1980

FORM MCS-90

Issued to BIO HAZ SOLUTIONS **of** Pennsylvania
942094
(Motor Carrier name) *(Motor Carrier state or province) (USDOT Number)*

Dated at 12:51 PM **on this** 15th **day of** July, 2026

Amending Policy Number: 9300268050 **Effective Date:** 07-16-2026

Name of Insurance Company: GEICO Marine Insurance Company

Countersigned by: ____________________
(authorized company representative)

The policy to which this endorsement is attached provides primary or excess insurance, as indicated for the limits shown *(check only one)*:

- ● *This insurance is primary and the company shall not be liable for amounts in excess of $* $750,000 *for each accident.*
- ○ *This insurance is excess and the company shall not be liable for amounts in excess of $* ________ *for each accident in excess of the underlying limit of $* ________ *for each accident.*

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: ________.

Cancellation of this endorsement may be effected by the company or the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under 49 U.S.C. 13901, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, DC).

Filings must be transmitted online via the Internet at http://www.fmcsa.dot.gov/urs.

(continued on next page)

DEFINITIONS AS USED IN THIS ENDORSEMENT

Accident includes continuous or repeated exposure to conditions or which results in bodily injury, property damage, or environmental damage which the insured neither expected nor intended.

Motor Vehicle means a land vehicle, machine, truck, tractor, trailer, or semitrailer propelled or drawn by mechanical power and used on a highway for transporting property, or any combination thereof.

Bodily Injury means injury to the body, sickness, or disease to any person, including death resulting from any of these.

Property Damage means damage to or loss of use of tangible property.

Environmental Restoration means restitution for the loss, damage, or destruction of natural resources arising out of the accidental discharge, dispersal, release or escape into or upon the land, atmosphere, watercourse, or body of water, of any commodity transported by a motor carrier. This shall include the cost of removal and the cost of necessary measures taken to minimize or mitigate damage to human health, the natural environment, fish, shellfish, and wildlife.

Public Liability means liability for bodily injury, property damage, and environmental restoration.

The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a motor carrier of property, with Sections 29 and 30 of the Motor Carrier Act of 1980 and the rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA).

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon, or violation thereof, shall relieve the company from liability or from the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of anyone accident shall not operate to reduce the liability of the company for the payment of final judgments resulting from any other accident.

(continued on next page)

SCHEDULE OF LIMITS — PUBLIC LIABILITY

Type of carriage	Commodity transported	January 1, 1985
(1) For-hire (in interstate or foreign commerce, with a gross vehicle weight rating of 10,001 or more pounds).	Property (nonhazardous)	$750,000
(2) For-hire and Private (in interstate, foreign, or intrastate commerce, with a gross vehicle weight rating of 10,001 or more pounds).	Hazardous substances, as defined in 49 CFR 171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons; or in bulk Division 1.1, 1.2, and 1.3 materials, Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403.	$5,000,000
(3) For-hire and Private (in interstate or foreign commerce, in any quantity; or in intrastate commerce, in bulk only; with a gross vehicle weight rating of 10,001 or more pounds).	Oil listed in 49 CFR 172.101; hazardous waste, hazardous materials, and hazardous substances defined in 49 CFR 171.8 and listed in 49 CFR 172.101, but not mentioned in (2) above or (4) below.	$1,000,000
(4) For-hire and Private (In interstate or foreign commerce, with a gross vehicle weight rating of less than 10,001 pounds).	Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403.	$5,000,000

*The schedule of limits shown does not provide coverage. The limits shown in the schedule are for information purposes only.

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1418783992 00004316 00000005/00000005 00026601/00043129
4004019300268050370300053475