

RECEIPT

DATE

06/25/24

No.

654485

RECEIVED FROM

Emergi-Clean, Inc.

\$650.00

Six Hundred Fifty and 00/100 — DOLLARS

 FOR RENT

DE. SW-2020

 FOR

| | |
|----------|--|
| ACCOUNT | |
| PAYMENT | |
| BAL. DUE | |

 CASH CHECK MONEY
ORDER CREDIT
CARD

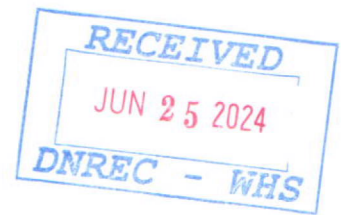
FROM

5877

TO

BY

E.W.



STATE OF DELAWARE
 DEPARTMENT OF NATURAL RESOURCES
 AND ENVIRONMENTAL CONTROL
 DIVISION OF WASTE AND HAZARDOUS SUBSTANCES
COMPLIANCE AND PERMITTING SECTION

89 KINGS HIGHWAY
 DOVER, DELAWARE 19901

TELEPHONE: (302) 739-9403
 FAX: (302) 739-5060

SOLID WASTE TRANSPORTER PERMIT APPLICATION

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- 2020 Expiration Date 9/30/2024

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
- Two Years - \$125.00
- Three Years - \$175.00
- Four Years - \$225.00
- Five Years - \$275.00

- One Year - \$350.00
- Two Years - \$650.00
- Three Years - \$950.00
- Four Years - \$1250.00
- 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 Emergi-Clean, Inc.

| Location Address: | Mailing Address: |
|--|--|
| <u>207 Old York Road, Flemington, NJ 08822</u> | <u>420 Jaques Avenue, Rahway, NJ 07065</u> |
| | |
| | |

Contact: Scott Vogel Title: Chief operating officer

Business Phone: 908-587-0980 Fax: 732-428-4145

E-mail: office@emergiclean.com

24 hr Emergency Contact Phone: 877-742-4221

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: Morristown State: NJ Date: 1996

- 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 owner information

- (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.

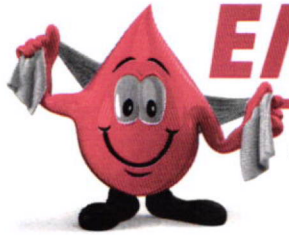
- Residential waste
 Commercial waste (from **non-manufacturing, non-processing** businesses and offices)
 Industrial waste (from a manufacturing or industrial process)
 Dry waste: construction/demolition debris
 trees/stumps
 other (must specify) _____
 Ash: municipal incinerator
 coal ash
 other (must 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

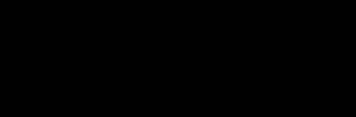


EMERGI-CLEAN, INC.

A REAL LIFE SOLUTION TO A REAL LIFE PROBLEM

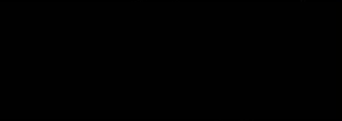
Owner Information

Diane Vogel, Chief Financial Officer



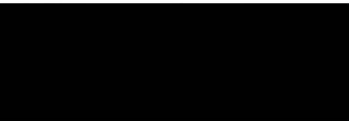
Ownership 56%

Ronald Vogel, Secretary



Ownership 14%

Robert O'Connor Vice President



Ownership 20%

Scott Vogel, Chief Operating Officer



Ownership 10%

Headquarters: 207 Old York Road, Flemington, NJ 08822 / Main Office: 420 Jaques Ave., Rahway, NJ 07065
(908) 587-0980, www.emergiclean.com

Women's Business Enterprise National Council WBE2100993 / Woman Owned Small Business WOSB210925
New Jersey Home Improvement Contractor License #13VH07068300 / Pennsylvania Home Improvement Contractor License #PA096730
NJ Solid/Medical Waste #28774 / NJ Generator #0219314 / NY Waste Transporter #NJ-1042
NY DOL Mold Remediator Company License #01406 / PA Medical Waste & Chemotherapeutic Transporter #PA-HC0284

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) Stricycle, Inc. 75 Cross Mill Road, Keasby, NJ 08832 (Autoclave)

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 A901 (NJ)
- 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 NY Part 364 - Permit # NJ-1042
- No transporter permits in other states

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

DOT# 2964802 MC# 1591019-C

- 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 Only (Intrastate)? Yes No
- (c). Do you transport Interstate? Yes No



New Jersey Department of Environmental Protection



A-901 License

This is to advise you that the investigative report from the Attorney General required under N.J.S.A. 13:1E-126 et seq. has been received by the Department of Environmental Protection (Department or NJDEP). Based upon the review of the investigative report, the Department is hereby issuing this **A-901 License** to:

EMERGI-CLEAN, INC.

Please be advised that this license hereby issued is a “**conditional**” license and is modified by the terms and conditions as specified on the **attached document** as they have been put forth by the Office of the Attorney General (OAG) and the Department. **Failure to meet the specified conditions constitutes grounds for the revocation of this license.**

This A-901 approval **does not authorize the operation of any business entity or confer the authority to commercially engage in the solid waste, hazardous waste, or soil and fill recycling industry in New Jersey without all necessary permit and/or approvals in place.**

This license is only issued to Emergi-Clean, Inc. (Licensee) for its exclusive use and control. You are required to notify the Department and the OAG, within 30 days of any changes regarding this company or its operations. In addition, this license must be renewed annually, by submitting the A-901 Annual Update (found at: <https://www.nj.gov/dep/dshw/a901/a901frms.htm>) to the OAG on or before November 1st of each calendar year.

Date Issued: July 12, 2022

Signature: *Roxanne Feasel*
Roxanne Feasel, Permit Coordination Officer
NJDEP, Planning and Licensing, A-901 Unit

005792 – PI 238870

FEIN: 22-3439246

PART 364
WASTE TRANSPORTER PERMIT NO. NJ-1042

Pursuant to Article 27, Titles 3 and 15 of the Environmental Conservation Law and 6 NYCRR 364

PERMIT ISSUED TO:

EMERGI-CLEAN INC.
207 OLD YORK ROAD
FLEMINGTON, NJ 08822

CONTACT NAME: SCOTT W. VOGEL
COUNTY: OUT OF STATE
TELEPHONE NO: (908)587-0980

PERMIT TYPE:

- NEW
 RENEWAL
 MODIFICATION

EFFECTIVE DATE: 05/16/2024
EXPIRATION DATE: 05/15/2025
US EPA ID NUMBER: NJR000090472

AUTHORIZED WASTE TYPES BY DESTINATION FACILITY:

The Permittee is Authorized to Transport the Following Waste Type(s) to the Destination Facility listed :

| Destination Facility | Location | Waste Type(s) | Note |
|------------------------------------|--------------------|--|------|
| AARCO ENVIRONMENTAL SERVICES, INC. | LINDENHURST , NY | Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil Septage only (residential) | |
| Clean Water of New York Inc | Staten Island , NY | Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil | |
| Dale Transfer Corp | West Babylon , NY | Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil Residential Raw Sewage including Portable Toilet Waste | |
| DANIELS SHARPSMART, INC. | EASTON , PA | Medical | |
| EMERGI-CLEAN INC. | RAHWAY , NJ | Medical | |
| Stericycle, Inc Oneonta | Oneonta , NY | Medical | |

NOTE: By acceptance of this permit, the permittee agrees that the permit is contingent upon strict compliance with the Environmental Conservation Law, all applicable regulations, and the General Conditions printed on the back of this page.

ADDRESS:

New York State Department of Environmental Conservation
Division of Materials Management - Waste Transporter Program
625 Broadway, 9th Floor
Albany, NY 12233-7251

AUTHORIZED SIGNATURE: Laura Stevens Digitally signed by Laura Stevens
Date: 2024.04.05 13:07:31 -04'00' Date: ____/____/____

01

PART 364
WASTE TRANSPORTER PERMIT NO. NJ-1042

Pursuant to Article 27, Titles 3 and 15 of the Environmental Conservation Law and 6 NYCRR 364

PERMIT ISSUED TO:

EMERGI-CLEAN INC.
207 OLD YORK ROAD
FLEMINGTON, NJ 08822

PERMIT TYPE:

- NEW
 RENEWAL
 MODIFICATION

CONTACT NAME: SCOTT W. VOGEL
COUNTY: OUT OF STATE
TELEPHONE NO: (908)587-0980

EFFECTIVE DATE: 05/16/2024
EXPIRATION DATE: **05/15/2025**
US EPA ID NUMBER: NJR000090472

AUTHORIZED VEHICLES:

The Permittee is Authorized to Operate the Following Vehicles to Transport Waste:

(Vehicles enclosed in <>'s are authorized to haul Residential Raw Sewage and/or Septage only)

7 (Seven) Permitted Vehicle(s)

NJ XCGX85
NJ XDXP34
NJ XDXW35
NJ XENX99
NJ XKNA54
NJ XNRN24
NJ XNSA47
End of List

2510-CD-LRWM0056B

Rev. 04/00

**PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION
REGULATED MEDICAL AND CHEMOTHERAPEUTIC TRANSPORTER LICENSE**

PA-HC0284

AUTHORIZATION NO.

05/31/2025

EXPIRATION DATE

5

NO. OF COPIES

-VOID UNLESS VALIDATED

**VALIDATED
03/14/2023**

NAME & ADDRESS OF LICENSEE

EMERGI-CLEAN INC

207 OLD YORK RD

FLEMINGTON NJ 08822-1985

BUSINESS PHONE NO.

908-587-0980

24-HOUR PHONE NO.

877-742-4221



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 -

CERTIFICATE OF LIABILITY INSURANCE

ISSUING DATE (MM/DD/YYYY)
07/13/2023

THIS CERTIFICATE ISSUED IS FOR INFORMATION PURPOSES ONLY. IT PROVIDES NO RIGHTS TO THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, ALTER OR EXTEND COVERAGE PROVIDED BY THE POLICIES LISTED BELOW. THIS CERTIFICATE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE CARRIER AFFORDING COVERAGE AND THE CERTIFICATE HOLDER.

A STATEMENT ON THIS CERTIFICATE DOES NOT PROVIDE RIGHTS TO THE CERTIFICATE HOLDER FOR THE FOLLOWING UNLESS THE APPLICABLE ENDORSEMENTS ARE ATTACHED TO THE POLICY(IES) LISTED BELOW

ADDITIONAL INSURED/ALTERNATE EMPLOYER/WAIVER OF SUBROGATION/PRIMARY & NON-CONTRIBUTORY/NOTICE OF CANCELLATION: THE POLICY(IES) MUST HAVE THE NECESSARY ENDORSEMENT(S) TO MODIFY TERMS AND CONDITIONS.

| | | |
|---|--|---------------------------------------|
| INSURED: Emergi-Clean Inc See Additional Remarks Schedule 207 Old York Rd Flemington, NJ 08822 | INSURANCE CARRIER AFFORDING COVERAGE: | NAIC # |
| | GENERAL LIABILITY: | |
| | AUTO LIABILITY: | New Jersey Manufacturers Insurance Co |
| | UMBRELLA LIABILITY: | 12122 |
| | WORKERS COMP: | |

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.

| TYPE OF INSURANCE | POLICY NUMBER | POLICY PERIOD (MM/DD/YYYY) - (MM/DD/YYYY) | LIMITS OF INSURANCE |
|--|------------------|---|--|
| COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> OCCURRENCE GENERAL AGGREGATE LIMIT APPLIES: <input type="checkbox"/> POLICY <input type="checkbox"/> OBJECT <input type="checkbox"/> LOCATION | | | EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Each Occurrence) \$ MED EXP (Any One Person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODS - COMP/OPS AGG \$ COMBINED SINGLE LIMIT (Each accident) \$1,000,000 BODILY INJURY (Per Person) \$ BODILY INJURY (Per Accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | C2943371 CAGM | 07/24/2023 - 07/24/2024 | EACH OCCURRENCE \$ AGGREGATE \$ E.L. EACH ACCIDENT \$ E.L. DISEASE-EACH EMPLOYEE \$ E.L. DISEASE-POLICY LIMIT \$ PER STATUTE |
| UMBRELLA LIABILITY <input type="checkbox"/> OCCURRENCE <input type="checkbox"/> RETENTION \$ | | | |
| WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | | | |

SEE ATTACHED ADDITIONAL REMARKS SCHEDULE FOR DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES

| CERTIFICATE HOLDER Department of Natural Resources and Environmental Control Compliance and Permitting Section 89 Kings Highway Dover, DE 19901 | ADDITIONAL INSURED (IF APPLICABLE) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">ADDL INSURED OR ALTERNATE EMPLOYER</th> <th style="width: 33%;">WAIVER OF SUBROGATION</th> <th style="width: 34%;">PRIMARY & NON-CONTRIBUTORY</th> </tr> <tr> <td><input type="checkbox"/> CGL</td> <td><input type="checkbox"/> CGL</td> <td><input type="checkbox"/> CGL</td> </tr> <tr> <td><input type="checkbox"/> AUTO</td> <td><input type="checkbox"/> AUTO</td> <td><input type="checkbox"/> AUTO</td> </tr> <tr> <td><input type="checkbox"/> WC (ALT. EMPLOYER)</td> <td><input type="checkbox"/> WC</td> <td><input type="checkbox"/> N/A WC</td> </tr> <tr> <td><input type="checkbox"/> UMB</td> <td><input type="checkbox"/> UMB</td> <td><input type="checkbox"/> UMB NON-CONTRIB</td> </tr> </table> | ADDL INSURED OR ALTERNATE EMPLOYER | WAIVER OF SUBROGATION | PRIMARY & NON-CONTRIBUTORY | <input type="checkbox"/> CGL | <input type="checkbox"/> CGL | <input type="checkbox"/> CGL | <input type="checkbox"/> AUTO | <input type="checkbox"/> AUTO | <input type="checkbox"/> AUTO | <input type="checkbox"/> WC (ALT. EMPLOYER) | <input type="checkbox"/> WC | <input type="checkbox"/> N/A WC | <input type="checkbox"/> UMB | <input type="checkbox"/> UMB | <input type="checkbox"/> UMB NON-CONTRIB |
|--|---|--|-----------------------|----------------------------|------------------------------|------------------------------|------------------------------|-------------------------------|-------------------------------|-------------------------------|---|-----------------------------|---------------------------------|------------------------------|------------------------------|--|
| ADDL INSURED OR ALTERNATE EMPLOYER | WAIVER OF SUBROGATION | PRIMARY & NON-CONTRIBUTORY | | | | | | | | | | | | | | |
| <input type="checkbox"/> CGL | <input type="checkbox"/> CGL | <input type="checkbox"/> CGL | | | | | | | | | | | | | | |
| <input type="checkbox"/> AUTO | <input type="checkbox"/> AUTO | <input type="checkbox"/> AUTO | | | | | | | | | | | | | | |
| <input type="checkbox"/> WC (ALT. EMPLOYER) | <input type="checkbox"/> WC | <input type="checkbox"/> N/A WC | | | | | | | | | | | | | | |
| <input type="checkbox"/> UMB | <input type="checkbox"/> UMB | <input type="checkbox"/> UMB NON-CONTRIB | | | | | | | | | | | | | | |

| | |
|--|---------------------------|
| CANCELLATION SHOULD ANY OF THE ABOVE CAPTIONED POLICIES BE CANCELLED, EITHER BY REQUEST OF THE INSURED OR CARRIER, PRIOR TO THE EXPIRATION DATE, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY TERMS, CONDITIONS & PROVISIONS | AUTHORIZED REPRESENTATIVE |
|--|---------------------------|

ADDITIONAL REMARKS SCHEDULE

| | | |
|--|--|---------------------------------------|
| INSURED: Emergi-Clean Inc 207 Old York Rd Edison, NJ 08822 | INSURANCE CARRIER AFFORDING COVERAGE: | NAIC # |
| | GENERAL LIABILITY: | |
| | AUTO LIABILITY: | New Jersey Manufacturers Insurance Co |
| | UMBRELLA LIABILITY: | |
| | WORKERS COMP: | |

SCHEDULE OF NAMED INSURED(S):

| POLICY NUMBER | LINE OF BUSINESS | NAMED INSURED |
|---------------|---|------------------|
| | Commercial General Liability | |
| C2943371 | Automobile Liability | Emergi-Clean Inc |
| | Umbrella Liability | |
| | Workers Compensation And Employers' Liability | |

ADDITIONAL REMARKS:

USDOT Number: _____ 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 Emergi-Clean Inc of New Jersey
(Motor Carrier name) (Motor Carrier state or province)

Dated at 8:00 am on this 13th day of June, 2022

Amending Policy Number: C2943371 Effective Date: 07/24/2022

Name of Insurance Company: NJM Insurance Group

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 \$ 750,000.00 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: 888-656-4467 ext 4016.

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 10,000 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 10,000 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 10,000 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 10,000 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.

- (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 <input type="checkbox"/> | \$350,000.00 <input type="checkbox"/> |
| Commercial Waste | \$750,000.00 + MCS-90 <input type="checkbox"/> | \$350,000.00 <input type="checkbox"/> |
| Industrial Waste | \$750,000.00 + MCS-90 <input type="checkbox"/> | \$350,000.00 <input type="checkbox"/> |
| Dry Waste | \$750,000.00 + MCS-90 <input type="checkbox"/> | \$350,000.00 <input type="checkbox"/> |
| Ash | \$750,000.00 + MCS-90 <input type="checkbox"/> | \$350,000.00 <input type="checkbox"/> |
| Infectious Waste | \$1,000,000.00 + MCS-90 <input type="checkbox"/> | \$750,000.00 + MCS-90 <input type="checkbox"/> |
| Non-Hazardous Petroleum Contaminated Soils | \$750,000.00 + MCS-90 <input type="checkbox"/> | \$350,000.00 <input type="checkbox"/> |
| Asbestos | \$1,000,000.00 + MCS-90 <input type="checkbox"/> (For Hire & Private) | \$350,000.00 <input type="checkbox"/> |
| Scrap Tires Only | \$350,000.00 <input type="checkbox"/> | \$350,000.00 <input type="checkbox"/> |

11. Spill Control and Safety

List all spill control and safety equipment which 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.

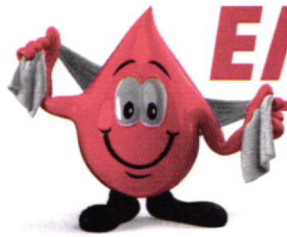
Spill Control Plan: Attachment Transportation Contingency Plan

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 Driver Training



EMERGI-CLEAN, INC.

A REAL LIFE SOLUTION TO A REAL LIFE PROBLEM

Transportation Contingency Plan

Provided for: EMERGI-CLEAN, INC.

207 Old York Road

Flemington, NJ 08822

420 Jaques Avenue

Rahway, NJ 07065

PHONE # 908 587 0980

Headquarters: 207 Old York Road, Flemington, NJ 08822 / Main Office: 420 Jaques Ave., Rahway, NJ 07065
(908) 587-0980, www.emergiclean.com

Women's Business Enterprise National Council WBE2100993 / Woman Owned Small Business WOSB210925
New Jersey Home Improvement Contractor License #13VH07068300 / Pennsylvania Home Improvement Contractor License #PA096730
NJ Solid/Medical Waste #28774 / NJ Generator #0219314 / NY Waste Transporter #NJ-1042
NY DOL Mold Remediation Company License #01406 / PA Medical Waste & Chemotherapeutic Transporter #PA-HC0284

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INTRODUCTION

PLAN CONTENTS

This Transportation Contingency Plan (hereafter referred to as the "Plan") describes organizational lines of responsibility and procedures to be followed when responding to spill incidents within the transportation network of Emergi-Clean, Inc.

This Plan contains comprehensive technical and procedural information necessary for effective management of any spill response with the geographic boundaries of the response area of the Plan as described in Geographic Areas. The plan also defines notification procedures for contacting company management and government authorities. It identifies spill response resources which can be used by Emergi-Clean, Inc. during a response operation.

PURPOSE/OBJECTIVES

The purpose of this Plan is to help company personnel prepare for and respond quickly and safely to spill incidents originating with the transportation network. The Plan's primary purpose is to ensure an effective, comprehensive response and prevent injury or damage to company employees, the public and the environment. The specific objectives of the Plan are to:

- Define alert and notification procedures to be followed when a spill occurs.
- Outline response procedures and techniques to be used during a spill incident.
- Provide guidelines for handling a spill response operation.
- Document resources available to assist with a spill incident.

REGULATORY COMPLIANCE

This plan, in addition to implementing company policy, satisfies existing federal/state requirements. (49 CFR Parts 171,172, 173, 174, and 176)

COMPANY DESCRIPTION

Emergi-Clean, Inc. operates a fleet of transportation vehicles that are primarily involved in the transportation of biohazardous waste and chemicals incidental in the process to clean up a biohazardous incident.

Numerous spill control methods are used by Emergi-Clean, Inc. that includes a combination of work practices and physical controls. Work practices by facility personnel include careful inventory control, daily inspections, and monitoring of all load securement procedures.

In the event a spill did occur during transportation the drivers are trained in initial response and notification of emergency personnel. The driver's primary responsibility is to protect themselves, the public, and notify dispatch of the problems so our emergency procedures can be activated.

COMPANY PHILOSOPHY/POLICY

Emergi-Clean, Inc. will retain the responsibility and authority for direction of response operations for spills resulting from its vehicles. Company management will ensure that all company personnel involved in a spill response will be familiar with their assignments and responsibilities.

GEOGRAPHIC AREAS

This Plan includes all Emergi-Clean, Inc. operational area within and outside of the State of New Jersey, Pennsylvania, New York and Connecticut and Delaware.

SPILL CONTROL AND SAFETY EQUIPMENT

Spill Kits will be carried on the vehicles. Items in the spill kits are as follows: Speedy dry, Sorbent Pads, Goggles, Gloves, Containment bags. Brooms, Shovels and small hand tools are also carried on the truck for emergencies.

EMERGENCY RESPONSE ACTION PLAN

SPILL DETECTION/NOTIFICATION SEQUENCE

The following notification sequence is intended as a guide or general rule for reporting most spills. Company policy and good judgement should be used when making these notifications. The sequence may be altered depending on the severity of the spill and the threat to public health and safety.

1. COMPANY NOTIFICATIONS

When a spill is detected, the person detecting the release will immediately notify the 24 hour Company Dispatch at (908-587-0980) and report such to the person on duty. If the spill cannot be easily cleaned up by the person making the report, then the 24 hour dispatch person will immediately contact the Safety Officer, currently Ronald Vogel. If the spill is small and not reportable by State Guidelines, a written report will be immediately sent to the Safety Officer's office.

On any spill the Safety Officer has full authority to activate and implement spill response. **Whenever a question arises as to whether or not to immediately notify the Safety Officer, the notification will be made. The person taking the initial call will use every method to contact the Safety Officer. This includes Email, cell phone, home phone, or known family members of the Safety Officer. If a positive contact cannot be made within 15 minutes, the person handling the initial report will contact the Chief Operational Officer, Scott Vogel.**

2. LOCAL NOTIFICATION

After the company has been notified of the release, the Safety Officer or his/her designee will immediately notify local fire, police or highway patrol if necessary. Also if needed, the insurance company. If the spill occurs at a remote location, it will be the driver's responsibility to notify local authorities by dialing 911.

3. RESPONSE CONTRACTOR NOTIFICATIONS

The Safety Officer will be responsible for notifying response contractors, if the spill is one in which cannot be cleaned up by company personnel.

4. REGULATORY NOTIFICATION

The Safety Officer will be responsible for notifying or seeing that Emergi-Clean, Inc. personnel notify all regulatory agencies of spills.

Agency to Notify

| | |
|---|----------------------------------|
| NJ Department of Environmental Protection | 1-877-927-6337 |
| NY Department of Environmental Conservation | 1-800-457-7362 |
| PA Department of Environmental Protection | 717-651-2001 |
| CT Department of Environmental Protection | 1-866-337-7745 |
| National Emergency Response Center | 800 424 8802 |
| Delaware Emergency Reporting Numbers | 800-662-8802 and 302 739 9401 |

If a petroleum spill could potentially reach a waterway, the National Response Center (NRC) must be notified immediately by calling 800 424 8802.

REPORTING GUIDELINES

When making verbal or written notifications, include the following information in the report:

- A. Your Name, Job Title
- B. Company Name, Address and Telephone Number
- C. Time, Date, Identification, Quantity and Location of release
- D. Medium into which substance has been released
- E. Weather Conditions
- F. List Actions taken to contain spill to this point
- G. List injuries or fatalities
- H. Any precautions to be taken because of the release
- I. Names of any agencies who have already responded
- J. Other information relevant to the cause of the release or damage

Telephone notification should be made immediately after a release is discovered.

INITIAL RESPONSE PROCEDURES

This plan becomes effective immediately upon notification of a spill occurring from a transport vehicle. The specific action to control, contain, and cleanup a spill will vary with the type of spill, the location, and the amount. The person observing the spill should analyze the situation and exercise good judgement in formulating the best action plan for the type of spill. It is important that the person reporting makes clear distinction between their opinion and direct observation of the situation.

Useful information is items such as: length and width of the spill, depth of the fluid spill, direction of the wind, location of any waterways, location of any surface run off collections systems, location of vulnerable persons, equipment or supplies needed to contain or clean up the spill, presence or assistance.

ISOLATE: Keep People Away! Warn them of the danger, keep people away and upwind of the spillage.

CONTAIN: Attempt to contain the spilled material but only if it can be done safely.

COMMUNICATE: Notify Authorized Individual identified in this Plan.

Be expected to Provide:

- Product proper shipping name, class, and UN#
- Extent of Spill
- Location
- When It Happened
- Phone Number where you can be reached
- Let them hang up the phone first so all question are answered
- Follow instructions, keep dispatch informed of changes

Typically, in the event of a large spill that cannot easily be handled by the spill observer, the Authorized individual will assume control of the situation and be responsible for implementing spill containment, protection, and recovery actions.

EMERGENCY TELEPHONE LIST

COMPANY PERSONNEL

| | | |
|---------------|----------------------------|--------------|
| RON VOGEL, | SAFETY OFFICER | 908 966 2740 |
| SCOTT VOGEL, | COO | 908 967 1985 |
| BOB O'CONNOR, | TRANSPORTATION COORDINATOR | 908 296 4254 |
| DIANE VOGEL, | PRESIDENT | 908 925 3798 |

LOCAL

| | |
|-------------|-----|
| Police/Fire | 911 |
|-------------|-----|

STATE

| | |
|------------------|--------------|
| Pennsylvania DEP | 717-651-2001 |
|------------------|--------------|

| | |
|----------------|----------------|
| New Jersey DEP | 1-877-927-6337 |
|----------------|----------------|

| | |
|--------------|----------------|
| New York DEC | 1-800-457-7362 |
|--------------|----------------|

| | |
|-----------------|----------------|
| Connecticut DEP | 1-866-337-7745 |
|-----------------|----------------|

| | |
|----------|----------------|
| Delaware | 1-800-662-8802 |
|----------|----------------|

FEDERAL

| | |
|--------------------------|--------------|
| National Response Centre | 800-424-8802 |
|--------------------------|--------------|

INITIAL SPILL RESPONSE GUIDELINES

PURPOSE

The following spill response checklist has been developed to assist the spill observer and Authorized Individuals in the event of an actual spill. Numerous spill situations were considered in preparing this checklist. In addition to using this checklist in the event of a spill, it should be used as a training tool and reviewed periodically.

This checklist is applicable to a wide variety of potential spill situations but is by no means an attempt to address every plausible situation. An actual response must always be tailored to meet actual circumstances.

While the need to contain and clean-up the spill is important, personal, and public health and safety is the single most important consideration in the event of a spill.

Also, the specific properties of the products involved must always be considered. For example, the risk of fire or explosion is typically much greater for spills of gasoline than for spills of fuel oil. Consequently, for gasoline spills, the need to eliminate all potential sources of ignition and initiate evacuation procedures may warrant a higher priority than for a spill of fuel oil, etc.

IMMEDIATE ACTION CHECKLIST

SPILL OBSERVER

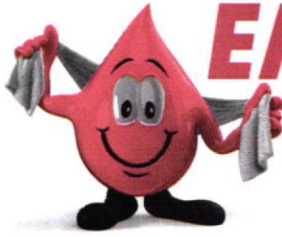
1. _____ Immediately Warn all persons to stay clear.
2. _____ Determine source of leak and stop if possible.
3. _____ Eliminate all sources of ignition.
4. _____ Attend to injured personnel, ensure safety to all others.
5. _____ Identify materials and estimate quantity spilled.
6. _____ Notify the Authorized Individuals/Alternate Authorized Individuals and assist with initial response actions as desired.
7. _____ Contain product and/or keep product away from storm water sewers by blocking or diking to prevent discharge off site, if can be done safely.
8. _____ Keep personnel/responders upwind of spill to avoid exposure.
9. _____ Keep spillage area under surveillance until cleanup is complete.

AUTHORIZED INDIVIDUALS/ALTERNATE AUTHORIZED INDIVIDUALS

1. _____ Evaluate the situation and assume control.
2. _____ Notify Fire Department and Police Department as appropriate.
3. _____ Make regulatory notifications of spill and proposed actions.
4. _____ Document names of agencies called persons who received calls and the times.
5. _____ Determine level of response needed.
6. _____ Direct containment and cleanup activities.

INITIATING CONTAINMENT OPERATIONS AS QUICKLY AS POSSIBLE CAN DRAMATICALLY REDUCE THE IMPACT OF MOST SPILLS.

TIME: _____ DATE: _____ PERSONNEL REPORTING: _____



EMERGI-CLEAN, INC.

A REAL LIFE SOLUTION TO A REAL LIFE PROBLEM

Driver Training

Emergi-Clean, Inc. prides itself on safety and compliance. Emergi-Clean, Inc. has been in business for 27 years and has an excellent driving record. All our employees are trained, and their driving records are monitored.

The Company policy is for annual DOT physicals and all employees carry a DOT card on their possess while driving an Emergi-Clean, Inc. Vehicle.

All vehicles are inspected twice daily Pre and Post Inspection. Vehicles are maintained on a regular basis with frequent oil changes and fluid replenishment. All Vehicles are either self-inspected or are inspected by a New Jersey Licensed inspection station.

All employees are encouraged to attend a Defensive Driving Course. Employees are trained on the proper operation of each vehicle including trailers.

Employees are trained in the proper handling and transportation of Medical Waste. Including but not limited to packaging, storage, labelling, position on the truck and securing the load within the truck.

All Employees are familiar with Emergi-Clean, Inc's Transportation Contingency Plan and are familiar with the conditions of all our transporter's permit.

Employees are trained on the proper completion of the transportation documents and the distribution of the copies to the generator and the state if necessary.

When an accident does occur, the employee is sent for a drug screen and counseled on defensive driving. The accident is reviewed by the Safety Manager and if it is deemed the driver's fault appropriate re- training or disciplinary actions are taken.

Headquarters: 207 Old York Road, Flemington, NJ 08822 / Main Office: 420 Jaques Ave., Rahway, NJ 07065
(908) 587-0980, www.emergiclean.com

Women's Business Enterprise National Council WBE2100993 / Woman Owned Small Business WOSB210925
New Jersey Home Improvement Contractor License #13VH07068300 / Pennsylvania Home Improvement Contractor License #PA096730
NJ Solid/Medical Waste #28774 / NJ Generator #0219314 / NY Waste Transporter #NJ-1042
NY DOL Mold Remediator Company License #01406 / PA Medical Waste & Chemotherapeutic Transporter #PA-HC0284

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 _____ Date 6/19/2024

Print Name Scott W. Vogel Title Chief Operating Officer

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

Davis, DaQuan (DNREC)

From: Emergi-Clean Office Staff <office@emergiclean.com>
Sent: Thursday, June 27, 2024 10:30 AM
To: WHStranporters
Subject: Re: Delaware Solid Waste Transporter Permit DE-SW-2020
Attachments: VEHICLE OPERATOR.pdf

Hello

Sorry for the inconvenience.

Please try this file.

Thank you,
Emergi-Clean Office Staff

Emergi-Clean Inc. ®
908-587-0980 NJ Office
732-428-4145 Office Fax
732-453-0095 EFax
www.emergiclean.com



New Jersey Home Improvement Contractor License # 13VH07068300
Pennsylvania Home Improvement Contractor License # PA096730

NJ Solid/Medical Waste #28774
NJ Generator #1023652
NY Waste Transporter #NJ-1042

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On Jun 27, 2024, at 9:32 AM, WHStranporters <WHStranporters@delaware.gov> wrote:

Hi,

I cannot open the file can you please send it in a Word document?

Thank you,
DaQuan Davis

<image001.png>

DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

<image002.png> 302-739-9403

<image003.png> daquan.davis@delaware.gov

<image004.png> 89 Kings Hwy SW, Dover, DE 19901

<image005.png> dnrec.delaware.gov

<image006.png> <image007.png> <image008.png>

From: Emergi-Clean Office Staff <office@emergiclean.com>

Sent: Thursday, June 27, 2024 8:59 AM

To: WHStranporters <WHStranporters@delaware.gov>

Subject: Re: Delaware Solid Waste Transporter Permit DE-SW-2020

Good Morning

As per your request attached is our Vehicle Operator/Driver's List.

If you need any further information or have any questions, please do not hesitate to contact me.

Thank you for your attention in this important matter.

Ann Marie

Thank you,
Emergi-Clean Office Staff

Emergi-Clean Inc. ®
908-587-0980 NJ Office
732-428-4145 Office Fax
732-453-0095 EFax
www.emergiclean.com

<image009.png>

New Jersey Home Improvement Contractor License # 13VH07068300

Pennsylvania Home Improvement Contractor License # PA096730

NJ Solid/Medical Waste #28774

NJ Generator #1023652

NY Waste Transporter #NJ-1042

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errors or omissions in the contents of this message, which arise as a result of e-mail transmission. If verification is required please request a hard-copy version.

On Jun 26, 2024, at 3:07 PM, WHStranporters <WHStranporters@delaware.gov> wrote:

Hi Mr. Uogel,

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

- Section 12- The vehicle operators/drivers list was not submitted, please provide this list.

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

Sincerely,

DaQuan Davis

<image001.png>

DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

<image002.png> 302-739-9403

<image003.png> daquan.davis@delaware.gov

<image004.png> 89 Kings Hwy SW, Dover, DE 19901

<image005.png> dnrec.delaware.gov

<image006.png> <image007.png> <image008.png>



VEHICLE OPERATORS/DRIVERS

| <u>NAME</u> | <u>#</u> | <u>EXPIRATION</u> |
|------------------|----------|-------------------|
| SCOTT VOGEL | | 12/16/2027 |
| ROBERT O'CONNOR | | 11/11/2026 |
| RONALD VOGEL | | 12/07/2027 |
| IAN LOPES | | 5/17/2028 |
| RANSES ROBLES | | 5/4/2025 |
| JUSTIN O" CONNOR | | 5/22/2025 |
| WILLIAM THOMPSON | | 10/9/2026 |