

RECEIPT

DATE 08/05/24No. 654526RECEIVED FROM Tire Waste management corp. \$ 75.00Seventy Five and 0/100 DOLLARS FOR RENT FOR DE-SW-2083

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY
ORDER CREDIT
CARDFROM #10270 TO _____BY E.W



RECEIVED

JUL 29 2024

DAREC - WMS

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- _____ Expiration Date _____

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

- One Year - \$75.00
- Two Years - \$125.00
- Three Years - \$175.00
- Four Years - \$225.00
- Five Years - \$275.00

ALL OTHERS

- 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 Tire Waste Management Corp

Location Address:	Mailing Address:
109 Meeker Ave, Newark, NJ 07114	1698 5th Street, Ewing, NJ 08683

Contact: Hardeep Paracha Title: CFO

Business Phone: 9736451400 Fax: 9736451430

E-mail: pnsrecycling@gmail.com

24 hr Emergency Contact Phone: 6099947415

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: Princeton State: NEW JERSEY Date: 06/08/2020

- 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 Yes

(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) 876084

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 NJDE041780
 - 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 NJ1321-NYS
- No transporter permits in other states

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

DOT# 3483920 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 Only (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 <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 checked="" 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 YES

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 YES

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 *1120*

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 *7/24/2024*

Print Name Hardeep Paracha Title CFO

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

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. *yes*

(3) The driver will perform the following pre-trip inspections:

- 1). *Tractor and Trailer*
- 2). *All attached equipment working good*

(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 following designated company coordinator:

Name: *Hardeep Paracha* Phone: *973 645 1400*

(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. *yes*

TIRE WASTE MANAGEMENT CORPORATION

109 Meeker Ave, Newark, NJ 07114

Ph-973-645-1400 Fax-973-645-1430

pnsrecycling@gmail.com

Driver Training

CDL (Commercial Driver's License) driver training is essential to ensure that drivers are equipped with the knowledge and skills to operate commercial vehicles safely. Here are the key aspects typically covered in CDL driver safety training:

1. **Regulatory Compliance:** Understanding and complying with federal and state regulations governing commercial vehicle operation, including hours of service regulations, weight limits, and traffic laws.
2. **Vehicle Inspection:** Training on conducting thorough pre-trip, on-the-road, and post-trip inspections to identify potential safety hazards or mechanical issues.
3. **Safe Driving Techniques:** Instruction on defensive driving techniques, maintaining safe following distances, proper lane changes, and managing speed according to road and weather conditions.
4. **Handling Emergencies:** Preparation for responding to emergencies such as tire blowouts, brake failures, or adverse weather conditions.
5. **Cargo Handling and Securement:** Training on loading and securing cargo to prevent shifting or loss during transit, ensuring vehicle stability and safety.
6. **Adverse Conditions:** Guidance on navigating challenging conditions such as construction zones, heavy traffic, low visibility, and mountainous terrain.
7. **Fatigue Management:** Education on the importance of adequate rest and strategies to combat driver fatigue, including recognizing signs of drowsiness and knowing when to take breaks.
8. **Drug and Alcohol Awareness:** Awareness training on the dangers of impaired driving, the importance of adhering to drug and alcohol testing requirements, and the consequences of violations.
9. **Communication and Professionalism:** Training on effective communication with dispatchers, law enforcement, and other motorists, and maintaining a professional demeanor at all times.
10. **Incident Reporting:** Understanding procedures for reporting accidents, incidents, and near-misses, and documenting any safety concerns or violations.
11. **Environmental Responsibility:** Awareness of environmental impacts associated with commercial driving and practices to minimize fuel consumption and emissions.
12. **Continuing Education:** Encouragement to stay informed about updates in safety regulations, technology, and industry best practices through ongoing professional development.

CDL driver safety training typically combines classroom instruction with hands-on practice to reinforce learning and ensure drivers are prepared for real-world scenarios. It's crucial for both new and experienced drivers to undergo regular safety training to maintain compliance, enhance skills, and prioritize safety on the road.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/16/2024

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 Hilb Group of NJ, LLC - Campisano PO Box 447 Kearny NJ 07032		CONTACT NAME: Courtney Woodson PHONE (A/C, No, Ext): (201) 997-0060 E-MAIL ADDRESS: cwoodson@hilbgroup.com FAX (A/C, No): (201) 997-3378	
INSURED Tire Waste Management Corp 109 Meeker Ave Newark NJ 07114		INSURER(S) AFFORDING COVERAGE INSURER A: United States Liability Insurance Co INSURER B: Prime Property & Casualty Ins INSURER C: LM Insurance Corporation INSURER D: Lloyd's of London INSURER E: INSURER F:	
		NAIC #	
		25895	
		14371	
		33600	

COVERAGES **CERTIFICATE NUMBER:** CL2382508200 **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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			GL 1157728A	08/01/2023	08/01/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			PC23080249-0	08/01/2023	08/01/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WC5-33S-B23X0S-013	05/17/2024	05/17/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
D	Motor Truck Cargo			MAP0393230344	08/01/2023	08/01/2024	Per Conveyanc/\$100,000 Deduct/\$2,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Delaware Solid Waste Authority is listed as the Additional Insured

CERTIFICATE HOLDER		CANCELLATION	
Additional Insured Delaware Solid Waste Authority 28560 Landfill Lane Georgetown DE 19947		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 	

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**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
ANNUAL REPORT CERTIFICATE**

TIRE WASTE MANAGEMENT CORP
0450498132

The Division of Revenue and Enterprise Services hereby affirms that the following annual report for TIRE WASTE MANAGEMENT CORP was submitted on 04/26/2023 for the year: 2023

Registered Agent and Office

HARDEEP PARACHA
54 TREETOP CIECLE
PRINCETON, NJ 08540

Main Business Address

54 TREETOP CIECLE
PRINCETON, NJ 08540

Principal Business Address

123 Pennsylvania Ave
Kearny, NJ 07032

Officers and Directors

OTHER
HARDEEP PARACHA
54 TREETOP CIECLE
PRINCETON, NJ 08540

OTHER
ABUSAAD MASOOD PARACHA
54 TREETOP CIECLE
PRINCETON, NJ 08540



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal, this
26th day of April, 2023*

A handwritten signature in cursive script, appearing to read "Elizabeth Maher Muoio".

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 2708261410
Verify this certificate online at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

EXPIRES:

09/30/2024

NEW JERSEY APPORTIONED CAB CARD
KEEP THIS CERTIFICATE IN YOUR VEHICLE

PLATE
NUMBER:

AW347S

UNIT NO. 1		YEAR 2015		MAKE INT		ACCOUNT NUMBER NJ-66697		NJ 080000	AL 080000	AR 080000	AZ 080000
VEHICLE IDENTIFICATION NUMBER 3HSDJAPR7FN740211				FLEET NO. 001	SUPP. NO. 0000	REG. CODE 11		CA 080000	CO 080000	CT 080000	DC 080000
TYPE TT	AXLES 2	GROSS WEIGHT 80000		FUEL D	REGISTRATION DATE 10/01/2023			DE 080000	FL 080000	GA 080000	IA 080000
				DESCRIPTION COMMERCIAL TRACTOR		TRANS ID # IU202466697001000		ID 080000	IL 080000	IN 080000	KS 080000
OWNER TIRES WASTE MANAGEMENT CORP								KY 080000	LA 080000	MA 080000	MD 080000
REGISTRANT TIRES WASTE MANAGEMENT CORP 54 TREETOP CIRCLE PRINCETON, NJ 08540								ME 080000	MI 080000	MN 080000	MO 080000
								MS 080000	MT 080000	NC 080000	ND 080000
								NE 080000	NE 080000	NM 080000	NV 080000
								NY 080000	OH 080000	OK 080000	OR 080000
								PA 080000	RI 080000	SC 080000	SD 080000
								TN 080000	TX 080000	UT 080000	VA 080000
								VT 080000	WA 080000	WI 080000	WV 080000
								WY 080000	AB 036281	BC 036281	MB 036281
								NB 036281	NL 036281	NS 036281	ON 036281
								PE 036281	QC 05 AXL	SK 036281	** *****
								** *****	** *****	** *****	** *****
								** *****	** *****	** *****	** *****

THE VEHICLE DESCRIBED HEREIN HAS BEEN PROPORTIONALLY REGISTERED BETWEEN THE STATE OF NEW JERSEY AND THE ABOVE JURISDICTIONS.

000001893

Motor Carrier Responsible for Safety
USDOT Number: 3483920
TIRE WASTE MANAGEMENT CORP
135 MEEKER AVE
NEWARK, NJ 07114



This document is the property of the State of New Jersey. It may be recalled at any time if it is determined that the registrant supplied incorrect information and/or failed to pay appropriate registration fees.

This document grants registration reciprocity with the states/provinces whose two-letter postal abbreviation appears on this page. You must still comply with all other laws a state/province may have regarding intra and interstate operations.

Change of name or address must be reported in writing to the New Jersey Motor Vehicle Commission, Motor Carriers Unit, PO BOX 178, Trenton, NJ 08611-0178, within thirty(30) days.

Remember: Compulsory vehicle insurance is the law in New Jersey.



New Jersey Motor Vehicle Commission
Acting Chair and Chief Administrator

EXPIRES: **09/30/2024**

NEW JERSEY APPORTIONED CAB CARD
KEEP THIS CERTIFICATE IN YOUR VEHICLE

PLATE NUMBER: **AX535B**

UNIT NO. 3		YEAR 2014		MAKE INT		ACCOUNT NUMBER NJ-66697			
VEHICLE IDENTIFICATION NUMBER 1HSDJAPR8EH051156				FLEET NO. 001		SUPP. NO. 0000		REG. CODE 11	
TYPE TT	AXLES 3	GROSS WEIGHT 80000		FUEL D	REGISTRATION DATE 10/01/2023				
DESCRIPTION COMMERCIAL TRACTOR				TRANS ID # IU202466697001000					
OWNER TIRES WASTE MANAGEMENT CORP									

NJ 080000	AL 080000	AR 080000	AZ 080000
CA 080000	CO 080000	CT 080000	DC 080000
DE 080000	FL 080000	GA 080000	IA 080000
ID 080000	IL 080000	IN 080000	KS 080000
KY 080000	LA 080000	MA 080000	MD 080000
ME 080000	MI 080000	MN 080000	MO 080000
MS 080000	MT 080000	NC 080000	ND 080000
NE 080000	NH 080000	NM 080000	NV 080000
NY 080000	OH 080000	OK 080000	OR 080000
PA 080000	RI 080000	SC 080000	SD 080000
TN 080000	TX 080000	UT 080000	VA 080000
VT 080000	WA 080000	WI 080000	WV 080000
WY 080000	AB 036281	BC 036281	MB 036281
NB 036281	NL 036281	NS 036281	ON 036281
PE 036281	QC 06 AXL	SK 036281	** *****
** *****	** *****	** *****	** *****
** *****	** *****	** *****	** *****

REGISTRANT
TIRES WASTE MANAGEMENT CORP
54 TREETOP CIRCLE
PRINCETON, NJ 08540

THE VEHICLE DESCRIBED HEREIN HAS BEEN PROPORTIONALLY REGISTERED BETWEEN THE STATE OF NEW JERSEY AND THE ABOVE JURISDICTIONS.

000001895

Motor Carrier Responsible for Safety
USDOT Number: 3483920
TIRE WASTE MANAGEMENT CORP
135 MEEKER AVE
NEWARK, NJ 07114



This document is the property of the State of New Jersey. It may be recalled at any time if it is determined that the registrant supplied incorrect information and/or failed to pay appropriate registration fees.

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Remember: Compulsory vehicle insurance is the law in New Jersey.



New Jersey Motor Vehicle Commission
Acting Chair and Chief Administrator

CHYIIR # T7020918

EXPIRES: **09/30/2024**

NEW JERSEY APPORTIONED CAB CARD
KEEP THIS CERTIFICATE IN YOUR VEHICLE

PLATE NUMBER: **AX959U**

UNIT NO. 4	YEAR 2009	MAKE INT	ACCOUNT NUMBER NJ-66697	NJ 080000	AL 080000	AR 080000	AZ 080000	
VEHICLE IDENTIFICATION NUMBER 2HSCUAPR09C091666				FLEET NO. 001	SUPP. NO. 0000	REG. CODE 11	CA 080000	
TYPE TT	AXLES 3	GROSS WEIGHT 80000	FUEL D	REGISTRATION DATE 10/01/2023	DE 080000	FL 080000	GA 080000	
DESCRIPTION COMMERCIAL TRACTOR			TRANS ID # IU202466697001000				IN 080000	KS 080000
OWNER TIRES WASTE MANAGEMENT CORP				ME 080000	MI 080000	MN 080000	MO 080000	
REGISTRANT TIRES WASTE MANAGEMENT CORP				MS 080000	MT 080000	NC 080000	ND 080000	
54 TREETOP CIRCLE				NE 080000	NE 080000	NM 080000	NV 080000	
PRINCETON, NJ 08540				NY 080000	OH 080000	OK 080000	OR 080000	
				PA 080000	RI 080000	SC 080000	SD 080000	
				TN 080000	TX 080000	UT 080000	VA 080000	
				VT 080000	WA 080000	WI 080000	WV 080000	
				WY 080000	AB 036281	BC 036281	MB 036281	
				NB 036281	NL 036281	NS 036281	ON 036281	
				PE 036281	QC 06 AXL	SK 036281	** *****	
				** *****	** *****	** *****	** *****	
				** *****	** *****	** *****	** *****	

THE VEHICLE DESCRIBED HEREIN HAS BEEN PROPORTIONALLY REGISTERED BETWEEN THE STATE OF NEW JERSEY AND THE ABOVE JURISDICTIONS.

000001896

Motor Carrier Responsible for Safety
USDOT Number: 3483920
TIRE WASTE MANAGEMENT CORP
135 MEEKER AVE
NEWARK, NJ 07114



This document is the property of the State of New Jersey. It may be recalled at any time if it is determined that the registrant supplied incorrect information and/or failed to pay appropriate registration fees.

This document grants registration reciprocity with the states/provinces whose two-letter postal abbreviation appears on this page. You must still comply with all other laws a state/province may have regarding intra and interstate operations.

Change of name or address must be reported in writing to the New Jersey Motor Vehicle Commission, Motor Carriers Unit, PO BOX 178, Trenton, NJ 08611-0178, within thirty(30) days.

Remember: Compulsory vehicle insurance is the law in New Jersey.



New Jersey Motor Vehicle Commission
Acting Chair and Chief Administrator

STATE OF NEW JERSEY INSURANCE IDENTIFICATION CARD

COMPANY NUMBER
14371

COMPANY
Prime Property & Casualty Ins

COMMERCIAL

PERSONAL

POLICY NUMBER
PC23080249-0

EFFECTIVE DATE
05/10/2024

EXPIRATION DATE
08/01/2024

YEAR MAKE/MODEL
2014 International Prostar

VEHICLE IDENTIFICATION NUMBER
1HSDJAPR8EH051156

AGENCY/COMPANY ISSUING CARD
Hilb Group of NJ, LLC - Campisano

PO Box 447

Kearny

NJ 07032

INSURED

Tire Waste Management Corp

109 Meeker Ave

Newark

NJ 07114

SEE IMPORTANT NOTICE ON REVERSE SIDE

For use with ACORD 370 WM,
non-perforated 32 lb. watermark paper.

Insured must be issued two cards.

STATE OF NEW JERSEY INSURANCE IDENTIFICATION CARD

COMPANY NUMBER
14371

COMPANY
Prime Property & Casualty Ins

COMMERCIAL

PERSONAL

POLICY NUMBER
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STATE OF NEW JERSEY INSURANCE IDENTIFICATION CARD

For use with ACORD 370 WM,
non-perforated 32 lb. watermark paper.

Insured must be issued two cards.

COMPANY NUMBER 14371 COMPANY Prime Property & Casualty Ins COMMERCIAL PERSONAL

POLICY NUMBER PC23080249-0 EFFECTIVE DATE 05/10/2024 EXPIRATION DATE 08/01/2024

YEAR 2015 MAKE/MODEL International Prostar VEHICLE IDENTIFICATION NUMBER 3HSDJAPR7FN740211

AGENCY/COMPANY ISSUING CARD
Hilb Group of NJ, LLC - Campisano
PO Box 447
Kearny NJ 07032

INSURED
 Tire Waste Management Corp
109 Meeker Ave
Newark NJ 07114

SEE IMPORTANT NOTICE ON REVERSE SIDE

STATE OF NEW JERSEY INSURANCE IDENTIFICATION CARD

COMPANY NUMBER 14371 COMPANY Prime Property & Casualty Ins COMMERCIAL PERSONAL

POLICY NUMBER PC23080249-0 EFFECTIVE DATE 05/10/2024 EXPIRATION DATE 08/01/2024

YEAR 2015 MAKE/MODEL International Prostar VEHICLE IDENTIFICATION NUMBER 3HSDJAPR7FN740211

AGENCY/COMPANY ISSUING CARD
Hilb Group of NJ, LLC - Campisano
PO Box 447
Kearny NJ 07032

INSURED
 Tire Waste Management Corp
109 Meeker Ave
Newark NJ 07114

SEE IMPORTANT NOTICE ON REVERSE SIDE

State of New Jersey Insurance Identification Card

PROGRESSIVE®

135 Drive New Jersey Insurance Company
PO Box 94739
Cleveland, OH 44101

Policy Number: 03182011
Policy period: Jan 15, 2024 to Jan 15, 2025

Insured

TIRE WASTE MANAGEMENT CORP
109 MEEKER AVE
NEWARK, NJ 07114

Your Agent:

GIOVANNI BELEN FIN
257-17 HILLSIDE AVE
FLORAL PARK, NY 11004
1-718-347-3375

Vehicle

Year	Make	Model	VIN
2009	INTERNATIONAL	PROSTAR PREMIUM	2HSCUAPRO9C091666

Form 6484 NJ (10/22)

See claims reporting information on reverse side.

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF MATERIALS MANAGEMENT

PART 364
WASTE TRANSPORTER PERMIT NO. NJ-1321

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

PERMIT ISSUED TO:

TIRE WASTE MANAGEMENT CORP.
109 MEEKER AVENUE
NEWARK, NJ 07114

PERMIT TYPE:

- NEW
 RENEWAL
 MODIFICATION

CONTACT NAME: HARDEEP PARACHA
COUNTY: OUT OF STATE
TELEPHONE NO: (973)645-1400

EFFECTIVE DATE: 07/25/2024
EXPIRATION DATE: 07/24/2025
US EPA ID NUMBER:

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
PARACHA BROTHERS	NEWARK, NJ	Waste Tires	

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: 2024.07.24 09:52:22 -0400 Date: ____/____/____

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF MATERIALS MANAGEMENT

PART 364
WASTE TRANSPORTER PERMIT NO. NJ-1321

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

PERMIT ISSUED TO:

TIRE WASTE MANAGEMENT CORP.
109 MEEKER AVENUE
NEWARK, NJ 07114

CONTACT NAME: HARDEEP PARACHA
COUNTY: OUT OF STATE
TELEPHONE NO: (973)645-1400

PERMIT TYPE:

- NEW
 RENEWAL
 MODIFICATION

EFFECTIVE DATE: 07/25/2024
EXPIRATION DATE: 07/24/2025
US EPA ID NUMBER:

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)

3 (Three) Permitted Vehicle(s)

NJ AW347S
NJ AX535B
NJ AX959U
End of List



Paracha Brothers <pnsrecycling@gmail.com>

Automatic reply: [EXTERNAL] Re: NJDEP Waste Transporter Registration - On Hold - TIRE WASTE MANAGEMENT CORP (NJDEP # 0041780)

1 message

DEP LRU [DEP] <LRU@dep.nj.gov>
To: Paracha Brothers <pnsrecycling@gmail.com>

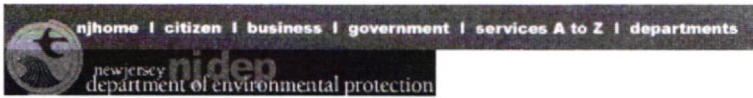
Wed, Jul 24, 2024 at 12:28 PM

Welcome the NJDEP Licensing and Registration Unit info processing center.

Be advised requests for additional decals and modifications are now submitted using an online service. See below and choose your category.

- Click **HERE** if you have 30 or less vehicles and do not wish to create an NJDEP online account.
- Click **HERE** if you have 31 or more vehicles and already have NJDEP Online account
- Click **HERE** to create an NJDEP Online account

For additional information please visit our web site <https://www.wastedecals.nj.gov/> .



Skip Navigation

njdep home | about dep | index by topic | programs/units | dep online



- My Workspace
- User Profile
- Certifications
- Payments
- Documents and Forms
- Permit Folder
- NJDEP Online FAQs

Version: 15.0.07
 Currently logged in: Abusaad Paracha (PNSRECYCLING@GMAIL.COM)
 Server: Server_2

[Help](#) | [Logout](#)

MY WORKSPACE

^ **Service Selection** ↑ ↓

Note: Access to this electronic service selection and submittal area is granted by selecting facilities using the [user profile](#). Some services are accessible without selecting facilities as shown below.

Air Program

[General Permits \(for minor source facilities only\)](#)
[Permit/Certificate Folder](#)

[Configure Services](#)

^ **My Facilities/Program Interests** ↑ ↓

Note: You may add Facilities/Program Interests by clicking the "Add Facilities" button below.

Facility Name	Facility ID	Program	Access Type	Access Status	Change Manage Access Security	View	Remove
PARACHA BROTHERS INC	13937	Air	Responsible Official	Granted			
PARACHA BROTHERS INC	876084	Solid Waste	Responsible Official	Granted			

Clicking a column title will sort the table by that column.

[Add Facilities](#)

^ **My Services - In Progress** ↑ ↓

Note: To edit or resume working on an "In Progress" item, please click on the appropriate number in the ID column.
 You do not have any "In Progress" Services.

^ **My Services - Submitted** ↑ ↓

Note: If the status of your service is "Submission Failed - Please contact DEP," please send an e-mail to njdeponlinesupport@dep.nj.gov for assistance. Please include the Service ID number of the failed submittal in the message.

ID	Application Name	Facility Name	Description	Status	Created Date	Last Modified Date	Summary History	PDF
1448193	Paracha Brothers Inc	PARACHA BROTHERS INC	GP-005A Emergency Generator(s) burning Distillate Fuels	Submission Successful	10/10/2022	10/14/2022		

Clicking a column title will sort the table by that column.

[Configure Workspace](#)

Davis, DaQuan (DNREC)

From: Paracha Brothers <pnsrecycling@gmail.com>
Sent: Tuesday, July 30, 2024 3:17 PM
To: WHStranporters
Subject: Re: Missing Information on Delaware Solid Waste Transporter Permit Application
Attachments: Driver and Insurance documents-Delaware.pdf

Please find attached the following :

1. \$75 check copy , we are going to mail today .
2. 3 CDL drivers licenses where show all details .

Regarding Tractor 2009 , this tractor is insured by Progressive commercial insurance and insurance card attached with initial application . This truck was not doing sea port operation that's why it was not with other two tractors insurance.

thanks,
Hardeep Paracha

Tire Waste Management Corp .

109 Meeker Ave
Newark, NJ 07114
Tel: (973) 645-1400

On Tue, Jul 30, 2024 at 2:59 PM WHStranporters <WHStranporters@delaware.gov> wrote:

Almost everything looks good, but I question why your 2009 International Tractor is not listed in the DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES section of the certificate. Do you know why?



DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

☎ 302-739-9403

✉ daquan.davis@delaware.gov

📍 89 Kings Hwy SW, Dover, DE 19901

🌐 dnrec.delaware.gov



From: Paracha Brothers <pnsrecycling@gmail.com>
Sent: Tuesday, July 30, 2024 2:42 PM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Re: Missing Information on Delaware Solid Waste Transporter Permit Application

COI attached, please review and confirm for me is this ok ?

thanks,

Hardeep Paracha

Tire Waste Management Corp

109 Meeker Ave

Newark, NJ 07114

Tel: (973) 645-1400

On Tue, Jul 30, 2024 at 1:22 PM WHStranporters <WHStranporters@delaware.gov> wrote:

Correct I need a list of your CDL drivers.

From: Paracha Brothers <pnsrecycling@gmail.com>

Sent: Tuesday, July 30, 2024 12:18 PM

To: WHStranporters <WHStranporters@delaware.gov>

Subject: Re: Missing Information on Delaware Solid Waste Transporter Permit Application

Good afternoon Daquan ,

Thank you for your email .

Section 1- Yes I am going to mail a \$75 check . We thought we would be having a permit for three years. That's why we have sent out a \$175 check . Yes you can void the check .

Section 2- I am going to email you COI - with new expiration date and certificate holder details will be reflected per your advice .

Section 14- Vehicle operators - means- you need CDL drivers details who driving the vehicles ? If yes, I will send you all the details of the drivers .

Best Regards,

Hardeep Paracha

Tire Waste Management Corp

109 Meeker Ave

Newark, NJ 07114

Tel: (973) 645-1400

On Tue, Jul 30, 2024 at 11:50 AM WHStranporters <WHStranporters@delaware.gov> wrote:

Mr. Paracha,

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 items listed below:

- Section 1-New transporters must select one year for \$75.00, and you sent us a check for **\$175.00**. Please mail a check for **\$75.00**. Would you like me to shred the other check? Please provide an answer.
- Section 10- Provide an updated Certificate of Insurance and add the Department of Natural Resources and Environmental Control address in the Certificate Holder section the address is 89 Kings HWY, Dover, DE 19901. Also, the Certificate of Insurance that you submitted will expire on 8/1/2024. Please send the new Certificate of Insurance once your current one expires.
- Section 14-You did not provide a list of vehicle operators. Please provide this.

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

Thank you,

DaQuan Davis



DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

☎ 302-739-9403

✉ daquan.davis@delaware.gov

📍 89 Kings Hwy SW, Dover, DE 19901

🌐 dnrec.delaware.gov





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/30/2024

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 Hilb Group of NJ, LLC - Campisano PO Box 447 Kearny NJ 07032	CONTACT NAME: Courtney Woodson PHONE (A/C, No, Ext): (201) 997-0060 FAX (A/C, No): (201) 997-3378 E-MAIL ADDRESS: cwoodson@hilbgroup.com
INSURER(S) AFFORDING COVERAGE	
INSURER A: United States Liability Insurance Co NAIC # 25895	
INSURER B: Great West Casualty Company 11371	
INSURER C: LM Insurance Corporation 33600	
INSURER D:	
INSURER E:	
INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL2472929473 **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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER			GL 1157728B	08/01/2024	08/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			GRT26156A	08/01/2024	08/01/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	WC5-33S-B23X0S-013	05/17/2024	05/17/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
B	Motor Truck Cargo Trailer Interchange			GRT26156A	08/01/2024	08/01/2025	Limit: \$100,000 Deductible: \$1,000 Limit: \$50,000 Deductible: \$1,000

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

Insr Ltr: B - Physical Damage - Policy# GRT26156A: Effective 08/01/2024-08/01/2025 See Values Below

2014 International Tractor VIN# 1HSDJAPR8EH051156 Value \$25,000 Deductible: \$1,000
 2015 International Tractor VIN# 3HSDJAPR7FN740211 Value \$25,000 Deductible: \$1,000

CERTIFICATE HOLDER Department of Natural Resources & Environmental Control 89 Kings HWY 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
--	--

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Tire Waste Management Corp.
123 Pennsylvania Ave
Kearny, NJ 07032
973-645-1400

TD Bank
3221 State Route 27
Franklin Park, NJ 08823
55-136/312

10270

07/30/2024

PAY TO THE ORDER OF State of Delaware

\$ ****75.00**

Seventy-five and 00/100***** DOLLARS

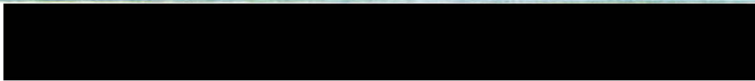
State of Delaware

Void After 90 Days

AUTHORIZED SIGNATURE MP



MEMO



Tire Waste Management Corp.

10270

07/30/2024 State of Delaware

SOLID WASTE TRANSPORTER PERMIT APPLICAT

75.00

Checking

75.00

Security features included. Details on back.

NEW JERSEY MVC

COMMERCIAL DRIVER LICENSE

Bill
Chief Administrator

[REDACTED]

CLASSES
CLASS A



SS 06-12-2021 EXP 03-22-2025

ROMO-SANCHEZ
CARLOS V.

[REDACTED]

SEX NONE
HAIR NONE

Carlos Romo

SEX M HGT 5-08" EYES BRN
CJ BG20211630000071 REN 42.00

NEW JERSEY MVC

COMMERCIAL DRIVER LICENSE

NOT FOR "REAL ID" PURPOSES

Bill
Chief Administrator



CLASS A
DOB: 02-17-2021 EXP: 10-17-2024

DANIEL
RONNIE L.

SEX: NONE
HAIR: NONE

Daniel Ronnie L.
GENDER: M HGT: 5'-07" EYES: BRN
MY: BA20210480000270 RENC: 42.00

SEA LINK

**DANIEL
RONNIE**

ID#: 211362
Expires: MAY 2025



TRANSPORTATION WORKER IDENTIFICATION CREDENTIAL



CDL

**DANIEL,
RONNIE L.**

**EXPIRES
2027
FEB17**



Turkey

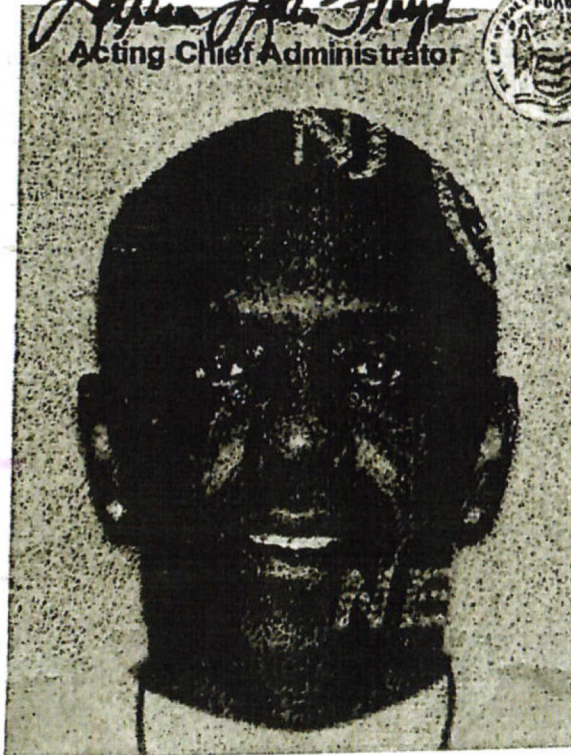
NEW JERSEY NJMVC

New Jersey Motor Vehicle Commission

COMMERCIAL DRIVER LICENSE

NOT FOR "REAL ID" PURPOSES

J. Steven F. Floyd
Acting Chief Administrator



DL [REDACTED]

CLASS A

DOB [REDACTED]

ISS 01-18-2023

EXP 01-19-2027

FLEMING
KELVIN



END N T
RESTR NONE

GENDER M HGT 5'-11" EYES BLK
NB NK202301800000207 REN



0.00