

RECEIPT

DATE 07/25/24No. 654517RECEIVED FROM Ironclad Environmental Services\$ 350.00Three Hundred Fifty and 00/100 DOLLARS FOR RENT FORNew SW App

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY
ORDER CREDIT
CARD

FROM

067578

TO

BY

E.W.

ATTENTION PERMIT DEPARTMENT

I am writing to you on behalf of NECS Fleet Solutions, a dedicated team committed to assisting clients in navigating the permitting process efficiently and effectively. We are currently in the process of applying for a permit on behalf of one of our clients and want to reach out to ensure a smooth and timely resolution.

We understand the importance of adhering to all regulations and requirements set forth by the state. Our goal is to facilitate this process for our clients, ensuring they can commence their operations promptly and in full compliance with the law.

To that end, we kindly request the opportunity to discuss any questions or concerns you may have regarding our permit application. We believe that open communication and collaboration are key to addressing any potential issues and reaching a favorable outcome for all parties involved.

Please feel free to reach out to us at

kreoh@necssolutions.com

or

by phone at 920-850-2483



We are committed to providing any additional information or documentation necessary to expedite the approval process.

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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 Ironclad Environmental Solutions, LLC.

Location Address:	Mailing Address:
	4888 Loop Center Dr Ste 440,Houston,TX 77081

Contact: Don Richard Title: _____

Business Phone: _____ Fax: _____

E-mail: drichard@ironcladenviornmental.com

24 hr Emergency Contact Phone: _____

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: Houston State: TX Date: 3-3-07

- 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 _____ Eric John, CEO
4888 Loop Center Drive, Suite 440
Houston, TX 77081

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

- Attachment _____
- No parent company

5. Company locations in Delaware

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

- Attachment _____
 No Delaware locations

6. Company Affiliates

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

- Attachment _____
 No affiliates

7. Type of Waste to be Transported

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

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

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

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

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

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

8. Treatment, Storage, and Disposal Facilities

- (a). Do you cross state lines with the waste? Yes No
- (b). Identify in an attachment *all* solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities and Transfer Stations to which the waste will be transported.
- Delaware Solid Waste Authority locations: (attachment) _____
 - Clean Earth of New Castle, Inc. (thermal treatment facility for PHC-soils)
 - Delaware Recyclable Products, Inc. (dry waste, commercial, industrial, and PHC-soils)
 - Other in-state solid waste facilities, including private facilities: (attachment) _____
 - Out of state solid waste TSD facilities: (attachment) _____

9. Other Transporter Permits

- (a). Attach a copy of your home state solid waste transporter permit. (N/A if Delaware is your home state.)
- Attachment _____
- Not applicable-No transporter permit required for these solid waste types in our home state.

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

Attachment DC, MD, MN, NY, PA, VT, WI

No transporter permits in other states

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

DOT# 1624598 MC# MC00657559

- 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 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 1 sec 1-3

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 1 sec 4

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

unknown at the moment - new service line

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 *Kimberly Reoh* Date 7-16-24
Print Name KIMBERLY REOH Title DIRECTOR

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

BRANCH	TRUCK#	YEAR	MAKE	MODEL	TYPE	VIN#	COLOR	PLATE#	STATE
1380	MD598	2015	KENWORTH	T800	WINCH TRACTOR	1XKDD49X5FJ435598	RED	3655904	IN
1380	MD215	2008	MACK		ROLL OFF TRUCK	1M2AG11C67M063424	RED	3655903	IN
1380	MT2401	2024	MACK	GRANITE	ROLL OFF TRUCK	1M2GR2GC6RM042173	WHITE	3656542	IN
1380	MT2430	2025	KENWORTH		ROLL OFF TRUCK	1NKDL40X9SR111981	WHITE	3658657	IN
1900	VA167	2013	KENWORTH	T800	WINCH TRACTOR	1XKDD49X0DJ362539	RED	3656534	IN

Ironclad Environmental Solutions, Inc.

**SPILL CONTINGENCY PLAN
HAZARDOUS WASTE / USED OIL TRANSPORT**

I. **EMERGENCY ACTION:** In the event of an on-the-road spill or other emergency, the driver will follow these procedures:

A. Remain with the unit and warn all pedestrians and motorists to stay away from the spill area, pointing out to them the danger involved, and call the police / 911 or have someone call the police / 911.

B. Upon the arrival of the police or fire department, the driver will inform them of what kind of material has been spilled, hand them the manifest/paperwork if possible and request the area to be blocked off to both pedestrians and vehicles to prevent property damage or any serious personal injury.

The driver will request the first responder, fire or police personnel, to protect the area while the driver reports to a facility Branch Manager/Emergency Coordinator (listed below in the order of calling):

Branch Manager/ Emergency Coordinator

Name: Samuel Roberts
Phone number: [REDACTED]

Corporate Safety Manager

Name: Aimee Wilson
Phone Number: [REDACTED]

Regional Vice President

Name: Chad Kruger
Phone Number: [REDACTED]

- A. The Branch Manager/Emergency Coordinator will gather the following information from the driver and relay it to the National Response Center, and if required our 24/7 spill response partner ERTS at (888) 585-5028.
1. Name of person reporting the incident.
 2. Name, address, and Identification Number of the transporter.
 3. Phone number where person reporting can be reached.
 4. Date, time, and location of the incident.
 5. The extent of injuries, if any.
 6. Classification, name, and quantity of hazardous materials/wastes involved, if such information is available.
 7. Type of incident and nature of hazardous material/waste involvement and

whether a continuing danger exists at the scene.

8. For each waste product involved provide:

- a. Name and Identification Number of generator.
- b. Product shipping, hazardous class, and UN or NA Number.
- c. Estimated quantity of material spilled.
- d. If possible, estimate the extent of contamination to land, water, or air.

9. Shipping name, hazard class, and Identification Number of any other material carried.

EMERGENCY RESPONSE AGENCIES:

<u>AGENCY</u>	<u>TOLL FREE NUMBER</u>	<u>REGULAR NUMBER</u>
U.S. National Response Center	(800) 424-8802	(202) 426-2675
Alabama Emergency Management Agency Hazardous Materials/Waste Incidents	(800) 843-0699	(302) 659-3362
U.S. Coast Guard, Lewes		(302) 644-1909
CHEMTREC	(800) 424-9300	
<u>ERTS</u>	(888) 585-5028	

D. Specific actions to be taken at the scene of the spill are:

I. Containment - The critical problem is to prevent the escape of any spilled liquid or solid into the ground or into a storm or sanitary sewer. A barrier must be erected immediately to prevent escape of spilled materials/waste liquids, using whatever material is at hand, even a dirt curb to prevent spreading of the spill. Containment of solids will be dependent on wind and weather conditions. Use the box tarp in the vehicle, or plastic visqueen if conditions are wet and windy. Simultaneously, the source of the spill or leak must be located and controlled (e.g., box hole plugged or taped or container turned right-side up).

The possibility of evacuation should be considered in the event of a major spill (e.g., a collision with another vehicle or a loaded trailer that has turned over, with subsequent container(s) rupturing). Major concerns involve ignitable wastes that may catch fire and possibly explode or generate toxic fumes. If fire threatens or actually occurs, personnel should be evacuated a distance of at least a half-mile as recommended by the Emergency Response Guidebook. If no fire threatens, and no container (s) have ruptured, a distance of 50-100 feet should suffice.

If the shipping description is known (refer to the manifest) find the name in your Emergency Response Guidebook in the blue pages and turn to the Corresponding Guide Number (orange top page-last 1/3 of book). If the shipping description is not known check the placard on the vehicle for a "UN" or a "NA" number, look up

the number in the yellow pages and refer to the Corresponding Guide Number, or contact the generator of the waste for safety data.

2. Cleanup - With containment effected and the spillage source controlled, cleanup is the next step. If the spill is contained on an impervious paved surface, material should be absorbed onto a compatible material (e.g., sand, diatomaceous earth). Any of a number of commercial absorbent inert materials may be used, but make sure they are compatible with the waste and will not cause a reaction. If the spillage has reached soil, all contaminated dirt should be collected into drums or bags for disposal at an EPA approved site.

If any spilled waste has reached the ground, the contaminated soil will be removed. The extent of contamination will be determined by sampling the spill area. A qualified laboratory will analyze the sample. Sampling techniques, chain-of-custody requirements, and analytical methods will follow approved procedures such as those outlined in SW-846 (Test Methods for Evaluating Solid Waste: Physical/Chemical Methods Compendium). Any soil exhibiting contamination above the local background level will be removed to an appropriate permitted disposal site.

In addition to contaminated absorbents, dirt, or the like as noted above, damaged containers also present a disposal problem. Special "recovery drums" (oversize metal drums) will be used for containing damaged 55-gallon drums. Disposal will be at an approved site.

II. **EMERGENCY EQUIPMENT:** Each tractor or trailer carries the following emergency equipment:

- Gloves
- Goggles
- Slicker Suite
- Oil Absorbing Socks & Pads
- Boots
- DOT Emergency Response Guidebook
- Emergency Reflective Triangles (3)
- Flares
- ABC Fire Extinguisher

III. **FOLLOW-UP PROCEDURES:** Two steps remain once the immediate emergency aspects of a spill have been taken care of:

A. *Decontamination:*

Trucks or trailers exposed to a spill or leak will be decontaminated at the site in order to prevent any further release to the extent that it can be transported (or move under its own power) to an authorized facility capable of further decontamination if necessary.

Equipment - Each item used will be placed in an open head container and thoroughly rinsed with a compatible solvent or cleaning compound. The residue or wash water will then be drained into a tight head container, sealed, and disposed of in accordance with Federal and State Regulations at an authorized disposal site.

Clothing - Contaminated clothing will be placed with the clean up residue and disposed of in accordance with Federal and State Regulations at an authorized disposal site. If clothing is reusable, then it will be decontaminated properly and the residue added to the other waste.

B. *Notification:* The Department of Transportation, Director of Hazardous Materials Registration, Materials and Transportation Bureau, Washington, DC 20590 will be notified, in writing, of the occurrence, and nature of the incident.

IV. TRAINING PROGRAM: In preparation for handling hazardous materials and hazardous wastes, all drivers and response personnel receive approximately two (2) hours classroom training followed by refresher training by local management at regular scheduled (at least monthly) safety tailgate meetings. In addition to the above, an annual meeting is held to educate further each Branch Manager on changes in regulations.

A. The following is a list of classroom training provided to all branch personnel responsible for the handling and transportation of hazardous waste:

1. RCRA Hazardous Waste Manifesting
2. Container Receiving and Maintenance
3. Container Inspections
4. Container Transferring
5. Container Pickup Checklist
6. Re-use of Containers for Hazardous Waste
7. Emergency Response Equipment
8. Emergency Procedures
9. Hazardous Waste Labeling
10. Emergency Spills

B. Since much of the drivers' actions involve hazardous materials, including hazardous wastes, their instructions specifically include:

1. Inspection of their vehicles before and during trips;
2. Driving Rules;
3. Knowledge of safety and health hazards of products carried (e.g., flammable, and corrosive); and
4. Actions to be implemented in case of spills, accidents, or other emergencies involving hazardous materials and hazardous wastes.



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 Ironwood, a Marsh & McLennan Agency, LLC Co 4401 Northside Parkway NW Suite 800 Atlanta GA 30327		CONTACT NAME: Laura Jones PHONE (A/C, No, Ext): (404) 927-9143 FAX (A/C, No): (404) 503-9101 E-MAIL ADDRESS: ljones@ironwoodins.com															
INSURED Ironciad Environmental Solutions, Inc. 4888 Loop Central Drive, Suite 440 Houston TX 77081		INSURER(S) AFFORDING COVERAGE <table border="1"> <tr> <th>INSURER</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Axis Surplus Insurance Company</td> <td>26620</td> </tr> <tr> <td>INSURER B: Hartford Insurance</td> <td>19682</td> </tr> <tr> <td>INSURER C: Bridgeway Insurance Company</td> <td>12489</td> </tr> <tr> <td>INSURER D: SiriusPoint Specialty Insurance</td> <td>16820</td> </tr> <tr> <td>INSURER E: Axis Surplus Insurance</td> <td>26620</td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>		INSURER	NAIC #	INSURER A: Axis Surplus Insurance Company	26620	INSURER B: Hartford Insurance	19682	INSURER C: Bridgeway Insurance Company	12489	INSURER D: SiriusPoint Specialty Insurance	16820	INSURER E: Axis Surplus Insurance	26620	INSURER F:	
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INSURER E: Axis Surplus Insurance	26620																
INSURER F:																	

COVERAGES **CERTIFICATE NUMBER:** CL2310449037 **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 CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	MP005964-01-2023	09/30/2023	09/30/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Contractors Pollution \$ 1,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY	Y	Y	20CSES81701	09/30/2023	09/30/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/> CLAIMS-MADE			8EA7XL000225301	09/30/2023	09/30/2024	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	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	20WNS81700	09/30/2023	09/30/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Excess Liability			TSX00020323	09/30/2023	09/30/2024	Each Occurrence 5,000,000 Aggregate 5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Delaware Dept of Natural Resources Division of Waste and Hazardous Substances is additional insured on the General Liability and Automobile Liability policies with respect to the liability resulting from the operations of the Named Insured as required by written contract. General Liability and Automobile Liability coverage provided is primary and non-contributory with respect to any similar insurance held by the additional insured as required by written contract. Waiver of Subrogation is in place in favor of Certificate Holder for General Liability, Automobile Liability and Workers Compensation as required by written contract. 30 day Notice of Cancellation, except 10 days for non-payment, applies to additional insureds under per policy provisions.

CERTIFICATE HOLDER Delaware Dept of Natural Resources Division of Waste and Hazardous Substances 89 Kings Highway 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
--	--

AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY Ironwood, a Marsh & McLennan Agency, LLC Co		NAMED INSURED Ironclad Environmental Solutions, Inc.	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

Excess General Liability/Pollution Liability
 Axis Surplus Insurance Company
 Policy # MX005965-01-2023
 Effective 9/30/2023 to 9/30/2024
 \$10,000,000 Occurrence
 \$10,000,000 Aggregate

Cyber Liability
 Certain Underwriters at Lloyd's London and other insurers
 Policy # ACS1241424
 Effective 4/1/2024- 4/1/2025
 \$5,000,000 Limit

Contractors Pollution Liability
 Axis Surplus Insurance Company
 Policy #MP005964-01-2023
 \$1,000,000 Limit

Additional Named Insureds:

1. Ironhorse Parent, LP
2. Ironhorse Intermediate, LLC
3. Ironhorse Purchaser, LLC
4. Gulf Tanks Holdings, Inc.
5. Water Movers Contracting, LLC
6. Adler Tank Rentals, LLC
7. DenBeste Water Solutions, LLC
8. DenBeste Transportation, LLC

Davis, DaQuan (DNREC)

From: Kimberly Reoh <kreoh@necssolutions.com>
Sent: Tuesday, September 10, 2024 10:52 AM
To: Grazier, Tara (DNREC)
Cc: Davis, DaQuan (DNREC); Sarah Mendoza
Subject: RE: Applications
Attachments: MCS-90 - Expires 06.30.27.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Here you go 😊

Thanks,

Kimberly Reoh
Director- Specialty Services
920-850-2483

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[Schedule a Meeting with Kimberly here!](#)

From: Grazier, Tara (DNREC) <Tara.Grazier@delaware.gov>
Sent: Friday, September 6, 2024 1:05 PM
To: Kimberly Reoh <kreoh@necssolutions.com>
Cc: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>; Sarah Mendoza <smendoza@necssolutions.com>
Subject: RE: Applications

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Okay. Have you gotten the updated MCS-90?



Tara C. Grazier

Planner II

Phone 302-739-9403

Email tara.grazier@delaware.gov

89 Kings Highway, Dover, DE 19901

dnrec.delaware.gov



From: Kimberly Reoh <kreoh@necssolutions.com>
Sent: Friday, September 6, 2024 12:31 PM
To: Grazier, Tara (DNREC) <Tara.Grazier@delaware.gov>
Cc: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>; Sarah Mendoza <smendoza@necssolutions.com>
Subject: RE: Applications

They are applying now for PA Haz.

Thanks,

Kimberly Reoh
Director- Specialty Services
920-850-2483

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From: Grazier, Tara (DNREC) <Tara.Grazier@delaware.gov>
Sent: Friday, September 6, 2024 7:06 AM
To: Kimberly Reoh <kreoh@necssolutions.com>
Cc: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>; Sarah Mendoza <smendoza@necssolutions.com>
Subject: RE: Applications

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Hi Kimberly,

Thank you for the clarification. With the disposal facility in PA, does the company plan to obtain a permit in PA?

Thank you,
Tara



Tara C. Grazier

Planner II

Phone: 302-739-9403

Email: tara.grazier@delaware.gov

89 Kings Highway, Dover, DE 19901
dnrec.delaware.gov



From: Kimberly Reoh <kreoh@necssolutions.com>
Sent: Thursday, September 5, 2024 4:48 PM
To: Grazier, Tara (DNREC) <Tara.Grazier@delaware.gov>

Davis, DaQuan (DNREC)

From: Kimberly Reoh <kreoh@necssolutions.com>
Sent: Tuesday, September 3, 2024 10:56 PM
To: WHStranporters; Sarah Mendoza
Subject: Re: DE HAZ WASTE APPLICATION

Does this help?

D-listed, F-listed, and P- listed waste
Toxicity

Thank you,
Kimberly Reoh
Director- Specialty Services

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<https://app.usemotion.com/meet/kimberly-reoh/meeting>

Mobile 920-850-2483

Email kreoh@necssolutions.com

NECS[®] FLEET SOLUTIONS *since 1986*[®]

Web www.necssolutions.com

550 W. 36th Street Jasper, IN 47546

From: Kimberly Reoh
Sent: Tuesday, September 3, 2024 3:32:24 PM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: RE: DE HAZ WASTE APPLICATION

I am verifying this and will let you know as soon as possible~!

Thanks,

Kimberly Reoh
Director- Specialty Services
920-850-2483

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From: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> **On Behalf Of** WHStranporters
Sent: Tuesday, September 3, 2024 1:08 PM
To: Kimberly Reoh <kreoh@necssolutions.com>
Subject: RE: DE HAZ WASTE APPLICATION

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hello,

Regarding the hazardous waste application attachment what kind of hazardous waste do you take to DRPI and Sandtown landfill in Delaware?

From: Kimberly Reoh <kreoh@necssolutions.com>
Sent: Tuesday, September 3, 2024 9:52 AM
To: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>
Cc: Sarah Mendoza <smendoza@necssolutions.com>
Subject: DE HAZ and SOLID WASTE APPLICATION
Importance: High

Please see the attached, updated applications to haul Solid Waste and Hazardous in Delaware.

Please reach out directly to me with questions or concerns 😊

Thank you,
Kimberly Reoh
Director- Specialty Services
NECS[®] FLEET SOLUTIONS *since 1986*[®]

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[Schedule a Meeting with Kimberly here!](#)

Phone: 920-850-2483
Email kreoh@necssolutions.com
Web www.necssolutions.com
550 W. 36th Street Jasper, IN 47546

Cc: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>; Sarah Mendoza <smendoza@necssolutions.com>

Subject: RE: Applications

Hi Tara,

Please see the below Haz Drop site.

Clean Earth
2869 Sandstone Dr
Hatfield, PA 19440
678-822-9963

We would like to add used oils Part 279 to the application.

I am currently pending the updated MCS90.

Below is a list of all Haz and their status at this time. Please let me know if you have any further questions or need additional assistance.

STATE	PERMIT	STATUS
CT	HAZARDOUS WASTE HAULER	ACTIVE
WI	HAZARDOUS	ACTIVE
SC	HAZARDOUS	ACTIVE
DE	HAZARDOUS	PENDING INFO
AL	HAZARDOUS	IN PROCESS AT STATE
CA	HAZARDOUS WASTE HAULER	PENDING INFO
MI	HAZARDOUS WASTE HAULER	IN PROCESS AT NECS
NY	SOLID WASTE/HAZARDOUS	ACTIVE

Thanks,

Kimberly Reoh
Director- Specialty Services
920-850-2483

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[Schedule a Meeting with Kimberly here!](#)

From: Grazier, Tara (DNREC) <Tara.Grazier@delaware.gov>

Sent: Thursday, September 5, 2024 9:26 AM

To: Kimberly Reoh <kreoh@necssolutions.com>

Subject: Applications

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Kimberly,

I called and left a message for you yesterday regarding your transporter application. Can you please return my phone call to discuss the application?

Thank you,
Tara



Tara C. Grazier

Planner II

Phone: 302-739-9403

Email: tara.grazier@delaware.gov

89 Kings Highway, Dover, DE 19901

dnrec.delaware.gov



USDOT Number: 1624598 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, Registration 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.



**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 IRONCLAD ENVIRONMENTAL SOLUTIONS, INC. of BAYTOWN, TX
(Motor Carrier name) (Motor Carrier state or province)

Dated at HARTFORD, CT on this 30TH day of SEPTEMBER, 2023

Amending Policy Number: 20 CSE S81701 Effective Date: 09/30/2023

Name of Insurance Company: HARTFORD FIRE INSURANCE COMPANY

Countersigned by: Sueann Custaneda
(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 \$ 1,000,000 for each accident.
- This insurance is excess and the company shall not be liable for amounts in excess of \$ _____ for each accident in excess of the underlying limit of \$ _____ for each accident.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: (860) 547-5000.

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 <https://portal.fmcsa.dot.gov/UrsRegistrationWizard/>.

(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.

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,

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.

or violation thereof, shall relieve the company from liability or from the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

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

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

(continued on next page)

SCHEDULE OF LIMITS — PUBLIC LIABILITY
--

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

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



STATE OF DELAWARE

DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL
CONTROL

DIVISION OF WASTE AND HAZARDOUS SUBSTANCES

SPENCER HIGHWAY

DOVER, DELAWARE

COMPLIANCE &
PERMITTING

PHONE: 302-739-9443

FAX: 302-739-5060

August 13, 2024

Certified Mail
Return Receipt Requested
7021 1970 0000 8507 7575

NOTICE OF DEFICIENCY
24-SW-27

Don Richard
Ironclad Environmental Solutions, LLC
4888 Loop Center Drive, Suite 440
Houston, TX 77081

Subject: Notice of Deficiency
Reference: Application for Delaware Solid Waste Transporter Permit

Dear Mr. Richard:

Delaware's Department of Natural Resources and Environmental Control (DNREC), Compliance and Permitting Section (CAPS), is in receipt of your application for a permit to transport solid waste in, through, or out of the State of Delaware. The application was received by this office on July 25, 2024.

After a review of your application, we have determined that the application is deficient. Since receipt of your application, we have made attempts to contact you in order to secure the deficient information but failed to receive a response. You must submit the following information as listed per transporter application item number, in order for us to process your application.

- Item 3 requires Company Information. Please complete item 3 as required.
- Item 4(b) requires Company Ownership Information. Please complete item 4(b) as applicable and attach company information as required.
- Item 8 requires you to submit a list of your Transfer, Storage, and Disposal facilities. Please provide this list.
- Item 9(a) requires A Copy of Your Home State Permit. Please complete item 9(a) as required.
- Item 9(b) requires A list of solid waste permits held in other states. Please complete item 9(b) as required.

- Item 10 requires an MCS-90 endorsement form. Please provide this form.
- Item 11(5) Missing Delaware Emergency Reporting Numbers. Spill Plan must include the following numbers (800) 662-8802 and (302) 739-9401.
- Item 13 requires a list identifying vehicles. The list you submitted is missing the manufacturer's GVWR and ownership status. Please update the list.
- Item 14 requires vehicle operator information. You did not provide an answer to the question on the application. Please fill out the application in its entirety.
- Item 16 Certification. Please amend item 16 and ensure the application is signed by a legal owner or corporate officer.

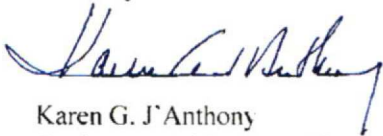
The requested information must be submitted to the CAPS within five (5) days of your receipt of this Notice of Deficiency. Failure to do so will result in our inability to process your transporter permit application and the non-refund of the application processing fee. Please be aware that transportation of solid waste into, out of, or through Delaware without a permit violates the 7 Del. Code, Chapter 60, and is subject to enforcement.

Please submit the required information to:

DaQuan L. Davis
Delaware Department of Natural Resources and Environmental Control
Compliance and Permitting Section
89 Kings Highway
Dover, Delaware 19901
daquan.davis@delaware.gov

If you have any questions regarding this Notice, please contact Mr. Davis at (302) 739-9403.

Sincerely,



Karen G. J. Anthony
Environmental Program Manager II
Compliance and Permitting Section



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 Ironclad Environmental Solutions, Inc.

Location Address:	Mailing Address:
	4888 Loop Center Dr, Ste 440 Houston, TX 77081

Contact: Kimberly Reoh Title: Director

Business Phone: 920-850-2483 Fax: _____

E-mail: kreoh@necssolutions.com

24 hr Emergency Contact Phone: 920-850-2483

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: _____ State: DE Date: 1-23-2007

- 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 0% owner. Eric John, CEO DOB [REDACTED]
4888 Loop Center Drive, Suite 440
Houston, TX 77081

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

Attachment _____ Gulf Tanks Holdings, Inc.
1650 East Fwy
 No parent company Baytown, TX 77521

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) attached
 - 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) attached
 - Out of state solid waste TSD facilities: (attachment) attached

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 Attached
- 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 Attached
- No transporter permits in other states

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

DOT# 1624598 MC# 00657559

- 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 checked="" type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input checked="" type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Dry Waste	\$750,000.00 + MCS-90 <input checked="" 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 checked="" type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Asbestos	\$1,000,000.00 + MCS-90 <input checked="" 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 Attach

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 attached

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 Unknown at this time
 New Service offering

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 8/27/24
Print Name ERIC JOTAL Title CEO

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

Ironclad Environmental Solutions, Inc.

**SPILL CONTINGENCY PLAN
HAZARDOUS WASTE / USED OIL TRANSPORT**

I. **EMERGENCY ACTION:** In the event of an on-the-road spill or other emergency, the driver will follow these procedures:

A. Remain with the unit and warn all pedestrians and motorists to stay away from the spill area, pointing out to them the danger involved, and call the police / 911 or have someone call the police / 911.

B. Upon the arrival of the police or fire department, the driver will inform them of what kind of material has been spilled, hand them the manifest/paperwork if possible and request the area to be blocked off to both pedestrians and vehicles to prevent property damage or any serious personal injury.

The driver will request the first responder, fire or police personnel, to protect the area while the driver reports to a facility Branch Manager/Emergency Coordinator (listed below in the order of calling):

Branch Manager/ Emergency Coordinator

Name: Samuel Roberts
Phone number: [REDACTED]

Corporate Safety Manager

Name: Aimee Wilson
Phone Number: [REDACTED]

Regional Vice President

Name: Chad Kruger
Phone Number: [REDACTED]

A. The Branch Manager/Emergency Coordinator will gather the following information from the driver and relay it to the National Response Center, and if required our 24/7 spill response partner ERTS at (888) 585-5028.

1. Name of person reporting the incident.
2. Name, address, and Identification Number of the transporter.
3. Phone number where person reporting can be reached.
4. Date, time, and location of the incident.
5. The extent of injuries, if any.
6. Classification, name, and quantity of hazardous materials/wastes involved, if such information is available.
7. Type of incident and nature of hazardous material/waste involvement and

whether a continuing danger exists at the scene.

8. For each waste product involved provide:
 - a. Name and Identification Number of generator.
 - b. Product shipping, hazardous class, and UN or NA Number.
 - c. Estimated quantity of material spilled.
 - d. If possible, estimate the extent of contamination to land, water, or air.
9. Shipping name, hazard class, and Identification Number of any other material carried.

EMERGENCY RESPONSE AGENCIES:

AGENCY	TOLL FREE NUMBER	REGULAR NUMBER
U.S. National Response Center	(800) 424-8802	(202) 426-2675
Alabama Emergency Management Agency		(302) 659-3362
Hazardous Materials/Waste Incidents	(800) 843-0699	
U.S. Coast Guard, Lewes	(800) 424-9300	(302) 644-1909
CHEMTREC		
<u>ERTS</u>	(888) 585-5028	
Delaware Emergency Reporting	800-662-8802/ 302-739-9401	

D. Specific actions to be taken at the scene of the spill are:

I. Containment - The critical problem is to prevent the escape of any spilled liquid or solid into the ground or into a storm or sanitary sewer. A barrier must be erected immediately to prevent escape of spilled materials/waste liquids, using whatever material is at hand, even a dirt curb to prevent spreading of the spill. Containment of solids will be dependent on wind and weather conditions. Use the box tarp in the vehicle, or plastic visqueen if conditions are wet and windy. Simultaneously, the source of the spill or leak must be located and controlled (e.g., box hole plugged or taped or container turned right-side up).

The possibility of evacuation should be considered in the event of a major spill (e.g., a collision with another vehicle or a loaded trailer that has turned over, with subsequent container(s) rupturing). Major concerns involve ignitable wastes that may catch fire and possibly explode or generate toxic fumes. If fire threatens or actually occurs, personnel should be evacuated a distance of at least a half-mile as recommended by the Emergency Response Guidebook. If no fire threatens, and no container (s) have ruptured, a distance of 50-100 feet should suffice.

If the shipping description is known (refer to the manifest) find the name in your Emergency Response Guidebook in the blue pages and turn to the Corresponding Guide Number (orange top page-last 1/3 of book). If the shipping description is not known check the placard on the vehicle for a "UN" or a "NA" number, look up

the number in the yellow pages and refer to the Corresponding Guide Number, or contact the generator of the waste for safety data.

2. Cleanup - With containment effected and the spillage source controlled, cleanup is the next step. If the spill is contained on an impervious paved surface, material should be absorbed onto a compatible material (e.g., sand, diatomaceous earth). Any of a number of commercial absorbent inert materials may be used, but make sure they are compatible with the waste and will not cause a reaction. If the spillage has reached soil, all contaminated dirt should be collected into drums or bags for disposal at an EPA approved site.

If any spilled waste has reached the ground, the contaminated soil will be removed. The extent of contamination will be determined by sampling the spill area. A qualified laboratory will analyze the sample. Sampling techniques, chain-of-custody requirements, and analytical methods will follow approved procedures such as those outlined in SW-846 (Test Methods for Evaluating Solid Waste: Physical/Chemical Methods Compendium). Any soil exhibiting contamination above the local background level will be removed to an appropriate permitted disposal site.

In addition to contaminated absorbents, dirt, or the like as noted above, damaged containers also present a disposal problem. Special "recovery drums" (oversize metal drums) will be used for containing damaged 55-gallon drums. Disposal will be at an approved site.

II. EMERGENCY EQUIPMENT: Each tractor or trailer carries the following emergency equipment:

- Gloves
- Goggles
- Slicker Suite
- Oil Absorbing Socks & Pads
- Boots
- DOT Emergency Response Guidebook
- Emergency Reflective Triangles (3)
- Flares
- ABC Fire Extinguisher

III. FOLLOW-UP PROCEDURES: Two steps remain once the immediate emergency aspects of a spill have been taken care of:

A. *Decontamination:*

Trucks or trailers exposed to a spill or leak will be decontaminated at the site in order to prevent any further release to the extent that it can be transported (or move under its own power) to an authorized facility capable of further decontamination if necessary.

Equipment - Each item used will be placed in an open head container and thoroughly rinsed with a compatible solvent or cleaning compound. The residue or wash water will then be drained into a tight head container, sealed, and disposed of in accordance with Federal and State Regulations at an authorized disposal site.

Clothing - Contaminated clothing will be placed with the clean up residue and disposed of in accordance with Federal and State Regulations at an authorized disposal site. If clothing is reusable, then it will be decontaminated properly and the residue added to the other waste.

B. *Notification:* The Department of Transportation, Director of Hazardous Materials Registration, Materials and Transportation Bureau, Washington, DC 20590 will be notified, in writing, of the occurrence, and nature of the incident.

IV. TRAINING PROGRAM: In preparation for handling hazardous materials and hazardous wastes, all drivers and response personnel receive approximately two (2) hours classroom training followed by refresher training by local management at regular scheduled (at least monthly) safety tailgate meetings. In addition to the above, an annual meeting is held to educate further each Branch Manager on changes in regulations.

A. The following is a list of classroom training provided to all branch personnel responsible for the handling and transportation of hazardous waste:

1. RCRA Hazardous Waste Manifesting
2. Container Receiving and Maintenance
3. Container Inspections
4. Container Transferring
5. Container Pickup Checklist
6. Re-use of Containers for Hazardous Waste
7. Emergency Response Equipment
8. Emergency Procedures
9. Hazardous Waste Labeling
10. Emergency Spills

B. Since much of the drivers' actions involve hazardous materials, including hazardous wastes, their instructions specifically include:

1. Inspection of their vehicles before and during trips;
2. Driving Rules;
3. Knowledge of safety and health hazards of products carried (e.g., flammable, and corrosive); and
4. Actions to be implemented in case of spills, accidents, or other emergencies involving hazardous materials and hazardous wastes.

BRANCH	TRUCK#	YEAR	MAKE	MODEL	TYPE	VIN#	COLOR	PLATE#	STATE	GVWR	OWNER
1380	MD598	2015	KENWORTH	T800	WINCH TRACTOR	1XKDD49X5FJ435598	RED	3593223	IN	80000	Ironclad Environmental Solutions
1380	MD215	2008	MACK	CV713	ROLL OFF TRUCK	1M2AG11C67M063424	RED	359222	IN	80000	Ironclad Environmental Solutions
1380	MT2401	2024	MACK	GRANITE	ROLL OFF TRUCK	1M2GR2GC6RM042173	WHITE	3614236	IN	66000	Ironclad Environmental Solutions
1380	MT2430	2025	KENWORTH	T800	ROLL OFF TRUCK	1NKDL40X9SR111981	WHITE	3643130	IN	53250	Ironclad Environmental Solutions
1900	VA167	2013	KENWORTH	T800	WINCH TRACTOR	1XKDD49X0DJ362539	RED	3593275	IN	80000	Ironclad Environmental Solutions

STATE	PERMIT	STATUS	PERMIT NUMBER
DC	SOLID WASTE	ACTIVE	R-06-12-24-01821
IL	WASTE HANDLING	ACTIVE	57311
LA	WASTE TREATMENT	ACTIVE	T04714401
MD	SPECIAL WASTE	ACTIVE	SMH146
MN	WASHINGTON	ACTIVE	N/A
MN	CARVER COUNTY	ACTIVE	
MN	SCOTT COUNTY	ACTIVE	N/A

SOLID WASTE DROP SITES

In state

Delaware Solid waste Authority 28560 landfill lane Georgetown DE 19947

Clean Earth of DE 94 J Caldwell In New Castle DE 19720

Delaware recycling Products 1101 lambson In New Castle De 19720

Pine Tree Corner transfer station 276 pine tree rd Townsend DE 19734

Out of state

VLS 1076 Manheim Pike, Lancaster, PA 17601 transfer station and liquid pit

JG environmental 776 Flory Mill Rd, Lancaster, PA 17601 liquid pit

Republic 4400 Mt Pisgah Rd, York, PA 17406 landfill dry goods only

CHRISTI CRADDICK, CHAIRMAN
WAYNE CHRISTIAN, COMMISSIONER
JIM WRIGHT, COMMISSIONER



DANNY SORRELLS
ASSISTANT EXECUTIVE DIRECTOR
DIRECTOR, OIL AND GAS DIVISION

RAILROAD COMMISSION OF TEXAS

OIL AND GAS DIVISION
1/17/2024

Ironclad Environmental Solutions, Inc.
4888 Loop Central Drive
STE 440
Houston, Texas 77081

RE: Operator No. 101058

Dear Ironclad Environmental Solutions, Inc.,

The above listed new operator number is assigned to your organization name as filed on the Organization Report (Form P-5). Where applicable, this operator number should be used on future filings, forms and correspondence with the Commission.

Please verify the name and address listed above and notify us if there are any discrepancies. It is important that we agree on the exact spelling of your name (even the punctuation and spaces) so that the processing of your forms will not be delayed.

Subsequent refiling of the Form P-5 may be necessary on an annual basis, at which time you will receive notification from us. If there is a change in the required information as reported on Form P-5, please file an amended report showing the corrections.

New Operator Instructions:

In June 2021, RRC implemented a new process for gaining access to LoneSTAR. Users now log into LoneSTAR via RAMP.

If you would like to become an Administrator for your Organization, please follow the steps below to submit a SAFE form:

1. Proceed to <https://ramp.rrc.texas.gov/#/safe>
2. For "Company exists in RAMP?", choose "Yes".
3. Keep "Select Company Type" as the first choice: Oil & Gas/Pipelines/Gas Utility
4. Enter in your Approved Company name
5. For "RRC Organization Identifier" enter in your newly approved P5 number
6. Fill out the rest of the form with your email, name, and telephone number
7. Accept the terms and sign the form
8. Click "Sign Up"

You will receive an email once your request has been either accepted or rejected by an RRC Admin.

If you have any questions, please contact the RRC Help Desk at rrconline-security@rrc.texas.gov.

Sincerely,

P-5 Financial Assurance Unit



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/05/2024

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 Ironwood, a Marsh & McLennan Agency, LLC Co 4401 Northside Parkway NW Suite 800 Atlanta GA 30327		CONTACT NAME: Laura Jones PHONE (A/C, No, Ext): (404) 927-9143 E-MAIL ADDRESS: ljones@ironwoodins.com		FAX (A/C, No): (404)503-9101
INSURED Ironclad Environmental Solutions, Inc. 4888 Loop Central Drive, Suite 440 Houston TX 77081		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: Axis Surplus Insurance Company		26620
		INSURER B: Hartford Insurance		19682
		INSURER C: Bridgeway Insurance Company		12489
		INSURER D: SiriusPoint Specialty Insurance		16820
		INSURER E: Axis Surplus Insurance		26620
		INSURER F:		


COVERAGES**CERTIFICATE NUMBER:** CL2310449037**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 type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			MP005964-01-2023	09/30/2023	09/30/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 25,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Contractors Pollution \$ 1,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			20CSES81701	09/30/2023	09/30/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$			8EA7XL000225301	09/30/2023	09/30/2024	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			20WNS81700	09/30/2023	09/30/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Excess Liability			TSX00020323	09/30/2023	09/30/2024	Each Occurrence 5,000,000 Aggregate 5,000,000

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

CERTIFICATE HOLDER**CANCELLATION**

Delaware Department of Natural Resource and Environmental Control 89 Kings Highway Dover DE 19901	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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AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY Ironwood, a Marsh & McLennan Agency, LLC Co		NAMED INSURED Ironclad Environmental Solutions, Inc.	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

Excess General Liability/Pollution Liability
 Axis Surplus Insurance Company
 Policy # MX005965-01-2023
 Effective 9/30/2023 to 9/30/2024
 \$10,000,000 Occurrence
 \$10,000,000 Aggregate

Cyber Liability
 Certain Underwriters at Lloyd's London and other insurers
 Policy # ACS1241424
 Effective 4/1/2024- 4/1/2025
 \$5,000,000 Limit

Additional Named Insureds:

1. Ironhorse Parent, LP
2. Ironhorse Intermediate, LLC
3. Ironhorse Purchaser, LLC
4. Gulf Tanks Holdings, Inc.
5. Water Movers Contracting, LLC
6. Adler Tank Rentals, LLC
7. DenBeste Water Solutions, LLC
8. DenBeste Transportation, LLC

USDOT Number: 1624598 Date Received: 9/30/2023

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.



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 Gulf Tanks Holdings, Inc of Texas (Motor Carrier name) (Motor Carrier state or province)

Dated at 12:00 mid on this 30th day of September, 2023

Amending Policy Number: 8E-A7-XL-0002253-01 Effective Date: 09/30/2023

Name of Insurance Company: The Bridgeway Insurance Co

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):

- Radio button options for insurance coverage: 'This insurance is primary...' and 'This insurance is excess...' with monetary values.

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: 347-344-7037.

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)