RECEIP	T DATE	09/24/24	No.	654571
RECEIVED FROM Teal	Constr	uction Inc.		\$350,00
Three hundre	d fift	ty and ?30.		DOLLARS
SFOR RENT DE-5	W-DI	98		
ACCOUNT	CASH	70100		
PAYMENT	CHECK	FROM / (08)	то	
BAL. DUE	ORDER OREDIT CARD	BY M.M.		3-11



RECEIVED

SEP 23 2024

DNREC - WHS

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

1.

☐ Five Years - \$275.00

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

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 or the amount of \$350.00.	der, payable to the "State of Delaware" in					
Renewal: Permit # DE-SW- 0198 Ex	piration Date 12/31/24					
Please indicate the term for which you desire your permit to be issued. Submit a check or money order, payable to the "State of Delaware," for the indicated permit fee.						
SCRAP TIRES ONLY	ALL OTHERS					
☐ One Year - \$75.00	✓ One Year - \$350.00					
☐ One Year - \$75.00 ☐ Two Years - \$125.00	☑ One Year - \$350.00 ☐ Two Years - \$650.00					
	_					
☐ Two Years - \$125.00	☐ Two Years - \$650.00					

☐ Five Years - \$1550.00

~	D 1	ease	4	n	1 1	•
,	RA	0960	TO	$\nu_{\rm II}$	n	110

		you wish to be included on the list of transpo ware permitted solid waste transporters?		d to persons requesting a list of			
3.	Con	npany Information					
	Com	pany Name Teal Construction, Inc.					
Lo	cation	Address:	Mailing Address:				
		612 Mary St		PO Box 779			
		Dover, De. 19904	D	over, De. 19903			
Со	ntact:	Charles Reed, III	le: President				
Bu	siness	Phone: (302) 678-9500 Fa	x: (302) 678-9715				
E-1	mail:	cr1647@tealconstruction.com					
24	hr En	nergency Contact Phone: (302) 678-9897					
4.	4. Company Ownership Information						
	(a).	Please indicate the company type: ☐ Proprietorship ☐ Partnership ☐ Corporation - If company is a corporation	ion, indicate city, st	ate, and date of incorporation.			
		City: Dover Sta	te: De	_ Date:			
		☐ Municipality ☐ Public institution ☐ Limited Liability Corporation (LLC) S ☐ Other: (must specify)	tate:	_			
	(b).	For each Owner, Partner, or Corporate Odate of birth, and % ownership. Include all shares.					
		Attachment					
	(c).	If company is owned by or affiliated with a address & mailing address, and % ownersh		ttach parent company name,			
		☐ Attachment ✓ No parent company					





GENERAL CONTRACTORS

DE Solid Waste Transponder Renewal De-SW-0198

#4b Charles W. Reed III

Jeffrey M Wark

P.O. Box 779

P.O. Box 779

Dover, De. 19903

Dover, De. 19903



50%

50%

MEMBER
Delaware Utility and Transportation
Contractors Association, Inc.
National Utility Contractors Association





Solid Waste Transporter Application Page $\bf 3$ of $\bf 6$

5.	Company locations in Delaware
	List name and \underline{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 (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 home 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-

Solid Waste Transporter Application Page 4 of 6

8.	Treatment, Storage, and Disposal Facilities					
	(a).	Do you cross state lines with the waste? \square Yes \square No				
	(b).	Identify in an attachment all solid waste Treatment, Storage, Di Facilities and Transfer Stations to which the waste will be transfer				
		☐ Delaware Solid Waste Authority locations: (attachment) ☐ Clean Earth of New Castle, Inc. (thermal treatment facility Delaware Recyclable Products, Inc. (dry waste, commercia ☐ Other in-state solid waste facilities, including private facilities ☐ Out of state solid waste TSD facilities: (attachment)	for PHC-soils) al, industrial, and PHC-soils) ties: (attachment)			
9.	Othe	er Transporter Permits				
	(a).	Attach a copy of your home state solid waste transporter permit home state.)	t. (N/A if Delaware is your			
		☐ Attachment Not applicable-No transporter permit required for these solid	d waste types in our home state.			
	(b).	List solid waste transporter permits held in other states.				
		☐ Attachment ✓ No transporter permits in other states				
	(c).	Indicate your Federal DOT number and Motor Carrier number:	:			
		DOT# <u>007729</u> MC#				
		□ N/A If N/A, please provide an explanation, on the followin required to have a DOT or MC number.	ng page, as to why you are not			
10.	Proc	of of Financial Responsibility				
	The transporter must submit proof of financial responsibility as established in section 7.2.4 Delaware's Regulations Governing Solid Waste. This proof may be established by a Certificat Insurance, with MCS-90 endorsement where applicable, or by other means approved by Department. (The Certificate of Insurance must identify the Department of Natural Resources a Environmental Control, Compliance and Permitting Section as the certificate holder.)					
	(a).	Are you for-hire in interstate commerce? Yes No (Fo business of transporting, for compensation or payment, wastes g than your own.)				
		Do you transport in the State of Delaware Only (Intrastate)? Do you transport Interstate?	✓ Yes☐ No☐ Yes☑ No			



#8 Pat "B"

Delaware Solid Waste Facilities

Central
Southern
Milford
Rie 5
Pinetree Odessa

We use Central and Southern Facilities most all the time



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/08/2024

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.

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). CONTACT NAME: Allison Tallon PRODUCER PHONE (A/C, No, Ext): E-MAIL (410) 730-2688 (410) 730-0219 V W Brown Insurance Service 10380 Old Columbia Rd. atallon@vwbrown.com ADDRESS: Ste 104 INSURER(S) AFFORDING COVERAGE NAIC # 31534 MD 21046 Columbia Citizens Insurance Co. INSURER A Allmerica Financial Benefit 41840 INSURED INSURER B : Allmerica Financial Alliance 10212 Teal Construction Inc. 22292 612 Mary Street Hanover Insurance INSURER D : Navigators Specialty Insurance Company 36056 PO Box 779 INSURER E: DE 19903 Dover INSURER F 2024-2025 COVERAGES CERTIFICATE NUMBER: **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. POLICY EFF (MM/DD/YYYY) ADDLISUBR POLICY EXP TYPE OF INSURANCE POLICY NUMBER INSD WVD COMMERCIAL GENERAL LIABILITY s 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED
PREMISES (Ea occurrence) 100,000 CLAIMS-MADE X OCCUR 10,000 MED EXP (Any one person) 1,000,000 ZBO H925070 02/10/2024 02/10/2025 PERSONAL & ADV INJURY s 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE S POLICY PRO-2,000,000 PRODUCTS - COMP/OP AGG \$ OTHER: COMBINED SINGLE LIMIT \$ 1,000,000 AUTOMOBILE LIABILITY (Ea accident) ANY AUTO BODILY INJURY (Per person) s OWNED AUTOS ONLY HIRED SCHEDULED B AWO H925148 02/10/2024 02/10/2025 BODILY INJURY (Per accident) 5 AUTOS NON-OWNED PROPERTY DAMAGE AUTOS ONLY AUTOS ONLY S WINDRELLA LIAB 10.000.000 OCCUR EACH OCCURRENCE 02/10/2025 D EXCESS LIAB UHQ H925077 02/10/2024 10,000,000 AGGREGATE CLAIMS-MADE 0 DED | RETENTION \$ WORKERS COMPENSATION X PER STATUTE AND EMPLOYERS' LIABILITY 500,000 ANY PROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT WKQ H925121 02/10/2024 02/10/2025 OFFICER/MEMBER EXCLUDED? (Mandatory in NH) 500,000 E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below 500,000 E.L. DISEASE - POLICY LIMIT Scheduled Equip \$4,339,500 Contractors Equipment - \$2,500 Ded IHQ J302552 Leased/Rented Equip 02/10/2024 02/10/2025 \$450,000 Installation Floater Installation Floater \$300,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CERTIFICATE HOLDER 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. State of DE, Dept of Natural Resources & Environmental Control Solid & Hazardous Waste Mgmt AUTHORIZED REPRESENTATIVE 89 Kings Highway Dover DE 19901

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

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

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	

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 tra ported.
 - trol Plan)

	(ii) Familiarity with the approved accidental discharge containment plan. (Spill Cont (iii)Familiarity with the conditions of the solid waste transporter's permit.
✓	Driver Training, attachment



SPILL CONTROL PLAN FOR SOLID WASTE HAULERS .

11.

- Spill Containment Kit is on Vehicle.
 Triangle Reflectors
 Fire Extinguisher
 First Aid Kit
 Heavy-duty gloves, hardhat
 Flashlight
- All loads will be enclosed, covered, or terped to prevent accidental
 discharge of the waste during transport to the disposal facility.
- 3. The driver will perform the following pre-trip inspections:

 Daily
- 4. & 5. If a small quantity is spilled the driver will stop and clean up before continuing to the destination.

If it is a large spillage and the driver cannot clean it up, Robert Edgell or Charles Reed will be contacted, 302-678-9500.

The contact person will send out an additional crew and equipment to completely clean up the site.

If a crew is not available, the contact person will contract for clean-up services with another company.

DB Emergency reporting no. 1-800-662-8802

302-739-9401

. 911

12. Driver Training

Road Test

CDL License

CDL Physical every two years

Drug Screating - Pre-suployment, random after that.

Defensive driving course, if too many points.

Student	Course Category	Course Title	Completed
Abdul Aziz, Razzaq	Driver-DOT	Defensive Driving for CMV Drivers Module 1: Prepare	08/14/2022
Abdul Aziz, Razzaq	Driver-DOT	Defensive Driving for CMV Drivers Module 2: Communicate	08/14/2022
Abdul Aziz, Razzaq	Driver-DOT	Defensive Driving for CMV Drivers Module 3: Look	08/14/2022
Abdul Aziz, Razzaq	Driver-DOT	Defensive Driving for CMV Drivers Module 4: Manage Speed & Space	08/14/2022
Abdul Aziz, Razzaq	Driver-DOT	Corrective Action Training: CDLs & Medical Cards	11/12/2022
Abdul Aziz, Razzaq	Driver-DOT	Corrective Action Training: Cell Phones	07/24/2022
Abdul Aziz, Razzaq	Driver-DOT	Corrective Action Training: Emergency Equipment	11/12/2022
Abdul Aziz, Razzaq	Driver-DOT	Corrective Action Training: Tallgating	07/30/2022
Abdul Aziz, Razzaq	Driver-DOT	Corrective Action Training: Tires	11/12/2022
Abdul Aziz, Razzaq	Driver-DOT	Corrective Action Training: Vehicle Leaks	11/12/2022
Abdul Aziz, Razzaq	Driver-DOT	Corrective Action Training: Vehicle Maintenance	11/12/2022
Abdul Aziz, Razzaq	Driver-DOT	Safe and Smart CDL Class A Driver Training: Pre-Trip Vehicle Inspection: Walk Around	07/24/2022
Abdul Aziz, Razzaq	Driver-DOT	Safe and Smart CDL Class A Driver Training: Post-Trip Inspections	07/24/2022
Abdul Aziz, Razzag	Driver-DOT	Corrective Action Training: Cargo Securement: Flatbeds	11/12/2022
Jefferson, James	Driver-DOT	Corrective Action Training: Cell Phones	05/20/2022
Jefferson, James	Driver-DOT	Corrective Action Training: Tailgating	08/05/2022
Jefferson, James	Driver-DOT	Safe and Smart CDL Class A Driver Training: Pre-Trip Vehicle Inspection: Walk Around	05/20/2022
Jefferson, James	Driver-DOT	Safe and Smart CDL Class A Driver Training: Post-Trip Inspections	05/20/2022
Middleton, Donavan	Hazmat	Hazmat: General Awareness Training	06/16/2022
Middleton, Donavan	Driver-DOT	Defensive Driving for CMV Drivers Module 1: Prepare	10/26/2022
Middleton, Donavan	Driver-DOT	Defensive Driving for CMV Drivers Module 2: Communicate	10/26/2022
Middleton, Donavan	Driver-DOT	Defensive Driving for CMV Drivers Module 3: Look	10/26/2022
Middleton, Donavan	Driver-DOT	Defensive Driving for CMV Drivers Module 4: Manage Speed & Space	10/26/2022
Middleton, Donavan	Driver-DOT	Corrective Action Training: Cell Phones	05/23/2022
Middleton, Donavan	Driver-DOT	Safe and Smart CDL Class A Driver Training: Pre-Trip Vehicle Inspection: Walk Around	06/16/2022
Middleton, Donavan	Driver-DOT	Safe and Smart CDL Class A Driver Training: Post-Trip Inspections	06/15/2022
Sobiech, Adam	Driver-DOT	Corrective Action Training: Cell Phones	07/25/2022
Webb, Andy	Hazmat	Hazmat: General Awareness Training	06/17/2022
Webb, Andy	Driver-DOT	Defensive Driving for CMV Drivers Module 1: Prepare	08/09/2022
Webb, Andy	Driver-DOT	Defensive Driving for CMV Drivers Module 2: Communicate	08/09/2022
Webb, Andy	Driver-DOT	Defensive Driving for CMV Drivers Module 3: Look	08/09/2022
Webb, Andy	Driver-DOT	Defensive Driving for CMV Drivers Module 4: Manage Speed & Space	08/09/2022
Webb, Andy	Driver-DOT	Corrective Action Training: Cell Phones	05/19/2022
Webb, Andy	Driver-DOT	Corrective Action Training: Tailgating	08/09/2022
Webb, Andy	Driver-DOT	Safe and Smart CDL Class A Driver Training: Pre-Trip Vehicle Inspection: Walk Around	05/19/2022
Webb, Andy	Driver-DOT	Safe and Smart CDL Class A Driver Training: Post-Trip Inspections	05/19/2022
Wisneski, David	Driver-DOT	Defensive Driving for CMV Drivers Module 1: Prepare	10/18/2022
Wisneski, David	Driver-DOT	Defensive Driving for CMV Drivers Module 3: Look	10/18/2022
Wisneski, David	Driver-DOT	Defensive Driving for CMV Drivers Module 4: Manage Speed & Space	10/18/2022
Wisneski, David	Driver-DOT	Corrective Action Training: Cell Phones	07/26/2022
Wisneski, David	Driver-DOT	Corrective Action Training: Taligating	07/26/2022
Wisneski, David	Driver-DOT	Safe and Smart CDL Class A Driver Training: Pre-Trip Vehicle Inspection: Walk Around	07/26/2022
Wisneski, David	Driver-DOT	Safe and Smart CDL Class A Driver Training: Post-Trip Inspections	07/26/2022
	2	The same that the same is the same the same the same the same that the s	

Year	Make	Model	Туре	Ser#	State	Tag#	Color	Eq#	Registered Weight DE	Ownership
	Chevrolet	1500	Pickup	1GCRYAEF5LZ250210	DE	C184	Gray	01.037	7000	Teal Construction Inc.
	Kenworth	T300	Flathed .	2NKMH77X65M649263	DE	CL107943	Blue	04.122		Teal Construction Inc.
		4400	Dump Truck	1HTMKAAN99H561253	DE	CL118616	Blue	04.125	555.55	Teal Construction Inc.
1000		4700-04	Flathed	1HTSCABP8YH325298	DE	CL110791	Blue	04.127	77424-7717-7717-7717	Teal Construction inc.
	International ·	4700-04	Flathed	1HTSCABPX1H347356	DE	CL110792	Blue	04.129	1	Teal Construction inc.
	International	4700	Dump Truck	1HTSCABNX2H524794	DE	CL115328	Blue	04.191		Teal Construction inc.
	Kenworth	T880	Dump Truck	1NKZXPEX6HJ173141	DE	CL118234	Blue	05.192	12_121000000	Teal Construction inc.
	Kenworth	T800B	Dump Truck	2NKDL00X27M169163	DE	CL111117	Blue	05.133		Teal Construction inc.
	Kenworth	ТВООВ	Dump Truck	1NKDL00XX6J150530	DE	CL110789	Blue	Ò5.134		Teal Construction inc.
	Kenworth	T800B	Dump Truck	1NKDL00X16J150531	DE	CL110790	Blue	05.135	AND ADDRESS OF THE PARTY OF THE	Teal Construction Inc.
	Kenworth	T800	Dump Truck	1NKDL00X35J101121	DE	CL109788	Blue	05.136		Teal Construction Inc.
	Kenworth .	T800	Dump Truck	1NKDL00X55J101122	DE	CL109787	Blue	05.137		Teal Construction inc.

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GENERAL CONTRACTORS

Delaware Solid Waste
#14 – List of all vehicle operators

Abdul-Aziz, Razzaq

Humphreys, Mark

Jefferson, James

Middleton, Donovan

Sears, Craig

Sobiech, Adam

Teat, Randy

Wisneski, David

Webb, Andrew

MEMBER
Delaware Utility and Transportation
Contractors Association, Inc.
National Utility Contractors Association





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.)

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 ✓ Yes Is a list of all vehicle operators attached? 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. ☑ 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.

^{**}A legal owner or corporate officer must sign the application **