				The state of the s
RECEIP	T DATE_	09/18/24	_No.	654564
RECEIVED FROM CA		Trucking, LLC.		\$350.00
Three	Hun	Ind Fifty	and of	DOLLAR:
OFOR RENT DI	E-SW	1-2038		
ACCOUNT	CASH	+ 1 2		
PAYMENT	CHECK	FROM # 104	_ то	
BAL. DUE	ORDER	BY		3

With the same and the same and





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- 1038 Exp	iration Date 12 31 2024					
Please indicate the term for which you desire your per order, payable to the "State of Delaware," for the indi						
SCRAP TIRES ONLY	ALL OTHERS					
☐ One Year - \$75.00	One Year - \$350.00					
☐ Two Years - \$125.00	☐ Two Years - \$650.00					
☐ Three Years - \$175.00	☐ Three Years - \$950.00					
☐ Four Years - \$225.00	☐ Four Years - \$1250.00					
☐ Five Years - \$275.00	☐ Five Years - \$1550.00					

	ease		

Do you wish to be included on the list of transported Delaware permitted solid waste transporters?	rters that is provided to persons requesting a list of Yes No
3. Company Information	
Company NameCNT_TRUCKIN	6 UC
Location Address:	Mailing Address:
81 Rya Oak Ct	231 Stadium St # 496
Dover DE 19904	Smyrna De 199077
Contact: Claude N Trouple Tit	le: Dwner
Business Phone: 267 997 2361 Fa	к:
E-mail: CNTTRUCKING LUC 23@ gmai	1. com
24 hr Emergency Contact Phone: 247 997	236/
4. Company Ownership Information	
(a). Please indicate the company type: Proprietorship Partnership Corporation - If company is a corporat	ion, indicate city, state, and date of incorporation.
City: Sta	te:Date:
Municipality Public institution Limited Liability Corporation (LLC) S Other: (must specify)	tate: DE
	fficer, attach a list with name, title, mailing address, I stockholders owning greater than 5% outstanding
Attachment	
(c). If company is owned by or affiliated with a address & mailing address, and % ownersh	
Attachment No parent company	

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

5.	Company locations in Delaware
	List name and <u>street</u> 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?
	(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

ο.	Trea	ttment, Storage, and Disposal Facilities
	(a).	Do you cross state lines with the waste? Yes No
	(b).	Identify in an attachment <i>all</i> 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.	Othe	er Transporter Permits
	(a).	Attach a copy of your home state solid waste transporter permit. (N/A if Delaware is your home state.)
		Attachment Not applicable-No transporter permit required for these solid waste types in our home state.
	(b).	List solid waste transporter permits held in other states.
		Attachment No transporter permits in other states
	(c).	Indicate your Federal DOT number and Motor Carrier number:
		DOT# 4087368 MC# 1556330
		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.	Proc	of of Financial Responsibility
	Dela Insur Depa	transporter must submit proof of financial responsibility as established in section 7.2.4 of ware's Regulations Governing Solid Waste. This proof may be established by a Certificate of rance, with MCS-90 endorsement where applicable, or by other means approved by the artment. (The Certificate of Insurance must identify the Department of Natural Resources and ironmental 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.)
		Do you transport in the State of Delaware Only (Intrastate)? Yes No 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 [\$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-90 [(For Hire & Private)	\$350,000.00
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 X

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	X
Diver	rranning,	attachment	1

VEHICLE INFORMATION - See Item 13 of the application.

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

MAKE - MODEL - YEAR	TYPE	VIN # (Serial Number)	LICENSE PLATE # and STATE of REGISTRATION	mfgr's GVWR	OWNERSHIP
1998 Mack Rd	Dumo truck		CL123746 DE	73280	/00°/0
	·				
	-				
				1	
	-				

1. Yes please list my company on Delaware Solid Waste list

2. One Owner
46. Claude N Troopé

Ownership 100%

231 Stadium St MB # 494 Smryne DE 19977 (mailing Address)

51 Rye Oak Ct Ooser DE 19904 (Business Address)

- 3. I do not have a solid waste fermit in other States
- 4 One Vehicle Operator: Claude N. Troup'e
- 5. Company is not owned under a parent Company
- 6. Dry Warle is taken to Cherry Island Lundfill 1706 to 12th st Wilmington DE 19809

SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

- (1) Spill control and safety equipment carried in each vehicle:
 - 1). Reflectors and/or flares
 - 2). Fire extinguisher
 - 3). First aid kit
 - 4). Heavy-duty gloves, hard hat
 - 5). Flashlight
 - 6). Safety 6 lasses
- (2) All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.

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

 1). In Cab / Air brake Safety Equip. Spill Control kit

 2). Under hold, light chek, Exertor (and.
- (4) If there is an accident or other emergency which causes a portion of the load to be spilled, the driver, if uninjured, will contact the following designated company coordinator:

Name: TAT TZVCKING (JACK) Phone: 362832 3069

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

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

Maryland:

New Jersey:

- (6) The designated coordinator will contract for clean-up services with another company. (This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.)
- (7) This plan will be carried in all vehicles, along with the permit.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/26/2023

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.

If	SUBROGATION IS WAIVED, subject to subrocation is waived, subject to sis certificate does not confer rights to	to th	ne te	rms and conditions of the	e polic	y, certain po	olicies may			
PRO	DUCER				CONTA NAME:			· · · · · · · · · · · · · · · · · · ·		
	Cool Ins. & Realtors Inc 4 Stature Drive				PHONE (A/C. No	p. Ext): 141039	81373	FAX (A/C, No): 410-39	22-0372
	wark MD 19713				E MANII	ss: dorothy@			1,	
								DING COVERAGE		NAIC#
					INSURE	RA: United F	inancial Casu	alty Co.		11770
INSU				CNTTRUC-01	INSURE	RB:				
	T Trucking LLC Rye Oak Court				INSURE	RC:				
	ver DE 19904				INSURE	RD:				
					INSURE	RE:				
					INSURE	RF:				
CO	VERAGES CERT	TIFIC	CATE	NUMBER: 640873308				REVISION NUMBER:		
IN	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)	LIN	IITS	
Α	X COMMERCIAL GENERAL LIABILITY	Y		974489661		10/24/2023	10/24/2024	EACH OCCURRENCE	\$ 1,000	0,000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,0	000
								MED EXP (Any one person)	\$ 5,000)
								PERSONAL & ADV INJURY	\$ 1,000	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000	0,000
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGO	\$ 2,000	0,000
	OTHER:								\$	
Α	AUTOMOBILE LIABILITY	Υ		974489661		10/24/2023	10/24/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000),000
	ANY AUTO							BODILY INJURY (Per person	\$	
	OWNED X SCHEDULED AUTOS AUTOS							BODILY INJURY (Per accider	t) \$	
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
	X Comp \$1000 X COLL \$1000								\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$							1959	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N							PER OTH- STATUTE ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$	
	(Mandatory in NH)							E.L. DISEASE - EA EMPLOYE	E \$	
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMI	r s	

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

CERTIFICATE HOLDI	ER
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State of Delaware Department of Natural Resources and **Environmental Control** Solid & Hazardous Waste Management Section 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

CANCELLATION

S & T Trucking Co. 3482 Wrangle Hill Road Bear, DE 19701 (302)832-8994

DRIVER REQUIREMENTS

I:	Work schedule will require some weekends. 4 Evenings - Nights We work 24/7									
II:	Truck bodies must be kept clean or cleaned out at the end of shift. When hauling contaminated soil bodies should be shoveled or swept out after each load. At Facility									
Ш.	Tail gates must be kept clean and free of debris.									
IV:	Inside of truck must be kept clean.									
V:	Drivers must wear appropriate clothing and work shoes required for job.									
VI:	Drivers must comply with all safety rules and regulations while on contractors site (ie:hard hats, safety glass, etc)									
VII:	Drivers must check truck at the beginning and end of shift: !) Check oil and water 2) check tires 3) check under hood for any leaks 4) check lights 5) check for air leaks 6) check hydraulic oil 7) check for any cracks or missing leaves on springs 8) check for loose clamps 9) check tarp for rips or binding 10) check to make sure you have all permits and paperwork Needed for day									
VIII:	Drivers must keep truck logbook filled out 1) who you worked for and where 2) if hourly, hourly tickets must be completed with contractor signature 3) if hauling by the ton, write tons, ticket #, and place 4) must keep track of mileage and state - Rockes 5) must fuel up every evening, enter gals. And price where purchased 6) write down everything you can't fix, also repairs, flats, & oil changes 7) keep daily log filled out 8) keep inspection book filled out									
Ì have re	ead and understand DRIVER REQUIREMENTS.									
Signatu	re									

Davis, DaQuan (DNREC)

From:

Claude Troupe <tdeuce716@icloud.com>

Sent: Friday, September 27, 2024 11:32 AM

To: WHStransporters

Subject: Re: Missing solid waste info CNT

Hello

Yes please remove commercial waste. Thank you

Kind Regards

On Sep 27, 2024, at 8:11 AM, WHStransporters < WHStransporters@delaware.gov> wrote:

Hi,

Do you want to remove commercial waste as there is no TSDF listed for it? If not, please provide the TSDFS for commercial waste.

Thank you, DaQuan Davis

<image001.png>

DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

<image002.png> 302-739-9403

<image003.png>

daquan.davis@delaware.gov

<image004.png>

89 Kings Hwy SW, Dover, DE 19901

<image005.png>

dnrec.delaware.gov

<image006.png>

<image007.png>

<image008.png>

From: Claude Troupe <tdeuce716@icloud.com> Sent: Thursday, September 26, 2024 7:00 PM

To: WHStransporters < WHStransporters@delaware.gov>

Subject: Missing solid waste info CNT

Hello please find attached:

Kind Regards

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.

Wehicle List Attached

14

14.	Vehicle Operator Information				
	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 allege 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 allege 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 informat submitted in this application and all attachments and that, upon personal knowledge and informat the information is true, accurate, and complete. I am aware that there are significant penalties submitting false information.				
	**Signature Date 9 124 24				
	Print Name Chule N. Ture Title Uwher				
	**A legal owner or corporate officer must sign the application **				

Section 8: Dry Waste 15 transforted to clean Earth New Castle.

Section 12: 14ps CD2 Driving Experience. NO violations, No accidents.

Section 15: NO environmental violations

14. Venicle Operator Information 1. Claude N. Troupe Owner/Operator 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.

U.S. Department of Transportation

Federal Motor Carrier Safety Administration OMB No: 2126-0008 Expiration: 05/31/2024 Form MCS-90 Revised 06/03/2021

USDOT Number: 4087368	Date Received:

FORM MCS-90 ENDORSEMENT FOR MOTOR CARRIER POLICIES OF INSURANCE FOR PUBLIC LIABILITY UNDER SECTIONS 29 AND 30 OF THE MOTOR CARRIER ACT OF 1980

Issued to CNT Trucking LLC		
(Motor Carrier name) of 231 Stadium Street STE MB #496 Smyrna, DE 19977		
(Motor Carrier state or province)		
Dated at 11:19 AM on this 21st day of December, 2023 Amending Policy Number: CA 974489661 Effective Date: 12/21/2023 Name of Insurance Company: United Financial Cas 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):		
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: 1-800-444-4487.		
Cancellation of this endorsement may be effected by the company of 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, D.C.).		

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

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

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

PROPERTY DAMAGE means damage to or loss of use of tangible property.

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

PUBLIC LIABILITY means liability for bodily injury, property damage, and environmental restoration.



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

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon.

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

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

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

SCHEDULE OF LIMITS - PUBLIC LIABILITY

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

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