

RECEIPT

DATE

09/25/24

No.

654575

RECEIVED FROM

Georgetown Materials LLC

\$

350.00

Three hundred fifty and $\frac{00}{100}$

DOLLARS

 FOR RENT FOR

DE-SW-2090 New App

ACCOUNT

PAYMENT

BAL. DUE

 CASH CHECK MONEY
ORDER CREDIT
CARD

FROM

14696

TO

BY

M.M.



RECEIVED

SEP 25 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

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

ALL OTHERS

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

- One Year - \$350.00
- Two Years - \$650.00
- Three Years - \$950.00
- Four Years - \$1250.00
- Five Years - \$1550.00

2. Release to Public

Do you wish to be included on the list of transporters that is provided to persons requesting a list of Delaware permitted solid waste transporters? Yes No

3. Company Information

Company Name Georgetown Materials LLC

Location Address:	Mailing Address:
355 S. Railroad Avenue	355 S. Railroad Avenue
Georgetown, DE 19947	Georgetown, DE 19947

Contact: Jennifer Bell Title: Co-Owner

Business Phone: 302-856-8300 Fax: n/a

E-mail: georgetownmaterials@gmail.com

24 hr Emergency Contact Phone: 302-236-6230

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: _____ Date: _____

- Municipality
- Public institution
- Limited Liability Corporation (LLC) State: Delaware
- 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 A

(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 A
 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 A
 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) concrete & blacktop rubble
 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) A
 - 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 _____
 - No transporter permits in other states
- (c). Indicate your Federal DOT number and Motor Carrier number:
DOT# 1327944 MC# _____
 - N/A If N/A, please provide an explanation, on the following page, as to why you are not required to have a DOT or MC number.

10. Proof of Financial Responsibility

The transporter must submit proof of financial responsibility as established in section 7.2.4 of Delaware's *Regulations Governing Solid Waste*. This proof may be established by a Certificate of Insurance, with MCS-90 endorsement where applicable, or by other means approved by the Department. (The Certificate of Insurance must identify the **Department of Natural Resources and Environmental Control, Compliance and Permitting Section** as the certificate holder.)

- (a). Are you for-hire in interstate commerce? Yes No (For-Hire means you are in the business of transporting, for compensation or payment, wastes generated by a company other than your own.)
- (b). Do you transport in the State of Delaware Only (Intrastate)? Yes No
- (c). Do you transport Interstate? Yes No

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

	FOR-HIRE INTERSTATE	ALL OTHERS
Residential Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Commercial Waste	\$750,000.00 + MCS-90 <input checked="" 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 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 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 B

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 C

13. Vehicle Identification

On the form provided with this application, list **MAKE, MODEL, YEAR, SERIAL NUMBER, LICENSE PLATE NUMBER, STATE OF REGISTRATION, MANUFACTURER'S GVWR and OWNERSHIP** of all vehicles used for the transportation of solid waste. You must list both motorized and container units. (If you maintain a list of company vehicles in a computer database you may submit a print out of the vehicles provided it contains the information requested herein.)

NOTE: You must notify CAPS in writing of any changes to information contained within this application, such as additions or deletions of vehicles, in accordance with conditions of the issued permit.

Vehicle List Attached

14. Vehicle Operator Information

Is a list of all vehicle operators attached? Yes

What tax form do you submit to the IRS for your vehicle operators?

Form W-2

Form 1099-Misc

Other

15. Environmental Record

List all criminal citations, arrests, convictions, civil or administrative violations, and civil or administrative enforcement actions, and the disposition(s) thereof for the violation or alleged violation of any environmental statute, regulation, permit, license, approval, or order, regardless of the state in which it occurred. Indicate whether it was a local, state, or federal violation or alleged violation. List all such items for the applicant, and if the applicant is other than an individual, for any employee while employed by the applicant, or any partner, officer, or director of the applicant as an individual or for any former business of such partner, officer, or director. For civil or administrative violations or alleged violations, list all such items for the last five (5) years from the date of the application. Information submitted under this section is subject to verification. **Failure to submit complete and accurate information may lead to permit denial or revocation.**

Attachment E

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** Jennifer L Bell **Date** 9/23/2024

Print Name Jennifer L. Bell **Title** Co-Owner

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



Georgetown Materials LLC

355 S. Railroad Avenue
Georgetown, DE 19947
(302) 856-8300

Solid Waste Transporter Permit Application Attachment "A"

4. Company Ownership Information

(b). Richard H. Bell III, Co-Owner
115 Savannah Road
Lewes, DE 19958
[REDACTED], 51%

Jennifer L Bell, Co-Owner
115 Savannah Road
Lewes, DE 19958
[REDACTED], 49%

5. Company locations in Delaware

355 S. Railroad Avenue
Georgetown, DE 19947

6. Company Affiliates (Same Owners)

Road Site Trucking, LLC
Road Site Construction, Inc.
Clean Cut Pavers & Pools, LLC

8. Treatment, Storage, and Disposal Facilities

(b). Delaware Solid Waste Authority locations: All Delaware locations

Other in-state solid waste facilities, including private facilities:
Georgetown Materials LLC, 355 S. Railroad Avenue, Georgetown, DE 19947
for concrete rubble, asphalt rubble, paver waste and recycle dirt, ONLY.



Georgetown Materials LLC

355 S. Railroad Avenue
Georgetown, DE 19947
(302) 856-8300

Solid Waste Transporter Permit Application Attachment "B"

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). Reflective Vest

(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). Thoroughly inspect vehicle and roll-off container.
- 2). Confirm all safety equipment and spill control are present in vehicle.

(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: Jennifer Bell Phone: 302-236-6230 / 302-856-8300

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

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

Maryland: N/A

New Jersey: N/A

(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.



Georgetown Materials LLC

355 S. Railroad Avenue
Georgetown, DE 19947
(302) 856-8300

Solid Waste Transporter Permit Application **Attachment "C"**

DRIVER TRAINING

- All drivers are required to have a CDL license.
- All drivers are required to perform daily safety checks and complete the inspection form on their vehicle every day prior to leaving the yard.
- Driver records are checked periodically; drivers are disciplined as necessary.
- Drivers are required to use their tarp on every load.
 - Loads must not exceed the top of the roll off container or truck bed.
- All drivers and employees are required to notify the company owner if there are any changes with their driver's license or if they receive any driving violations.
- Weekly safety meetings are conducted to perform overall safety.
- All drivers are provided with the spill control plan and is placed in each truck for easy reference.
- All drivers are aware that a current solid waste transporter permit is required to be carried in each vehicle.



Georgetown Materials LLC

355 S. Railroad Avenue
Georgetown, DE 19947
(302) 856-8300

Solid Waste Transporter Permit Application Attachment "D"

VEHICLE OPERATOR LIST

1. David A. Vazquez

[REDACTED]

DE Class A License # [REDACTED]

2. Barry A. Betts

[REDACTED]

DE Class A License # [REDACTED]

3. Jermaine A. Morris

[REDACTED]

DE Class B License # [REDACTED]

4. Roger D. McBroom, Sr.

[REDACTED]

DE Class A License # [REDACTED]

5. Roger D. McBroom, Jr.

[REDACTED]

DE Class A License # [REDACTED]

Attachment "E"

TICKET NO.: T972400138

STATE OF DELAWARE
UNIFORM COMPLAINT AND SUMMONS

COUNTY OF SUSSEX
CITY OR TOWN OF GEORGETOWN
VOLUNTARY ASSESSMENT CENTER

The undersigned, being duly sworn, upon his oath, deposes and says:

RECIPIENT

On: 9/3/2024 at 0953
Name: **DAVID A VAZQUEZ**
Address: [REDACTED]
Date of Birth/Age: [REDACTED] Cell Phone: [REDACTED]
Sex: **Male** Race: **White** Ethnic Origin: **Hispanic**
Driver's License #: [REDACTED] State: **Delaware** Expires: **05/11/2029** Class: **A**
Email address #: [REDACTED]

VEHICLE

Vehicle Registration: **C111051** State: **Delaware** Expires: **06/24/2025**
Year: **2021** Make: **Volvo** Model: **WESTERN CON** Color: **White** VIN: [REDACTED]

OWNER

Owner's Name: **ROAD, SITE CONSTRUCTION INC**
Owner's Address: **16192 COASTAL HWY LEWES 19958**

VIOLATION(S) - 1

Sequence No.: **001 - DE 07 § 6003 00A4 V - TRANSPORTATION, STORAGE, OR COLLECTION OF SOLID WASTE WITHOUT PERMIT**
HARDSCRABBLE RD and LANDELL LN Georgetown, Sussex County Grid: 130080

TOTAL AMOUNT DUE: \$164.00

Seat Belts: **Yes** Driver Distraction: **None**
Hazardous Materials: **No** Commercial Vehicle: **No** Accident Involved: **No**

Officer: **A. CARPENTER** Officer-IBM: **9710** Agency: **DNRP-ENVIRONMENTAL CRIMES**

Clip and Return this portion with your payment
Ticket Instructions, go to <http://deljis.delaware.gov/eticketinstructions.shtml>
To Pay On-Line, go to <http://COURTPAY.DELAWARE.GOV>
NOTE: Include the ".GOV" when entering the above website into browser for official "welcome to ePayment" Service.

DATE OF INFRACTION: **9/3/2024** TICKET NO.: **T972400138** AGENCY: **97**

NAME: **DAVID A VAZQUEZ**

TOTAL AMOUNT DUE: \$ **164.00** DUE DATE: **10/3/2024**

MC: _____ VISA: _____ DISCOVER: _____ CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____ CARD VERIFICATION CODE: _____
(3 digits on back of card):

CARDHOLDER NAME (Print): _____

CARDHOLDER ADDRESS (Print): _____

CARDHOLDER SIGNATURE: _____

MAIL CHECK OR MONEY ORDER PAYMENTS TO:
State of Delaware Justice of the Peace Court, P.O. Box 7039, Dover, DE 19903-7039

MAIL CREDIT CARD PAYMENTS TO:
VOLUNTARY ASSESSMENT CENTER, P.O. BOX 7039, Dover, DE 19903

Recipient Copy

Davis, DaQuan (DNREC)

From: Georgetown Materials <georgetownmaterials@gmail.com>
Sent: Tuesday, October 1, 2024 3:35 PM
To: WHStranporters
Subject: Re: Missing Information on Delaware Solid Waste Transporter Permit Application
Attachments: Solid Waste App Page 3 of 6 .pdf; Certificate.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Good Afternoon,

Thank you so much for your email. Per your email, please see below,

- Section 7- Please select Dry waste in the waste types section. - *Page 3 attached, with Dry Waste selected.*
- Section 10- The Certificate of Insurance that you submitted was not for Georgetown Materials LLC. Please provide one that is. - *My apologies, the correct one is attached.*
- Section 13- Please provide the temporary license plate number and expiration date. Also provide all lease agreements. - *The temp tag # is XF446380, expires 10/30/2024*

Thank you!
Jennifer Bell
Co-Owner
Georgetown Materials LLC
355 S. Railroad Ave.
Georgetown, DE 19958
302-856-8300 - Call or Text

GOT RUBBLE?

Accepting concrete and asphalt rubble. Recycled crushed concrete, aggregate stone, rock salt, and top soil available!

On Thu, Sep 26, 2024 at 3:36 PM WHStranporters <WHStranporters@delaware.gov> wrote:

Hi Ms. Bell,

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

- Section 7- Please select Dry waste in the waste types section.
- Section 10- The Certificate of Insurance that you submitted was not for Georgetown Materials LLC. Please provide one that is.
- Section 13- Please provide the temporary license plate number and expiration date. Also provide all lease agreements.

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

Thank you,

DaQuan Davis



DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

☎ 302-739-9403

✉ daquan.davis@delaware.gov

📍 89 Kings Hwy SW, Dover, DE 19901

🌐 dnrec.delaware.gov





GEORMAT-01

KGARNER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/27/2024

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 The Insurance Market, Inc. P.O. Box 637 Laurel, DE 19956	CONTACT NAME: PHONE (A/C, No, Ext): (302) 875-7591	FAX (A/C, No): (302) 875-7541	
	E-MAIL ADDRESS: info@insurancechoices.com		
INSURED Georgetown Material, LLC 115 Savannah Rd Lewes, DE 19958	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Atlantic States Insurance Company		22586
	INSURER B : Donegal Mutual Insurance Company		13692
	INSURER C : Southern Insurance Company Of Virginia		26867
	INSURER D :		
	INSURER E :		
INSURER F :			

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	X COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			CPA9399134	2/1/2024	2/1/2025	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
							\$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			1000136504	2/1/2024	2/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	DED RETENTION \$						\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below			1000036734	1/17/2024	1/17/2025	PER STATUTE 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
A	Property			CPA9399134	2/1/2024	2/1/2025	SEE BELOW

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

CERTIFICATE HOLDER **CANCELLATION**

State of Delaware Department of Natural Resources and Environmental Control Division of Waste and Hazardous Substances 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 <i>Kelly L Garner</i>

5. Company locations in Delaware

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

- Attachment A
 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 A
 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) concrete & blacktop rubble
 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