

RECEIPT

DATE

10/30/24

No.

628116

RECEIVED FROM

Mitten Construction Co.

\$

350.00

Three hundred fifty and ⁰⁰/₁₀₀

DOLLARS

 FOR RENT FOR

DE-SW-0289D

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY
ORDER CREDIT
CARD

FROM

22178

TO

BY

M.M.



MITTEN CONSTRUCTION CO.

Concrete and General Construction

P.O. BOX 904 ■ 1420 E. LEBANON RD. ■ DOVER, DE 19903
PHONE: 302-697-2124 Fax: 302-697-2242 E-mail: office@mittenconstruction.net

October 18, 2024

RECEIVED

OCT 30 2024

DNREC - WHS

DNREC
Division of Waste and Hazardous Substances
Solid and Hazardous Waste Management Section
89 Kings Highway
Dover, DE 19901

RE: Delaware Solid Waste Transporter Permit Application - DE-SW-0289D
Expiration 12-31-2024

To whom it may concern:

Enclosed, please find our Delaware Solid Waste Transporter Permit Application for permit # DE-SW-289D with the current expiration date of December 31, 2024. Our new certificate of insurance will be sent directly to you from our insurance company upon the policy renewal. I have attached our current certificate of insurance.

If you have any questions or need additional information, please contact the office. Thank you.

Sincerely,
Mitten Construction Co.

Jackie M. Roberts
Sr. Vice President/ Secretary-Treasurer



RECEIVED

OCT 30 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- 289D Expiration Date 12-31-2024

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 Mitten Construction Co.

Location Address:	Mailing Address:
1420 E. Lebanon Road	PO Box 904
Dover, DE 19901	Dover, DE 19903

Contact: Jackie Roberts Title: Sr. VP

Business Phone: 302-697-2124 Fax: 302-697-2242

E-mail: office@mittenconstruction.net

24 hr Emergency Contact Phone: 302-697-2124

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: Dover State: DE Date: June 1968

- 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 _____

(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 on page 2
 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) Sandtown
 - 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# 379757 MC# _____

- N/A If N/A, please provide an explanation, on the following page, as to why you are not required to have a DOT or MC number.

10. Proof of Financial Responsibility

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

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

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

	FOR-HIRE INTERSTATE	ALL OTHERS
Residential Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Commercial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Dry Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Ash	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Infectious Waste	\$1,000,000.00 + MCS-90 <input type="checkbox"/>	\$750,000.00 + MCS-90 <input type="checkbox"/>
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Asbestos	\$1,000,000.00 + MCS-90 <input type="checkbox"/> (For Hire & Private)	\$350,000.00 <input type="checkbox"/>
Scrap Tires Only	\$350,000.00 <input type="checkbox"/>	\$350,000.00 <input 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 _____

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 _____

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 _____
 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 Jackie M Roberts Date 10-18-2024
Print Name Jackie Roberts Title Sr. VP

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



MITTEN CONSTRUCTION CO.

Concrete and General Construction

P.O. BOX 904 ■ 1420 E. LEBANON RD. ■ DOVER, DE 19903
PHONE: 302-697-2124 Fax: 302-697-2242 E-mail: office@mittenconstruction.net

#4. Company Ownership Information

b.

Wendy K. Mitten
President
P.O. Box 904, Dover, DE 19903
[REDACTED]
% Ownership: 60%

Jacqueline M. Roberts
Sr. Vice President/Secretary-Treasurer
P.O. Box 904, Dover, DE 19903
[REDACTED]
% Ownership: 20%

Eben P. Roberts
Vice President
P.O. Box 904, Dover, DE 19903
DOB: [REDACTED]
% Ownership: 20%



MITTEN CONSTRUCTION CO.

Concrete and General Construction

P.O. BOX 904 ■ 1420 E. LEBANON RD. ■ DOVER, DE 19903
PHONE: 302-697-2124 Fax: 302-697-2242 E-mail: office@mittenconstruction.net

DE-2022-000000227

11. 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). Broom and Shovel
 - 7). Hard Hat
 - 8). Heavy Duty Trash Bags
- (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). Vehicle Inspection Report Check List
 - 2). Pre-Trip inspections in compliance with the Federal Motor Carrier Regulations
- (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: Eben Roberts Phone: 302-697-2124
- (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.)
- (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.



MITTEN CONSTRUCTION CO.

Concrete and General Construction

P.O. BOX 904 ■ 1420 E. LEBANON RD. ■ DOVER, DE 19903
PHONE: 302-697-2124 Fax: 302-697-2242 E-mail: office@mittenconstruction.net

#12 – Driver Training

- All drivers must carry a current CDL License and have passed all licensing tests. Driving records are checked semi-annually by Mitten Construction Co.
- Safety meetings are held bi-monthly by the foreman.
- Our insurance carrier monitors employee records randomly and advises if any driver has too many violations. Mitten Construction revokes driving privileges until approved by the insurance company.
- All current drivers pass commercial drivers medical physical and drug test.
- All drivers have knowledge of the proper handling procedures for the type of dry waste that we occasionally transport.
- All vehicles must carry a copy of the spill control policy, current DE Solid Waste Permit, and all safety equipment.

Void <input type="checkbox"/>		a Employee's social security number [REDACTED]		Copy D — For Employer OMB No. 1545-0008				
b Employer identification number (EIN) 51-0107337			1 Wages, tips, other compensation [REDACTED] 2		2 Federal income tax withheld [REDACTED] 0			
c Employer's name, address, and ZIP code MITTEN CONSTRUCTION CO. 1420 E LEBANON RD DOVER DE 19901-5833			3 Social security wages [REDACTED]		4 Social security tax withheld [REDACTED]			
			5 Medicare wages and tips [REDACTED] 2		6 Medicare tax withheld [REDACTED]			
			7 Social security tips		8 Allocated tips			
d Control number			9 [REDACTED]		10 Dependent care benefits			
e Employee's name, address, and ZIP code VICTOR C ELZEY III [REDACTED]			11 Nonqualified plans			12a See instructions for box 12 [REDACTED]		
			13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>			12b [REDACTED]		
			14 Other			12c [REDACTED]		
						12d [REDACTED]		
15 State Employer's state ID number DE 1-510107337-001		16 State wages, tips, etc. [REDACTED] 2	17 State income tax [REDACTED]	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Void <input type="checkbox"/>		a Employee's social security number ██████████		Copy D – For Employer OMB No. 1545-0008			
b Employer identification number (EIN) 51-0107337			1 Wages, tips, other compensation ██████████0		2 Federal income tax withheld ██████████		
c Employer's name, address, and ZIP code MITTEN CONSTRUCTION CO. 1420 E LEBANON RD DOVER DE 19901-5833			3 Social security wages ██████████0		4 Social security tax withheld ██████████		
			5 Medicare wages and tips ██████████0		6 Medicare tax withheld ██████████		
			7 Social security tips ██████████		8 Allocated tips ██████████		
d Control number ██████████			9 ██████████		10 Dependent care benefits ██████████		
e Employee's name, address, and ZIP code EBEN P ROBERTS ██████████			11 Nonqualified plans ██████████		12a See instructions for box 12 : :		
			13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b : :		
			14 Other ██████████		12c : :		
			██████████		12d : :		
15 State Employer's state ID number DE 1-510107337-001		16 State wages, tips, etc. ██████████0	17 State income tax ██████████3	18 Local wages, tips, etc. ██████████		19 Local income tax ██████████	20 Locality name ██████████

Davis, DaQuan (DNREC)

From: Mitten Construction <office@mittenconstruction.net>
Sent: Wednesday, October 30, 2024 2:49 PM
To: WHStranporters
Subject: Re: Delaware Solid Waste Transporter Permit Application

Section 8 - We only dump in Sandtown.

Section 9(b) - No, we do not have transporter permits in other states.

Section 14 - Yes, the W-2's currently represent all of our drivers that will be using the DSWA facility.

If you have any questions or need additional information, please contact the office. Thank you!

Sincerely,
Jackie M. Roberts
Sr. Vice President

Mitten Construction Co.
P.O. Box 904
Dover, DE 19903

PH: (302) 697-2124
FAX: (302) 697-2242

From: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> on behalf of WHStranporters <WHStranporters@delaware.gov>
Sent: Wednesday, October 30, 2024 1:57 PM
To: Mitten Construction <office@mittenconstruction.net>
Subject: Delaware Solid Waste Transporter Permit Application

Hi Ms. Roberts,

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 8- Does Mitten Construction Co. only dump at the Delaware Solid Waste Authority (DSWA) locations like Sandtown?
- Section 9(b)- Do you have other state solid waste permits?
- Section 14- Do the W-2s represent all drivers for Mitten Construction Co.? If not, please provide a list of all drivers.

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

