

RECEIPT

DATE 10/5/24No. 628102RECEIVED FROM Ed's Hauling Co. LLC\$ 350.00Three hundred fifty and $\frac{00}{100}$ DOLLARS FOR RENT FOR DE-SW-1945

ACCOUNT	
PAYMENT	
BAL. DUE	

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM 29508733361 TO _____BY M/M



RECEIVED

OCT 15 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

Language Preference:

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- 1945 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

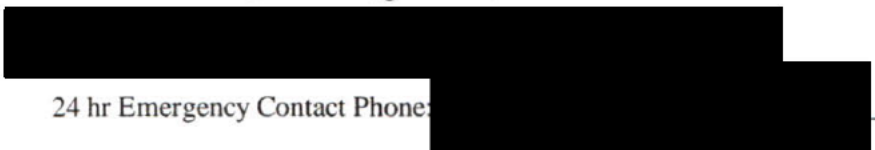
3. Company Information

Company Name Ed's Hauling Co. LLC

Location Address:	Mailing Address:
<u>2150 Old Kirkwood Rd</u>	<u>2150 Old Kirkwood Rd</u>
<u>Bear, DE 19701</u>	<u>Bear, DE 19701</u>

Contact: Eduardo Garcia Rojas Title: Owner / Operator

Business Phone: 302-983-9103 Fax: _____



24 hr Emergency Contact Phone: _____

4. Company Ownership Information

- (a). Please indicate the company type:
- Proprietorship
 - Partnership
 - Corporation - If company is a corporation, indicate city, state, and date of incorporation.
City: _____ State: _____ Date: _____
 - 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 _____
 No Delaware locations

6. Company Affiliates

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

- Attachment _____
 No affiliates

7. Type of Waste to be Transported

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

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

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

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

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

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

8. Treatment, Storage, and Disposal Facilities

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

9. Other Transporter Permits

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

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

- Attachment _____
- No transporter permits in other states

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

DOT# 3574226 MC# 1230553

- 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 checked="" 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 _____ Date 10-10-24

Print Name Eduardo Garcia-Bojas Title Owner/operator

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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/10/2024

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).

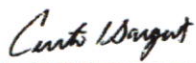
PRODUCER Smalls Insurance Agency, Inc. 5227 W. Woodmill Drive, Suite 43 Wilmington DE 19808		CONTACT NAME: CURTIS L SARGENT SR PHONE (A/C, No., Ext): (302) 633-1980 FAX (A/C, No.): (302) 633-1986 E-MAIL ADDRESS: CURTIS@smallsinsuranceagency.com	
		INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: NATIONAL INDEMNITY	20087
INSURED Ed's Hauling Company LLC 2150 Old Kirkwood Rd Bear DE 19701		INSURER B: UNITED STATE LIABILITY	25895
		INSURER C:	
		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
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			GL1258478	08/01/2024	08/01/2025	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 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			70TRS131387	08/05/2024	08/05/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	MOTOR CARGO			70TRS131387	08/05/2024	08/05/2025	CARGO \$100,000

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

CERTIFICATE HOLDER DIVISION OF WASTE AND HAZARDOUS SUBSTANCE 89 KINGS HIGHWAY SW DOVER DE 19901	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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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).
- (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).
 - 2).
- (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 person:
Name: M. A. B. Garcia Phone: 
Pro Des
- (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:
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.

Eduardo Garcia-Rojas

2150 Old Kirkwood Rd

Bear, DE. 19701

OWNER - 100%

We dump at

Clean Earth in New Castle, De
and, Philadelphia, PA

I am the only driver

Davis, DaQuan (DNREC)

From: Michelle Brown <michellebr2@gmail.com>
Sent: Wednesday, November 6, 2024 3:54 PM
To: WHStranporters
Subject: Re: Scanned document from HP ePrint user
Attachments: image001.png

Milling and dirt

On Wed, Nov 6, 2024, 3:10 PM WHStranporters <WHStranporters@delaware.gov> wrote:

What else do you transport besides waste?



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



From: Michelle Brown <michellebr2@gmail.com>
Sent: Wednesday, November 6, 2024 2:36 PM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Re: Scanned document from HP ePrint user

No, we do not.

On Wed, Nov 6, 2024, 11:44 AM WHStranporters <WHStranporters@delaware.gov> wrote:

Do you only transport Waste?

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](https://www.delaware.gov/89-Kings-Hwy-SW-Dover-DE-19901)

dnrec.delaware.gov

From: Michelle Brown <michellebr2@gmail.com>
Sent: Wednesday, November 6, 2024 9:25 AM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Fwd: Scanned document from HP ePrint user

Ed's Hauling Co. LLC

----- Forwarded message -----

From: <eprintcenter@hp8.us>
Date: Wed, Nov 6, 2024 at 9:19 AM
Subject: Scanned document from HP ePrint user
To: <michellebr2@gmail.com>

This email and attachment are sent on behalf of michellebr2@gmail.com.

If you do not want to receive this email in future, you may contact michellebr2@gmail.com directly or you may consult your email application for spam or junk email filtering options.

Regards,
HP Team

Davis, DaQuan (DNREC)

From: Davis, DaQuan (DNREC) on behalf of WHStranporters
Sent: Thursday, October 24, 2024 2:06 PM
To: michellebr2@gmail.com
Subject: RE: Missing Information Delaware Solid Waste Transporter Permit Application

Categories: Egress Switch: Unprotected

Please address the items listed below:

- Section 9(b)- Do you have any other state solid waste permits? Why don't you need a PA solid waste transporter permit?
- Section 9(c)- Carrier VMT outdated which means the DOT # and MC # is invalid. Please get in touch with FMCSA for an update.
- Section 10- *For-hire* means transporting passengers, regulated property, or household goods owned by others for compensation. Do you transport any of the following? If so, please provide an MCS-90 endorsement form.
- Section 11- The spill control plan is missing the pre-inspections on it. Please update your plan.
- Section 12- You did not provide your driver experience. Please review section 12 of the application and provide a statement on your years of driving and driver record.

Please provide the information requested above via e-mail within five (5) days (10/29/24).

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



From: Davis, DaQuan (DNREC) **On Behalf Of** WHStranporters
Sent: Tuesday, October 22, 2024 12:15 PM
To: 'michellebr2@gmail.com' <michellebr2@gmail.com>
Subject: RE: Missing Information Delaware Solid Waste Transporter Permit Application

The mileage needs to be updated to its dated in 2021.

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



From: Davis, DaQuan (DNREC) **On Behalf Of** WHStranporters

Sent: Wednesday, October 16, 2024 9:27 AM

To: 'michellebr2@gmail.com' <michellebr2@gmail.com>

Subject: Missing Information Delaware Solid Waste Transporter Permit Application

Hi Mr. Gracia-Rojas,

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 9(b)- Do you have any other state solid waste permits? Why don't you need a PA solid waste transporter permit?
- Section 9(c)- Carrier VMT outdated which means the DOT # and MC # is invalid. Please get in touch with FMCSA for an update.
- Section 10- *For-hire* means transporting passengers, regulated property, or household goods owned by others for compensation. Do you transport any of the following? If so, please provide an MCS-90 endorsement form.
- Section 11- The spill control plan is missing the pre-inspections on it. Please update your plan.
- Section 12- You did not provide your driver experience. Please review section 12 of the application and provide a statement on your years of driving and driver record.

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



USDOT INFORMATION

Entity Type: CARRIER

USDOT Status: ACTIVE

Out of Service Date: None

USDOT Number: 3574226

State Carrier ID Number:

MCS-150 Form Date: 11/04/2024

MCS-150 Mileage (Year): 10,000 (2023)

OPERATING AUTHORITY INFORMATION

Operating Authority Status: AUTHORIZED FOR Property

For Licensing and Insurance details [click here](#).

MC/MX/FF Number(s): MC-1230553

COMPANY INFORMATION

Legal Name: ED'S HAULING COMPANY LLC

DBA Name:

Physical Address: 2150 OLD KIRKWOOD RD
BEAR, DE 19701-2249

Phone: (302) 983-9103

Mailing Address: 2150 OLD KIRKWOOD RD
BEAR, DE 19701-2249

DUNS Number: --

Power Units: 1

Drivers: 1

Classification:

- | | | |
|--|----------------------------|---------------|
| <input checked="" type="checkbox"/> Auth. For Hire | Priv. Pass. (Non-business) | State Gov't |
| Exempt For Hire | Migrant | Local Gov't |
| Private (Property) | U.S. Mail | Indian Nation |
| Priv. Pass. (Business) | Fed. Gov't | |

Operation:

- | | | |
|--|----------------------|--------------------------|
| <input checked="" type="checkbox"/> Interstate | Intrastate Only (HM) | Intrastate Only (Non-HM) |
|--|----------------------|--------------------------|

Commodities:

- | | | |
|--|--------------------|--|
| General Freight | Liquids/Gases | Chemicals |
| Household Goods | Intermodal Cont. | <input checked="" type="checkbox"/> Commodities Dry Bulk |
| Metal. sheets, coils, rolls | Passengers | Refrigerated Food |
| Motor Vehicles | Oilfield Equipment | Beverages |
| Drive/Tow away | Livestock | Paper Products |
| Logs, Poles, Beams, Lumber | Grain, Feed, Hay | Utilities |
| <input checked="" type="checkbox"/> Building Materials | Coal/Coke | Agricultural/Farm Supplies |
| Mobile Homes | | |

9. b

We don't dump in Pa

10. a

We don't transfer for other companies

11. Everyday Eduardo checks the brakes, lights, steering, tires, cab wheels/tires, mirrors, fuel system, oil, anti freeze and wind shield. He also makes sure that there are no leaks under the truck

12. Eduardo Garcia Rojas has been driving the dump truck for over 3 years. He has a clean driving record