

RECEIPT

DATE 11/15/24

No. 628136

RECEIVED FROM David Geppert Recycling, Inc.

\$ 1550.00

One thousand five hundred fifty and ⁰⁰/₁₀₀ DOLLARS

FOR RENT

FOR DE-SW-1845

ACCOUNT	
PAYMENT	
BAL. DUE	

CASH

CHECK

MONEY ORDER

CREDIT CARD

FROM 18945 TO _____

BY M.M.



RECEIVED

NOV 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- 1845 Expiration Date 9/30/24

Please indicate the term for which you desire your permit to be issued. Submit a check or money order, payable to the “State of Delaware,” for the indicated permit fee.

SCRAP TIRES ONLY

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

ALL OTHERS

- 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 David Geppert Recycling, Inc.

Location Address:	Mailing Address:
4000 Pulaski Ave	2692 Woodstream Drive
Philadelphia PA 19140	Hatfield PA 19440

Contact: Joe Rispo Title: Operations Mgr

Business Phone: 2158420122 Fax: _____

E-mail: joe@geppertrecycling.com

24 hr Emergency Contact Phone: 215-842-0122

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: Philadelphia State: PA Date: 7/1995

- 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 _____ David A Geppert, Sr - President
2692 Woodstream Drive, Hatfield PA 19440
[REDACTED] -- 100% Ownershop

(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) ^A _____
 - Out of state solid waste TSD facilities: (attachment) ^A _____

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 ^B _____
 - 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# 632983 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.

MC not required in PA

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 D

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 A

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 Donna Geppert Date 11-6-2024
Print Name Donna Geppert Title Treasurer

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

SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

- (1) Spill control and safety equipment carried in each vehicle:
- | | |
|-----------------------------------|---------------------------|
| 1). Reflectors and/or flares | 7). Dust pan/brush |
| 2). Fire extinguisher | 8). Small waste container |
| 3). First aid kit | |
| 4). Heavy-duty gloves, hard hat | |
| 5). Flashlight | |
| 6). Absorbent material for spills | |
- (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). Attached Daily inspection form
 - 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 company coordinator:
- | | |
|-----------------|---------------------|
| Name: Joe Rispo | Phone: 215-842-0122 |
|-----------------|---------------------|
- (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.)*
- PA: 911, 484-250-5900
- (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.

Geppert Recycling - Attachment A

8b -

In Delaware state Revolution Recovery - 1101 Lambson Ln New Castle DE 19720
Out of Delaware
 Delaware Valley Recycling - 3107 S 61st St Philadelphia PA 19153
 Envirowaste - 13 Pattison Ave Philadelphia PA 19148
 David Geppert Recycling, Inc. - 4000 Pulaski Ave Philadelphia PA 19140

12a -

Special Licensing:
 CDL class A & B
 Air Brakes Endorsement
 Company Programs: - Monthly safety meeting with owner, dispatcher, and drivers

12b-

All drivers are required to report any changes to driving record as soon as they occur. MVR is ran twice a year at insurance renewal. Discipline is handed out on a case-to-case basis, and a driver may lose driving privileges with our company if deemed necessary.

12c-

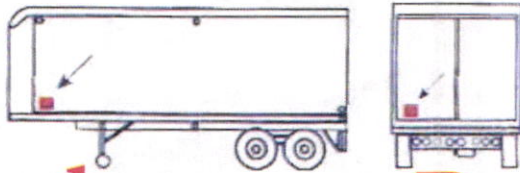
(i) Before starting employment with us, all drivers were trained by the owner on how to properly handle solid waste materials. This includes the owner going on the driver's routes for up to a week with a new driver to ensure he/she knows how to properly handle solid waste materials we may encounter.

(ii) Drivers carry a copy of the Spill Control Plan with their daily logbook. IF changes are ever made, the driver receives a new copy to keep in their logbook.

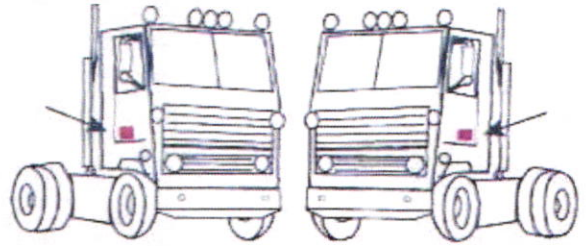
(iii) At the start of employment, drivers are given a copy of the states in which we hold solid waste transporter's permits. Drivers study the permit to know the conditions and periodically throughout the year during driver safety meetings,

Vehicle operators -
David A Geppert SR
David A Geppert JR
Ernie Mercado
Jose Antonio Morales
Josue Gonzalez-Rivera
Martin Matos

Waste Trailers



Trucks and Truck Tractors



Apply stickers to a clean, dry surface. It may take 24 hours for adhesive to each full tack. Do not remove stickers once they are applied.

Attachment B



COMMONWEALTH OF PENNSYLVANIA Waste Transportation Safety Program Written Authorization

0295251531

Phone No. (267) 263-4566

VIN# 1NPCL40X5RD667153
WH0295
Expires Aug 2025

DAVID GEPPERT RECYCLING, INC.
DONNA GEPPERT
2692 WOODSTREAM DR
HATFIELD, PA 19440-1940

THIS WRITTEN AUTHORIZATION MUST BE KEPT WITH THE WASTE TRANSPORTATION VEHICLE AT ALL TIMES
If lost or damaged contact DEP immediately at 717-763-6206.
A replacement fee is required.
Duplication or Photocopies of this original documentation are not valid.

CAUTION! REMOVE STICKERS CAREFULLY.

Applied stickers take 24 hours to reach full tack



DEP-5226

APPLICATION INSTRUCTIONS

1. Clean Surface To Which Sticker Will be Applied of Dirt, Grease or Oily Substances.
2. Remove Sticker From Carrier Sheet
3. Position Sticker, Then Press Firmly Until Tightly Affixed To Surface.



DEP-5226

0295251531





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/07/2024

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 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: Hatfield Group LLC, 311 Summeytown Pike, Suite 1F, North Wales, PA 19454. CONTACT NAME: Dave S, PHONE: (215)699-6671, FAX: (215)699-5509, E-MAIL ADDRESS: davids@hatfield-group.com. INSURER(S) AFFORDING COVERAGE: ICW Insurance Group (NAIC # 27847), Underwriters At Lloyds (A1122000), Lancer Insurance Co. (26077).

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL SUBR INSD, WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation and Employers' Liability, Site Pollution Cov, and Transport Pollution Cov.

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

CERTIFICATE HOLDER CANCELLATION AI 101520

Certificate holder: State of Delaware, Dept of Natural Resources & Environmental Control, Division of Waste and Hazardous Substances, Management Section, 89 Kings Highway, Dover, DE 19901. Cancellation notice: 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: [Signature]

Fax: () -

Pre Trip Inspection

**DAVID GEPPERT RECYCLING
DRIVER'S DAILY VEHICLE INSPECTION REPORT**

DRIVER'S NAME _____ DATE: _____

TRUCK/TRACTOR NO. _____ ODOMETER: _____

TRAILER NO. _____

	EXPLAIN DEFECTS IN DETAIL
	ENGINE
	STEERING
	HORN
	WIPERS
	MIRRORS
	TIRES
	BRAKES
	COUPLING DEVICES
	HEADLIGHTS
	TURN SIGNALS REAR
	TURN SIGNALS FRONT
	OTHER LIGHTS

Condition of above Vehicle is satisfactory. _____ Driver's Signature

Above defects corrected.

Above defects need not be corrected for safe operation of vehicle.

Mechanic's Signature Date

I Certify that I am satisfied that this vehicle is in safe operating condition and I have reviewed the last Vehicle Inspection Report and verified that required repairs have been completed.

Driver's Signature Date

Davis, DaQuan (DNREC)

From: Joe Rispo <joe@geppertrecycling.com>
Sent: Friday, November 15, 2024 2:37 PM
To: WHStransporters
Subject: Re: Delaware Solid Waste Transporter Permit Application

No - we do not transport passengers or goods owned by others.

Regards,

Joe Rispo
Operations Manager



Philadelphia Office - 4000 Pulaski Avenue - Philadelphia PA 19140
Office 215-842-0122 - Cell 215-622-1857 - Fax 267-324-3452

PA Waste Hauler Permit WH0295
Philadelphia Commercial Activity License 098383

On Nov 15, 2024, at 2:36 PM, WHStransporters <WHStransporters@delaware.gov> wrote:

Hi Mr. Geppert,

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 item listed below:

- **Section 10- For-hire** means you're in the business of transporting passengers, regulated property, or household goods owned by others for compensation. Do you transport any of the following? If so, please provide a **motor carrier number (mc #)** and an **MCS-90 endorsement form**.

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

Thank you,

<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>