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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- 2029 Expiration Date 12/3424 ?

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

Given 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

Solid Waste Transporter Application Page 2 of 6

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? \square Yes \square No

3. Company Information

3. Company information	
Company Name Angelini's Lar	d Manage Sent
Location Address:	Mailing Address:
152 Oldbary Dr	
Wilminston DE	-)
19808	
Contact: Antonio Ti	tle: Uwner
Business Phone: 302 354 9145 Fa	ax:
E-mail: Antonio @ Augelinislandma	assement. Com
24 hr Emergency Contact Phone:	
4. Company Ownership Information	
 (a). Please indicate the company type: Proprietorship Partnership Corporation - If company is a corporation 	tion, indicate city, state, and date of incorporation.
City: St Municipality / Public institution Limited Liability Corporation (LLC) S Other: (must specify)	ate: Date:
	officer, attach a list with name, title, mailing address, Il stockholders owning greater than 5% outstanding
Attachment	
(c). If company is owned by or affiliated with address & mailing address, and % owners	a parent company, attach parent company name, hip.
Attachment	

No parent company

Solid Waste Transporter Application Page 3 of 6

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	
\Box 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? \Box Yes
- (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.)

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

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

MC# 4437032240 DOT# 3766930

□ 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.) AA Yes
- (b). Do you transport in the State of Delaware Only (Intrastate)?

(c). Do vou transport Interstate?

Solid Waste Transporter Application Page 5 of 6

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

	FOR-HIRE INTERSTATE	ALL OTHERS
Residential Waste	\$750,000.00 + MCS-90 🗖	\$350,000.00
Commercial Waste	\$750,000.00 + MCS-90	\$350,000.00
Industrial Waste	\$750,000.00 + MCS-90	\$350,000.00
Dry Waste	\$750,000.00 + MCS-90 🔽	\$350,000.00
Ash	\$750,000.00 + MCS-90	\$350,000.00
Infectious Waste	\$1,000,000.00 + MCS-90	\$750,000.00 + MCS-90 🗖
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MCS-90	\$350,000.00
Asbestos	\$1,000,000.00 + MCS-90 (For Hire & Private)	\$350,000.00
Scrap Tires Only	\$350,000.00	\$350,000.00

11. Spill Control and Safety

List all spill control and safety equipment which will be carried on each vehicle. (Note: Separate lists by type of vehicle and type of waste may be required.) Attach a copy of the Spill Control Plan. The Spill Control Plan **must** contain the following elements: (1) List of safety and spill control equipment carried in the vehicle, (2) Driver preventive measures, (3) Driver immediate corrective actions, (4) Company internal communications, (5) Company external communications including the **Delaware Emergency Reporting Numbers: 1-800-662-8802 and 302-739-9401**, and (6) Cleanup and decontamination measures.

Spill Control Plan: Attachment

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.

Uvehicle 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

T 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_	angel	Date 11/2/24
Print Name Anguit	Angelini	Title USARP

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

Vehicle Coverage and Endorsements

Vehicle #1

Vehicle Description	2012 Dodge Truck Ram 5500	O Cc	VIN Number	3C7WDNDL4CG188380			
Cost New	4x4 \$46000		Gross Vehicle Weigh				
oust new	\$10000		Gross venicle weigh	10,001 - 20,000 103			
Garaged at Location							
162 Old Bury Dr. Wilmington, DE 19808		1 1 14		Deductible			
		Limit c	of Insurance	Deductible			
Liability							
Combined Single Limi	t	\$1,000	,000				
Personal Injury Prote		Refer to	o CA 22 08 11 16				
Uninsured Motorist – Combined Single Limi		\$100,0	00				
Comprehensive Full Glass Coverage				\$2,500			
Collision				\$2,500			
Rental Reimbursemer	nt	Rejecte	ed				
Towing And Labor		\$1000					
Vehicle #2							
Vehicle Description Cost New	2005 Mack Cv713 \$69979		VIN Number	1M2AG10C75M023240			
COSTNEW	403313		Gross Vehicle Weight	d Greater than 45,000 lbs			
Garaged at Location							
162 Old Bury Dr. Wilmington, DE 19808							
		Limit o	f Insurance	Deductible			
Liability							
Combined Single Limi	t	\$1,000,000					
Personal injury Protect	tion Redit: Inium	Refer to CA 22 08 11 16					
Uninsured Motorist – Combined Single Limi	Boally Injury t	\$100,000					

Antonio Angelini Owner 100%

162 oldbury dr wilmington de 19808

List of Safety and Spill Control Equipment:

• Ensure the vehicle is equipped with the necessary spill control equipment, such as a tarp, spill kits, absorbent materials, and personal protective gear.

Driver Preventive Measures:

 Provide clear guidelines for drivers on spill prevention, including safe handling of hazardous materials, proper storage, and transport procedures. Drivers will check all sides of the truck to make sure all debris is secured within the truck before driving

Driver Immediate Corrective Actions:

• Outline step-by-step actions drivers should take in the event of a spill, including containment, isolation, and initial cleanup procedures.

Company Internal Communications:

 Detail the internal reporting structure within the company, specifying whom the driver should contact within the organization in case of a spill, such as supervisors or safety officers.

Company External Communications:

 Specify the procedures for contacting external authorities, including the Delaware Emergency Reporting Numbers: 1-800-662-8802 and 302-739-9401. Include information on what to report and who to speak with in the event of a spill.

Cleanup and Decontamination Measures:

 Provide guidance on the proper cleanup and decontamination procedures to minimize environmental impact and ensure the safety of personnel involved.

Make sure that each of these elements is well-documented and easily accessible to drivers and relevant personnel. Regular training and drills should be conducted to ensure that everyone knows how to implement the spill control plan effectively.

Ensuring the safety and competence of company drivers is a top priority as well as looking out for others on the road. Our approach to driver competency includes a combination of factors:

(a) Licensing and Training: All of our drivers are required to possess the appropriate driver's license for the type of vehicles they operate, including any necessary endorsements such as a Commercial Driver's License (CDL) or hazardous materials endorsement. Additionally, drivers receive specialized training in areas relevant to their responsibilities, such as hazardous materials handling, which includes asbestos training when applicable. We maintain records of when this training is provided and require periodic refresher courses to ensure that our drivers remain up-to-date with the latest safety protocols.

(b) Monitoring Driving Records: Our company conducts regular checks of drivers' records for moving violations and accidents. Drivers with excessive points on their records are subject to progressive counseling and discipline as per our established policy. We believe that monitoring and addressing driving infractions promptly is crucial to maintaining a safe fleet.

(c) Instruction and Familiarization:

- (i) Proper Handling Procedures: Drivers receive thorough instruction in the proper handling procedures for the specific type of solid waste they transport. This includes loading and securing waste, following safety guidelines, and understanding the potential hazards associated with different waste materials.
- (ii) Accidental Discharge Containment (Spill Control Plan): Each driver is trained in and familiarized with our approved accidental discharge containment plan, also known as the Spill Control Plan. They understand the steps to take in the event of a spill or discharge to minimize environmental impact and ensure their safety.
- (iii) Solid Waste Transporter's Permit: Our drivers are well-versed in the conditions of the solid waste transporter's permit. They understand the legal and regulatory requirements associated with transporting waste and adhere to them diligently.

For the owner-operators with extensive experience and a clean driving record, we may consider their years of safe driving as evidence of competency, although we encourage ongoing training and safety awareness for all drivers. Overall, our commitment to driver safety extends beyond just legal requirements, as we believe that well-trained and competent drivers are essential to our company's success and reputation for safety and responsibility.

Individual Account Truck List

(((TrucksDefaultFields.DefaultName_LIKE 'VT%') AND (Trucks.Inactive = 0) AND (Trucks.BillAcct_LIKE '000569%')))

BillAcct BillCompany	Truck	VehYear VehCold	r Make	DefaultValueInbo	Tag	State	Tag2
000569 Angelini's Land Management	0569001	2012 White	Dodge	16 - Roll-off	C112903	DE	79 7147
000569 Angelini's Land Management	0569002	2005 White	Mack	5 - Dump Truck	C131512	DE	79 7148

89 Kings Huy Dour DE 19901

DW AS

Davis, DaQuan (DNREC)

From:	antonio angelini <antonioangelini2017@gmail.com></antonioangelini2017@gmail.com>
Sent:	Monday, November 25, 2024 6:21 PM
То:	WHStransporters
Subject:	Re: Delaware Solid Waste Transporter Permit
Attachments:	spill control plan.pdf; truckl list for dswa - Sheet1.pdf; Driver list for dswa - Sheet1.pdf; Angelini's Land Management - COI - Department of Natural Resources.pdf

Section 5 - Yes that's the location

Section 8- Only place I go to dump the trash is Cherry Island. Other than that I have no storage/disposal facitties Section 10 - We are intrastate as per our dot # but for trash purposes we are interstate 10/11/13/14 in attachments

On Thu, Nov 21, 2024 at 3:29 PM WHStransporters <<u>WHStransporters@delaware.gov</u>> wrote:

Hi Mr. Angelini,

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 5- Is 162 Oldbury, Wilmington, DE 19808 Angelini's only DE business location?
- Section 8- Please provide a list of Angelini's Transfer Storage and Disposal Facilities.
- Section 10- is Angelini's Interstate or intrastate?
- Section 10- You did not submit a certificate of insurance. Please provide this form and ensure you have the correct amount of automobile liability insurance and add the Department of Natural Resources and Environmental Control address in the Certificate Holder section the address is 89 Kings HWY, Dover, DE 19901.
- Section 11- The spill control plan is missing an emergency contact (name and phone number). Please update this
 plan and add the contact information.
- Section 13- The vehicle list is missing the Vin#, manufacturer's GVWR, and model. Please update your list and add this information.
- Section 14-You did not provide a list of vehicle operators, please provide this.

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

Thank you,



DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

- 2 302-739-9403
- daquan.davis@delaware.gov
- 9 89 Kings Hwy SW, Dover, DE 19901
- dnrec.delaware.gov



					an at warman	3c7wdndl4cg18	8 - C - C - C - C - C - C - C - C - C -		
 1	Straight Trucks	2012	dodge ram	5500	19,500	8380	c112903	DE	Owned
						1M2AG10c75m			
13	Straight Trucks	2005	Mack	granite	73280	023240	c131512	DE	Owned



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

	CERTIFICATE OF LIA	BILITY INSURANCE		11/25/2024					
	AS A MATTER OF INFORMATION ONLY								
	RMATIVELY OR NEGATIVELY AMEND, E								
	BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.								
If SUBROGATION IS WAIVED, 9	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		NAME: ANDREW VOSS							
Stracar Insurance Group		PHONE (A/C, No, Ext): (302) 854-9760	FAX (A/C, No):	302-854-9762					
PO Box 797		ADDRESS: andrewvoss@comcast.net							
		INSURER(S) AFFORDING C	OVERAGE	NAIC #					
Middletown	DE 19709	INSURER A: SCOTTSDALE INDEMNITY	COMPANY	15580					

		INSURER(S) AFFORDING COVERAGE	NAIC #
Middletown	DE 19709	INSURER A: SCOTTSDALE INDEMNITY COMPANY	15580
INSURED		INSURER B : MIDVALE IND CO	27138M
Angelini's Land Management LLC		INSURER C :	
162 OLDBURY DR		INSURER D :	
		INSURER E :	
WILMINGTON	DE 19808-1435	INSURER F :	

CERTIFICATE NUMBER: COVERAGES

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
THIS IS TO CERTIFY	Y THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE E	BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD
INDICATED. NOTW	ITHSTANDING 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 B	Y THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,
EXCLUSIONS AND	CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE E	BEEN REDUCED BY PAID CLAIMS.
INSR	ADDLISUBRI	

LTR		TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S
	×	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	s 1,000,000
		CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence)	s 100,000
								MED EXP (Any one person)	s 5,000
A			Y	Y	CPI7217496	04/01/2024	04/01/2025	PERSONAL & ADV INJURY	s 1,000,000
	POLICY J	LAGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	s 2,000,000
		POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	s 2,000,000
		OTHER:							S
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
		ANY AUTO						BODILY INJURY (Per person)	S
В		OWNED AUTOS ONLY X SCHEDULED Y	Y		CA00026893	04/24/2024	04/24/2025	BODILY INJURY (Per accident)	S
		AUTOS ONLY AUTOS ONLY						PROPERTY DAMAGE (Per accident)	S
	×	19							S
		UMBRELLA LIAB OCCUR						EACH OCCURRENCE	S
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	S
		DED RETENTION \$							S
		EXERS COMPENSATION EMPLOYERS' LIABILITY						STATUTE ER	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	S
	OFFICER/MEMBER EXCLUDED?							E.L. DISEASE - EA EMPLOYEE	S
	DES	, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	S
DEC	DIDT	ION OF OPERATIONS / LOCATIONS / VEHIC	I FC	ACOD	D 404 Additional Demarks Cabadula man	ha attached if		(in al)	

nay be attached if more space is required)

- Blanket additional insured and waiver of subrogation apply to General Liability when required by written contract.

- Blanket additional insured applies to Commerical Auto when required by written contract.

CERTIFICATE HOLDER	CANCELLATION			
Department of Natural Resources and Environmental Control	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
89 Kings Hwy	AUTHORIZED REPRESENTATIVE			
Dover DE 19901	Andrew Vozs			

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Driver First Name	Driver Last Name	Date of Birth (MM/DD/YYYY)	License #	License State	CDL (Y/N)	Phone Number	Date of Hire (MM/DD/YYYY)	Date of Termination (MM/DD/YYYY)
Antonio	Angelini	7		DE	Yes	3023549145	01/01/23	

List of Safety and Spill Control Equipment:

• Ensure the vehicle is equipped with the necessary spill control equipment, such as a tarp, spill kits, absorbent materials, and personal protective gear.

Driver Preventive Measures:

• Provide clear guidelines for drivers on spill prevention, including safe handling of hazardous materials, proper storage, and transport procedures. Drivers will check all sides of the truck to make sure all debris is secured within the truck before driving

Driver Immediate Corrective Actions:

• Outline step-by-step actions drivers should take in the event of a spill, including containment, isolation, and initial cleanup procedures.

Company Internal Communications:

• Detail the internal reporting structure within the company, specifying whom the driver should contact within the organization in case of a spill, such as supervisors or safety officers.

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• Specify the procedures for contacting external authorities, including the Delaware Emergency Reporting Numbers: 1-800-662-8802 and 302-739-9401. Include information on what to report and who to speak with in the event of a spill.

Cleanup and Decontamination Measures:

 Provide guidance on the proper cleanup and decontamination procedures to minimize environmental impact and ensure the safety of personnel involved.

Make sure that each of these elements is well-documented and easily accessible to drivers and relevant personnel. Regular training and drills should be conducted to ensure that everyone knows how to implement the spill control plan effectively.

Emergency Contact Antonio Angelini (302)354-9145