

RECEIPT

DATE 11/25/24No. 628148RECEIVED FROM Dean Enterprises, Inc.\$ 350.00Three hundred fifty and $\frac{00}{100}$ DOLLARS FOR RENT FOR New SW-2105 App

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY ORDER CREDIT CARDFROM 007822 TO _____BY M.M.



RECEIVED

NOV 25 2024

DNREC - WHS

STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL
DIVISION OF WASTE AND HAZARDOUS SUBSTANCES
COMPLIANCE AND PERMITTING SECTION

89 KINGS HIGHWAY
DOVER, DELAWARE 19901

TELEPHONE: (302) 739-9403
FAX: (302) 739-5060

SOLID WASTE TRANSPORTER PERMIT APPLICATION

Instructions: You must complete this application in its entirety and attach all applicable documentation. (Note: For applicants renewing an existing permit, this application requires the submission of updated information and documentation. References to material submitted under previous applications are no longer accepted.)

The application must be signed by the company owner or a corporate officer. A check or money order payable to the **“State of Delaware”** must accompany this application and be sent to:

Delaware Department of Natural Resources and Environmental Control
Compliance and Permitting Section
89 Kings Highway
Dover, DE 19901

1. Type of Permit

- New – **SCRAP TIRES ONLY** Submit a check or money order, payable to the “State of Delaware,” in the amount of \$75.00.
- New – **ALL OTHERS** Submit a check or money order, payable to the “State of Delaware” in the amount of \$350.00.
- Renewal: Permit # DE-SW- _____ Expiration Date _____

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

SCRAP TIRES ONLY

- 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 Dean Enterprises, Inc.

Location Address:	Mailing Address:
286 Chester Ave., Moorestown, NJ 08057	P.O. Box 1874, Mount Laurel, NJ 08054

Contact: Jennifer Kramer Title: VP & CFO

Business Phone: 609-268-3900 Fax: _____

E-mail: jennifer@deanenterprisesdemolition.com

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: Tabernacle State: NJ Date: 08/2002

- 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 NJ
 - 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 PA
 - No transporter permits in other states
- (c). Indicate your Federal DOT number and Motor Carrier number:
- DOT# 3020018 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 checked="" type="checkbox"/>
Commercial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input checked="" type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input checked="" type="checkbox"/>
Dry Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input checked="" 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 checked="" type="checkbox"/>
Asbestos	\$1,000,000.00 + MCS-90 <input type="checkbox"/> (For Hire & Private)	\$350,000.00 <input checked="" 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 Jennifer Kramer Date 11/20/24
Print Name Jennifer Kramer Title Vice President & CFO

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

- 4a. Dean Kramer, 100%
- 8b. List all facilities for disposal
 - Any registered landfill or transfer station in Delaware based on the jobsite location
- 9a. NJ A901 – cab card with number attached
- 9b. PA ACT 90 – cab card with number attached
- 11. Spill plan attached
- 12. Driver training program attached
- 14. Drivers attached



New Jersey Department of Environmental Protection
Vehicle Registration Unit
9 Ewing Street, Mail Code 09-01, PO Box 420
Trenton, NJ 08625-0420
(609) 292-7081 LRU@dep.nj.gov

NJDEP Transporter Vehicle Registration Card

Expiration Date: **06/30/2025**
Decal Number: **SWL-25-010847**
Vin ID#: **1XPHDB9X77D742495** NJ
License Plate #: **XMDD90**
Vehicle Type: **Cab**
Vehicle leased?: **N**
If Yes, lessor's name:

LICENSED SOLID WASTE
NJDEP Registered Transporter:

DEAN ENTERPRISES INC
PO BOX 1874,
MOUNT LAUREL, NJ 08054

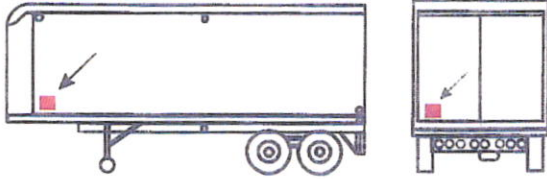
NJDEP Registered Transporter:
DEAN ENTERPRISES INC
NJDEP #: **30311**

This card must be carried in the cab of the vehicle at all times.
This registration card & decal are valid for use only by the listed registrant.
Leased equipment can only be used to transport waste by the listed registrant.

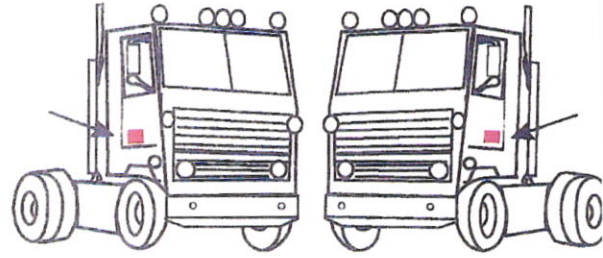


Waste Trailers

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



Trucks and Truck Tractors



Each qualified waste vehicle is issued two (2) stickers. Place the stickers on the vehicle as shown in the diagram.

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COMMONWEALTH OF PENNSYLVANIA
Waste Transportation Safety Program
Written Authorization

2941256871

Phone No. (609) 268-3900

VIN# 1M2GR3GC5KM008687
WH22941
Expires Nov 2025

DEAN ENTERPRISES, INC.
JENNIFER KRAMER
P.O. BOX 1874
MOUNT LAUREL, NJ 08054-1874

THIS WRITTEN AUTHORIZATION MUST BE KEPT WITH THE WASTE TRANSPORTATION VEHICLE AT ALL TIMES.
If lost or damaged contact DEP immediately at 717-783-9258. A replacement fee is required.
Duplication or Photocopies of this original documentation are not valid.

DOCUMENT SECURITY BACKGROUND IS PRINTED IN BLUE INK ON WHITE PAPER & INCLUDES PINK THERMO-INK KEYSTONE AT RIGHT

CAUTION! REMOVE STICKERS CAREFULLY.

Applied stickers take 24 hours to reach full tack



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.



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

(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). Do a walk-around of the truck
- 2). Ensure the load is secure
- 3). Check the route

(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: Dean Kramer

Phone: 609-685-6432

(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

(6) The designated coordinator will contract for clean-up services with another company.

(7) This plan will be carried in all vehicles, along with the permit.

Fleet Safety Program

Dean Enterprises, Inc.
Mount Laurel, NJ 08054

Fleet Safety Program

Our motor fleet safety program has been implemented to promote safe driving on and off the job. When properly implemented, this program can help reduce the frequency and severity of crashes and violations in our vehicle operations. Our focus is on reducing the financial burden of crashes and the accompanying human suffering. It is equally important that we present a strong public image of a company that puts safe drivers on the road.

We will properly select and train employees who drive on company business and we will keep well-maintained vehicles. Brian Provost is appointed Fleet Coordinator with responsibility for managing vehicle and driver safety issues. He has authority to implement our vehicle safety program and is accountable to Dean Kramer for its effectiveness.

Our Fleet Coordinator is responsible for investigating, documenting, contacting, and maintaining communications with the office and following up on automobile claims handling. This program also fits within our disability management plans for emphasizing prompt return to work for workplace injuries sustained from motor vehicle crashes, through a transitional duty assignment.

The program policies and expectations apply to everyone operating a company vehicles and employees operating personal, rented, or leased vehicles on company business.

Brian Provost will promptly review all crashes or incidents. The review is intended to identify and address root causes of crashes.

A list of employees authorized to operate motor vehicles on company business will be maintained by the office. Employees are not allowed to operate motor vehicles on company business unless they are on the list of approved drivers. Supervisors are responsible for verifying an employee is on the list of approved/authorized drivers prior to assigning the employee to work tasks that involve the operation of a motor vehicle on company business.

Employees are required to immediately report all crashes and moving violations that occur during work-related activities if they are driving a company-owned vehicle.

We will provide safe and reliable transportation to authorized drivers, and the resources for properly maintaining company vehicles. It is each driver's responsibility to ensure proper vehicle maintenance, exercise defensive driving habits, maintain a good driving record, and adhere to the company safe driving expectations and objectives outlined in this program.

We will adhere to all federal, state, and local laws governing vehicle operation. Management at all levels is expected to support and enforce our fleet safety program.

(Company Executive)

(Designated fleet coordinator)

(Company Name)

(Date)

Authorized Drivers

The company will maintain a list of authorized drivers by type of vehicle. Supervisors are expected to verify that a driver is on the list of authorized drivers prior to assigning him/her tasks related to motor vehicle operations. Drivers must meet the criteria and process steps outlined below to be placed on the list of authorized drivers. Vehicle types included on the authorized driver list will match the types of vehicles in our fleet and include:

- Company owned passenger vehicles
- Personal or rented vehicles used for company business or travel
- Light trucks
- Non-CDL commercial vehicles
- CDL class vehicles
- Special vehicles which require additional qualification steps

The list of authorized drivers will be reviewed on a regular basis and kept current. Drivers may be removed from the list based on driving performance, motor vehicle record (MVR) changes, vehicle crashes/incidents and non-compliance with fleet safety program policy violations including seat belt and distraction policy violations.

Prospective employees and current employees in existing positions that require or may require the use of a motor vehicle or applying for new positions within the company requiring use of a motor vehicle must:

Meet the driving record criteria outlined below:

- Prove a listing of current and past driver's license information for the past 10 years
- Provide a list of violations and convictions for the past 5 years
- Acknowledge that on-going motor vehicle record reviews will take place

Acknowledge they understand that not meeting the driving record criteria is cause for immediate removal from positions that require motor vehicle operations which could lead to termination if they do not qualify for other positions or if other positions not requiring operation of vehicles are not available.

Drivers must meet the following criteria:

- Must have held a valid driver's license for 2 years
- Must be at least 18 years old
- Must meet additional criteria if they are operating vehicles defined as "commercial motor vehicles" used in intrastate or interstate commerce
- Must have no more than 2 moving violations in the past 3 years
- No serious violations as outlined below in the past 3 years
- No repeat serious violations for the length of the driving record
- No more than 1 preventable crash in the past 3 years, and no more than 2 combined violations and crashes

Serious violations include:

- Speeding 20 MPH or more over posted
- Operating while intoxicated
- Felony use of a vehicle
- Passing school bus with lights flashing for loading or unloading
- Crossing RR tracks against activated warnings
- Drag racing
- Other violations which show a significant disregard for the safe operation of motor vehicles

Drivers are expected to report violations and convictions the next business day. Drivers who receive a suspension, a revocation, or have an expired license are not to operate company vehicles or any motor vehicle on company business.

Drivers will be required to provide a listing of all violations in the past 5 years and states where they have had a driver's license. State motor vehicle record checks will be made to verify a valid license and obtain a history of violations and convictions.

Exceptions may be made on a limited basis when there are documented reasons. Exceptions must be approved by Dean Kramer and the exception documented as part of the hiring or placement process.

Drivers must pass a road test in the type of vehicle they will operate and complete the Driver Distraction and Mobile Device Use Policy. Successfully completing a road test is part of the process to be placed on the list of approved drivers.

Drivers must pass the following background checks to be placed on the list of approved drivers.

- Drivers record (as described above)
- Past employment checks
- List other checks used as part of the hiring or qualification process

Distractions

Drivers who attempt to multi-task while driving are at a higher risk of crashing their vehicle or contributing to circumstances where crashes are more likely.

Cell phone and texting: The use of mobile devices or cell phones used for calls and text messaging when operating motor vehicles on company business is prohibited. The only exception is emergency communication to 911 to report actual emergencies.

Management is expected to comply with this policy and not require or expect employees to respond when driving.

Drivers should not engage in the following activities or other activities which take their hands off the wheel, eyes off the road, or mind off driving.

- Eating or drinking
- In-vehicle entertainment/infotainment systems

- Smoking
- Personal grooming
- Watching non-traffic situations outside the vehicle (crashes, people, construction)
- Doing paperwork from your last client
- Using video players
- Reaching for loose items
- Interacting with passengers
- Child care
- Reading books, newspapers, or other printed material
- Transporting pets in the vehicle (unless in carriers and secured)
- Changing clothes
- Programming navigation devices

Drivers are expected to complete and sign the Driver Distraction and Mobile Device Use Policy prior to operating motor vehicles on company business.

Driver Expectations

Drivers are expected to operate company owned and non-owned vehicles used on company business in a safe and courteous manner at all times based on the weather, road, and traffic conditions. Motor vehicle laws for the area where the vehicle is being operated may be different than where the driver lives or is based. It is your responsibility as a driver to be aware of and comply with local traffic regulations.

In addition to complying with motor vehicle laws, the following are expectations for using motor vehicles on company business and when operating a company vehicle:

- Seat belts must be used by driver and all passengers.
- Keys must never be left in the vehicle. Spare keys are to be kept in the office or at your home.
- Materials and inventory must not be left in plain view where they may be susceptible to theft or damage. Drivers are responsible for the security of vehicles and cargo.
- Lock an unattended vehicle.
- Observe posted speed limits and rules of the road.
- Maintain company vehicles in accordance with our company policy and specifications. You will be responsible for damage to company vehicles resulting from reckless or abusive handling or operation.
- Be courteous to other drivers and pedestrians. Observation reports may be utilized to identify your driving habits and will be used in your evaluation.
- Do not use controlled substances or alcohol prior to or when operating a motor vehicle. Be aware of possible adverse effects of prescription drugs and do not operate a motor vehicle when ability is impaired.
- Only the assigned driver or other company personnel engaged in the course of their employment are permitted to drive company vehicles.
- Keep windows clean inside and out to reduce glare.

- Remove snow accumulation prior to driving. Removal includes snow from on top of the vehicle and all windows and lights so visibility is maximized.
- Maintain 4 seconds of following distance between your vehicle and other vehicles (passenger vehicles), 5 to 8 seconds in heavy/long combination vehicles, and move slightly slower than the flow of traffic in heavy traffic. When following other company owned vehicles the following distance should be doubled to reduce the potential for multiple company vehicles being involved in a crash.
- Maintain awareness of what is in front of your vehicle, on both sides, and behind to reduce the need for sudden stops or quick lane changes which can make it more likely other vehicles will strike your vehicle.
- Do not drive when fatigued and plan trips to avoid fatigue.
- Drivers should verify a crash reporting kit is available in company vehicles they operate.

Vehicle Maintenance

Drivers of personally assigned company vehicles are expected to schedule and complete routine maintenance per the instructions from our vehicle management company. Larger vehicle service will be coordinated by fleet maintenance and vehicles will not be scheduled for use when routine service is required.

A file will be kept for each vehicle documenting when scheduled service and repairs are performed. The maintenance files for regulated vehicles will be documented following FMCSA regulations on inspections and outlined in the regulated fleet program.

Crash/Incident Response and Reporting

Drivers are expected to report crashes, theft, damage, and other vehicle incidents on a timely basis. This typically means the same day when we are open for business or the next business day. Drivers should complete the crash and incident report form per the instructions found in the crash reporting packet kept in the vehicle. Drivers should report incidents for all company vehicles, rental vehicles used on company business, and personal vehicles when being used on company business.

Procedures to follow in a vehicle crash:

- Protect the scene of the crash and take action to prevent additional collisions or injuries.
- Pull off the roadway as far as possible, unless otherwise directed.
- Place reflectors or flares in front of and to the rear of your vehicle. Follow applicable federal or state laws.
- Contact emergency authorities immediately.
- Administer emergency first aid if trained to do so, following any applicable state or local guidelines.

Obtain and record the following information at the scene of the crash:

- Name and address of each driver, passenger, and/or witness to the crash.
- License number of each vehicle involved.
- Name and policy number of the insurance company for each vehicle involved.

- Complete a vehicle crash reporting form, including a diagram of the crash.

What to do:

- Be courteous. Do not argue. Keep calm.
- Give your name and address to the injured person or a police officer before leaving the scene. If police respond to the crash, do not leave the scene until you are told you may leave by the officer(s) responding.

What not to do:

- Do not talk about the crash except to a police officer, your employer, or your insurance claim adjuster.
- Make no settlements or offers of settlements to anyone.
- Do not sign any statements or reports other than official police reports.
- Do not admit fault.

Crash/Incident Investigation Analysis

Crashes, theft, damage incidents, and other types of loss will be reviewed by the designated fleet safety manager. The fleet safety manager may consult with other management when reviewing a crash based on the severity and circumstances. The review will include the following areas:

- Was the crash, theft, damage, or loss reported promptly per the policy guidelines?
- Were fleet safety program policies followed regarding operating the vehicle, securing it or maintenance?
- Did the driver take expected precautions to avoid the incident?
- Was management responsible or did they contribute to creating a situation that made the loss more likely?
- A review of the driver's past incidents, telematics data, training, motorist feedback, past performance reviews, and driving record.
- Based on citations issued or other circumstances should the driver remain on the list of authorized drivers?
- Is an improvement or coaching plan needed for the driver?
- Should operational policies be modified to address areas which may have contributed to the loss?
- Should the crash be classified as a preventable crash for the qualification criteria?

Based on the results of the review, corrective or improvement action plans may be developed, or the driver removed from positions that require the operation of motor vehicles.

Communicating and Acknowledging Expectations

Prior to a driver being placed on the list of authorized drivers, they must review the fleet safety policy and acknowledge they understand and agree to comply with the policy expectations. Management will communicate with drivers on an ongoing basis to reinforce the program policies and provide driver education.

Regulated (FMCSA or State DOT) Vehicles

Operating regulated vehicles has additional requirements and may require a Commercial Driver License (CDL). There are differences by state for non-CDL required vehicles operated in intrastate commerce. The requirements and driver expectations for regulated vehicles is addressed in a separate program. Vehicles which are regulated are identified on the vehicle list and any driver operating them must be listed as an authorized driver on the authorized driver list.

Driver Evaluations

Operating motor vehicles will be part of each driver's annual evaluation. Review items will include:

- Fleet safety policy compliance
- Compliance with vehicle inspection protocols
- Arranging for vehicle maintenance in a timely manner based on mileage
- Fuel mileage and vehicle condition
- Driving record review and comparison to driver qualification criteria
- Telematics data review on driving performance
- Compliance with our distractions policy

Driver performance will also be reviewed for eligibility to operate motor vehicles when citations are received, after crashes or vehicle related incidents, and after receiving complaints. Drivers not complying with policies or meeting our criteria may be removed from positions that require the operation of vehicles. This could result in termination if a non-driving position for which the driver is qualified does not exist.

Personal Use of Company Owned Vehicles

Personal use of company owned vehicles is limited to individually assigned passenger vehicles. The use by anyone other than the assigned driver is strictly prohibited.

Hours of Use

Drivers operating regulated vehicles as identified on the vehicle list are expected to comply with interstate (FMCSA) or intrastate (State DOT) guidelines and track hours of service. Drivers of non-regulated vehicles are expected to comply with similar hours of service guidelines to reduce the potential for work related fatigue. Our expectations are as follows:

- Not driving after being on duty 14 hours or longer
- Not driving more than 11 hours of the 14 hours maximum on duty time
- Not driving more than 60 hours in a work week

- Taking a break of at least 30 minutes prior to driving 8 hours of the maximum 11

Drivers are not to operate vehicles when fatigued even if they have not exceeded the limits outlined above. Drivers are expected to use journey management techniques to be rested when operating motor vehicles.

Vehicle Operations in Inclement Weather

It is the driver's responsibility to operate a motor vehicle safely. Drivers should review weather forecasts and not operate motor vehicles in conditions in which driving too hazardous. Management may stop operations or prohibit vehicle operation based on actual forecasted weather. Drivers are expected to take extra precautions during bad weather. Those precautions include:

- Moving slower than the posted speed limit based on road conditions
- Allow extra following distance when road conditions indicate longer stopping distances may exist
- Not driving through flooded areas or roadways
- Conducting pre-trip inspections, including checking levels of wiper fluid
- Planning fuel stops to avoid running out of fuel when traffic is stopped due to hazardous conditions
- Having proper equipment, such as snow and ice removal equipment, based on the climate
- Verifying the heat and defroster systems in the vehicle are in working order
- Using lights when visibility is limited and when wipers are needed
- Not driving into fog, smoke, or whiteout conditions

Driver Training

Drivers must complete training on our fleet policies and safe driving expectations prior to being placed on the list of authorized drivers. In addition, ongoing training will be provided. The ongoing training will be assigned training modules or through direct communication with the driver's manager.

Dean Enterprises Driver Distraction and Mobile Device Use Policy – Acknowledgement

Policy regarding use of cellular phones, personal digital assistants (PDAs), converged devices, texting devices, computers, and other mobile electronic devices.

Our company is committed to providing a safe work environment for all our employees. In addition, we strive to prevent injury to third parties while our employees are performing work-related activities.

Using cellular phones, computers, messaging devices, or any other mobile electronic device while operating a motor vehicle is a critical safety concern for Dean Enterprises. As research has shown, such devices significantly distract drivers. Distracted driving increases the likelihood that a crash will occur.

This policy is intended to control the circumstances under which an employee can utilize a cell phone or other remote device while operating a motor vehicle on company business, regardless of whether the vehicle is company-owned, rented/leased, or employee-owned.

Dean Enterprises requires all drivers on company business and drivers operating a company-owned vehicle for personal use to adhere to the following policy parameters while operating the motor vehicle:

- Employees must comply with federal, state, or local laws and regulations that may exist to control usage of mobile devices while operating a motor vehicle.
- If it is necessary to place or accept a cellular phone call at any time while operating a motor vehicle, the employee will safely drive his or her vehicle to an off-road location where the vehicle can be stopped without risk to the employee or any third party or use a hands-free option.
- Drivers will not send, compose, or review received text messages, either on a company-owned or personally-owned device.
- Drivers will not operate any other mobile device, including but not limited to a PDA, converged device, pocket PC, binaural headset-based audio device, such as an MP3 player, or laptop computer, either in a company-owned or personally owned vehicle while on company business.
- Navigation systems will be programmed before the trip is started, not while the motor vehicle is in operation.

Any employee who fails to adhere to this policy may be subject to disciplinary action, including, for example, written warning and/or subsequent restrictions on using a vehicle for company business. Employee safety is a priority at Dean Enterprises, and your adherence to these guidelines will help us maintain the personal safety of our employees as well as that of our fellow drivers on the road.

Driver Receipt

I hereby acknowledge receipt of the **Mobile Device Use Policy for Drivers**. I agree to abide by the directives set forth in this policy and to conduct myself according to the standards established therein.

Signature

Printed Name

Date

Driver Questionnaire

Name: _____ Present Address: _____

In what state(s) have you held a valid driver's license? _____

1. Do you possess a current vehicle operator's license? _____ YES _____ NO

Vehicle Operator License Other License (CDL, Chauffeur, etc.)

State: _____

Expiration: _____

License #: _____

Full Name: _____

(As it appears on license)

2. Have you ever had an operator's license revoked or suspended? _____ YES _____ NO

If yes, please explain. _____

3. List all moving violations and crashes you have had within the last 5 years. (If none, write "NONE.")

(1) _____

(2) _____

(3) _____

(4) _____

4. Have you ever received a citation for driving while under the influence of alcohol, drugs or other controlled substances? _____ YES _____ NO

If yes, explain _____

5. Have you ever been required to attend an alcohol offender's school, traffic offender's school or other remedial traffic school required by the courts? _____ YES _____ NO

If yes, explain _____

6. Have you ever completed a driver's education course? _____ YES _____ NO

If yes, when? (Date) _____

I understand that all the information provided on this form will be kept confidential, and certify that, to the best of my knowledge, the above information is correct. Any falsification may result in disciplinary action up to and including termination.

Signature of Applicant

Date

Motor Vehicle Records Acknowledgement

This defines the number of violations received before action may be taken regarding losing privileges to operate a vehicle on company business. The offenses are not limited to those committed while operating on company business.

Minor Offenses

Within any 12 consecutive month period:

- First Offense: Written warning and counseling
- Second Offense: Written warning and counseling, subject to termination
- Third Offense: Subject to termination

Major Offenses

Major offenses are defined below and carry a consequence of immediate termination once reviewed for any of the following:

- Any felony conviction in which a vehicle is used
- Failure to stop, report, or comply with state statutes when involved in a crash
- Any display or evidence of reckless driving, excessive speeding, endangerment of others
- DUI (driving under the influence), DWI (driving while intoxicated) or OUI (operation under the influence)

Preventable Crashes

As defined by the National Safety Council regarding what actions the driver took to do "everything reasonable to avoid the crash, etc." A formal review by management and the employee's supervisor will convene to evaluate the circumstances of the crash.

Within 36 Months:

- First Crash: Evaluation and counseling
- Second Crash: Written warning and counseling, subject to termination
- Third Crash: Subject to termination

Seatbelt/Restraint Violations

Seatbelts are crucial to keeping the driver in their seat. Being behind the wheel is a critical issue when maintaining control of the vehicle. Injuries from motor vehicle crashes can have serious impact on a business operation, the employee's family of the driver, and other drivers and passengers. How seatbelt violations will be treated when reviewing driving records should be addressed as part of your policy and mentioned in the above or under this heading.

I acknowledge and fully understand the consequences of my driving performance as evident by my crash and/or violation history and understand the expectations and policies outlined in the fleet safety program.

Driver Signature

Supervisor Signature

Date

Company Name

Employment Application Driving Position Supplement

Applicant Name:		Date:		
Present Street Address:				
City, State, Zip		How long?	Telephone No.	
Previous street address, city, state, zip (if less than 3 years at present address)		How long?	License restrictions:	
Driver License				
State	License Number		Expiration date	
Traffic Violations: (List all traffic convictions and forfeitures in the past 5 years, except parking violations)				
Location	Date	Court	Charge	Penalty
Has your license or permit to operate a motor vehicle ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, when, where, why?)				
Crash Record: (List all crashes in which you have been involved in the past 3 years.)				
Date	Location	Description		

To Be Read and Signed by Applicant

I certify that all information on this application is true and complete to the best of my knowledge and that any misrepresentation could be reason for dismissal or denying employment. I authorize management to obtain a current Motor Vehicle Record of my driving history now, and at any time in the future. I recognize that I will not be permitted to operate a company vehicle or drive on company business if a review of my driving record indicates any of the following convictions: (1.) hit and run, (2.) driving under the influence of alcohol or drugs within the past x years, (3.) any felony, homicide, or manslaughter involving use of a motor vehicle, or (4.) leaving the scene of a crash (Company shall define consequences for all). I acknowledge that I have read the company's policy on safe driving and will follow requirements stated in this policy while I am driving on company business.

Driver's Signature: _____

Date: _____

Safe Driving Performance Expectations

- Seat belts must be used by driver and all passengers.
- Keys must never be left in the vehicle. Spare keys are to be kept in the office or at your home.
- Materials and inventory must not be left in plain view where they may be susceptible to theft or damage. Drivers are responsible for the security of vehicles and cargo.
- Always lock an unattended vehicle.
- Observe posted speed limits and rules of the road.
- Maintain company vehicles in accordance with our company policy and specifications. You will be responsible for damage to company vehicles resulting from reckless or abusive handling or operation.
- Be courteous to other drivers and pedestrians. Observation reports may be utilized to identify your driving habits and will be used in your evaluation.
- Do not use controlled substances or alcohol prior to or when operating a motor vehicle. Be aware of possible adverse effects of prescription drugs and do not operate a motor vehicle when ability is impaired.
- Only the assigned driver or other company personnel engaged in the course of their employment are permitted to drive company vehicles.
- Keep windows clean inside and out to reduce glare.
- Remove snow accumulation prior to driving. Removal includes snow from on top of the vehicle and all windows and lights, so visibility is maximized.
- Maintain 4 seconds of following distance between your vehicle and other vehicles (passenger vehicles), 5 to 8 seconds in heavy/long combination vehicles and move slightly slower than the flow of traffic in heavy traffic.
- Maintain awareness of what is in front of your vehicle, on both sides and behind it to reduce the need for sudden stops or quick lane changes which can make it more likely other vehicles will strike your vehicle.
- Do not drive when fatigued and plan trips to avoid fatigue.

Driver Signature

Company Fleet Coordinator

Company Name

Date

Name	DOB	License State	License Number
Joseph Alestra	[REDACTED]	NJ	[REDACTED]
Tim McBride	[REDACTED]	NJ	[REDACTED]

Davis, DaQuan (DNREC)

From: Jenniferlynn Kramer <jennifer@deanenterprisesdemolition.com>
Sent: Wednesday, November 27, 2024 11:49 AM
To: WHStrtransporters
Cc: Jenniferlynn Kramer
Subject: RE: Missing Information on Delaware Solid Waste Transporter Application Permit
Attachments: DE.pdf; Scan.pdf; 24 25 Certificate - Department of Natural Resources and Environmental Control.pdf

DaQuan,

Please see attached as requested and let me know if you need anything further.

Thank you,

Jennifer Kramer
Dean Enterprises, Inc.
P.O. Box 1874
Mount Laurel, NJ 08054
609-268-3900 (o)
267-307-8335 (m)

From: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> **On Behalf Of** WHStrtransporters
Sent: Monday, November 25, 2024 4:00 PM
To: Jenniferlynn Kramer <jennifer@deanenterprisesdemolition.com>
Subject: Missing Information on Delaware Solid Waste Transporter Application Permit

Hi Ms. Kramer,

Thank you for submitting your application to get a 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 4(b):** Your ownership is missing the dates of birth and mailing addresses of you(Jennifer Kramer) and Dean Kramer(owner). Please update your ownership information and send it back. **UPDATED**
- **Section 9(c):** 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#). **UPDATED, N/A**
- **Section 10:** Provide a Certificate of Insurance (COI) with \$1,000,000 automobile liability and the Department of Natural Resources and Environmental Control address in the Certificate Holder section. The address is 89 Kings Hwy, Dover, DE 19901. **ATTACHED**
- **Section 10:** Please provide an MCS-90 endorsement form that matches the COI. **N/A**
- **Section 12-** Does your driver training include familiarity with the solid waste transporter permit, solid waste handling, and the spill control plan? It is not mentioned in the application. **YES, ALL OF THE ABOVE. THE TRAINING PROGRAM IS IN PERSON AND ALL INFORMATION IS DISCUSSED IN REAL TIME.**
- **Section 13:** The vehicle list is missing the state registrations of each vehicle, please add the states. **ALL NEW JERSEY, UPDATED**

Please provide the information requested above via email 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





DEANENT-02

KAPRIABURPEE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/27/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

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.

PRODUCER: NFP Property & Casualty Services, Inc. 1307 White Horse Road Building C Voorhees, NJ 08043
CONTACT NAME:
PHONE (A/C, No, Ext): (856) 784-0707 FAX (A/C, No):
E-MAIL ADDRESS:
INSURER(S) AFFORDING COVERAGE NAIC #
INSURER A : Nautilus Insurance Company 17370J
INSURER B : Key Risk Insurance Company 10885
INSURER C : New Jersey Manufacturers Insurance Company 12122
INSURER D : Selective Fire & Casualty Insurance Company 14377
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.

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 Liab, Workers Compensation, and Leased/Rented Equip.

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

CERTIFICATE HOLDER: Department of Natural Resources and Environmental Control 89 Kings Highway 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: [Signature]

4b. Dean Kramer, 100%

[REDACTED]

[REDACTED]

[REDACTED]

Jennifer Kramer

[REDACTED]

[REDACTED]

[REDACTED]

8b. List all facilities for disposal

- Any registered landfill or transfer station in Delaware based on the jobsite location

9a. NJ A901 – cab card with number attached

9b. PA ACT 90 – cab card with number attached

11. Spill plan attached

12. Driver training program attached

14. Drivers attached