

RECEIPT

DATE

12/05/24

No.

628153

RECEIVED FROM

Gold Rush VI Trucking

\$ 350.00

Three hundred fifty and ⁰⁰/₁₀₀

DOLLARS

 FOR RENT FOR

DE-SW-1851

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY
ORDER CREDIT
CARD

FROM

1279

TO

BY

M.M.



RECEIVED

DEC 05 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- DE-SW 1851 Expiration Date 12-31-2024

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

SCRAP TIRES ONLY

ALL OTHERS

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

- One Year - \$350.00
- Two Years - \$650.00
- Three Years - \$950.00
- Four Years - \$1250.00
- Five Years - \$1550.00

2. Release to Public

Do you wish to be included on the list of transporters that is provided to persons requesting a list of Delaware permitted solid waste transporters? Yes No

3. Company Information

Company Name GOLDRUSHVI TRUCKING LLC

Location Address:	Mailing Address:
502 Gordon House Way Middletown de 19709	502 Gordon House Way Middletown DE 19709

Contact: 302-932-8219 Title: OWNER

Business Phone: 302-932-8219 ~~8219~~ Fax: 302-378-5451



24 hr Emergency Contact Phone: 302-932-8219

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: Middletown State: Delaware Date: 11-07-2024

- Municipality
- Public institution
- Limited Liability Corporation (LLC) State: Delaware
- 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 Vilma Tsoi 502 Gordon House Way Middletown de 19709

(c). If company is owned by or affiliated with a parent company, attach parent company name, address & mailing address, and % ownership.

- Attachment N/A
- 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 Vilma Tso 502 Gordon House Way Middletown De 19709
 No Delaware locations Goldrushn Trucking LLC

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 N/A
 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) Dirt
- 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 N/A
 - 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 N/A
- No transporter permits in other states

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

DOT# 3002851 MC# 130001

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

10. Proof of Financial Responsibility

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

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

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

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

11. Spill Control and Safety

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

Spill Control Plan: Attachment 1

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 2

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 Vilma Tsoi Date 11/07/2024
Print Name Vilma Tsoi Title OWNER

****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
 - 2). Fire extinguisher
 - 3). First aid kit
 - 4). Heavy-duty gloves, hard hat
 - 5). Flashlight
 - 6).
- (2) All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.
- (3) The driver will perform the following pre-trip inspections:
 - 1).
 - 2).
- (4) If there is an accident or other emergency which causes a portion of the load to be spilled, the driver, if uninjured, will contact the following designated company coordinator:
Name: _____ Phone: _____
- (5) The designated coordinator will contact the state and municipal authorities where the accident occurred. If the accident or spill has the potential to cause environmental damage, (either due to the nature of the waste, location of the accident, or additional factors such as leaking oil, gasoline, or hydraulic fluid) the person contacted will notify the state emergency response team, by calling one of the following numbers:
Delaware: 911, (302) 739-9401 or 1-800-662-8802 (*Other numbers may be listed as follows, however, the listed Delaware numbers **must** be included in the spill control plan.*)
Maryland:
New Jersey:
- (6) The designated coordinator will contract for clean-up services with another company. (*This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.*)
- (7) This plan will be carried in all vehicles, along with the permit.

Davis, DaQuan (DNREC)

From: Vilma Tsoi <m24v17m27@gmail.com>
Sent: Monday, December 16, 2024 8:18 PM
To: WHStranporters
Subject: Re: Delaware Solid Waste Transporter Permit Application
Attachments: IMG_7072.jpeg; IMG_7073.jpeg; IMG_7066.jpeg

On Mon, Dec 16, 2024 at 8:17 PM Vilma Tsoi <m24v17m27@gmail.com> wrote:
I am sending in the rest of documents

On Mon, Dec 16, 2024 at 10:53 AM WHStranporters <WHStranporters@delaware.gov> wrote:

Great.

Thank you,



DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

 302-739-9403

 WHStranporters@delaware.gov

 [89 Kings Hwy SW, Dover, DE 19901](https://www.google.com/maps/place/89+Kings+Hwy+SW,+Dover,+DE+19901)

 dnrec.delaware.gov



From: Vilma Tsoi <m24v17m27@gmail.com>
Sent: Monday, December 16, 2024 8:54 AM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Re: Delaware Solid Waste Transporter Permit Application

Sorry about that I will resend it

On Mon, Dec 16, 2024 at 8:47 AM WHStranporters <WHStranporters@delaware.gov> wrote:

I did not receive this information, please provide it to complete your application.



DaQuan L. Davis

Environmental Scientist I

Division of Waste and Hazardous Substances

 302-739-9403

 WHStranporters@delaware.gov

 [89 Kings Hwy SW, Dover, DE 19901](#)

 dnrec.delaware.gov



From: Vilma Tsoi <m24v17m27@gmail.com>
Sent: Friday, December 13, 2024 4:38 PM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Re: Delaware Solid Waste Transporter Permit Application

All of that is included in the email I sent , I don't have permit for no other stat but Delaware

On Fri, Dec 13, 2024 at 2:18 PM WHStranporters <WHStranporters@delaware.gov> wrote:

Hello,

I still need the following:

- **Section 7-** Do have solid waste transporter permits in MD, NJ, or/and PA?
- **Section 10-** MCS-90 endorsement form that matched your automobile liability policy number.
- **Section 12-** Written Driver training program . The requirements include:
 - (a). 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.
- **Section 13-** The vehicle list is missing the state of registration and ownership. Please update your list.

From: Vilma Tsoi <m24v17m27@gmail.com>
Sent: Thursday, December 12, 2024 4:06 PM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Re: Delaware Solid Waste Transporter Permit Application

Solid Waste Transporter Application
Page 4 of 6

8. Treatment, Storage, and Disposal Facilities

- (a). Do you cross state lines with the waste? Yes No
Delaware, Pennsylvania, Maryland, New
- (b). Identify in an attachment *all* solid waste Treatment, Storage, Disposal Facilities and Transfer Stations to which the waste will be transported.

- Delaware Solid Waste Authority locations: (attachment) C
- Clean Earth of New Castle, Inc. (thermal treatment facility)
- Delaware Recyclable Products, Inc. (dry waste, commercial)
- Other in-state solid waste facilities, including private facilities
- Out of state solid waste TSD facilities: (attachment) _____

9. Other Transporter Permits

- (a). Attach a copy of your home state solid waste transporter permit.

On Thu, Dec 12, 2024 at 3:46 PM WHStranporters <WHStranporters@delaware.gov> wrote:

Still need the following:

- **Section 7**- What states does Goldrush VI Trucking, LLC cross with solid waste?
- **Section 10**- Please provide an MCS-90 endorsement form.
- **Section 12**- You did not provide a written driver training program. Please review section 12 of the application and provide driver training.
- **Section 13**- The vehicle list is missing the state of registration and ownership. Please update your list.

From: Vilma Tsoi <m24v17m27@gmail.com>
Sent: Thursday, December 12, 2024 12:58 PM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Re: Delaware Solid Waste Transporter Permit Application

I just sent the documents over

On Thu, Dec 12, 2024 at 12:57 PM Vilma Tsoi <m24v17m27@gmail.com> wrote:



CERTIFICATE OF LIABILITY INS

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE POLICY OR POLICIES REFERRED TO BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE INSURER AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have an endorsement for **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain of which **this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

PRODUCER McCool Ins. & Realtors Inc 160 West Main St Elkton MD 21921	CONTACT NAME:
	PHONE (A/C. No. Ext): 410-391-1111
	E-MAIL ADDRESS:
	INSURER A: United
INSURED GoldrushVi Trucking LLC 502 Gordon House Way Middletown DE 19709	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:

On Thu, Dec 12, 2024 at 8:48 AM WHStranporters <WHStranporters@delaware.gov> wrote:

The Certificate holder's address needs to be [89 Kings HWY, Dover, DE 19901](#).

From: Vilma Tsoi <m24v17m27@gmail.com>

Sent: Thursday, December 12, 2024 8:44 AM

To: WHStranporters <WHStranporters@delaware.gov>

Subject: Re: Delaware Solid Waste Transporter Permit Application



CERTIFICATE OF LIABILITY INS

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR AL BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must b If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain this certificate does not confer rights to the certificate holder in lieu of such endorsement

PRODUCER McCool Ins. & Realtors Inc 160 West Main St Elkton MD 21921	CONTACT NAME:
	PHONE (A/C, No, Ext): 410-3
	E-MAIL ADDRESS:
	INSURER A : United
INSURED GoldrushVi Trucking LLC 502 Gordon House Way Middletown DE 19709	INSURER B :
	INSURER C :
	INSURER D :
	INSURER E :

GOLDVIT-01

On Thu, Dec 12, 2024 at 8:39 AM Vilma Tsoi <m24v17m27@gmail.com> wrote:

Good morning I did sent in the insurance I will resend it again

On Thu, Dec 12, 2024 at 8:30 AM WHStranporters <WHStranporters@delaware.gov> wrote:

I have reviewed your paperwork and following the below weren't addressed.

- **Section 7-** What states does Goldrush VI Trucking, LLC cross with solid waste?
- **Section 10-** You did not submit a certificate of insurance. Please make sure 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 10-** Please provide an MCS-90 endorsement form.
- **Section 12-** You did not provide a written driver training program. Please review section 12 of the application and provide driver training.
- **Section 13-** The vehicle list is missing the state of registration and ownership. Please update your list.

From: Vilma Tsoi <m24v17m27@gmail.com>

Sent: Tuesday, December 10, 2024 11:04 AM

To: WHStranporters <WHStranporters@delaware.gov>

Subject: Re: Delaware Solid Waste Transporter Permit Application

Good morning I just sent the paperwork

On Fri, Dec 6, 2024 at 9:17 AM WHStranporters <WHStranporters@delaware.gov> wrote:

Hi Ms. Tsoi,

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 4(b)**- Your ownership information is missing the date of birth and percentage of ownership. Please update your ownership information and send it back.
- **Section 7**- What states does Goldrush VI Trucking, LLC cross with solid waste?
- **Section 10**- You did not submit a certificate of insurance. Please provide this form, 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 10**- Please provide an MCS-90 endorsement form.
- **Section 11**- The spill control plan is missing an emergency contact (name and phone number) and pre-trip inspections. Please update this plan and add the contact information and inspections.
- **Section 12**- You did not provide a written driver training program. Please review section 12 of the application and provide driver training.
- **Section 13**- The vehicle list is missing the state of registration and ownership. Please update your list.
- **Section 14**- You did not provide a list of vehicle operators.

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

 302-739-9403

 daquan.davis@delaware.gov

 [89 Kings Hwy SW, Dover, DE 19901](#)

 dnrec.delaware.gov





2024 to 2025
Decem-31

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

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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

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- 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- DE-SW 1851 Expiration Date 12-31-2024

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

SCRAP TIRES ONLY

- 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 GOLDRUSHVI TRUCKING LLC

Location Address:	Mailing Address:
502 Gordon House Way Middletown de 19709	502 Gordon House Way Middletown DE 19709

Contact: 302-932-8219 Title: OWNER

Business Phone: 302-932-8219 ⁸²¹⁹ Fax: 302-378-5451



24 hr Emergency Contact Phone: 302-932-8219

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: Middletown State: Delaware Date: 11-07-2024

- Municipality
- Public institution
- Limited Liability Corporation (LLC) State: Delaware
- Other: (must specify) _____

- (b). For each Owner, Partner, or Corporate Officer, attach a _____, mailing address, date of birth, and % ownership. Include all stockholders _____ 5% outstanding shares. 100% Vilma TSOI DOB

Attachment N/A 502 Gordon House Way Middletown de 19709

- (c). If company is owned by or affiliated with a parent company, attach parent company name, address & mailing address, and % ownership.

Attachment N/A
 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 Wilma Tso 502 Gordon House Way Middletown De 19709
 No Delaware locations Goldrush Trucking LLC

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 N/A
 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) Dirt
 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 N/A
- 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 N/A
- No transporter permits in other states

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

DOT# 3002851 MC# 130001

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

10. Proof of Financial Responsibility

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

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

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

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

11. Spill Control and Safety

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

Spill Control Plan: Attachment 1

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 2

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 Vilma Tsoi Date 11/07/2024
Print Name Vilma Tsoi Title OWNER

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

Please note, the expiration date as stated on this form relates to the process for renewing the Information Collection Request for this form with the Office of Management and Budget. This requirement to collect information as requested on this form does not expire. For questions, please contact the Office of Registration and Safety Information, Registration, Licensing, and Insurance Division.

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting for this collection of information is estimated to be approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.

**U.S. Department
of Transportation**
Federal Motor Carrier
Safety Administration

OMB No: 2126-0008
Expiration: 05/31/2024
Form MCS-90 Revised 06/03/2021

USDOT Number: 3002851 Date Received: _____

**FORM MCS-90
ENDORSEMENT FOR MOTOR CARRIER POLICIES OF INSURANCE FOR PUBLIC LIABILITY
UNDER SECTIONS 29 AND 30 OF THE MOTOR CARRIER ACT OF 1980**

Issued to GOLDRUSHVI TRUCKING LLC

(Motor Carrier name)

of 502 GORDON HOUSE WAY MIDDLETOWN, DE 19709

(Motor Carrier state or province)

Dated at 09:27 AM on this 7th day of February, 2024

Amending Policy Number: CA 06503621 Effective Date: 02/07/2024

Name of Insurance Company: United Financial Cas Co

Countersigned by: _____



Authorized company representative

The policy to which this endorsement is attached provides primary or excess insurance, as indicated for the limits shown (check only one):

- This insurance is primary and the company shall not be liable for amounts in excess of \$750,000 for each accident.
- This insurance is excess and the company shall not be liable for amounts in excess of \$_____ for each accident in excess of the underlying limit of \$_____ for each accident.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: 1-800-444-4487.

Cancellation of this endorsement may be effected by the company of the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under 49 U.S.C. 13901, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, D.C.).

Filings must be transmitted online via the internet at <http://www.fmcsa.dot.gov/urs>

DEFINITIONS AS USED IN THIS ENDORSEMENT

ACCIDENT includes continuous or repeated exposure to conditions or which results in bodily injury, property damage, or environmental damage which the insured neither expected nor intended.

MOTOR VEHICLE means a land vehicle, machine, truck, tractor, trailer, or semitrailer propelled or drawn by mechanical power and used on a highway for transporting property, or any combination thereof.

BODILY INJURY means injury to the body, sickness, or disease to any person, including death resulting from any of these.

PROPERTY DAMAGE means damage to or loss of use of tangible property.

ENVIRONMENTAL RESTORATION means restitution for the loss, damage, or destruction of natural resources arising out of the accidental discharge, dispersal, release or escape into or upon the land, atmosphere, watercourse, or body of water, of any commodity transported by a motor carrier. This shall include the cost of removal and the cost of necessary measures taken to minimize or mitigate damage to human health, the natural environment, fish, shellfish, and wildlife.

PUBLIC LIABILITY means liability for bodily injury, property damage, and environmental restoration.

STATE OF DELAWARE

Department of Finance Division of Revenue

ACTIVE BUSINESS LICENSE
2017101570

EFFECTIVE

01/01/2024 - 12/31/2024

ISSUED TO

GOLDRUSHVI TRUCKING LLC
502 GORDON HOUSE WAY
MIDDLETOWN DE 19709-9973

LOCATION

GOLDRUSHVI TRUCKING LLC
502 GORDON HOUSE WAY
MIDDLETOWN, DE 19709-9973

TRADE, BUSINESS, OR
PROFESSIONAL ACTIVITY

DRAYPERSON OR MOVER

ISSUED: 12/09/2023

FEE PAID: \$75.00

Is hereby licensed to practice, conduct, or engage in the occupation or business activity indicated above in accordance with the license application duly filed pursuant to Title 30, Delaware Code.



2024

POST CONSPICUOUSLY - NOT TRANSFERABLE



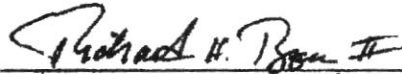
State of Delaware
Secretary of State
Division of Corporations
Delivered 03:19 PM 05/25/2017
FILED 03:19 PM 05/25/2017
SR 20174087044 - FileNumber 6422551

**CERTIFICATE OF FORMATION
OF
GOLDRUSHVI TRUCKING LLC
(A Delaware Limited Liability Company)**

First: The name of the limited liability company is: GOLDRUSHVI TRUCKING LLC

Second: Its registered office in the State of Delaware is located at 16192 Coastal Highway, Lewes, Delaware 19958, County of Sussex. The registered agent in charge thereof is Harvard Business Services, Inc.

IN WITNESS WHEREOF, the undersigned, being fully authorized to execute and file this document have signed below and executed this Certificate of Formation on this May 25, 2017.



Harvard Business Services, Inc., Authorized Person
By: Richard H. Bell, II, President

GOLDRUSHVI TRUCKING, LLC
502 Gordon house way, Middletown, Delaware 19709
Telephone 302-932-8219

Attach #2

Driver Training

1. Driver must meet and comply with all STATE FEDERAL, and D.O.T. requirements.
2. Driver must be aware of the material they are hauling and know what to do in case they come into contact with the material.
3. Driver must be certain that that the truck they are assigned to has all items listed on SAFETY EQUIPMENT LIST.
4. Driver must understand and follow EMERGENCY AND CONTROL PLANK.
5. Driver must understand and understand and comply with DRIVER REQUIRMENTS.

I have read and understand DRIVER TRAINING.

Signature Jan Tai Date _____

GOLDRUSHVI TRUCKING, LLC

502 Gordon house way, Middletown, Delaware 19709

Telephone 302-932-8219

Driver Requirements

- I: work schedule will require some weekends.**
- II: Trucks must be kept clean. When hauling contaminated soil bodies should be shoveled or swept after each load. Tail gates must be kept clean and free of debris.**
- III: Driver wear appropriate clothing and shoes for the job.**
- IV: Driver must comply with all safety rules and regulations while on customer's site, i.e. hard hats, Safety glasses etc.**

V: Drivers must inspect truck at the beginning and end of every shift:

- 1) Check Fluids
- 2) Check Tires
- 3) Check for leaks
- 4) Check light
- 5) Check for air leaks
- 6) Check Hydraulic old
- 7) Check springs
- 8) Check tarp for rips or binding
- 9) Make sure you have any permits or paperwork you will need for the day.

VI: Drivers must keep truck logs Book filled out.

- 1) Company you worked for and where you went.
- 2) If hourly, hourly tickets must be filled out and signed by the customer.
- 3) If hauling by the ton, write tons, tickets number and place.
- 4) Must keep track of the states you drove in and mileages.
- 5) Must fuel up every day, enter gallons, and price where purchased.
- 6) Write down everything you can't fix, including repairs, flats and services
- 7) Keep you hourly log up to date

I have read and understand the Driver Requirements.

Signature Jan Jovi Date _____

SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

(1) Spill control and safety equipment carried in each vehicle:

- 1). Reflectors and/or flares
- 2). Fire extinguisher
- 3). First aid kit
- 4). Heavy-duty gloves, hard hat
- 5). Flashlight
- 6). Absorbent pads, Trash bags

(2) All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.

(3) The driver will perform the following pre-trip inspections:

- 1). Make sure the load is secure and tarpe properly
- 2). Inspect and remove all debris or overlapping objects

(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: Goldrush Trucking Phone: 302-932-8219

(5) The designated coordinator will contact the state and municipal authorities where the accident occurred. If the accident or spill has the potential to cause environmental damage, (either due to the nature of the waste, location of the accident, or additional factors such as leaking oil, gasoline, or hydraulic fluid) the person contacted will notify the state emergency response team, by calling one of the following numbers:

Delaware: 911, (302) 739-9401 or 1-800-662-8802 (Other numbers may be listed as follows, however, the listed Delaware numbers must be included in the spill control plan.)

Maryland:

New Jersey:

(6) The designated coordinator will contract for clean-up services with another company. (This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.)

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

☰ Gmail

🔍 Search mail

☰

Compose

\$75.00



Inbox

4

Date

Today

Starred

Snoozed

Is this correct? 👍 🗨️

Sent

Drafts

15

More

noreply@velocitypayment.com
to me

Labels

Successful Payment Receipt

Notes

Please print this receipt for your records

Remittance ID: a0Hcs0000086ee5EAA

Payment ID: 328853382

Received: December 09, 2024 11:53AM EST

Amount: \$75.00

Transaction Type: Authorization and Capture

Approval Code: 00982S

Card Information: MasterCard

Viima Tsai

Billing information: Address Line 1: 502 Gordon house way

Country: United States

State: DE

City: MIDDLETOWN

ZIP Code: 19709

Reply

Forward



I have not Receiv my 2025 business yet

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U.S. Department
of Transportation
Federal Motor Carrier
Safety Administration

OMB No: 2126-0008
Expiration: 05/31/2024
Form MCS-90 Revised 06/03/2021

USDOT Number: 3002851 Date Received: _____

**FORM MCS-90
ENDORSEMENT FOR MOTOR CARRIER POLICIES OF INSURANCE FOR PUBLIC LIABILITY
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Issued to GOLDRUSHVI TRUCKING LLC

(Motor Carrier name)

of 502 GORDON HOUSE WAY MIDDLETOWN, DE 19709

(Motor Carrier state or province)

Dated at 09:27 AM on this 7th day of February, 2024

Amending Policy Number: CA 06503621 Effective Date: 02/07/2024

Name of Insurance Company: United Financial Cas Co

Countersigned by: _____

Authorized company representative

The policy to which this endorsement is attached provides primary or excess insurance, as indicated for the limits shown (check only one):

- This insurance is primary and the company shall not be liable for amounts in excess of \$750,000 for each accident.
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BODILY INJURY means injury to the body, sickness, or disease to any person, including death resulting from any of these.

PROPERTY DAMAGE means damage to or loss of use of tangible property.

ENVIRONMENTAL RESTORATION means restitution for the loss, damage, or destruction of natural resources arising out of the accidental discharge, dispersal, release or escape into or upon the land, atmosphere, watercourse, or body of water, of any commodity transported by a motor carrier. This shall include the cost of removal and the cost of necessary measures taken to minimize or mitigate damage to human health, the natural environment, fish, shellfish, and wildlife.

PUBLIC LIABILITY means liability for bodily injury, property damage, and environmental restoration.

502 Gordon house way, Middletown, Delaware 19709

Telephone 302-932-8219

Driver Requirements

I: work schedule will require some weekends.

II: Trucks must be kept clean. When hauling contaminated soil bodies should be shoveled or swept after each load. Tail gates must be kept clean and free of debris.

III: Driver wear appropriate clothing and shoes for the job.

IV: Driver must comply with all safety rules and regulations while on customer's site, i.e. hard hats, Safety glasses etc.

V: Drivers must inspect truck at the beginning and end of every shift:

- 1) Check Fluids
- 2) Check Tires
- 3) Check for leaks
- 4) Check light
- 5) Check for air leaks
- 6) Check Hydraulic old
- 7) Check springs
- 8) Check tarp for rips or binding
- 9) Make sure you have any permits or paperwork you will need for the day.

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- 1) Company you worked for and where you went.
- 2) If hourly, hourly tickets must be filled out and signed by the customer.
- 3) If hauling by the ton, write tons, tickets number and place.
- 4) Must keep track of the states you drove in and mileages.
- 5) Must fuel up every day, enter gallons, and price where purchased.
- 6) Write down everything you can't fix, including repairs, flats and services
- 7) Keep you hourly log up to date

I have read and understand the Driver Requirements.

Signature Tam Tsai Date _____

Applied stickers take 24 hours to reach full tack

0199252741

WH20199
EXP DEC 2025

VIN 5KKMAVDV5LLL62274

PA WTSP

LECOX

DEP-S25B

APPLICATION INSTRUCTIONS

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

0199252741

WH20199
EXP DEC 2025

VIN 5KKMAVDV5LLL62274

PA WTSP

LECOX

DEP-S25B

CAUTION! REMOVE STICKERS CAREFULLY.



COMMONWEALTH OF PENNSYLVANIA
Waste Transportation Safety Program
Written Authorization

0199252741

Phone No. (302) 932-8219

GOLDRUSHVI TRUCKING, LLC
WILMA TSOI
502 GORDON HOUSE WAY
MIDDLETOWN, DE 19709-9973

VIN# 5KKMAVDV5LLL62274
WH20199
Expires Dec 2025

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

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



Driver Training

1. Driver must meet and comply with all STATE FEDERAL, and D.O.T. requirements.
2. Driver must be aware of the material they are hauling and know what to do in case they come into contact with the material.
3. Driver must be certain that that the truck they are assigned to has all items listed on SAFETY EQUIPMENT LIST.
4. Driver must understand and follow EMERGENCY AND CONTROL PLANK.
5. Driver must understand and understand and comply with DRIVER REQUIRMENTS.

I have read and understand DRIVER TRAINING.

Signature Jan Tai Date 05-10-24

