RECEIPT DA	re 12/11/24	No. 628164
RECEIVED FROM Trash P	LLC	\$ 350,00
Three hundred	Afty and 35	DOLLARS
OFOR DE-SU	1936	
PAYMENT	EX FROM 1505	то
BAL. DUE	DIT NI M	3-11



### RECEIVED

DEC 11 2024

### 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

☐ Five Years - \$275.00

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

Type of Permit						
New – <b>SCRAP TIRES ONLY</b> Submit a check or money order, payable to the "State of Delaware," in the amount of \$75.00.						
☐ New – <b>ALL OTHERS</b> Submit a check or money order the amount of \$350.00.	er, payable to the "State of Delaware" in					
Renewal: Permit # DE-SW- 1956Exp	iration Date 03/31/2025					
Please indicate the term for which you desire your permit to be issued. Submit a check or mone order, payable to the "State of Delaware," for the indicated permit fee.						
SCRAP TIRES ONLY	ALL OTHERS					
☐ One Year - \$75.00	☑ One Year - \$350.00					
☐ Two Years - \$125.00	☐ Two Years - \$650.00					
☐ Three Years - \$175.00	☐ Three Years - \$950.00					
☐ Four Years - \$225.00	☐ Four Years - \$1250.00					
☐ Five Years - \$275.00	☐ Five Years - \$1550.00					

2.	Rele	ase to Public						
	Do y Dela	you wish to be included on the list of transporters that is provided to persons requesting a list of ware permitted solid waste transporters?  Yes  No						
3.	Com	pany Information						
	Com	pany Name TrashPro LLC						
7		A 11	The ire	_				
Loc		Address:	Mailing Address:	_				
	131	0 E 8 <sup>th</sup> St, Wilmington DE 19801	PO Box 3543 Wilmington, DE 19807					
Co	ntact:	Kevin Shegog Tit	ile: President					
			ax:					
E-n	nail: k	kevin@trashpro.com						
24	hr Em	ergency Contact Phone:						
4.	Com	pany Ownership Information						
	(a).	(a). Please indicate the company type:  ☐ Proprietorship ☐ Partnership ☐ Corporation - If company is a corporation, indicate city, state, and date of incorporation.						
		City:Sta	ate:Date:					
		☐ Municipality ☐ Public institution						
		✓ Limited Liability Corporation (LLC) St	tate: Delaware					
		Other: (must specify)						
	(b).		fficer, attach a list with name, title, mailing addre					
		Attachment A						
	(c).	If company is owned by or affiliated with a address & mailing address, and % ownersh	a parent company, attach parent company name, nip.					
		☐ Attachment  ✓ No parent company						

Solid Waste Transporter Application Page  $\bf 3$  of  $\bf 6$ 

5.	Company locations in Delaware
	List name and <u>street</u> address of each company location, including freight terminals, within the State of Delaware.
	Attachment B  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 <i>Regulations Governing Solid Waste</i> 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

Solid Waste Transporter Application Page  ${\bf 4}$  of  ${\bf 6}$ 

8.	Treatment, Storage, and Disposal Facilities									
	(a).	Do you cross state lines with the waste?								
	(b).	Identify in an attachment <i>all</i> solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities and Transfer Stations to which the waste will be transported.								
		<ul> <li>☑ Delaware Solid Waste Authority locations: (attachment) </li> <li>☑ Clean Earth of New Castle, Inc. (thermal treatment facility for PHC-soils)</li> <li>☑ Delaware Recyclable Products, Inc. (dry waste, commercial, industrial, and PHC-soils)</li> <li>☑ Other in-state solid waste facilities, including private facilities: (attachment) </li> <li>☑ Out of state solid waste TSD facilities: (attachment) </li> </ul>								
9.	Othe	er Transporter Permits								
	(a).	Attach a copy of your home state solid waste transporter permit. (N/A if Delaware is your home state.)								
		☐ Attachment  Not applicable-No transporter permit required for these solid waste types in our home state.								
	(b).	List solid waste transporter permits held in other states.								
		☐ Attachment  No transporter permits in other states								
	(c).	Indicate your Federal DOT number and Motor Carrier number:								
		DOT#4013702 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.	Proo	of of Financial Responsibility								
	The transporter must submit proof of financial responsibility as established in section 7.2.4 of Delaware's <i>Regulations Governing Solid Waste</i> . 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 <b>Department of Natural Resources and Environmental Control, Compliance and Permitting Section</b> 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). (c).	Do you transport in the State of Delaware <u>Only</u> (Intrastate)?  ☐ Yes ☐ No 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 + MC\$	S-90 🗌	\$350,000.00
Commercial Waste	\$750,000.00 + MC	S-90 🗹	\$350,000.00
Industrial Waste	\$750,000.00 + MC	S-90 🗹	\$350,000.00
Dry Waste	\$750,000.00 + MCS	S-90 🔲	\$350,000.00
Ash	\$750,000.00 + MCS	S-90 🗌	\$350,000.00
Infectious Waste	\$1,000,000.00 + MCS	S-90 🔲	\$750,000.00 + MCS-90
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MC\$	S-90 🔲	\$350,000.00
Asbestos	\$1,000,000.00 + MCS (For Hire & Privat		\$350,000.00
Scrap Tires Only	\$350,000.00		\$350,000.00

### 11. Spill Control and Safety

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

Spill Control Plan: Attachment D

### 12. Driver Training

**IN SUMMARY OR OUTLINE FORM**, describe the procedures that your company takes to ensure that all company drivers are safe and competent drivers. Small owner-operators may describe their years of experience and driving record in lieu of a formal program.

- (a). Include requirements for special licenses (e.g. CDL, including any special endorsements), any special training received, including dates training was received (e.g. asbestos training), and any ongoing company programs. (e.g. weekly safety meetings or annual refresher courses);
- (b). Include your company procedure for periodic checks of the driver's records for moving violations, and your company policy on progressive counseling/discipline based on points;
- (c). Describe how drivers are instructed in the following:
  - (i) Knowledge of proper handling procedures for the type of solid waste being transported.
  - (ii) Familiarity with the approved accidental discharge containment plan. (Spill Control Plan)
  - (iii) Familiarity with the conditions of the solid waste transporter's permit.

~	Driver	Training,	attachment	Е

#### 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?

Vehicle Operator Information

Form W-2

Form W-2

Form 1099-Misc

### 15. Environmental Record

Other

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				
V	No violations v	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 _	Keiden	Date 12/06/2024	
Print Name Ko	evin Shegog	Title President	

## **ATTACHMENT A**

Kevin C. Shegog - President

85 %

Charlotte E. Shegog

15%

## **ATTACHMENT B**

Yard – 1310 E 8<sup>th</sup> St Wilmington, DE 19801

Mailing – PO Box 3543 Wilmington DE 19807

## **ATTACHMENT C**

## **Delaware Solid Waste Authority Locations:**

- Cherry Island
- Pine Tree Corners
- Sandtown
- Milford Transfer
- Jones Crossroads
- DRC

## **Other In-State Facilities**

- Revolution Recovery
- Diamond Recycling
- Cirillo Materials
- RMR Recycling

### ATTACHEMENT D: TRASHPRO SPILL CONTROL PLAN

- (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. Protective eye glasses
- (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. Required full DOT pre-trip inspection via electronic tablet prior to leaving.
  - 2. Driver will perform a complete DOT post-trip inspection via electronic tablet prior to completion
- (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: Kevin Shegog Phone:302-444-8444 or 302-275-8263 after hours

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

### ATTACHMENT E

### **Driver Training and Safety Program Summary**

- 1. Trashpro drivers are not hired for regular employment until the following matters are satisfactorily addressed:
  - a. Review and confirmation of information provided by employee on their employment application form.
  - b. Completed DOT Driver Qualification File
  - c. Physical examination
  - d. Pre-employment Drug and Alcohol testing including Clearinghouse
  - e. Eligibility for employment in the United States has been satisfied.
- Refuse vehicle drivers must possess a valid Commercial Drivers License with the State of Delaware, verified by the company. Additionally, all drivers and other personnel who are required to drive refuse and other vehicles on company business must produce a valid driver's license for verification by the company.
- 3. All employees are required to take, and pass, a pre-employment drug and alcohol test consistent with federal DOT regulations. Periodic, random and post accident testing is also conducted in accordance with federal DOT regulations. If any situation arises with reasonable cause, an employee may be required by the company to have an additional drug and /or alcohol test.
- 4. Employees are responsible for reporting any changes in their driving record. Company work rules mandate that any employee "shall report any accidents, incidents, or other problems that result in points against their driver's license within 24 hours after occurrence to their Manager in writing." Failure to adhere to company Work Rules may result in disciplinary action, up to and including termination.
- 5. Drivers' license checks are conducted annually on all company drivers.
- 6. Safety meetings are held on a routine basis to address overall safety performance; injury/incident data and measures to prevent reoccurrence, hazard communication, and other regulatory mandates and procedures.

# ATTACHMENT F

# **Vehicle Operators**

- Kevin Shegog
   Thomas Ward

## **ATTACHMENT G**

Make-Model-Y	<u>Type</u>	VIN#	License/State	<b>GVWR</b>	Ownership
Mack GU813 2	022 Rollof	f 1M2GR2GC3NM02846	6 DE	79000	Trashpro
Mack GU813 2	023 Rollof	f 1M2GR3GC5PM036299	) DE	79000	Trashpro



### CERTIFICATE OF LIABILITY INSURANCE

12/28/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

		ertificate does not confer rights t	o trie	cert	incate noticer in fied of st			•			
PRODUCER Commercial Insurance Associates, LLC 103 Powell Court, Ste 200 Prophysical TN 37027					CONTACT NAME:  PHONE (A/C, No, Ext): 615-515-6000  E-MAIL ADDRESS: administrator@com-ins.com						
Brentwood TN 37027				ADDRESS					-2000-000-000-000-000-000-000-000-000-0		
									DING COVERAGE		NAIC#
INSU	RED				TRASPRO-01	INSURER		pecialty Insu	rance Company		16188
		Pro LLC									
		k 3543				INSURER					
VVII	min	gton DE 19807				INSURER					
						INSURER	E:				
						INSURER	F:				
					NUMBER: 455019355				REVISION NUMBER:		
IN	DIC/ ERTI	S TO CERTIFY THAT THE POLICIES NTED. NOTWITHSTANDING ANY RE FICATE MAY BE ISSUED OR MAY I ISIONS AND CONDITIONS OF SUCH	QUIR	EMEI	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY ED BY T	CONTRACT HE POLICIES	OR OTHER DESCRIBED	DOCUMENT WITH RESPE	CT TO V	VHICH THIS
INSR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
A	Х	COMMERCIAL GENERAL LIABILITY	INSD	****	MIW-BUR21C027-148		12/31/2023	12/31/2024	EACH OCCURRENCE	\$ 1,000.	000
	2.0	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000	
									MED EXP (Any one person)	\$5,000	
									PERSONAL & ADV INJURY	\$ 1,000,	000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000.	000
	Χ	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000,	000
		OTHER:								\$	
A	AUT	OMOBILE LIABILITY	Υ	Υ	MIW-BUR21C027-148		12/31/2023	12/31/2024	COMBINED SINGLE LIMIT	\$ 1,000,	000
		ANY AUTO							(Ea accident) BODILY INJURY (Per person)	s	
		OWNED X SCHEDULED							BODILY INJURY (Per accident)	\$	
	Х	HIRED Y NON-OWNED							PROPERTY DAMAGE	\$	
	^	AUTOS ONLY							(Per accident)	\$	
_		UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
		DED RETENTION\$							AGGILGATE	\$	
	WOR	KERS COMPENSATION							PER OTH-	9	
		EMPLOYERS' LIABILITY PROPRIETOR/PARTNER/EXECUTIVE					21		STATUTE ER	e	
	OFFI	CER/MEMBEREXCLUDED?	N/A						E.L. EACH ACCIDENT	\$	
	If yes	datory in NH) s, describe under							E.L. DISEASE - EA EMPLOYEE		
	DÉS	CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  The certificate holder is included as additional insured where required by written contract. A waiver of subrogation applies where required by written contract.										
CE	) T ! C	ICATE HOLDED				C41:01	I I ATION				
CEI	KIII	ICATE HOLDER				CANCE	ELLATION				
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  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										
		Dover DE 19901				U	9				

### Davis, DaQuan (DNREC)

From:

Kevin Shegog < kevin@trashpro.com> Sunday, December 15, 2024 12:15 PM

Sent: To:

WHStransporters

Subject:

Re: Delaware Solid Waste Transporter Permit Application

Hi - please see below -

- PA and MD
- Section 9 No we do not transport any of those
- Section 10 No we do not transport
- Section 12 Kevin Shegog 23 years experience, Thomas Ward 30 years experience
- Section 13 '23 Mack C23824, '22 Mack DB10FQ

Please let me know if you need anything else. If you could confirm received that would be great, Thank you.

Best,

Kevin Shegog | President

p: 302-444-8444 c: 302-275-8263

w: www.trashpro.com



From: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> on behalf of WHStransporters

<WHStransporters@delaware.gov>

Sent: Thursday, December 12, 2024 12:10 PM To: Kevin Shegog <kevin@trashpro.com>

Subject: Delaware Solid Waste Transporter Permit Application

Hi Mr. Shegog,

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:

- What other states do you cross with waste?
- Section 9- 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 #).
- **Section 10** For-hire means transporting passengers, regulated property, or household goods owned by others for compensation. Do you transport any of the following? If so, please provide an MCS-90 endorsement form.

- **Section 12** Please provide the years of experience in truck driving for Kevin Shegog and Thomas Ward. Also, what is the current state of each driving record?
- **Section 13** The license plate numbers are missing on the vehicle list u submitted please provide them. Please provide the information requested above via e-mail within five (5) days.

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
- 9 89 Kings Hwy SW, Dover, DE 19901
- dnrec.delaware.gov





