RECEIP	T DATE_	01/28/25	No.	927907
RECEIVED FROM MS	Trac	isport LLC	\$	350.00
Three hundre	2 84	ty and is -		DOLLARS
OFOR RENT	SW-	2111 App		
ACCOUNT	CASH	1019		
PAYMENT	ORDER ORDER	FROM 861	то	
BAL. DUE	CREDIT	BY_ M.M.		3-11



RECEIVED

JAN 28 2025

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

1.

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

SOLID WASTE TRANSPORTER PERMIT APPLICATION

Language Preference: Spanish

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 - SCRAP TIRES ONLY Submit a check Delaware," in the amount of \$75.00.	k or money order, payable to the "State of
✓ New – ALL OTHERS Submit a check or monthe amount of \$350.00.	ey order, payable to the "State of Delaware" in
☐ Renewal: Permit # DE-SW	Expiration Date
Please indicate the term for which you desire you order, payable to the "State of Delaware," for the	our permit to be issued. Submit a check or money ne 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

Solid Waste Transporter Application Page 2 of 6

2. Release to Public						
Do you wish to be included on the list of transporters that is provided to persons requesting a list of Delaware permitted solid waste transporters? X Yes \square No						
3. Company Information						
Company Name MSC Transport LL	.C					
Location Address:	Mailing Address:					
7270 Leonard St	Same					
Philadelphia PA 19149						
Contact: Maday Caravera T	itle: Owner					
(786) 503 2078	ax:					
E-mail: msctransportllc6@gmail.com						
24 hr Emergency Contact Phone						
4. Company Ownership Information						
 (a). Please indicate the company type: ☐ Proprietorship ☐ Partnership 	ation, indicate city, state, and date of incorporation.					
☐ Municipality ☐ Public institution ☐ Limited Liability Corporation (LLC)						
(b). For each Owner, Partner, or Corporate (Officer, attach a list with name, title, mailing address, all stockholders owning greater than 5% outstanding					
Attachment						
(c). If company is owned by or affiliated with address & mailing address, and % owners	a parent company, attach parent company name, ship.					
☐ Attachment No parent company						

Ownership List Name Title Mailing Address DOB % Own						
Maday Caravera	Owner	7270 LEONARD ST PHILADELPHIA, PA 19149-1314		100%		

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

5. Company locations in Delaware

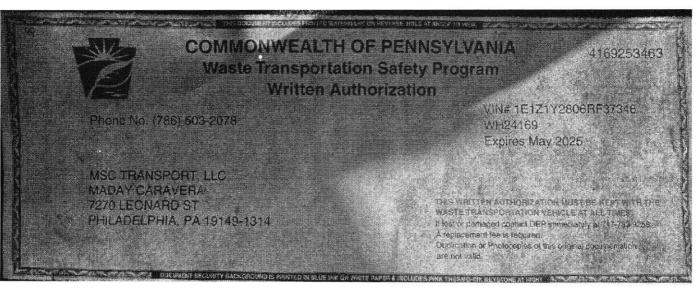
	List name and \underline{street} address of each company location, including freight terminals, within the State of Delaware.
	Attachment No Delaware locations
6.	Company Affiliates
	List name, location and mailing addresses, nature of business relationship of all company Affiliates, which affiliates 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 (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 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.	Trea	tment, Storage, and Disposal Facilities							
	(a).	Do you cross state lines with the waste? X Yes \square No							
	(b).	Identify in an attachment all solid waste Treatment, Storage, I Facilities and Transfer Stations to which the waste will be transfer.							
		☐ Delaware Solid Waste Authority locations: (attachment)☐ Clean Earth of New Castle, Inc. (thermal treatment facilit☐ Delaware Recyclable Products, Inc. (dry waste, commerc☐ Other in-state solid waste facilities, including private facilities out of state solid waste TSD facilities: (attachment)	ty for PHC-soils) rial, industrial, and PHC-soils) lities: (attachment)						
9.	Oth	er Transporter Permits							
	(a).	Attach a copy of your home state solid waste transporter permithome state.)	nit. (N/A if Delaware is your						
		✓ Attachment DEP PA Not applicable-No transporter permit required for these so	lid 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	er:						
		DOT# 4049838 MC# 1534333	3						
		□ 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.	Proc	of of Financial Responsibility							
	Dela Insur Depa	transporter must submit proof of financial responsibility a ware's <i>Regulations Governing Solid Waste</i> . This proof may rance, with MCS-90 endorsement where applicable, or burtment. (The Certificate of Insurance must identify the Depart ronmental Control , Compliance and Permitting Section as	be established by a Certificate of y other means approved by the ment of Natural Resources and						
		Annual Carling in the Carlo							
	(a).	Are you for-hire in interstate commerce? Yes No (F business of transporting, for compensation or payment, wastes than your own.)	or-Hire means you are in the generated by a company other						

DEP PA - Permit







CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/15/2025

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 liquid such endorsements.

If SUBROGATION IS WAIVED, subject to the this certificate does not confer rights to the	certi	ms ar ficate	holder in lieu of s	ne polic such en	ey, certain p idorsement	c(s).	require an endorseme	nt. A sta	tement on
PRODUCER				CONTA	CT	a 1/2/2/2019	es Customer and Agent Ser	vicina	
Fino Services LLC 6193 HIGHWAY BLVD #205, KATY, TX 77494				PHONE FAX					
0193 HIGHWAT BEVD #203, RATT, TA 17494				(A/C, No, Ext): 1-800-444-4487 (A/C, No): E-MAIL ADDRESS: progressivecommercial@email.progressive.com					
				ADDRE					NAIC #
				INSURER(S) AFFORDING COVERAGE				NAIC #	
INSURED					INSURER A: United Financial Casualty Company INSURER B:			11770	
MSC TRANSPORT LLC	,			INSURE					
7270 LEONARD ST PHILADELPHIA, PA 19149				INSUR					
				INSURI					
				INSUR					
COVERAGES CERTIFIC	ATE	AH IMI	BER: 283371229168			137	REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF								THE POLL	CY PERIOD
INDICATED. NOTWITHSTANDING ANY REQUIR CERTIFICATE MAY BE ISSUED OR MAY PERT EXCLUSIONS AND CONDITIONS OF SUCH POLICE	REMEN AIN, IES. L	IT, TE THE IN IMITS	RM OR CONDITION SURANCE AFFORD	OF AN	Y CONTRAC	T OR OTHER	DOCUMENT WITH RESI	PECT TO V	VHICH THIS
INSR LTR TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER		POLICY EFF MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIN	MITS	
COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	- Allerton Children - Inc.
CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
							MED EXP (Any one person)	S	
							PERSONAL & ADV INJURY	\$	
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	
POLICY JECT LOC							PRODUCTS - COMP/OP AGO	\$ \$	
OTHER:							COMBINED SINGLE LIMIT	\$	-
ANY AUTO							(Ea accident)	\$1,000,000	0
A OWNED X SCHEDULED AUTOS ONLY	N	.	070045060		04/40/0004	0.4/40/0000E	BODILY INJURY (Per person)	\$	
HIRED NON-OWNED AUTOS ONLY	N	N	979915060		04/12/2024	04/12/2025	PROPERTY DAMAGE (Per accident)	-	
AUTOS ONLY AUTOS ONLY							(Per accident)	\$	
UMBRELLA LIAB OCCUR							EACH OCCURRENCE	S	
EXCESS LIAB CLAIMS-MADE							AGGREGATE	s	
DED RETENTION \$								s	
WORKERS COMPENSATION	-						SERTUTE PIH-	-	
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBEREXCLUDED?	N/A						E.L. EACH ACCIDENT	s	
(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYE	E\$	
DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	s	
See ACORD 101 for additional coverage details.							\$		
A	N	N	979915060		04/12/2024	04/12/2025			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES	(ACOR	D 101,	Additional Remarks Sch	nedule, m	ay be attached	If more space is	required)		
							-		
CERTIFICATE HOLDER				CANC	ELLATION		Dayon		
Department of Natural Resource and				SHOU	JLD ANY OF EXPIRATION	THE ABOVE D	ESCRIBED POLICIES BE EREOF, NOTICE WILL	CANCELLE	D BEFORE
Enviromental Control 89 Kings Highway Dover, DE 19901				ACCC	ORDANCE WI	TH THE POLIC	CY PROVISIONS.	DELI	VERED IN
				AUTHOR	RIZED REPRES	ENTATIVE			
			TAL INC.			1	Mark Part		

AGENCY CUSTOMER ID:	
1.00 #:	



Insurance coverage(s)

Uninsured Motorist Bodily Injury Underinsured Motorist Bodily Injury

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCT		NAMED INSURED	
Fino Services LLC	MSC TRANSPORT LLC 7270 LEONARD ST PHILADELPHIA, PA 19149		
POLICY NUMBER			
979915060			
CARRIER	NAIC CODE		
United Financial Casualty Company 11770		EFFECTIVE DATE: 04/12/2024	
ADDITIONAL REMARKS			
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACOF	RD FORM,		
FORM NUMBER: 25 FORM TITLE: Certificate of Liabili	ty Insurance		
Additional Coverages			
AUUIIUUSI I VALSUSE			

\$1,000,000 Combined Single Limit Non-Stacked

\$1,000,000 Combined Single Limit Non-Stacked

\$1,000 per Mo/\$5,000 Max - w/o Workers Comp

Limits

Income Loss Medical Expense \$5,000 w/o Workers Comp **Description of Location/Vehicles/Special Items**

Scheduled autos only	
2001 FREIGHTLINER COLUMBIA	1FUJA6CG31LJ96117
Comprehensive	\$1,000 Ded
Collision	\$1,000 Ded
2007 FREIGHTLINER CONVENT	IONAL 1FUJA6CG87LZ21512
Comprehensive	\$1,000 Ded

Collision \$1,000 Ded 2030 Non-owned Attached Trailer

Liability coverage may not apply to all scheduled vehicles.

2030 Non-owned Attached Trailer

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

	FOR-HIRE INTERSTAT		ALL OTHERS
Residential Waste	\$750,000.00 + M	CS-90 □	\$350,000.00
Commercial Waste	\$750,000.00 + M	CS-90 □	\$350,000.00
Industrial Waste	\$750,000.00 + M	CS-90 □	\$350,000.00
Dry Waste	\$750,000.00 + M	CS-90 ☑	\$350,000.00
Ash	\$750,000.00 + M	CS-90 □	\$350,000.00
Infectious Waste	\$1,000,000.00 + M	CS-90 □	\$750,000.00 + MCS-90
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + M	CS-90 □	\$350,000.00
Asbestos	\$1,000,000.00 + M (For Hire & Priv		\$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	
	Spin	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, attach 	hment
---	-------

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

Issued to MCC TRANSPORT LLC

Federal Motor Carrier Safety Administration

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

USDOT Number: 4049838	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**

133ded to MSC HANSI ON LEC	
	(Motor Carrier name)
of <u>7270 LEONARD ST PHILADELPHIA</u> , PA 19149	
	(Motor Carrier state or province)
Dated at 03:15 PM on this 14th day of January, 2025 Amending Policy Number: CA 979915060 Effective Date: Name of Insurance Company: United Financial Cas Co	04/23/2024
	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):
	be liable for amounts in excess of \$750,000 for each accident. be liable for amounts in excess of \$ for each accident in excess of the
	ministration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said appropriate that provides the said appropriate that the said is a property of the said appropriate that the said appro

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 vehide, 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.



The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a motor carrier of property, with Sections 29 and 30 of the Motor Carrier Act of 1980 and the rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA).

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon,

or violation thereof, shall relieve the company from liability or from the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of anyone accident shall not operate to reduce the liability of the company for the payment of final judgments resulting from any other accident.

SCHEDULE OF LIMITS - PUBLIC LIABILITY

Type of Carriage		Commodity Transported	January 1, 1985
(1)	For-hire (in interstate or foreign commerce, with a gross vehicle weight rating of 10,000 or more pounds).	Property (nonhazardous)	\$750,000
(2)	For-hire and Private (in interstate, foreign, or intrastate commerce, with a gross vehicle weight rating of 10,000 or more pounds).	Hazardous substances, as defined in 49 CFR 171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons; or in bulk Division 1.1, 1.2, and 1.3 materials, Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR 173.403.	\$5,000,000
(3)	For-hire and Private (in interstate or foreign commerce, in any quantity; or in intrastate commerce, in bulk only; with a gross vehicle weight rating of 10,000 or more pounds).	Oil listed in 49 CFR 172.101; hazardous waste, hazardous materials, and hazardous substances defined in 49 CFR 171.8 and listed in 49 CFR 172.101, but not mentioned in (2) above or (4) below.	\$1,000,000
(4)	For-hire and Private (In interstate or foreign commerce, with a gross vehicle weight rating of less than 10,000 pounds).	Any quantity of Division 1.1, 1.2 or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403.	\$5,000,000

^{*} The schedule of limits shown does not provide coverage. The limits shown in the schedule are for information purposes only.

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:
 - Driver Pre-Trip/ Inspection Checklist (Driver will check vehicle and fill out the driver Pre-Trip/Post-Trip Inspection Checklist, as required by the D.O.T. Federal Motor Carrier Safety Regulations)
- (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 Nolvin Neiva Phone: Legal Trucking (215) 745-5232

(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.

DRIVER TRAINING

MSC Transport LLC

The drivers are required to comply with FMCSA Driver Qualification File requirements for Commercial Driver's License.

BEFORE OPERATING THE VEHICLE

New employee orientation (NEO) training:

- · Company driver safety policy.
- · Insurance requirements.
- · Sample cell phone/texting policy
- SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

Motor vehicle records review:

- Employee motor vehicle records report (MVR) Annually
- · Consequences of violations or accidents

Basic driver safety training:

- · Pre-trip inspection log
- · Emergency equipment kit
- · Local driving environment and inclement weather conditions
- Driver fitness to drive (alert, sober, focused, distraction free)
- · Driving behavior expectations
- · Incident reporting procedures
- Basic defensive driving techniques
- Standard vehicle safety features (seatbelts, brakes, anti-lock brakes, e-brake, airbags, stability control)
- · Reporting vehicle maintenance issues

Specific vehicle safety systems - Transport Solid Waste

- Drivers are instructed to follow disposal facilities rules and instructions.
- Drivers are instructed of proper handling procedures for accidental discharge.
- Drivers are instructed to ensure safe operation of the vehicle during transportation of the solid Waste.

FIRST TRIP

- Ride-along driving assessment and coaching
- · When starting the job and as needed
- Use a ride-along risk assessment worksheet as a guide
- · Demonstrate vehicle safety systems
- Coach to address risky behaviors

Within Six Months

- · Comprehensive driver training
- Describe the three main categories of collisions:
 - Driver behavior
 - Environmental conditions (roadways, weather, other road users)
 - Vehicle conditions (brakes and tires)
- · Include essential elements of defensive driver training
 - Focus on driver actions to spot hazards
 - Learn to anticipate dangerous situations
 - Combine classroom and computer learning with practical, behind-the-wheel training
- · Tailor topics based on driver assessment and/or telematics report
- Describe the top five causes of crashes:
 - Speeding
 - Aggressive driving
 - Drugs and alcohol
 - Distractions
 - · Bad weather
- · Cover vehicle safety best practices guide
- · Include journey management planning
- · Demonstrate vehicle safety systems

Periodic

- Classroom review every two years
- Spill Control Plan for Solid Waste Haulers review
- · Remedial training for high-risk drivers when
 - Vehicle monitoring systems show unsafe driving behaviors
 - Driver is involved in a collision
 - MVR shows a history of moving vehicle violations

Driver List

Name

- Nolvin Audiel Suchite Leiva
- Pedro Lopez De La Coba

Driver's License



- PA

- PA



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.)

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 ☐ Yes Is a list of all vehicle operators attached? 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 _____ Maday Caravera Date 01-21-2025 Print Name Maday Caravera Title Owner

^{**} A legal owner or corporate officer must sign the application **

Signature Certificate

Reference number: BUGC9-BNHVF-TKIXJ-BKKPA

Signer Timestamp Signature

Maday Caravera

Shared via link

 Sent:
 21 Jan 2025 21:36:56 UTC

 Viewed:
 21 Jan 2025 21:37:19 UTC

 Signed:
 21 Jan 2025 21:37:36 UTC

Maday Caravera

IP address: 108.52.14.253 Location: Trevose, United States

Document completed by all parties on:

21 Jan 2025 21:37:36 UTC

Page 1 of 1



Signed with PandaDoc

PandaDdc is a document workflow and certified eSignature solution trusted by 50,000+ companies worldwide.



VEHICLE INFORMATION - See Item 13 of the application.

Use this form, or other format which provides the same information, to answer the VEHICLE IDENTIFICATION requirement of the application. List all vehicles, both motorized and container (if a license plate is required on the container) to be used to haul solid waste in the state of Delaware. In addition, list the vehicle owner, owner's address, and domicile address if different from the company address provided in the application.

MAKE MODEL WEAR			LICENSE PLATE # and STATE	mfgr's	OWNERCHIR
MAKE - MODEL - YEAR	TYPE	VIN # (Serial Number)	of REGISTRATION	GVWR	
FREIGHTLINER / 2001	TT	1FUJA6CG31LJ96117	AG73518 PA	80000	NSL TRANSPORTATION INC
FREIGHTLINER / 2007	Π	1FUJA6CG87LZ21512	AH20010 PA	80000	NSL TRANSPORTATION INC
_					

Note:	This Lease Agreement should be maintained in the	Equipment during the term of the Agreement.			
1.	I, MSC TRANSPORT LLC	(Carrier/Registrant)			
	Address: 7270 LEONARD STPHILADELPHIA, PA 19	149, and			
	NSL TRANSPORTATION INC	(Equipment Owner)			
	are parties to a written Lease Agreement (Agreement), whereby the Equipment Owner has leased to the Carrier				
	certain motor vehicle equipment listed below, own	ed and controlled by the Equipment Owner, whereby the			
	Equipment Owner is providing the Carrier as operator	or or operators of the Equipment for the purpose of loading,			
	transporting and unloading freight.				
п.	The Original Agreement is on file at the Carrier's Ge	neral Office. A copy of this Lease Agreement and receipt for			
	the Equipment must be carried on the Equipment as	required by 49 CFR §376. Carrier verifies that the Equipment			
	is being operated by the Carrier, pursuant to the term	s of the Agreement.			
III.	Equipment Owner/Equipment Information				
	Name: NSL TRANSPORTATION INC	Phone #: <u>5616337872</u>			
	dba:	Contact: NOLVIN LEIVA			
	Address: 6828 ROOSEVELT BLVD	FEIN: <u>820663404</u>			
	PHILADELPHIA, PA 19149				
	Year: 2001 Make: FREIGHTLINER VIN:	1FUJA6CG31LJ96117			
	2007 FREIGHTLINER	1FUJA6CG87LZ21512 89			
IV.	Duration of Lease Agreement				
	The Lease Agreement shall begin on the date below and shall begin begin on the date below and shall be s	hall remaing in effect for one year and renews continously every 30 da			
	R CARRIER/REGISTRANT	EQUIPMENT OWNER			
		By:			
	5/31/2024	Date:			
	1534333				
USDO ⁻	T #: _4049838				

Davis, DaQuan (DNREC)

From:

Legal Trucking <FERNANDA@legaltrucking.com>

Sent:

Monday, February 17, 2025 2:51 PM

To:

Davis, DaQuan (DNREC)

Subject:

Fw: Incomplete Solid Waste Transporter Permit Application (SW2111)

Attachments:

Page 3-4 corrections.pdf; WASTE AND FACILITIES.pdf

Follow Up Flag:

Follow up

Flag Status:

Flagged

Hello DaQuan,

MSC Transport LL had issues with their email account and just now we had access to your request. We apologize for this late and we are willing to have a consideration to continue processing this renewal application.

Attached are pages 3 - 4 with the corrections and the Facility Location/Waste list.

Thanks for your attention!

Virginia / Pp. Legal Trucking

From: msctransportllc <msctransportllc6@gmail.com>

Sent: Monday, February 17, 2025 11:55 AM

To: Legal Trucking <FERNANDA@legaltrucking.com>

Subject: Fwd: Incomplete Solid Waste Transporter Permit Application (SW2111)

----- Forwarded message ------

From: WHStransporters < WHStransporters@delaware.gov>

Date: Tue, Jan 28, 2025 at 3:06 PM

Subject: Incomplete Solid Waste Transporter Permit Application (SW2111)

To: msctransportllc6@gmail.com <msctransportllc6@gmail.com>

Hello Ms. Caravera,

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 7- Please provide the waste types you're planning to transport.
- Section 8- What types of waste are you planning to take to DRPI?

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









Truck Listing

Truck 500

2020 International HX 615 Hooklift

License: DE CL34934

VIN: 3HTDSTZT6LN834606

GVW: 65,000 Blue/Black Tire Size:

Truck 502

2024 Peterbilt 567 Hooklift

License: CL123977

VIN: 1NPCL40XXRD667147

GVW: 65,000

White Tire Size:

Truck 503

2024 Peterbilt 567 Hooklift

License: CL123967

VIN: 1NPCL40X3RD667149

GVW: 65,000

White Tire Size:

Truck 504

2025 Kenworth T880 Hooklift

License: CL123975

VIN: 1NKZL40X5SJ127924

GVW: 65,000

White Tire Size: Truck 505

2024 Kenworth T880 Hooklift

License: CL124217

VIN: 1NKZL40X3SJ127923

GVW: 65,000

White Tire Size:

Truck 510

2014 Peterbilt 365 License: CL123601

VIN: 1NPSL70X4ED214861

GVW: 65,000

White Tire Size:

Portable Toilet Trucks

Truck PT-1

2007 Chevy C5500 License: C116208

VIN: 1GBE5C1207F408700

GVW: 19,500

White Tire Size:

Truck PT-2

2013 Ford F750

License: C56938

VIN: 3FRWF7FL5DV782671

GVW: 25,999

White Tire Size: 5. Company locations in Delaware

List name and \underline{street} address of each company location, including freight terminals, within the State of Delaware.
☐ Attachment No Delaware locations
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
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.	Trea	tment, Storage, and Disposal Facilities
	(a).	Do you cross state lines with the waste? X Yes \square No
	(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.
		 ☑ Delaware Solid Waste Authority locations: (attachment) Waste and Facilities ☐ 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.	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 DEP PA 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# 4049838 MC# 1534333
		NOTH TO TOO
		 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.
		☐ N/A If N/A, please provide an explanation, on the following page, as to why you are not
10.	Proc	☐ N/A If N/A, please provide an explanation, on the following page, as to why you are not
10.	The Dela Insur Depa	□ 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.	The Dela Insur Depa Envi	□ 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. If of Financial Responsibility transporter must submit proof of financial responsibility as established in section 7.2.4 of ware's Regulations Governing Solid Waste. This proof may be established by a Certificate of rance, with MCS-90 endorsement where applicable, or by other means approved by the artment. (The Certificate of Insurance must identify the Department of Natural Resources and

WASTE AND FACILITIES

WM - DRPI Landfill

198 Marsh Ln, New castle, DE 19720

- Residual Dry Waste from construction and demolition debris.