

# RECEIPT

DATE

03/07/25

No.

927931

RECEIVED FROM

The Bartley Corporation

\$

650.00

Six hundred fifty and <sup>00</sup>/<sub>100</sub>

DOLLARS

☐ FOR RENT☒ FOR

DE-SW-2070

ACCOUNT

PAYMENT

BAL. DUE

☐ CASH☒ CHECK☐ MONEY  
ORDER☐ CREDIT  
CARD

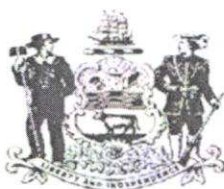
FROM

023633

TO

BY

M.M.



RECEIVED

MAR 07 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

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

**SOLID WASTE TRANSPORTER PERMIT APPLICATION**

Language Preference: English

**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- 2070 Expiration Date 6/30/2025

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 The Bartley Corporation

Location Address:	Mailing Address:
85 Engerman Ave Denton MD 21629	PO Box 1299 Ashton MD 20861

Contact: Andrew Bartley Title: Vice President

Business Phone: 410-943-3992 Fax: \_\_\_\_\_

E-mail: andrew@bartleycorp.com

24 hr Emergency Contact Phone [REDACTED]

## 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: \_\_\_\_\_ State: Maryland Date: 6/24/1971  
☐ Municipality  
☐ Public institution  
☐ Limited Liability Corporation (LLC) State: \_\_\_\_\_  
☐ Other: (must specify) \_\_\_\_\_

(b). For each Owner, Partner, or Corporate Officer, attach a list with name, title, mailing address, date of birth, and % ownership. Include all stockholders owning greater than 5% outstanding shares.

☒ Attachment \_\_\_\_\_

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

- ☐ Attachment \_\_\_\_\_  
☒ No parent company

**5. Company locations in Delaware**

List name and street address of each company location, including freight terminals, within the State of Delaware.

- ☐ Attachment \_\_\_\_\_  
☒ No Delaware locations

**6. Company Affiliates**

List name, location and mailing addresses, nature of business relationship of all company Affiliates, which affiliates are engaged in the business of waste transport, treatment, storage, disposal, recovery or reclamation. (Affiliated companies are defined as those companies owned by the same owners, corporate officers, or parent company.)

- ☐ Attachment \_\_\_\_\_  
☒ No affiliates

**7. Type of Waste to be Transported**

(a). Check all that apply. Refer to Delaware's *Regulations Governing Solid Waste* for definitions of waste categories.

- ☒ Residential waste  
☒ Commercial waste (from **non-manufacturing, non-processing** businesses and offices)  
☐ Industrial waste (from a manufacturing or industrial process)  
☐ Dry waste: ☐ construction/demolition debris  
☐ trees/stumps  
☐ other (must specify) \_\_\_\_\_  
☐ Ash: ☐ municipal incinerator  
☐ coal ash  
☐ other (must specify) \_\_\_\_\_  
☐ Infectious waste  
☐ Non-hazardous petroleum-hydrocarbon contaminated soils  
☐ Asbestos-containing waste  
☐ Scrap Tires

(b). Does your company collect and transport residential (household) waste from single family homes, condominiums and apartment complexes in Delaware? ☐ Yes ☒ No

(c). If you answered "YES" to question 7.b., above, does your company provide recycling services to those customers? ☐ Yes ☐ No ☒ N/A

(d). If you offer recycling services, does your company collect and transport the recyclables separately from the waste generated by your customers? ☐ Yes ☐ No

(e). If you offer recycling services, are the recyclables ultimately taken to an incinerator (waste-to-energy) or landfill? ☐ Yes ☐ No

### 8. Treatment, Storage, and Disposal Facilities

- (a). Do you cross state lines with the waste? ☐ Yes ☒ No
- (b). Identify in an attachment **all** solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities and Transfer Stations to which the waste will be transported.
- ☒ Delaware Solid Waste Authority locations: (attachment) \_\_\_\_\_
  - ☐ Clean Earth of New Castle, Inc. (thermal treatment facility for PHC-soils)
  - ☐ Delaware Recyclable Products, Inc. (dry waste, commercial, industrial, and PHC-soils )
  - ☐ Other in-state solid waste facilities, including private facilities: (attachment) \_\_\_\_\_
  - ☐ Out of state solid waste TSD facilities: (attachment) \_\_\_\_\_

### 9. Other Transporter Permits

- (a). Attach a copy of your home state solid waste transporter permit. (N/A if Delaware is your home state.)
- ☒ Attachment \_\_\_\_\_
  - ☐ 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# 464651 MC# \_\_\_\_\_

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

### 10. Proof of Financial Responsibility

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

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

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

	<b>FOR-HIRE INTERSTATE</b>	<b>ALL OTHERS</b>
Residential Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input checked="" type="checkbox"/>
Commercial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input checked="" type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input 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 \_\_\_\_\_

### 12. Driver Training

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

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

✓ Driver Training, attachment \_\_\_\_\_



### 13. Vehicle Identification

On the form provided with this application, list **MAKE, MODEL, YEAR, SERIAL NUMBER, LICENSE PLATE NUMBER, STATE OF REGISTRATION, MANUFACTURER'S GVWR and OWNERSHIP** of all vehicles used for the transportation of solid waste. You must list both motorized and container units. (If you maintain a list of company vehicles in a computer database you may submit a print out of the vehicles provided it contains the information requested herein.)

**NOTE: You must notify CAPS in writing of any changes to information contained within this application, such as additions or deletions of vehicles, in accordance with conditions of the issued permit.**

☒ Vehicle List Attached

### 14. Vehicle Operator Information

Is a list of all vehicle operators attached? ☒ Yes

What tax form do you submit to the IRS for your vehicle operators?

- ☒ Form W-2  
☐ Form 1099-Misc  
☐ Other

### 15. Environmental Record

List all criminal citations, arrests, convictions, civil or administrative violations, and civil or administrative enforcement actions, and the disposition(s) thereof for the violation or alleged violation of any environmental statute, regulation, permit, license, approval, or order, regardless of the state in which it occurred. Indicate whether it was a local, state, or federal violation or alleged violation. List all such items for the applicant, and if the applicant is other than an individual, for any employee while employed by the applicant, or any partner, officer, or director of the applicant as an individual or for any former business of such partner, officer, or director. For civil or administrative violations or alleged violations, list all such items for the last five (5) years from the date of the application. Information submitted under this section is subject to verification. **Failure to submit complete and accurate information may lead to permit denial or revocation.**

- ☐ Attachment \_\_\_\_\_  
☒ No violations within the specified time period

### 16. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, upon personal knowledge and information, the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

\*\*Signature  Date 3/4/2015  
Print Name Andrew Bartley Title Vice President

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

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.

[illegible]



## 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.

# THE BARTLEY CORPORATION

P.O. Box 1299 · Ashton, Maryland 20861



(301)384-2700

[BartleyCorp.com](http://BartleyCorp.com)

Concrete Construction • Excavation • Waterproofing • Helical Piers • Concrete Pumping • Trailers • Automotive

## Owner Information

**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**

Andrew W Bartley

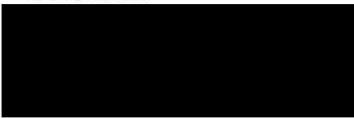
Vice President



49% Owner

James Bartley

President



51% Owner

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## **Treatment, Storage, and Disposal Facilities**

Delaware Solid Waste Authority locations:

Jones Crossroads Landfill  
28560 Landfill Ln  
Georgetown, DE 19947



Andy Bartley &lt;andrew@bartleycorp.com&gt;

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**DEP Licensing Certificate**

1 message

**DEP Licensing** <DEP-Licensing@app.montgomerycountymd.gov>

Wed, Aug 9, 2023 at 7:09 AM

To: andrew@bartleycorp.com

Cc: DEP.Licensing@montgomerycountymd.gov

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**MONTGOMERY COUNTY SOLID WASTE COLLECTOR/HAULER LICENSE CERTIFICATE**License No: **2285**THIS IS TO CERTIFY that a license has been granted on **08/09/2023** to:Company Name: **The Bartley Corporation**Address: **P.O. Box 1299**City, State Zip: **Ashton, MD 20861**

to collect and/or haul solid waste in Montgomery County, Maryland, in accordance with Section 48-19, Montgomery County Code 1994, as amended.

Issued under the authority of Section 48-19 and the conditions thereof, Montgomery County Code 1994, as amended, on **08/08/2023**THIS LICENSE EXPIRES: **08/31/2024**A total of 1 decal(s) assigned to the truck(s) recently permitted for the **2023 - 2024** licensing period will be mailed via certified mail. Make sure to follow the instructions on the DECAL PLACEMENT GUIDE and attach each decal to the correct truck by 08/23/2023.

Please be aware that you must notify us immediately by submitting to this office a copy of the current state vehicle registration when state tags are expired, replaced or a new truck is added to the company's fleet. Vehicles must be permitted prior to transporting solid waste in Montgomery county. Fines for violations begin at \$500 for each offense.

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## Bartley ☐ Corporation Spill Control Plan

1. Spill control and safety equipment carried in each vehicle:
  - a. Reflectors and/or flares
  - b. Fire extinguisher
  - c. First aid kit
  - d. Bloodborne Pathogen and Bodily Fluid Spill Clean-Up Kit
  - e. Heavy-duty gloves
  - f. Safety Vest
  - g. Hard hat
  - h. Flashlight
  - i. Cell Phone
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:
  - a. Daily physical pre-trip review of vehicle
  - b. Ensure loads are secure
  - c. Ensure unit is free of loose debris before leaving yard, pickup location, or site.
  - d. Weekly greasing of roll-off wheels
  - e. Wash unit as needed
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: Kenny Portillo Phone: [REDACTED]
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  
☐ Maryland: 911, (866) MDE-GOTO
6. The designated coordinator will contract for clean-up services with another company.
7. This plan will be carried in all vehicles, along with the permit.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/25/2024

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

<b>PRODUCER</b> Riggs, Counselman, Michaels & Downes, Inc. 11403 Cronridge Drive, Suite 270 Owings Mills MD 21117	<b>CONTACT</b> NAME: Insurance Certificate Team PHONE (A/C, No, Ext): 410-356-9500 E-MAIL ADDRESS: coi.jm@rcmd.com FAX (A/C, No): 410-363-3520
<b>INSURED</b> The Bartley Corporation; The Bartley Corporation DBA Fooks Concrete The Bartley Corp. DBA Bartley Concrete Pumping 16613 New Hampshire Ave. Silver Spring MD 20905	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : FCCI Insurance Company INSURER B : Accident Fund National Insurance Company INSURER C : Navigators Specialty Insurance Company INSURER D : National Trust Insurance Company INSURER E : INSURER F :

**COVERAGES** **CERTIFICATE NUMBER:** 1555522067 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
D	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:		CPP100080024-02	10/1/2024	10/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COM/OP AGG \$ 3,000,000 \$
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		CA100080025-02	10/1/2024	10/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0		UMB100080026-02	10/1/2024	10/1/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N N / A	AFWCP10007932503	10/1/2024	10/1/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Pollution Liability		SF23ECPU00856NC	10/1/2024	10/1/2025	Each Occ/Aggreg 2 MM / 2 MM
D	Leased/Rented Equip		CPP100080024-02	10/1/2024	10/1/2025	Deductible Limit 25,000 250,000

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

<b>CERTIFICATE HOLDER</b>  Delaware Department of Natural Resources and Environmental Control Compliance and Permitting Section 89 Kings Highway Dover DE 19901	<b>CANCELLATION</b>  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 
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## ***BCS Use of Company Vehicles 26 GVW and above -- September 2020***

*We at the Bartley Corporation work together as One Bartley Family. Company-owned or leased equipment, tools and vehicles are essential to performing our job duties and increasing productivity with our jobs. Our expectation is that all company property will be treated with respect and used properly.*

*Employees issued any type of company property are expected to exercise great care in the use of this property. Keeping up with preventative maintenance, following operating instructions, cleanliness, safety standards and guidelines are expected of our employees with use of any equipment at all times.*

*Direct supervisor/manager should be contacted immediately if any equipment, vehicle, machine or tool appears damaged, defective or in need of repair/service. Prompt reporting of damages, defects and the need for repairs/services could prevent deterioration of equipment and possible injury to yourself or others.*

*The improper, careless, negligent, destructive or unsafe use or operation of any Bartley property will not be tolerated, and will be subject to the Bartley Corp. Disciplinary policy as follows:*

*First (1) offense will result in:*

- *A verbal warning, documented in the employee file.*
- *Retraining on proper use in the presence of your direct supervisor and fleet manager.*

*Second (2) offense will result in:*

- *A signed written warning, documents to employee file.*
- *Potential additional consequences.*
- *Retraining on proper use in the presence of your direct supervisor and fleet manager.*

*Third (3) offense will result in:*

- *A signed written warning.*
- *Three (3) unpaid days off.*
- *Potential additional consequences.*
- *Retraining on proper use in the presence of your direct supervisor and fleet manager.*
- *Execution of a last chance user agreement.*

*Fourth (4) offense will result in loss of driving/operating/usage privileges.*

***Additional responsibilities include the following:***

***Supply trucks:***

- *Daily pre-trip review of vehicle.*
- *Ensure loads are secure.*
- *Ensure unit is free of loose debris before leaving yard, pickup location, or site.*
- *Ensure Skid Steer and trailer are properly secured before transportation.*
- *Wash unit as needed*

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## Stone Slingers:

- Daily pre-trip review of vehicle
- Ensure loads are secure
- Ensure unit is free of loose debris before leaving yard, pickup location, or site.
- Weekly inspection/adjustment of throw belts, throw chains, and feed belt chains.
- Daily greasing/lube of all rollers, pins, and chains.
- Wash unit as needed

## Roll-off truck:

- Daily pre-trip review of vehicle
- Ensure loads are secure
- Ensure unit is free of loose debris before leaving yard, pickup location, or site.
- Weekly greasing of roll-off wheels
- Wash unit as needed

## Boom trucks:

- Daily pre-trip review of vehicle
- Ensure loads are secure
- Ensure unit is free of loose debris before leaving yard, pickup location, or site.
- Weekly greasing of boom
- Wash unit as needed

## Low Boy:

- Daily pre-trip review of vehicle
- Ensure loads are secure
- Ensure unit is free of loose debris before leaving yard, pickup location, or site.
- Wash unit as needed

## Concrete Pumps:

- Daily pre-trip review of vehicle
- Ensure loads are secure
- Ensure unit is free of loose debris before leaving yard or site.
- Clean concrete splatter and chemicals from unit daily
- Daily inspection/adjustment of clamps/pins
- Weekly inspection/adjustment of gaskets and pipes.
- Activate auto-greaser constantly; grease cylinder block weekly, grease outriggers every 3 weeks; grease boom monthly.
- Wash unit as needed

Unit # \_\_\_\_\_ Driver/Operator (print) \_\_\_\_\_ (signature/date) \_\_\_\_\_/\_\_\_\_/\_\_\_\_

Supervisor (print) \_\_\_\_\_ (signature/date) \_\_\_\_\_/\_\_\_\_/\_\_\_\_

Fleet Manager (print) \_\_\_\_\_ (signature/date) \_\_\_\_\_/\_\_\_\_/\_\_\_\_

## **Driver Safety and Certification Program**

### ***What do we require to become a driver:***

- *MVA driving record*
- *Approval by insurance co.*
- *Driver training videos*
- *Road-test approval with fleet team*

### ***What do we train:***

- *Defensive driving.*
- *Distracted Driving*
- *Vehicle Safety*
- *DOT regulations.*
- *Load securement*
- *Inclement weather*

### ***How do we Train:***

- *Classroom & vehicle walk-around*
- *Real-time driving*
- *Videos*

### ***When do we Train:***

- *Upon assignment of being a driver or Hire date if they are listed as a driver*
- *Annual scheduled training for all drivers*
- *Road training if the original real time driving test was not passed.*

*The Bartley Corp driver training and accountability program is essential for promoting safe and responsible driving practices amongst the One Bartley Family drivers. Below you will find the layout of The Bartley Corp Driver training and accountability program.*

### **1. Initial Driver Training**

- *Conduct a needs assessment to gather information from drivers and supervisors as it relates to their driving duties with The Bartley Corp.*
- *Provide comprehensive driver training to **ALL** drivers, which includes classroom instructions and behind the wheel training.*
- *Initial topics that are covered but not limited to are, **DOT regulations, Defensive driving, Distracted Driving, Vehicle Operations and Maintenance and Load securement and Inclement Weather.***

### **2. Ongoing training and refresher Courses**

- *Scheduled training sessions that are convenient for all participants.*
- *Ongoing training and refresher courses to reinforce safe driving practices and address any new regulations or technologies.*
- *Utilise online training ( English & Spanish) modules, In- Person Sessions and Webinars.*
- *Encourage drivers to participate in other programs to improve their driving skills and knowledge.*

### **3. Driver Safety Incentives**

- *Implement a driver safety incentive program that rewards our One Bartley Family drivers for their safe and responsible driving practices.*
- *Use Verizon telematics to track driver behaviour, such as speeding, hard braking and rapid acceleration.*
- *Reward drivers who consistently demonstrate safe driving practices with bonuses, gift cards and or other incentives.*

#### **4. Vehicle maintenance Accountability**

- *Hold Drivers accountable for maintaining their vehicles, including conducting daily pre-trip Inspections and reporting any issues immediately to their immediate manager.*
- *Use vehicle telematics( Verizon) and other methods to track vehicle and equipment maintenance and repair needs.*
- *Establish consequences for drivers who do not properly maintain their Bartley Corp vehicle and Equipment.*

#### **Training:**

##### **1. Defensive Driving**

- *Defensive driving training teaches our drivers how to anticipate and respond to potential hazards on the road.*
- *Space management, hazard perception, speed management and collision avoidance techniques.*
- *Defensive driving training would be conducted in a classroom setting, Online and behind the wheel.*

##### **2. Distracted Driving**

- *Distracted driving training focuses on the dangers of using cell phones, texting and other distractions while driving.*
- *Training emphasises the importance of focusing on the road and the risk associated with distracted driving.*
- *Our Training will include videos, interactive exercises and discussions about strategies for avoiding distractions while driving.*

##### **3. Vehicle Safety**

- *Vehicle Safety training will teach our drivers the importance of vehicle maintenance and how to conduct basic vehicle safety checks before operating a Bartley Corp vehicle or Equipment.*
- *Training will cover tire pressures, lights and fluids level checks and other basic checks.*

- *The training will also include interactive exercises and discussions regarding the importance of upkeeping vehicle maintenance.*

#### **4. Inclement Weather**

- *Discuss types of topics such as hydroplaning, skidding, reduced visibility, slippery road conditions and safe following distance.*
- *Discuss and train strategies for adjusting driving techniques and behaviours to mitigate risks in different weather conditions. ( rain, snow/ice, fog and highwinds.)*
- *Inclement weather pre-trip Inspection checklist. ( wipers, washer fluid, lighting & tires)*



# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

**The Bartley Corporation**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC

☐ C Corporation

☒ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

**PO Box 1299** or **16613 New Hampshire Avenue**

6 City, state, and ZIP code

**Ashton MD, 20861**

**Silver Spring MD, 20905**

7 List account number(s) here (optional)

Requester's name and address (optional)

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

**Social security number**

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

or

**Employer identification number**

5 2 - 0 9 1 1 8 3 4

## Part II Certification

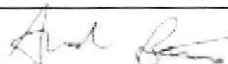
Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign  
Here

Signature of  
U.S. person ►



Date ►

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

# THE BARTLEY CORPORATION

P.O. Box 1299 · Ashton, Maryland 20861



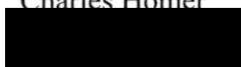
(301)384-2700

[BartleyCorp.com](http://BartleyCorp.com)

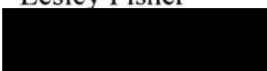
Concrete Construction • Excavation • Waterproofing • Helical Piers • Concrete Pumping • Trailers • Automotive

## Vehicle Operator Information

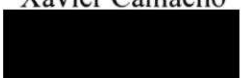
Charles Homer



Lesley Fisher



Xavier Camacho



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## Driver Training for Solid Waste

- Drivers shall follow all state and local laws strictly
- Drivers shall review and follow the requirements of solid waste permits
  - Knowledge of current DOT Motor Carrier Safety Regulations.
  - Safe vehicle operations to avoid creating hazards to human health, safety, welfare, or the environment.
  - Knowledge of proper handling procedures for the type of solid waste being transported.
  - Familiarity with the approved accidental discharge containment plan.
  - All vehicles used in the transportation of solid waste shall be operated and maintained so as to be in compliance with all state and federal regulations and not present a hazard to human health or the environment through unsafe vehicle conditions. The permittee is responsible for the operation and maintenance of all vehicles including leased vehicles operated under his/her permit.
  - All vehicles must carry safety and emergency equipment in accordance with applicable DOT regulations to ensure protection of the public and the environment.
  - All vehicles must carry spill containment materials appropriate to the type of solid waste being transported.
  - Each vehicle engaged in the transportation of solid waste must be fully enclosed or covered to prevent the discharge or release of solid waste to the environment.
  - The transporter's name shall be prominently displayed on both sides of the vehicle in figures at least three inches high and of a color that contrasts with the color of the vehicle.
  - The transporters' permit number shall be prominently displayed on both sides and the rear of the vehicle in figures at least three inches high and of a color that contrasts with the color of the vehicle.
  - A copy of the prevention, control, and cleanup of accidental discharges of the solid waste shall be maintained in each vehicle engaged in the transportation of solid waste.
  - All accidental discharges of solid waste from a vehicle shall be immediately and completely remediated. If the solid waste cannot be immediately and completely remediated, or if it has the potential to cause damage to the environment or to public health, the discharge shall be immediately reported to the Department. (Accidental discharges of infectious waste are regulated under Section 11, Part 1)
- CDL drivers are required to submit driving record and references for employment
- CDL driving records get checked no less than annually
- CDL drivers are part of the randomly drug and alcohol screening program
- Only approved CDL drivers may operate CDL vehicles