RECEIP	T DATE (	03/13/25 No. 927945
RECEIVED FROM	les Fri	Vipomental // \$ 1500.00
One thousa	nd Fi	re hundred fifty and pollars
OFOR RENT	SW-	133
ACCOUNT	CASH	
PAYMENT	CHECK	FROM 23483 TO
BAL. DUE	ORDER ORDER CARD	BY M. 3-1

person pe



# 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.

☐ Five Years - \$275.00

#### RECEIVED

MAR 13 2025

DNREC - WHS

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 of Delaware," in the amount of \$75.00.	order, payable to the "State of
☐ New – <b>ALL OTHERS</b> Submit a check or money order, pathe amount of \$350.00.	yable to the "State of Delaware" in
Renewal: Permit # DE-SW- 1133 Expiration	n Date 6/30/25
Please indicate the term for which you desire your permit to order, payable to the "State of Delaware," for the indicated	
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

ive Years - \$1550.00

Attachment \_\_\_\_\_\_ No parent company

2.	Release to Public	
	Do you wish to be included on the list of transpo Delaware permitted solid waste transporters?	rters that is provided to persons requesting a list of Res \(\sigma\) No
3.	Company Information	
	Company Name Fogles En	Vironmental LLC
Loc	cation Address:	Mailing Address:
	12049 Industrial Park RD	PO BOY 187
	Bishopville, MD	
		21813
	ntact: Math Fogle Titl	e: Vice President
	siness Phone: 410 - 352 - 3000 Fax	
	nail: foglestoilets @ smail. com	
	hr Emergency Contact Phone: 4/10 - 989	
4.	Company Ownership Information	
		on, indicate city, state, and date of incorporation.
	City: Star  Municipality Public institution Limited Liability Corporation (LLC) Star Other: (must specify)	
		ficer, attach a list with name, title, mailing address stockholders owning greater than 5% outstanding
	Attachment	
	(c). If company is owned by or affiliated with a address & mailing address, and % ownersh	

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:
	(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? $\square$ Yes $\square$ No $\square$ 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  No

(e). If you offer recycling services, are the recyclables ultimately taken to an incinerator (waste-to-energy) or landfill? 

Yes 

No

NA

8.	Trea	atment, Storage, and Disposal Facilities
	(a).	Do you cross state lines with the waste?    Yes    Yes
	(b).	Identify in an attachment <b>all</b> 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.	Oth	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# 1068595 MC# 861779
		□ 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
	Dela Insur Depa	transporter must submit proof of financial responsibility as established in section 7.2.4 of ware's <i>Regulations Governing Solid Waste</i> . 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 <b>Department of Natural Resources and aronmental 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.)
		Do you transport in the State of Delaware Only (Intrastate)? Yes  Do you transport Interstate? Yes

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

(A44.8)	FOR-HIRE		ALL OTHERS
	INTERSTATE		
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 + MC	S-90 🔲	\$350,000.00
Ash	\$750,000.00 + MC	S-90 🗆	\$350,000.00
Infectious Waste	\$1,000,000.00 + MC	S-90 🗆	\$750,000.00 + MCS-90
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MC	S-90 🔲	\$350,000.00
	\$1,000,000.00 + MC	8-90 □	\$350,000.00
Asbestos	(For Hire & Priva		5500,000.00
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 \

#### 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.)

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 Attachain + 6 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 Title Vice President Print Name

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

Attachment 1

## <u>Ownership</u>

Name	Title	Mailing	%Own
Gretchen Peters	President	11035 Piney Island Dr. Bishopville, MD 21803	51%
Matt Fogle	Vice President	1535 Teal Dr. Ocean City, MD 21842	40%
Dale Fogle	Treasure	6460 Burch Dr. Woodbine, MD 21797	9%

Worcester County Department of Public Works

4101111111

## Solid Waste Division

7091 CENTRAL SITE LANE NEWARK, MD 21841 (410) 632-3177 FAX (410) 632-3000



#### **COMMERCIAL HAULER ANNUAL LICENSE APPLICATION**

July 1, 2024—June 30, 2025

Application must be in the name of a legal entity. No licenses will be issued to a trade name.

NAME	Fosles	Environmenta)	_ PHONE_	110-352-3	3000
FED ID/SOC	SEC #: 52 - 23	38185	FAX:		TO A THE STORY OF THE STORY OF THE STORY AND ADDRESS OF THE STORY OF T
ADDRESS	PO BO	+ 187	_ ACCT# (if a	pplicable) <u>4</u>	10
CITY	Bishopu	ille, mo	STATE MP	ZIP CODE	21813
E-MAIL CON	ITACT: fogl	estoilets@gr	pail, com		
		Commercial licenses are			
VEHICLE (YR,	MAKE, MODEL)	TAG NUMBER	(Please FEE -EA. VEHICLE	e supply existing larg PERMIT # (Ig. decal)	PERMIT # (sm. annual seal)
1 2014 m	ack R10	361 E56	25.00	2307	(office use)
1 2017 Vo	100 A10	460 E48	25.00	2433	206
1 2020 I	Aternational Ry	324 E DO7	25.00	2649	207
2022 K	enworth R10	438 E 66	25.00	2832	208
1 2023 Pe	eterbilt R10	452 E97	25.00	2867	209
					MA
	Pleas	e make checks paya	able to Worcester (	County	
with all to depo agrees the abo	ant has not had a Word laws and regulations resit solid waste original to pay the current rate ove named entity to ap	ester County Hauler's Lic relating to solid waste acti- ting <u>outside</u> of Worcester is and fees which are shor ply, sign for, and obtain a mowledge, belief, and und	vities in Worcester Cour County in any County or wn on the back of this a Solid Waste Hauler's Li derstanding.	nty; and understa wned or operated pplication. Appli icense. The abov	ands that it is unlawful d landfill. Applicant icant is authorized by we information is true
Signature	MW JE	Da	te: 6/24/24	Amount Paid:	
Printed Name:	Matthew	H. Fosle			

Attachment 3

## Fogle's Environmental Spill Plan

- 1. Safety Equipment carried in each vehicle:
  - First Aid Kit
  - Heavy duty gloves
  - Fire extinguisher
  - Stay Dry
- 2. All Loads are to be covered before hauling
- 3. The drivers are expected to perform pre-trip inspections
  - Acknowledge weight / material
  - Inspect tires
- 4. If there is an accident the drivers are to call Gretchen Peters at 410-352-3000 or Matt Fogle at 410-984-6884
- 5. Fogle's representative will report all accidents to municipal authorities where accident occurred.

Delaware - 911, 302-739-5072

## THIS PLAN IS TO BE CARRIED IN ALL VEHICLES ALONG WITH THE PERMIT

Attachment 4



Driver Training

#### Fogle's Environmental Procedure for Hiring and Maintaining a Safe Driver Staff

#### Before Hire

- ➤ Applicant fills out Fogle's application, Request for Information from Previous Employer, Current copy of DMV Driving record and Confidential Report of Personal References (Please see the attached)
- ➤ We review past employer information, driving record and personal references and hire if the applicant was given good recommendation from past employer/references. We don't hire any CDL driver without 2 years pass experience.

#### At Time of Hire

After hire we require the new employee to provide us with a copy of his/her license, Social Security card and medical exam certificate. We complete the *Driver Qualification File Auditing Checklist* for CDL drivers (Please see the attached).

#### While Employed

- MVA annual driving record review
- > Random drug testing program
- > 6 month in house safety course
- > Annual ANSI certification

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 - YEAR	TYPE	VIN # (Serial Number)	LICENSE PLATE # and STAT of REGISTRATION	E mfgr's GVWR	OWNERSHIP
2014 Mack	R/0	1 M DAYO 4 CY EMOZO994	MD 361856	70,000	
2020 International	RID	14TEST2T6LH 165381	MD 324ED07	70,000	
2012 Kinnorth	P10	INK2 LPOX 7N5494337	MD 438 E66	70,000	
2023 PeterLilt	210	INPCLPOTOPDS65153	MD 452E92	70,000	
2025 Kenwarth	210	INK249E4555131468	MD 377ED12	70,000	
				T	
				$\top$	
				+	

Affect ment

## **Operators**

## Name

## Truck #

Richard Kelley	RO 25	
Ray Stever	RO 23	
Allen Savage	RO 22	
Gene Cook	RO 18	

Attachment 7



## Facilities Where Fogle's Transports Waste

**DE Solid Waste- Jones Crossroads Lanfill** 

28560 Landfill Ln, Georgetown, DE 19947

Sandtown Landill

1107 Willow Grove Rd, Felton, DE 19943

ACORD

## CERTIFICATE OF LIABILITY INSURANCE

3/5/2025

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 lieu of such endorsement(s).

PRODUCER Richardson Insurance Group, LLC	CONTACT NAME: Steven McAndrew PHONE (A/C, No, Ext): 410-666-4419 (A/C, No):				
117 Church Lane Second Fl Hunt Valley MD 21030	E-MAIL ADDRESS: StevenM@richardsoninsgroup.com	T (ALO), NO).			
	INSURER(S) AFFORDING COVERAG	E NAIC#			
	INSURER A: EMCASCO Insurance Co.	21407			
INSURED FOGLENV-0	INSURER B: Employers Mutual Casualty Compa	ny 21415			
Fogle's Environmental Services LLC P.O. Box 187	INSURER C: Builders Premier Insurance Co	13036			
Bishopville MD 21813	INSURER D:				
	INSURER E :				
	INSURER F:				

#### COVERAGES

#### **CERTIFICATE NUMBER: 1434835753**

#### **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 INSD		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
A	X	CLAIMS-MADE X OCCUR		5D8-55-54-25	4/15/2024	4/15/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 500,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$2,000,000
	X	POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$2,000,000
		OTHER:						\$
В	AUT	TOMOBILE LIABILITY		5E8-55-54-25	4/15/2024	4/15/2025	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X	ANY AUTO					BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
		HIRED NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
		\$1,000 Comp \$1,000 Coll						\$
В	X	UMBRELLA LIAB X OCCUR		5J8-55-54-25	4/15/2024	4/15/2025	EACH OCCURRENCE	\$2,000,000
		EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$2,000,000
		DED X RETENTION \$ 0						\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY		PWC 1012445 06	10/16/2024	10/16/2025	X PER OTH-	
	ANY	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	N/A				E.L. EACH ACCIDENT	\$ 500,000
	(Mar	ndatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$ 500,000
	If yes	s, describe under CRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 500,000
В	Leas	sed/Rented Equipment		5C8-55-54-25	4/15/2024	4/15/2025	\$35,000 Limit	\$500 Deductible

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Dale Fogle and Gretchen Peters are excluded on the Workers Compensation policy.

CERTIFICATE	HOLDER
-------------	--------

Delaware Department of Natural Resources and Environmental Control

Compliance and Permitting Section 89 Kings Highway Dover DE 19901

#### CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**AUTHORIZED REPRESENTATIVE** 

+ speck. Pausine

#### Davis, DaQuan (DNREC)

From:

Fogles Environmental <foglestoilets@gmail.com>

Sent:

Tuesday, March 18, 2025 8:19 AM

To:

WHStransporters

Subject:

Re: Incomplete Solid Waste Transporter Permit Application (Fogles)

Attachments:

Form MCS-90.pdf

Follow Up Flag: Flag Status:

Follow up Flagged

Please see the attached document for Form MCS-90 / Worcester county waste hauler permit and our current VMT

As far as Training -

Our company has a safety program - with monthly cash incentives.

And we "Fogles environmental LLC" own all of our vehicles

Hopefully this is all the info you were looking for to complete our application.

Thanks,

Fogle's Environmental Services, LLC 12049 Industrial Park Rd, PO Box 187 Bishopville, MD 21813 Phone: 410-352-3000 www.FoglesOC.com

On Thu, Mar 13, 2025 at 4:59 PM WHStransporters < WHStransporters@delaware.gov > wrote:

Hello Matt.

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 9(b)- Do you have any other state solid waste permit besides Delaware?
- Section 9(c)- Based on the Federal Motor Carrier Safety Administration company snapshot your Carrier Vehicle Miles Traveled (VMT) is out of date. Please update your carrier VMT.
- Section 10- Please provide an MCS-90 endorsement form with the policy number 5E8-55-54-25.
- Section 12- Do you conduct the following training following?

- (i) Knowledge of proper handling procedures for the type of solid waste being transported.
- o (ii) Familiarity with the approved accidental discharge containment plan. (Spill Control Plan)
- o (iii) Familiarity with the conditions of the solid waste transporter's permit.
- Section 13- Who owns the vehicles on your list?

Please provide the information requested above via e-mail within five (5) days.

Regards,



## DaQuan L. Davis

**Environmental Scientist** 

## Division of Waste and Hazardous Substances

- 302-739-9403
- WHStransporters@delaware.gov
- 9 89 Kings Hwy SW, Dover, DE 19901
- dnrec.delaware.gov



Enter Value: 1068595

Search

## Company Snapshot

#### FOGLES ENVIRONMENTAL SVC LLC

SMS Results

USDOT Number: 1068595

Other Information for this

Carrier

▼ Licensing & Insurance

#### ID/Operations | Inspections/Crashes In US | Inspections/Crashes In Canada | Safety Rating

Carriers: If you would like to update the following ID/Operations information, please complete and submit form MCS-150 which can be obtained online or from your State FMCSA office. If you would like to challenge the accuracy of your company's safety data, you can do so using FMCSA's <a href="DataQs">DataQs</a> system.

#### **USDOT Status**

- . ACTIVE: The entity's US DOT number is active.
- INACTIVE: Inactive per 49 CFR 390.19(b)(4); biennial update of MCS-150 data not completed.
- . OUT-OF-SERVICE: Carrier is under any type of out-of-service order and is not authorized to operate.

#### **Operating Authority Status**

- AUTHORIZED FOR { Passenger, Property, HHG }: This will list the specific operating authorities the carrier (or broker) is allowed to operate.
- NOT AUTHORIZED: The entity does not have any operating authority and/or is not authorized to engage in interstate, for-hire operations.
   \*Please Note: NOT AUTHORIZED does not apply to Private or Intrastate operations.
- . OUT-OF-SERVICE: Carrier is under any type of out-of-service order and is not authorized to operate.

#### **Out of Service Date**

Indicates the date the company was ordered Out of Service. If there are multiple Out of Service orders, the earliest date will be displayed.

Please note: If there are multiple Out-of-Service orders, the earliest date will be displayed.

For help on the explanation of individual data fields, click on any field name or for help of a general nature go to SAFER General Help.

The information below reflects the content of the FMCSA management information systems as of 03/23/2025.

To find out if this entity has a pending insurance cancellation, please click here.

		USDOT INFORMATION						
Entity Type:	CARRIER							
USDOT Status:	ACTIVE	Out of Se	ervice Date:	None				
USDOT Number:	1068595	State Carrier	ID Number:					
MCS-150 Form Date:	03/14/2025	MCS-150 Mile	eage (Year):	398,500 (2024)				
	OP	ERATING AUTHORITY INFORMAT	TION					
Operating Authority Status:		ED FOR Property sing and Insurance details click h	ere.					
MC/MX/FF Number(s):	MC-861779	C-861779						
		COMPANY INFORMATION						
Legal Name:	FOGLES E	NVIRONMENTAL SVC LLC						
DBA Name:								
Physical Address:		12049 INDUSTRIAL PARK ROAD BISHOPVILLE, MD 21813						
Phone:	(410) 352-3	3000						
Mailing Address:		37 LLE, MD 21813						
DUNS Number:	-							
Power Units:	10		Drivers:	7				
peration Classification:								
X Auth. For Hire		Priv. Pass.(Non-business)	State G	iov't				
x Exempt For Hire		Migrant	Local G					
x Private(Property)		U.S. Mail	Indian Nation					
Priv. Pass. (Busin	ness)	Fed. Gov't						
Carrier Operation:								
x Interstate		Intrastate Only (HM) Intrastate Only						
Cargo Carried:								
General Freight		Liquids/Gases	Cher	nicals				
Household Goods		Enquiros/ Odoco	Cilei	illouis				

Metal: sheets, coils, rolls

Passengers

Refrigerated Food

Motor Vehicles Drive/Tow away Oilfield Equipment Livestock

Beverages Paper Products

Agricultural/Farm Supplies

Logs, Poles, Beams, Lumber Grain, Feed, Hay

Utilities

**Building Materials** Mobile Homes

Coal/Coke Meat

Construction

Machinery, Large Objects Fresh Produce

Garbage/Refuse US Mail

Water Well X PORTABLE TOILETS

#### ID/Operations | Inspections/Crashes In US | Inspections/Crashes In Canada | Safety Rating

US Inspection results for 24 months prior to: 03/23/2025

Total Inspections: 15 Total IEP Inspections: 0

Note: Total inspections may be less than the sum of vehicle, driver, and hazmat inspections. Go to Inspections Help for further information.

		Inspections:		
Inspection Type	Vehicle	Driver	Hazmat	IEP
Inspections	14	15	0	0
Out of Service	3	0	0	0
Out of Service %	21.4%	0%	%	0%
Nat'l Average % as of DATE 02/28/2025*	22.26%	6.67%	4.44%	N/A

\*OOS rates calculated based on the most recent 24 months of inspection data per the latest monthly SAFER Snapshot.

#### Inspections

Number of roadside inspections conducted within the past two years. (Note: These inspections are distinct from the periodic inspections required under 49 CFR Part 396.17, and may not include inspection of all parts and accessories set forth in 49 CFR Part 396 Appendix A.)

The inspections listed on SAFER are conducted in accordance with the North American Standard Inspection Program which was created by the Commercial Vehicle Safety Alliance (CVSA) as the roadside inspection process for inspecting commercial motor vehicles and drivers throughout North America.

Inspections are listed as total, driver, vehicle, and Hazmat. Please see https://www.fmcsa.dot.gov/safety/question-1-can-violation-free-cvsa-level-i-orlevel-v-inspection-be-used-satisfy-periodic for more details.

#### Crashes reported to FMCSA by states for 24 months prior to: 03/23/2025

Note: Crashes listed represent a motor carrier's involvement in reportable crashes, without any determination as to responsibility.

		Crashes:		
Туре	Fatal	Injury	Tow	Total
Crashes	0	0	1	1

#### ID/Operations | Inspections/Crashes In US | Inspections/Crashes In Canada | Safety Rating

Canadian Inspection results for 24 months prior to: 03/23/2025

Total inspections: 0

Note: Total inspections may be less than the sum of vehicle and driver inspections. Go to Inspections Help for further information.

	Inspections:	
Inspection Type	Vehicle	Driver
Inspections	0	0
Out of Service	0	0
Out of Service %	0%	0%

Note: Crashes listed represent a motor carrier's involvement in reportable crashes, without any determination as to responsibility.

		Crashes:		
Туре	Fatal	Injury	Tow	Total
Crashes	0	0	0	0

#### ID/Operations | Inspections/Crashes In US | Inspections/Crashes In Canada | Safety Rating

The Federal safety rating does not necessarily reflect the safety of the carrier when operating in intrastate commerce.

#### Carrier Safety Rating:

#### The rating below is current as of: 03/23/2025

#### **Review Information:**

Rating Date:	None	Review Date:	06/10/2016	
Rating:	None	Type:	Non-Ratable	

SAFER Home | Feedback | Privacy Policy | USA.gov | Freedom of Information Act (FOIA) | Accessibility | OIG Hotline | Web Policies and Important Links | Plug-ins

Federal Motor Carrier Safety Administration 1200 New Jersey Avenue SE, Washington, DC 20590 • 1-800-832-5660 • TTY: 1-800-877-8339 • Field Office Contacts

	Frairediant	OF	/21 /2024
OMB No.: 2126-0008	Expiration:	UD	31/2024

USDOT Number: 1068595	Date Received:

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.



Endorsement for Motor Carrier Policies of Insurance for Public Liability under Sections 29 and 30 of the Motor Carrier Act of 1980

## **FORM MCS-90**

Issued to FOGLE	S ENVIRONMENTAL SVC LLC	of Maryland
(Motor Car		(Motor Carrier state or province)
<b>Dated at</b> 12:00 no	on this 10th day of April	
Amending Policy N	lumber: 5 E 8 - 5 5 - 5 425 Effecti	ive Date: <u>04/15/24</u>
Name of Insurance	Company: EMPLOYERS MUTUAL CASUA	ALTY COMPANY
	Countersigned by: (aut	Donna Kunsch horized company representative)
The policy to which	this endorsement is attached provides primary or	excess insurance, as indicated for the limits shown (check only one):
• This insurance is	s primary and the company shall not be liable for amounts in	n excess of \$ 750.000.00 for each accident.
	s excess and the company shall not be liable for amounts in e.  of \$ for each accident.	excess of \$ for each accident in excess of the
said policy and all its		n (FMCSA), the company agrees to furnish the FMCSA a duplicate of elephone request by an authorized representative of the FMCSA , e number to call is: $\underline{515-280-2511}$
the other party (said and (2) if the insured	d 35 days notice to commence from the date the not be subject to the FMCSA's registration requirement	the insured by giving (1) thirty-five (35) days notice in writing to otice is mailed, proof of mailing shall be sufficient proof of notice), its under 49 U.S.C. 13901, by providing thirty (30) days notice to e is received by the FMCSA at its office in Washington, DC).

(continued on next page)

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

#### **DEFINITIONS AS USED IN THIS ENDORSEMENT**

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

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

**Bodily Injury** means injury to the body, sickness, or disease to any person, including death resulting from any of these.

**Property Damage** means damage to or loss of use of tangible property.

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,

**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.

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.

(continued on next page)

#### 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 10,001 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 10,001 or more pounds).	Hazardous substances, as defined in 49 CFR 1718, transported in cargo tanks, portable tanks, or hoppertype 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 10,001 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 10,001 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

<sup>\*</sup>The schedule of limits shown does not provide coverage. The limits shown in the schedule are for information purposes only.



TEL: 410-632-0686 FAX: 410-632-3003

## Worcester County

GOVERNMENT CENTER
ONE WEST MARKET STREET, ROOM 1105
P.O. Box 248
SNOW HILL, MARYLAND
21863

Phillip G. Thompson, CPA Finance Officer

Jessica R. Wilson, CPA Deputy Finance Officer

Quinn M. Dittrich, CPA Enterprise Fund Controller

March 17, 2025

To whom it may concern:

This memo serves to confirm that Fogle's Environmental Services, LLC is a licensed waste hauler and is currently in good standing with Worcester County. Fogle's Environmental Services, LLC has been providing waste hauling services in accordance with applicable regulations and requirements with the County for more than 20 years.

Should you require any additional information, please do not hesitate to contact me.

Quinn M. Dittrich, CPA

Enterprise Fund Controller 410-632-0686 ext. 1201

																				OMB	No. 212	6-0013
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Safety Administr	ration							1	4h	piii	catio	11	101	U.3	. D	ווע	NUMBI	EK)				A
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30. CERTIFICATION	STATEMEN	T (to be c	ompl	eted b	y an a	uthorized offic	ial)															
I, MATTHEW F							certify	that I	am f	amilia	r with the	Fed	ieral Mo	tor Car	rier Saf	ety Reg	julations and/	or Federa	i Haza	ardous Ma	terials Regu	lations.
	(F	Please pr	rint N	lame)			Under	pena	lties (	of per	jury, I dec	lare	that the	inform	ation er	itered (	on this report	is, to the	uest of	my know	euge and be	sner, true,
Signature MATT	HEW FOG	LE						e 03/								Tit	COMPAN	YOFFI	CIAL			

Signature MATTHEW FOGLE