

# RECEIPT

DATE

05/14/25

No.

741832

RECEIVED FROM

Salazar Trucking LLC

\$350.00

Three hundred fifty and 00/100

DOLLARS

☐ FOR RENT☒ FOR

DE-SW-2136

ACCOUNT		
PAYMENT		
BAL. DUE		

☐ CASH☒ CHECK☐ MONEY ORDER☐ CREDIT CARD

FROM

10415

TO

BY

AG



RECEIVED

MAY 14 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**

**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- \_\_\_\_\_ Expiration Date \_\_\_\_\_

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 SALAZAR TRUCKING LLC

Location Address:	Mailing Address:
80 S 6TH ST APT 2 NEWARK, NJ 07107	SAME AS MAILING

Contact: CRISTIAN SALAZAR Title: PRESIDENT

Business Phone: 973-704-4310 Fax: \_\_\_\_\_

E-mail [REDACTED] & NJTRANSPORTAGENT@YAHOO.COM

24 hr Emergency Contact Phone: 973-704-4310

## 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: \_\_\_\_\_ Date: \_\_\_\_\_  
☐ Municipality  
☐ Public institution  
☒ Limited Liability Corporation (LLC) State: NJ  
☐ 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 A

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

☐ Attachment N/A  
☒ No parent company

**5. Company locations in Delaware**

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

- ☐ Attachment N/A  
☒ 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 N/A  
☒ No affiliates

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

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

- ☐ Residential waste  
☐ Commercial waste (from **non-manufacturing, non-processing** businesses and offices)  
☐ Industrial waste (from a manufacturing or industrial process)  
☐ Dry waste: ☐ construction/demolition debris  
☐ trees/stumps  
☐ other (must specify) \_\_\_\_\_  
☐ 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 B
- ☐ No transporter permits in other states

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

DOT# 3902162 MC# 1695164

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

## 10. Proof of Financial Responsibility

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

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

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

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

#### 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 D

*Note: small owner operator  
mvr attach*

### 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 Cristian Salazar Date 5-5-2025  
Print Name Cristian Salazar Title 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]

# **Attachment A**

**Company name: Salazar Trucking LLC**

**Owner Name: Cristian Patricio Salazar Ordenez, President**



**Address: 80 South 6th Street Newark, NJ 07107**

**Ownership: 100%**

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF MATERIALS MANAGEMENT

## PART 364

WASTE TRANSPORTER PERMIT NO. NJ-1391

Pursuant to Article 27, Titles 3 and 15 of the Environmental Conservation Law and 6 NYCRR 364

## PERMIT ISSUED TO:

SALAZAR TRUCKING LLC  
80 SOUTH 6TH STREET, APT. 2  
NEWARK, NJ 07107

## PERMIT TYPE:

☒ NEW  
☐ RENEWAL  
☐ MODIFICATIONCONTACT NAME: CRISTIAN SALAZAR  
COUNTY: OUT OF STATE  
TELEPHONE NO: (973)704-4310EFFECTIVE DATE: 02/22/2025  
EXPIRATION DATE: 02/21/2026  
US EPA ID NUMBER:

## AUTHORIZED WASTE TYPES BY DESTINATION FACILITY:

The Permittee is Authorized to Transport the Following Waste Type(s) to the Destination Facility listed :

Destination Facility	Location	Waste Type(s)	Note
110 Sand Company Clean Fill Disposal Site	Melville , NY	Non-Hazardous Industrial/Commercial	
225 ELM STREET DISTRIBUTION CENTER	PERTH AMBOY , NJ	Non-Hazardous Industrial/Commercial	
Allocco Recycling Ltd (Kingsland Ave)	Brooklyn , NY	Non-Hazardous Industrial/Commercial	
ATLANTIC COUNTY UTILITIES AUTHORITY	EGG HARBOR , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
BAYSHORE RECYCLING CORPORATION	KEASBEY , NJ	Non-Hazardous Industrial/Commercial	
BETHLEHEM EARTH, LP	BETHLEHEM , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
BETHLEHEM LANDFILL	BETHLEHEM , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
BTL BARTELL	POCONO SUMMIT , PA	Non-Hazardous Industrial/Commercial	
BURLINGTON COUNTY RESOURCE RECOVERY COMPLEX	FLORENCE , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
CAPE MAY COUNTY MUA	WOODBINE , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
CAPITAL DEVELOPMENT	E. BANGOR , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
CLEAN EARTH OF CARTERET	CARTERET , NJ	Non-Hazardous Industrial/Commercial	
CLEAN EARTH OF MORRISVILLE	MORRISVILLE , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	

\*\*\* AUTHORIZED WASTE TYPES BY DESTINATION FACILITY LISTING (continued on next page) \*\*\*

**NOTE:** By acceptance of this permit, the permittee agrees that the permit is contingent upon strict compliance with the Environmental Conservation Law, all applicable regulations, and the General Conditions printed on the back of this page.

## ADDRESS:

New York State Department of Environmental Conservation  
Division of Materials Management - Waste Transporter Program  
625 Broadway, 9th Floor  
Albany, NY 12233-7251AUTHORIZED SIGNATURE: Laura Stevens Digitally signed by Laura Stevens  
Date: 2025.02.20 13:40:50 -05'00' Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

# WASTE TRANSPORTER PERMIT

## GENERAL CONDITIONS

The permittee must:

1. Carry a copy of this waste transporter permit in each vehicle to transport waste. Failure to produce a copy of the permit upon request is a violation of the permit.
2. Display the full name of the transporter on both sides of each vehicle and display the waste transporter permit number on both sides and rear of each vehicle containing waste. The displayed name and permit number must be in characters at least three inches high and of a color that contrasts sharply with the background.
3. Transport waste only in authorized vehicles. An authorized vehicle is one that is listed on this permit.
4. Submit to the Department a modification application for additions/deletions to the authorized fleet of vehicles. The permittee must wait for a modified permit before operating the vehicles identified in the modification application.
5. Submit to the Department a modification application to add a new waste category or a new destination facility, or to change the current waste or destination facility category. The permittee must wait for a modified permit before transporting new waste types or transporting to new destination facilities.
6. Submit to the Department a modification application for change of address or company name.
7. Comply with requirements for placarding and packaging as set forth in New York State Transportation Law as well as any applicable federal rules and regulations.
8. Contain all wastes in the vehicle so there is no leaking, blowing, or other discharge of waste.
9. Use vehicles to transport only materials not intended for human or animal consumption unless the vehicle is properly cleaned.
10. Comply with requirements for manifesting hazardous waste, regulated medical waste, or low-level radioactive waste as set forth in the New York State Environmental Conservation Law and the implementing regulations. Transporters who provide a pre-printed manifest to a generator/shipper/officer of regulated waste shall ensure that all information is correct and clearly legible on all copies of the manifest.
11. Deliver waste only to transfer, storage, treatment and disposal facilities authorized to accept such waste. Permittee must demonstrate that facilities are so authorized if requested to do so.
12. Maintain liability insurance as required by New York State Environmental Conservation Law.
13. Maintain records of the amount of each waste type transported to each destination facility on a calendar-year basis. The transporter is obligated to provide a report of this information to the Department at the time of permit renewal, or to any law enforcement officer, if requested to do so.
14. Pay regulatory fees on an annual basis. Non-payment may be cause for revocation or suspension of permit.
15. This permit is not transferrable. A change of ownership will invalidate this permit.
16. This permit does not relieve the permittee from the obligation to obtain any other approvals or permits, or from complying with any other applicable federal, state, or local requirement.
17. Renewal applications must be submitted no less than 30 days prior to the expiration date of the permit to:

New York State Department of Environmental Conservation  
Division of Materials Management, Waste Transporter Program  
625 Broadway, 9th Floor  
Albany, NY 12233-7251

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF MATERIALS MANAGEMENT

**PART 364**

**WASTE TRANSPORTER PERMIT NO. NJ-1391**

Pursuant to Article 27, Titles 3 and 15 of the Environmental Conservation Law and 6 NYCRR 364

**PERMIT ISSUED TO:**

SALAZAR TRUCKING LLC  
80 SOUTH 6TH STREET, APT. 2  
NEWARK, NJ 07107

**PERMIT TYPE:**

- ☒ NEW  
☐ RENEWAL  
☐ MODIFICATION

CONTACT NAME: CRISTIAN SALAZAR  
COUNTY: OUT OF STATE  
TELEPHONE NO: (973)704-4310

EFFECTIVE DATE: 02/22/2025  
EXPIRATION DATE: 02/21/2026  
US EPA ID NUMBER:

**AUTHORIZED WASTE TYPES BY DESTINATION FACILITY: (Continued)**

The Permittee is Authorized to Transport the Following Waste Type(s) to the Destination Facility listed :

Destination Facility	Location	Waste Type(s)	Note
CLEAN EARTH OF NEW CASTLE, INC.	NEW CASTLE , DE	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
CLEAN EARTH OF PHILADELPHIA	PHILADELPHIA , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
CLINTON QUARRY	CLINTON , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
COMMONWEALTH ENVIRONMENTAL SYSTEMS, LP	HEGINS , PA	Non-Hazardous Industrial/Commercial	
CONESTOGA LANDFILL	MORGANTOWN , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
COPLAY AGGREGATES	WHITEHALL , PA	Non-Hazardous Industrial/Commercial	
CUMBERLAND COUNTY IMPROVEMENT AUTHORITY	MILLVILLE , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
CYCLE CHEM (NJ)	ELIZABETH , NJ	Non-Hazardous Industrial/Commercial	
DOREMUS AVE SITE PREP & EARTHWORK	NEWARK , NJ	Non-Hazardous Industrial/Commercial	
DOREMUS AVENUE REDEVELOPMENT PROJECT	NEWARK , NJ	Non-Hazardous Industrial/Commercial	
EARTH EFFICIENT HARMONY (PLANT #1 BELVIDERE RD)	PHILLIPSBURG , NJ	Non-Hazardous Industrial/Commercial	
EARTH EFFICIENT HARMONY (PLANT #2 FOUL RIFT)	BELVIDERE , NJ	Non-Hazardous Industrial/Commercial	
EARTH EFFICIENT MSM LLC	EAST STROUDSBURG , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
ENVIRONMENTAL & RECYCLING SERVICES INC.	TAYLOR , PA	Non-Hazardous Industrial/Commercial	
EVERGREEN RECYCLING OF CORONA, INC	FLUSHING , NY	Non-Hazardous Industrial/Commercial	
FAIRLESS LANDFILL (PA DEP 101699)	MORRISVILLE , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
Faztec Industries	Staten Island , NY	Non-Hazardous Industrial/Commercial	
FRATTARELLI BROS TOPSOIL OPERATION	CARLSTADT , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
GRAND CENTRAL SANITARY LANDFILL	PEN ARGYL , PA	Non-Hazardous Industrial/Commercial	
GREEN ROCK RECYCLING	CLINTON , NJ	Non-Hazardous Industrial/Commercial	
GROWS LANDFILL (PA DEP 100148)	MORRISVILLE , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
HAZLETON CREEK PROPERTIES,LLC	HAZLETON , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	

\*\*\* AUTHORIZED WASTE TYPES BY DESTINATION FACILITY LISTING (continued on next page) \*\*\*

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
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TELEPHONE NO: (973)704-4310

EFFECTIVE DATE: 02/22/2025  
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US EPA ID NUMBER:

**AUTHORIZED WASTE TYPES BY DESTINATION FACILITY: (Continued)**

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Destination Facility	Location	Waste Type(s)	Note
HEIDELBERG MATERIALS AGGREGATES	STROUDSBURG , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
High Acres Western Expansion Landfill	Fairport , NY	Non-Hazardous Industrial/Commercial	
HOFFMAN GRIFFETT MINE RECLAMATION FACILITY	BELVIDERE , NJ	Non-Hazardous Industrial/Commercial	
Hunters Point Recycling Inc	Long Island City , NY	Non-Hazardous Industrial/Commercial	
IMPACT RECOVERY AND REUSE CENTER	LYNDHURST , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
KEYSTONE INDUSTRIAL/KIPC	MORRISVILLE , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
KEYSTONE SANITARY LANDFILL	DUNMORE , PA	Non-Hazardous Industrial/Commercial	
KINGSLAND LANDFILL CLOSURE PROJECT	LYNDHURST , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
KINSLEY LANDFILL	SEWELL , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
KSR CORP. DEVELOPMENT PROJECT	KEARNY , NJ	Non-Hazardous Industrial/Commercial	
Lawton Adams Construction Corp	Somers , NY	Non-Hazardous Industrial/Commercial	
LIBERTY AGGREGATES	JERSEY CITY , NJ	Non-Hazardous Industrial/Commercial	
MIDDLESEX COUNTY UTILITY AUTHORITY	SAYREVILLE , NJ	Non-Hazardous Industrial/Commercial	
NATURE'S CHOICE (KEARNY)	KEARNY , NJ	Non-Hazardous Industrial/Commercial	
New York Recycling LLC	Bronx , NY	Non-Hazardous Industrial/Commercial	
NJ ZINC FACILITY - PHASE 3	PALMERTON , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
NORTHPOINT REDEVELOPMENT OF US STEEL KEYSTONE IND PORT	FAIRLESS HILLS , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
P PARK NORTH LLC	PROSPECT PARK , NJ	Non-Hazardous Industrial/Commercial	
Patriot Recycling Inc.	Oceanside , NY	Non-Hazardous Industrial/Commercial	
Posillico Materials	Farmingdale , NY	Non-Hazardous Industrial/Commercial	
PURE SOIL TECHNOLOGIES	JACKSON , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
RESOURCE MANAGEMENT TECHNOLOGIES	NORTH BERGEN , NJ	Non-Hazardous Industrial/Commercial	
Richmond Recycling LLC	Staten Island , NY	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	

\*\*\* AUTHORIZED WASTE TYPES BY DESTINATION FACILITY LISTING (continued on next page) \*\*\*

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF MATERIALS MANAGEMENT

**PART 364**  
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80 SOUTH 6TH STREET, APT. 2  
NEWARK, NJ 07107

CONTACT NAME: CRISTIAN SALAZAR  
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TELEPHONE NO: (973)704-4310

**PERMIT TYPE:**

☒ NEW  
☐ RENEWAL  
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US EPA ID NUMBER:

**AUTHORIZED WASTE TYPES BY DESTINATION FACILITY: (Continued)**

The Permittee is Authorized to Transport the Following Waste Type(s) to the Destination Facility listed :

Destination Facility	Location	Waste Type(s)	Note
ROCKRETE RECYCLING	ELIZABETH , NJ	Non-Hazardous Industrial/Commercial	
ROCKTECH	JERSEY CITY , NJ	Non-Hazardous Industrial/Commercial	
RODOTA FILL SITE	BELVIDERE , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
SILVA CONSTRUCTION & DEMOLITION	NEWARK , NJ	Non-Hazardous Industrial/Commercial	
SOIL SAFE, INC.	LOGAN TOWNSHIP , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
SOIL SAFE-METRO 12	CARTERET , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
South Shore Recycling LLC	Staten Island , NY	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
STERICYCLE - HATFIELD	HATFIELD , PA	Non-Hazardous Industrial/Commercial	
STRAVOLA BBQ	BOUND BROOK , NJ	Non-Hazardous Industrial/Commercial	
TILCON - KEARNY RECYCLING	KEARNY , NJ	Non-Hazardous Industrial/Commercial	
TILCON - MOUNT HOPE QUARRY	WHARTON , NJ	Non-Hazardous Industrial/Commercial	
TULLYTOWN RESOURCE RECOVERY FACILITY (PA DEP 101494)	TULLYTOWN , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
US STEEL KEYSTONE	FALLS TOWNSHIP , PA	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
WMNY Varick 1 Transfer Station	Brooklyn , NY	Non-Hazardous Industrial/Commercial	
XRDS RECYCLING LLC	WAYNE , NJ	Non-Hazardous Industrial/Commercial Petroleum Contaminated Soil	
YANNUZZI GROUP - MIDDLESEX COUNTY EDISON , NJ		Non-Hazardous Industrial/Commercial	

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF MATERIALS MANAGEMENT

**PART 364**  
**WASTE TRANSPORTER PERMIT NO. NJ-1391**

Pursuant to Article 27, Titles 3 and 15 of the Environmental Conservation Law and 6 NYCRR 364

**PERMIT ISSUED TO:**

SALAZAR TRUCKING LLC  
80 SOUTH 6TH STREET, APT. 2  
NEWARK, NJ 07107

CONTACT NAME: CRISTIAN SALAZAR  
COUNTY: OUT OF STATE  
TELEPHONE NO: (973)704-4310

**PERMIT TYPE:**

- ☒ NEW  
☐ RENEWAL  
☐ MODIFICATION

EFFECTIVE DATE: 02/22/2025  
EXPIRATION DATE: 02/21/2026  
US EPA ID NUMBER:

**AUTHORIZED VEHICLES:**

The Permittee is Authorized to Operate the Following Vehicles to Transport Waste:

(Vehicles enclosed in <>'s are authorized to haul Residential Raw Sewage and/or Septage only)

1 (One) Permitted Vehicle(s)

NJ AZ303J  
End of List

**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). *Daily vehicle pre-trip inspection are performed by driver*
- 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.



## Motor Vehicle Driver Report

New York - 3 Years

Applicant: Cristian p salazar

File#: 1607368 Reported: 2/19/2025

## Information Provided For Search

Name: Cristian p salazar  
Address: 80 south 6 streetDate of Birth: 08/17/1994  
City/State/Zip: Newark nj 07107, NJ 07107SSN: [REDACTED]  
DL Number: [REDACTED]

## Driver Information

Name: CRISTIAN PATRICIO SALAZAR ORDONEZ

Date of Birth: [REDACTED]

## License

License State: NY

License Number: [REDACTED]

Issued: 02/27/2023

Expires: 08/17/2026

Type: PERSONAL

License Class: D - CLASS D NON COMMERCIAL ANY VEH &lt; 26000 LBS. MAY TOW ANOTHER VEHICLE &lt; 10000 LBS

Status: VALID

License State: NY

License Number: [REDACTED]

Issued: 02/27/2023

Expires: 08/17/2026

Type: COMMERCIAL

License Class: B - CLASS B COMMERCIAL VEH &gt; 26000 LBS. MAY TOW ANOTHER VEHICLE &lt; 10000 LBS

Status: VALID

## Violations

Incident Date: 06/21/2023

Conviction Date: 08/03/2023

Description: "STOPPING, STANDING, OR PARKING: OBSTRUCTING OR IMPEDING TRAFFIC"

State Code: J12V0467

Location: NJ

Court: MUN

Docket: 000020E23024120 N

## Accidents

Incident Date: 06/19/2023

Description: \*\*\* ACCIDENT \*\*\*

Commercial: Not Provided

Details: PERSONAL INJURY ACCIDENT

Location: Not Provided

Court: Not Provided

Docket: 39891751

## Medical Certificate

Certificate: NON-EXCEPTED INTERSTATE  
Issued: 01/04/2025  
Self Cert Date: Not Provided  
Examiner Name: RICHARD GALASSO  
Jurisdiction: NJ  
Speciality Code: CP

Medical Status: CERTIFIED  
Expires: 01/04/2027  
Posted: Not Provided  
License Number: [REDACTED]  
Reg. Number: [REDACTED]  
Phone: (973)271-1936

#### Additional Messages

Cust Pts:

RECIPROCITY ON 06/10/2022 FROM STATE NJ

Disclaimer: The information contained herein was obtained in good faith from sources deemed reliable, but the completeness or accuracy is not guaranteed. Per the signed Membership Agreement The User submitted to The LIG Group LLC, dba StarPoint Screening, The User recognizes that information is secured by and through fallible database and human sources. The User agrees to release the LIG Group LLC, dba StarPoint Screening, it's officers and employees from liability for any errors and or omissions contained in reports and from any loss or expense suffered by The User directly or indirectly from The LIG Group LLC, dba StarPoint Screening. The User agrees by submitting the signed Membership Agreement that this constitutes all conditions of service and of reporting, present and future and applies to all reports provided by The LIG Group LLC, dba StarPoint Screening and is binding in all 50 states.

# NEW YORK STATE <sup>USA</sup>

## COMMERCIAL DRIVER LICENSE

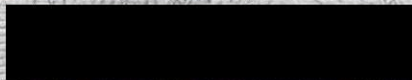
*Mark JF Schroder*  
Commissioner of Motor Vehicles



ID [REDACTED]

Class **B**

**SALAZAR ORDONEZ  
CRISTIAN, PATRICIO**



Issued **02/27/2023**

Expires **08/17/2026**

E NONE

R NONE

Sex **M** Height **5'-05"** Eyes **BRO**

*Cristian Salazar*  
*AUG 24*

**SALAZAR  
CRISTIAN**  
**AUG 24 2024**

EXPIRES:

10/31/2025

# NEW JERSEY APPORTIONED CAB CARD

KEEP THIS CERTIFICATE IN YOUR VEHICLE

PLATE

NUMBER:

AZ303J

UNIT NO. <b>06</b>		YEAR <b>2015</b>		MAKE <b>KW</b>		ACCOUNT NUMBER <b>NJ-79556</b>	
VEHICLE IDENTIFICATION NUMBER <b>1NKZXPX2FJ423987</b>				FLEET NO. <b>001</b>		SUPP. NO. <b>0000</b>	
REG. CODE <b>11</b>							
TYPE <b>TK</b>	AXLES <b>4</b>	GROSS WEIGHT <b>80000</b>		FUEL <b>D</b>	REGISTRATION DATE <b>10/25/2024</b>		
		DESCRIPTION <b>COMMERCIAL TRUCK</b>		TRANS ID # <b>IU202579556001000</b>			
OWNER <b>SALAZAR TRUCKING LLC</b>							

REGISTRANT

**SALAZAR TRUCKING LLC**  
**80 SOUTH 6TH ST**  
**NEWARK, NJ 07107**

NJ 080000	AL 080000	AR 080000	AZ 080000
CA 080000	CO 080000	CT 080000	DC 080000
DE 080000	FL 080000	GA 080000	IA 080000
ID 080000	IL 080000	IN 080000	KS 080000
KY 080000	LA 080000	MA 080000	MD 080000
ME 080000	MI 080000	MN 080000	MO 080000
MS 080000	MT 080000	NC 080000	ND 080000
NE 080000	NH 080000	NM 080000	NV 080000
NY 080000	OH 080000	OK 080000	OR 080000
PA 080000	RI 080000	SC 080000	SD 080000
TN 080000	TX 080000	UT 080000	VA 080000
VT 080000	WA 080000	WI 080000	WV 080000
WY 080000	AB 036281	BC 036281	MB 036281
NB 036281	NL 036281	NS 036281	ON 036281
PE 036281	QC 04 AXL	SK 036281	** *****
** *****	** *****	** *****	** *****
** *****	** *****	** *****	** *****

THE VEHICLE DESCRIBED HEREIN HAS BEEN PROPORTIONALLY REGISTERED BETWEEN THE STATE OF NEW JERSEY AND THE ABOVE JURISDICTIONS.

0000004022

Motor Carrier Responsible for Safety

USDOT Number: 3902162

**SALAZAR TRUCKING LLC**  
**80 SOUTH 6TH ST APT 2**  
**NEWARK, NJ 07107**



This document is the property of the State of New Jersey. It may be recalled at any time if it is determined that the registrant supplied incorrect information and/or failed to pay appropriate registration fees.

This document grants **registration reciprocity** with the states/provinces whose two-letter postal abbreviation appears on this page. You must still comply with all other laws a state/province may have regarding intra and interstate operations.

Change of name or address must be reported in writing to the New Jersey Motor Vehicle Commission, Motor Carriers Unit, PO BOX 178, Trenton, NJ 08611-0178, within thirty(30) days.

**Remember: Compulsory vehicle insurance is the law in New Jersey.**



New Jersey Motor Vehicle Commission  
 Acting Chair and Chief Administrator

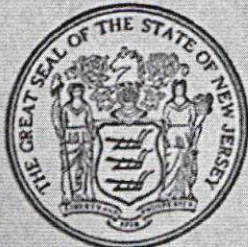
NEW JERSEY DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES

CERTIFICATE OF FORMATION

SALAZAR TRUCKING LLC  
0450799685

The above-named DOMESTIC LIMITED LIABILITY COMPANY was duly filed in accordance with New Jersey State Law on 04/17/2022 and was assigned identification number 0450799685. Following are the articles that constitute its original certificate.

1. **Name:**  
SALAZAR TRUCKING LLC
  2. **Registered Agent:**  
CRISTIAN SALAZAR
  3. **Registered Office:**  
80 SOUTH 6TH ST  
NEWARK, NEW JERSEY 07107
  4. **Business Purpose:**  
A COMPANY THAT WILL BE USED FOR HAULING CONSTRUCTION MATERIALS.
  5. **Effective Date of this Filing is:**  
04/17/2022
  6. **Members/Managers:**  
CRISTIAN PATRICIO SALAZAR ORDONEZ  
80 SOUTH 6TH ST  
NEWARK , NEW JERSEY 07107
  7. **Main Business Address:**  
80 SOUTH 6TH ST  
NEWARK , NEW JERSEY 07107
- Signatures:**  
CRISTIAN PATRICIO SALAZAR ORDONEZ  
AUTHORIZED REPRESENTATIVE



Certificate Number : 4170223383

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
17th day of April, 2022

A handwritten signature in cursive script, likely belonging to Elizabeth Maher Muoio.

Elizabeth Maher Muoio  
State Treasurer

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

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

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

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

USDOT Number: 3902162 Date Received: \_\_\_\_\_

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

Issued to SALAZAR TRUCKING LLC

(Motor Carrier name)

of 80 South 6th St, APT 2 Newark, NJ 07107

(Motor Carrier state or province)

Dated at 09:27 AM on this 22nd day of January, 2025

Amending Policy Number: CA 986773020 Effective Date: 01/22/2025

Name of Insurance Company: Drive New Jersey Insurance Company

Countersigned by: \_\_\_\_\_

Authorized company representative

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

- ☒ This insurance is primary and the company shall not be liable for amounts in excess of \$1,000,000 for each accident.
- ☐ This insurance is excess and the company shall not be liable for amounts in excess of \$\_\_\_\_\_ for each accident in excess of the underlying limit of \$\_\_\_\_\_ for each accident.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: 1-800-895-2886.

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

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

**DEFINITIONS AS USED IN THIS ENDORSEMENT**

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

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

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

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

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

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

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.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/06/2025

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).

<b>PRODUCER</b> Progressive Insurance PO Box 94739, Cleveland, OH 44101	<b>CONTACT NAME:</b> Progressive Commercial Lines Customer and Agent Servicing <b>PHONE (A/C, No, Ext):</b> 1-800-444-4487 <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b> progressivecommercial@email.progressive.com														
<b>INSURED</b> SALAZAR TRUCKING LLC 80 S 6th St APT 2 Newark, NJ 07107	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A : Drive New Jersey Insurance Company</td><td>11410</td></tr><tr><td>INSURER B :</td><td></td></tr><tr><td>INSURER C :</td><td></td></tr><tr><td>INSURER D :</td><td></td></tr><tr><td>INSURER E :</td><td></td></tr><tr><td>INSURER F :</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Drive New Jersey Insurance Company	11410	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : Drive New Jersey Insurance Company	11410														
INSURER B :															
INSURER C :															
INSURER D :															
INSURER E :															
INSURER F :															


**COVERAGES****CERTIFICATE NUMBER:** 137755452093600101D111224T171026**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	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	N	N		09/13/2024	09/13/2025	COMBINED SINGLE LIMIT (Ea accident) \$1,500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<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 See ACORD 101 for additional coverage details.	Y/N <input type="checkbox"/>	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A		N	N		09/13/2024	09/13/2025	\$

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

**CERTIFICATE HOLDER****CANCELLATION**

Delaware Department of Natural Resources and Environmental Control Compliance and Permitting Section 89 Kings Highway Dover, DE 1990	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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## ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

<b>AGENCY</b> Progressive Insurance		<b>NAMED INSURED</b> SALAZAR TRUCKING LLC 80 S 6th St APT 2 Newark, NJ 07107	
<b>POLICY NUMBER</b> [REDACTED]			
<b>CARRIER</b> Drive New Jersey Insurance Company	<b>NAIC CODE</b> 11410	<b>EFFECTIVE DATE:</b> 09/13/2024	

### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

### Additional Coverages

Insurance coverage(s)	Limits
Uninsured/Underinsured BI	\$100,000 Combined Single Limit
Uninsured/Underinsured PD	(included in combined single limit w/\$500 Ded)

### Description of Location/Vehicles/Special Items

#### Scheduled autos only

2015 KENWORTH CONSTRUCTION 1NKZXPEX2FJ423987

Stated Amount \$90,000

Comprehensive	\$2,500 Ded
Collision	\$2,500 Ded

Liability coverage may not apply to all scheduled vehicles.