

RECEIPT

DATE

05/12/05

No.

741829

RECEIVED FROM

Angeles Transportation Corp

\$350.00

Three hundred fifty and ⁰⁰/₁₀₀

DOLLARS

 FOR RENT FOR

DE-SW-2135

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY ORDER CREDIT CARD

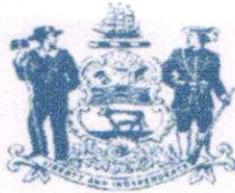
FROM

38167353652

TO

BY

AG



RECEIVED

MAY 12 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

ALL OTHERS

- One Year - \$75.00
Two Years - \$125.00
Three Years - \$175.00
Four Years - \$225.00
Five Years - \$275.00
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 Angeles Transportation Corp

Location Address:	Mailing Address:
2 King Rd Somerset NJ 08873	

Contact: Luis A Angeles Title: Owner

Business Phone: (646)420-5289 Fax: _____

E-mail: 

24 hr Emergency Contact Phone: (646)420-5289

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: Somerset State: NJ Date: 06/01/2015
 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 1

(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

Attachment-1

ANGELES TRANSPORTATION CORP

Owner's Name: Luis A Angeles

Date of Birth [REDACTED]

Ownership %: 100 %

Mailing Address: 2 King Rd Somerset, NJ 08873

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
CERTIFICATE OF REINSTATEMENT

ANGELES TRANSPORTATION CORP
0400752960

WHEREAS the above-named business entity did on the 10th day of June, 2024, satisfy all requirements for reinstatement as set forth in the laws of this State, I, the Treasurer of the State of New Jersey do hereby issue this certificate authorizing the same to continue its business and resume the exercise of its functions.

Registered Agent and Office

LUIS ANGELES
2 KING RD
SOMERSET, NJ 08873

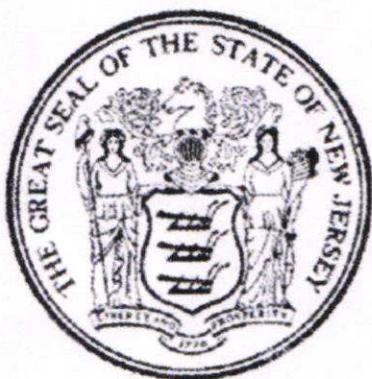
Main Business Address

2 KING RD
SOMERSET, NJ 08873

Officers and Directors

PRESIDENT
LUIS A ANGELES

VICE PRESIDENT
QUISQUEYA H ANGELES



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal, this
10th day of June, 2024*

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 2814783230
Verify this certificate online at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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) DRPI
 - 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 2
- No transporter permits in other states

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

DOT# 2822901 MC# 941635

- 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.

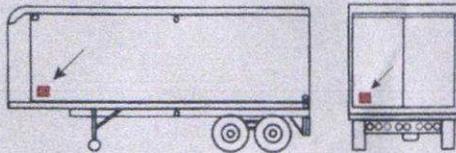
10. Proof of Financial Responsibility

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.)

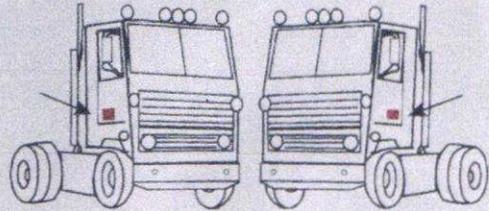
- (a). Are you for-hire in interstate commerce? Yes No (For-Hire means you are in the business of transporting, for compensation or payment, wastes generated by a company other than your own.)
- (b). Do you transport in the State of Delaware Only (Intrastate)? Yes No
- (c). Do you transport Interstate?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

Apply stickers to a clean, dry surface. It may take 24 hours for adhesive to reach full tack. Do not remove stickers once they are applied.

Waste Trailers



Trucks and Truck Tractors



Each qualified waste vehicle is issued two (2) stickers. Place the stickers on the vehicle as shown in the diagram.

15



COMMONWEALTH OF PENNSYLVANIA
Waste Transportation Safety Program
Written Authorization

4349253881

Phone No. (646) 420-5289

VIN# 1NP5LBEX75N873388
WH24349
Expires Aug 2025

ANGELES TRANSPORTATION CORP.
LUIS ANGELES
2 KING RD
SOMERSET, NJ 08873-2310

THIS WRITTEN AUTHORIZATION MUST BE KEPT WITH THE WASTE TRANSPORTATION VEHICLE AT ALL TIMES.
If lost or damaged contact DEP immediately at 717-783-9258.
A replacement fee is required.
Duplication or Photocopies of this original documentation are not valid.

THIS DOCUMENT INCLUDES PRINTED WATERMARK ON REVERSE. HOLD AT ANGLE TO VIEW.

SECURITY BACKGROUND IS PRINTED IN BLUE INK ON WHITE PAPER & INCLUDES PINK THERMO-INK KEYSTONE AT RIGHT

- (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 checked="" 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 3

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 4



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/07/2025

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		CONTACT NAME: FREDDIE TABARES	
One Stop Insurance Agency LLC		PHONE (A/C, No. Ext): (732)520-2206	FAX (A/C, No.): (732)520-2670
252 Madison Ave Ste 102		E-MAIL ADDRESS: CS@INSUREONESTOP.COM	
Perth Amboy NJ 08861		INSURER(S) AFFORDING COVERAGE	
		INSURER A: UNITED STATES LIABILITY INSURANCE COMPANY	NAIC # 25895
		INSURER B: AMERICAN MILLENNIUM INSURANCE COMPANY	26140
		INSURER C: GREAT AMERICAN INSURANCE COMPANY	16691
		INSURER D: HARTFORD UNDERWRITERS INSURANCE COMPANY	30104
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **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
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			[REDACTED]	08/01/2024	08/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ INCLUDED
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY		X	[REDACTED]	07/23/2024	07/23/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			[REDACTED]	08/01/2024	08/01/2025	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A	08/08/2024	08/08/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OT+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	MOTOR TRUCK CARGO			[REDACTED]	07/23/2024	07/23/2025	MTC LIMIT/DED: \$100,000/1,000

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

Certificate holder is listed below

Northeast Aggregates, LLC and Doing it Right Technologies, LLC, its officers, agents, and employees needs to be listed as additional insured.

VEHICLES: 2006 PETERBILT VIN 1NP5LBEX46N634642 | 2005 PETERBILT VIN 1NP5LBEX75N873388

DRIVERS: LUIS ANGELES | JONATHAN RIVERA | HENRY DAVID ANGELES

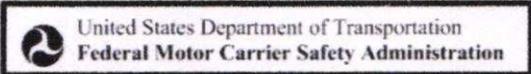
CERTIFICATE HOLDER	CANCELLATION
DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL 89 KINGS HWY DOVER, DE 19901	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE FREDDIE TABARES

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USDOT Number: 2822901

Date Received: 01/20/2020

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**

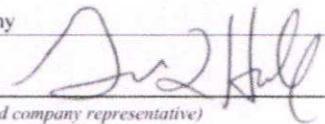
FORM MCS-90

Issued to ANGELES TRANSPORTATION CORP of NJ
(Motor Carrier name) *(Motor Carrier state or province)*

Dated at 07/23/2024 on this _____ day of _____

Amending Policy Number: [REDACTED] Effective Date: 07/23/2024

Name of Insurance Company: American Millennium Insurance Company

Countersigned by: 
(authorized company representative)

- The policy to which this endorsement is attached provides primary or excess insurance, as indicated by for the limits shown (check only one):
- This insurance is primary and the company shall not be liable for amounts in excess of \$ 750,000 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: 973-628-6060.

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, DC).

(continued on next page)

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

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

SPILL CONTROL PLAN FOR NON-HAZARDOUS SOLID WASTE TRANSPORTERS

**ALL PERMITTED TRANSPORTERS MUST PREPARE
AND
CARRY A SPILL CONTROL PLAN IN EACH VEHICLE**

At a minimum, the following information is required. You may attach additional pages or submit your company's prepared spill control plan.

1. A list all safety equipment carried in each vehicle, including spill containment and control materials.

<input checked="" type="checkbox"/>	Safety Equipment in the Vehicle	<input checked="" type="checkbox"/>	Safety Equipment in the Vehicle, continued
<input type="checkbox"/>	Emergency reflective triangles and/or flares	<input type="checkbox"/>	
<input type="checkbox"/>	Fire extinguisher	<input type="checkbox"/>	
<input type="checkbox"/>	First aid kit	<input type="checkbox"/>	
<input type="checkbox"/>	Wheel Chocks	<input type="checkbox"/>	
<input type="checkbox"/>	Gloves	<input type="checkbox"/>	
<input type="checkbox"/>	Reflective Vest	<input type="checkbox"/>	
<input type="checkbox"/>	Hard hat	<input type="checkbox"/>	
<input type="checkbox"/>	Flashlight	<input type="checkbox"/>	

2. The transporter acknowledges that all loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the treatment, storage, disposal or recycling facility.
3. The transporter acknowledges that in the event of an accident, the driver, if able, will contact the company's designated coordinator(s) listed under "EMERGENCY CONTACTS, COMPANY COORDINATOR(S)."
4. The transporter acknowledges that if a company coordinator cannot be reached, or there is none, the driver is responsible for contacting state and municipal authorities where the accident occurred.
5. In the event an incident causes any portion of a load to be spilled, or if there is a release of vehicle fluids, the transporter acknowledges that they are responsible for containing the release, proper management of all resulting waste, and any required remediation.
6. Explain the measures to be taken to contain any spilled waste. In the case of vehicle fluids, explain how the spill will be prevented from entering sewers or storm drains, or spreading from the spill location into adjoining soils or waterways.

spill control plan and emrgency protocol attached

Spill Control Plan for Non-Hazardous Solid Waste Transporters
Page 2 of 2

7. Measures to contain releases will be performed by:

- The driver, who is familiar with and appropriately trained to perform the activity.
- The transporter through company representatives appropriately trained to perform the activity and available to immediately respond.
- A regional third-party contractor identified under "EMERGENCY CONTACTS; CONTRACTORS IMMEDIATELY AVAILABLE TO RESPOND TO RELEASES/SPILLS."

8. The transporter acknowledges should additional clean-up services be required to address releases, including vehicle fluids, the contractor(s) under "EMERGENCY CONTACTS, CONTRACTORS IMMEDIATELY AVAILABLE TO RESPOND TO RELEASES/SPILLS" will be called.
9. If the accident results in a release/spill exceeding a Delaware Reportable Quantity as included in the regulations of 7 Del. Admin. Code 1203, *Reporting of a Discharge of a Pollutant or Air Contaminant* or has the potential to impact human health or 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 transporter acknowledges the company coordinator or driver will immediately notify Delaware's state emergency response team, by calling one of the numbers included under "EMERGENCY CONTACTS, REPORTING A RELEASE OR SPILL IN DELAWARE."

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). Attached daily pre-post trip inspection form
 - 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: Luis A Angeles Phone: (646)420-5289
- (5) The designated coordinator will contact the state and municipal authorities where the accident occurred. If the accident or spill has the potential to cause environmental damage, (either due to the nature of the waste, location of the accident, or additional factors such as leaking oil, gasoline, or hydraulic fluid) the person contacted will notify the state emergency response team, by calling one of the following numbers:
Delaware: 911, (302) 739-9401 or 1-800-662-8802 (*Other numbers may be listed as follows, however, the listed Delaware numbers **must** be included in the spill control plan.*)
Maryland:
New Jersey:
- (6) The designated coordinator will contract for clean-up services with another company. (*This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.*)
- (7) This plan will be carried in all vehicles, along with the permit.

DRIVER'S VEHICLE INSPECTION REPORT

AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS

CARRIER: _____

ADDRESS: _____

DATE: _____ TIME: _____ A.M. _____ P.M.

CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER "REMARKS"

TRACTOR/
TRUCK NO. _____

ODOMETER READING _____

- Air Compressor
- Air Lines
- Battery
- Belts and Hoses
- Body
- Brake Accessories
- Brakes, Parking
- Brakes, Service
- Clutch
- Coupling Devices
- Defroster/Heater
- Drive Line
- Engine
- Exhaust
- Fifth Wheel
- Fluid Levels
- Frame and Assembly

- Front Axle
- Fuel Tanks
- Horn
- Lights
 - Head/Stop
 - Tail/Dash
 - Turn Indicators
 - Clearance/Marker
- Mirrors
- Muffler
- Oil Pressure
- Radiator
- Rear End
- Reflectors

- Safety Equipment
 - Fire Extinguisher
 - Flags/Flares/Fusees
 - Reflective Triangles
 - Spare Bulbs and Fuses
 - Spare Seal Beam
- Starter
- Steering
- Suspension System
- Tire Chains
- Tires
- Transmission
- Trip Recorder
- Wheels and Rims
- Windows
- Windshield Wipers
- Other

TRAILER(S) NO.(S) _____

- Brake Connections
- Brakes
- Coupling Devices
- Coupling (King) Pin
- Doors

- Hitch
- Landing Gear
- Lights - All
- Reflectors/Reflective Tape
- Roof

- Suspension System
- Tarpaulin
- Tires
- Wheels and Rims
- Other

Remarks: _____

CONDITION OF THE ABOVE VEHICLE IS SATISFACTORY

DRIVER'S SIGNATURE: _____

ABOVE DEFECTS CORRECTED

ABOVE DEFECTS NEED NOT BE CORRECTED FOR SAFE OPERATION OF VEHICLE

MECHANIC'S SIGNATURE: _____ DATE: _____

DRIVER'S SIGNATURE: _____ DATE: _____

VEHICLE COPY

SPILL RESPONSE TELEPHONE NUMBERS (REFERENCE LIST)

ANGELES TRANSPORTATIO CORP
LUIS A Angeles (646)420-5289

<u>Spill Reporting Phone Numbers:</u>	Phone Number:
USDOT National Response Center	201-874-1175
Center for Disease Control	404-633-5313
USCG National Response Center	202-426-2675
	800-424-8802
Delaware DNREC 24-hour Hotline	302-739-9401
(in state only)	800-662-8802
New Jersey DEP 24-hour Hotline	609-292 -7172
New York State DEC 24-hour Hotline	518-457-7362
	800-457-7362
Pennsylvania DEP 24-hour Answering Service	717-787-4343
PS Emergency Management Agency	717-783-8150(24 hr)
Region 1 (Norristown)	215-270-1900
Region 2 (Wilkes-Barre)	717-826-2511
Region 3 (Harrisburg)	717-657-4585
Region 4 (Williamsport) (9am-5pm)	717-327-3646
(24-hour)	717-327-3696
Region 5 (Pittsburgh)	412-645-7100
Region 6 (Meadville)	814-724-8557
PA local Police and Fire Departments	911or (0) Operator
Maryland DEP 24-hour Answering Service	866-633-4686

EMERGENCY RESPONSE EQUIPMENT

The following emergency response equipment is to be maintained on each ANGELES TRANSPORTATION CORP vehicle while hauling contaminated waste or contaminated material.

1. Emergency Eyewash Kit
2. First Aid Kit
3. Portable ABC Dry Chemical Fire Extinguisher
4. Equipment and Protective Clothing, as follows:
 - Safety Goggles and/or Shield
 - PVC Boots
 - PVC Gloves
 - Rain Gear
 - Disposable Coveralls (e.g. Tyvek)
 - Triangle Reflectors
 - Hard Hat
 - Duct Tape (at least one roll)
 - Tool Kit
 - Flash Light
 - Sorbent Pads, OH-Dri
 - 85 Gallon Overpack Drum (for drum shipments)
 - Bung Wrench (Non-Sparking, for drum shipments)
 - Shovel
 - Spill Kit

All emergency response equipment is to be inspected daily by the DRIVER during his/her Pre-Trip inspection. Emergency equipment which is damaged or missing should be replaced prior to departure.

In the event of a spill ANGELES TRANSPORTATION CORP emergency response contractors can provide additional equipment, such as vacuum trucks, dump trucks, front end loaders and other equipment necessary to contain and remove contaminants.

SPILL CLEANUP AND EMERGENCY REPORTING PROCEDURES

All Personnel will follow this plan in the event of a spill/discharge of any material during pickup, transportation or delivery.

All actions taken and notification made following a report of a spill/discharge or other emergency must be done only with the full knowledge and approval of the ANGELES TRANSPORTATION CORP Emergency Coordinator in charge and in compliance with applicable local, state and federal regulations.

1. In the event of a spill/discharge or other emergency during delivery, transportation or pickup, the Driver will use his/her common sense to IMMEDIATELY and safely take appropriate action to protect human health and the environment including:
 - a. Secure the area to unauthorized access by people or other vehicles
 - b. Keep all sources of ignition (e.g. pipes, cigarettes, flares, etc.) away from the scene
 - c. Set up warning signals around the scene to prevent further accidents. Flame producing signals such as flares should not be used during incidents involving combustible or flammable materials
 - d. Attempt to contain the spill and stop or reduce the flow of the leak
 - e. Obtain help in the immediate area to assist in securing the site
2. The DRIVER will contact (or have a responsible person in the area call) the Cerberus Transport LLC Emergency Coordinator(s) via the phone numbers listed previously. The DRIVER or alternate caller will provide the Emergency Coordinator with the information requested in the following section
3. The DRIVER is then to continue to monitor the scene and remain in contact with the Emergency Coordinator while an appropriate course of action is determined
4. The Emergency Coordinator, DRIVER, or other authorized individual shall be responsible for contacting the appropriate authorities as well as the necessary contractors

PRELIMINARY SPILL INFORMATION

A. Who is reporting the spill? If other than the driver, note the driver's name.

B. Where are you calling from and what is the telephone number or the site you are calling from?

C. Where is the spill? _____

D. Who is the Generator of the waste spilled? _____

E. What wastes have spilled and how much of each waste were spilled?

WASTE

AMOUNT

F. What is being done to stop, slow or clean up the spill/dischage? _____

G. What type of truck are you driving? (Tri-Axle dump truck, Roll-Off, etc.) _____

H. Has anyone been injured? How bad are their injuries? _____

I. How much damage is there to the vehicle involved and the surrounding property?

J. What authorities (e.g. police, fire, EPA, etc.) are already at the scene? _____

IMMEDIATE CONTAMINATED MATERIALS INCIDENT NOTIFICATION

At the earliest practical moment after a spill/discharge occurs, the Emergency Coordinator or the Driver shall initiate contact with the USDOT/USEPA/USCG National Response Center by telephone at 1-800-424-8802 if the incident involves contaminated materials during transportation, unloading or storage and results in one or more of the following:

1. A person is killed
2. A person receives injuries requiring hospitalization
3. Estimated damage to carrier or other property exceeding \$50 000
4. A situation though it does not meet one of the criteria exists of such a nature that in the judgement of the carrier, it should be reported even though it does not meet one of the criteria listed above (e.g. a continuing danger to life exists at the scene)

In making the telephone report, the Emergency Coordinator, Driver or other authorized individual shall provide the following information to the extent possible:

1. Name of the REPORTER
2. The name and address of the transported as follows:
 - Name address:
3. Telephone number where the REPORTER can be contacted
4. The location, date and time that the incident occurred
5. Identify the extent of injuries, if any
6. The classification, name and quantity of contaminated materials involved if such information is available. For each material involved in the incident, an attempt should be made to supply the following specific information:
 - a. Generator's name
 - b. Generator's EPA identification number
 - c. Proper DOT shipping name
7. A brief description of the type of incident and the nature of contaminated material involvement and whether a continuing danger to life exists at the scene.

DETAILED CONTAMINATED MATERIALS INCIDENT REPORT

A written report, in duplicate on DOT Form F 5800.1, must be made within 15 days of discovery of an incident arising out of the transportation, loading, unloading or storage of contaminated materials as follows:

- a) As a follow-up to any such incident reported by telephone during the immediate notification process described previously.
- b) As a result of an unintentional release of contaminated materials from any packaging including a cargo tank.

CONTAMINATED SUBSTANCE DISCHARGE NOTIFICATION

A discharge of a contaminated substance into or upon navigable water must be reported to the USDOT/USEPA/USCG Coast Guard National Response Center at 1-800-424-8802 or 1-202-426-2675. (Note: Only spills of hazardous substance which equal or exceed the designated "Reported Quantity" are required to be reported.)

Reportable Quantity values may be found as an Appendix to 49 CFR 172.101

The notification should be made by the designated Emergency Coordinator or alternately the driver as soon as that person has knowledge of the spill or damage.

The discharge notification should include the same information as that which is provided to the USDOT National Response Center during the Federal immediate notification process outlined previously

**SPILL CONTROL PLAN FOR
NON-HAZARDOUS SOLID WASTE TRANSPORTERS**

EMERGENCY CONTACTS

COMPANY COORDINATOR(S)

Name	Telephone Number
Luis A Angeles	(646)420-5289

Name	Telephone Number

**CONTRACTORS IMMEDIATELY AVAILABLE TO RESPOND TO
RELEASES/SPILLS**

Name	Telephone Number

Name	Telephone Number

REPORTING A RELEASE OR SPILL IN DELAWARE

911
(302) 739-9401
(800) 662-8802

ADDITIONAL COMPANY CONTACTS

Name	Telephone Number

ANGELES TRANSPORTATION CORP

2 King Rd
Somerset, NJ 08873

Driver Training:

1-All drivers are trained in the proper pre-tripping of vehicles which includes,

- Check all tires
- Lights and signals
- Tailgate is secured

2-All drivers are made familiar with all FMSCA regulations pertaining to the transport and disposal of material provided by 49CFR Parts 383,390,390-399

3-All drivers are familiar with spill control plans.

4-All drivers are trained in the proper handling of the various types of waste to be transported included.

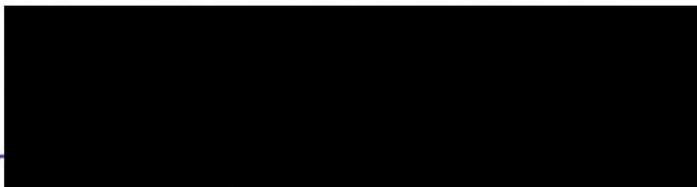
- Manifest system
- Handling procedures
- Safe vehicle operation

5-All drivers are familiar with the conditions of the solid waste transporter's permit.

Drivers:

1- Luis A. Angeles -

2 Jonathan Rivera -



DRIVER TRAINING

All drivers will have Class A or Class B CDL license. All drivers review the FMCSA share the road safely truck and bus driver tips annually and sign and date the documents as a read and acknowledge. Documents are stored in the cab of the vehicle as well. Drivers shall review the DOT Motor Carrier Safety Regulations. FMCSA will also conduct safety audits.

I work with my insurance carrier to verify driving records. If a driver were to obtain a moving violation there would be a formal meeting held with the driver reviewing the incident and written warning which the driver and president of the company will sign stating if a second violation is received they will be terminated from the company. They are responsible for making payment on the violation as well and attending a motor vehicle training class.

Driver(s) will ensure vehicle transporting solid waste is covered to prevent discharge or release of solid waste to the environment. Waste will be disposed of at approved facilities as in attached facility list. The driver(s) shall maintain a log of shipments which will also be utilized for annual reporting to Delaware. The driver(s) shall coordinate the schedule for truck arrival and material deliveries at the facility. The delivery shall be compatible with the availability of equipment and personnel for material handling operations at the job site. The driver(s) shall inspect all vehicles leaving the site to ensure that contaminated soils adhering to the wheels or undercarriage are removed prior to the vehicle leaving the site. The driver(s) shall not deliver waste to any facility other than the disposal facility(ies) listed on the shipping manifest. The driver(s) shall ensure that trucks are protected against contamination by properly covering and lining them with compatible material or by decontaminating them prior to any use other than hauling contaminated materials.

All drivers review the spill control plan, sign and date as training records of a read and acknowledge training session. Spill control plan is retained in the cab of the vehicle. In addition, all vehicles will carry safety equipment as per Motor Carrier Safety Regulations DOT 49 CFR.

Driver(s) will review the 1301 Regulations Governing Solid Waste to ensure familiarity with conditions of permit.

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

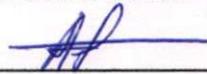
15. Environmental Record

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 05/07/2025
Print Name Luis A Angeles Title Owner

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

ANGELES TRANSPORTATIONCORP

COMPANY DRIVER POLICY

Safety and compliance (Drivers responsibilities)

Due to recent DOT violations and a severe impact on Safety Rating, **ANGELES TRANSPORTATION CORP** is putting into effect company fines for any violations due to driver negligence. Fines will reflect on any violations on Driver Vehicle Inspection Report. Fines could range from \$25 and up to \$300 (depending on the severity of the violation). Will not tolerate any driver that is not performing his duties in a safe and professional manner.

If a driver is fined, it will be deducted from the following week payroll, NO EXCEPTIONS. If a driver gets another violation after he was already fined from a previous violation, driver will be terminated immediately. If a driver is involved in an accident, and it is proved to be the driver's fault, driver will be terminated.

Also, a monthly safety bonus will be rewarded every month for drivers who perform their duties in a safe and professional manner. Meaning, maintaining their trucks clean, reporting any repairs needed and makes sure it's repaired. Have proper equipment, such as hard hat, safety shoes, and vest at all times. No violations that month.

Every day, a proper PRE-TRIP is required and MANDATORY. Pre-Trip inspections includes the following: Make sure all lights are working (headlights, turn signals, overhead lights, license plate light, etc.), make sure tires are properly inflated and in good condition. Wipers are in working order. Horn works. Windshield is clean and clear. License plate is clean of any dirt and is visible. Make sure your fire extinguisher is charged and secured. This takes 5 minutes to do, this is mandatory, failure to comply will result in termination.

Let's all work together and make a difference in bringing our Safe Score down. If any questions, please do not hesitate to come and talk to me.

Date

Employee Signature

Disclaimer: This policy is intended for reference purposes only; please consult all applicable state and local laws or statutes prior to implementation.

Mandatory Safety Gear Policy

Attention ALL Drivers of **ANGELES TRANSPORTATION CORP.**

You must come to work prepared, and be dressed accordingly. If our clients find that our Drivers are careless, this will decrease better runs for all of you. It is mandatory to

wear your safety gear at all times while you are operating our trucks!

You are the faces of our company, and you must respect it by wearing your safety gear every day.

It is mandatory for ALL of you to wear the following upon entering your truck:

- Reflective Safety Vest
- Hard Hat
- Safety Goggles
- Steel Toe Boots
- Pants (no shorts allowed)
- Long Sleeve Shirt
- Bluetooth
- Shovel (for snow)

Date

Employee Signature

Disclaimer: This policy is intended for reference purposes only; please consult all applicable state and local laws or statutes prior to implementation.

DRIVING AND TRAFFIC VIOLATION POLICY

We deeply value the safety well-being of all employees. Due to the risk of motor vehicle accidents resulting from traffic congestion, unsafe driving habits, road conditions and distraction, **ANGELES TRANSPORTATION CORP** has instituted a safety driving policy any rules. This safety policy applies to all employees who operate a motor vehicle on company business and/or company time, whether operating a company vehicle or personal vehicle.

Safety Rules

1. Inspect vehicles prior to use to ensure that they are in safe operating condition.

a) If a vehicle does not pass inspection, immediately notify company staff.

b) Vehicles are not be operated unless in a safe operating condition.

2. Drivers must be physically and mentally able to drive safely. Fatigue, medications, and physical injuries can affect an employee's ability to safely operate a vehicle.

3. Drivers must conform to all traffic laws and make allowances for adverse weather and traffic conditions. Speeding and aggressive behavior will not be tolerated.

4. Seat belts must be worn whenever a vehicle is in motion. **ANGELES TRANSPORTATION CORP** recognizes that seat belts are extremely effective in preventing injuries and loss of life. It is a simple fact that wearing your seat belt can reduce your risk of dying in a traffic crash by as much as 60 percent in a truck. We care about our employees and want to make sure that no one is injured or killed in a tragedy that could have been prevented using seat belts. Therefore, all employees of **ANGELES TRANSPORTATION CORP** must wear seat belts when operating a company-owned vehicle, or any vehicle on company premises or on company business.

5. Cell phone usage, including texting, is prohibited while driving for company purposes.

6. Use of radar detectors is forbidden in all vehicles owned or used by the company.

7. Hitchhikers and passengers other than company employees are not permitted.

8. Cargo should be secured, and all doors should be locked, both when the vehicle is on route and when it is parked

9. Respect the rights of other drivers and pedestrians.

10. Drivers may not be under the influence of drugs or alcohol while operating a vehicle for company purposes.

11. All traffic violations, whether on company or personal time, must be reported to the manager within 24 hours or by the next business day. CDL drivers will also be required to complete a violation review form.

12. **ANGELES TRANSPORTATION CORP** will review motor vehicle reports annually.

13. If an employee has a change in license status, including a renewal, he or she must give a copy of his or her new license to the supervisor for the employee's file.

14. Employees are responsible for maintaining a valid driver's license.

Safety Rules Enforcement

Employees will be subject to disciplinary action up to and including termination for violating any of the above rules.

Accidents

Any employee who is involved in an accident while driving for company purposes will be required to complete an accident report on the same day to (ev.iew the information to make sure it is complete. The employee must go for his or her post-accident drug and alcohol analysis at one of our designated facilities. The employee may also be required to discuss the accident with Human Resources or the safety manager.

Management will review all accidents and determine whether they were preventable or non-preventable. A preventable accident is defined as an accident in which the driver failed to do everything reasonably possible to prevent it from occurring

Motor Vehicle Report (MVR):Standards

MVRs will be checked:annually for all employees who may be required to drive for company purposes. The MVR will be reviewed to ascertain whether the employee holds a valid license and whether his or her driving record is within the parameters set by the company.

Drivers will be disqualified from driving vehicles for company purposes for any of the following reasons:

1. More, than one violation for driving under the influence of alcohol or a controlled substance will result in permanent suspension of driving privileges at **ANGELES TRANSPORTATION CORP.**
2. Any criminal conviction that involves a motor vehicle (e.g., a felony, hit and run, negligent homicide) in the previous five years.
3. Any of the following violation incurred in the previous three years:
 - a. Any combination of more than three moving violations (any violation resulting in an at-fault auto accident automatically counts as two violations)
 - b. Any violation less than three years old for an alcohol- or controlled substance-related driving offense
 - c. Refusing to take a breathalyzer test
 - d. Careless or reckless driving that results in injury to persons or property
 - e. Passing a stopped school bus.
 - f. Leaving the escene of an accident without stopping to file a report
 - g. Racing
4. Any combination of more than two moving violations and/or at-fault accidents in the past 12 months

This form is an example only. Requirements for the annual driver's certification of violations can be found in [49 CFR 391.27](#).

ANNUAL DRIVER'S CERTIFICATION OF VIOLATIONS

MOTOR CARRIER INSTRUCTIONS: Each motor carrier must at least once every 12 months, require each driver to prepare a list of all violations of motor vehicle traffic laws and ordinances (other than violations involving only parking) of which the driver has been convicted, or of which he/she has forfeited bond or collateral during the preceding 12 months (49 CFR 391.27). Drivers who have provided information required by 49 CFR 383.31 need not repeat that information on this form.

DRIVER REQUIREMENTS: Each driver will provide the list as required by the motor carrier above. If the driver has not been convicted of, or forfeited bond or collateral on account of, any violation which must be listed, he/she shall so certify (49 CFR 391.27).

COMPLETED BY DRIVER - CERTIFICATION OF VIOLATIONS

DRIVER NAME: LAST, FIRST, MI SOCIAL SECURITY NUMBER DATE OF EMPLOYMENT

HOME TERMINAL (CITY AND STATE) DRIVER'S LICENSE NUMBER STATE EXPIRATION DATE

I certify that the following is a true and complete list of traffic violations required to be listed (other than those I have provided under 49 CFR 383) for which I have been convicted or forfeited bond or collateral during the past 12 months.

Check this box if you have had no violations in the past 12 months.

DATE	OFFENSE	LOCATION	TYPE OF VEHICLE OPERATED

If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation required to be listed during the past 12 months.

DATE DRIVER'S SIGNATURE

MOTOR CARRIER NAME MOTOR CARRIER ADDRESS

REVIEWER PRINTED NAME REVIEWER SIGNATURE TITLE DATE

POLICY DRIVER RECEIPT

I acknowledge receipt of the **ANGELES TRANSPORTATION CORP** Driving & Traffic Violation Policy.

I have read, understand, and agree to the terms set forth in this Driving and Traffic Violation policy .

Date

Employee Signature

Disclaimer: This policy is intended for reference purposes only; please consult all applicable state and local laws or statutes prior to implementation.

Davis, DaQuan (DNREC)

From: luis angeles <angelesl2021@yahoo.com>
Sent: Thursday, May 15, 2025 3:22 PM
To: WHStranporters
Subject: Re: DNREC Notice- Incomplete Delaware Solid Waste Permit Application (SW2135)
Attachments: Agreement.pdf

Hi,

I'm sorry to bother you.
Something like this will work?
Please kindly advise.

On Thursday, May 15, 2025 at 11:13:10 AM PDT, WHStranporters <whstranporters@delaware.gov> wrote:

Yes, please create one.



DaQuan L. Davis

Environmental Scientist

Division of Waste and Hazardous Substances

📞 302-739-9403

✉️ WHStranporters@delaware.gov

📍 89 Kings Hwy SW, Dover, DE 19901

🌐 dnrec.delaware.gov



From: luis angeles <angelesl2021@yahoo.com>
Sent: Thursday, May 15, 2025 2:05 PM
To: WHStranporters <WHStranporters@delaware.gov>
Subject: Re: DNREC Notice- Incomplete Delaware Solid Waste Permit Application (SW2135)

Good afternoon,

I hope this email finds you well.

To be honest we don't have any lease agreement HRJ Transport LLC is my brother's company.

That company is the owner but truck is registered and Carrier responsible for safety under Angeles Transportation Corp.

Please kindly advise how can I proceed, do I need to create one?

Thank you in advance!

On Wednesday, May 14, 2025 at 12:55:36 PM PDT, WHStranporters <whstranporters@delaware.gov> wrote:

Hi Mr. Angeles,

Thank you for submitting your application for 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 13-** Please provide the vehicle lease agreement from HJR Transporter LLC.

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

Thank you,



DaQuan L. Davis

Environmental Scientist

Division of Waste and Hazardous Substances

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



AGREEMENT

- **Lessor:** HRJ TRANSPORT LLC located at: 6 Erica Court Old Bridge, NJ 08857
- **Lessee:** Angeles Transportation Corp located at: 2 Kings Rd Somerset, NJ 08873

I Johnathan J Rivera, owner of HRJ Transport LLC, authorized Angeles Transportation Corp to operate the following unit:

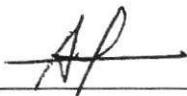
Vehicle Type: Dump Truck
Vin No: 1NP5LBEX46N634642
Issued by the State of: New Jersey
License No: AX570C

2. Responsibility for Safety:

- **Lessee's Responsibilities:**
 - **Inspection:** The lessee should be responsible for regularly inspecting the dump truck for any potential safety issues.
 - **Maintenance:** Specify who is responsible for routine maintenance and repairs, including things like tire pressure, oil changes, and other necessary upkeep.
 - **Safety Equipment:** Ensure that the dump truck has and maintains all required safety equipment, such as seatbelts, backup alarms, and emergency lights.
 - **Driver Responsibilities:** The lessee is responsible for ensuring that the driver operating the truck is properly trained and licensed.
 - **Compliance:** The lessee must adhere to all relevant safety regulations and laws, both federal and state, regarding the operation of dump trucks.
- **Lessor's Responsibilities:**
 - **Initial Inspection:** The lessor might be responsible for ensuring the truck is in good working order and meets safety standards at the beginning of the lease.
 - **Maintenance and Repair:** If the lessor is responsible for major repairs, specify the process and payment for those repairs.
 - **Documentation:** The lessor should provide the lessee with any relevant documentation, such as inspection reports or maintenance records.



HRJ TRANSPORT LLC
Johnathan J Rivera, owner



Angeles Transportation Corp
Luis A Angeles, owner

AGREEMENT

- **Lessor:** HRJ TRANSPORT LLC located at: 6 Erica Court Old Bridge, NJ 08857
- **Lessee:** Angeles Transportation Corp located at: 2 Kings Rd Somerset, NJ 08873

I Johnathan J Rivera, owner of HRJ Transport LLC, authorized Angeles Transportation Corp to operate the following unit:

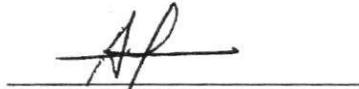
Vehicle Type: Dump Truck
Vin No: 1NP5LBEX46N634642
Issued by the State of: New Jersey
License No: AX570C

2. Responsibility for Safety:

- **Lessee's Responsibilities:**
 - **Inspection:** The lessee should be responsible for regularly inspecting the dump truck for any potential safety issues.
 - **Maintenance:** Specify who is responsible for routine maintenance and repairs, including things like tire pressure, oil changes, and other necessary upkeep.
 - **Safety Equipment:** Ensure that the dump truck has and maintains all required safety equipment, such as seatbelts, backup alarms, and emergency lights.
 - **Driver Responsibilities:** The lessee is responsible for ensuring that the driver operating the truck is properly trained and licensed.
 - **Compliance:** The lessee must adhere to all relevant safety regulations and laws, both federal and state, regarding the operation of dump trucks.
- **Lessor's Responsibilities:**
 - **Initial Inspection:** The lessor might be responsible for ensuring the truck is in good working order and meets safety standards at the beginning of the lease.
 - **Maintenance and Repair:** If the lessor is responsible for major repairs, specify the process and payment for those repairs.
 - **Documentation:** The lessor should provide the lessee with any relevant documentation, such as inspection reports or maintenance records.



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