

RECEIPT

DATE 5/30/25No. 741845RECEIVED FROM Delaware Compost LLC

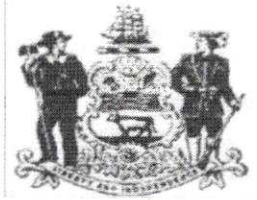
\$ <u>350.00</u>

Three hundred fifty and 00 DOLLARS FOR RENT
 FOR new DE-SW-241

ACCOUNT	
PAYMENT	
BAL. DUE	

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM 101 TO _____BY [Signature]



RECEIVED

MAY 30 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

- | | |
|---|---|
| <input type="checkbox"/> One Year - \$75.00 | <input checked="" type="checkbox"/> One Year - \$350.00 |
| <input type="checkbox"/> Two Years - \$125.00 | <input type="checkbox"/> Two Years - \$650.00 |
| <input type="checkbox"/> Three Years - \$175.00 | <input type="checkbox"/> Three Years - \$950.00 |
| <input type="checkbox"/> Four Years - \$225.00 | <input type="checkbox"/> Four Years - \$1250.00 |
| <input type="checkbox"/> Five Years - \$275.00 | <input type="checkbox"/> 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 Delaware Compost LLC

Location Address:	Mailing Address:
N/A No location	Delaware Compost LLC
	1404 N. King Sreet
	Wilmington, DE 19801

Contact: Mara Wolff Title: Founder, President

Business Phone: 302.275.4862 Fax: _____

E-mail: Delawarecompost@gmail.com

24 hr Emergency Contact Phone: 302.218.4196, 585.415.4502

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: DE
- Other: (must specify) _____

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

Attachment _____

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

Attachment _____

No parent company

- (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	\$350,000.00 ×
Commercial Waste	\$750,000.00 + MCS-90	\$350,000.00 ×
Industrial Waste	\$750,000.00 + MCS-90	\$350,000.00
Dry Waste	\$750,000.00 + MCS-90	\$350,000.00 ×
Ash	\$750,000.00 + MCS-90	\$350,000.00
Infectious Waste	\$1,000,000.00 + MCS-90	\$750,000.00 + MCS-90
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MCS-90	\$350,000.00
Asbestos	\$1,000,000.00 + MCS-90 (For Hire & Private)	\$350,000.00
Scrap Tires Only	\$350,000.00	\$350,000.00

11. Spill Control and Safety

List all spill control and safety equipment which will be carried on each vehicle. (**Note:** Separate lists by type of vehicle and type of waste may be required.) Attach a copy of the Spill Control Plan. The Spill Control Plan **must** contain the following elements: (1) List of safety and spill control equipment carried in the vehicle, (2) Driver preventive measures, (3) Driver immediate corrective actions, (4) Company internal communications, (5) Company external communications including the **Delaware Emergency Reporting Numbers: 1-800-662-8802 and 302-739-9401**, and (6) Cleanup and decontamination measures.

Spill Control Plan: Attachment See page 7

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 See page 8

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 See page 9

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 Mara I Wolff Date 2.21.25

Print Name Mara I Wolff Title Founder & President

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

Spill Control Plan

Delaware Compost LLC

- Vehicle safety
 - o Reflectors and/or flares
 - o Small traffic cones
 - o Magnet that read, "frequent stops"
 - o First aid kit
 - o Sunscreen
 - o Broom/dustpan
 - o Heavy duty trash bags
 - o Rope

- PPE
 - o Reflective vest
 - o Heavy duty gloves
 - o Bottled water
 - o Steel toe boots
 - o Comfortable, breathable clothing
 - o Company phone with proper software installed. Backup Garmen in glovebox

- Pickup protocol
 - o Residential pickup
 - Weigh bucket with scale and input into stopSuite
 - Load into truck either with lidded bucket or dump into lidded plastic bin in truck bed
 - Secure truck doors & top, inspect outside of the vehicle to ensure all doors, lids, etc are closed and secure.
 - Leave fresh bucket with client

 - o Commercial pickup
 - TBD based upon client needs
 - Empty vessels into lidded plastic bins/buckets in truck
 - Secure empty vessels for client and check for any spilled material
 - If spilled material, sweep up and place into trash bag separate from clean feedstock

- Accident/ spill
 - o Delaware
 - Call 911 if warranted
 - 302.739.9401
 - 1.800.662.8802
 - [REDACTED]

 - o Pennsylvania
 - Call 911 if warranted
 - National response center 1.800.424.8802
 - Commonwealth watch and warning center at PEMA 717.651.2001

Driver Training

Mara Wolff, founder and president of Delaware Compost LLC has a demonstrated history of safe driving. Mara has extensive experience driving large vehicles and trucks.

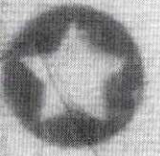
SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

- (1) Spill control and safety equipment carried in each vehicle:
 - 1). Reflectors and/or flares
 - 2). Fire extinguisher
 - 3). First aid kit
 - 4). Heavy-duty gloves, hard hat
 - 5). Flashlight
 - 6).
- (2) All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.
- (3) The driver will perform the following pre-trip inspections:
 - 1).
 - 2).
- (4) If there is an accident or other emergency which causes a portion of the load to be spilled, the driver, if uninjured, will contact the following designated company coordinator:
Name: _____ Phone: _____
- (5) The designated coordinator will contact the state and municipal authorities where the accident occurred. If the accident or spill has the potential to cause environmental damage, (either due to the nature of the waste, location of the accident, or additional factors such as leaking oil, gasoline, or hydraulic fluid) the person contacted will notify the state emergency response team, by calling one of the following numbers:
Delaware: 911, (302) 739-9401 or 1-800-662-8802 (*Other numbers may be listed as follows, however, the listed Delaware numbers **must** be included in the spill control plan.*)
Maryland:
New Jersey:
- (6) The designated coordinator will contract for clean-up services with another company. (*This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.*)
- (7) This plan will be carried in all vehicles, along with the permit.

Delaware

USA

DRIVER LICENSE



April S. ... DIRECTOR



Mara Iris

4d DL N [REDACTED]

9 Class D

1a Iss 09/23/2024

2b Exp [REDACTED]

1 WOLFF
2 MARA IRIS

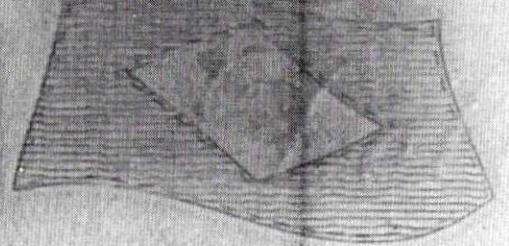
8 [REDACTED]

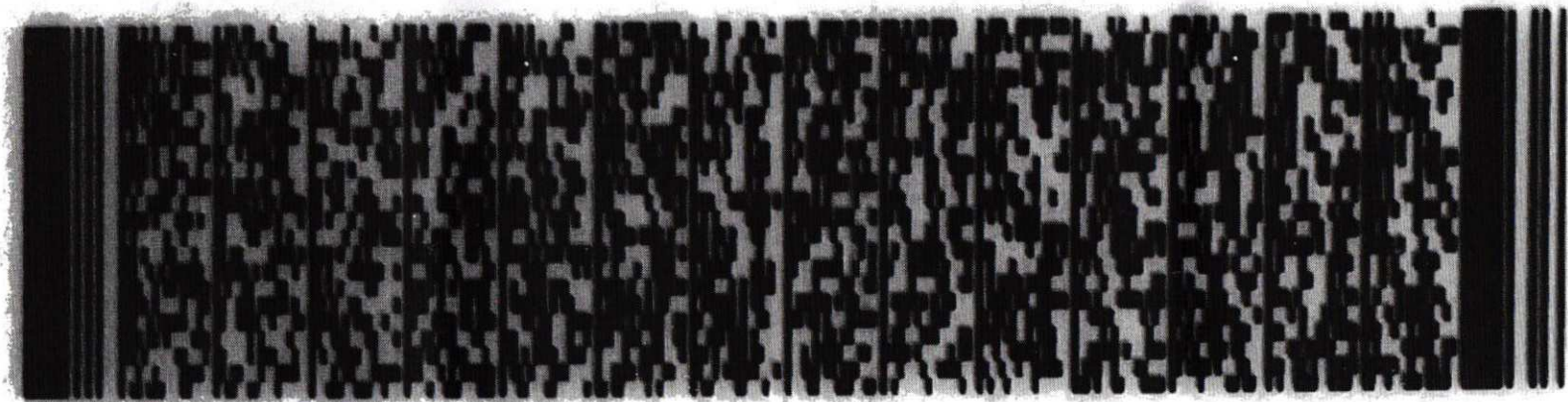
15

12 Restrictions
NONE

9a End NONE

5 [REDACTED]





01103376
72624059

21

**CLASS: D-Operator's vehicles < 26,001 GVWR. Persons < 16 not
HazMat.**

04/22/1987

ENDORSEMENTS: None

RESTRICTIONS: None

DELAWARE



**Rev 08/02/2017
www.dmv.de.gov**



STATE OF DELAWARE
Motor Vehicle Registration Card



Good Only When Signed On Back

VEHICLE MAY BE INSPECTED AND REGISTRATION RENEWED ANYTIME WITHIN 90 DAYS BEFORE EXPIRATION
A \$20.00 LATE FEE IS CHARGED FOR LATE REGISTRATION RENEWALS

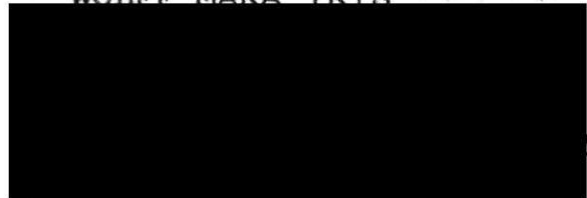
TITLE, TAG AND REGISTRATION NO. PC18793	SPECIAL TAG, IF ANY	ODOMETER MILEAGE 123,331		ACTUAL VEHICLE MILEAGE
MANUFACTURER AND YEAR SUBA 2018	MODEL FOR	BODY STYLE UT	YEARLY FEE 40.00	
TITLE DATE 02/13/2025	EXPIRATION DATE 02/13/2027	VEHICLE IDENTIFICATION NO. JF2SJAGC0JH550640		
REG WEIGHT	MGVWR 4,480	USE TRANSFER	COLOR BLK	



2025021371642352KXL 0052300RT PC018793

WOLEE MARA IRIS

&OR

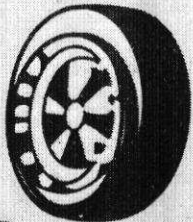


WARNING

IS INJURY OR DEATH:
against the door.
at covers that
ag deployment.
anual for
on.

AVERTISSEMENT

BLESSURES
TELLES:
pas contre la porte.
ouvre-siège
e déploiement du
latéral.
conducteur pour
enseignements.



TIRE AND LOADING INFORMATION RENSEIGNEMENTS SUR LES PNEUS ET LE CHARGEMENT

SEATING CAPACITY : TOTAL 5 : FRONT 2 : REAR 3
NOMBRE DE PLACES : TOTAL 5 : AVANT 2 : ARRIÈRE 3

The combined weight of occupants and cargo should never exceed 408kg or 900lbs.
Le poids total des occupants et du chargement ne doit jamais dépasser 408kg ou 900lb.

TIRE PNEU	SIZE DIMENSIONS	COLD TIRE PRESSURE PRESSION DES PNEUS A FROID
FRONT AVANT	P225/55R18	220KPA, 32PSI
REAR ARRIÈRE	P225/55R18	210KPA, 30PSI
SPARE DE SECOURS	T145/80D17	420KPA, 60PSI

SEE OWNER'S
MANUAL FOR
ADDITIONAL
INFORMATION

VOIR LE MANUEL
DE L'USAGER
POUR PLUS DE
RENSEIGNEMENTS

52



STATE OF DELAWARE
Motor Vehicle Registration Card



Good Only When Signed On Back

VEHICLE MAY BE INSPECTED AND REGISTRATION RENEWED ANYTIME WITHIN 90 DAYS BEFORE EXPIRATION
 A \$29.00 LATE FEE IS CHARGED FOR LATE REGISTRATION RENEWALS

TITLE, TAG AND REGISTRATION NO. C146790	SPECIAL TAG, IF ANY	ODOMETER MILEAGE 22	ACTUAL VEHICLE MILEAGE	
MANUFACTURER AND YEAR GMC 2024	MODEL CAN	BODY STYLE PK	YEARLY FEE 76.00	
TITLE DATE 10/29/2024	EXPIRATION DATE 10/29/2030	VEHICLE IDENTIFICATION NO. 1GTP6DEKXR1266244		
REG WEIGHT 6,200	MGVWR 6,250	USE NEW	COLOR BLK	

2024102938768182MJP 0261900RT C0146790

WOLFF MARA IRIS





MFD BY GENERAL MOTORS LLC

08/24

GVWR
2835 KG
6250 LB

GAWR FRT
1588 KG
3500 LB

GAWR RR
1633 KG
3600 LB

THIS VEHICLE CONFORMS TO ALL
APPLICABLE U.S. FEDERAL MOTOR
VEHICLE SAFETY STANDARDS IN EFFECT
ON THE DATE OF MANUFACTURE
SHOWN ABOVE.

1GTP6DEKXR1266244

TYPE TRUCK

MODEL: X4T4E43

9555



TIRE SIZE
FRT LT275165R18CQ
RR LT275165R18CQ
SPA 265170R17 S

RIM
18X8.5J
18X8.5J
17X8J

