

RECEIPT

DATE

10/17/25

No.

743679

RECEIVED FROM

Orange Lans, Inc

\$ 1550.00

One thousand five hundred fifty and 00/100 DOLLARS
○ FOR RENT
○ FOR DE-SW-1317

ACCOUNT	
PAYMENT	
BAL. DUE	

CASH
 CHECK
 MONEY
 ORDER
 CREDIT
CARD

FROM

8864

TO

BY

M.M.



RECEIVED

SOLID WASTE TRANSPORTER PERMIT APPLICATION

OCT 06 2025

Language Preference:

DNREC - WHS

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- 1317 Expiration Date 12/31/25

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 Orange Cans, Inc.

Location Address:	Mailing Address:
750 North Saint Augustine Road	SAME
Chesapeake City, MD 21915	

Contact: Gail Cochran Title: President

Business Phone: 302-378-9395 Fax: N/A

E-mail: orangecans@verizon.net

24 hr Emergency Contact Phone: ██████████

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: Wilmington State: DE Date: July 13, 2007

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

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) I
 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) I
 Out of state solid waste TSD facilities: (attachment) II

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 III
 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 IV
 No transporter permits in other states

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

DOT# 1678559 MC# 1019492

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 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 that 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 [VI](#)

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 [VII](#)

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 Maile Cochran Date 9/29/25
Print Name Maile Cochran Title President

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

Ownership of Orange Cans, Inc.

Attachment I

Gail Cochran, President owner of 51%

John Cochran, Vice President owner of 49%



Both officers/owners reside at the below address:

750 North Saint Augustine Road

Chesapeake City, MD 21915

302 378-9395

EIN 83-0488667

State of Delaware location:

Holding yard: 35 Salem Church Road
Newark, DE 19713

Solid Waste Disposal Facilities in Delaware:

Cherry Island
1706 East 12th Street
Wilmington, DE

Contractors Material
925 South Heald Street
Wilmington, DE

Sandtown Landfill
1107 Willow Grove Road
Felton, DE

Christiana Excavating
2030 Sunset Lake Road
Newark, DE

Revolution Recovery
1101 Lambsom Lane
New Castle, DE

Diamond Materials
924 S Heald Street
Wilmington, DE

Scrap Tire Solution
195 Hay Road
Wilmington, DE

Republic
1101 Lambsom Lane
New Castle, DE

Disposal Sites outside of Delaware:**Attachment II**

SECCRA
219 Street Road
West Grove, PA

Conestoga Landfill
420 Quarry Road
Morgantown, PA

Cecil County Landfill
758 East Old Philadelphia Road
Elkton, MD

Elkton Recycling
53 Dogwood Road
Elkton, MD

Wicomico County Landfill
6948 Brick Kiln Road
Salisbury, Maryland

Maryland Environmental Service
12236 River Road
Ridgely, MD 21660

Witmer Mulch, LLC
1726 East Old Philadelphia Road
Elkton, MD

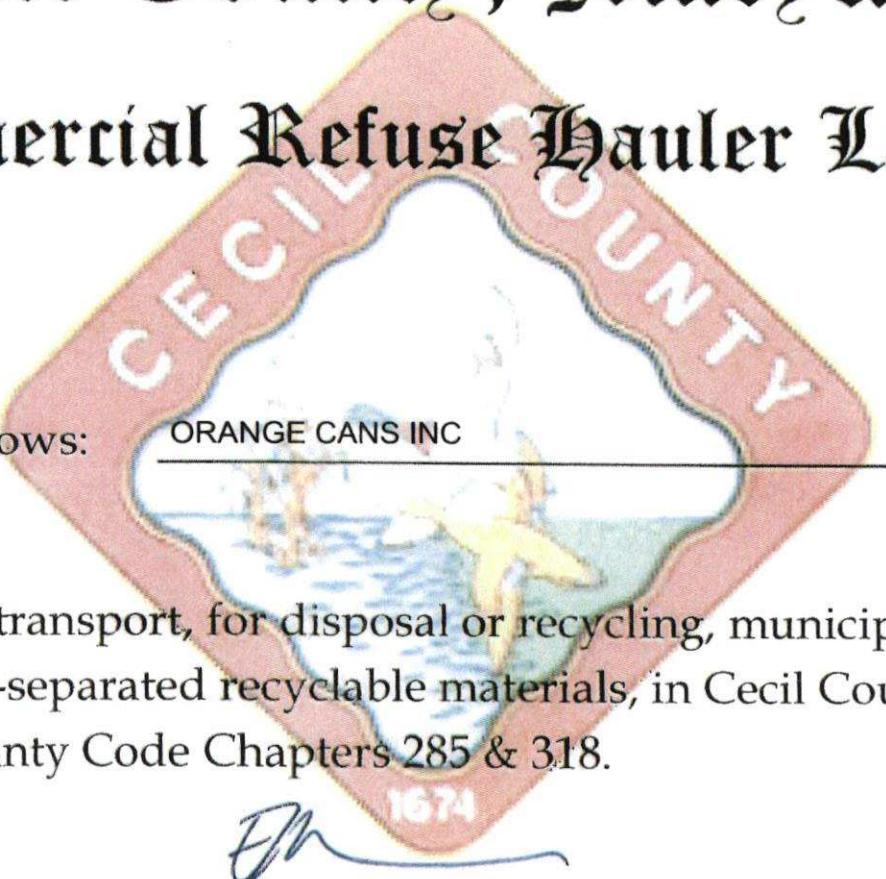
Transporter held in other states:

Cecil County Maryland
Pennsylvania

Cecil County, Maryland

Commercial Refuse Hauler License

This license allows:



To collect and transport, for disposal or recycling, municipal solid waste and/or source-separated recyclable materials, in Cecil County in accordance with Cecil County Code Chapters 285 & 318.

Elizabeth Osborne, Chief, Solid Waste Management Division

License Number: 1562

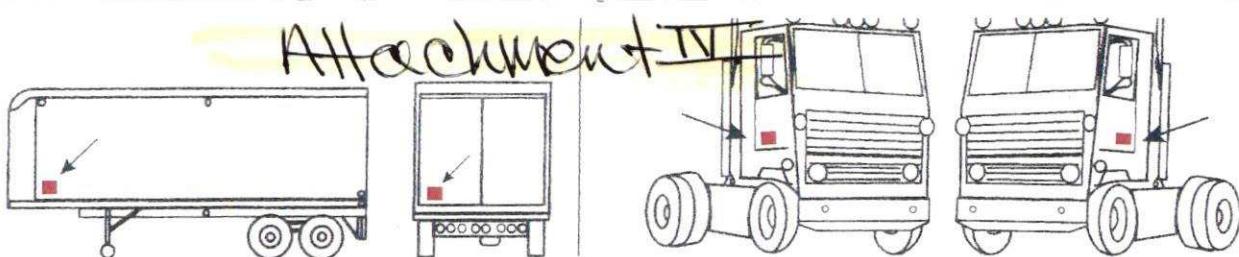
Date of Issue: July 1, 2025

This license is valid
from

Date of issue to

June 30, 2026

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.



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

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

1183



COMMONWEALTH OF PENNSYLVANIA Waste Transportation Safety Program Written Authorization

0216267681

Phone No. (410)-620-9395

ORANGE CANS, INC.
GAIL COCHRAN
750 N SAINT AUGUSTINE RD
CHESAPEAKE CITY, MD 21915-1308

VIN# 1NKDXUTX86J123768

WH20216

Expires Aug 2026



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.

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

CAUTION! REMOVE STICKERS CAREFULLY.

Applied stickers take 24 hours to reach full tack



APPLICATION INSTRUCTIONS

1. Clean Surface To Which Sticker Will be Applied of Dirt, Grease or Oily Substances.
2. Remove Sticker From Carrier Sheet.
3. Position Sticker, Then Press Firmly Until Tightly Affixed To Surface.





CERTIFICATE OF INSURANCE

— THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY —

DATE ISSUED (MM/DD/YY)
9/24/25

Home Office • 100 Erie Insurance Place • Erie, Pennsylvania 16530 • 814.870.2000
Toll free 1.800.458.0811 • Fax 814.870.3126 • www.erieinsurance.com

NAME AND ADDRESS OF AGENCY	WINSTEAD INSURANCE AGENCY LLC 404 W PULASKI HWY ELKTON, MD 21921 (410)398-6700	AGENT'S NO.	COMPANY(IES) AFFORDING COVERAGE
		BB1780	Co.: C ERIE INSURANCE COMPANY Co.: D ERIE INSURANCE PROPERTY & CASUALTY COMPANY Co.: E ERIE INSURANCE EXCHANGE (Not Applicable) Erie Indemnity Co., Attorney-in-Fact In NY Co.: F ERIE INSURANCE COMPANY OF NEW YORK Co.: G FLAGSHIP CITY INSURANCE COMPANY
NAME AND ADDRESS OF NAMED INSURED	ORANGE CANS, INC 750 N SAINT AUGUSTINE RD CHESAPEAKE CITY, MD 21915-1308	<p>This certificate is issued for information purposes only and confers no rights on the certificate holder. It does not affirmatively or negatively amend, extend, or otherwise alter the terms, exclusions and conditions of insurance coverage contained in the policy(ies) indicated below. The terms and conditions of the policy(ies) govern the insurance coverage as applied to any given situation. Limits shown may have been reduced by claims paid. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer and the certificate holder.</p>	

This is to certify that policies, as indicated by the Policy Number below, are in force for the Named Insured at the time that the Certificate is being issued.

CO Add'l Ltrns'd	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS												
E <input checked="" type="checkbox"/>	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Q61 0338707	12/31/24	12/31/25	<table> <tr> <td>EACH OCCURRENCE</td> <td>\$ 1,000,000</td> </tr> <tr> <td>FIRE DAMAGE (Any One Fire)</td> <td>\$ 1,000,000</td> </tr> <tr> <td>MED EXP (Any One Person)</td> <td>\$ 5,000</td> </tr> <tr> <td>PERSONAL & ADV. INJURY</td> <td>\$ 1,000,000</td> </tr> <tr> <td>GENERAL AGGREGATE</td> <td>\$ 2,000,000</td> </tr> <tr> <td>PRODUCTS-COMP/OP AGG</td> <td>\$ 2,000,000</td> </tr> </table>	EACH OCCURRENCE	\$ 1,000,000	FIRE DAMAGE (Any One Fire)	\$ 1,000,000	MED EXP (Any One Person)	\$ 5,000	PERSONAL & ADV. INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS-COMP/OP AGG	\$ 2,000,000
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PERSONAL & ADV. INJURY	\$ 1,000,000																
GENERAL AGGREGATE	\$ 2,000,000																
PRODUCTS-COMP/OP AGG	\$ 2,000,000																
E <input type="checkbox"/>	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> "ANY AUTO" (OWNED, HIRED, NON-OWNED) <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED <input type="checkbox"/> GARAGE	Q12 3130700	12/31/24	12/31/25	<table> <tr> <td>BODILY INJURY (EACH PERSON)</td> <td>\$</td> </tr> <tr> <td>BODILY INJURY (EACH ACCIDENT)</td> <td>\$</td> </tr> <tr> <td>PROPERTY DAMAGE</td> <td>\$</td> </tr> <tr> <td>BODILY INJURY AND PROPERTY DAMAGE COMBINED</td> <td>\$ 1,000,000</td> </tr> </table>	BODILY INJURY (EACH PERSON)	\$	BODILY INJURY (EACH ACCIDENT)	\$	PROPERTY DAMAGE	\$	BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$ 1,000,000				
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PROPERTY DAMAGE	\$																
BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$ 1,000,000																
E <input type="checkbox"/>	EXCESS LIABILITY <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> RETENTION \$	Q36 3171642	12/31/24	12/31/25	<table> <tr> <td>EACH OCCURRENCE</td> <td>\$ 5,000,000</td> </tr> <tr> <td>AGGREGATE</td> <td>\$ 5,000,000</td> </tr> <tr> <td>\$</td> <td>\$</td> </tr> <tr> <td>\$</td> <td>\$</td> </tr> </table>	EACH OCCURRENCE	\$ 5,000,000	AGGREGATE	\$ 5,000,000	\$	\$	\$	\$				
EACH OCCURRENCE	\$ 5,000,000																
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\$	\$																
G	WORKERS COMPENSATION & EMPLOYERS LIABILITY	Q96 8100828	12/31/24	12/31/25	<table> <tr> <td colspan="3" style="text-align: center;">STATUTORY</td> </tr> <tr> <td>BODILY INJURY BY</td> <td>ACCIDENT</td> <td>\$ 100,000 EACH ACCIDENT</td> </tr> <tr> <td></td> <td>DISEASE</td> <td>\$ 500,000 POLICY LIMIT</td> </tr> <tr> <td></td> <td>DISEASE</td> <td>\$ 100,000 EACH EMPLOYEE</td> </tr> </table>	STATUTORY			BODILY INJURY BY	ACCIDENT	\$ 100,000 EACH ACCIDENT		DISEASE	\$ 500,000 POLICY LIMIT		DISEASE	\$ 100,000 EACH EMPLOYEE
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	DISEASE	\$ 500,000 POLICY LIMIT															
	DISEASE	\$ 100,000 EACH EMPLOYEE															
	OTHER																

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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).

NAME AND ADDRESS OF CERTIFICATE HOLDER	AUTHORIZED REPRESENTATIVE
Department of Natural Resources & Environmental Cont Compl 89 Kings Highway Dover, DE 19901	

Orange Cans, Inc.

Attachment VI

750 North St. Augustine Road

Chesapeake City, MD 21915

410 885 2755 Fax

Spill Control Plan

1. Spill control and safety equipment carried in each vehicle:

- Reflectors and/or flares
- Fire extinguisher
- First aid kit
- Heavy-duty gloves, hard hat
- Flashlight

2. All loads will be enclosed and 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. Inspect vehicle and ensure compliance with DOT Regulations.
2. Visually inspect each container prior to loading to ensure compliance with DE Solid Waste Authority Rules and Regulations

4. If there is an accident or other emergency which causes portion of the load to be spilled, the driver, if injured, will contact the following designated company coordinator:

Gail Cochran, President, 302-378-9395 office

410-620-9395 office

[REDACTED] cell

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 800-662-8802

Maryland: 911, 800-633-6101 MD Environmental

410-996-6270 MD County Roads

6. The designated coordinator will contract for clean-up services with another company.

Hazardous Materials Response, Inc. 302-777-7403

7. This plan will be carried in the vehicle along with the permit.

Driver Training:**Attachment VII**

In summary per questions 12 of Delaware Solid Waste Transporter Permit Application:

- A. A copy of the driver's license is obtained and forwarded to our insurance company for review prior to hiring.
- B. Each truck is equipped with a tracking devise which monitor mileage and speed. If the driver exceeds the speed limit, an email is sent to the office. After receiving this notification, the driver is notified. Driving records are review quarterly.
- C. Drivers will inspect each load upon arriving and will not accept any load containing hazardous waste. Driver had read and signed off on Orange Cans, Inc. Spill Control Plan. Drivers have read and signed off on solid waste transporter's permit conditions.

Drivers License & Physical Records



Updated 10/01/2025

VEHICLE INFORMATION - See Item 13 of the application.

Use this form, or other format which provides the same information, to answer the VEHICLE IDENTIFICATION requirement of the application. List all vehicles, both motorized and container (if a license plate is required on the container) to be used to haul solid waste in the state of Delaware. In addition, list the vehicle owner, owner's address, and domicile address if different from the company address provided in the application.

MAKE - MODEL - YEAR	TYPE	VIN # (Serial Number)	LICENSE PLATE # and STATE of REGISTRATION	mfgr's GVWR	OWNERSHIP
Kenworth 2006	roll off	1NKDXUTX86J123768	SOLD		Orange Cans, Inc.
Kenworth 2015	roll off	1NKDLPOX1FJ444701	FOR SALE		Orange Cans, Inc.
Kenworth 2017	roll off	1NKDLPOX9HJ176144	FOR SALE		Orange Cans, Inc.
Kenworth 2020	roll off	1NKZLPOXXLJ389022	337ED34		Orange Cans, Inc.
Kenworth 2021	roll off	1NKZLPOX4MJ434005	331ED00		Orange Cans, Inc.
Kenworth 2021	roll off	1NKZLPOX2MJ465530	335ED43		Orange Cans, Inc.
Kenworth 2026	roll off	1NKZLPOX9TJ215670	337ED32		Orange Cans, Inc.
Kenworth 2026	roll off	1NKZLPOX9TJ215671	337ED33		Orange Cans, Inc.
Kenworth 2026	roll off	1NKZLPOX9TJ215672	337ED48		Orange Cans, Inc.
GVWR FOR ALL					80,000



750 North Saint Augustine Road • Chesapeake City, MD 21915
410 620-9395 • 302-378-9395 • orangecans@verizon.net • Orangecansinc.com

RECEIVED

OCT 17 2025

DNREC - WHS

October 10, 2025

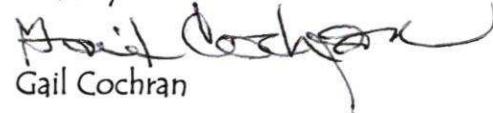
Delaware Department of Natural Resources
and Environmental Control
89 Kings Highway
Dover, DE 19901

Attention DaQuan L Davis

Enclosed are the following:

Check 8864 for an increased amount
Updated first sheet for our renewal application
Updated third page for our renewal application
Form MCS -90

Thank you


Gail Cochran
President



SOLID WASTE TRANSPORTER PERMIT APPLICATION

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Dover, DE 19901

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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

For FMCSA Use Date Received: _____

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



United States Department of Transportation
Federal Motor Carrier Safety Administration

**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 Orange Cans Inc **of** Maryland **1678559**
 (Motor Carrier name) (Motor Carrier state or province) (USDOT Number)

Dated at 11:30 am **on this** 9th **day of** October, **2025**

Amending Policy Number: Q12 3130700 **Effective Date:** 12/31/2024

Name of Insurance Company: Erie Insurance Exchange

Countersigned by: Marc Cipriani
 (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: (800)458-0811.

Cancellation of this endorsement may be effected by the company or 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).

Filings must be transmitted online via the Internet at <https://www.fmcsa.dot.gov/registration>.

(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.

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.

(continued on next page)

SCHEDULE OF LIMITS — PUBLIC LIABILITY

Type of carriage	Commodity transported	January 1, 1985
(1) For-hire (in interstate or foreign commerce, with a gross vehicle weight rating of 10,001 or more pounds).	Property (nonhazardous)	\$750,000
(2) For-hire and Private (in interstate, foreign, or intrastate commerce, with a gross vehicle weight rating of 10,001 or more pounds).	Hazardous substances, as defined in 49 CFR 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 10,001 or more pounds).	Oil listed in 49 CFR 172.101 ; hazardous waste, hazardous materials, and hazardous substances defined in 49 CFR 171.8 and listed in 49 CFR 172.101 , but not mentioned in (2) above or (4) below.	\$1,000,000
(4) For-hire and Private (In interstate or foreign commerce, with a gross vehicle weight rating of less than 10,001 pounds).	Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of a Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403 .	\$5,000,000

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