

RECEIPT

DATE

10/2/25

No.

713665

RECEIVED FROM

Frontline Environmental Solutions

\$ 350.00

Three hundred fifty and 00 ————— DOLLARS FOR RENT FOR

DE-SW-2081

ACCOUNT	
PAYMENT	
BAL. DUE	

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM

BY

501097

TO

RECEIVED

OCT 02 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- 2081 Expiration Date 12/31/2025

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 Ironclad Environmental Solutions, Inc.

Location Address:	Mailing Address:
4888 Loop Center Dr Ste 440 Houston, TX 77081	550 W 36th Street Jasper, IN 47546

Contact: Kimberly Reoh Title: Director

Business Phone: 920-850-2483 Fax: _____

E-mail: kreoh@necssolutions.com

24 hr Emergency Contact Phone: 920-850-2483

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: DE Date: 1-23-2007

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. [REDACTED]

Attachment 0% owner. Eric John, CEO
4888 Loop Center Drive, Suite 440
Houston, TX 77081

(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) _____

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 Attached
 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 Attached
 No transporter permits in other states

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

DOT# 1624598 MC# 00657559

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 checked="" type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input checked="" 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 checked="" type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Asbestos	\$1,000,000.00 + MCS-90 <input checked="" 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 Attach

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 attached

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 Unknown at this time
 New Service offering

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 Kimberly Reoh Date 09-29-25
Print Name Kimberly Reoh Title Director

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

Ironclad Environmental Solutions, Inc.

SPILL CONTINGENCY PLAN HAZARDOUS WASTE / USED OIL TRANSPORT

I. **EMERGENCY ACTION:** In the event of an on-the-road spill or other emergency, the driver will follow these procedures:

- A. Remain with the unit and warn all pedestrians and motorists to stay away from the spill area, pointing out to them the danger involved, and call the police / 911 or have someone call the police / 911.
- B. Upon the arrival of the police or fire department, the driver will inform them of what kind of material has been spilled, hand them the manifest/paperwork if possible and request the area to be blocked off to both pedestrians and vehicles to prevent property damage or any serious personal injury.

The driver will request the first responder, fire or police personnel, to protect the area while the driver reports to a facility Branch Manager/Emergency Coordinator (listed below in the order of calling):

Branch Manager/ Emergency Coordinator

Name: Samuel Roberts
Phone number: 443-934-7089

Corporate Safety Manager

Name: Aimee Wilson
Phone Number: 817-201-0695

Regional Vice President

Name: Eric Ohsfeldt
Phone Number: 405-255-7339

A. The Branch Manager/Emergency Coordinator will gather the following information from the driver and relay it to the National Response Center, and if required our 24/7 spill response partner ERTS at (888) 585-5028.

1. Name of person reporting the incident.
2. Name, address, and Identification Number of the transporter.
3. Phone number where person reporting can be reached.
4. Date, time, and location of the incident.
5. The extent of injuries, if any.
6. Classification, name, and quantity of hazardous materials/wastes involved, if such information is available.
7. Type of incident and nature of hazardous material/waste involvement and

whether a continuing danger exists at the scene.

8. For each waste product involved provide:

- a. Name and Identification Number of generator.
- b. Product shipping, hazardous class, and UN or NA Number.
- c. Estimated quantity of material spilled.
- d. If possible, estimate the extent of contamination to land, water, or air.

9. Shipping name, hazard class, and Identification Number of any other material carried.

EMERGENCY RESPONSE AGENCIES:

AGENCY	TOLL FREE NUMBER	REGULAR NUMBER
U.S. National Response Center	(800) 424-8802	(202) 426-2675
Alabama Emergency Management Agency		(302) 659-3362
Hazardous Materials/Waste Incidents	(800) 843-0699	
U.S. Coast Guard, Lewes	(800) 424-9300	(302) 644-1909
CHEMTREC		
<u>ERTS</u>	(888) 585-5028	
Delaware Emergency Reporting	800-662-8802/	
		302-739-9401

D. Specific actions to be taken at the scene of the spill are:

- I. Containment - The critical problem is to prevent the escape of any spilled liquid or solid into the ground or into a storm or sanitary sewer. A barrier must be erected immediately to prevent escape of spilled materials/waste liquids, using whatever material is at hand, even a dirt curb to prevent spreading of the spill. Containment of solids will be dependent on wind and weather conditions. Use the box tarp in the vehicle, or plastic visqueen if conditions are wet and windy. Simultaneously, the source of the spill or leak must be located and controlled (e.g., box hole plugged or taped or container turned right-side up).

The possibility of evacuation should be considered in the event of a major spill (e.g., a collision with another vehicle or a loaded trailer that has turned over, with subsequent container(s) rupturing). Major concerns involve ignitable wastes that may catch fire and possibly explode or generate toxic fumes. If fire threatens or actually occurs, personnel should be evacuated a distance of at least a half-mile as recommended by the Emergency Response Guidebook. If no fire threatens, and no container (s) have ruptured, a distance of 50-100 feet should suffice.

If the shipping description is known (refer to the manifest) find the name in your Emergency Response Guidebook in the blue pages and turn to the Corresponding Guide Number (orange top page-last 1/3 of book). If the shipping description is not known check the placard on the vehicle for a "UN" or a "NA" number, look up

the number in the yellow pages and refer to the Corresponding Guide Number, or contact the generator of the waste for safety data.

2. Cleanup - With containment effected and the spillage source controlled, cleanup is the next step. If the spill is contained on an impervious paved surface, material should be absorbed onto a compatible material (e.g., sand, diatomaceous earth). Any of a number of commercial absorbent inert materials may be used, but make sure they are compatible with the waste and will not cause a reaction. If the spillage has reached soil, all contaminated dirt should be collected into drums or bags for disposal at an EPA approved site.

If any spilled waste has reached the ground, the contaminated soil will be removed. The extent of contamination will be determined by sampling the spill area. A qualified laboratory will analyze the sample. Sampling techniques, chain-of-custody requirements, and analytical methods will follow approved procedures such as those outlined in SW-846 (Test Methods for Evaluating Solid Waste: Physical/Chemical Methods Compendium). Any soil exhibiting contamination above the local background level will be removed to an appropriate permitted disposal site.

In addition to contaminated absorbents, dirt, or the like as noted above, damaged containers also present a disposal problem. Special "recovery drums" (oversize metal drums) will be used for containing damaged 55-gallon drums. Disposal will be at an approved site.

II. **EMERGENCY EQUIPMENT:** Each tractor or trailer carries the following emergency equipment:

- Gloves
- Goggles
- Slicker Suite
- Oil Absorbing Socks & Pads
- Boots
- DOT Emergency Response Guidebook
- Emergency Reflective Triangles (3)
- Flares
- ABC Fire Extinguisher

III. **FOLLOW-UP PROCEDURES:** Two steps remain once the immediate emergency aspects of a spill have been taken care of:

A. *Decontamination:*

Trucks or trailers exposed to a spill or leak will be decontaminated at the site in order to prevent any further release to the extent that it can be transported (or move under its own power) to an authorized facility capable of further decontamination if necessary.

Equipment - Each item used will be placed in an open head container and thoroughly rinsed with a compatible solvent or cleaning compound. The residue or wash water will then be drained into a tight head container, sealed, and disposed of in accordance with Federal and State Regulations at an authorized disposal site.

Clothing - Contaminated clothing will be placed with the clean up residue and disposed of in accordance with Federal and State Regulations at an authorized disposal site. If clothing is reusable, then it will be decontaminated properly and the residue added to the other waste.

B. *Notification:* The Department of Transportation, Director of Hazardous Materials Registration, Materials and Transportation Bureau, Washington, DC 20590 will be notified, in writing, of the occurrence, and nature of the incident.

IV. TRAINING PROGRAM: In preparation for handling hazardous materials and hazardous wastes, all drivers and response personnel receive approximately two (2) hours classroom training followed by refresher training by local management at regular scheduled (at least monthly) safety tailgate meetings. In addition to the above, an annual meeting is held to educate further each Branch Manager on changes in regulations.

A. The following is a list of classroom training provided to all branch personnel responsible for the handling and transportation of hazardous waste:

1. RCRA Hazardous Waste Manifesting
2. Container Receiving and Maintenance
3. Container Inspections
4. Container Transferring
5. Container Pickup Checklist
6. Re-use of Containers for Hazardous Waste
7. Emergency Response Equipment
8. Emergency Procedures
9. Hazardous Waste Labeling
10. Emergency Spills

B. Since much of the drivers' actions involve hazardous materials, including hazardous wastes, their instructions specifically include:

1. Inspection of their vehicles before and during trips;
2. Driving Rules;
3. Knowledge of safety and health hazards of products carried (e.g., flammable, and corrosive); and
4. Actions to be implemented in case of spills, accidents, or other emergencies involving hazardous materials and hazardous wastes.

BRANCH	TRUCK #	YEAR	MAKE	MODEL	TYPE	VIN #	COLOR	PLATE	STATE	GVWR	OWNER
1380	MD598	2015	Kenworth	T800	Winch	1XKDD49X5FJ435598	Red	3655904	IN	80,000	Ironclad Environmental Solutions
1380	MT2440	2025	Kenworth	T880	Winch	1XKZD49X7SJ135626	White	3657336	IN	80,000	Ironclad Environmental Solutions
1380	MT2436	2025	Kenworth	T880	Roll Off	1NKZL40X1SJ131517	White	3687964	IN	80,000	Ironclad Environmental Solutions
1380	MT2430	2025	Kenworth	T800	Roll Off	1NKDL40X9SR111981	White	3658657	IN	80,000	Ironclad Environmental Solutions

STATE	PERMIT	STATUS	PERMIT NUMBER
DC	SOLID WASTE ACTIVE		R-06-12-24-01821
IL	WASTE HA ACTIVE		57311
LA	WASTE TR ACTIVE		T04714401
MD	SPECIAL W ACTIVE		SMH146
MN	WASHING ACTIVE		N/A
MN	CARVER C ACTIVE		
MN	SCOTT COI ACTIVE		N/A

For FMCSA Use Date Received: 09/30/2025

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.



**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 Gulf Tanks Holdings, Inc (Motor Carrier name) of Texas (Motor Carrier state or province)  1624598 (USDOT Number)

Dated at 12:00 midnigh  on this 30th  day of September  , 2025 

Amending Policy Number: 8E-A7-XL-0002253-01 Effective Date: 09/30/2025

Name of Insurance Company: The Bridgeway Insurance Co

Countersigned by:

(authorized company representative)

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

- This insurance is primary and the company shall not be liable for amounts in excess of \$ _____ for each accident.
- This insurance is excess and the company shall not be liable for amounts in excess of \$ 5,000,000.00 for each accident in excess of the underlying limit of \$ 1,000,000.00 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: 347-344-7037.

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)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/16/2025

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: Trevor Deal	
	PHONE (A/C, No. Ext): (470) 456-1697 FAX (A/C, No.): (404) 503-9101	
	E-MAIL ADDRESS: Trevor.Deal@MarshMMA.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Axis Surplus Insurance Company (A; XV) NAIC # 26620	
	INSURER B: Hartford Fire Insurance Company (A+; XV) 19682	
INSURED	INSURER C: National Fire & Marine Insurance Company (A++; XV) 20079	
	INSURER D:	
	INSURER E:	
	INSURER F:	
	Ironclad Environmental Solutions, Inc.;	
	Gulf Tanks Holdings, Inc.	
4888 Loop Central Drive, Suite 440		
Houston TX 77081		

COVERAGES		CERTIFICATE NUMBER: 25-26		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) 09/30/2025	POLICY EXP (MM/DD/YYYY) 09/30/2026	LIMITS	
A	COMMERCIAL GENERAL LIABILITY	MP005964-03-2025	09/30/2025	09/30/2026	EACH OCCURRENCE \$ 1,000,000			
	CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000			
	POLLUTION LIABILITY INCLUDED				MED EXP (Any one person) \$ 25,000			
	(see page 2 for limits)				PERSONAL & ADV INJURY \$ 1,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE \$ 2,000,000			
	POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG \$ 2,000,000			
OTHER:	\$							
B	AUTOMOBILE LIABILITY	20CSES81701	09/30/2025	09/30/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000			
	ANY AUTO <input checked="" type="checkbox"/>				BODILY INJURY (Per person) \$			
	OWNED AUTOS ONLY <input type="checkbox"/>				BODILY INJURY (Per accident) \$			
	Hired AUTOS ONLY <input type="checkbox"/>				PROPERTY DAMAGE (Per accident) \$			
					\$			
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR	MX005965-03-2025	09/30/2025	09/30/2026	EACH OCCURRENCE \$ 5,000,000			
	EXCESS LIAB <input checked="" type="checkbox"/>				AGGREGATE \$ 5,000,000			
	DED <input type="checkbox"/>				(Over GL & Pollution) \$			
	RETENTION \$							
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	20WNS81700 / 20WBR81702	09/30/2025	09/30/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> N				E.L. EACH ACCIDENT \$ 2,000,000			
	(Mandatory in NH)				E.L. DISEASE - EA EMPLOYEE \$ 2,000,000			
	If yes, describe under DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMIT \$ 2,000,000			
C	Excess Liability (Over Auto & EL) - Lead \$4M x \$2M	42-XSF-343895-01	09/30/2025	09/30/2026	Each Occurrence \$ 4,000,000			
					Aggregate \$ 4,000,000			

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

CERTIFICATE HOLDER

CANCELLATION

Delaware Department of Natural Resources
and Environmental Control
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



AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY Ironwood, a Marsh & McLennan Agency, LLC Co		NAMED INSURED Ironclad Environmental Solutions, Inc.;
POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

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

Pollution Liability (Contractors & Site Pollution)

Axis Surplus Insurance Company

Policy #MP005964-03-2025

Effective 9/30/2025 - 9/30/2026

\$1,000,000 Per Claim Limit

\$2,000,000 Aggregate

Excess Liability (Auto & Employers Liability Only)

SiriusPoint Specialty Insurance Corporation

Policy #TSX-00203-25

Effective 9/30/2025 - 9/30/2026

\$5,000,000 xs \$6,000,000 Per Occurrence

\$5,000,000 xs \$6,000,000 Aggregate

Excess General Liability/Pollution Liability

Certain Underwriters at Lloyds, London / Hudson Excess Insurance Company

Policy #ENVX0000528-25

Effective 9/30/2025 - 9/30/2026

\$5,000,000 xs \$6,000,000 Per Occurrence

\$5,000,000 xs \$7,000,000 Aggregate

Cyber Liability

Policy #AB-6678224-01

At-Bay Specialty Insurance Corporation

Effective 4/1/2025 - 09/30/2026

\$5,000,000 Limit

Workers Compensation States Covered by Policy #:

20WNS81700: AL, AZ, CA, CO, FL, GA, IA, IL, IN, KS, LA, MA, MD, MI, MN, MO, MS, NC, NJ, NM, NV, NY, OK, PA, SC, TN, TX, UT, VA, WA

20WBR81702: WI

Additional Named Insureds:

1. Ironhorse Parent, LP
2. Ironhorse Intermediate, LLC
3. Ironhorse Purchaser, LLC
4. Gulf Tanks Holdings, Inc.
5. Water Movers Contracting, LLC
6. Adler Tank Rentals, LLC
7. DenBeste Water Solutions, LLC
8. DenBeste Transportation, LLC

Davis, DaQuan (DNREC)

From: Sarah Mendoza <smendoza@necssolutions.com>
Sent: Thursday, December 11, 2025 8:45 AM
To: WHSTransporters
Subject: RE: Delaware Hazardous Waste Transporter Permit Renewal
Attachments: Scan2025-11-17_134550.pdf; Scan2025-11-17_135314.pdf

Good Morning DaQuan,

Please see signed applications.

Thank you,
Sarah Mendoza
Specialty Permit Agent
812-559-8048 ext. 148

NECS® FLEET SOLUTIONS since 1986®

From: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> **On Behalf Of** WHSTransporters
Sent: Friday, November 7, 2025 12:33 PM
To: Sarah Mendoza <smendoza@necssolutions.com>
Subject: RE: Delaware Hazardous Waste Transporter Permit Renewal

CAUTION: THIS IS NOT AN NECS EMAIL. Do not click links or open attachments unless you recognize the sender and know the content is safe.

I have the two initial application submittals.



DaQuan L. Davis
Environmental Scientist
Division of Waste and Hazardous Substances
302-739-9403
WHSTransporters@delaware.gov
89 Kings Hwy SW, Dover, DE 19901
dnrec.delaware.gov



From: Sarah Mendoza <smendoza@necssolutions.com>
Sent: Thursday, November 6, 2025 1:59 PM
To: WHTransporters <WHTransporters@delaware.gov>
Subject: RE: Delaware Hazardous Waste Transporter Permit Renewal

DaQuan,

Do you have the completed applications that were sent in?

Thank you,
Sarah Mendoza
Specialty Permit Agent
812-559-8048 ext. 148
NECS® FLEET SOLUTIONS *since 1986*®

From: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> **On Behalf Of** WHTransporters
Sent: Thursday, November 6, 2025 12:42 PM
To: Sarah Mendoza <smendoza@necssolutions.com>
Subject: RE: Delaware Hazardous Waste Transporter Permit Renewal

CAUTION: THIS IS NOT AN NECS EMAIL. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hello,

Please address the following to complete both applications:

Section 9(a)- Do you have a Texas solid waste transporter permit?

Section 16- Please have Eric Johnson in section 4 of the solid waste application sign and date the application.

Section 19- Please have Eric Johnson in section 6 of the hazardous waste application sign and date the application.



DaQuan L. Davis

Environmental Scientist

Division of Waste and Hazardous Substances

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



From: Sarah Mendoza <smendoza@necssolutions.com>
Sent: Thursday, November 6, 2025 12:13 PM
To: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>
Subject: RE: Delaware Hazardous Waste Transporter Permit Renewal

Good Morning,

Please see attached. Let me know if there is anything additional needed!

Thank you,
Sarah Mendoza
Specialty Permit Agent
812-559-8048 ext. 148

NECS® FLEET SOLUTIONS since 1986®

From: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> **On Behalf Of** WHSTransporters
Sent: Thursday, August 28, 2025 2:12 PM
Subject: Delaware Hazardous Waste Transporter Permit Renewal

CAUTION: THIS IS NOT AN NECS EMAIL. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good afternoon,

This is a reminder that your renewal application for the Delaware Hazardous Waste Transporter Permit is due soon. According to your permit, the renewal deadline is September 30, 2025. Please be aware that your current permit will expire on December 31, 2025. We at DNREC encourage you to submit your application as soon as you are ready to renew.

For your convenience, I have attached the permit application to this email. Please mail your completed application and payment (by check or money order) to the following address (note that applications cannot be faxed or emailed): Delaware Department of Natural Resources and Environmental Control Compliance and Permitting Section 89 Kings Highway Dover, DE 19901.

If you have any questions, feel free to contact me using the phone number or email in my signature below.

Regards,



DaQuan L. Davis
Environmental Scientist
Division of Waste and Hazardous Substances
✉ 302-739-9403
✉ WHSTransporters@delaware.gov
✉ 89 Kings Hwy SW, Dover, DE 19901
✉ dnrec.delaware.gov



Davis, DaQuan (DNREC)

From: Justin McKinley <jmckinley@ironcladenvironmental.com>
Sent: Thursday, November 6, 2025 11:46 AM
To: Sarah Mendoza
Subject: Re: DE Haz and Solid Waste Permit Applications
Attachments: MCS 90 IRONCLAD.PDF

CAUTION: THIS IS NOT AN NECS EMAIL. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning,

I have all answers below. Please let me know if you have any questions or need any additional information.

Thank you,

Section 8 (b) -

In state

Delaware Solid waste Authority 28560 landfill lane Georgetown DE 19947
Clean Earth of DE 94 J Caldwell In New Castle DE 19720
Delaware recycling Products 1101 lambson In New Castle De 19720
Pine Tree Corner transfer station 276 pine tree rd Townsend DE 19734

Out of state

VLS 1076 Manheim Pike, Lancaster, PA 17601 transfer station and liquid pit
JG environmental 776 Flory Mill Rd, Lancaster, PA 17601 liquid pit
Republic 4400 Mt Pisgah Rd, York, PA 17406 landfill dry goods only

Section 9 (a) - NECS held

Section 10 - Attached

Section 12 -

1. - Branches conduct weekly safety meetings and the attendance is logged in our AIC system for tracking. Special training includes RCRA DOT training, Hazwoper 40hr, Respirator awareness, and General Manifest training.
2. - Our company participates in LiveMVR monitoring, through our TPA for Driver Qualification services, which monitors all drivers' licenses for any changes or updates to indicate violations, suspensions, downgrades, etc so that they can be removed from driving immediately if necessary.
3. -
 - i. Drivers are trained at the corporate and branch level regarding proper handling procedures via online training and live classes.

- ii. Spill Control Plan is distributed to the branches for leadership to review and instruct drivers
- iii. Familiarity of the conditions of the solid waste permit are instructed by the branch leadership and the safety department assists with any and all additional guidance in the event of questions or concerns.

Thank you again.

Justin McKinley | DOT Compliance Manager

O: (228) 471-7191

M: +12284717191

4888 Loop Central Drive, Suite 440, Houston, TX 77081

JMcKinley@ironcladenvironmental.com



IRONCLAD Environmental Solutions

www.IRONCLADenvironmental.com

Ironclad will never direct a customer to change its banking remit via email.

From: Sarah Mendoza <smendoza@necssolutions.com>
Sent: Friday, October 3, 2025 3:33 PM
To: Justin McKinley <JMcKinley@ironcladenvironmental.com>
Subject: DE Haz and Solid Waste Permit Applications

Good Afternoon Justin,

We received word back from DE that they need the following information:

- **Section 8(b)**- Please provide all solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities, and Transfer stations.
- **Section 9(a)**- Please provide a copy of the company's home state solid waste transporter permit.
- **Section 10**- Please provide an MCS-90 endorsement form with policy number 20CSE581701.
- **Section 12**- Please provide driver training. Requirements include:
 - (a). 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.

Is that something you can help me with?

Thank you,
Sarah Mendoza
Specialty Permit Agent
812-559-8048 ext. 148

NECS[®] FLEET SOLUTIONS *since 1986*[®]

Davis, DaQuan (DNREC)

From: Davis, DaQuan (DNREC) on behalf of WHStransporters
Sent: Friday, October 3, 2025 4:08 PM
To: Kimberly Reoh
Subject: Missing Info-Delaware Solid Waste Transporter Permit Application

Importance: High
Categories: Egress Switch: Unprotected

Hello Ms. Reoh,

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 8(b)**- Please provide all solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities, and Transfer stations.
- **Section 9(a)**- Please provide a copy of the company's home state solid waste transporter permit.
- **Section 10**- Please provide an MCS-90 endorsement form with policy number 20CSE581701.
- **Section 12**- Please provide driver training. Requirements include:

(a). 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.

- **Section 16**- Please have the corporate officer in section 4 of the application sign and date the application.

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

Thank you,

DaQuan Davis



DaQuan L. Davis

Environmental Scientist

Division of Waste and Hazardous Substances

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





STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES AND
ENVIRONMENTAL CONTROL
DIVISION OF WASTE AND HAZARDOUS SUBSTANCES
89 KINGS HIGHWAY
DOVER, DE 19901

COMPLIANCE &
PERMITTING

PHONE: (302) 739-9403
FAX: (302) 739-5060

October 23, 2025

Certified Mail
Return Receipt Requested
9589 0710 5270 3420 2316 24

**NOTICE OF DEFICIENCY
25-SW-14**

Ms. Kimberly Reoh
Ironclad Environmental Solutions, LLC
550 W 36th Street
Jasper, IN 47546

Subject: Notice of Deficiency
Reference: Application for Delaware Solid Waste Transporter Permit DE-SW-2081

Dear Ms. Reoh:

Delaware's Department of Natural Resources and Environmental Control (DNREC), Compliance and Permitting Section (CAPS), is in receipt of your application for a permit to transport solid waste in, through or out of the State of Delaware. The application was received by this office on October 2, 2025.

After reviewing your application, we found it to be incomplete. Since we received your application, we have made several attempts to contact you to obtain the missing information, but we have not received a response. To proceed with your application, please submit the required information as outlined by the specific item numbers related to your transporter application.

Item 8 requires you to submit a list of your Transfer, Storage, and Disposal facilities. Please provide this list.

- Item 9(a) requires A Copy of Your Home State Permit. Please complete item 9(a) as required.
- Item 10 requires an MCS-90 endorsement form that matches the certificate of insurance and the auto liability policy number.
- Item 12 requires information on your company's driver training program procedures. The plan should describe the qualifications for hiring drivers and any subsequent training after the driver is hired. Please submit the information requested in item 12.
- Item 12(a) requires the requirements for special licenses to be listed. Please amend item 12 to include this information as required.
- Item 12(b) requires a procedure for period checks of driving records. Please amend item 12 to include this information as required.
- Item 12(c) requires knowledge of proper handling procedures for the type of solid waste being transported. Please amend item 12 to include this information as required.
- Item 12(d) requires familiarity with the spill control plan. Please amend item 12 to include this information as required.
- Item 12(e) requires familiarity with Delaware's solid waste transporter permit. Please amend item 12 to include this information as required.
- Item 16 Certification. Please amend item 16 and ensure the application is signed by a legal owner or corporate officer.

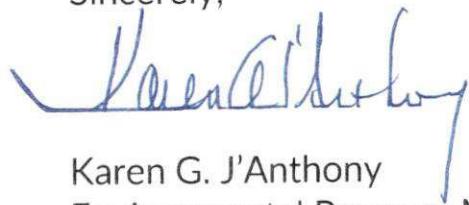
The requested information must be submitted to the CAPS within five (5) days of your receipt of this Notice of Deficiency. Failure to do so will result in our inability to process your transporter permit application and the non-refund of the application processing fee. Please be aware that transportation of solid waste into, out of, or through Delaware without a permit violates **7 Del. Code, Chapter 60** and is subject to enforcement.

Please submit the required information to:

DaQuan L. Davis
Delaware Department of Natural Resources and Environmental Control
Compliance and Permitting Section
89 Kings Highway
Dover, Delaware 19901
daquan.davis@delaware.gov

If you have any questions regarding this Notice, please contact Mr. Davis at
(302) 739-9403.

Sincerely,

A handwritten signature in blue ink, appearing to read "Karen G. J'Anthony".

Karen G. J'Anthony
Environmental Program Manager II
Compliance and Permitting Section

KGJ:DLD:cr
DLD2583.doc

USDOT Number: 1624598 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, Registration 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 IRONCLAD ENVIRONMENTAL SOLUTIONS, INC. of HOUSTON, TX
(Motor Carrier name) (Motor Carrier state or province)

Dated at HARTFORD, CT on this 30TH day of SEPTEMBER, 2025

Amending Policy Number: 20 CSE S81701 Effective Date: 09/30/2025

Name of Insurance Company: HARTFORD FIRE INSURANCE COMPANY

Countersigned by: Susan L. Castaneda
(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 \$ 2,000,000 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: (860) 547-5000

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://portal.fmcsa.dot.gov/UrsRegistrationWizard/>.

(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)

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 <u>49 CFR 171.8</u> , 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 <u>49 CFR 173.403</u> .	\$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 <u>49 CFR 172.101</u> ; hazardous waste, hazardous materials, and hazardous substances defined in <u>49 CFR 171.8</u> and listed in <u>49 CFR 172.101</u> , 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 <u>49 CFR 173.403</u> .	\$5,000,000

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

RECEIVED

OCT 02 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- 2081 Expiration Date 12/31/2025

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 Ironclad Environmental Solutions, Inc.

Location Address:	Mailing Address:
4888 Loop Center Dr Ste 440 Houston, TX 77081	550 W 36th Street Jasper, IN 47546

Contact: Kimberly Reoh Title: Director

Business Phone: 920-850-2483 Fax: _____

E-mail: kreoh@necessolutions.com

24 hr Emergency Contact Phone: 920-850-2483

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: DE Date: 1-23-2007
 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.

Joe Brunetti, CEO

Attachment 0% owner.
4888 Loop Center Drive, Suite 440
Houston, TX 77081

(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
Gulf Tanks Holdings, Inc.
1650 East Fwy
Baytown, TX 77521

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

Last 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) _____

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 Attached
 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 Attached
 No transporter permits in other states

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

DOT# 1624598

MC# 00657559

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 checked="" type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input checked="" 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 checked="" type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Asbestos	\$1,000,000.00 + MCS-90 <input checked="" 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 Attach

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 attached

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 Joe Brunetti Date 12/10/2025
Print Name Joe Brunetti Title CEO

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

Ironclad Environmental Solutions, Inc.

SPILL CONTINGENCY PLAN
HAZARDOUS WASTE / USED OIL TRANSPORT

EMERGENCY ACTION: in the event of an on-the-road spill or other emergency, the driver will follow these procedures:

- A. Remain with the unit and warn all pedestrians and motorists to stay away from the spill area, pointing out to them the danger involved, and call the police 911 or have someone call the police / 911.
- B. Upon the arrival of the police or fire department, the driver will inform them of what kind of material has been spilled, hand them the manifest/paperwork if possible and request the area to be blocked off to both pedestrians and vehicles to prevent property damage or any serious personal injury.

The driver will request the first responder, fire or police personnel, to protect the area while the driver reports to a facility Branch Manager/Emergency Coordinator (listed below in the order of calling):

Branch Manager/ Emergency Coordinator

Name	Samuel Roberts
Phone number	443-934-7089

Corporate Safety Manager

Name	Aimee Wilson
Phone Number	817-201-0695

Regional Vice President

Name	Eric Ohsfeidt
Phone Number	405-255-7339

4. The Branch Manager/Emergency Coordinator will gather the following information from the driver and relay it to the National Response Center, and if required our 24/7 spill response partner ERTS at (888) 585-5028.
 1. Name of person reporting the incident.
 2. Name, address, and Identification Number of the transporter.
 3. Phone number where person reporting can be reached.
 4. Date, time, and location of the incident.
 5. The extent of injuries, if any.
 6. Classification, name, and quantity of hazardous materials/wastes involved, if such information is available.
 7. Type of incident and nature of hazardous material/waste involvement and

whether a continuing danger exists at the scene.

8. For each waste product involved provide:

- a. Name and Identification Number of generator.
- b. Product shipping, hazardous class, and UN or NA Number.
- c. Estimated quantity of material spilled.
- d. If possible, estimate the extent of contamination to land, water, or air.

9. Shipping name, hazard class, and Identification Number of any other material carried.

EMERGENCY RESPONSE AGENCIES

AGENCY	TOLL FREE NUMBER	REGULAR NUMBER
U.S. National Response Center	(800) 424-8802	(202) 426-2675
Alabama Emergency Management Agency		(302) 659-3362
Hazardous Materials/Waste Incidents	(800) 843-0699	
U.S. Coast Guard, Lewes	(800) 424-9300	(302) 644-1909
CHEMTREC		
<u>ERTS</u>	(888) 585-5028	
Delaware Emergency Reporting	800-662-8802/	
		302-739-9401

D. Specific actions to be taken at the scene of the spill are:

I. Containment - The critical problem is to prevent the escape of any spilled liquid or solid into the ground or into a storm or sanitary sewer. A barrier must be erected immediately to prevent escape of spilled materials/waste liquids, using whatever material is at hand, even a dirt curb to prevent spreading of the spill. Containment of solids will be dependent on wind and weather conditions. Use the box tarp in the vehicle, or plastic visqueen if conditions are wet and windy. Simultaneously, the source of the spill or leak must be located and controlled (e.g., box hole plugged or taped or container turned right-side up).

The possibility of evacuation should be considered in the event of a major spill (e.g., a collision with another vehicle or a loaded trailer that has turned over, with subsequent container(s) rupturing). Major concerns involve ignitable wastes that may catch fire and possibly explode or generate toxic fumes. If fire threatens or actually occurs, personnel should be evacuated a distance of at least a half-mile as recommended by the Emergency Response Guidebook. If no fire threatens, and no container (s) have ruptured, a distance of 50-100 feet should suffice.

If the shipping description is known (refer to the manifest) find the name in your Emergency Response Guidebook in the blue pages and turn to the Corresponding Guide Number (orange top page-last 1/3 of book). If the shipping description is not known check the placard on the vehicle for a "UN" or a "NA" number, look up

the number in the yellow pages and refer to the Corresponding Guide Number, or contact the generator of the waste for safety data.

2. Cleanup - With containment effected and the spillage source controlled, cleanup is the next step. If the spill is contained on an impervious paved surface, material should be absorbed onto a compatible material (e.g., sand, diatomaceous earth). Any of a number of commercial absorbent inert materials may be used, but make sure they are compatible with the waste and will not cause a reaction. If the spillage has reached soil, all contaminated dirt should be collected into drums or bags for disposal at an EPA approved site.

If any spilled waste has reached the ground, the contaminated soil will be removed. The extent of contamination will be determined by sampling the spill area. A qualified laboratory will analyze the sample. Sampling techniques, chain-of-custody requirements, and analytical methods will follow approved procedures such as those outlined in SW-846 (Test Methods for Evaluating Solid Waste: Physical/Chemical Methods Compendium). Any soil exhibiting contamination above the local background level will be removed to an appropriate permitted disposal site.

In addition to contaminated absorbents, dirt, or the like as noted above, damaged containers also present a disposal problem. Special "recovery drums" (oversize metal drums) will be used for containing damaged 55-gallon drums. Disposal will be at an approved site.

II. **EMERGENCY EQUIPMENT:** Each tractor or trailer carries the following emergency equipment:

- Gloves
- Goggles
- Slicker Suite
- Oil Absorbing Socks & Pads
- Boots
- DOT Emergency Response Guidebook
- Emergency Reflective Triangles (3)
- Flares
- ABC Fire Extinguisher

III. **FOLLOW-UP PROCEDURES:** Two steps remain once the immediate emergency aspects of a spill have been taken care of:

A. *Decontamination:*

Trucks or trailers exposed to a spill or leak will be decontaminated at the site in order to prevent any further release to the extent that it can be transported (or move under its own power) to an authorized facility capable of further decontamination if necessary.

Equipment - Each item used will be placed in an open head container and thoroughly rinsed with a compatible solvent or cleaning compound. The residue or wash water will then be drained into a tight head container, sealed, and disposed of in accordance with Federal and State Regulations at an authorized disposal site.

Clothing - Contaminated clothing will be placed with the clean up residue and disposed of in accordance with Federal and State Regulations at an authorized disposal site. If clothing is reusable, then it will be decontaminated properly and the residue added to the other waste.

B. *Notification:* The Department of Transportation, Director of Hazardous Materials Registration, Materials and Transportation Bureau, Washington, DC 20590 will be notified, in writing, of the occurrence, and nature of the incident.

IV. TRAINING PROGRAM: In preparation for handling hazardous materials and hazardous wastes, all drivers and response personnel receive approximately two (2) hours classroom training followed by refresher training by local management at regular scheduled (at least monthly) safety tailgate meetings. In addition to the above, an annual meeting is held to educate further each Branch Manager on changes in regulations.

A. The following is a list of classroom training provided to all branch personnel responsible for the handling and transportation of hazardous waste:

1. RCRA Hazardous Waste Manifesting
2. Container Receiving and Maintenance
3. Container Inspections
4. Container Transferring
5. Container Pickup Checklist
6. Re-use of Containers for Hazardous Waste
7. Emergency Response Equipment
8. Emergency Procedures
9. Hazardous Waste Labeling
10. Emergency Spills

B. Since much of the drivers' actions involve hazardous materials, including hazardous wastes, their instructions specifically include:

1. Inspection of their vehicles before and during trips;
2. Driving Rules;
3. Knowledge of safety and health hazards of products carried (e.g., flammable, and corrosive); and
4. Actions to be implemented in case of spills, accidents, or other emergencies involving hazardous materials and hazardous wastes.

BRANCH	TRUCK #	YEAR	MAKE	MODEL	TYPE	VIN #	COLOR	PLATE	STATE	GVWR	OWNER
1380	MD598	2015	Kenworth	T800	Winch	1XKDD49X5F1435598	Red	3655904	IN	80,000	Ironclad Environmental Solutions
1380	MT2440	2025	Kenworth	T880	Winch	1XKZD49X7SJ135626	White	3657336	IN	80,000	Ironclad Environmental Solutions
1380	MT2436	2025	Kenworth	T880	Roll Off	1NKZL40X1SJ131517	White	3687964	IN	80,000	Ironclad Environmental Solutions
1380	MT2430	2025	Kenworth	T800	Roll Off	1NKDL40X9SR111981	White	3658657	IN	80,000	Ironclad Environmental Solutions

STATE	PERMIT	STATUS	PERMIT NUMBER
DC	SOLID WASTE ACTIVE		R-06-12-24-01521
IL	WASTE HA/ACTIVE		57311
LA	WASTE TR/ACTIVE		T04714401
MD	SPECIAL W/ACTIVE		SMH146
MN	WASHIN/ACTIVE	N/A	
MN	CARVER C/ACTIVE		
MN	SCOTT CO/ACTIVE	N/A	

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 respond, 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 1-2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and sending the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate and other aspects of this collection of information, including suggestions for reducing this burden, to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-3RA, 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 Gulf Tanks Holdings, Inc of Texas 1624598
(Motor Carrier name) (Motor Carrier state or province) (USDOT Number)

Dated at 12:00 midn on this 30th day of September , 2025

Amending Policy Number: 8E-A7-XL-0002253-01 Effective Date: 09/30/2025

Name of Insurance Company: The Bridgeway Insurance Co

Countersigned by:

(Authorized company representative)

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

- Primary insurance, and the company shall not be liable for amounts in excess of \$ _____ for each accident.
- Excess insurance, and the company shall not be liable for amounts in excess of \$ 3,000,000.00 for each accident in excess of an underlying limit of \$ 1,000,000.00 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: 347-344-7037.

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)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/15/2025

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:	Trevor Deal
Ironwood & Marsh & McEuenen Agency, LLC Co 4401 Northside Parkway NW Suite 800 Atlanta, GA 30327		PHONE (A/C, No. Ext.)	(470) 456-1697
		E-MAIL ADDRESS:	Trevor.Deal@MarshMMA.com
		INSURER(S) AFFORING COVERAGE	NAIC #
		INSURER A Axis Surplus Insurance Company (A, XV)	26621
		INSURER B Hartford Fire Insurance Company (A+, XV)	19582
		INSURER C National Fire & Marine Insurance Company (A++, XV)	20170
		INSURER D	
		INSURER E	
		INSURER F	

COVERAGES		CERTIFICATE NUMBER:	25-26	REVISION NUMBER:		
<p>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.</p>						
INSURER	TYPE OF INSURANCE	ADDITIONAL SUBR/INSD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000
	<input checked="" type="checkbox"/> Pollution Liability (Included)					MED EXP (Any one person) \$ 25,000
	(see page 2 for limits)					PERSONAL & ADV INJURY \$ 1,000,000
	GEN L AGGREGATE LIMIT APPLIES PER POLICY <input checked="" type="checkbox"/> PROJ. <input type="checkbox"/> LOG					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 2,000,000	
					\$	
AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Per accident) \$ 2,000,000
B	ANY AUTO					BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos Only	SCHEDULED AUTOS	20CSES81701	09/30/2025	09/30/2026	BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
						\$
A	UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR				EACH OCCURRENCE \$ 5,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB	<input checked="" type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 5,000,000
	(Over GL & Pollution)					(Over GL & Pollution) \$
						\$
						\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N				<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER MEMBER EXCLUDED? <input type="checkbox"/> Yes, describe below	<input checked="" type="checkbox"/> N <input type="checkbox"/> N/A	20WNS81700 / 20WBRS81702	09/30/2025	09/30/2026	EL EACH ACCIDENT \$ 2,000,000
	(Mandatory in NH)					EL DISEASE - EA EMPLOYEE \$ 2,000,000
						EL DISEASE - POLICY LIMIT \$ 2,000,000
						\$
C	Excess Liability (Over Auto & EL) - Lead \$4M x \$2M		42-XSF-343895-01	09/30/2025	09/30/2026	Each Occurrence \$4,000,000
						Aggregate \$4,000,000
						\$
						\$
						\$

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

CERTIFICATE HOLDER	CANCELLATION
Delaware Department of Natural Resources and Environmental Control 89 Kings HWY Dover	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



AGENCY CUSTOMER ID: _____
LOC #: _____

ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY	NAMED INSURED	
Ironwood, a Marsh & McLennan Agency, LLC Co	Ironclad Environmental Solutions, Inc.	
POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance: Notes

Pollution Liability (Contractors & Site Pollution)

Axis Surplus Insurance Company

Policy #MP005964-03-2025

Effective 9/30/2025 - 9/30/2026

\$1,000,000 Per Claim Limit

\$2,000,000 Aggregate

Excess Liability (Auto & Employers Liability Only)

SinusPoint Specialty Insurance Corporation

Policy #TSX-000203-25

Effective 9/30/2025 - 9/30/2026

\$5,000,000 xs \$8,000,000 Per Occurrence

\$5,000,000 xs \$6,000,000 Aggregate

Excess General Liability/Pollution Liability

Certain Underwriters at Lloyds, London / Hudson Excess Insurance Company

Policy #ENVX0000528-25

Effective 9/30/2025 - 9/30/2026

\$5,000,000 xs \$6,000,000 Per Occurrence

\$5,000,000 xs \$7,000,000 Aggregate

Cyber Liability

Policy #AB-6678224-01

Alt-Bay Specialty Insurance Corporation

Effective 4/1/2025 - 09/30/2025

\$5,000,000 Limit

Workers Compensation States Covered by Policy

20WNS81700 AL, AZ, CA, CO, FL, GA, IA, IL, IN, KS, LA, MA, MD, MI, MN, MO, MS, NC, NJ, NM, NV, NY, OK, PA, SC, TN, TX, UT, VA, WA, 20WBR81702 WI

Additional Named insureds

1. Ironhorse Parent, LP
2. Ironhorse Intermediate, LLC
3. Ironhorse Purchaser, LLC
4. Gulf Tanks Holdings, Inc
5. Water Movers Contracting, LLC
6. Adler Tank Rentals, LLC
7. DenBeste Water Solutions, LLC
8. DenBeste Transportation, LLC

RECEIVED

OCT 02 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

HAZARDOUS 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.)

The application must be signed by the company owner or a corporate officer. A check payable to the "State of Delaware" must accompany this application.

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

1. Type of Permit

New - Submit a check or money order, payable to the "State of Delaware," in the amount of \$350.00.

Renewal: Permit # DE-HW- 0663 Expiration Date 12/29/2025

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.

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 hazardous waste transporters? Yes No

3. Company Information:

Company Name: Ironclad Environmental Solutions, Inc

Location Address:	Mailing Address:
4888 Loop Center Dr Ste 440, Houston, TX 77081	550 W 36th Street Jasper, IN 47546

Contact Person: Kimberly Reoh Title: Director

Business Phone: 9208502483 Fax: _____

E-mail: kreoh@necessolutions.com 24 hr. Emergency Phone: 9208502483

EPA Identification Number: TXR000079368

Employer's Federal Tax ID Number: 870795847

4. Type of Company: (Check One)

- Proprietorship
- Partnership
- Corporation - City, State and Date of Incorporation: Delaware 1-23-2007
- Municipality
- Public Institution
- Other - Explanation: _____

5. Parent Company Information:

Parent Company Name: Gulf Tanks Holdings, Inc.

Parent Company Address: 1650 East Fwy
Baytown, TX 77521

6. Ownership/Stockholder Information:

For each owner, partner, or corporate officer, list the name, title, home address, and date of birth.

List of owners, partners, or corporate officers: Attachment Joe Brunetti 

List the name and address of all stockholders owning greater than 5% outstanding shares.

List of stockholders: Attachment _____
 Not Applicable

7. Company Affiliations:

List all other companies owned by the same owners, corporate officers, or parent company that are engaged in the business of solid or hazardous waste transportation, treatment, storage, disposal, recovery, or reclamation.

List of company affiliates: Attachment _____
 No company affiliates

8. Type of Hazardous Waste to be Transported:

Indicate the waste types to be transported. (Note: Characteristic and listed hazardous wastes identified in Delaware's *Regulations Governing Hazardous Waste* (DRGHW) Part 261 are equivalent to RCRA 40 CFR Part 261 wastes.) Check all that apply.

Part 261 characteristic or listed hazardous wastes
 Used or waste oils (as defined by Part 279, Used Oil Management Standards)
 Spent antifreeze exhibiting a characteristic of hazardous waste
 PCB-contaminated hazardous waste
 Spent fluorescent lighting tubes and ballasts when managed as non-universal waste

9. Treatment, Storage, and Disposal Facilities:

List all treatment, storage, and disposal facilities that have agreed to accept the hazardous wastes identified above.

List of treatment, storage, and disposal facilities: Attachment _____

10. Other Transporter Permits:

List all hazardous waste transporter permits held in other states.

List of transporter permits: Attachment Attached
 No hazardous waste transporter permits held in other states

11. Federal DOT and Motor Carrier Numbers:

Indicate your Federal DOT number and Motor Carrier number:

DOT# 1624598 MC# 00657559

12. Proof of Insurance:

The transporter identified in this application must meet or exceed minimum insurance requirements as set forth in DOT Title 49 CFR Part 387. The DNREC Compliance and Permitting Section must be identified as the certificate holder. Also include a current MCS-90 endorsement or affirmation that the endorsement is still in effect.

Certificate of insurance and MCS-90: Attachment Attached _____

13. Spill Control and Safety Equipment:

List all spill control and safety equipment that will be carried on each vehicle.

List of spill control and safety equipment: Attachment Attached

14. Spill Control Plan:

Attach a copy of the Spill Control Plan that describes prevention, containment, and clean up procedures during transportation. The plan must demonstrate compliance with the requirements outlined in DRGHW Sections 263.30, 263.31, and 263.105. **Spill Control Plans must contain the following Delaware Emergency Reporting Telephone Numbers: 1-800-662-8802 and 302-739-9401.**

Spill Control Plan: Attachment Sec 1-3

15. Driver Training:

Attach a copy of your driver training program. All drivers must be trained in current DOT Motor Carrier Safety Regulations and have knowledge of the proper handling procedures for the type of waste transported, the hazardous waste manifest system, and safe vehicle operation as provided in 49 CFR Parts 383, 390 – 399, and DRGHW Section 263.104. All drivers must be familiar with the approved Spill Control Plan.

Driver Training Program: Attachment Sec 4

16. Controlled Substance Testing:

Do you maintain a controlled substance testing program for drivers in your employment (including contract drivers) in compliance with Federal DOT 49 CFR Part 391?

Yes

No. Explain:

17. Vehicle Identification Information:

List all vehicles to be used for the transportation of hazardous waste into, out of, or through Delaware. You may use the form provided or another printout that contains all required information.

Vehicle Identification Information: Attachment Attached

18. Environmental Record:

List all criminal citations, arrests or 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 other 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 application.

Environmental Record: Attachment
 Not Applicable – No violations within the specified time period

19. Signature:

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 of legal owner or corporate officer

Joe Brunetti

Printed Name

12/10/2025

Date

CEO

Title

Ironclad Environmental Solutions, Inc.

SPILL CONTINGENCY PLAN
HAZARDOUS WASTE / USED OIL TRANSPORT

EMERGENCY ACTION: In the event of an on-the-road spill or other emergency, the driver will follow these procedures:

- A. Remain with the unit and warn all pedestrians and motorists to stay away from the spill area, pointing out to them the danger involved, and call the police 911 or have someone call the police / 911.
- B. Upon the arrival of the police or fire department, the driver will inform them of what kind of material has been spilled, hand them the manifest/paperwork if possible and request the area to be blocked off to both pedestrians and vehicles to prevent property damage or any serious personal injury.

The driver will request the first responder, fire or police personnel, to protect the area while the driver reports to a facility Branch Manager/Emergency Coordinator (listed below in the order of calling):

Branch Manager/ Emergency Coordinator

Name	Samuel Roberts
Phone number	443-934-7089

Corporate Safety Manager

Name	Aimee Wilson
Phone Number	817-201-0695

Regional Vice President

Name	Eric Ohsfeldt
Phone Number	405-255-7339

A. The Branch Manager/Emergency Coordinator will gather the following information from the driver and relay it to the National Response Center, and if required our 24/7 spill response partner ERTS at (888) 585-5028.

1. Name of person reporting the incident.
2. Name, address, and Identification Number of the transporter.
3. Phone number where person reporting can be reached.
4. Date, time, and location of the incident.
5. The extent of injuries, if any.
6. Classification, name, and quantity of hazardous materials/wastes involved, if such information is available.
7. Type of incident and nature of hazardous material/waste involvement and

whether a continuing danger exists at the scene.

8 For each waste product involved provide:

- a. Name and Identification Number of generator.
- b. Product shipping, hazardous class, and UN or NA Number.
- c. Estimated quantity of material spilled.
- d. If possible, estimate the extent of contamination to land, water, or air.

9 Shipping name, hazard class, and Identification Number of any other material carried.

EMERGENCY RESPONSE AGENCIES:

AGENCY	TOLL FREE NUMBER	REGULAR NUMBER
U.S. National Response Center	(800) 424-8802	(202) 426-2675
Alabama Emergency Management Agency		(302) 659-3362
Hazardous Materials/Waste Incidents	(800) 843-0699	
U.S. Coast Guard, Lewes	(800) 424-9300	(302) 644-1909
CHEMTREC		
<u>ERTS</u>	(888) 585-5028	
Delaware Emergency Reporting	800-662-8802/ 302-739-9401	

D. Specific actions to be taken at the scene of the spill are:

I. Containment - The critical problem is to prevent the escape of any spilled liquid or solid into the ground or into a storm or sanitary sewer. A barrier must be erected immediately to prevent escape of spilled materials/waste liquids, using whatever material is at hand, even a dirt curb to prevent spreading of the spill. Containment of solids will be dependent on wind and weather conditions. Use the box tarp in the vehicle, or plastic visqueen if conditions are wet and windy. Simultaneously, the source of the spill or leak must be located and controlled (e.g., box hole plugged or taped or container turned right-side up).

The possibility of evacuation should be considered in the event of a major spill (e.g., a collision with another vehicle or a loaded trailer that has turned over, with subsequent container(s) rupturing). Major concerns involve ignitable wastes that may catch fire and possibly explode or generate toxic fumes. If fire threatens or actually occurs, personnel should be evacuated a distance of at least a half-mile as recommended by the Emergency Response Guidebook. If no fire threatens, and no container (s) have ruptured, a distance of 50-100 feet should suffice.

If the shipping description is known (refer to the manifest) find the name in your Emergency Response Guidebook in the blue pages and turn to the Corresponding Guide Number (orange top page-last 1/3 of book). If the shipping description is not known check the placard on the vehicle for a "UN" or a "NA" number, look up

the number in the yellow pages and refer to the Corresponding Guide Number, or contact the generator of the waste for safety data.

2. Cleanup - With containment effected and the spillage source controlled, cleanup is the next step. If the spill is contained on an impervious paved surface, material should be absorbed onto a compatible material (e.g., sand, diatomaceous earth). Any of a number of commercial absorbent inert materials may be used, but make sure they are compatible with the waste and will not cause a reaction. If the spillage has reached soil, all contaminated dirt should be collected into drums or bags for disposal at an EPA approved site.

If any spilled waste has reached the ground, the contaminated soil will be removed. The extent of contamination will be determined by sampling the spill area. A qualified laboratory will analyze the sample. Sampling techniques, chain-of-custody requirements, and analytical methods will follow approved procedures such as those outlined in SW-846 (Test Methods for Evaluating Solid Waste: Physical/Chemical Methods Compendium). Any soil exhibiting contamination above the local background level will be removed to an appropriate permitted disposal site.

In addition to contaminated absorbents, dirt, or the like as noted above, damaged containers also present a disposal problem. Special "recovery drums" (oversize metal drums) will be used for containing damaged 55-gallon drums. Disposal will be at an approved site.

II. **EMERGENCY EQUIPMENT:** Each tractor or trailer carries the following emergency equipment:

- Gloves
- Goggles
- Slicker Suite
- Oil Absorbing Socks & Pads
- Boots
- DOT Emergency Response Guidebook
- Emergency Reflective Triangles (3)
- Flares
- ABC Fire Extinguisher

III. **FOLLOW-UP PROCEDURES:** Two steps remain once the immediate emergency aspects of a spill have been taken care of:

A. *Decontamination*

Trucks or trailers exposed to a spill or leak will be decontaminated at the site in order to prevent any further release to the extent that it can be transported (or move under its own power) to an authorized facility capable of further decontamination if necessary.

Equipment - Each item used will be placed in an open head container and thoroughly rinsed with a compatible solvent or cleaning compound. The residue or wash water will then be drained into a tight head container, sealed, and disposed of in accordance with Federal and State Regulations at an authorized disposal site.

Clothing - Contaminated clothing will be placed with the clean up residue and disposed of in accordance with Federal and State Regulations at an authorized disposal site. If clothing is reusable, then it will be decontaminated properly and the residue added to the other waste.

B. Notification: The Department of Transportation, Director of Hazardous Materials Registration, Materials and Transportation Bureau, Washington, DC 20590 will be notified, in writing, of the occurrence, and nature of the incident.

IV. TRAINING PROGRAM: In preparation for handling hazardous materials and hazardous wastes, all drivers and response personnel receive approximately two (2) hours classroom training followed by refresher training by local management at regular scheduled (at least monthly) safety tailgate meetings. In addition to the above, an annual meeting is held to educate further each Branch Manager on changes in regulations.

A. The following is a list of classroom training provided to all branch personnel responsible for the handling and transportation of hazardous waste:

1. RCRA Hazardous Waste Manifesting
2. Container Receiving and Maintenance
3. Container Inspections
4. Container Transferring
5. Container Pickup Checklist
6. Re-use of Containers for Hazardous Waste
7. Emergency Response Equipment
8. Emergency Procedures
9. Hazardous Waste Labeling
10. Emergency Spills

B. Since much of the drivers' actions involve hazardous materials, including hazardous wastes, their instructions specifically include:

1. Inspection of their vehicles before and during trips;
2. Driving Rules;
3. Knowledge of safety and health hazards of products carried (e.g., flammable, and corrosive); and
4. Actions to be implemented in case of spills, accidents, or other emergencies involving hazardous materials and hazardous wastes.

BRANCH	TRUCK #	YEAR	MAKE	MODEL	TYPE	VIN #	COLOR	PLATE	STATE	GVWR	OWNER
1380	MD598	2015	Kenworth	T800	Winch	1XKDD49X5FJ435598	Red	3655904	IN	80,000	Ironclad Environmental Solutions
1380	MT2440	2025	Kenworth	T880	Winch	1XKZD49X7SJ135626	White	3657336	IN	80,000	Ironclad Environmental Solutions
1380	MT2436	2025	Kenworth	T880	Roll Off	1NKZL40X1SJ131517	White	3687964	IN	80,000	Ironclad Environmental Solutions
1380	MT2430	2025	Kenworth	T800	Roll Off	1NKDL40X9SR111981	White	3658657	IN	80,000	Ironclad Environmental Solutions

STATE	PERMIT	STATUS	PERMIT NUMBER
DC	SOLID WASTE	ACTIVE	R-06-12-24-01821
IL	WASTE HA	ACTIVE	57311
LA	WASTE TR	ACTIVE	T04714401
MD	SPECIAL W	ACTIVE	SMH146
MN	WASHING	ACTIVE	N/A
MN	CARVER C	ACTIVE	
MN	SCOTT CO	ACTIVE	N/A

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

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



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 Gulf Tanks Holdings, Inc of Texas
(Motor Carrier name) (Motor Carrier state or province)

Dated at 12:00 midr on this 30th day of September, 2023

Amending Policy Number: 8E-A7-XL-0002253-01 Effective Date: 09/30/2023

Name of Insurance Company: The Bridgeway Insurance Co

Countersigned by:

(authorized company representative)

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

This insurance is primary and the company shall not be liable for amounts in excess of \$ _____ for each accident.
 This insurance is excess and the company shall not be liable for amounts in excess of \$ 5,000,000.00 for each accident in excess of the underlying limit of \$ 1,000,000.00 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: 347-344-7037.

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 <http://www.fmcsa.dot.gov/urs>.

(continued on next page)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/16/2025

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	Trevor Deal
Ironwood, a Marsh & McLennan Agency, LLC Co	PHONE (A/C. No. Ext.)	(470) 456-1697
4401 Northside Parkway NW	FAX (A/C. No.)	(404) 500-9101
Suite 800	E-MAIL ADDRESS	Trevor.Deal@MarshMMA.com
Atlanta	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A Axis Surplus Insurance Company (A, XV)	26620
	INSURER B Hartford Fire Insurance Company (A+, XV)	19682
	INSURER C National Fire & Marine Insurance Company (A++, XV)	20079
	INSURER D	
	INSURER E	
	INSURER F	

COVERAGES CERTIFICATE NUMBER: 25-26 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	ADOL/SUBR INSG. WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> Pollution Liability Included					DAMAGE TO RENTED PREMISES (Ex occurrence) \$ 100,000
A	(see page 2 for limits)		MP005964-03-2025	09/30/2025	09/30/2026	MED EXP (Any one person) \$ 25,000
	GENERAL AGGREGATE LIMIT APPLIES PER					PERSONAL & ADV. INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO- JECT <input type="checkbox"/> 400					GENERAL AGGREGATE \$ 2,000,000
	OTHER					PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY					
B	<input checked="" type="checkbox"/> ANY-A-TO- CAINED AUTOS ONLY Hired Autos Only	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY	20CSESB1701	09/30/2025	09/30/2026	COMBINED SINGLE LIMIT (Ex accident) \$ 2,000,000
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
	UMBRELLA-LAB	<input checked="" type="checkbox"/> OCCUR				EACH OCCURRENCE \$ 5,000,000
A	<input checked="" type="checkbox"/> EXCESS-LAB	<input type="checkbox"/> CLAIMS-MADE	MX005965-03-2025	09/30/2025	09/30/2026	AGGREGATE \$ 5,000,000
	LOD	RETENTION \$				(Over GL & Pollution) \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input checked="" type="checkbox"/> Y/N				<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH- ER
B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NY)	<input type="checkbox"/> N <input type="checkbox"/> N/A	20WNSB1700 / 20WBRB1702	09/30/2025	09/30/2026	E.L. EACH ACCIDENT \$ 2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 2,000,000
						E.L. DISEASE - POLICY LIMIT \$ 2,000,000
C	Excess Liability (Over Auto & EL) - Lead \$4M x \$2M		42 XSF-343895-01	09/30/2025	09/30/2026	Each Occurrence \$4,000,000
						Aggregate \$4,000,000

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

CERTIFICATE HOLDER	CANCELLATION
<p>Delaware Department of Natural Resources and Environmental Control 89 Kings Hwy Dover</p> <p>DE 19901</p>	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p><i>Karen Howell</i></p>

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ADDITIONAL REMARKS SCHEDULE

Page of

AGENCY Ironwood, a Marsh & McLennan Agency, LLC Co	NAMED INSURED Ironclad Environmental Solutions, Inc.	
POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance-Notes

Pollution Liability (Contractors & Site Pollution)

Axis Surplus Insurance Company

Policy #MP005964 03/2025

Effective 9/30/2025 - 9/30/2026

\$1,000,000 Per Claim Limit

\$2,000,000 Aggregate

Excess Liability (Auto & Employers Liability Only)

SitusPoint Specialty Insurance Corporation

Policy #TSX-SC0203-25

Effective 9/30/2025 - 9/30/2026

\$5,000,000 vs \$6,000,000 Per Occurrence

\$5,000,000 vs \$6,000,000 Aggregate

Excess General Liability-Pollution Liability

Certain Underwriters at Lloyds, London / Hudson Excess Insurance Company

Policy #ENVX0000528-25

Effective 9/30/2025 - 9/30/2026

\$5,000,000 vs \$6,000,000 Per Occurrence

\$5,000,000 vs \$7,000,000 Aggregate

Cyber Liability

Policy #AB-6673224-01

At-Bay Specialty Insurance Corporation

Effective 4/1/2026 - 09/30/2026

\$5,000,000 Limit

Workers Compensation States Covered by Policy

20WNS81700 AL, AZ, CA, CO, FL, GA, IA, IL, IN, KS, LA, MA, MD, MI, MN, MO, MS, NC, NJ, NM, NV, NY, OK, PA, SC, TN, TX, UT, VA, WA

20WBR81702 WI

Additional Named Insureds:

1. Ironhorse Parent, LLC
2. Ironhorse Intermediate, LLC
3. Ironhorse Purchaser, LLC
4. Gulf Tanks Holdings, Inc
5. Water Movers Contracting, LLC
6. Adler Tank Rentals, LLC
7. DenBeste Water Solutions, LLC
8. DenBeste Transportation, LLC