

# RECEIPT

DATE 3-4-26No. 635882RECEIVED FROM APEX GREEN LLC

\$ <u>350.00</u>
------------------

Three hundred fifty & 10/100

DOLLARS

 FOR RENT FOR DE-SW-2194

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY  
ORDER CREDIT  
CARDFROM #1014

TO \_\_\_\_\_

BY CR

DE-SW-2194

Please find Attached our new check  
for Registration / Hauler permit.



Thank you,

Chris Dalvano



RECEIVED

FEB 24 2026

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**

Language Preference: English

**Instructions:** You must complete this application in its entirety and attach all applicable documentation. (Note: For applicants renewing an existing permit, this application requires the submission of updated information and documentation. References to material submitted under previous applications are no longer accepted.)

The application must be signed by the company owner or a corporate officer. A check or money order payable to the **“State of Delaware”** must accompany this application and be sent to:

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

**1. Type of Permit**

- New – **SCRAP TIRES ONLY** Submit a check or money order, payable to the “State of Delaware,” in the amount of \$75.00.
- New – **ALL OTHERS** Submit a check or money order, payable to the “State of Delaware” in the amount of \$350.00.
- Renewal: Permit # DE-SW- \_\_\_\_\_ Expiration Date \_\_\_\_\_

Please indicate the term for which you desire your permit to be issued. Submit a check or money order, payable to the “State of Delaware,” for the indicated permit fee.

**SCRAP TIRES ONLY**

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

**ALL OTHERS**

- One Year - \$350.00
- Two Years - \$650.00
- Three Years - \$950.00
- Four Years - \$1250.00
- Five Years - \$1550.00

**2. Release to Public**

Do you wish to be included on the list of transporters that is provided to persons requesting a list of Delaware permitted solid waste transporters?  Yes  No

**3. Company Information**

Company Name Apex Green LLC

Location Address:	Mailing Address:
17 Keller Way Downingtown PA 19335	17 Keller Way Downingtown PA 19335

Contact: Christopher Dalvano Title: Co-Owner

Business Phone: 6103299070 Fax: \_\_\_\_\_

E-mail: Chris.Dalvano@dumpsterdudez.com

24 hr Emergency Contact Phone: 6103299070

**4. Company Ownership Information**

(a). Please indicate the company type:

- Proprietorship
- Partnership
- Corporation - If company is a corporation, indicate city, state, and date of incorporation.

City: \_\_\_\_\_ State: \_\_\_\_\_ Date: \_\_\_\_\_

- Municipality
- Public institution
- Limited Liability Corporation (LLC) State: PA
- Other: (must specify) \_\_\_\_\_

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

Attachment Owners

(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) A
  - 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 B
  - 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 \_\_\_\_\_
- No transporter permits in other states

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

DOT# 4286577 MC# \_\_\_\_\_

- 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.

We do not require an MC number as we are not considered a "For-hire" Carrier or engage in interstate hauling.

**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:

	<b>FOR-HIRE INTERSTATE</b>	<b>ALL OTHERS</b>
Residential Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Commercial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input checked="" type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Dry Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input checked="" type="checkbox"/>
Ash	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Infectious Waste	\$1,000,000.00 + MCS-90 <input type="checkbox"/>	\$750,000.00 + MCS-90 <input type="checkbox"/>
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Asbestos	\$1,000,000.00 + MCS-90 <input type="checkbox"/> (For Hire & Private)	\$350,000.00 <input type="checkbox"/>
Scrap Tires Only	\$350,000.00 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>

### 11. Spill Control and Safety

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

✓ Spill Control Plan: Attachment C

### 12. Driver Training

**IN SUMMARY OR OUTLINE FORM**, describe the procedures that your company takes to ensure that all company drivers are safe and competent drivers. Small owner-operators may describe their years of experience and driving record in lieu of a formal program.

- (a). Include requirements for special licenses (e.g. CDL, including any special endorsements), any special training received, including dates training was received (e.g. asbestos training), and any ongoing company programs. (e.g. weekly safety meetings or annual refresher courses);
- (b). Include your company procedure for periodic checks of the driver's records for moving violations, and your company policy on progressive counseling/discipline based on points;
- (c). Describe how drivers are instructed in the following:
  - (i) Knowledge of proper handling procedures for the type of solid waste being transported.
  - (ii) Familiarity with the approved accidental discharge containment plan. (Spill Control Plan)
  - (iii) Familiarity with the conditions of the solid waste transporter's permit.

✓ Driver Training, attachment D

### 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 Christopher J. Dalvano Date 2/16/2026

Print Name Christopher J. Dalvano Title Co-Owner

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



Owners:

Name	Title	Mailing Address	DeP	Ownership
Christopher Dalvano	Co-Owner	17 Keller way, Downingtown PA 19335	[REDACTED]	50%
Ian Windle	Co-Owner	17 Keller way, Downingtown PA 19335	[REDACTED]	50%

Attachment A

Sandtown Landfill  
Cherry Island Landfill

Attachement B:

 **COMMONWEALTH OF PENNSYLVANIA** 4377280481  
**Waste Transportation Safety Program**  
**Written Authorization**

Phone No. (610)-329-9070

VIN# 1FDFF6LT0RDA11048  
WH24377  
Expires Oct 2026

APEX GREEN, LLC  
CHRIS DALYAND  
17 KELLER WAY  
DOWNTOWN, PA 19335-1076

THIS WRITTEN AUTHORIZATION MUST BE KEPT WITH THE  
WASTE TRANSPORTATION VEHICLE AT ALL TIMES.  
A copy of this authorization must be provided to DEP immediately at (717) 785-9278.  
A replacement fee is required.  
Copies of this authorization are available at the original Departmental  
and/or state.

## Attachment C:

### Spill Control Plan

The company transports non-hazardous solid waste only. The company does not transport hazardous waste, contaminated materials, regulated medical waste, or bulk liquid waste.

#### 1. Safety and Spill Control Equipment Carried on Each Vehicle

Each roll-off truck is equipped with basic safety and spill control equipment appropriate for non-hazardous solid waste transportation, including:

- Reflectors and/or flares
- Heavy-duty trash bags
- Personal protective equipment (PPE), including work gloves and high-visibility safety vest
- Fire extinguisher
- First aid kit

#### 2. Driver Preventive Measures

Drivers are instructed to take preventive measures to minimize the risk of spills or releases, including:

- Conducting pre-trip inspections to ensure containers are in good condition and properly secured.
- Ensuring all loads are properly loaded, secured, and covered prior to transport. All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.
- Operating vehicles in a safe and defensive manner
- Verifying that only authorized, non-hazardous materials are accepted for transport

#### 3. Driver Immediate Corrective Actions

In the event of a spill, leak, or accidental discharge, drivers are instructed to:

- Stop operations immediately and secure the area

- Activate hazard lights and deploy traffic safety devices as needed
- Prevent materials from entering storm drains, waterways, or public roadways
- Notify company management as soon as practicable:  
Ian Windle @ 484 639 8233

#### 4. Company Internal Communications

Drivers are required to promptly notify company management or designated supervisory personnel of any spill, discharge, or safety-related incident. Management will assess the situation and determine appropriate corrective actions.

#### 5. Company External Communications

When required, the company will notify appropriate regulatory or emergency authorities. Drivers and management maintain access to the Delaware Emergency Reporting Numbers:

- Delaware Emergency Notification: 1-800-662-8802
- DNREC Emergency Response: 302-739-9401

#### 6. Cleanup and Decontamination Measures

Minor spills or debris releases are addressed by the driver immediately. Management will determine if any outside help is needed before engagement any time of third part provider as we only haul non-hazardous material. If a spill exceeds the company's ability to safely manage, qualified cleanup contractors will be contacted. All cleanup activities are conducted in accordance with applicable regulations.

## Attachment D:

### Driver Training and Safety Program Summary

#### Overview

The company maintains a general driver qualification and safety program designed to ensure that all drivers operating company vehicles are safe, competent, and compliant with applicable federal, state, and local requirements related to solid waste transportation.

#### (a) Driver Qualifications and Training

All drivers are required to hold a valid driver's license appropriate for the vehicle operated meet applicable medical certification requirements where required.

Drivers are provided instruction on safe vehicle operation, equipment use, and job-site awareness when hired and as needed when new equipment, routes, or operational requirements are introduced. Ongoing safety communication and refresher instruction are provided periodically to reinforce safe driving and operational practices.

#### (b) Driver Record Monitoring and Discipline

The company maintains a general process for reviewing driver qualifications and monitoring driving when drivers are hired. Drivers are required to report moving violations, citations, or license status changes. Note that we have a singular driver.

#### (c) Waste Handling, Spill Response, and Permit Compliance

Drivers are instructed in the proper handling and transportation of solid waste to prevent spills, leaks, or debris during transport. This includes proper loading, securement, and covering of materials.

Drivers are made familiar with the company's accidental discharge and spill response procedures, including steps to take to contain and report any release.

Drivers are also instructed to operate in accordance with the conditions of the company's solid waste transporter permit, including limitations on waste types, service areas, and disposal locations.

Operator(s):

Name

[Redacted Name]

[Empty Name Field]

**Davis, DaQuan (DNREC)**

---

**From:** Chris Dalvano <Chris.Dalvano@dumpsterdudez.com>  
**Sent:** Friday, March 6, 2026 9:41 AM  
**To:** WHStranporters  
**Subject:** Re: Missing Information-DE SW Transporter Permit Application (Apex Green LLC)  
**Attachments:** department\_of\_natural\_resources\_and\_environmental\_control\_22035544.pdf

Thank you. Please see attached.

Sent from my iPhone

On Mar 5, 2026, at 8:46 AM, WHStranporters <WHStranporters@delaware.gov> wrote:

Good morning,

I have received your check. I just need the certificate of insurance.

Please let me know the status of this form.

Thank you,

<image001.png>

**DaQuan L. Davis**

Environmental Scientist

**Division of Waste and Hazardous Substances**

<image002.png>

302-739-9403

<image003.png>

[WHStranporters@delaware.gov](mailto:WHStranporters@delaware.gov)

<image004.png>

89 Kings Hwy SW, Dover, DE 19901

<image005.png>

[dnrec.delaware.gov](http://dnrec.delaware.gov)

<image006.png>

<image007.png>

<image008.png>

---

**From:** Davis, DaQuan (DNREC) **On Behalf Of** WHStranporters  
**Sent:** Monday, March 2, 2026 2:18 PM  
**To:** 'Chris Dalvano' <Chris.Dalvano@dumpsterdudez.com>  
**Subject:** RE: Missing Information-DE SW Transporter Permit Application (Apex Green LLC)

Okay sounds good. I'll shred the check.

<image001.png>

**DaQuan L. Davis**

Environmental Scientist

**Division of Waste and Hazardous Substances**

<image002.png>

302-739-9403

<image003.png>

[WHStranporters@delaware.gov](mailto:WHStranporters@delaware.gov)

<image004.png>

89 Kings Hwy SW, Dover, DE 19901

<image005.png>

[dnrec.delaware.gov](http://dnrec.delaware.gov)

<image006.png>

<image007.png>

<image008.png>

---

**From:** Chris Dalvano <[Chris.Dalvano@dumpsterdudez.com](mailto:Chris.Dalvano@dumpsterdudez.com)>

**Sent:** Saturday, February 28, 2026 12:04 PM

**To:** WHStranporters <[WHStranporters@delaware.gov](mailto:WHStranporters@delaware.gov)>

**Subject:** Re: Missing Information-DE SW Tranporter Permit Application (Apex Green LLC)

DaQuan,

Thank you for your note. I will place an updated check in the mail today for the 350. Please destroy the other.

Additionally, I will pass along our CIO as soon as I can. The version we got back was incorrect, and I have asked them to update before I pass along to you.

Thank you.

---

**From:** Davis, DaQuan (DNREC) <[daquan.davis@delaware.gov](mailto:daquan.davis@delaware.gov)> on behalf of WHStranporters <[WHStranporters@delaware.gov](mailto:WHStranporters@delaware.gov)>

**Sent:** Wednesday, February 25, 2026 10:07 AM

To: Chris Dalvano <[Chris.Dalvano@dumpsterdudez.com](mailto:Chris.Dalvano@dumpsterdudez.com)>

Subject: Missing Information-DE SW Transporter Permit Application (Apex Green LLC)

Hello,

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:

1. **Section 1**-New transporters must select one year for \$350.00, and you sent us a check for **\$650.00**. Please mail a check for \$350.00. Would you like me to shred the other check? Please provide an answer.
2. **Section 10**-You did not submit a certificate of insurance. Please provide this form and ensure you have the correct amount of automobile liability insurance, and add the Department of Natural Resources and Environmental Control address in the Certificate Holder section. The address is 89 Kings Highway, Dover, DE 19901.

Please provide the information requested above via e-mail within seven (7) days.

Thank you,

DaQuan Davis

<image001.png>

## DaQuan L. Davis

Environmental Scientist

**Division of Waste and Hazardous  
Substances**

<image002.png>

302-739-9403

<image003.png>

[WHSttransporters@delaware.gov](mailto:WHSttransporters@delaware.gov)

<image004.png>

89 Kings Hwy SW, Dover, DE 19901

<image005.png>

[dnrec.delaware.gov](http://dnrec.delaware.gov)

<image006.png>

<image007.png>

<image008.png>



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/6/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b>		<b>CONTACT NAME:</b> Jennifer Novak	
Wisdom Insurance Agency		<b>PHONE (A/C, No, Ext):</b> (262) 408-5019	<b>FAX (A/C, No):</b>
2309 Silvermail Rd		<b>E-MAIL ADDRESS:</b> jennifer@wisdominsurance.com	
Pewaukee WI 53072		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> ERIE INS CO	<b>NAIC #</b> 26263
		<b>INSURER B:</b> FLAGSHIP CITY INS CO	35585
		<b>INSURER C:</b> ERIE INS EXCH	26271
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
<b>INSURED</b>		<b>INSURER F:</b>	
Apex Green LLC			
17 KELLER WAY			
DOWNTOWN PA 19335-1076			

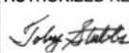
**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
		INSD	WVD						
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>			Q610653492	03/03/2026	03/03/2027	EACH OCCURRENCE	\$ 1,000,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000	
							MED EXP (Any one person)	\$ 5,000	
							PERSONAL & ADV INJURY	\$ 1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000	
	OTHER:							\$	
B	<b>AUTOMOBILE LIABILITY</b>			Q80-0028013	03/03/2026	03/03/2027	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
	<input type="checkbox"/> AUTOS ONLY							\$	
C	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR			Q270370525	03/03/2026	03/03/2027	EACH OCCURRENCE	\$ 1,000,000	
	<input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$ 1,000,000	
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$							\$	
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			Q710062749	03/03/2026	03/03/2027	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input type="checkbox"/>	N/A				E.L. EACH ACCIDENT	\$ 1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000	

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

**CERTIFICATE HOLDER**                      **CANCELLATION**

Department of Natural Resources and Environmental Control  89 Kings Highway  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 
---	--

© 1988-2015 ACORD CORPORATION. All rights reserved.