

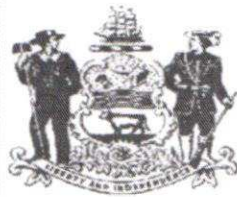
# RECEIPT

DATE 3/30/26No. 932536RECEIVED FROM Gipco, Inc.\$ 350.00Three hundred fifty and <sup>00</sup>/<sub>100</sub> DOLLARS FOR RENT  
 FOR DE-SW-1784

ACCOUNT	
PAYMENT	
BAL. DUE	

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM 10247 TO \_\_\_\_\_BY M.M.



RECEIVED

MAR 30 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- 1784 Expiration Date 06/30/2026

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 Cippco, INC.

Location Address:	Mailing Address:
9323 Keystone Street	Same as location
Philadelphia, PA 19114	

Contact: Alexandra Thompson Title: Office Manager

Business Phone: 215-335-1401 Fax: 215-708-7399

E-mail: athompson@cippco.com

24 hr Emergency Contact Phone: Joe Fritsch 215-809-9066

**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: Philadelphia State: PA Date: 11/02/2001

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

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

Attachment Joseph Cipp

(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 Cippco Co  
 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 PA
- 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 NJ
- No transporter permits in other states

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

DOT# 1643493 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.

### 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 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 \_\_\_\_\_

### 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 \_\_\_\_\_

### 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 Joseph Cipolloni III Date 3/12/2025

Print Name Joseph Cipolloni III Title CEO

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



## SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

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

**4. Company Ownership Information:**

Joseph Cipolloni III– President  
Cippco, Inc: 9323 Keystone Street, Philadelphia, PA 19114



Ownership: 100%

**6 .Company Affiliates:**

Cippco, Contracting, Inc.  
9323 Keystone Street, Philadelphia, PA 19114

**8. Treatment, Storage & Disposal Facilities:**

Revolution Recovery – Philadelphia  
BFI – Republic – Philadelphia  
Richman – Philadelphia

**9. Other Transporter Permits:**

PA – WH1279 (paperwork attached)

NJ DEP – 20262 (paperwork attached)



My Workspace

User Profile

Certifications

Payments

Documents and Forms

Permit Folder

NJDEP Online FAQs

Version: 17.0.01

Currently logged in: Mercedes Cipolloni (CIPPCO)

209282

Server: Server\_2

CIPPCO CONTRACTING INC

Help | Logout

SERVICE

[Printer Friendly Version](#)**Please print a copy of the page for your records.**

## Service Information

**Service Type:** Solid/Hazardous Waste - Vehicle Registration  
Renewal - New

**Created On:** 02/19/2025

## Vehicle Registration Information

**NJDEP #:** 20262

**Vehicle Registration Holder:** CIPPCO CONTRACTING INC

**Program Interest #:** 209282

**Mailing Address Updated?** NO

**Street Address:** 9323 KEYSTONE ST

**City/State/Zip:** PHILADELPHIA/PA/19114

## Contacts

**Name:** Alexandra Thompson

**Title:**

**Contact Type:** Applicant

**Organization Name:**

**Organization Type:**

**E-Mail:** AThompson@cippco.com

**Phone:** (215) 335-1401 (Work Phone Number)

**Contact Address:** 9323 Keystone Street  
Philadelphia, Pennsylvania 19114

## Equipment Information

**Vehicles Renewed:** 8

**Vehicles Added:** 0

**Vehicles Modified:** 0

**# of Containers:** 30

Include?	Equipment Type	VIN	Licensed Plate No.	State/Country	Leased?	Lessor Name
<input checked="" type="checkbox"/>	Single Unit Vehicle	1NKZXPEX0JJ225787	AG15475	Pennsylvania	<input type="checkbox"/>	

Include?	Equipment Type	VIN	Licensed Plate No.	State/Country	Leased?	Lessor Name
<input checked="" type="checkbox"/>	Single Unit Vehicle	1NK2XPTX6GJ498258	AG42081	Pennsylvania	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Single Unit Vehicle	1NK1X4EX3RJ337801	AG45530	Pennsylvania	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Cab	1FDFF6KNXRDA19175	ZYH-0046	Pennsylvania	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Cab	1FDFF6KN7RDA19151	ZYH-0047	Pennsylvania	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Cab	1FDFF6KN9RDA19376	ZYH-0059	Pennsylvania	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Cab	1FDFF6KN7RDA19117	ZYH0008	Pennsylvania	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Cab	1FDFF6KN1RDA19114	ZYH0060	Pennsylvania	<input type="checkbox"/>	
<input type="checkbox"/>	Cab	1FDUF5GY4HEE58806	ZLN7599	Pennsylvania	<input type="checkbox"/>	
<input type="checkbox"/>	Cab	1FDUF5GY6HEE58807	ZLN7600	Pennsylvania	<input type="checkbox"/>	
<input type="checkbox"/>	Cab	1FDUF5GY8HEE58808	ZLN7601	Pennsylvania	<input type="checkbox"/>	
<input type="checkbox"/>	Cab	1FDUF5GYXHEE58809	ZLN7602	Pennsylvania	<input type="checkbox"/>	
<input type="checkbox"/>	Cab	1FDUF5GY6HEE58810	ZLN7603	Pennsylvania	<input type="checkbox"/>	

**Additional Registration Information**

U.S. Department of Transportataion (DOT) #: 1643493

**Overnight Parking Location:**

Address	Address Line 2	Address Line 3	City	State	Zip Code
9323 Keystone St.			Philadelphia	Pennsylvania	19114

**Pre-Certification**

- I certify that waste generated by my business is completely self-generated and I shall not receive nor transport waste from third parties. Important note and word of caution: Solid waste abandoned, discarded, or left behind by others and generated as a result of a home or business cleanout is **not** considered self-generated waste, and the transporter transporting this waste requires an A-901 license and Certificate of Public Convenience & Necessity.
- I certify I have the authority to operate as a transporter on the public highways and meet any applicable State or Federal Insurance requirements. In addition, pursuant to N.J.A.C. 7:26-3.2(i) I understand that I am responsible for the actions and omissions of any lessors and their vehicle operators utilized by my company.
- If I transport waste across state lines I certify that I maintain an MCS-90 or MCS-82 - otherwise I will maintain a Certificate of Insurance (listing my company as insured with the vehicle info or the phrase, "any vehicle").
- I certify that I have identified all address locations where our owned and leased equipment is parked overnight on the Additional Registration Information screen.
- Before submitting your request, take time to carefully review the certifications made above. Submission of false or inaccurate information is punishable by substantial fines, regardless of whether it is a deliberate act, pursuant to N.J.A.C. 7:26-5.6

**Certification**




I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Mercedes Cipolloni 02/25/2025  
**Individual With Direct Knowledge Date**

**Payment Information**

**Status:** Paid  
**Confirmation Number:** 90201-161662933  
**Payment Amount:** \$2,300.00  
**Payment Date:** 02/25/2025  
**Payment Method:** Pay via eCheck

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Department of Environmental Protection  
P. O. Box 402  
Trenton, NJ 08625-0402

Last Updated: June 24, 2004

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT  
**MUNICIPAL & RESIDUAL WASTE TRANSPORTER  
AUTHORIZATION APPLICATION**

**PART A - GENERAL APPLICATION INFORMATION**  
APPLICATION TYPE: Renewal

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**APPLICANT INFORMATION**

WH Number: WH1279 [REDACTED] US DOT #: 1643493  
Applicant Name: CIPPCO INC  
Legal Name: CIPPCO, INC.  
Business Street Address: 9323 KEYSTONE ST  
PHILADELPHIA, PA 19114-4013  
US  
Highest Ranking Corporate Official: JOSEPH J. CIPOLLONI  
Title: OWNER  
Telephone: 215-335-1401  
Extension:  
Fax: 215-708-7399  
Cell Phone:  
Primary Email Address: MCIPOLLONI@CIPPCO.COM  
Additional Email: ATHOMPSON@CIPPCO.COM  
JMICHAEL@CIPPCO.COM  
DONNA@CIPPCO.COM  
Applicant Type Code: Pennsylvania Corporation

**PART B - FLEET INFORMATION**

---

JOSEPH CIPOLLONI, 9323 KEYSTONE ST, PHILADELPHIA, PA 19114-4013

Vehicle Identification Number (VIN)	Gross Vehicle Weight	Vehicle Type	Amount
1FDFF6KN1RDA19114	19500	TK	100
1FDFF6KN7RDA19117	19500	TK	100
1FDFF6KN7RDA19151	19500	TK	100
1FDFF6KN9RDA19376	19500	TK	100
1FDFF6KNXRDA19175	19500	TK	100
1FDUF5GY6HEE58807	19500	TK	100
1NK1X4EX3RJ337801	73280	TK	100
1NKZXPEX0JJ225787	73280	TK	100
1NKZXPTX6GJ498258	73280	TK	100

**PART C - INSURANCE INFORMATION**

---

Insurance Company Name	Self Insured	Policy No.	Effective Date	Expire Date
Zurich American Insurance Co	N	BAP5084736-05	03/01/2025	03/01/2026

**PART E1 - COMPLIANCE HISTORY - PERMITS & LICENSE ACTIONS**

---

CIPPCO INC, PHILADELPHIA, PA

I have NOT had permits or licenses for environmental activities that have been Denied, Suspended or Revoked by any state or federal agency in the past five (5) years.

**PART E2 - COMPLIANCE HISTORY - ENFORCEMENT ACTIONS**

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT  
**MUNICIPAL & RESIDUAL WASTE TRANSPORTER  
AUTHORIZATION APPLICATION**

Page 2

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**CIPPCO INC, PHILADELPHIA, PA**

I have NOT had any environmental enforcement actions against me in the past five (5) years.

**PART E3 - COMPLIANCE HISTORY - ENVIRONMENTAL CRIMES**

---

**CIPPCO INC, PHILADELPHIA, PA**

I HAVE NOT BEEN CONVICTED of any environmental crimes in the past five (5) years.

**PART F - CERTIFICATION**

---

I consent to the Department's use of the mailing address provided herein, for service by first class mail of all requests and actions taken by the Department of Environmental Protection. I consent that mail service satisfies all requirements for service unless and until I notify the Department by certified mail of any change of mailing address.

I certify that the applicant is either the owner of these vehicles or currently has a valid contract with the owner of these vehicles to exclusively use the vehicles to transport municipal or residual waste.

I certify that these vehicles have current safety inspections with a certificate of inspection valid for the base registration state and/or federal requirements for interstate commerce.

I certify that these vehicles have insurance that meets the minimum state and/or federal requirements for financial responsibility for intrastate or interstate operation.

I certify under penalty of law that ALL information contained herein is TRUE and CORRECT and that I understand that any misstatement of fact is a misdemeanor of the third degree punishable by a fine up to \$2,500 and/or imprisonment up to 1 year (18 PA. C.S. Section 4904[b]).

**SUBMISSION INFORMATION**

---

**Submitted By User Name:** CIPOLLONIM (Mercedes Cipolloni)  
**Submitted By Email:** AP@cippco.com  
**Submitted Date:** 11/10/2025

## SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

- (1) Spill control and safety equipment carried in each vehicle:
  - 1). Reflectors and/or flares
  - 2). Fire extinguisher
  - 3). First aid kit
  - 4). Heavy-duty gloves, hard hat
  - 5). Flashlight
  - 6). All the above
- (2) All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.
- (3) The driver will perform the following pre-trip inspections: PLEASE SEE THE ATTACHED PDF
  - 1).
  - 2).
- (4) If there is an accident or other emergency which causes a portion of the load to be spilled, the driver, if uninjured, will contact the following designated company coordinator:  
Name: Matthew Genco Phone: 215-720-0011 Office:215-335-1401
- (5) The designated coordinator will contact the state and municipal authorities where the accident occurred. If the accident or spill has the potential to cause environmental damage, (either due to the nature of the waste, location of the accident, or additional factors such as leaking oil, gasoline, or hydraulic fluid) the person contacted will notify the state emergency response team, by calling one of the following numbers:  
Delaware: 911, (302) 739-9401 or 1-800-662-8802 (Other numbers may be listed as follows, however, the listed Delaware numbers must be included in the spill control plan.) Maryland: New Jersey:
- (6) The designated coordinator will contract for clean-up services with another company. (This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.)
- (7) This plan will be provided in all vehicles, along with the permit.



*Cippco, Inc.  
9323 Keystone Street  
Philadelphia, PA 19114  
215-335-1401*

## **Hazardous Substance Spill Response Plan**

### **Purpose**

This policy establishes how Cippco, Inc. will protect employees in the event of a hazardous substance spill or release. It will outline the emergency action plan as well as the roles employees are expected to take on. The policy is in place to keep Cippco, Inc.'s staff safe, but also to prevent environmental contamination and help comply with OSHA's Hazardous Waste Operations and Emergency Response standard.

After reading this policy, employees will understand the following:

- How to identify a hazardous substance spill or release
- What immediate actions he/she should take
- How his/her actions fit within the larger scope of Cippco, Inc.'s emergency response plan

This Hazardous Substance Spill Response Plan will be carried in all Cippco, Inc. vehicles and updated if the hazardous substance inventory changes.

### **Scope**

This policy applies to all Cippco, Inc. employees who have the possibility of witnessing or accidentally causing a hazardous substance spill or release.

### **How Hazardous Substance Will Be Identified**

Each employee and contractor performing work for Cippco, Inc. will understand how to identify a hazardous substance and the following:

- Use Cippco, Inc.'s labeling system and Safety Data Sheets (SDS) to recognize a hazardous substance emergency
- Assess the potential outcomes associated with the hazardous substance emergency
- Can realize the need for additional resources and make appropriate notifications

### **Training**

- Training shall be provided for employees who have the reasonable possibility of being present during a hazardous chemical release or spill.
- Additional training will be provided until each employee understands and is able to demonstrate the knowledge required for his or her position.
- Staff will receive additional, refresher training on these roles and responsibilities annually or as needed.

### **Spill Prevention/Driver Preventive Measures:**

The following are general requirements for any hazardous substances stored or used at this facility.

- Ensure all hazardous substances are properly labeled.
- Store, dispense, and/or use hazardous substances in a way that prevents releases.

### **Spill Containment/Driver Immediate Corrective Actions:**

The general spill response procedure is to stop the source of the spill, contain any spilled material and clean up the spill in a timely manner to prevent accidental injury or other damage. Small spills will be contained by Cippco, Inc. personnel if they are able to do so without risking injury. Spill kits are in each company vehicle.

### **EMERGENCY RESPONSE PLAN**

#### **Spill Kit: Spill Control Equipment in Truck**

- SDS Manual
- PPE; Respiratory Protection, Hard Hat, Gloves, Kevlar Sleeves, Eye Protection, Hearing Protection, Microporous/Tyvek Suits, and Work Boots
- Avoid spill if dangerous
- Truck Tarp
- Reflectors
- Fire Extinguisher
- First Aid Kit
- Tape
- Flashlight
- Stop the source: locate the source of spill. Turn off vehicle and plug and leaks
- Oil Dry
- Protect stormwater: Contain the spill with "Pigs" and absorbent pads
- Dispose responsibly: Contaminated materials should be disposed of safely. Never put hazardous waste (oily rags, absorbents, solvents, etc.) into normal waste collection bins.
- Restock: Uncontaminated supplies can be restocked. Replace all used clean-up materials with new unused products.

#### **Incidental Spills**

Do the following in the event a spill presents no immediate danger to the health and safety of employees or the environment:

- Inform those in the immediate area that a spill has occurred.
- If the chemical is flammable, eliminate any possible sources of ignition that may be in the area.
- If anyone has come into direct contact with the chemical, a trained first responder must be contacted to assess the individual.
- Determine what personal protective equipment is required to handle the hazardous material using the appropriate Safety Data Sheet (SDS).
- Follow the cleanup and control methods listed in the appropriate SDS.
- Make sure the area is completely decontaminated before work in that location resumes.
- Notify your immediate supervisor of the incident so he may report it to Safety Director, Matt Genco.

#### **Unknown Material Spills or Large spills**

Do the following if a spill is very large or if the exact makeup or effects of the spilled chemical are unknown:

- Immediately inform those in the area that a spill has occurred and that they must evacuate.
- If the chemical is flammable, or if you are unsure whether it is flammable, eliminate any possible sources of ignition that may be in the area.
- Leave any containers in the area to aid the first responder or Hazmat Team in identifying the spill.
- Notify Cippco, Inc. Safety Director, Matt Genco so she may send the appropriate assistance.
- Do not attempt to clean up the spill yourself; wait until the first responders arrive to assess the situation. -  
If the first responders determine that the severity of the spill goes beyond their containment abilities they will contact the Local Hazmat Team.

### **Spills Creating an Immediate Health Threat**

Do the following in the event a spill creates an immediate health threat to anyone in the area:

- Evacuate the area immediately.
- Once clear of the affected area, immediately notify Safety Director Matt Genco of the situation so she may send assistance.
- Wait in a safe area near until the Hazmat Team arrives so you can explain the details of the situation.

### **Decontamination Measures:**

Decontamination, or "Decon," is the process of removing or neutralizing contaminants that have accumulated on workers and equipment. It is critical to worker health and safety at hazardous waste sites. Decontamination protects all site personnel by reducing the transfer of harmful materials into clean areas and helps to prevent the mixing of incompatible chemicals. Decontamination also protects the community by preventing uncontrolled transportation of contaminants from the site

As part of its Hazardous Substance Spill Response Policy, Cippco, Inc. has developed the following Standard Operating Procedures to establish methods of disposing of clothing and if necessary equipment;

1. Minimize contact with waste and the potential contamination.
  - a. Do not walk through areas of obvious contamination.
  - b. Do not directly touch potentially hazardous substances.
2. Wear disposable protective outer garment; Microporous/Tyvek Suits.
3. Check PPE before use; PPE should be checked to ensure that it contains no cuts or punctures that could expose a worker's skin to wastes.
  - a. Skin injuries, such as cuts and scratches, may allow penetration into the body by chemicals or infectious agents that directly contact the worker's skin.
4. Proper Dress-Out Procedures; Following proper procedures for dressing prior to entering the restricted zone reduces the potential for contaminants to bypass the protective clothing, and escape decontamination.
  - a. In general, all fasteners should be used (i.e., zippers fully closed, all buttons closed, all snaps closed). Gloves and boots should be tucked under the sleeves and legs of outer clothing, and hoods (if not attached) should be worn outside the collar.
  - b. All junctures should be taped to prevent contaminants from getting inside the gloves, boots, and jackets (or suits, if a one-piece construction).
5. Protect vehicle, tools, and equipment if possible.
6. Thoroughly wash hands and face with soap and water.
7. If possible, use a chemical disinfected or neutralizer.
8. Wash clothes separately. Dispose of any clothing that has been destroyed or contaminated.
9. All Decon Workers must be decontaminated before they leave the Decon site. All Decon equipment must be properly decontaminated or disposed of properly. This will prevent the transfer of contaminants to the home and community and people in clean areas.
10. All contaminated items will be bagged into 4 mil poly and gooseneck tied and properly disposed. If you have any questions, contact Cippco, Inc. Safety Director Matt Genco.

### **Reporting: Company Internal/External Communications:**

Immediately call 911 in the event of injury, fire or potential fire, or spill of a hazardous substance that gives rise to an emergency. Under federal law, a report must be filed with the National Response Center (NRC) 800-424-8802, whenever the spill exceeds the established Superfund Reportable Quantity. Report all spills to Safety Director, Matt Genco, so she may contact the NRC if necessary.

**If a spill has occurred, contact the following persons immediately:**

Cippco Safety Director Matt Genco	215-720-0011
National Response Center	800-424-8802
Pennsylvania Response Center	717-651-2001
Delaware Response Center	1-800-662-8802 and 302-739-9401
New Jersey Response Center	609-963-6900

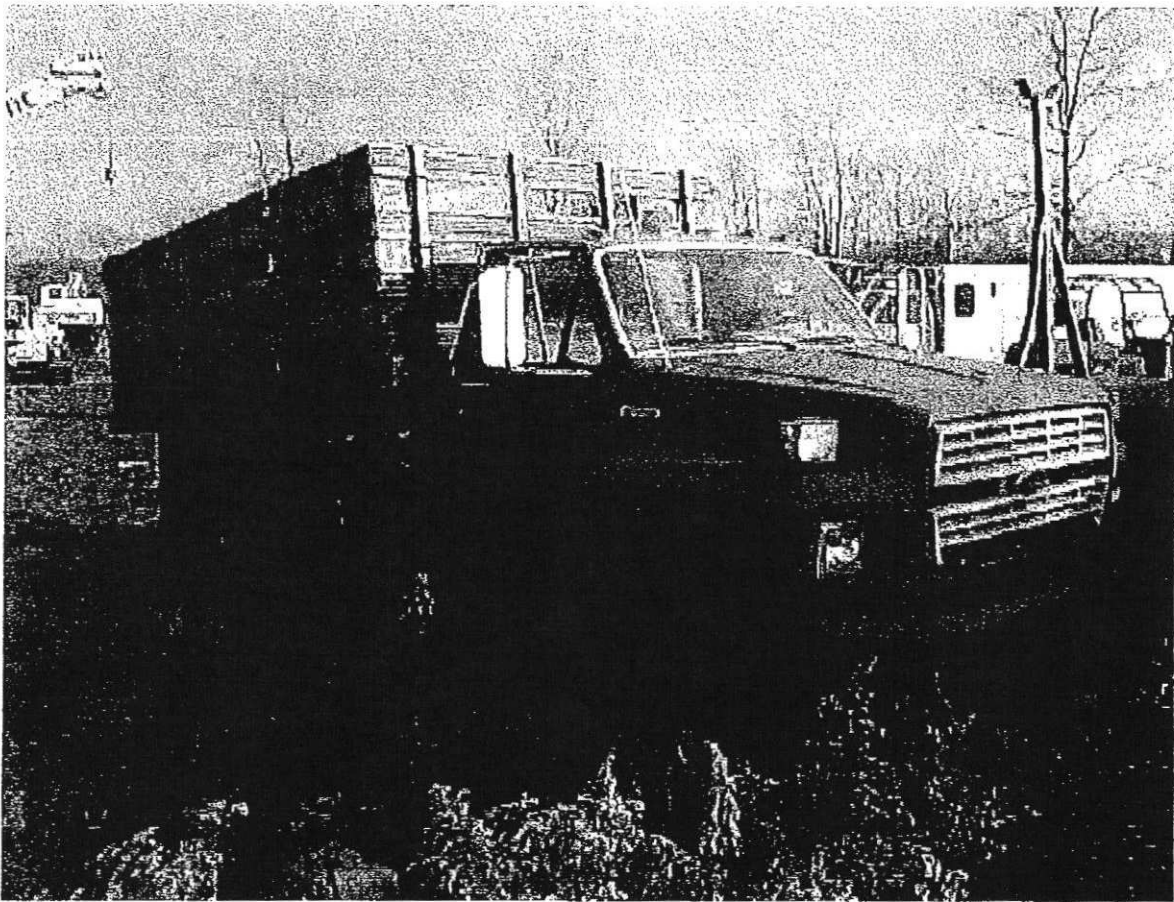
**Employee Knowledge**

Cippco, Inc. employees working with the reasonable possibility of being around a hazardous chemical release will be made aware of the emergency response plan and understand each of its parts, which include vital information on the following:

- Pre-emergency planning, including recognition and prevention
- Personnel roles, lines of authority, training and communication standards
- Safe distances and places of refuge in case of emergency
- Decontamination procedures
- Emergency medical treatment and first aid procedures
- Emergency alerting and response procedures

This Hazardous Substance Spill Recover Policy will be evaluated and revised whenever the type of PPE changes, vehicle changes, or based on any new information. In the event of a Hazardous Substance Spill, this Response Policy will be reviewed by Cippco, Inc. Safety Director Matt Genco.

# FLEET SAFETY COMPLIANCE PROGRAM



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Reference: Federal Motor Carrier - Safety Regulations  
Title 49 Code  
Federal Regulations  
Parts 40, 325, 383, 385, 386, 387, 390-397, 399

## **Section 1 - PERSONNEL**

### **A. Introduction:**

At CIPPCO CONTRACTING, INC. personnel selection is important to the overall operation and financial well being of our organization. This is particularly true with motor carrier operators in order to ensure the safe transportation of personnel, materials and property. Of special importance are the drivers who operate very expensive equipment for the purposes of transporting personnel and property.

Today's high costs of operation do not allow a great deal of margin for loss. An accident, even though there is insurance coverage, results in losses. The time that equipment and/or a driver is out of operation results in loss of transport capacity, if nothing else, but quite often it results in higher insurance premiums. Statistics show that qualified and dependable operators have fewer accidents and although it may not be measurable in dollars and cents, there is value generated by such operators in good customer relations and other intangibles.

### **B. Applicability:**

In general, the entire Federal Motor Carrier Safety Regulations (FMCSRs) apply to all operators of company vehicles here at CIPPCO CONTRACTING, INC. Some exemptions from portions of the regulations are provided, based on the size of the vehicle, the type of operation, or the commodity transported. The applicability of and exceptions from these regulations are detailed in Section 390.3.

#### **Section 390.3 Applicability of Regulations.**

(a) The rules in Subpart B of this Chapter are applicable to CIPPCO CONTRACTING, INC., its employees and commercial motor vehicles, which transport property or passengers in interstate commerce.

(b) The rules in Part 383, Commercial Driver's License Standards; Requirements and Penalties are applicable to every person who operates a commercial motor vehicle in interstate or intrastate commerce for CIPPCO CONTRACTING, INC.

8 Every driver and employee shall be instructed regarding, and shall comply with, all applicable regulations contained herein.

(d) All motor vehicle equipment and accessories required by this program shall be

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maintained in compliance with all applicable performance and design criteria as set forth herein.

#### C. Responsibilities:

In accordance with the FMCSRs, certain specific responsibilities are placed on both CIPPCO CONTRACTING, INC. and our drivers and we are responsible for both our compliance as well as driver compliance. The Safety Administrator is responsible for compliance with this program and the Federal Motor Carrier Safety Regulations.

#### D. Qualifications:

The purpose of this program is to promote safety of operations on the Nation's highways, not only for the general driving public but also for CIPPCO CONTRACTING, INC. and our drivers. The use of qualified drivers to operate motor vehicles engaged in the transportation of property and passengers is one of the most important steps toward this goal.

The regulations specify a driver to be qualified to drive a motor vehicle if he:

1. Is at least 21 years of age.
2. Can read and speak the English language sufficiently to converse with the general public, to understand highway traffic signs and signals in the English language, to respond to official inquiries, and to make entries on reports and records.
3. Can by reason of experience, training, or both, safely operate the type of motor vehicle he drives.
4. Can, by reason of experience, training, or both, determine whether the cargo he transports (including baggage in a passenger-carrying motor vehicle) has been properly located, distributed, and secured in or on the motor vehicle he drives;
5. Is familiar with methods and procedures for securing cargo in or on the motor vehicle he drives.
6. Is physically qualified to drive a motor vehicle in accordance with Section 391.41.
7. Has a currently valid commercial motor vehicle operator's license issued only from one State or jurisdiction.
8. Has prepared and furnished CIPPCO CONTRACTING, INC. a list of violations or the certificate as required by Section 391.27.
9. Is not disqualified to drive a motor vehicle under the rules in Section 391.15.
10. Has successfully completed a driver's road test and has been issued a certificate of driver's road test in accordance with Section 391.31, or has presented an operator's license or a certificate of road test which CIPPCO CONTRACTING, INC. accepts as equivalent to a road test in accordance with Section 391.33.
11. Has taken a written examination and has been issued a certificate of written examination in accordance with Section 391.35, or has presented a certificate of written

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examination which CIPPCO CONTRACTING, INC. accepts as equivalent to a written examination in accordance with Section 391.37; and  
 12. Has completed and furnished to CIPPCO CONTRACTING, INC. an application for employment in accordance with Section 391.21.

The Safety Administrator of CIPPCO CONTRACTING, INC. is responsible for administering the qualification program and is required to make certain that each driver qualifies under each of the twelve requirements, unless otherwise excepted.

## **Section 2 - Qualifying a Driver**

The specific procedures established herein are designed to assure compliance with the requirements in Parts 383 and 391.

### **A. Application for Employment**

The initial step of the qualification process will require the applicant to fill out the CIPPCO CONTRACTING, INC. Driver Application Addendum contained herein. Once completed and reviewed the process can continue to the next step.

### **B. Investigations and Inquiries**

CIPPCO CONTRACTING, INC. will check into both the applicant's driving record during the past three years and his employment record during the past three years. This will be accomplished by: directly contacting all previous employers indicated on the Application Addendum, having the driver complete a CIPPCO CONTRACTING, INC. Driver's Certification of Violations contained herein, and submitting an Inquiry to State Agency for Driver's Record contained herein. This process and associated documentation will be accomplished within 30 days of the date of employment.

Most states will accept requests for check of driving record on the attached form. However, due to the increasing use of computer storage of such data, some states may require that requests be submitted on their prescribed form. Regardless of an existing record or not, all records must be made a part of the driver's qualification file.

The investigation into an applicant's employment record must be made with each employer for whom the applicant worked during the period, and may be conducted by personal interviews, telephone interviews, letters, or any other means deemed appropriate. All contacts require written certification of each contact. Such certification must contain the past employer's name and address, the date of contact, and comments received with respect to the driver.

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Once the information is received pertaining to both the driving record and previous employment, the Safety Administrator will evaluate the information to determine the driver's qualification to operate company vehicles.

#### C. Road Test

All applicants will complete a Road Test conducted by the Safety Administrator to evaluate their level of training and/or experience. The road test will be conducted using the type of motor vehicle that the driver is to be assigned, and as a minimum will include the items indicated on the Record of Road Test form attached herein. This form will be signed off by the Safety Administrator and the original of this record will be retained in the driver's qualification file.

#### D. Written Examination

All applicants will be required to take a written examination to prove they are conversant with the appropriate regulations. The examination attached herein consists of 65 multiple choice questions covering the Federal Motor Carrier Safety Regulations and the Hazardous Materials Regulations. A score of 70% or better is required by all applicants. The test will be administered and graded by the Safety Administrator.

After completing the Written Examination the Certification of Written Examination form contained herein will be completed. The test and the original certificate will be retained in the driver's qualification file and the driver will be provided a copy of the certification.

#### E. Physical Examination

All drivers are required to be physically fit as attested to by a certified physician. All applicants will complete a thorough physical prior to operating CIPPCO CONTRACTING, INC. equipment. Certification of this physical is the **ONLY** certificate that is required to be carried by the driver at **all times** while operating a motor vehicle. The original of this certification will be kept in the driver's qualification file.

The purpose of this physical is to make certain that drivers have no physical or mental conditions existing which would/could seriously affect their ability to control or operate a motor vehicle safely under all conditions.

### **Section 3 - Operations**

#### A. Prohibitions

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Sections 392.3, 392.4 and 392.5, detail specific circumstances under which the driver is prohibited for operating a vehicle, and CIPPCO CONTRACTING, INC. is prohibited from requiring or permitting a driver to operate a company vehicle -

1. When the driver's ability or alertness is impaired or likely to be impaired due to fatigue, illness or other causes, or
2. A driver possesses, is under the influence of, or using a narcotic, amphetamine, or other dangerous substance, or
3. Consumes or be under the influence of an intoxicating beverage within 4 hours before going on duty, or be in possession of or consume an intoxicating beverage, or have any measured alcohol concentration or any detected presence of alcohol while on duty.

In the first instance, an exception is allowed "in case of grave emergency" where the occupants of the vehicle or other users of the highway would be placed in danger. Thus the driver is allowed to proceed to the nearest place of safety.

Finally, one important prohibition is specifically at CIPPCO CONTRACTING, INC. This pertains to scheduling in relation to speed limits. It says that no run between points shall be scheduled for completion with a given period of time UNLESS the period of time is sufficient to permit the trip to be complete without exceeding the speed limits in all jurisdictions through which the vehicle is operated.

The Scheduler of CIPPCO CONTRACTING, INC. is responsible for ensuring safe scheduling of trips and the documentation of questionable distances based on time and speed limits. DOT issued some guidelines on what would be acceptable mileages in relation to the speed limits. Under the 55 mile per hour speed limit, trips between 450 to 500 miles completed within 10 hours are questionable and will have to be documented upon request of a DOT official. Trips of over 500 miles are assumed by the DOT to be incapable of being completed without violation of the 55 mph limit. On trips of 450 miles or less, where the driver average 50 mph or more, CIPPCO CONTRACTING, INC. must be able to document that trips can be made within the speed limit.

In those instances where the total falls under a 65 mph speed limit, trips between 550 to 600 miles completed within 10 hours are questionable and CIPPCO CONTRACTING, INC. must be able to document that the operation was completed within the appropriate speed limits. Any trips of 600 miles or more are assumed to be incapable of being completed without violation.

One further point in this regard, although this prohibition is directed at CIPPCO CONTRACTING, INC., the driver is also prohibited from exceeding ALL speed limits.

## B. Equipment and Use

The driver is responsible for making certain specific checks and ensuring satisfactory working conditions of the following, prior to operating the vehicle:

1. Service brakes, including trailer brake connections
2. Parking (hand) brakes

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3. Steering mechanism

4. Lighting devices and reflectors
5. Tires
6. Horn
7. Windshield wipers
8. Rear visions mirror(s)
9. Coupling devices
10. Required emergency equipment including: fire extinguishers, warning devices - flags, flares, fuses, reflective triangles, etc.

C. Safe Loading

The driver of CIPPCO CONTRACTING, INC. vehicles is solely responsible for ensuring that loads are properly protected from shifting and/or falling. The driver will utilize available tiedown assemblies, cribbing, sideboards, stakes or a combination of these to secure all loads and protect them from any shifting/falling. CIPPCO CONTRACTING, INC. and representatives of same are responsible for ensuring that vehicles that are not properly loaded, distributed and secured are not allowed to be driven. This includes the carrying of property as well as the carrying of passengers within the vehicle.

D. Glasses and Hearing Aids

CIPPCO CONTRACTING, INC. requires that all drivers required to wear corrective lenses and/or hearing aids so as to be qualified to operate a motor vehicle subject to the FMCSR, are responsible for wearing corrective lenses and/or hearing aids at all times while driving.

E. Driving of Vehicles

Drivers are responsible for knowing the specific requirements for operating a motor vehicle for the following:

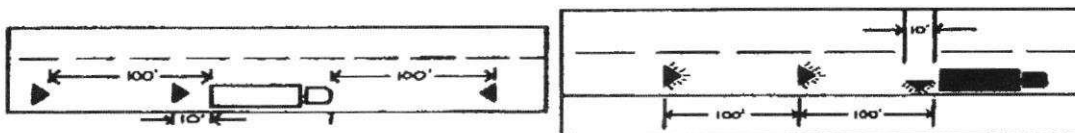
1. Stopping at railroad crossings
2. Slowing at railroad crossings
3. Stopping at draw bridges
4. Slowing at draw bridges
5. Driving in hazardous weather conditions
6. Proper use of turn signals
7. Use of seat belts

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**Note:** Seat belts are provided in all CIPPCO CONTRACTING, INC. vehicles and are required to be worn by all drivers and passengers when driving or riding in these vehicles.

### F. Stopped Vehicles

It shall be the responsibility of the driver to take adequate safety precautions when stopping a



company vehicle for a period of time.

This may range from the proper engagement of the parking brake to the placement of emergency warning devices for extended, "on the road" stops. For such extended stops, the basic requirements to be followed are the driver will:

1. Stop the vehicle as far out of the way of other traffic as is safely possible.
2. Turn on the vehicle's emergency warning flashers.
3. Within 10 minutes, and no longer, place emergency warning devices.

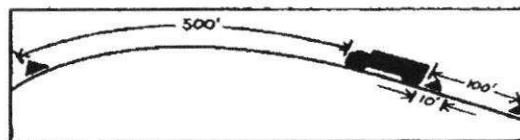
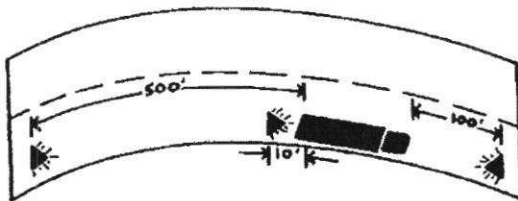
The following are examples of the placement requirements under a variety of circumstances:

#### ON A TWO-WAY HIGHWAY

#### ON A ONE-WAY OR DIVIDED HIGHWAY

#### ON A CURVE

#### ON A HILL



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Special rules apply to the use and placement of flame-producing emergency signals, and should be given special attention. The following are some of the rules:

1. Flame producing emergency signals will not be attached to any part of the vehicle.
2. Do not ignite flame producing emergency signals while near material that can burn or explode.
3. Flame producing emergency signals, will not be used when transporting dangerous cargo such as explosives, liquids that burn, compressed gases, etc.
4. Fuses will not be placed closer than 100 feet from the vehicle.

#### G. Prohibited Practices

There are a number of prohibitions of particular importance which warrant special mention. They are as follows:

1. The driver must not transport any person or permit any person to be transported on any vehicle without written authorization from CIPPCO CONTRACTING INC.;
2. The driver must not permit his/her assigned vehicle to be driven by any unauthorized person;
3. No motor vehicle is to be driven with the motive power disengaged from the drive wheels - no coasting down hills, etc.;
4. No bus is to be towed or pushed while passengers are aboard.
5. No flame-producing heater used in loading and unloading is to be in operation while the vehicle is moving.

The above are only a few of the prohibited practices contained within Subpart G of 49 CFR, and are not intended to imply that others are not important.

### Section 4 - EQUIPMENT

#### A. Introduction

This section enumerates the various parts and accessories which must be included on a properly equipped motor vehicle being operated by CIPPCO CONTRACTING, INC. The rules contained herein apply to all drivers of company vehicles which transport property and/or passengers in interstate commerce. A "commercial vehicle is classified as having a gross vehicle weight rating of 10,001 pounds or more or transporting hazardous materials in quantities requiring the vehicle to be placarded.

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## B. Responsibility

In general, any person whose duties include the equipment of CIPPCO CONTRACTING, INC. motor vehicles, whether procuring, installing, maintaining or otherwise is responsible for complying with this section of the program. It shall remain the responsibility of CIPPCO CONTRACTING, INC. to prohibit the operation or permitting the operation of any company vehicles that are not equipped in accordance with Section 393.1 of Title 49 CFR.

## C. Lighting Devices, Reflectors and Electrical Equipment

Lighting and Reflector requirements are to be verified by the persons charged with procuring company vehicles and shall be maintained by persons charged with maintenance and verified by the driver prior to operation. The requirements are defined in Subpart B of Part 393 of Title 49 CFR.

It shall be the responsibility of persons performing maintenance on company vehicles to ensure that wiring is grouped and protected against abrasion by coverings such as nonmetallic tape, braid, metal sheathing or tubing, and when passing through holes, the holes should be rolled or brushed with suitable material. In addition, it should be properly supported, and protected against overheating and becoming enmeshed in moving parts.

## D. Batteries

Unless storage batteries are located in the engine compartment, they must be covered by a fixed part of the vehicle or a removable cover or enclosure.

## E. Detachable Electrical Connections

All electrical wiring between towing and towed vehicles shall be contained in substantially constructed protective devices, and shall have suitable detachable connections so as to afford reasonable assurance against incorrect connection or accidental disconnection.

## F. Brakes

Prior to operation of the vehicle the driver will verify that the brakes and emergency brakes are operational. The vehicle will be placed out of service if either of the checks reveal defects with the brakes.

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#### G. Windshields

Windshields must be free of discoloration or other damage extending above the steering wheel, except for 2 inches at the top and 1 inch at each side. However, the following exceptions are allowed:

1. coloration for the reduction of glare in manufacture
2. any crack not over 1/4 inch wide, if not intersected by any other crack, and
3. any damage area which can be covered by a disc 3/4 inch in diameter, if not closer than three (3) inches to any other such damaged area.

In addition, there must not be any label, sticker, decal or other vision reducing material on any windshield or window unless required by law, in which case such material must not extend upward more than 4 1/2 inches from the bottom of the windshield.

#### H. Truck Windows

The requirements for trucks specify at least one window on each side, approximately 18" x 13" (200 square inches) with a minimum corner radius of 6 inches. However, no window is required if the cab has a folding door or doors or clear openings where the doors or windows are customarily located.

#### I. Fuel Systems

The system must not supply fuel by gravity or syphon feed directly to the carburetor or injectors. When there are two or more fuel tanks, the selection control valve must either be located where the driver can operate it from his seat while watching the road, or be located so the driver must stop the vehicle and leave his seat to operate it.

#### J. Coupling Devices and Towing Methods

When two or more vehicles are operated in combination, the coupling device must be such that when operating on a straight, level, smooth, paved surface, the path of the towed vehicle will not deviate more than 3 inches to either side of the path of the towing vehicle.

Tow-bars and means of attaching must be adequate for the weight being drawn, securely mounted, provide proper articulation without excessive slack, and have a locking device to prevent the accidental separation of the vehicles. In addition, there must be one or more safety devices to prevent the towed vehicle from breaking loose in the event of tow-bar failure.

#### K. Tires

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In general, the front tires on a truck must have a tread depth of 4/32 inch when measured on any point on a major axis, and all other tires must have a minimum tread depth of 2/32 inch. It is prohibited to operate any vehicle with fabric exposed on the tread or sidewall of any tire, and although regrooved tires are permitted, no regrooved tires having a load capacity of 8.25-20 8 ply-rating shall be used on the front wheels of any truck.

All tires must conform to the standards of FMVSS No. 119 and be marked on the sidewall of the tire.

#### L. Emergency Equipment

One properly filled fire extinguisher located so as to be readily accessible for use, are required for all trucks. The fire extinguisher must have an Underwriter's Laboratories rating of 5 B:C or there must be two with a rating of 4 B:C or more. In the case of vehicles used in the transportation of hazardous materials, the extinguisher rating must be 10 B:C or more.

Three (3) emergency bidirectional reflective triangles are required for all company trucks.

#### M. Protection Against Shifting or Falling Cargo

All trucks must be loaded and equipped to prevent the shifting or falling of cargo. This equipment includes: securement systems, blocking and bracing and front-end structures. Each of these areas are discussed below.

##### Securement Systems

The requirements for tiedown assemblies, which include chains, steel straps, cables and fiber webbing, as well as other securement devices and attachments, specify particularly the required strength. Special rules apply to load binders and hardware, attachments to the vehicle, such as hooks, welds and bolts, and to the anchorages for winches and other fastenings. Additionally, tiedown assemblies, associated connectors, and attachment devices must be adjustable so that the driver can tighten them during transit.

##### Blocking and Bracing

Cargo must be secured against both longitudinal and lateral movement. It is especially important that the load can not shift forward penetrating the front-end structure and thus crushing the driver's compartment. Such blocking and bracing in the longitudinal direction must be sufficient to withstand deceleration at the rate of 20 feet per second.

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### Front-End Structure

The driver must be protected from the forward movement or shifting of cargo. The structure is to be located between the cargo and the driver and be of sufficient height and width to prevent forward movement, strong enough to withstand the horizontal forward static load specified for the height of the structure as specified in Section 393.106(A), and be designed and constructed so as to be able to resist penetration by any item of cargo when the vehicle decelerates at a rate of 20 feet per second.

## Section 5 - VEHICLE INSPECTION

A safe trip begins with a thorough vehicle inspection. Described below is the walk around inspection procedure for all CIPPCO CONTRACTING, INC. vehicles. This inspection will be conducted by the driver at least daily prior to operation of the vehicle.

### Step 1 - Left Side of Cab

Note general condition of left front wheel

- Condition of wheel: Especially cracks, rim missing, rim bent, or broken studs, clamps or lugs
- Condition of tires: Properly inflated; valve stem not touching wheel, rim or brake drum; valve cap in place; no serious cuts, bulges, tread wear, or any signs of misalignment
- Wheel bearing and hub: No obvious leaking

Left Front Suspension

- Condition of springs, spring hangers, shackles
- U-bolts: No cracks, breaks or shifting
- Condition of shock absorber

Left Front Brake

- Condition of brake drum
- Condition of hoses

### Step 2 - Front of Cab

Condition of Front Axle

Condition of Steering System

- No loose worn, damaged, or missing parts

Condition of Windshield

- Check for damage and clean if dirty
- Check windshield wiper arms for proper spring tension

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- Check wiper blades for any damage, "dead" rubber and securement to arm
- Lights and Reflectors
- Cab parking, clearance and identification lights should be clean, operating and proper color
  - Reflectors should be clean and proper color
  - Right front turn signal light should be clean, operating, and proper color

**Step 3 - Right side of Cab**

Check all items as done on left side of cab area

**Step 4 - Right Saddle Tank Area**

Right fuel tank(s)

- Securely mounted, not damaged or leaking
- Fuel cross over line secure
- Tank(s) full of fuel
- Cap(s) on and secure

Condition of visible parts

- Rear of engine: Not leaking
- Transmission: Not leaking
- Drive shaft: Looks OK
- Exhaust System: Secure, not leaking, and not touching wires, fuel or air lines
- Frame and cross members: No bends, cracks or breaks
- Air lines and electrical wiring: Secured against snagging and chafing

**Step 5 - Right Side of Truck**

Dual Wheels

- Condition of wheels and rims: No cracks or bent rims, broken spacers, studs, clamps or lugs
- Condition of tires: Properly inflated; valve stems not touching wheels, rims or brake drum; valve caps in place; no serious cuts, bulges, tread wear, or any signs of misalignment; and no debris stuck between them.
- Tires: All same types; do not mix radial and bias types on the same axle
- Tires: Evenly matched in circumference
- Wheel bearing and hub: No obvious leaking

Tandem Axles

- Repeat wheel tire inspection as above

Suspension

- Condition of spring(s), spring hangers, shackles and U-bolts
- Condition of torque arms and bushings
- Condition of shock absorber(s)
- Axle alignment

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#### Brakes

- Condition of brake drum(s)
- Condition of hoses: Look for any chafing
- Check slack adjusters
- Check air chamber mounting
- Check springs brakes

#### Right Side of Bed

- Frame and cross members: Not bent, cracked, or otherwise damaged or missing
- Lights and Reflectors: Operating, clean, and proper color
- Body Parts: Not damaged or missing
- Proper Placarding
- Air and Electrical Lines: Properly secured to frame, not damaged or chafing
- Splash Guards: Present, not damaged, properly fastened, not dragging on ground or rubbing tires
- Bed of truck: Deck is level, clean, and free of holes

#### Spare Tire(s)

- Carrier or Rack: Not damaged
- Tire and/or wheel: securely mounted in the rack
- Tire and wheel condition: Adequate for a spare (proper size and properly inflated)

#### Cargo Securement

- Properly blocked, braced, tied, chained, etc.
- Side Gates: Free of damage; properly secured in stake pockets

#### **Step 6 - Rear of Truck**

##### Lights and Reflectors

- Rear clearance and identification lights: clean, operating, and proper color
- Reflectors: Clean and proper color
- Tail Lights: Clean, operating and proper color
- End Gate: Free of damage; properly secured in stake pockets
- Tailboard: up and properly secured

#### **Step 7 - Left Side of Truck**

Check all items as done on right side

#### **Step 8 - Inspect Inside the Cab**

##### Get in the cab

- Make sure the parking brake is on
- Put gearshift in neutral or park if automatic
- Start engine: Listen for unusual noises; Look at gauges
- Oil pressure: Should come up to normal seconds after engine is started

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- Ammeter and/or voltmeter: Should be in normal range
- Coolant temperature: Should begin gradual rise to normal operating range
- Engine Oil Temperature: Should begin gradual rise to normal operating range
- Warning Lights and Buzzers: Oil, coolant charging circuit lights should go out right away

**Step 9 - Check Controls, Mirrors, Windshield, and Emergency Equipment**

Check all the following for looseness, sticking, damage, or improper setting

- Steering Wheel
- Clutch
- Accelerator Pedal
- Brake Controls: Foot brake and parking brake; test parking brake stopping action
- Horn
- Windshield Wipers/Washer
- Lights: Headlights, dimmer switch, turn signal, 4-way flashers, and clearance, identification, and marker light switches
- Checks Mirrors and Windshield: Inspect for cracks, dirt, illegal stickers or other obstructions to seeing, clean and adjust as necessary

Check Emergency Equipment

- Check safety equipment: Spare electrical fuses, three red reflective triangles and properly rated and charged fire extinguisher

Check Optional Equipment (if applicable)

- Tire Chains
- Tire changing equipment
- List of emergency phone numbers
- Accident Reporting Kit

**Section 6 - ACCIDENTS**

The laws and regulations governing reporting of accidents by CIPPCO CONTRACTING, INC. and its employees are dual dimensioned, requiring reports to agencies at the state and local level.

The types of accidents that are reportable are one's which result in one or more of the following conditions:

1. A fatality, or
2. Injury to a person requiring immediate treatment away from the scene of the accident,  
or
3. Disabling damage to a vehicle requiring it to be towed from the scene.

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A fatality means any injury which results in the death of a person at the time of the accident or within 30 days of the accident. Disabling damage includes vehicles that could have been driven, but would have been further damaged if so driven. Excluded from disabling damage is:

- Damage which can be remedied temporarily at the scene without special tools or parts,
- Tires disablement without other damage (even if no spare is available),
- Headlamp or taillight damage,
- Damage to turn signals, horn, or windshield wipers which makes them inoperative.

The term "accident" does not include an occurrence which involves only boarding or alighting from a stationary vehicle, or which involves only the loading or unloading of a vehicle's cargo. Also not included is an occurrence involving the operation of a passenger car which is not transporting passengers or hazardous materials of a type or quantity which requires that the vehicle be marked or placarded.

All accidents will be reported to the Safety Administrator as soon as practical after the mishap. Additionally any unintentional releases of hazardous materials will be reported immediately or as soon as practical. This includes releases occurring during loading or unloading.

### **AN ACCIDENT REGISTER**

The Safety Administrator of CIPPCO CONTRACTING, INC. will maintain an accident register containing specific information for each accident. The information to be included for each accident is as follows:

1. Date of accident
2. City of town in which or most near where the accident occurred and the state in which the accident occurred.
3. Driver name
4. Number of injuries
5. Number of fatalities, and
6. Whether hazardous materials, other than fuel spilled from the fuel tanks of the vehicles involved in the accident, were released.

### **RECORD RETENTION**

The information must be retained for one year after the accident occurs. Copies of all accident reports required by the state or federal government or insurers must also be retained.

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## Section 7 - POST-ACCIDENT DRUG TESTING

The drug testing requirements ('391.113) require drivers to be tested after certain accidents. Drivers are required to provide a urine specimen to be tested for the use of controlled substances within 32 hours after an accident meeting the definition in '390.5, if said driver receives a citation for a moving violation arising from the accident. If the driver is seriously injured and cannot provide a specimen at the time of the accident, he shall provide the necessary authorization for obtaining hospital reports and other documents that would indicate there were any controlled substances in his system.

A driver will be disqualified for 1 year if the driver was involved in a fatal accident and either: 1) tests positive for controlled substance use, or 2) refuses to give a urine sample.

## ACCIDENT INVESTIGATIONS

The Federal Highway Administration may conduct an in-depth or special study of a particular accident. To assist the agency in the investigation or study, designated special agents of the Federal Highway Administration may make certain requests or inquiries to CIPPCO CONTRACTING, INC. CIPPCO CONTRACTING, INC. will give all reasonable assistance within such time as the request or inquiry may specify. All information pertaining to the accident shall be made available.

## HAZARDOUS MATERIALS INCIDENT REPORTING

**Not Applicable.**

## ACCIDENT RECORDS AND REPORTS

Whenever an accident results in injury or death to any person, or property damage of any kind, regardless of the amount, the driver of the motor vehicle must:

1. Stop immediately
2. Take precautions to prevent further accidents at the scene
3. Provide reasonable assistance to any injured persons (driver should not move a person if such movement would be likely to cause further injury *unless*, the person is in immediate danger of death).
4. Provide name, address, and the name and address of CIPPCO CONTRACTING, INC. state vehicle registration number and, if requested, operator's license.
5. Report all details of the accident to the Safety Administrator as soon as possible after the accident.

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Even in instances where the driver strikes a parked vehicle which is attended, Part 392 requires the driver to:

1. Stop immediately
2. Try and locate the owner or the custodian of the unattended vehicle
3. If the owner or person responsible for the vehicle cannot be located, the driver must place his name and address and the name and address of CIPPCO CONTRACTING, INC. in a conspicuous place in or on the vehicle.

All drivers of CIPPCO CONTRACTING, INC. vehicles are required to contact the Safety Administrator as soon as possible after an accident. Even if a driver hits an unattended vehicle, the driver is instructed to contact the Safety Administrator as soon as possible.

#### **DRIVER ACCIDENT KIT**

All CIPPCO CONTRACTING, INC. vehicles will have a Driver's Accident Kit in the glove box. This kit will include the following items:

- A reporting envelope
- A driver's report form for recording information at the scene
- Accident notification card
- Witness cards
- Exoneration cards

#### **Section 8 - MAINTENANCE**

All CIPPCO CONTRACTING, INC. vehicles will be inspected annually under the provisions of the Pennsylvania Department of Transportation guidelines. This inspection shall be performed by a licensed inspector and will be substantiated through the issuance of an inspection sticker and updated registration card. All other maintenance will be determined by the driver through the performance of daily pre-operational checks on all company vehicles. Necessary maintenance identified during these checks will be reported immediately to the Service Manager.

#### **Section 9 - CONTROLLED SUBSTANCES AND ALCOHOL USE AND TESTING**

##### **A. Introduction:**

All employees required to make routine deliveries of materials/equipment, are subject to D.O.T. drug and alcohol testing requirements. These include but are not limited to:

1. Mandatory Post-Accident Testing

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- A reportable accident is one resulting in (1) the death of human being; (2) bodily injury to a person who immediately receives medical treatment away from the scene of an accident; or, (3) damage to any property as previously described in the Accidents section of this Program (Section 6).
  - Whenever a driver is in any way or degree involved in a reportable accident involving a Company commercial vehicle, then that driver is required to call the Safety Administrator immediately or as soon as practical. The Safety Administrator will make arrangements to have the driver transported to a collection facility for testing. The Safety Administrator will obtain the signature of the employee to be tested on a consent form. If the employee refuses to sign the consent form, he/she will be informed that his/her test will be treated as positive for drugs and/or alcohol under this program.
2. Random Testing
- All drivers are subject to unannounced random drug screens of urine samples. The company will conduct random testing at the rates required by the D.O.T. regulations.
3. Medical Examination Drug Test
- During the next D.O.T. - required medical examination of the driver, a urine sample of the driver will be collected and will be tested, for among other things, drugs. This form of drug testing will not continue after the next medical examination.
4. Training
- Each covered driver will be required to attend a two-hour training session on the effects and consequences of drugs, as well as the causes and signs of drug use.
5. D.O.T. Disqualification Rules
- Any driver who has a positive test result will be immediately rendered "medically unqualified" to drive until such time as he tests negative and will also be subject to the disciplinary consequences up to and including termination. Any driver who has been involved in an accident and who has a positive drug test result under post-accident testing will be disqualified to drive by issuance of a letter of disqualification for a period of one (1) year. If the Company does bring back to work a driver who tests positive, the driver must continue in an outside after-care

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program at the driver's expense and be subject to follow-up testing for not longer than sixty (60) months following return to work.

6. Forms:

- All required forms are contained in the Driver Qualification File for each driver. These include: Pre-employment Urinalysis Notification, Alcohol and/or Controlled Substance Test Notification, Driver's Physical Examination Certificate, Controlled Substance Test Results and Notice of Disqualification.

**Section 10 - SUBSTANCE ABUSE POLICY**

**A. STATEMENT OF POLICY**

- CIPPCO CONTRACTING, INC. ("the Company") is committed to providing all of its employees with a safe and healthy substance free work environment. Our program consists of procedures necessary to prevent substance abuse in our Company.
- The Director of Administration will have the overall responsibility for coordinating this program for CIPPCO CONTRACTING, INC. and is available during regular business hours to discuss any part of this program.

**B. POLICY**

**1. ALCOHOL**

- The use, possession or distribution of alcohol on any property, facility or work site, or on any property, facility or work site of any client of the Company, or during any working hours, including lunch breaks, is prohibited. The use, possession or distribution of alcohol or containers of alcoholic beverages while in any company vehicle (which includes vehicles rented for Company purposes) is also prohibited. In addition, an employee under the influence of alcohol during any working hours is in violation of this policy.

**2. LEGAL DRUGS**

- Legal drugs are those drugs, both prescribed drugs and over-the-counter drugs, which have been legally obtained and are being used for the purpose for which they are prescribed or manufactured.

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- Employees who believe, or have been informed by their physician, that their use of any legal drug may present a safety risk or may interfere in any respect with their job performance, judgment or behavior, are required to report such drug use to the Safety Administrator . If an employee is using a prescription drug, the Company retains the discretion to determine if the employee can continue to work and/or what job duties the employee may perform safely and effectively.

### **3. ILLEGAL DRUGS**

- An illegal drug is any drug which is not legally obtainable, or which is legally obtainable but has not been obtained in a legal manner. This term includes prescription drugs not legally obtained and prescription drugs not prescribed for the employee.
- The use, sale, purchase, manufacture, transfer, distribution or possession of any illegal drug by an employee while on any Company property, facility or work site, or any property, facility or work site of a client of the Company, or during any working hours, is prohibited. The use, sale, purchase, manufacture, transfer, distribution or possession of an illegal drug while in any Company vehicle (which includes vehicles rented for Company purposes) is also prohibited. In addition, an employee with any illegal drug (s) in his/her system during any working hours is in violation of this policy.
- Any employee who appears unfit for work will be subject to a medical examination, including blood and/or urine tests, to determine the presence and amount of drugs, if any, in that employee's system.

### **4. OFF-THE-JOB SUBSTANCE ABUSE**

- Any employee who drives any Company vehicle (which includes vehicles rented for Company purposes) must report immediately to the Safety Administrator any arrest for driving (either on or off duty) under the influence of drug(s) or alcohol. Any such arrest may be considered by the Company to be a violation of this policy.

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### **C. ENFORCEMENT PROCEDURES**

The Company may conduct tests for drug and/or alcohol abuse, if warranted, as outlined below:

#### **1. REASONABLE SUSPICION**

- Where there is a reasonable suspicion that an employee is in violation of this policy, the Company has the right to require an employee to submit to a drug/alcohol screen of his/her urine and/or blood.
- "Reasonable suspicion" shall include, but is not limited to, unusual behavior on the job, sleeping on the job, repeated lateness, repeated unexcused absences, on-the-job errors and mistakes, certain off-the-job conduct such as arrests for possession, sale or use of drugs, or arrests for driving a vehicle while under the influence of drugs and/or alcohol.
- Pending the receipt of the results of a drug/alcohol screen the employee will be suspended without pay. If the results of the screen are negative, the employee will be reinstated.
- An employee will be required to sign the attached employee consent form, prior to a screen. If an employee refuses to sign the consent form or refuses to submit to the screen, he/she will be considered to have had a positive test result.
- Testing will be done according to the procedures set forth in Section F (Testing Procedure).
- A positive test result is a violation of this policy, and the employee will then be subject to the disciplinary actions outlined in Section D (Disciplinary Actions).

#### **2. POST-ACCIDENT TESTING**

- The Company has the right to require any employee involved in an accident resulting in death, or the need for immediate medical attention away from the jobsite, to submit to a drug and/or alcohol screen of his/her urine and/or blood.
- Any employee will be required to sign a consent form, in the form attached, prior to a screen. If an employee refuses to sign the consent form or refuses to submit to the screen, he/she will be considered to have had a positive test result.

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- Testing will be done according to the procedures set forth in Section E (Testing Procedure).
- A positive test result is a violation of this policy, and the employee will then be subject to the disciplinary actions.

### **3. RANDOM TESTING**

- Employees engaged in routine deliveries of materials/equipment will be subject to random screenings.
  - The random selection of employee's names will be the responsibility of an outside agency. The employee's names will then be reported to the owner.
  - The Company will treat any refusal by an employee to submit to a drug/alcohol screen as a positive result and violation of this policy.
- An employee who submits to a random screen will continue to work pending receipt of the results of the screen.
- A positive result from a random screening will subject the employee to disciplinary action up to and including termination.

### **D. DISCIPLINARY ACTIONS**

- Depending upon all circumstances, the Company reserves the right to discipline, up to and including immediate termination, any employee who has a positive test result and/or who otherwise violates any part of this policy.
- If an employee tests positive during screening, the following procedures will be enforced:
  - 1<sup>st</sup> Offense – Automatic Suspension for (one) 1 week
  - 2<sup>nd</sup> Offense – Immediate Termination
- Termination of employment for violation of this policy will be considered termination for cause and will result in loss of any accrued benefits not legally mandated. (i.e. accrued vacation time, holiday pay, etc.)
- The Company shall treat any refusal by an employee to submit to a drug/alcohol screen as a positive result and violation of this policy.

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## **E. TESTING PROCEDURES**

- Any employee being tested due to reasonable suspicion, or any employee or employees being tested due to an accident, will be driven to a licensed and certified collection facility by the Supervisor or the Supervisor's representative immediately following the incident. Upon completion of the collection process, the employee will either be driven home by the Supervisor (or the Supervisor's representative) or provided with public transportation to his/her home. Prior to transporting any employee to collection facility, the Safety Administrator will be advised of the incident. An incident report must be filed by the Supervisor within twenty-four (24) hours of the incident.
- Any collection procedures and chain of custody procedures will be done according to National Institute of Drug Administration (NIDA) standards.
- In an effort to ensure consistency and uniformity in the testing procedures, only laboratories that are certified by the National Institute of Drug Administration (NIDA) and maintain appropriate licenses from the Drug Enforcement Agency (DEA) will be used for all drug and alcohol tests for the Company.
- In addition to the presence of alcohol in the blood and/or urine sample, the laboratory will test for drugs in each urine sample, including the following:
  - Amphetamines
  - Barbiturates
  - Benzodiazepines
  - Cannabinoids (Marijuana)
  - Cocaine metabolite
  - Methadone
  - Methaqualone (Quaalude)
  - Opiates
  - Phencyclidine (PCP)
  - Propoxyphene (Darvon)
- No drug test results will be reported as positive unless an initial positive screen is confirmed by gas chromatography/mass spectrometry (GC/MS). If the laboratory believes that more information from the employee is needed in order to report a

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positive result, that information must be obtained through the Safety Administrator before any test result is reported.

- The test result will be deemed positive for any % of alcohol use. The Company has a Zero Tolerance policy.
- An employee will **not** be terminated for a positive test result under this Substance Abuse Program until the Company received the positive test in writing. Furthermore, if an employee requests an opportunity to explain to the laboratory why the positive results of a test are inaccurate, no employee will be disciplined or required to undergo rehabilitation until the employee has had an opportunity to provide such an explanation to the laboratory.
- All test results will be held strictly confidential by the Company. The laboratory will communicate a positive test result only to the Safety Administrator and/or the General Manager absence. The Safety Administrator, General Manager, the President, and the corporate counsel if necessary, will be the only person with access to the specific test results.

#### **F. CONFIDENTIALITY**

- The Company will keep confidential all information voluntarily submitted relating to drug/alcohol tests and to prescription drug use.
- The Company will keep confidential all information obtained through drug/alcohol tests require to comply with this policy.
- Information and results will be given to the Safety Administrator . When deemed necessary, this information may also be given to the General Manager , President and/or the corporate counsel.

Any questions regarding this Fleet Safety Compliance Program should be directed to the Safety Administrator of CIPPCO CONTRACTING, INC.

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**EMPLOYEE CONSENT FORM**

I, \_\_\_\_\_, hereby consent to the collection of my urine and/or blood for laboratory testing for controlled substances including drugs and alcohol. I further consent to the release of the test result(s) and other relevant medical information to the Safety Administrator, the President, and/or legal counsel for CIPPCO CONTRACTING, INC., all of who, I understand will keep confidential all information pertaining thereto. I understand that if I do not consent, the test results will be considered positive, and I will be subject to the consequences of having a positive test under the Substance Abuse Policy.

I have taken the following drugs, substances and/or prescription medication with the past ten (10) days:

<u>Name of Drug Substance or Prescription</u>	<u>Amount Taken</u>	<u>Date Taken</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**APPLICANT CONSENT FORM**

I, \_\_\_\_\_, understand that CIPPCO CONTRACTING, INC., as a part of its Substance Abuse Program requires pre-employment screening for drugs and alcohol as a condition of my employment. I hereby consent to the collection of my urine and/or blood for laboratory testing for controlled substances. I further consent to the release of test result(s) to the Safety Administrator, the President, and/or the legal counsel, for CIPPCO CONTRACTING, INC., all of whom I understand will keep confidential all information pertaining thereto.

I understand that if I do not consent, I will be denied employment with CIPPCO CONTRACTING, INC.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Make	Model	Year	Type	Serial #	License Plate #	State	Manufacturers GVWR	Ownership
Kenworth	T880	2016	ROLLOFF	1NKZXPTX6GJ498258	AG-42081	PA	73,280lbs	Cippco, Inc
Kenworth	T881	2024	ROLLOFF	1NK1X4EX3RJ337801	AG-45530	PA	73,280lbs	Cippco, Inc
Kenworth	T882	2018	ROLLOFF	1NKZXPEX0JJ225787	AG-15475	PA	73,280lbs	Cippco, Inc
Ford	F550	2024	Hooklift	1FDFF6KN7RDA19117	ZYH-0008	PA	22,000lbs	Cippco, Inc
Ford	F550	2024	Hooklift	1FDFF6KN7RDA19151	ZYH-0047	PA	22,000lbs	Cippco, Inc
Ford	F550	2024	Hooklift	1FDFF6KNXRDA19175	ZYH-0046	PA	22,000lbs	Cippco, Inc
Ford	F550	2024	Hooklift	1FDFF6KN9RDA19376	ZYH-0059	PA	22,000lbs	Cippco, Inc
Ford	F550	2024	Hooklift	1FDFF6KN1RDA19114	ZYH-0060	PA	22,000lbs	Cippco, Inc
Ford	F550	2017	Hooklift	1FDUF5GY6HEE58807	ZLN-7600	PA	19,500lbs	Cippco, Inc



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/24/2026

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> The Hilb Group of Maryland 620 Freedom Business Center Dr Suite 115 King of Prussia PA 19406	<b>CONTACT NAME:</b> Daisy Braun <b>PHONE (A/C, No, Ext):</b> (484) 655-1915 <b>E-MAIL ADDRESS:</b> dbraun@hilbgroup.com	<b>FAX (A/C, No):</b> (484) 684-7005
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Cippco, Inc. 9323 Keystone Street Philadelphia PA 19114-4013	<b>INSURER A:</b> Zurich American Insurance Co	<b>NAIC #</b> 16535
	<b>INSURER B:</b> Travelers Property Casualty Co of America	25674
	<b>INSURER C:</b> Palomar Excess and Surplus Ins	16754
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**

CERTIFICATE NUMBER: 26-27 Master COI

REVISION NUMBER:

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


INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			GLO 5084735-06	03/01/2026	03/01/2027	EACH OCCURRENCE	\$ 2,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
	<input checked="" type="checkbox"/> XCU & Contractual Liab Incl						MED EXP (Any one person)	\$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						GENERAL AGGREGATE	\$ 4,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	\$ 4,000,000
A	<b>AUTOMOBILE LIABILITY</b>			BAP 5084736-06	03/01/2026	03/01/2027	COMBINED SINGLE LIMIT (Ea accident)	\$ 2,000,000
	<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)	\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			CUP-1T86836A-26-NF	03/01/2026	03/01/2027	EACH OCCURRENCE	\$ 10,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$ 10,000,000
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000							\$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			WC 5084734-06	03/01/2026	03/01/2027	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	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
C	Pollution Liability			ENP0005395-06	03/01/2026	03/01/2027	Limit	\$5M occ/\$5M agg
							Deductible	\$25,000

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

Holder Continued: Control, Solid and Hazardous Waste Management Section

Evidence of Insurance

**CERTIFICATE HOLDER****CANCELLATION**

State of Delaware Dept of Natural Resources and Environmental 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 
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**ADDITIONAL REMARKS SCHEDULE**

AGENCY The Hilb Group of Maryland		NAMED INSURED Cippco, 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

Contractors Equipment Floater:  
 -Carrier: The Charter Oak Fire Insurance Company  
 -Term: 03/01/2026 to 03/01/2027  
 -Policy No: QT-660-8R423395-COF-26  
 -Leased /Rented Equipment Limit : \$100,000  
 -Deductible: \$1,000

Commercial Crime Policy:  
 -Carrier: Aspen Specialty Insurance Company  
 -Term: 10/1/2025 to 03/1/2027  
 -Policy No: CML-SOB7ORO-P0925  
 -Theft of Client Property Limit: \$2,000,000  
 -Deductible: \$10,000