

# RECEIPT

DATE

4/17/26

No.

932562

RECEIVED FROM

Manage Direct Systems Environmental

\$ 350.00

Three hundred fifty and  $\frac{00}{100}$ 

DOLLARS

 FOR RENT FOR

DE-HW-0645

|          |  |
|----------|--|
| ACCOUNT  |  |
| PAYMENT  |  |
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 CASH CHECK MONEY  
ORDER CREDIT  
CARD

FROM

1023

TO

BY

M.M.



RECEIVED

MAR 20 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

Language Preference: English

**HAZARDOUS WASTE TRANSPORTER PERMIT APPLICATION**

**Instructions:** You must complete this application in its entirety and attach all applicable documentation.

(**Note:** For applicants renewing an existing permit, this application requires the submission of updated information and documentation.)

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

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

**1. Type of Permit**

- New – Submit a check or money order, payable to the "State of Delaware," in the amount of \$350.00.
- Renewal: Permit # DE-HW- 0645 Expiration Date 3/31/26

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

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

**2. Release to Public:**

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

**3. Company Information:**

Company Name: Manage Direct Systems Environmental LLC dba Busch Environmental

| Location Address:                       | Mailing Address:                 |
|---|----------------------------------|
| 50 Suffolk Court, Downingtown, PA 19335 | POB 471, Douglassville, PA 19518 |
|   |                                  |
|   |                                  |

Contact Person: Theodore I Busch Jr Title: President

Business Phone: 610-741-7199 Fax: NONE

E-mail: ted@mdsenv.com 24 hr. Emergency Phone: 610-741-7199

EPA Identification Number: PAR 000 543 637

Employer's Federal Tax ID Number: 45-5435600

**4. Type of Company: (Check One)**

- Proprietorship
- Partnership
- Corporation – City, State and Date of Incorporation: \_\_\_\_\_
- Municipality
- Public Institution
- Other – Explanation: \_\_\_\_\_

**5. Parent Company Information:**

Parent Company Name: Manage Direct Systems Environmental LLC  
Parent Company Address: 50 Suffolk Court  
Downingtown, PA 19335  
Mail to: POB 471, Douglassville PA 19518

**6. Ownership/Stockholder Information:**

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

- List of owners, partners, or corporate officers: Attachment #1 - Ownership

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

- List of stockholders: Attachment \_\_\_\_\_
- Not Applicable

**7. Company Affiliations:**

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

- List of company affiliates: Attachment \_\_\_\_\_  
 No company affiliates

**8. Type of Hazardous Waste to be Transported:**

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

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

**9. Treatment, Storage, and Disposal Facilities:**

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

- List of treatment, storage, and disposal facilities: Attachment #2 - TSDF

**10. Other Transporter Permits:**

List all hazardous waste transporter permits held in other states.

- List of transporter permits: Attachment #3 & #4  
 No hazardous waste transporter permits held in other states

**11. Federal DOT and Motor Carrier Numbers:**

Indicate your Federal DOT number and Motor Carrier number:

DOT# 2442980 MC# 842872

**12. Proof of Insurance:**

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

- Certificate of insurance and MCS-90: Attachment #5

**13. Spill Control and Safety Equipment:**

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

List of spill control and safety equipment: Attachment #6 - SPCC

**14. Spill Control Plan:**

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

Spill Control Plan: Attachment #6 - SPCC

**15. Driver Training:**

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

Driver Training Program: Attachment #7 Training

**16. Controlled Substance Testing:**

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

Yes

No, Explain:

Owner - Operator

**17. Vehicle Identification Information:**

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

Vehicle Identification Information: Attachment #8 -Truck Info

**18. Environmental Record:**

List all criminal citations, arrests or convictions, civil or administrative violations, and civil or administrative enforcement actions, and the disposition(s) thereof for the violation or alleged violation of any environmental statute, regulation, permit, license, approval, or order, regardless of the state in which it occurred. Indicate whether it was a local, state, or federal violation or alleged violation. List all such items for the applicant, and if the applicant is other than an individual, for any employee while employed by the applicant or any partner, officer, or director of the applicant as an individual or for any other former business of such partner, officer, or director. For civil or administrative violations or alleged violations, list all such items for the last five (5) years from the date of application.

- Environmental Record: Attachment #9 - NOVs  
 Not Applicable – No violations within the specified time period

**19. Signature:**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments, and that upon personal knowledge and information, the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information.

*Theodore I Busch Jr*

\_\_\_\_\_  
Signature of legal owner or corporate officer

Theodore I Busch Jr

\_\_\_\_\_  
Printed Name

3/9/2026

\_\_\_\_\_  
Date

President

\_\_\_\_\_  
Title

## **ATTACHMENT #1 - Owners**

**List of all employees, job titles, and dates of employment**

Not Required

Theodore I Busch Jr. : Sole Proprietor - Owner-Operator

ATTACHMENT 2 - List of TSDFs

SECTION D – RECEIVING FACILITY INFORMATION

PERMIT NO. \_\_\_\_\_

Please use the waste types found in Section C and type or print legibly the disposal facility name, address, phone number and permit or registration number. For permit renewals or modifications, list only the facilities you want added or deleted. Attach additional pages if necessary.

| Waste Type   | Receiving Facility Name, Address and Phone Number   | Receiving Facility Permit/ Registration Number<br>Or<br>Beneficial Use Determination (BUD) No. | What should be done with this facility on the permit?                      |
|--|---|--|--|
| 1) Universal waste   | AERC Recycling Solutions (Clean Earth) 2591 Mitchell Avenue Allentown, PA 18103-6609 610-797-7608 | PAD 987 367 216  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste Oil<br>2) Petroleum Contaminated Soil<br>3) Hazardous waste<br>4) Industrial Commercial waste<br>5) Universal waste | Chemtron Corporation 35850 Schneider CT Avon, OH 44011 440-930-7815                               | OHD 066 060 609  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste Oil<br>2) Petroleum Contaminated Soil<br>3) Industrial Commercial waste<br>4) Universal waste                       | Reworld - Manheim 190 Shellyland Rd Manheim, PA 17545 717-653-8882                                | PAR 000 533 521  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste Oil<br>2) Petroleum Contaminated Soil<br>3) Hazardous waste<br>4) Industrial Commercial waste<br>5) Universal waste | Clean Harbors El Dorado, LLC 309 American Circle El Dorado, AR 71730 870-863-7173                 | ARD 069 748 192  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste Oil<br>2) Petroleum Contaminated Soil<br>3) Industrial Commercial Waste   | Curtis Bay Energy 3200 Hawkins Point Road Baltimore, MD 21226 713-660-3544                        | MDD 985 404 318  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste Oil<br>2) Petroleum Contaminated Soil<br>3) Hazardous waste<br>4) Industrial Commercial waste<br>5) Universal waste | Cycle Chem Inc. 217 S 1st St Elizabeth, NJ 07206 978-815-0609                                     | NJD 002 200 046  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |

**\*\*BE SURE ALL WASTE TYPES APPEAR WHEN APPLICATION IS PRINTED BEFORE SUBMISSION\*\***

## SECTION D – RECEIVING FACILITY INFORMATION

PERMIT NO. PA-626

Please use the waste types found in Section C and type or print legibly the disposal facility name, address, phone number and permit or registration number. For permit renewals or modifications, list only the facilities you want added or deleted. Attach additional pages if necessary.

| Waste Type   | Receiving Facility Name, Address and Phone Number   | Receiving Facility Permit/ Registration Number<br>Or<br>Beneficial Use Determination (BUD) No. | What should be done with this facility on the permit?                      |
|--|---|--|--|
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Cycle Chem Inc (PA) (ACV)<br>550 Industrial Drive<br>Lewisberry, PA 17339<br>717-938-4700                     | PAD 067 098 822  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Environmental Enterprises Inc<br>4650 Spring Grove Ave<br>Cincinnati, OH 45232<br>513-541-1823                | OHD 083 377 010  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Industrial commercial waste   | Environmental Recovery Corp of PA (ERC) (VLS)<br>1076 Old Manheim Pike<br>Lancaster, PA 17339<br>717-938-4700 | PAD 987 266 749  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Hazardous waste   | Giant Resource Recovery Sumter Inc<br>755 Industrial Blvd<br>Sumter, SC 29150-6705<br>803-773-1400            | SCD 036 275 626  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Industrial commercial waste   | JG Environmental LLC<br>776 Flory Mill RD<br>Lancaster, PA 17601<br>717-989-2222                              | PAR 000 561 514  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Hazardous waste<br>2) Universal waste   | LCSWMA Household Hazardous Waste Facility<br>1299 HARRISBURG PIKE<br>Lancaster, PA 17603<br>717-553-5864      | PAD 987 284 932  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |

\*\*BE SURE ALL WASTE TYPES APPEAR WHEN APPLICATION IS PRINTED BEFORE SUBMISSION\*\*

## SECTION D – RECEIVING FACILITY INFORMATION

PERMIT NO. \_\_\_\_\_

Please use the waste types found in Section C and type or print legibly the disposal facility name, address, phone number and permit or registration number. **For permit renewals or modifications, list only the facilities you want added or deleted.** Attach additional pages if necessary.

| Waste Type   | Receiving Facility Name, Address and Phone Number   | Receiving Facility Permit/ Registration Number<br>Or<br>Beneficial Use Determination (BUD) No. | What should be done with this facility on the permit?                      |
|--|---|--|--|
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Republic Environmental Systems (PA) Inc<br>(Clean Earth)<br>2869 Sandstone Drive<br>Hatfield, PA 19440-1912<br>215-822-8998 | PAD 085 690 592  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Ross Incineration Services Inc<br>36790 Giles Rd<br>Grafton, OH 44044<br>440-748-5847                                       | OHD 048 415 665  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Spring Grove Resource Recovery Inc<br>4879 Spring Grove<br>Cincinnati, OH 45232<br>513-681-6242                             | OHD 000 816 629  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | EQ Detroit (US Ecology)<br>1923 Frederick St<br>Detroit, MI 48211<br>313-347-1300   | MID 980 991 566  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Veolia ES Tech Solutions LLC<br>3100 Hedley St<br>Philadelphia, PA 19137-1934<br>540-266-4272                               | PAD 981 945 157  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Veolia ES York County SWRA<br>58 Flour Mill Rd<br>York, PA 17406-9720<br>717-845-1066                                       | PAR 000 564 666  | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Delete |

**\*\*BE SURE ALL WASTE TYPES APPEAR WHEN APPLICATION IS PRINTED BEFORE SUBMISSION\*\***

SECTION D – RECEIVING FACILITY INFORMATION

PERMIT NO. \_\_\_\_\_

Please use the waste types found in Section C and type or print legibly the disposal facility name, address, phone number and permit or registration number. **For permit renewals or modifications, list only the facilities you want added or deleted.** Attach additional pages if necessary.

| Waste Type   | Receiving Facility Name, Address and Phone Number                                      | Receiving Facility Permit/ Registration Number<br><br>Or<br><br>Beneficial Use Determination (BUD) No. | What should be done with this facility on the permit?                          |
|--|--|--|--|
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Reworld Myerstown LLC (WRS)<br>343 King St<br>Myerstown, PA 17067-2526<br>717-817-6428 | PAR 000 043 026  | <input checked="" type="checkbox"/> Add<br><br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | VEOLIA ES TECHNICAL SOLUTIONS LLC<br>1 Eden Lane<br>Flanders, NJ 07836<br>212-637-4162 | NJD 980 536 593  | <input checked="" type="checkbox"/> Add<br><br><input type="checkbox"/> Delete |
| 1) Waste oil<br>2) Petroleum contaminated soil<br>3) Hazardous waste<br>4) Industrial commercial waste<br>5) Universal waste | Tradebe Treatment and Recycling LLC<br>4343 Kennedy Ave.<br>East Chicago, IN 45312     | IND 000 646 943  | <input checked="" type="checkbox"/> Add<br><br><input type="checkbox"/> Delete |
|  |  |  | <input type="checkbox"/> Add<br><br><input type="checkbox"/> Delete            |
|  |  |  | <input type="checkbox"/> Add<br><br><input type="checkbox"/> Delete            |
|  |  |  | <input type="checkbox"/> Add<br><br><input type="checkbox"/> Delete            |

**\*\*BE SURE ALL WASTE TYPES APPEAR WHEN APPLICATION IS PRINTED BEFORE SUBMISSION\*\***

# ATTACHMENT 3 - PA Permit

31



## COMMONWEALTH OF PENNSYLVANIA Waste Transportation Safety Program Written Authorization

6297264891

Phone No. (610)-741-7199

VIN# 5PVNV8JV3K4S58489  
WH16297  
Expires Dec 2026

MANAGE DIRECT SYSTEMS ENVIRONMENTAL, LLC  
THEODORE BUSCH  
PO BOX 471  
DOUGLASSVILLE, PA 19518-0471

THIS WRITTEN AUTHORIZATION MUST BE KEPT WITH THE  
WASTE TRANSPORTATION VEHICLE AT ALL TIMES.  
If lost or damaged contact DEP immediately at 717-783-9258.  
A replacement fee is required.  
Duplication or Photocopies of this original documentation  
are not valid.

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

# ATTACHMENT 4 - OTHER PERMITS



New Jersey Department of Environmental Protection  
Vehicle Registration Unit  
9 Ewing Street, Mail Code 09-01, PO Box 420  
Trenton, NJ 08625-0420  
(609) 292-7081 LRU@dep.nj.gov

## LICENSED SOLID WASTE

*NJDEP Registered Transporter:*

**MANAGE DIRECT SYSTEMS  
ENVIRONMENTAL LLC  
PO BOX 471,  
DOUGLASSVILLE, PA 19518**

## NJDEP Transporter Vehicle Registration Card

Expiration Date: **06/30/2027**  
Decal Number: **SWL-27-024134**  
Vin ID#: **5PVNV8JV3K4S58489 PA**  
License Plate #: **AH53662**  
Vehicle Type: **Single Unit Vehicle**  
Vehicle leased?: **N**  
If Yes, lessor's name:

NJDEP Registered Transporter:  
**MANAGE DIRECT SYSTEMS ENVIRONMENTAL LLC**  
NJDEP #: **0036099**

**This card must be carried in the cab of the vehicle at all times.**  
**This registration card & decal are valid for use only by the listed registrant.**  
**Leased equipment can only be used to transport waste by the listed registrant.**



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

COMPLIANCE &  
PERMITTING

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

**DELAWARE SOLID WASTE TRANSPORTER PERMIT**  
**PERMIT NUMBER DE-SW-1826**

|                  |   |                                   |
|------------------|---|-----------------------------------|
| Effective Date:  | February 24, 2025                           | Renewal Due Date: Dec 31, 2025    |
| Expiration Date: | March 31, 2026                              |                                   |
| Permittee:       | Manage Direct Systems<br>Environmental, LLC | Street Address: 19 Broadmoor Blvd |
| Mailing Address: | PO Box 471<br>Douglassville, PA 19518-0471  | Douglassville, PA 19518-1900      |

This permit, issued pursuant to the provisions of 7 Del. C. Chapters 60, shall remain in effect for the term stated above, provided the permittee is familiar with, and complies with, all terms and conditions herein.

**Terms and Conditions:**

1. **This permit authorizes the permittee to transport in, out of, or through the State of Delaware the following waste types (as defined in the *Delaware Regulations Governing Solid Waste*): Commercial Waste; Special Waste - Non-Hazardous Industrial Waste; Special Waste - Non-Hazardous Petroleum-Hydrocarbon Contaminated Soils; Special Waste - Asbestos; .**
2. The permittee shall not transport the wastes identified in Condition 1 to facilities that are not authorized to receive, treat, store, transport, dispose, or recover said wastes.
3. Permittee shall submit, by April 1 of each calendar year, an annual report on a form provided by the Department. The report shall summarize for the preceding calendar year, actual amounts of solid waste by weight and type transported within, into, or out of the state and the destinations delivered.
4. Permits issued for a period greater than one year: Permittees holding multi-year permits have pre-paid the annual fees. The permit shall remain in effect until the expiration date identified above, unless the permit is cancelled by the permittee or revoked by the Secretary of the Department of Natural Resources and Environmental Control (DNREC).
5. A copy of this permit must be carried in each transport vehicle and presented upon request to any law enforcement officer or representative of the Delaware Department of Natural Resources and Environmental Control (DNREC).
6. Only those vehicles identified in the application for this permit shall be used to transport the wastes identified in Condition 1. All vehicles shall be operated in accordance with the *Delaware Regulations Governing Solid Waste (DRGSW)*, Section 7: Transporters.
7. The permittee's name shall be prominently displayed on both sides of the vehicle (motorized and containerized units) in figures at least 3 inches high and of a color that contrasts with the color of the vehicle.

State of Maryland  
DEPARTMENT OF THE ENVIRONMENT

July 16, 2025

EFFECTIVE DATE

June 30, 2026

EXPIRATION DATE

HWH 721

CHS HAULER NUMBER

**CONTROLLED HAZARDOUS SUBSTANCE  
(CHS) HAULER CERTIFICATE**

The Maryland Department of the Environment has issued this certification to


Manage Direct Systems Environmental LLC

to transport CHS in Maryland

This certificate is issued pursuant to the provisions of §7-252 of the Environment Article, Annotated Code of Maryland.



**Maryland**  
Department of  
the Environment

  
7/10/2025  
Stephanie Cobb-Williams, Deputy Director,  
Land and Materials Administration

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF MATERIALS MANAGEMENT

**PART 364**  
**WASTE TRANSPORTER PERMIT NO. PA-626**

Pursuant to Article 27, Titles 3 and 15 of the Environmental Conservation Law and 6 NYCRR 364

**PERMIT ISSUED TO:**

**MANAGE DIRECT SYSTEMS ENVIRONMENTAL, LLC**  
**19 BROADMOORE BOULEVARD**  
**DOUGLASSVILLE, PA 19518**

**PERMIT TYPE:**

- NEW  
 RENEWAL  
 MODIFICATION

CONTACT NAME: THEODORE I. BUSCH, JR.  
COUNTY: OUT OF STATE  
TELEPHONE NO: (610)741-7199

EFFECTIVE DATE: 08/08/2024  
EXPIRATION DATE: 08/07/2025  
US EPA ID NUMBER: PAR000543637

**AUTHORIZED WASTE TYPES BY DESTINATION FACILITY:**

The Permittee is Authorized to Transport the Following Waste Type(s) to the Destination Facility listed :

| Destination Facility                       | Location       | Waste Type(s)   | Note |
|--|----------------|---|------|
| AERC RECYCLING SOLUTIONS<br>(MITCHELL AVE) | ALLENTOWN , PA | Universal Waste   |      |
| CHEMTRON CORPORATION                       | AVON , OH      | Non-Hazardous Industrial/Commercial<br>Petroleum Contaminated Soil<br>Hazardous Industrial/Commercial<br>Waste Oil<br>Universal Waste |      |
| CHESAPEAKE WASTE SOLUTIONS, INC.           | MANHEIM , PA   | Non-Hazardous Industrial/Commercial<br>Petroleum Contaminated Soil<br>Waste Oil<br>Universal Waste                                    |      |
| CLEAN HARBORS EL DORADO, LLC               | EL DORADO , AR | Non-Hazardous Industrial/Commercial<br>Petroleum Contaminated Soil<br>Hazardous Industrial/Commercial<br>Waste Oil<br>Universal Waste |      |
| CURTIS BAY ENERGY GROUP                    | BALTIMORE , MD | Non-Hazardous Industrial/Commercial<br>Petroleum Contaminated Soil<br>Waste Oil   |      |
| CYCLE CHEM (NJ)                            | ELIZABETH , NJ | Non-Hazardous Industrial/Commercial<br>Petroleum Contaminated Soil  |      |

\*\*\* AUTHORIZED WASTE TYPES BY DESTINATION FACILITY LISTING (continued on next page) \*\*\*

NOTE: By acceptance of this permit, the permittee agrees that the permit is contingent upon strict compliance with the Environmental Conservation Law, all applicable regulations, and the General Conditions printed on the back of this page.

ADDRESS:

New York State Department of Environmental Conservation  
Division of Materials Management - Waste Transporter Program  
625 Broadway, 9th Floor  
Albany, NY 12233-7251

AUTHORIZED SIGNATURE: Patricia A. Leonardo  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Digitally signed by Patricia A. Leonardo  
Date: 2024.08.08 09:46:52 -0400

ATTACHMENT 5 - INSURANCE

FORM MCS-90

OMB No.: 2126-0008 Expiration: 06/30/2027

For FMCSA Use Date Received: \_\_\_\_\_

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

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



Endorsement for Motor Carrier Policies of Insurance for Public Liability under Sections 29 and 30 of the Motor Carrier Act of 1980

FORM MCS-90

Issued to Manage Direct Systems Environmental, LLC  
(Motor Carrier name)

of PA  
(Motor Carrier state or province)

                      
(USDOT Number)

Dated at 12:01 AM on this 05 day of November, 2025

Amending Policy Number: FBCAT0408208

Effective Date: 11/05/2025

Name of Insurance Company: ARCH INSURANCE COMPANY

Countersigned by: \_\_\_\_\_

(authorized company representative)

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

- This insurance is primary and the company shall not be liable for amounts in excess of \$1,000,000 for each accident.
- This insurance is excess and the company shall not be liable for amounts in excess \_\_\_\_\_ for each accident in excess of the underlying limit of \_\_\_\_\_ for each accident.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: 303-534-1171.

Cancellation of this endorsement may be effected by the company or the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under \_\_\_\_\_, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, DC).

Filings must be transmitted online via the Internet at \_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
01/21/26

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|  |                                   |                                    |
|--|-----------------------------------|------------------------------------|
| PRODUCER<br>C H Bonnett & Company, Inc.<br>Suite 7 West, 191 Presidential Boulevard<br>Bala Cynwyd, PA 19004 | CONTACT NAME                      |                                    |
|  | PHONE (A/C, No, Ext) 610-771-0900 | FAX (A/C, No) 610-771-0910         |
|  | E-MAIL ADDRESS                    |                                    |
|  | INSURER(S) AFFORDING COVERAGE     | NAIC#                              |
| INSURED<br>Manage Direct Systems Environmental LLC<br>19 Broadmoor Blvd<br>Douglassville, PA 19518           | INSURER A                         | Admiral Insurance Company<br>24856 |
|  | INSURER B                         | Arch Insurance Company<br>11150    |
|  | INSURER C                         |                                    |
|  | INSURER D                         |                                    |
|  | INSURER E                         |                                    |
|  | INSURER F                         |                                    |

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

| INSR LTR | TYPE OF INSURANCE   | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|---|-----------|----------|---------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br><input type="checkbox"/> OTHER | Y         | Y        | FEI-ECC-24274 | 11/05/2025              | 11/05/2026              | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>\$ |
| B        | AUTOMOBILE LIABILITY<br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS  | Y         | Y        | FBCAT040820   | 11/05/2025              | 11/05/2026              | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$   |
| A        | <input type="checkbox"/> UMBRELLA LIAB<br><input checked="" type="checkbox"/> EXCESS LIAB<br><input checked="" type="checkbox"/> RETENTION \$ 10,000<br><input checked="" type="checkbox"/> CLAIMS-MADE   |           |          | FEI-EXS-24275 | 11/05/2025              | 11/05/2026              | EACH OCCURRENCE \$ 5,000,000<br>AGGREGATE \$ 5,000,000<br>\$  |
|          | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N       | N/A      |               |                         |                         | <input type="checkbox"/> PER STATUTE<br><input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$<br>E.L. DISEASE - EA EMPLOYEE \$<br>E.L. DISEASE - POLICY LIMIT \$   |
| A        | Pollution Liab.   |           | Y        | FEI-ECC-24274 | 11/05/2025              | 11/05/2026              | \$1,000,000 / occurrence<br>\$2,000,000 / aggregate   |

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

Certificate Holder is included as Additional Insured as their interest may appear in operations performed by the Named Insured.

|  |   |
|--|---|
| CERTIFICATE HOLDER   | CANCELLATION  |
| State of Delaware<br>Department of Natural Resources<br>& Environmental Control<br>Division of Air & Waste Management<br>89 Kings Highway<br>Dover, Delaware 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.<br><br>AUTHORIZED REPRESENTATIVE |

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## ATTACHMENT 6

### 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). See Commercial Driver's Manual Section 2 - Driving Safety
  - 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: Theodore (Ted) Busch Phone: 610-741-7199
- (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.

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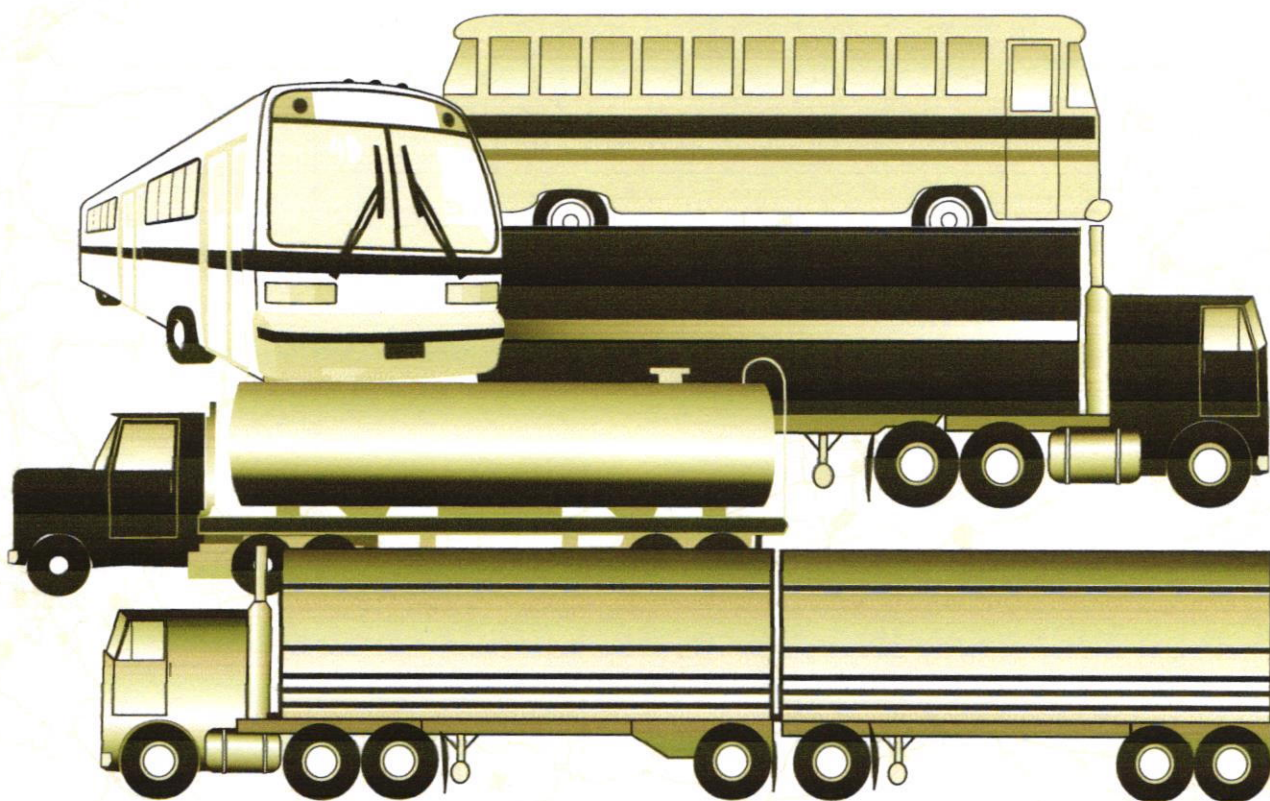
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Attach 7 - Driver Training

COMMONWEALTH OF PENNSYLVANIA

# Commercial Driver's Manual





## ATTACHMENT 9 - NOVs

### NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Materials Management  
625 Broadway, Albany, New York 12233-7250  
P: (518) 402-8651 | F: (518) 402-9024  
www.dec.ny.gov

June 27, 2024

MANAGE DIRECT SYSTEMS ENVIRONMENTAL, LLC  
Attn: Theodore I. Busch, Jr., President  
PO Box 471  
Douglassville, PA 19518

Dear Permittee:

RE: Issuance of a Notice of Violation

This letter serves to provide you with a Notice of Violation (NOV) setting forth the specific actions that constitute the violation(s) involving Article 27, Title 3 of the Environmental Conservation Law (ECL). This NOV is issued because you failed to comply with your active 6 New York Codes, Rules and Regulations (NYCRR) Part 364 Waste Transporter Permit, as required by 6 NYCRR Part 364.2 and Permit General Condition No. 4 and/or 5 listed on your permit.

Enclosed is a proposed Order on Consent (Order) that you may use to resolve the above identified violations. In order to resolve the violation, please complete the following within 30 days of the date of this letter:

- (i) Return the enclosed Order on Consent, signed by an authorized person in front of a notary public, to the New York State Department of Environmental Conservation, Office of General Counsel, 625 Broadway, Albany, NY 12233-1500, Attn: Christopher Horan;
- (i) Complete and submit the signed Order on Consent and Civil Penalty, including an original authorized signature, to the Department;
- (ii) Make payment in the amount of \$1,500.00 electronically or by check made payable to the order of the "New York State Department of Environmental Conservation" and mailed to the Department of Environmental Conservation, Division of Management and Budget, 625 Broadway, Albany, NY 12233-4900, Attn: Revenue Department.

Please note that this Order constitutes the Department's offer to settle the matter without litigation and offers a lower penalty than the Department will seek at a hearing. The Department's offer to settle will expire on within 30 days of the date of this letter. Should this offer be allowed to expire, the Department may commence formal enforcement action against you.





**BUREAU OF WASTE MANAGEMENT  
WASTE TRANSPORTATION & SAFETY COMPLIANCE**

11/4/2025 11:17:52 AM

**Client Name:**  
**Status:** All  
**Waste Hauler ID:** WH16297

| ENFORCEMENT ID | ENFORCEMENT TYPE    | EXECUTED DATE | PENALTY ASSESSED | CLIENT NAME               | WASTE HAULER ID | CLNT ID | VIOLATION DESC   |
|----------------|---------------------|---------------|------------------|---------------------------|-----------------|---------|--|
| 401813         | Notice of Violation | 2/16/2022     |                  | MANAGE DIRECT SYS ENV LLC |                 | 307809  | Transportation and management fees not paid                                      |
| 419056         | Notice of Violation | 8/18/2023     |                  | MANAGE DIRECT SYS ENV LLC |                 | 307809  | Hazardous waste transporter failed to submit quarterly report to the Department. |
| 435983         | Notice of Violation | 12/2/2024     |                  | MANAGE DIRECT SYS ENV LLC | WH16297         | 307809  | Waste transporter failed to submit a compliance history.                         |

**Davis, DaQuan (DNREC)**

---

**From:** ted mdsenv.com <ted@mdsenv.com>  
**Sent:** Tuesday, March 31, 2026 8:32 AM  
**To:** WHStransporters  
**Subject:** FW: Delaware Hazardous Waste Transporter Permit  
**Attachments:** IMG\_4899.HEIC

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Hello,

I only have one truck and one set of numbers. Please see the photo.

I HAVE NO AFFILIATES .... I am an OWNER-OPERATOR .... I am 100% Owner.

I only use the dba for marketing purposes.

MC942872  
ZUSDOT2442980

Check sent.

OK?

Ted

---

**From:** Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> on behalf of WHStransporters <WHStransporters@delaware.gov>  
**Date:** Tuesday, March 24, 2026 at 9:57 AM  
**To:** ted mdsenv.com <ted@mdsenv.com>  
**Subject:** Delaware Hazardous Waste Transporter Permit

Hello,

Thank you for submitting your application to obtain your Delaware hazardous waste transporter permit. Upon review, I have found that some information is missing or needs to be updated. Please address the items listed below:

- **Section 1-** Please mail a check for \$350.00
- **Section 7-** Do you have any affiliates?
- **Section 11-** Please provide the DOT number and Motor Carrier number for Manage Direct Systems Environmental, LLC DBA Busch Environmental. The numbers currently from Manage Direct Systems Environmental, LLC.

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

Thank you,

DaQuan Davis



## DaQuan L. Davis

Environmental Scientist

**Division of Waste and Hazardous  
Substances**

📞 302-739-9403

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

📍 89 Kings Hwy SW, Dover, DE 19901

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



DE HW0645  
DE SW1826  
NJDEP 36099  
NJDEP 50293  
RESIDUAL WASTE

Manage Direct Systems  
Environmental LLC  
DOUGLASSVILLE, PA  
610-741-7199

MC 842872  
GVW 33,000  
USDOT 2442980

MAHLE

545