

RECEIPT

DATE

6/15/76

No.

735807

RECEIVED FROM

Haul Away Dumpster Rentals

\$

350.00

Three hundred fifty and ⁰⁰/₁₀₀

DOLLARS

 FOR RENT FOR

DE-SW-2060

ACCOUNT

PAYMENT

BAL. DUE

 CASH CHECK MONEY
ORDER CREDIT
CARD

FROM

1007

TO

BY

M.M.



SOLID WASTE TRANSPORTER PERMIT APPLICATION

Language Preference:

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

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

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

1. **Type of Permit**

New - **SCRAP TIRES ONLY** Submit a check or money order, payable to the "State of Delaware," in the amount of \$75.00.

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

Renewal: Permit # DE-SW- _____ Expiration Date _____

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

SCRAP TIRES ONLY

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

ALL OTHERS

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

2. Release to Public

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

3. Company Information

Company Name Haul Away Dumpster Rentals LLC _____

Location Address:	Mailing Address:
4 Rivendell Ct Hockessin, DE 19707	PO Box 158 Hockessin, DE 19707

Contact: Eric Hendrixson Title: Sole Member _____

Business Phone: 610-636-9929 _____ Fax: _____ Solid Waste Transporter Application
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E-mail: Ejhendrixson@gmail.com

24 hr Emergency Contact Phone: 610-636-9929 _____

4. Company Ownership Information

(a). Please indicate the company type:

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

City: _____ State: _____ Date: _____

- Municipality
- Public institution

Limited Liability Corporation (LLC) State DE:

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 _____

(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.

4 Rivendell Ct. Hockessin, DE 19707

314 Baywest Blvd New Castle, DE 19720

- 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.)

N/A

Solid Waste Transporter Application
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- Attachment _____
 No affiliates

7. Type of Waste to be Transported

(a). Check all that apply. Refer to Delaware's *Regulations Governing Solid Waste* for definitions of waste categories.

X Residential waste

- Commercial waste (from non-manufacturing, non-processing businesses and offices)
 Industrial waste (from a manufacturing or industrial process)

X 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? **X Yes** No

(c). If you answered "YES" to question 7.b., above, does your company provide recycling services to those customers? Yes **X 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.

X Delaware Solid Waste Authority locations: (attachment) 8b

- 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 _____
 - Not applicable-No transporter permit required for these solid waste types in our home state.

Solid Waste Transporter Application
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- (b). List solid waste transporter permits held in other states.
 - Attachment _____
 - No transporter permits in other states

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

DOT# 4207712 MC# N/A

ATT 9c

- 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. of

Proof

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: ATT 10

	FOR-HIRE INTERSTATE	ALL OTHERS
Residential Waste	\$750,000.00 + MCS-90	\$300,000.00
Commercial Waste	\$750,000.00 + MCS-90	\$300,000.00
Industrial Waste	\$750,000.00 + MCS-90	\$300,000.00
Dry Waste	\$750,000.00 + MCS-90	\$300,000.00
Ash	\$750,000.00 + MCS-90	\$350,000.00
Infectious Waste	\$1,000,000.00 + MCS-90	\$750,000.00 + MCS-90
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MCS-90	\$300,000.00
Asbestos	\$1,000,000.00 + MCS-90 (For Hire & Private)	\$300,000.00
Scrap Tires Only	\$300,000.00	\$300,000.00

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11. Spill Control and Safety

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

Spill Control Plan: Attachment ATT SC1

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 ATT 12

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?

X Form W-2

- Form 1099-Misc
- Other

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15. Environmental Record

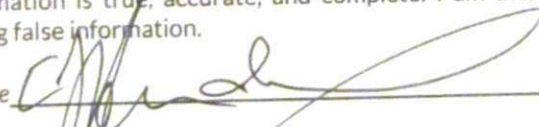
List all criminal citations, arrests, convictions, civil or administrative violations, and civil or administrative enforcement actions, and the disposition(s) thereof for the violation or alleged violation of any environmental statute, regulation, permit, license, approval, or order, regardless of the 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 _____

X 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  Date 06/10/2026 _____
Print Name Eric J. Hendrixson _____ Title Sole Member _____

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



State of Delaware Division of Revenue

— Temporary License —

Valid for 60 days from Receipt Date

License number: 2024702198

Name: HAUL AWAY DUMPSTER RENTALS LLC

Trade Name: HAUL AWAY DUMPSTER RENTALS

Address: 4 Rivendell Ct
Hockessin, DE 19707-2402

Activity	Record	Tax Year	Tax Period	Business Code	Amount
Renew Licenses	A-001480275	2026	12/31/2026	General Services	-\$75.00

Receipt Date	One Stop DLN
06/02/2026	26-08250.03

4.0.

CERTIFICATE OF FORMATION

State of Delaware
Secretary of State
Division of Corporations
Delivered 04:21 PM 02/12/2024
FILED 04:21 PM 02/12/2024
SR 10240465763 - FileNumber 3091361

OF

Haul Away Dumpster Rentals, LLC


This Certificate of Formation dated February 12, 2024 is being duly executed and filed by Donald J. Hart, Jr., as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. § 18-101, et. seq.).

1. The name of the limited liability company is:

Haul Away Dumpster Rentals, LLC

2. The address of the registered office in the State of Delaware is 4 Rivendell Court, Hockessin, New Castle County, DE 19707 and the registered agent in charge thereof is Eric Hendrixon.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation as of the date first above written.



Donald J. Hart, Jr.
Authorized Person

8.6. ATTACHMENT

Haul Away Dumpster Rentals, LLC

Haul Away Dumpster Rentals will be disposing of waste collected at the following DSWA sites:

Cherry Island Landfill
1706 East 12th St.
Wilmington, DE 19809



9.C

USDOT Number MC/MX Number Name
 Enter Value: 4207712
 Search

Company Snapshot
 HAUL AWAY DUMPSTER RENTALS LLC
 USDOT Number: 4207712

ID/Operations | [Inspections/Crashes in US](#) | [Inspections/Crashes in Canada](#) | [Safety Rating](#)

Carriers: If you would like to update the following ID/Operations information, please complete and submit form [MCS-150](#) which can be obtained [online](#) or from your State FMCSA office. If you would like to challenge the accuracy of your company's safety data, you can do so using FMCSA's [DataQa](#) system.

Other Information for this Carrier

- ▼ [SMS Results](#)
- ▼ [Licensing & Insurance](#)

USDOT Status

- **ACTIVE:** The entity's US DOT number is active
- **INACTIVE:** Inactive per 49 CFR 390.19(b)(4); biennial update of MCS-150 data not completed.
- **OUT-OF-SERVICE:** Carrier is under any type of out-of-service order and is not authorized to operate.

Operating Authority Status

- **AUTHORIZED FOR (Passenger, Property, HHG):** This will list the specific operating authorities the carrier (or broker) is allowed to operate
- **NOT AUTHORIZED:** The entity does not have any operating authority and/or is not authorized to engage in interstate, for-hire operations
- **OUT-OF-SERVICE:** Carrier is under any type of out-of-service order and is not authorized to operate.

Out of Service Date

Indicates the date the company was ordered Out of Service. If there are multiple Out of Service orders, the earliest date will be displayed.

Please note: If there are multiple Out-of-Service orders, the earliest date will be displayed.

For help on the explanation of individual data fields, click on any field name or for help of a general nature go to [SAFER General Help](#).

The information below reflects the content of the FMCSA management information systems as of 04/28/2024. Carrier VMT Outdated.

USDOT INFORMATION			
Entity Type:	CARRIER		
USDOT Status:	ACTIVE	Out of Service Date:	None
USDOT Number:	4207712	State Carrier ID Number:	
MCS-150 Form Date:	03/11/2024	MCS-150 Missions /Year:	
OPERATING AUTHORITY INFORMATION			
Operating Authority Status:	NOT AUTHORIZED		
	For Licensing and Insurance details click here .		
MC/MX/FF Number(s):			
COMPANY INFORMATION			
Legal Name:	HAUL AWAY DUMPSTER RENTALS LLC		
DBA Name:	HAUL AWAY DUMPSTER RENTALS		
Physical Address:	4 RIVENDELL CT HOCKESSIN, DE 19707-2402		
Phone:	(610) 636-9929		
Mailbox Address:	4 RIVENDELL CT HOCKESSIN, DE 19707-2402		
DUNS Number:	--		
Power Units:	1	Revs:	1
Operation Classification:			
<input checked="" type="checkbox"/> Auth. For Hire	Priv. Pass. (Non-business)	State Gov't	
<input type="checkbox"/> Exempt For Hire	Migrant	Local Gov't	
<input type="checkbox"/> Private (Property)	U.S. Mail	Indian	
<input type="checkbox"/> Priv. Pass. (Business)	Fed. Gov't	Nation	
Carrier Operation:			
<input type="checkbox"/> Interstate	<input type="checkbox"/> Intrastate Only (HM)	<input checked="" type="checkbox"/> Intrastate Only (Non-HM)	
Cargo Carried:			
<input type="checkbox"/> General Freight	<input type="checkbox"/> Liquids/Gases	<input type="checkbox"/> Chemicals	

ATTACHMENT S.C. 1

**SPILL CONTROL PLAN FOR
HAUL AWAY DUMPSTER RENTALS LLC**

*AT ALL TIMES ANY VEHICLES REGISTERED WITH THE ABOVE BUSINESS WILL HAVE STORED IN VEHICLE THE FOLLOWING SAFETY EQUIPMENT:

1. CUT RESISTANT GLOVES
2. CLASS 2 HI RES SAFETY VEST
3. SAFETY GLASSES
4. FIRE EXTINGUISHER
5. RECHARGEABLE LED FLASHLIGHT
6. ANSI APPROVED FIRST AID KIT
7. HARD HAT
8. TRAFFIC CONES

*ALL TRUCKS REGISTERED WITH HAUL AWAY DR WILL BE ENCLOSED BY A TARP SYSTEM TO KEEP LOAD SAFE AND SECURE DURING TRANSPORT

*DRIVERS MUST PERFORM THIS PRE-TRIP WALK-AROUND SAFETY INSPECTION OF THE VEHICLE:

1. WALK AROUND CHASSIS AND CHECK TIRES FOR TIRE PRESSURE AND DAMAGE
2. CHECK DASH DISPLAY FOR INDICATOR LIGHTS SIGNIFYING A PROBLEM
3. WALK AROUND ALL LIFT EQUIPMENT, CHECKING FOR CRACKED AND DAMAGED HOSES AND LOOSE OR DAMAGED BOLTS AND CLAMPS.
4. ENSURE THAT ALL SAFETY EQUIPMENT IS IN VEHICLE

***IN THE EVENT OF AN ACCIDENT, LEAK OR
SPILL THE FOLLOWING SUPERVISOR WILL BE
CONTACTED:**

ERIC HENDRIXSON 610-636-9929

***ADDITIONALLY THE SUPERVISOR WILL CONTACT
THE STATE AND MUNICIPAL AUTHORITIES ABOUT
WHERE THE ACCIDENT OCCURRED, IF THERE WAS
A SUBSEQUENT SPILL OR THREAT OF
ENVIRONMENTAL DAMAGE.**

CALL:

- 1. 911**
- 2. (302) 739-9401 OR**
- 3. (800) 662-8802**

*****THIS PLAN WILL CARRIED IN AND REVIEWED BY
ALL DRIVERS OF VEHICLES BEING DRIVEN TO
CONDUCT BUSINESS FOR HAUL AWAY DUMPSTER
RENTALS*****



Driver Qualification File

Pursuant to 49CFR391 - all commercial drivers must have a Driver Qualification file prior to getting on the road. Failure to comply with FMCSA Driver Qualification regulations can result in fines up to \$10,000 or loss of operational status.

DQ File Date 03/15/2024	[REDACTED]
Company Name HAUL AWAY DUMPSTER RENTALS LLC	Driver Name ERIC JACQUES HENDRIXSON
Company Address 4 RIVENDELL CT	City HOCKESSIN
State DE	Zip 19707
Mailing Address 4 RIVENDELL CT	Mailing City HOCKESSIN
Mailing State DE	Mailing Zip 19707
Email Address EJHENDRIXSON@GMAIL.COM	Phone 610 636 9929

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**HAUL AWAY DUMPSTER RENTALS
INITIAL AND ANNUAL DRIVER
QUALIFICATION ASSESSMENT**

1

12

DRIVER ASSESSMENT

IN ORDER TO BE EMPLOYED AS A DRIVER AT HAUL AWAY DUMPSTER RENTALS ALL DRIVERS MUST COMPLETE THE FOLLOWING DRIVER ASSESSMENT ANNUALLY:

1. DRIVER MUST READ THE OWNERS MANUAL AND HAVE KNOWLEDGE OF THE CHASSIS THEY ARE OPERATING.
2. DRIVER MUST DEMONSTRATE FULL COMPETENCY OPERATING THE VEHICLE
3. DRIVER MUST DEMONSTRATE FULL COMPETENCY OPERATING THE HOOKLIFT SYSTEM
4. DRIVER MUST DEMONSTRATE FULL COMPETENCY LOADING AND UNLOADING DUMPSTERS ONTO THE CHASSIS
5. DRIVER MUST DEMONSTRATE FULL COMPETENCY USING THE TARP SYSTEM TO COVER LOAD
6. THE DRIVER MUST DEMONSTRATE A FULL WALKAROUND AND INSPECTION PROCESS THAT WILL BE UTILIZED BEFORE EVERY USE

THE ABOVE WILL BE DEMONSTRATED WITH A SUPERVISOR PRESENT

12

REQUIREMENTS FOR DRIVERS

ALL HAUL AWAY DRIVERS WILL MEET THE FOLLOWING REQUIREMENTS TO BE AND REMAIN EMPLOYED:

- *Drivers license must be provided and valid during employment*
- *Driver must have clean driving record for 3 years*
(No violations)
- *Driver will be required to pass an initial and annual driver competency assessment* (attachment DA1)

DISQUALIFICATIONS

- *Any alcohol or drug related violation will result in immediate termination.*
- *Any hostile or violent interaction with another driver or customer will result in immediate termination*
- *Any violations related to use of handheld device, i.e. texting, will Result in immediate termination*

17
V.

Driver Application

Company Information

Email Address E.J.HENDRIXSON@GMAIL.COM	Phone 610 636 9929
Company Name HAUL AWAY DUMPSTER RENTALS LLC	
Company Address 4 RIVENDELL CT	City HOCKESSIN
State DE	Zip 19707

Driver Information

[REDACTED] XSON	Date of [REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	Driver City HOCKESSIN
[REDACTED]	Driver Zip 19707

Driver License

Issue State DE	[REDACTED]
License Class D	[REDACTED]
Issue Date 09/25/2019	[REDACTED]
Endorsements NONE	[REDACTED]

[REDACTED]

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Driver Application Continued

Instructions: Driver must complete the following information.

Adverse Licensing Actions

See attached MVR

Employment Record

Previous Employment

Employer Name: CARNEY VOLKSWAGEN (OWNER) FROM 1998-2019

Employer Phone: 610-361-8500

Employer Address: 1620 WILMINGTON PIKE WESTCHESTER, PA 19382

Employment Dates: FEB 1998 - APRIL 2019 (SOLD BUSINESS)

Previous Employment

Employer Name: _____

Employer Phone: _____

Employer Address: _____

Employment Dates: _____

Previous Employment

Employer Name: _____

Employer Phone: _____

Employer Address: _____

Employment Dates: _____



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This form is an example only. Requirements for the annual review of driving record can be found in 49 CFR 391.25.

ANNUAL REVIEW OF DRIVING RECORD

MOTOR CARRIER INSTRUCTIONS: Review the driver's motor vehicle record, annual Certification of Violations, and other information described in 49 CFR 391.25 of the Federal Motor Carrier Safety Regulations. Complete the information

HENDRIXSON, ERIC, J
DRIVER NAME: LAST, FIRST, MI

4/11/2024
DATE OF EMPLOYMENT

HOCKESSIN, DE
HOME TERMINAL (CITY AND STATE)

DRIVER'S LICENSE NUMBER

DE
STATE

I have reviewed the driving record of the above named driver in accordance with 49 CFR 391.25 and find that he/she (check one):

Meets minimum requirements for safe driving

Is disqualified to drive a motor vehicle pursuant to Section 391.15

Actions taken with driver:

DRIVER HAS HAD NO ACCIDENTS NOR VIOLATIONS
IN 10 YEARS.

HAUL AWAY DUMPSTER RENTALS LLC
MOTOR CARRIER NAME

4 RIVENDELL CT HOCKESSIN, DE 19707
MOTOR CARRIER ADDRESS

ERIC HENDRIXSON
REVIEWER PRINTED NAME

REVIEWER SIGNATURE

SOLE MEMBER
TITLE

6/10/2026
DATE OF REVIEW

Davis, DaQuan (DNREC)

From: Davis, DaQuan (DNREC)
Sent: Friday, June 12, 2026 1:27 PM
To: 'Helena Hendrixson'
Subject: RE: Haul Away Dumpster Rentals Permit App

Unfortunately, there is no online option.

Regards,
DaQuan Davis



DaQuan L. Davis

Environmental Scientist
Division of Waste and Hazardous Substances

☎ 302-739-9403
✉ daquan.davis@delaware.gov
📍 89 Kings Hwy SW, Dover, DE 19901
🌐 dnrec.delaware.gov



From: Helena Hendrixson <helenahendrixson@gmail.com>
Sent: Thursday, June 11, 2026 4:20 PM
To: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>
Subject: Re: Haul Away Dumpster Rentals Permit App

Thank you for your email!

Here is an updated form. We can definitely mail a check but we're wondering if there was a way to pay online? Thank you!

Regards,
Helena Hendrixson

On Thu, Jun 11, 2026 at 8:46 AM Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> wrote:

Hello,

Will you be mailing a \$350.00 check? Also please provide an updated Certificate of Insurance and add the **Department of Natural Resources and Environmental Control- 89 Kings HWY, Dover, DE 19901** address in the Certificate Holder section.

Thank you,

DaQuan Davis



DaQuan L. Davis

Environmental Scientist

Division of Waste and Hazardous Substances

📞 302-739-9403

✉️ daquan.davis@delaware.gov

📍 [89 Kings Hwy SW, Dover, DE 19901](https://www.delaware.gov/locations/89-Kings-Hwy-SW-Dover-DE-19901)

🌐 dnrec.delaware.gov



From: Helena Hendrixson <helenahendrixson@gmail.com>

Sent: Wednesday, June 10, 2026 10:00 PM

To: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>

Subject: Haul Away Dumpster Rentals Permit App

Thank you for your help, Daquan:

Please see the application attached. Have a nice rest of your week.

Regards,

Helena Hendrixson



HAULAWA-01

ERYAN

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/11/2026

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).

PRODUCER Seltzer Group Partners LLC 609 Route 61 South P.O. Box 219 Orwigsburg, PA 17961	CONTACT NAME: Emily Ryan PHONE (A/C, No, Ext): (888) 366-1000 415 FAX (A/C, No): (888) 512-3484 E-MAIL ADDRESS: eryan@seltzergrp.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED Haul Away Dumpster Rentals LLC 4 Rivendell Ct Hockessin, DE 19707-2402	INSURER A: Evanston Insurance Company NAIC # 35378	
	INSURER B: United Financial Casualty Co 11770	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

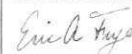
COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER			3AB005769	5/1/2026	5/1/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			980447909	4/26/2026	4/26/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / <input checked="" type="checkbox"/> N / A If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Commercial Auto additional coverage information:

Additional Coverages
Insurance coverage(s) Limits
Personal Injury Protection/Property Protection Ins \$25,000/\$50,000 (\$10,000 PPI included)
Uninsured/Underinsured Motorist \$300,000 Combined Single Limit
Description of Location/Vehicles/Special Items
SEE ATTACHED ACORD 101

CERTIFICATE HOLDER Department of Natural Resources and Environmental Control 89 Kings Hwy. Dover, DE 19901	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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ADDITIONAL REMARKS SCHEDULE

AGENCY Seltzer Group Partners LLC		NAMED INSURED Haul Away Dumpster Rentals LLC 4 Rivendell Ct Hockessin, DE 19707-2402 New Castle	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

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

Description of Operations/Locations/Vehicles:
 Scheduled autos only

2024 FORD 1FDNF7DC7RDF05584F750
 Comprehensive \$1,000 Ded
 Uninsured Motorist Property Damage \$10,000 w/\$250 Ded
 Collision \$1,000 Ded
 Rental Reimbursement \$150 Per Day (\$4,500 Max)
 Roadside Assistance Selected w/\$250 Ded

Davis, DaQuan (DNREC)

From: Davis, DaQuan (DNREC)
Sent: Friday, June 12, 2026 1:27 PM
To: 'Helena Hendrixson'
Subject: RE: Haul Away Dumpster Rentals Permit App

Unfortunately, there is no online option.

Regards,
DaQuan Davis



DaQuan L. Davis

Environmental Scientist
Division of Waste and Hazardous Substances

☎ 302-739-9403
✉ daquan.davis@delaware.gov
📍 89 Kings Hwy SW, Dover, DE 19901
🌐 dnrec.delaware.gov



From: Helena Hendrixson <helenahendrixson@gmail.com>
Sent: Thursday, June 11, 2026 4:20 PM
To: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>
Subject: Re: Haul Away Dumpster Rentals Permit App

Thank you for your email!

Here is an updated form. We can definitely mail a check but we're wondering if there was a way to pay online? Thank you!

Regards,
Helena Hendrixson

On Thu, Jun 11, 2026 at 8:46 AM Davis, DaQuan (DNREC) <daquan.davis@delaware.gov> wrote:

Hello,

Will you be mailing a \$350.00 check? Also please provide an updated Certificate of Insurance and add the **Department of Natural Resources and Environmental Control-89 Kings HWY, Dover, DE 19901** address in the Certificate Holder section.

Thank you,

DaQuan Davis



DaQuan L. Davis
Environmental Scientist

Division of Waste and Hazardous Substances

☎ 302-739-9403

@ daquan.davis@delaware.gov

📍 [89 Kings Hwy SW, Dover, DE 19901](https://www.delaware.gov/locations/89-Kings-Hwy-SW-Dover-DE-19901)

🌐 dnrec.delaware.gov



From: Helena Hendrixson <helenahendrixson@gmail.com>

Sent: Wednesday, June 10, 2026 10:00 PM

To: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>

Subject: Haul Away Dumpster Rentals Permit App

Thank you for your help, Daquan:

Please see the application attached. Have a nice rest of your week.

Regards,

Helena Hendrixson