

RECEIPT

DATE

7/7/26

No.

735847

RECEIVED FROM

Billy Warren & Son, LLC

\$

175.00

One hundred seventy five and 00/100

DOLLARS

☐ FOR RENT☒ FOR

DE-SW-1766

ACCOUNT	
PAYMENT	
BAL. DUE	

☐ CASH☒ CHECK☐ MONEY
ORDER☐ CREDIT
CARD

FROM

2519

TO

BY

M.M.



RECEIVED

JUL 07 2026

DNREC - WHS

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- 1766 Expiration Date 4-1-26

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.

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 Billy Warren & Son LLC

Location Address:	Mailing Address:
<u>7040 Hickman Rd</u>	<u>286 Burrsville Rd</u>
<u>Greenwood DE 19955</u>	<u>Greenwood DE 19955</u>

Contact: Tabitha Passwaters Title: office manager

Business Phone: 3023495167 Fax: 3023495189

E-mail: tabithap@billywarrens.com

24 hr Emergency Contact Phone: _____

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.

- ☐ Attachment _____
☐ No Delaware locations

7040 Hickman Rd
Greenwood DE 19950

6. Company Affiliates

List name, location and mailing addresses, nature of business relationship of all company Affiliates, which affiliates are engaged in the business of waste transport, treatment, storage, disposal, recovery or reclamation. (Affiliated companies are defined as those companies owned by the same owners, corporate officers, or parent company.)

- ☐ Attachment _____
☒ No affiliates

7. Type of Waste to be Transported

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

- ☐ Residential waste
☐ Commercial waste (from **non-manufacturing, non-processing** businesses and offices)
☐ Industrial waste (from a manufacturing or industrial process)
☐ Dry waste: ☐ construction/demolition debris
☐ trees/stumps
☐ other (must specify) _____
☐ Ash: ☐ municipal incinerator
☐ coal ash
☐ other (must specify) _____
☐ Infectious waste
☐ Non-hazardous petroleum-hydrocarbon contaminated soils
☐ Asbestos-containing waste
☒ Scrap Tires

(b). Does your company collect and transport residential (household) waste from single family homes, condominiums and apartment complexes in Delaware? ☐ Yes ☒ No

(c). If you answered "YES" to question 7.b., above, does your company provide recycling services to those customers? ☐ Yes ☐ No ☐ N/A

(d). If you offer recycling services, does your company collect and transport the recyclables separately from the waste generated by your customers? ☒ Yes ☐ No
No we only Recycle metal

(e). If you offer recycling services, are the recyclables ultimately taken to an incinerator (waste-to-energy) or landfill? ☐ Yes ☐ No

metal scrap goes to the mill

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 _____
- ☒ Not applicable-No transporter permit required for these solid waste types in our home state.
- (b). List solid waste transporter permits held in other states.
- ☐ Attachment _____
- ☒ No transporter permits in other states
- (c). Indicate your Federal DOT number and Motor Carrier number:
- DOT# 446269 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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/23/2026

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 Patriot Growth Insurance Services, LLC The Safegard Group 100 Granite Drive, Suite 205 Media PA 19063		CONTACT NAME: Courtney Wettlaufer PHONE (A/C, No, Ext): (610) 892-7688 E-MAIL ADDRESS: cwettlaufer@safegardgroup.com FAX (A/C, No): (610) 892-7695	
INSURED Billy Warren & Son, LLC 286 Burrsville Road Greenwood DE 19950		INSURER(S) AFFORDING COVERAGE INSURER A: Selective Way Insurance Company INSURER B: Selective Insurance Company of South Carolina INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 26301 19259	

COVERAGES**CERTIFICATE NUMBER:** 2025 Master**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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			S 2634883	12/15/2025	12/15/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY			S 2634883	12/15/2025	12/15/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$ 0			S 2634883	12/15/2025	12/15/2026	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
	☒ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N ☒ Y	N/A		WC 9146530	12/15/2025	12/15/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

Certificate issued as Evidence of Insurance.

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

Dover

DE 19901

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2015 ACORD CORPORATION. All rights reserved.

- (d). Certificate of Insurance must be attached and include minimum automobile liability coverage as follows:

	FOR-HIRE INTERSTATE	ALL OTHERS
Residential Waste	\$750,000.00 + MCS-90 ☐	\$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 ☐

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 ✓

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.

- 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);
- 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;
- Describe how drivers are instructed in the following:
 - Knowledge of proper handling procedures for the type of solid waste being transported.
 - Familiarity with the approved accidental discharge containment plan. (Spill Control Plan)
 - 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 [Signature] Date 6-24-26
Print Name Tabitha Rosswater Title Co owner

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

Attached is Cablonds

VEHICLE INFORMATION - See Item 13 of the application.

Use this form, or other format which provides the same information, to answer the VEHICLE IDENTIFICATION requirement of the application. List all vehicles, both motorized and container (if a license plate is required on the container) to be used to haul solid waste in the state of Delaware. In addition, list the vehicle owner, owner's address, and domicile address if different from the company address provided in the application.

[illegible]



unit # 4

State of Delaware Apportioned Cab Card

Keep this certificate in your vehicle

The vehicle described herein has been proportionally registered between
The State of Delaware and the Jurisdictions below

Expiration Date: 07/31/2026 Plate Number: CL113005 VIN: 1NKDXBTX73J704579

Account #	Fleet	Supplement	Reg Date	Color/Color	Unit #	Fuel	Year	Make
343	2	1	05/19/2026	WHI/	4	D	2003	KW

Unladen Weight	Manufacturer's Gross Vehicle Weight Rating	Power Unit Gross Vehicle Weight	Combined Gross Gross Vehicle Weight	TYPE	AXLES
36,000	80,000	73,280	73,280	TK	4

BILLY WARREN & SON LLC

Registrant	Carrier Responsible for Safety	CRFS USDOT
BILLY WARREN & SON LLC 7040 HICKMAN ROAD GREENWOOD, DE 19950	BILLY WARREN & SON LLC 286 BURRSVILLE ROAD GREENWOOD, DE 19950	446269

AB 33239k	FL 73280	MB 33239k	ND 73280	OK 73280	TN 73280	** ****
AL 73280	GA 73280	MD 70000	NE 73280	ON 33239k	TX 73280	** ****
AR 73280	IA 73280	ME 73280	NH 73280	OR 73280	UT 73280	** ****
AZ 73280	ID 73280	MI 73280	NJ 73280	PA 73280	VA 73280	** ****
BC 33239k	IL 73280	MN 73280	NL 33239k	PE 33239k	VT 73280	** ****
CA 73280	IN 73280	MO 73280	NM 73280	QC 6+AXL	WA 73280	** ****
CO 73280	KS 73280	MS 73280	NS 33239k	E	WI 73280	** ****
CT 73280	KY 73280	MT 73280	NV 73280	RI 73280	WV 73280	** ****
DC 73280	LA 73280	NB 33239k	NY 73280	SC 73280	WY 73280	** ****
DE 73280	MA 73280	NC 73280	OH 73280	SD 73280	** ****	** ****
				SK 33239k		

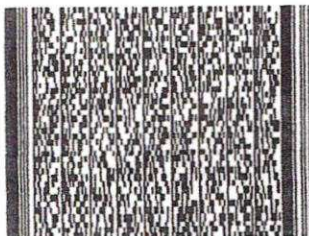
1. This is neither a driver's license nor a certificate of title to a motor vehicle
2. Always keep this registration card with the vehicle it describes
3. Your insurance ID card must be with the vehicle when it is being operated
4. A new owner may not drive under this registration

Owners Signature

BY

****WARNING****

IRP registration is NOT transferable to a new owner. Please contact our office at 302-744-2702 if you have any questions.



J 31 EXPIRES
U L 26
CL113005



Unit 4

State of Delaware Apportioned Cab Card
Keep this certificate in your vehicle

The vehicle described herein has been proportionally registered between
The State of Delaware and the Jurisdictions below

Expiration Date: 07/31/2026 Plate Number: CL125274 VIN: 5KKMBWDVXTLWL2493

Account #	Fleet	Supplement	Reg Date	Color/Color	Unit #	Fuel	Year	Make
343	2	1	05/19/2026	WHI/	6	D	2026	WSTR
Unladen Weight	Manufacturer's Gross Vehicle Weight Rating		Power Unit Gross Vehicle Weight	Combined Gross Gross Vehicle Weight		TYPE	AXLES	
31,011	79,220		73,280	73,280		TK	4	

BILLY WARREN & SON LLC

Registrant	Carrier Responsible for Safety	CRFS USDOT
BILLY WARREN & SON LLC 7040 HICKMAN ROAD GREENWOOD, DE 19950	BILLY WARREN & SON LLC 286 BURRSVILLE ROAD GREENWOOD, DE 19950	446269

AB 33239k	FL 73280	MB 33239k	ND 73280	OK 73280	TN 73280	** ****
AL 73280	GA 73280	MD 70000	NE 73280	ON 33239k	TX 73280	** ****
AR 73280	IA 73280	ME 73280	NH 73280	OR 73280	UT 73280	** ****
AZ 73280	ID 73280	MI 73280	NJ 73280	PA 73280	VA 73280	** ****
BC 33239k	IL 73280	MN 73280	NL 33239k	PE 33239k	VT 73280	** ****
CA 73280	IN 73280	MO 73280	NM 73280	QC 6+AXL	WA 73280	** ****
CO 73280	KS 73280	MS 73280	NS 33239k	E	WI 73280	** ****
CT 73280	KY 73280	MT 73280	NV 73280	RI 73280	WV 73280	** ****
DC 73280	LA 73280	NB 33239k	NY 73280	SC 73280	WY 73280	** ****
DE 73280	MA 73280	NC 73280	OH 73280	SD 73280	** ****	** ****
				SK 33239k		

1. This is neither a driver's license nor a certificate of title to a motor vehicle
2. Always keep this registration card with the vehicle it describes
3. Your insurance ID card must be with the vehicle when it is being operated
4. A new owner may not drive under this registration

Owners Signature

BY

****WARNING****

IRP registration is NOT transferable to a new owner. Please contact our office at 302-744-2702 if you have any questions.



J 31 EXPIRES
U L 26
CL125274



Unit # 7

State of Delaware Apportioned Cab Card
Keep this certificate in your vehicle

The vehicle described herein has been proportionally registered between
The State of Delaware and the Jurisdictions below

Expiration Date: 07/31/2026 Plate Number: CL118277 VIN: 1NKDLU0X53J708206

Account #	Fleet	Supplement	Reg Date	Color/Color	Unit #	Fuel	Year	Make
343	2	1	05/19/2026	WHI/	7	D	2003	KW

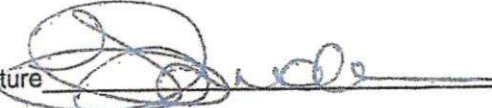
Unladen Weight	Manufacturer's Gross Vehicle Weight Rating	Power Unit Gross Vehicle Weight	Combined Gross Gross Vehicle Weight	TYPE	AXLES
28,907	76,000	73,280	73,280	TK	4

BILLY WARREN & SON LLC

Registrant	Carrier Responsible for Safety	CRFS USDOT
BILLY WARREN & SON LLC 7040 HICKMAN ROAD GREENWOOD, DE 19950	BILLY WARREN & SON LLC 286 BURRSVILLE ROAD GREENWOOD, DE 19950	446269

AB 33239k	FL 73280	MB 33239k	ND 73280	OK 73280	TN 73280	** ****
AL 73280	GA 73280	MD 70000	NE 73280	ON 33239k	TX 73280	** ****
AR 73280	IA 73280	ME 73280	NH 73280	OR 73280	UT 73280	** ****
AZ 73280	ID 73280	MI 73280	NJ 73280	PA 73280	VA 73280	** ****
BC 33239k	IL 73280	MN 73280	NL 33239k	PE 33239k	VT 73280	** ****
CA 73280	IN 73280	MO 73280	NM 73280	QC 6+AXL	WA 73280	** ****
CO 73280	KS 73280	MS 73280	NS 33239k	E	WI 73280	** ****
CT 73280	KY 73280	MT 73280	NV 73280	RI 73280	WV 73280	** ****
DC 73280	LA 73280	NB 33239k	NY 73280	SC 73280	WY 73280	** ****
DE 73280	MA 73280	NC 73280	OH 73280	SD 73280	** ****	** ****
				SK 33239k		

1. This is neither a driver's license nor a certificate of title to a motor vehicle
2. Always keep this registration card with the vehicle it describes
3. Your insurance ID card must be with the vehicle when it is being operated
4. A new owner may not drive under this registration

Owners Signature  BY _____

****WARNING****

IRP registration is NOT transferable to a new owner. Please contact our office at 302-744-2702 if you have any questions.



J 31 EXPIRES
U L 26
CL118277



Unit # 8

State of Delaware Apportioned Cab Card

Keep this certificate in your vehicle

The vehicle described herein has been proportionally registered between
The State of Delaware and the Jurisdictions below

Expiration Date: 07/31/2026 Plate Number: CL123188 VIN: 5KKHBPDV8RLUJ8389

Account #	Fleet	Supplement	Reg Date	Color/Color	Unit #	Fuel	Year	Make
343	2	1	05/19/2026	WHI/	8	D	2024	WSTR

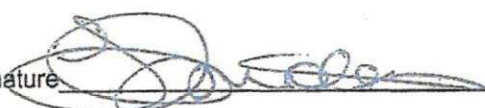
Unladen Weight	Manufacturer's Gross Vehicle Weight Rating	Power Unit Gross Vehicle Weight	Combined Gross Gross Vehicle Weight	TYPE	AXLES
29,848	79,500	73,280	73,280	TK	4

BILLY WARREN & SON LLC

Registrant	Carrier Responsible for Safety	CRFS USDOT
BILLY WARREN & SON LLC 7040 HICKMAN ROAD GREENWOOD, DE 19950	BILLY WARREN & SON LLC 286 BURRSVILLE ROAD GREENWOOD, DE 19950	446269

AB 33239k	FL 73280	MB 33239k	ND 73280	OK 73280	TN 73280	** ****
AL 73280	GA 73280	MD 70000	NE 73280	ON 33239k	TX 73280	** ****
AR 73280	IA 73280	ME 73280	NH 73280	OR 73280	UT 73280	** ****
AZ 73280	ID 73280	MI 73280	NJ 73280	PA 73280	VA 73280	** ****
BC 33239k	IL 73280	MN 73280	NL 33239k	PE 33239k	VT 73280	** ****
CA 73280	IN 73280	MO 73280	NM 73280	QC 6+AXL	WA 73280	** ****
CO 73280	KS 73280	MS 73280	NS 33239k	E	WI 73280	** ****
CT 73280	KY 73280	MT 73280	NV 73280	RI 73280	WV 73280	** ****
DC 73280	LA 73280	NB 33239k	NY 73280	SC 73280	WY 73280	** ****
DE 73280	MA 73280	NC 73280	OH 73280	SD 73280	** ****	** ****
				SK 33239k		

1. This is neither a driver's license nor a certificate of title to a motor vehicle
2. Always keep this registration card with the vehicle it describes
3. Your insurance ID card must be with the vehicle when it is being operated
4. A new owner may not drive under this registration

Owners Signature  BY _____

****WARNING****

IRP registration is NOT transferable to a new owner. Please contact our office at 302-744-2702 if you have any questions.



J 31 EXPIRES
U L 26
CL123188



State of Delaware Apportioned Cab Card
Keep this certificate in your vehicle

The vehicle described herein has been proportionally registered between
The State of Delaware and the Jurisdictions below

unit # 9

Expiration Date: 07/31/2026 Plate Number: CL124033 VIN: 5KKHBPFM7RLVE4839

Account #	Fleet	Supplement	Reg Date	Color/Color	Unit #	Fuel	Year	Make
343	2	1	05/19/2026	WHI/	9	D	2024	WSTR
Unladen Weight	Manufacturer's Gross Vehicle Weight Rating	Power Unit Gross Vehicle Weight	Combined Gross Gross Vehicle Weight	TYPE	AXLES			
17,859	78,000	73,280	73,280	TK	3			

BILLY WARREN & SON LLC

Registrant	Carrier Responsible for Safety	CRFS USDOT
BILLY WARREN & SON LLC 7040 HICKMAN ROAD GREENWOOD, DE 19950	BILLY WARREN & SON LLC 286 BURRSVILLE ROAD GREENWOOD, DE 19950	446269

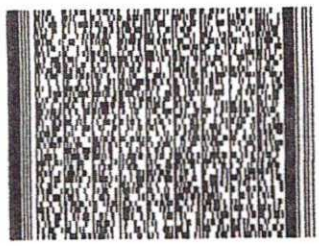
AB 33239k	FL 73280	MB 33239k	ND 73280	OK 73280	TN 73280	** ****
AL 73280	GA 73280	MD 70000	NE 73280	ON 33239k	TX 73280	** ****
AR 73280	IA 73280	ME 73280	NH 73280	OR 73280	UT 73280	** ****
AZ 73280	ID 73280	MI 73280	NJ 73280	PA 73280	VA 73280	** ****
BC 33239k	IL 73280	MN 73280	NL 33239k	PE 33239k	VT 73280	** ****
CA 73280	IN 73280	MO 73280	NM 73280	QC 5 AXLE	WA 73280	** ****
CO 73280	KS 73280	MS 73280	NS 33239k	RI 73280	WI 73280	** ****
CT 73280	KY 73280	MT 73280	NV 73280	SC 73280	WV 73280	** ****
DC 73280	LA 73280	NB 33239k	NY 73280	SD 73280	WY 73280	** ****
DE 73280	MA 73280	NC 73280	OH 73280	SK 33239k	** ****	** ****

1. This is neither a driver's license nor a certificate of title to a motor vehicle
2. Always keep this registration card with the vehicle it describes
3. Your insurance ID card must be with the vehicle when it is being operated
4. A new owner may not drive under this registration

Owners Signature  BY _____

******WARNING******

IRP registration is NOT transferable to a new owner. Please contact our office at 302-744-2702 if you have any questions.



J 31 EXPIRES
U L 26
CL124033

Billy Warren and Son, LLC
7040 Hickman Rd
Greenwood, DE 19950
(302)349-5767

Spill Prevention and Response Plan

This spill plan is designed to handle the requirements for scraping tires to Disposal Facilities.

Safety and Spill Control Equipment on the vehicle

- Universal sorbent pillows
- 3" x 4' universal sorbent socks
- White oil-only sorbent pads
- Tube of repair putty
- Wooden plugs
- Nitrile gloves
- Safety goggles
- Disposal bags
- Zip ties
- All carried in nylon bag with handles
- Reflectors
- Fire Extinguisher
- First Aid Kit
- Hard Hat
- Flash light
- Heavy Duty Gloves

Spill Prevention

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

General Requirements

- Ensure all hazardous substances are properly labeled
- Store, dispense, and/or use hazardous substance in a way that prevents releases.
- Provide secondary containment when storing hazardous substance in bulk quantities

- Try to maintain good housekeeping practices for all chemical's materials at the facility
- Routine checks in the hazardous substance storage are to be performed by Maintenance
- Monthly inspection of hazardous substance storage area

Spill Containment

The general spill response procedure at the facility is to stop the source of the spill, contain any material and clean up the spill in a timely manner to prevent accidental injury or other damage. Small spills will be contained by site personnel or driver if they are able to do so without risking injury. Spill kits are in each truck and mechanic shop.

Emergency Procedures:

- Immediately call 911 in the event of injury, fire or potential fire, or spill of a hazardous substance that gives rise to an emergency.
- If a spill has occurred, contact the following person immediately:
Billy Warr (primary)
Tabitha Passwaters (secondary)
- Delaware Emergency Reporting Numbers 1-800-662-8802 and 302-739-9401

In the event of a large spill, a properly trained employee should:

- Assess the area for any immediate dangers to health or safety. If any dangers are present, move away from the area, call 911.
- Notify the primary and/or secondary contact from the list above and then continue your spill response.
- Retrieve the spill kit from truck or closer location
- Assess the size of the leak and any immediate threat of the spill reaching the floor/storm drains or permeable surfaces in the area. If there is an immediate threat and there are no safety concerns. Then attempt to block the spill from encountering the floor/storm drains or permeable surface. If no drain covers are available, then try to use absorbent and/or sock booms or rags to stop the spill.
- If the spill can be contained with absorbent booms, deploy them around the spill. Use the booms to direct the spill away from any immediate hazards.
- If there is no immediate threat and after controlling the spill, try to plug or stop the leak, if possible, if applicable out on protective gear (gloves, goggles, protective clothing, etc.) and plug the leak.

- Once the spill has been contained and any immediate threat to storm drains or permeable surfaces has been minimized, contact the spill cleanup contractor and dispatch them clean up the spill or commence spill cleanup procedures.
- **Delaware Emergency Reporting Numbers 1-800-662-8802 and 302-739-9401**

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.

EXHIBIT A
OWNERSHIP INTERESTS OF MEMBERS

<u>Member's Name</u>	<u>Units</u>	<u>Ownership Interest</u>
William Warren, Jr.	47.5	47.5%
Tabitha Passwaters	47.5	47.5%
Bonnie M. Warren	5	5%
Total:	100	100%

Billy Warren and Son, LLC

Requires are CDL drivers to hold a Class A license

We only bring scrap tires and trash to your location

We check our drivers records yearly through our IRP/DOT consultant

Our Drivers are



Davis, DaQuan (DNREC)

From: tabithap@billywarrens.com
Sent: Tuesday, July 28, 2026 3:02 PM
To: WHStranporters
Subject: RE: Delaware Solid Waste Transporter Permit

Hey there,
Sorry about that.
We go to the Delaware Solid Waste in Georgetown
28560 Landfill Lane
Georgetown, DE 302-875-2004

-----Original Message-----

From: "WHStranporters" <WHStranporters@delaware.gov>
Sent: Tuesday, July 28, 2026 2:40pm
To: "tabithap@billywarrens.com" <tabithap@billywarrens.com>
Subject: RE: Delaware Solid Waste Transporter Permit

Hello,

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

- **Section 8(b)-** Please provide all solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities, and Transfer stations.

Please provide the information requested above via e-mail.

Thank you,

DaQuan Davis



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



From: WHStranporters
Sent: Monday, July 13, 2026 9:12 AM
To: tabithap@billywarrens.com
Subject: Delaware Solid Waste Transporter Permit

Hello,

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

- **Section 8(b)-** Please provide all solid waste Treatment, Storage, Disposal Facilities, Reclamation Facilities, and Transfer stations.

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

89 Kings Hwy SW, Dover, DE 19901

dnrec.delaware.gov

