



NON-HAZARDOUS LIQUID WASTE TRANSPORTERS PERMIT APPLICATION

Groundwater Discharges Section, Division of Water
DE Department of Natural Resources and Environmental
Control

89 Kings Highway, Dover DE 19901
(302) 739-9948

1. Permit Number (For renewals only): DE-WH-424

2. Company Information

Company Name: Sherman Heating Oils

Telephone: 302-645-5267

Fax:

Address (street, city, state and zip code): 223-G Milton Ellendale Hwy, Milton, Delaware, 19968

Company Email Address & Contact Name: regina@shermancorp.com, Karin Mayer

3. Owner/President Business Information

Name: Karin Mayer

Business Telephone: 3026455267

Business Address if different from above (street, city, state and zip code):

4. Vehicle(s) Information (Attach additional sheets if necessary to identify each vehicle used for transport.)

	Make	Model	Year	Vehicle Type (Tank, Trailer, Etc.)	License Plate Number	State of Registration	Capacity (gal)
1	Ford	F550	2024	tanker	CL49944	Delaware	19,500
2	Ford	F550	2014	tanker	CL66391	Delaware	19500

* Please submit a Certificate of Insurance for each vehicle listed demonstrating commercial automobile liability insurance with a combined single limit of at least \$100,000.

*Certificate of insurance uploaded: **DNREC waste transporter.pdf***

5. Please Check Type(s) of Waste Being Transported and Provide the Information Requested in the Indicated Sections for Each Waste Type Checked

	<input checked="" type="checkbox"/>	Waste Type	Quantity Collected
i.	<input type="checkbox"/>	Septage	gal/yr
ii.	<input type="checkbox"/>	Holding Tank Waste	gal/yr
iii.	<input type="checkbox"/>	Grease Trap Waste and/or Cooking Oil Waste	gal/yr
iv.	<input checked="" type="checkbox"/>	Portable Toilet Waste	50,000 gal/yr
v.	<input type="checkbox"/>	Municipal or Industrial Biosolids	# wet tons/yr
vi.	<input type="checkbox"/>	Sludge From Package Treatment Plants	# wet tons/yr
vii.	<input type="checkbox"/>	Other Non-Hazardous Liquid Waste	gal/yr

Documents required for all new permit applications *and* renewals:

- Attach an Operation Plan detailing the following:
 - a spill reporting and clean-up plan,
 - plans for cleaning vehicles,
 - recordkeeping procedures and
 - days and hours of operation.
- Attach a list of all disposal facilities to be used. Include a copy of the permit/authorization letter from each disposal facility stating the company is currently authorized to discharge the requested waste stream (i.e. septage, holding tank waste, portable toilet waste, etc.) to the facility. Authorization documentation is required for both new and renewal applications.

7 DelC §6023(d): No person shall haul, convey or transport any liquid waste in any container without a license issued by the Department.

Septage
<p>1. Attach a list of all Class F Licensees currently working for the company.</p> <p>If there are no Class F licensees currently working for the company, please note according to Section 4.1.6 of the State of Delaware Regulations Governing the Design, Installation and Operation of On-Site Wastewater Treatment and Disposal Systems, all individuals who will be responsible for removal, transportation or disposal of the solid and liquid contents of septic tanks, cesspools, grease traps, seepage pits, holding tanks, portable toilets or other wastewater treatment or disposal facilities must obtain a Class F license before pumping. In order for an individual to obtain a Class F license.</p>
<p>Class F Licenses uploaded:</p>

Holding Tanks
<p>1. Attach a list of all Class F Licensees currently working for the company.</p> <p>If there are no Class F licensees currently working for the company, please note according to Section 4.1.6 of the State of Delaware Regulations Governing the Design, Installation and Operation of On-Site Wastewater Treatment and Disposal Systems, all individuals who will be responsible for removal, transportation or disposal of the solid and liquid contents of septic tanks, cesspools, grease traps, seepage pits, holding tanks, portable toilets or other wastewater treatment or disposal facilities must obtain a Class F license before pumping. In order for an individual to obtain a Class F license</p>
<p>Class F Licenses uploaded:</p>

Grease Trap Waste and/or Cooking Oil Waste
1. Attach a list of all disposal facilities to be used.
2. Attach a list of all Class F Licensees currently working for the company. If there are no Class F Licensees currently working for the company, please note according to Section 4.1.6 of the State of Delaware Regulations Governing the Design, Installation and Operation of On-Site Wastewater Treatment and Disposal Systems, all individuals who will be responsible for removal, transportation or disposal of the solid and liquid contents of septic tanks, cesspools, grease traps, seepage pits, holding tanks, portable toilets or other wastewater treatment or disposal facilities must obtain a Class F license before pumping. For a Class F License application, please contact the Licensing Coordinator at 302-739-9948.
Grease Trap Waste Disposal Facilities to be used: Class F Licenses Uploaded:

Portable Toilets
1. Attach a list of all Class F Licensees currently working for the company. If there are no Class F Licensees currently working for the company, please note according to Section 4.1.6 of the State of Delaware Regulations Governing the Design, Installation and Operation of On-Site Wastewater Treatment and Disposal Systems, all individuals who will be responsible for removal, transportation or disposal of the solid and liquid contents of septic tanks, cesspools, grease traps, seepage pits, holding tanks, portable toilets or other wastewater treatment or disposal facilities must obtain a Class F license before pumping.
Class F Licenses uploaded: Dean Class F.pdf
3. Quantity of portable toilets you own: 325

Municipal and Industrial Biosolids
1. Identify all Facilities the company will service by attaching a table listing the following: Facility Name of Sludge Generator # Estimated Volume of Sludge to be Transported # Disposal Facility* * If sludge is to be land applied, include the current Agricultural Utilization Permit Number for that facility.
Municipal and Industrial Biosolids <i>Disposal Facilities:</i>
2. Provide transportation routes from all generating facilities to all applicable disposal facilities.
Municipal and Industrial Biosolids <i>Transportation Routes:</i>
3. Indicate any treatment the sludge has undergone before transportation (for example anaerobic digestion, aerobic digestion, lime stabilization, composting, or dewatering).

Sludge Treatment Description Upload:
4. Provide results of a laboratory analysis of a representative sample of the sludge which was obtained not more than 6 months before submission of the application unless these results would be submitted as a part of the land application program. The analysis shall include, as a minimum, percent solids, pH, and the dry weight concentration of total nitrogen, ammonium, nitrate, total phosphorous, total potassium, cadmium, copper, mercury, nickel, lead, zinc, arsenic, selenium, and molybdenum.
Sludge From Package Treatment Plants Laboratory Analysis Uploaded:

Sludge From Package Treatment Plants
1. Identify all Facilities the company will service by attaching a table listing the following: Facility Name of Sludge Generator # Estimated Volume of Sludge to be Transported # Disposal Facility* * If sludge is to be land applied, include the current Agricultural Utilization Permit Number for that facility.
Sludge From Package Treatment Plants <i>Disposal Facilities</i> :
2. Provide transportation routes from all generating facilities to all applicable disposal facilities.
Sludge From Package Treatment Plants <i>Transportation Routes</i> :
3. Indicate any treatment the sludge has undergone before transportation (for example anaerobic digestion, aerobic digestion, lime stabilization, composting, or dewatering).
Sludge Treatment Description Upload:
4. Provide results of a laboratory analysis of a representative sample of the sludge which was obtained not more than 6 months before submission of the application unless these results would be submitted as a part of the land application program. The analysis shall include, as a minimum, percent solids, pH, and the dry weight concentration of total nitrogen, ammonium, nitrate, total phosphorous, total potassium, cadmium, copper, mercury, nickel, lead, zinc, arsenic, selenium, and molybdenum.
Sludge From Package Treatment Plants Laboratory Analysis Uploaded:

Other Non-Hazardous Liquid Wastes
1. Describe the source, nature and make-up of the non-hazardous liquid waste to be transported.
2. Will any of the wastes contain petroleum products (i.e. oil, gas, grease, etc.)? _____ Yes _____ No : no * Transportation of liquid wastes containing any petroleum products will require a permit from the Division of Waste & Hazardous Substances (302-739-9400).

Operating Plan
<p>Attach an Operation Plan detailing the following: a spill reporting and clean-up plan, plans for cleaning vehicles, recordkeeping procedures and days and hours of operation.</p>
<p>Operating Plan Upload: <i>Operation plan RR 2025.pdf</i></p>

Disposal Facilities
<p>Attach a list of all disposal facilities to be used. Include a copy of the permit/authorization letter from each disposal facility stating the company is currently authorized to discharge the requested waste stream (i.e. septage, holding tank waste, portable toilet waste, etc.) to the facility.</p>
<p>Disposal Facilities Upload: <i>Town of Laurel dumping permit.pdf , Laurel approval.pdf , Bond for Liquid waste transporter.pdf</i></p>

Proof of Bond (If applicable)
<p>Proof of Bond - Part III B, Section 500 of the Guidance and Regulations Governing the Land Treatment of Wastes directs, as a requirement for keeping a permit issued under these Regulations, the permittee to file a bond or other security in the amount of Five Thousand Dollars (\$5,000) with the Department. The bond is to be payable to the Department and the obligation of the bond shall be conditioned upon the fulfillment of all requirements related to the permit. If this application is for permit renewal, please submit a copy of the current Transporters Bond certification.</p>
<p>Proof of Bond Upload:</p>

8. Certification	
<p>I certify that all information submitted as part of this application is true and correct to the best of my knowledge and belief.</p>	
<p>Printed Name of Applicant: Karin Mayer</p>	<p>Date Submitted via DNREC ePermitting: 2025-10-22 11:39:01</p>



GEORSHE-01

LBOULANGER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/3/2025

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 Lyons Insurance Agency, Inc. 501 Carr Road, Suite 301 Wilmington, DE 19809	CONTACT NAME:		
	PHONE (A/C, No, Ext): (302) 658-5508	FAX (A/C, No): (302) 658-1253	
	E-MAIL ADDRESS: certificates@lyonsinsurance.com		
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : National Union Fire Insurance Company of Pittsburgh, PA		19445
INSURED Sherman Heating Oils, Inc. P.O. Box 326 Milton, DE 19968	INSURER B : SiriusPoint Specialty Insurance Corporation		16820
	INSURER C : Granite State Insurance Co.		23809
	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			GL7137179	6/1/2025	6/1/2026	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
	PRODUCTS - COMP/OP AGG	\$ 2,000,000						
							\$	
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			CA5861319	6/1/2025	6/1/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			IPS-EX-00000034	6/1/2025	6/1/2026	EACH OCCURRENCE	\$ 5,000,000
							AGGREGATE	\$
							Aggregate	\$ 5,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N / A	WC97087364	6/1/2025	6/1/2026	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

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

Department of Natural Resources and Environmental Control, Solid and Hazardous Waste Management Section are identified as Certificate Holder.

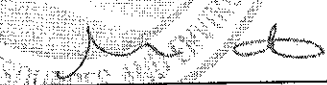
CERTIFICATE HOLDER

CANCELLATION

DNREC-SHWMS
89 Kings Highway
Dover, DE 19901

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

AUTHORIZED REPRESENTATIVE

<p align="center">State of Delaware Department of Natural Resources and Environmental Control</p> <p align="center">This certifies that Dean Sherman has been issued a</p> <p align="center">On-Site Wastewater Liquid Waste Hauler (Class F) License License Number: 2326F Issued: 01/01/2025 Expires: 12/31/2025</p> <p align="center"> Signature of Licensee Sarah Silves, Licensing Program Coordinator DNREC Division of Water</p>	<p>This license issued by the Secretary of the Department of Natural Resources and Environmental Control pursuant to the authorities set forth in 7 Del C Ch 60, Section 6023, Regulations Governing the Design, Installation and Operation of On-Site Wastewater Treatment and Disposal Systems Delaware Administrative Code 7101.</p> <p>For questions related to small systems in:</p> <table border="0"> <tr> <td><u>New Castle County</u> call 302-739-9947</td> <td><u>Kent County</u> call 302-739-9947</td> <td><u>Sussex County</u> call 302-856-4561</td> </tr> </table> <p>For questions related to large systems, call 302-739-9948.</p> <p>Division of Water Licensing Program 302-739-9116 • DOWLicensing@delaware.gov</p> <p>24 Hour Environmental Emergency Hotline: 800-662-8802</p>	<u>New Castle County</u> call 302-739-9947	<u>Kent County</u> call 302-739-9947	<u>Sussex County</u> call 302-856-4561
<u>New Castle County</u> call 302-739-9947	<u>Kent County</u> call 302-739-9947	<u>Sussex County</u> call 302-856-4561		

License Card

Licensee, please cut your license card out and keep with you at all times when conducting business under this license.

License Conditions

- 1) All activity shall be performed in accordance with The Regulations Governing the Design, Installation and Operation of On-Site Wastewater Treatment and Disposal Systems; amended January 11, 2014.
- 2) The activity authorized by the license shall only be performed under the name of the person on the face of the license.
- 3) The licensee is responsible for correct and complete information submitted to the Department (address, telephone number, employer, etc.).
- 4) The licensee is responsible for providing proof of ten (10) annual continuing education training hours relating to wastewater. Carryover credit hours from a previous year are not accepted.
- 5) For all new licensees, please refer to the chart below for continuing education training requirements for the current calendar year only.
If your license is issued in:
 - * January - April (required to complete 10 hours)
 - * May - July (required to complete 8 hours)* August - October (required to complete 6 hours)
 - * November - December (required to complete 0 hours)
- 6) Licenses issued are not transferable and expire on December 31st of each year.
- 7) All Class F licensees shall operate under a valid State of Delaware Non-Hazardous Liquid Waste Transporters Permit.
- 8) All Class F licensees shall be knowledgeable of the Non-Hazardous Liquid Transporters Permittee's Plan for the Prevention, Control and Clean-up of Accidental Discharges. A copy of the Plan is to be maintained on file with the Department.

Sherman Heating Oils, Inc.

DNREC Non-Hazardous Liquid Waste Transporters Permit Application OPERATION PLAN Portable Restrooms

Contents

Hours of Operation.....	2
Recordkeeping Procedures.....	2
Vehicle Cleaning.....	2
Exterior.....	2
Vacuum/Pressure Pump.....	2
Spill Control Plan - Reporting & Clean-Up.....	2
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Back.....	4
Exhibit B - Spill Control & Reporting Plan.....	5

Sherman Heating Oils, Inc
Portable Restrooms
Operation Plan

Hours of Operation

Monday to Friday 8 a.m. to 4 p.m.

Recordkeeping Procedures

Work orders (see Exhibit A) are processed daily for new orders for portable restroom rentals and for servicing of restrooms currently rented.

Work orders are three part forms:

White (top) Copy	Original Rental Agreement retained by Sherman Corporation
Yellow Copy	Customer Copy
Manilla Copy	Servicing Copy with job location and servicing date and time log

Work orders are placed on a route clipboard each morning.

As restrooms are serviced, the driver records the time and date of the work on the back of the manilla copy of the work order.

Work orders are returned at the end of the day and posted to the computerized accounting system for billing and computer recordkeeping.

Vehicle Cleaning

EXTERIOR

Delivery and service vehicles are power washed weekly and as needed.

VACUUM/PRESSURE PUMP

Vaccum/Pressure pumps are to be flushed according to the manufacturer's operating instructions every day that the pump is used.

Spill Control Plan - Reporting & Clean-Up

(See Exhibit B)

EXHIBIT A - PORTABLE RESTROOM WORK ORDER

Front

P.O. Box 206
Milton, DE 19968



1032

DATE	ORDERED BY	TELEPHONE	P.O. NUMBER	SALESMAN

BILL TO:	DELIVER TO:

UNIT TYPE	CONSTRUCTION	DELUXE	WC	SINK	TRAILER
# OF UNITS					
DELIVERY DATE	PICK-UP DATE	QUANTITY UNITS	SERVICE		
			1 PER WEEK	OTHER	
INSTRUCTIONS:					
UNIT NUMBERS					

SPECIAL EVENT CHARGES		MONTHLY CHARGES	
Number of Units		Pick Up & Delivery	\$ Ea.
Dates of Use		Per Unit	\$ Ea.
Cost	\$	Number of Units	
Damage Waiver	\$	Damage Waiver	\$
Tax	\$	Total Price	\$ All units
Special Service	\$	Special Clean	\$
		Tax Rate	
Total \$		Minimum Charge Per Unit = One Month	

- TERMS AND CONDITIONS**
- The customer agrees to pay all invoices arising out of the rental charges for the portable sanitation facilities and extra services within 30 days of invoice and no later than ten days from termination of contract. There will be a 1.5% interest charge per month on any amounts due after 45 days of invoice.
 - The customer agrees to pay such extra and overtime charges as SHERMAN CORP. shall from time to time invoice for services rendered, over and above the normal servicing schedule, on request of the customer.
 - THE CUSTOMER AGREES TO KEEP THE PORTABLE SANITATION FACILITIES CLEAR AND ACCESSIBLE FOR THE SERVICE TRUCK AT ALL TIMES.
 - The customer agrees not to sell, rent, lease or otherwise give up possession of the portable sanitation facilities listed herein except to SHERMAN CORP.
 - The customer agrees not to cause the portable sanitation facilities listed herein to be removed from this address without specific written permission or consent of SHERMAN CORP.
 - The customer agrees to keep the equipment adequately secured and protected during the time of this contract and agrees to pay for any damage to (including graffiti or loss of any equipment covered by this Agreement).
 - Customer acknowledges receipt of the above described property and customer further acknowledges that the property was inspected by the customer at the time of delivery and accepted same in good condition and serviceable condition except as noted in writing on the delivery slip at delivery.
 - If the customer is in default of payment or any other condition of this Agreement, SHERMAN CORP. may immediately or at any time thereafter take possession of the said property wherever it may be found without notice to the customer and without prejudice to SHERMAN CORP.'s right to pursue any other claim for relief which it may otherwise have.
 - Customer is responsible for all costs of collection including reasonable attorney fees together with the 1.5% interest per month on any amounts due to SHERMAN CORP.

DAMAGE WAIVER
If accepted by customer, SHERMAN CORP. agrees in consideration of an additional charge of 8% of gross service charge to eliminate customer responsibilities of loss or damage, except as follows: (a) Damage due to customer's neglect or misuse; (b) Loss by willful neglect or abuse.

DAMAGE WAIVER: ☐ YES ☐ NO

It is acknowledged that the above described units are in good order and repair. I have read and I agree to the above Terms and Conditions.

Name _____ Title _____

Delivered by _____ Date _____

Cash Paid _____ Check No. _____ Payment Received by _____

Back

JOB LOCATION: _____

INVOICE TO: _____

[illegible]

EXHIBIT B - SPILL CONTROL & REPORTING PLAN

Sherman Heating Oils, Inc. Portable Restroom Operations

=== THIS PLAN WILL BE CARRIED IN ALL VEHICLES, ALONG WITH THE PERMIT ===

SAFETY AND SPILL CONTROL EQUIPMENT CARRIED IN VEHICLE

- 1) Reflectors and/or Flares
- 2) Fire Extinguisher
- 3) First Aid Kit
- 4) Heavy-Duty Gloves
- 5) Shovel
- 6) Hard Hat
- 7) Safety Glasses

DRIVER PREVENTATIVE MEASURES

All loads will be enclosed or covered to prevent discharge of waste during transport to the disposal facility.

PRE-TRIP INSPECTIONS

The driver will perform the following pre-trip inspections:

- 1) Waste storage tank and fittings for wear and/or leakage
- 2) Vehicle fluid leaks, including fuel, oil, water, hydraulic fluid
- 3) Lights and Reflectors, including head lights, parking lights, tail lights, turn signals and 4-way flasher
- 4) Tires, including adequate tread wear and correct air pressure
- 5) Horn, windshield wipers, mirrors

DRIVER IMMEDIATE CORRECTIVE ACTIONS

If there is an accident or other emergency which causes a portion of the load to be spilled, the driver, if uninjured, is responsible to contact the following designated company coordinator:

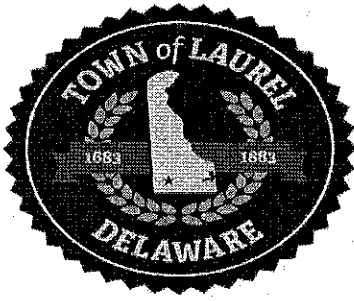
Tracey Fitchett

(302) 684-4008

The designated coordinator will contact the state or municipal authorities where the spill occurred. If the accident or spill has the potential to cause environmental damage, the designated coordinator will notify the state emergency response team, by calling one of the following numbers.

Delaware	911 and (800) 662-8802 and (302) 739-9401, during business hours
Maryland	911

The designated coordinator will arrange for clean-up and decontamination of the spill.



Town of LAUREL DELAWARE

January 9, 2025

Sherman Heating Oils, Inc.
P.O. Box 206
Milton, Delaware 19968

REFERENCE: Sewage Dumping Permit for 2025

To Whom It May Concern:

Please be advised your company, Sherman, has a permit with the Town of Laurel, Delaware for calendar years 2025 to dump residential sewage at the town's wastewater septic receiving facility.

Should you have any questions, or need any further information, please feel free to contact me.

Sincerely,

THE TOWN OF LAUREL

Jamie T. Smith
Town Manager

Bond Number: 108370409

Effective Date: October 21, 2025

Expiration Date: October 21, 2026

**BOND TO ACCOMPANY AND FOR STATE OF DELAWARE
NON-HAZARDOUS LIQUID TRANSPORTERS PERMIT NO. _____**

KNOW ALL MEN BY THESE PRESENTS that:

SHERMAN HEATING OILS INC of
MILTON in the County of SUSSEX and State of
DELAWARE as principal, and Travelers Casualty and Surety Company of America
of Hartford in the County of Hartford and State of
CONNECTICUT as surety, legally authorized to do business in the State of Delaware, are
held firmly bound unto the State of Delaware in the sum of Five Thousand Dollars (\$5,000), to be paid to the
said State of Delaware for the use and benefit of the Department of Natural Resources and Environmental
Control of said State, for which payment well and truly to be made, we do bind ourselves, our and each and
every of our heirs, executors, administrators, successors, and assigns, jointly and severally for and in the whole
firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH that if the said above bounden principal,
SHERMAN HEATING OILS INC, who has been issued by the
Department of Natural Resources and Environmental Control of the State of Delaware a certain permit
designated as Permit No. DE WH-424, and dated 10/21/2025, for the
transportation of non-hazardous liquid waste, and is required to file with the Department of Natural Resources
and Environmental Control a bond or other security, shall fulfill all the requirements of 7 Del. C. Chapter 60,
the State of Delaware Regulations Governing the Design, Installation, and Operation of On-Site Wastewater
Treatment and Disposal Systems (Section 5.3.32.4) and Permit No. DE WH-424, then this obligation shall
be void or else to remain in full force and virtue.

Signed and sealed this 21 day of October, 2025

SIGNED, SEALED AND DELIVERED IN
the presence of:

Witness: Karin Mayer

CORPORATE SEAL

SHERMAN HEATING OILS INC
NAME OF PERMITTEE

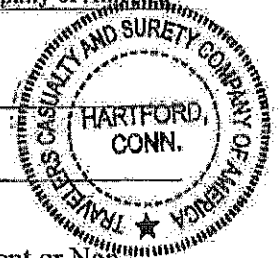
BY: Regina Amato
Controller
TITLE

CORPORATE SEAL

Attest: Donna L. Wilcox

Travelers Casualty and Surety Company of America
NAME OF SURETY

BY: Kelly Green
KELLY GREEN



NOTE: If Attorney-In-Fact does not hold a current Delaware Agent's License (Resident or Non-Resident), this bond must be countersigned below:

NAME OF DELAWARE LICENSE AGENT
(Resident or Non-Resident)

LICENSE NUMBER

BY: _____
ADDRESS: _____



Travelers Casualty and Surety Company of America
Travelers Casualty and Surety Company
St. Paul Fire and Marine Insurance Company
Farmington Casualty Company

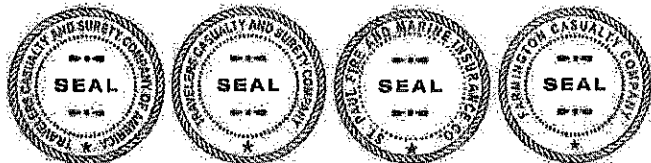
POWER OF ATTORNEY

Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, St. Paul Fire and Marine Insurance Company, and Farmington Casualty Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and the Companies do hereby make, constitute and appoint **KELLY GREEN** of **NEW CASTLE, DE** their true and lawful Attorney(s)-in-Fact to sign, execute, seal and acknowledge the following bond or undertaking, and any riders thereto:

Surety Bond No.: 108370409

Principal: SHERMAN HEATING OILS INC

IN WITNESS WHEREOF, the Companies have caused this Instrument to be signed, and their corporate seals to be hereto affixed, this 16th day of February, 2024.



State of Connecticut

City of Hartford ss.

By: 
Bryce Grissom, Senior Vice President

On this the 16th day of February, 2024, before me personally appeared **Bryce Grissom**, who acknowledged himself to be the Senior Vice President of each of the Companies, and that he, as such, being authorized so to do, executed the foregoing Instrument for the purposes therein contained by signing on behalf of said Companies by himself as a duly authorized officer.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2026




Anna P. Nowik, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of each of the Companies, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and It is

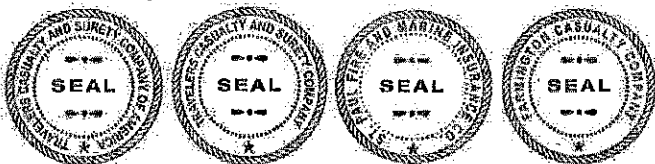
FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing and a copy thereof is filed in the office of the Secretary; and It is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and It is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, **Kevin E. Hughes**, the undersigned, Assistant Secretary of each of the Companies, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this 21 day of October, 2025.




Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.

Please refer to the above-named Attorney(s)-in-Fact and the details of the bond to which this Power of Attorney is attached.



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