



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-OH-123

2. Company Information

Company Name: Johnson Electrical Construction
Inc.

Telephone: 302-653-1212

Fax: 3026531334

Address (street, city, state and zip code): 2611 Woodland Beach Rd, Smyrna, Delaware, 19977

Company Email Address & Contact Name: TJ1414@aol.com, Timothy Johnson

3. Owner/President Business Information

Name: Timothy Johnson

Business Telephone: 3026531212

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	Imperial portable slide in unit	GMC 4500	2007	truck	C71938	Delaware	300

* 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: 25-26 COI - JEC_DNREC.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	11,000 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

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: Class F Licensees.pdf
3. Quantity of portable toilets you own: 49

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 :

* Transportation of liquid wastes containing any petroleum products will require a permit from the Division of Waste & Hazardous Substances (302-739-9400).

Operating Plan

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.

Operating Plan Upload: ***Portable Toilet - Operation Plan.pdf***

Disposal Facilities

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.

Disposal Facilities Upload: ***Disposal Facilities.pdf , 2025 waste hauler permit.pdf***

Proof of Bond (If applicable)

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.

Proof of Bond Upload:

8. Certification

I certify that all information submitted as part of this application is true and correct to the best of my knowledge and belief.

Printed Name of Applicant:
Timothy Johnson

Date Submitted via DNREC ePermitting:
2026-01-08 10:46:19



JOHNELE-01

TWILLIAMS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/8/2026

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 L & W Insurance Inc. 1154 S Governors Ave Dover, DE 19904	CONTACT NAME:		
	PHONE (A/C, No, Ext): (302) 674-3500	FAX (A/C, No): (302) 674-2909	
	E-MAIL ADDRESS: contact@lwinsurance.com		
	INSURER(S) AFFORDING COVERAGE	NAIC #	
	INSURER A : 1842 Insurance Company	16862	
INSURED Johnson Electrical Const Inc Tim Johnson PO Box 452 Smyrna, DE 19977	INSURER B : Harford Mutual Insurance Co	14141	
	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	COMMERCIAL GENERAL LIABILITY			BP10349151	4/24/2025	4/24/2026	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000				
			MED EXP (Any one person) \$ 5,000				
			PERSONAL & ADV INJURY \$ 1,000,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ 2,000,000
	OTHER:						\$
B	AUTOMOBILE LIABILITY			CA10349021	4/24/2025	4/24/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS		BODILY INJURY (Per person) \$				
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		BODILY INJURY (Per accident) \$				
			PROPERTY DAMAGE (Per accident) \$				
B	UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB			CU10349274	4/24/2025	4/24/2026	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE		AGGREGATE \$ 2,000,000				
	DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		\$				
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC10348857	4/24/2025	4/24/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N N / A		E.L. EACH ACCIDENT \$ 500,000				
	If yes, describe under DESCRIPTION OF OPERATIONS below		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 HOLDER

CANCELLATION

Delaware Department of Natural Resources
and Environmental Control
100 W. Water Street
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

From: Tania Williams
Sent: Thu, 3 Oct 2024 20:42:53 +0000
Subject: RE: Proof of Insurance
Attachments: 24-25 COI - JEC_DNREC.pdf

Hi Kate,

Attached is an update Certificate of Insurance for DNREC.

Thanks!

Tania Williams

Commercial Lines Account Executive

1154 S. Governors Ave | Dover, DE 19904

(302) 674-3500 ext. 241 | (302) 674-2909 fax

[We are fueled by kind words for exceptional service.](#)



Important Notice: The information contained in this transmission is confidential, proprietary or privileged and may be subject to protection under the law, including the Health Insurance Portability and Accountability Act (HIPAA). The message is intended for the sole use of the individual or entity to whom it is addressed. If you are not the intended recipient, you are notified that any use, distribution or copying of the attached material is strictly prohibited and may subject you to criminal or civil penalties. If you received this transmission in error please notify us immediately by telephone at 302-674-3500.

From: tj1414@aol.com <tj1414@aol.com>
Sent: Thursday, October 3, 2024 3:03 PM
To: Tania Williams <twilliams@lwinsurance.com>
Subject: Proof of Insurance

Hey Tania,

Can you do me a favor and send over the Certificate of Liability for policies BP10349151, CA10349021, CU10349274, and WC10348857? Same thing as last time, DNREC needs to be cert holder.

Need it to renew our hauler permit. :)

Thanks!

Kate Caldwell
Office Administrator
Johnson Companies
302-653-1212

From: Tania Williams
Sent: Thu, 18 Sep 2025 16:04:50 +0000
Subject: FW: Need COI - Johnson Electrical Const_DNREC
Attachments: 25-26 COI - Johnson Electrical_DNREC.pdf

Good afternoon,

Here is an updated COI for Johnson Electrical.

Thank you!

Tania Williams

Commercial Lines Account Executive

1154 S. Governors Ave | Dover, DE 19904

(302) 674-3500 ext. 241 | (302) 674-2909 fax

We are fueled by kind words for exceptional service.



Important Notice: The information contained in this transmission is confidential, proprietary or privileged and may be subject to protection under the law, including the Health Insurance Portability and Accountability Act (HIPAA). The message is intended for the sole use of the individual or entity to whom it is addressed. If you are not the intended recipient, you are notified that any use, distribution or copying of the attached material is strictly prohibited and may subject you to criminal or civil penalties. If you received this transmission in error please notify us immediately by telephone at 302-674-3500.

From: Contact <contact@lwinsurance.com>
Sent: Thursday, September 18, 2025 8:05 AM
To: Tania Williams <twilliams@lwinsurance.com>
Subject: FW: Need COI

Marni Clendaniel

Front Desk Administrator

1154 S. Governors Ave | Dover, DE 19904

(302) 674-3500 ext. 200



From: Rental Manager <RentalManager@keypg.com>

Sent: Wednesday, September 17, 2025 2:58 PM

To: Contact <contact@lwinsurance.com>

Subject: Need COI

Hello,

Please provide the COI for :

Johnson electrical Const Inc
Tim Johnson
PO Box 452
Smyrna DE 19977

Cert Holder:
Delaware Department of Natural Resources and Environmental Control
100 W. Water Street
Dover De 19901

Thanks this is for:
Country Life Homes
701 McColley Street
Milford DE 19963

Thanks,

*Martha Daughtry
Country Life Homes
701 McColley Street
Milford, DE 19963
302-424-4364
rentalmanager@keypg.com*

State of Delaware
Department of Natural Resources and Environmental Control
Division of Water
89 Kings Highway, Dover, Delaware, 19901

This certifies that

Matthew K Johnson

has been issued a

On-Site Wastewater Liquid Waste Hauler (Class F) License
License Number: 5662F

Valid from January 21, 2026 through December 31, 2026

In the State of Delaware 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, Section 1.0.



Sarah Silves, Licensing Program Coordinator
DNREC Division of Water

This license may be revoked or suspended if the license holder violates any of the lawful rules or regulations of the board, any condition of this license, or the provisions of the act under which the license is issued.

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.

9) All Class F licensees shall operate under a \$5,000 performance bond, or other form of security, is maintained on file with the Department for the duration of licensing.

10) All Class F licensees shall keep a copy of their Class F license identification card available for verification while performing any Class F license related work.

11) All Class F licensees shall enter into a "Sewage Holding Tank Maintenance Contract" with the property owner prior to pumping out holding tanks. A copy of the contract document must be submitted to the Department within 15 days of signing the contract.

12) All Class F licensees shall enter into a "Grease Trap Maintenance Contract" with the property owner prior to pumping out grease traps. A copy of the contract document must be submitted to the Department within 15 days of signing the contract. Class F licensees may not enter into a "Grease Trap Maintenance Contract" unless the Class F licensee has an approved facility to dispose of grease trap waste identified in

the Non-Hazardous Liquid Waste Transporters Permit that he/she is operating under.

13) All Class F licensees shall not co-mingle septage and grease trap waste, unless specifically approved, in writing, by the facility(ies) that will be receiving the grease trap waste.

14) All Class F licensees shall conduct business in a manner that is compliant with the Safety, Tank Access and Tank Cleaning provisions of Section 7101 of the Delaware Administrative Code, as amended or revised.

15) All Class F licensees shall submit quarterly reports documenting the location, the 911 mailing address, and amount of septage removed in total gallons. This requirement becomes effective one (1) year after promulgation of these Regulations.

OPERATION PLAN

- 1) The following spill control and safety equipment will be carried in Vehicle:
 - a) Reflectors and/or flares
 - b) Fire Extinguisher
 - c) First Aid Kit
 - d) Heavy-duty gloves, hard hat
 - e) Flashlight
 - f) Shovel/broom
- 2) The driver will perform the following pre-trip inspections:
 - a) Normal truck pre-trip inspections including checking lights, tires, signals, brakes, etc.
- 3) Clean up/Spill Plan: 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:
Timothy S. Johnson
Phone: (302) 653-1212 Office
(302) 270-0609 Cell
(302) 335-4006 Home

In the interim, in the event of a spill, the spill is to be isolated, contained and cleaned up by the driver.

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:

Phone: 911

(302) 739-9401
(800) 662-8802

- 4) Driver will pump toilets, wash and disinfect with Pine One-Step (heavy duty cleaner & disinfectant). Final step is to Mix 6 oz. of Safe-T-Fresh to 5 gallons of water which is put back into toilets.
- 6) Driver will keep a daily log of all pick-ups and disposals and submit to office on a weekly basis.
 - Office will keep logs filed in chronological order in a dated folder in a secure filing cabinet. At the end of the year, files will be archived in a secure filing cabinet so they can be referenced if need be.
- 7) Trucks are deep cleaned bi-weekly and pressure washed at the shop.
- 8) Hours of operation:
M – F 7:00 a.m. to 5:00 p.m.
- 9) This plan must be carried in all vehicles at all times.

DISPOSAL FACILITIES TO BE USED

- Pumping Station # 1 (Smyrna)
- Pumping Station # 8 (Little Heaven)

(See attached Kent County Permit)

KENT COUNTY

555 Bay Rd Dover, DE 19901



LEVY COURT

(302) 744-2300 www.kentcountyyde.gov

DEPARTMENT OF PUBLIC WORKS

Environmental Programs

(302) 335-6000

Fax (302) 335-0365

139 Milford Neck Rd., Milford, DE 19963

DISCHARGE PERMIT FOR CLEANERS OF SEPTIC TANKS, CESSPOOLS, AND TEMPORARY TOILET FACILITIES

PERMIT NO. 50-00

Effective Date: July 1, 2025

Expiration Date: June 30, 2026

Issuing and Enforcement Authority: Kent County Levy Court
Department of Public Works
139 Milford Neck Rd.
Milford, DE 19963

Business Name: Johnson Electrical Construction Inc
Address: PO Box 452 2611 Woodland Beach Rd, Smyrna, DE 19977
Phone/Fax: 302-653-1212 / 302-653-1334
Owner: Timothy S Johnson tj1414@aol.com
Company Contact: _____

Truck No: 01 Tank Capacity: 350 gallons

Permit Fee = **\$190** per truck.

This is your company's permit to discharge sanitary wastes from residential/domestic septic tanks, cesspools and temporary toilet facilities, into the Kent County Sewer System at Pumping Station No. 1 (Smyrna) and Kent County Regional Resource Recovery Facility (Milford). The Public Works Director may, by written notice to the permit holders, reopen and modify this permit in any way and may change allowable discharge locations at any time.

Your signature on the Kent County Septage Hauler Permit Application verifies that you agree to the conditions set forth in this permit and all attachments, all relevant County Ordinances and the Code of Kent County. If a violation of any of the terms of the above occurs it may result in the suspension or revocation of this permit. It is further understood that subsequent amendments to the Code of Kent County are to be adhered to.

Approval: 
Public Works Director or Authorized Designee

Date: 06/26/2025

Serving Kent County With Pride!

BOND TO ACCOMPANY AND FOR STATE OF DELAWARE
NON-HAZARDOUS LIQUID TRANSPORTERS PERMIT NO. DE-OH-123

Delaware Non-Haz Liquid Transporters Permit Number:	DE-OH-123
Bond Number:	108416966
Effective Date:	January 12, 2026
Expiration Date:	January 12, 2027
Principal Name, Address, and Phone Number:	Johnson Electrical Construction Inc PO BOX 452, SMYRNA, DE 19977-0452 302-653-1212
Obligee Name and Address:	Delaware Department of Natural Resources and Environmental Control Division of Water Resource Protection Section 89 Kings Highway, Dover DE 19901 (302) 739-9116
Surety Name, Address, Phone Number:	Travelers Casualty and Surety Company of America One Tower Square, Hartford, CT 06183 1-800-421-3880
Agent Name, Agent Number, Address, Phone Number:	L & W INSURANCE INC PO BOX 918 302-674-3500 DOVER, DE 19903-0918

Bond Number: 108416966
Effective Date: January 12, 2026
Expiration Date: January 12, 2027

BOND TO ACCOMPANY AND FOR STATE OF DELAWARE
NON-HAZARDOUS LIQUID TRANSPORTERS PERMIT NO. DE-OH-123

KNOW ALL MEN BY THESE PRESENTS that:

Johnson Electrical Construction Inc of
SMYRNA in the County of KENT 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,
Johnson Electrical Construction 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-OH-123, and dated January 8, 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-OH-123, then this obligation shall
be void or else to remain in full force and virtue.

Signed and sealed this 14 day of January, 2026.

SIGNED, SEALED AND DELIVERED IN
the presence of:

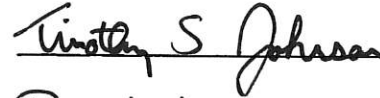
CORPORATE SEAL

Witness:



Johnson Electrical Construction Inc
NAME OF PERMITTEE

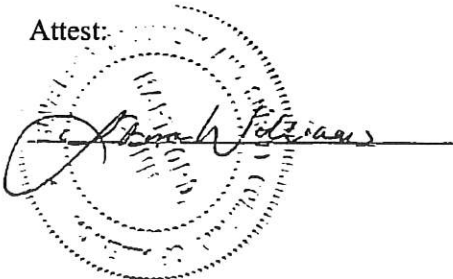
BY:



President
TITLE

CORPORATE SEAL

Attest:



Travelers Casualty and Surety Company of America
NAME OF SURETY

BY:



MATTHEW G MAYER

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 

**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 **MATTHEW G MAYER** of **DOVER, 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.: 108416966

Principal: Johnson Electrical Construction 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

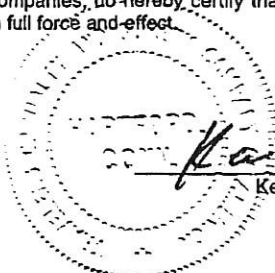
FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that each such delegation is in writing 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, any Second 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 14 day of January, 2026.




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.**