



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-1014					
2. Company Information							
Company Name: First State Roll Off		Telephone: 302-331-0813 Fax:					
Address (street, city, state and zip code): 4901 Summit Bridge Road, Middletown, Delaware, 19709							
Company Email Address & Contact Name: msmith@firststaterolloff.com, Michael Smith							
3. Owner/President Business Information							
Name: Michael Smith		Business Telephone: 3023310813					
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	Chevrolet	C5500	2007	Portable Toilet Pump Truck	C116208	Delaware	1,000
<p>* 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.</p>							
<p><i>Certificate of insurance uploaded: DNREC-Division of Water_First State Roll Off, LLC_Master 2025-2026_1-8-2026_663116478.pdf</i></p>							
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.		Septage		gal/yr			
ii.		Holding Tank Waste		gal/yr			
iii.		Grease Trap Waste and/or Cooking Oil Waste		gal/yr			
iv.	<input checked="" type="checkbox"/>	Portable Toilet Waste		100,000 gal/yr			
v.		Municipal or Industrial Biosolids		# wet tons/yr			
vi.		Sludge From Package Treatment Plants		# wet tons/yr			

vii.	Other Non-Hazardous Liquid Waste	gal/yr
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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. septic, 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: **Jose Torres On-Site Wastewater Liquid Waste Hauler (Class F) License certificate (1).pdf , Jose Torres On-Site Wastewater Liquid Waste Hauler (Class F) License certificate (1).pdf**

3. Quantity of portable toilets you own: **300**

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 *Disposal Facilities*:

2. Provide transportation routes from all generating facilities to all applicable disposal facilities.

Municipal and Industrial Biosolids *Transportation Routes*:

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 *Disposal Facilities*:

2. Provide transportation routes from all generating facilities to all applicable disposal facilities.

Sludge From Package Treatment Plants *Transportation Routes*:

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 Toilets Spill Control Plan.docx***

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: ***Untitled document (1).pdf, First State Roll Off Discharge Letter 07.26.24.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:
Michael Smith

Date Submitted via DNREC ePermitting:
2026-01-08 12:25:59



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 Alera Group formerly CBM 1 W. Commons Blvd, St 302, New Castle, DE 19720 New Castle, DE 19720	CONTACT NAME: Amanda Melvin PHONE (A/C, No, Ext): 302-322-2261 FAX (A/C, No): 302-322-8285 E-MAIL ADDRESS: amelvin@cbmins.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED First State Roll Off, LLC PO Box 1082 Middletown DE 19709	INSURER A : Nautilus Insurance Company	17370
	INSURER B : Key Risk Insurance Company	10885
	INSURER C : NJM Insurance Group	12122
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES

CERTIFICATE NUMBER: 663116478

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	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			ECP2039835-12	4/21/2025	4/21/2026	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	
								\$	
B	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS X HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BAP2040130-12	4/21/2025	4/21/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
							BODILY INJURY (Per person)	\$	
							BODILY INJURY (Per accident)	\$	
							PROPERTY DAMAGE (Per accident)	\$	
								\$	
A	X UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input checked="" type="checkbox"/> CLAIMS-MADE			FFX2039836-12	4/21/2025	4/21/2026	EACH OCCURRENCE	\$ 2,000,000	
							AGGREGATE	\$ 2,000,000	
								\$	
C	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 <input checked="" type="checkbox"/>	N / A	102760-7-25	4/21/2025	4/21/2026	X PER STATUTE	OTHE-	
							E.L. EACH ACCIDENT		\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE		\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT		\$ 1,000,000
A	Pollution Liability			ECP2039835-12	4/21/2025	4/21/2026	Occurrence Aggregate		1,000,000 2,000,000

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

Dumpster Rentals
\$7,500 per item
\$550,000 Catastrophic limit
Excluded Officer: Michael Smith

CERTIFICATE HOLDER

CANCELLATION

DNREC-Division of Water 5 E. Reed St., #200 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

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

This certifies that

Jose Torres

has been issued a

On-Site Wastewater Liquid Waste Hauler (Class F) License
License Number: 6274F

Valid from January 01, 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.



A handwritten signature in black ink, appearing to read "Sarah Silves".

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 septic 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 septic removed in total gallons. This requirement becomes effective one (1) year after promulgation of these Regulations.

SPILL CONTROL PLAN FOR LIQUID WASTE HAULERS

Control and safety equipment carried in each vehicle:

- A. Reflectors and/ or flares
- B. Fire extinguisher
- C. First aid kit
- D. Heavy-duty gloves, hard hat, safety glasses
- E. Shovel
- F. Flashlight
- G. Reflective safety vest
- H. Spill Control Kit

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

The driver will perform the following pre-trip inspections:

- A. Make sure the load is secure and balanced
- B. Make sure all equipment is in working order
- C. DOT pre trip daily inspection
- D. Daily inspection of spill control plan

Vehicle Cleaning

First State Waste will wash the portable toilet trucks on an as needed basis or at least once per week.

Spill Reporting

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: Jose Torres **Phone:** (302) 981-1587

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 number:

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.)

Clean Up Plan

The driver will use the on-truck spill control kit to contain the spill. The spill kit on the truck is a bucket that contains absorbent mats, oil dry, a plastic bag, and absorbent socks that you place around the affected area to minimize the spreading of the spill.

First State Waste will use Lewes Environmental for cleaning up the spill, using the following equipment:

- A. Spill Kit
- B. Street Sweeper
- C. Liquid waste pumping truck
- D. Miscellaneous hand tools
- E. Backhoe

First State Waste will consult with DNREC EPO for the proper disposal of the cleaned material.

Portable Toilet Cleaning

When a toilet is returned to the First State Waste yard, it will be pressure washed.

When the service truck arrives on the construction site the service person will do the following:

- A. Remove the toilet paper
- B. Pump the Toilet
- C. Scrub the deck, seat, urinal, & floor with cleaning solution
- D. Dump 5 gallons of water & cleaning solution with deodorant
- E. Rinse and Towel dry
- F. Replace the toilet paper

Record Keeping Procedures

First State Waste uses a custom waste hauling software system for unit tracking, truck tracking, service orders, routing, disposal, billing, and asset management. We also keep hard copies of all invoices, service and disposal tickets.

Days and Hours of Operations

Monday thru Sunday

6am to 5pm

This plan will be carried in all vehicles, along with the permit.

KENT COUNTY

555 Bay Rd Dover, DE 19901 



LEVY COURT

(302) 744-2300 www.kentcountyde.gov

DEPARTMENT OF PUBLIC WORKS

Environmental Programs

(302) 335-6000

Fax (302) 335-0365

139 Milford Neck Rd., Milford, DE 19963

January 20, 2026

First State Rolloff
4901 Summit Bridge Road
Middletown, DE 19709

Dear Mr. Michael Smith:

This letter is confirmation that First State Rolloff DE WH 1014 & KC Haul 88-00 is permitted to discharge septage from your trucks, First State Rolloff can utilize either Pump Station No. 1 located on US 13 in Smyrna, DE or at the Kent County Regional Resource Recovery Facility located at 139 Milford Neck Road, Milford, DE 19963.

If you have any questions, please contact this office at 302-335-6000.

Sincerely,

A handwritten signature in blue ink that reads "F. James Burk".

F. James Burk
Environmental Program Manager

Bond Number: 108415937
Effective Date: January 13, 2026
Expiration Date: January 13, 2027

**BOND TO ACCOMPANY AND FOR STATE OF DELAWARE
NON-HAZARDOUS LIQUID TRANSPORTERS PERMIT NO. 1014**

KNOW ALL MEN BY THESE PRESENTS that:

First State Roll Off, LLC of
MIDDLETOWN in the County of NEW CASTLE 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,

First State Roll Off, LLC, 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. 1014, and dated January 15th, 2026, 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. 1014, then this obligation shall
be void or else to remain in full force and virtue.

Signed and sealed this 13 day of January, 2026.

SIGNED, SEALED AND DELIVERED IN
the presence of:

CORPORATE SEAL

Witness: Ann Marie Kelley

The seal is circular with a double-line border. The outer ring contains the text "NOTARY PUBLIC" at the top and "STATE OF DELAWARE" at the bottom. The inner circle contains "ANN MARIE KELLEY" at the top, "MY COMMISSION EXPIRES" in the center, and "06-14-2021" at the bottom. The entire seal is stamped in red ink.

CORPORATE SEAL

Attest:

BY:

First State Roll Off, LLC

NAME OF PERMITTEE

President
TITLE

CORPORATE SEAL

Attest:

Hansen, Peter

Travelers Casualty and Surety Company of America

NAME OF SURETY

Kelly Green

A circular stamp with a double-line border. The outer ring contains the text "THE TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA" in a circular, slightly irregular pattern. The inner circle contains "HARTFORD" on the top line and "CONN." on the bottom line, separated by a horizontal line. A five-pointed star is positioned at the bottom center of the inner circle.

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)**

BY.

LICENSE NUMBER

ADDRESS.

Page 3 of 3

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 **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.: 108415937**Principal: First State Roll Off, LLC**

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, recognition, 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, recognition, contract of indemnity, or writing obligatory in the nature of a bond, recognition, 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 13 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.*



IMPORTANT NOTICE REGARDING COMPENSATION DISCLOSURE

For information about how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website: www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Travelers, Enterprise Development, One Tower Square, Hartford, CT 06183.



Credit Card Receipt

Thank you for placing your business with us. Please retain this copy for your records.

<u>Customer Name & Address</u>	<u>Agency Name & Address</u>
First State Roll Off, LLC P O BOX 1082 MIDDLETOWN, DE 19709-8819	ALERA GROUP INC (0CMS07) 100 W COMMONS BLVD STE 302 NEW CASTLE, DE 19720

Bond Details

Bond #: 108415937
Bond Type: Non-Hazardous Liquid Transports Permit Bond
Billing Term: January 13, 2026 - January 13, 2027
Direct Bill #: 3154J1265
Account Name: FIRST STATE ROLL OFF, LLC

Payment Details

Card Type: VISA
Credit Card Number: XXXXXXXXXXXXXXX5130
Confirmation #: 200394810986

Date Processed: January 13, 2026
Total Premium: \$100.00

NOTE: This charge will appear on your credit card statement as 'Travelers Bond'

This is a one time charge to your credit card. For future payment options go to:
<https://www.travelers.com/epay>. Please note: It may take 3 to 5 business days before you can elect to enroll in future payment options online