

Pd CK 12336536

2016 SPECIAL WASTE HAULING PERMIT APPLICATION

Business Name: Waste Management Inc. of Floric
Owner's Name: Waste Management Inc. of Flonda
Business Location:
13022 Hays Rd Spring Hill FL 34610
13022 Hays Rd Spring Hill FL 34610 Mailing Address: 13022 Hays Rd Spring Hill FL 34610
Telephone Number: (813) 996-1516
Emergency Number: <u>(813)</u> 714-0750
Branch locations: Waste Management of Pasco
Branch locations: Waste Management of Pasco 13022 Hays Rd Spring Hill FL 34610
If a Corporation, the names and addresses of Officers:
(Continue on separate sheet, if necessary)
Mailing address of Corporation: 100 Fann St Houston Tx 77002

Manager's Mailing Address: 13000 Hays Rd Spring Hill FL. 34610
Manager's e-mail Address: Kbevis @wm. Com
Full description of each vehicle and all equipment to be used for collections:
See a Hached
The following information must accompany this application:

- 1. Written permission from the proper governing body to use the disposal site (Pasco County Landfill).
- 2. Name, address, age and exact duties of <u>all employees who will be working</u> within the city limits.
- 3. The number of accounts served, including any you plan to contract with, and a breakdown by classification as to whether residential, commercial or industrial accounts.
- 4. A complete rate schedule along with a statement by the applicant that any change in rates will be filed with the City Clerk at least 30 days prior to effective date of change.
- 5. A statement by the applicant that collection of garbage, trash and refuse shall be available for each account at frequency of no less than two (2) times per week, at intervals of not less than three (3) calendar days between collections or at such other frequencies and intervals of time as the applicant and the customers shall agree upon.
- 6. A statement by applicant that all collection equipment shall be of a type generally manufactured for the collection of refuse.

- 7. Certificate of insurance coverage complying with requirements as set forth in Section 10-42 (4) of New Port Richey City Code Chapter 10, Article II, Division 2, stating that "Such person shall
 - (4) Be insured by a comprehensive liability insurance policy in an amount not less than one hundred thousand dollars (\$100,000.00) per person bodily injury, three hundred thousand dollars (\$300,000.00) per occurrence, and twenty-five thousand (\$25,000.00) property damage per occurrence, and that the employees of such person are properly insured as required by F.S. Chapter 440, and that the insurance shall be evidenced by delivering a certificate of such insurance with the application for such a permit."
- 8. A permit fee of \$500.00 payable to the City of New Port Richey, Florida.

Signature of Applicant

Print Name of Applicant

10-22-15

Date

Attachments:

Ordinance No. 2013-2015

Resolution No. 2014-07



PASCO COUNTY, FLORIDA

"Bringing Opportunities Home"

DADE CITY LAND O' LAKES LAND O' LAKES FAX

(352) 521-4285 (813) 235-6012 (813) 235-6189 (813) 929-1064 UTILITIES SERVICES BRANCH UTILITIES ADMINISTRATION & SVCS. UTILITIES ADMINISTRATION BLDG. 19420 CENTRAL BLVD. LAND O' LAKES, FL 34637-7006

October 19, 2015

Mr. Ken Bevis Waste Management of Pasco 13022 Hays Road Spring Hill, FL 34610-7659

RE:

Licensed Hauler in Pasco County

To Whom It May Concern:

Please be advised that Waste Management of Pasco is permitted and licensed to operate in Pasco County, Florida, to provide collection services of municipal solid waste.

If you have any questions, please feel free to contact me.

Sincerely,

Robert J. Sigmond

Utilities Fiscal and Business

Services Director

U/LTR/Ken Bevis-Waste Management of Pasco_Ltr

RJS/dlh

e Postal	34668	34487	34669	33542	34614	33523	34669	34608	34610	34608	34608	34668	34610	34609	34613	34655	33980	34608	34668	34609	34608	33545	34608	34638	34614	34668
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City	Port Richey	Homosassa	Hudson	Zephyrhills	Weeki Wachee	Ridge Manor	Hudson	Spring Hill	Spring Hill	Spring Hill	Spring Hill	Port Richey	Spring Hill	Springhill	Brooksville	Trinity	Port Charlotte	Spring Hill	Port Richey	Spring hill	Spring Hill	Wesley Chapel	Spring Hill	Land O Lakes	Weeki Wachee	Port Richey
Address2																Apt 109										
Birthdate Address1	4/19/1964 6314 Gainsboro Rd	12/7/1954 PO Box 511	5/28/1960 12437 White Bluff Road	11/21/1954 4632 5th Street	11/17/1969 14442 Dusky Warbler Rd	5/4/1964 34415 Courtez Blvd	9/22/1975 9716 Chris St	10/12/1967 11113 Sheffield Road	8/24/1950 14622 Elmont Ave	6/1/1964 5301 Boswell Road	10/11/1971 2393 Brewton Avenue	5/12/1968 9506 Glen Moor Lane	7/26/1966 12244 Canyon Blvd.	10/28/1972 4217 Gondolier Road	2/28/1975 13055 Sweet Gum Road	4/2/1954 11862 Trevally Loop	10/13/1976 23293 Wilber Avenue	9/25/1961 12439 Hanley Drive	11/16/1975 8031 San Fernando Drive	11/13/1975 13296 Bainbridge Way	6/29/1953 10451 Abbeville Street	7/30/1966 7410 Parkersburg Dr.	6/10/1962 2300 Waterfall Drive	12/30/1970 18027 Williams Loop	3/8/1969 11143 Persimmon Avenue	5/12/1971 8911 Tropical Palm Way
Tobcode Tobcode Name	1125 Technician	1125 Technician	1131 Technician Sr	1044 Driver Container	1050 Driver Rolloff	1050 Driver Rolloff	1042 Driver Commercial	1042 Driver Commercial	1042 Driver Commercial	1050 Driver Rolloff	1042 Driver Commercial	1042 Driver Commercial	1050 Driver Rolloff	1096 Operations Spec, Collections	1150 Driver Commercial, Recycling	1054 Driver Swing	4OE05J Route Mgr - Residential		1048 Driver Residential	1048 Driver Residential	1048 Driver Residential	1048 Driver Residential	1048 Driver Residential	1055 Driver Swing - Residential	Driver Residen	1048 Driver Residential
Emplid Name	182818 Bowling David I	232877 Morton Mark G	062120 Patri Maurice	062953 Buccieri.Patrick		067077 Danella Michael	200395 Densmore.Christopher C	158896 Downing.Wayne A	060020 Howe Gary	165445 Kyler David S	138341 Maura Ir Douglas	163018 Roberts Don M	014573 Schilltz Darrell	182572 Smith Rebecca A	184229 Stump.Bradley D	069367 Wolff Richard	232418 Alvarez Dionis D	069294 Phillips.Glen	259967 Daniel Kurtis N	235322 Garcia.Carlos J	161166 Kocab.Thomas V	217304 Opden leffery S	153081 Ortiz Peter	197406 Thomas.Michael L	201823 Thomas Timothy B	206338 Torres, Emirto

2015 Special Waste Hauling Permit Application City of New Port Richey

Additional Information enclosed with application

- 1. Disposal site permission letter see attached letter.
- 2. List of employees see attached list.
- 3. Number of accounts served.
 - a. Residential: 235
 - b. Commercial: 46
 - c. Roll Off: 3
- 4. The rate schedule is listed below. Note Waste Management will file any rate changes to the City. Clerk at least 30 days prior to the effective date of change.
 - a. Commercial

	Service F	requency					
Service Levels	1	2	3	4	5	6	XPU
1 Yard FEL Container	\$24.00	\$37.00	\$48.00	\$59.00	\$65.00	\$79.00	\$13.00
2 Yard FEL Container	\$34.00	\$58.00	\$79.00	\$94.00	\$118.00	\$142.00	\$24.00
4 Yard FEL Container	\$52.00	\$94.00	\$142.00	\$187.00	\$209.00	\$251.00	\$42.00
6 Yard FEL Container	\$70.00	\$126.00	\$187.00	\$251.00	\$275.00	\$329.00	\$56.00
8 Yard FEL Container	\$83.00	\$167.00	\$251.00	\$335.00	\$366.00	\$439.00	\$84.00

- b. Residential Base rate is \$12.44 for twice weekly curbside garbage collection and once every other week for recycle collection.
- c. Industrial All industrial customers are priced individually depending on type and frequency of service.
- 5. Waste Management collection of garbage, trash and refuse is available for each account at frequency of no less than two times per week, at intervals not less than three calendar days between collections or at such other frequencies and intervals of time, as WM and the customer shall agree upon.
- 6. Waste Management uses equipment to perform collection that is generally manufactured for the collection of refuse. See attached list of collection vehicles.
- 7. Certificate of Insurance See attached form.

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Sing Dept: S037	Using Dept: S03796 - WM OF PASCO COUNTY					
206926	2003 MACK MR688S		1M2K195CX3M022187	N5592M	FL	
207554	2004 MACK MR688S		1M2K195C04M024967	N3154P	FL	90493616
208641	2007 MACK MR688S		1M2K195CX7M034359	N5643N	FL	
209175	2007 MACK MR688S	80	1M2K195C87M039284	N4396Q	FL	
209264	2007 MACK MR688S		1M2K195CX7M039240	M9709M	FL	
209265	2007 MACK MR688S		1M2K195C17M039241	M9710M	FL	99369062
209968	2010 MACK MRU613		1M2AV02CXAM005063	N7258Q	FL	103349827
307017	2001 MACK MR688S		1M2K195C21M017806	N9532P	FL	82226905
309984	2006 MACK MR688S		1M2K195C56M033599	N5098K	FL	95895365
309985	2006 MACK MR688S		1M2K195C86M033600	N4985K	FL	95977515
309994	2006 MACK MR688S		1M2K195C16M033597	IN8866J	F	95674687
362249	2003 FREIGHTLIN FL112		1FVHBGA873HL09839	N5596M	FL	
405777	1999 MACK RD688S		1M2P267C2XM047511	N2985U	F	
406440	2000 MACK RD688S		1M2P267C2YM049857	N2160R	FL	80861968
408297	2001 MACK RD688S		1M2P267C31M061960	N0633M	FL	83684800
408298	2001 MACK RD688S		1M2P267C51M061961	NO634M	FL	83684506
411599	2005 MACK CV713		1M2AG11C85M021334	N5437L	FL	
604862	2001 FORD F250		1FTNF20F61EA59417	U075FQ	FL	82437187
085909	2004 FORD F150		1FTRF12W04NA19508	562LUQ	FL	88786482
608144	2007 FORD F150		1FTPW12567KC84843	128MKN	FL	
632084	2002 INTL 4900		1HTMKAANX2H547568	DEJR24	F	87055921
674064	2004 FORD F350		1FDWF36P34EA81871	516-YIZ	FL	
741917	2002 G&H TRAILER		1G9CT442X2A116011	P090BU	FL	

Unit Count Using Dept: S03796 = 24

FleetFocus M5 - UNITID - Unit Identification V3.0



CERTIFICATE OF LIABILITY INSURANCE

1/1/2016

DATE (MM/DD/YYYY) 12/10/2014

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 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).

CONTACT PRODUCER LOCKTON COMPANIES 5847 San Felipe, Suite 320 Houston TX 77057 PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: ACE American Insurance Company 22667 INSURED WASTE MANAGEMENT HOLDINGS, INC. & ALL AFFILIATED, RELATED & SUBSIDIARY COMPANIES INCLUDING: WASTE MANAGEMENT INC. OF FLORIDA INSURER B: Indemnity Insurance Co of North America 43575 1300299 INSURER C: ACE Property & Casualty Insurance Co 20699 INSURER D: ACE Fire Underwriters Insurance Company 20702 3411 NORTH 40TH STREET TAMPA FL 34610 INSURER E INSURER F:

COVERAGES

CERTIFICATE NUMBER: 11039160

REVISION NUMBER: XXXXXXX

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	
Λ	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	Y	Y	HDO G27341251	1/1/2015	1/1/2016	EACH OCCURRENCE \$ 5.00 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 5.00	00.000
	X XCU INCLUDED						MED EXP (Any one person) § XX	XXXXX
	X ISO FORM CG00010413	1					PERSONAL & ADV INJURY \$ 5.00	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	1					GENERAL AGGREGATE \$ 6.00	0.000
	POLICY X PRO- X LOC	1					PRODUCTS - COMP/OP AGG s 6.00	0.000
	OTHER						S	
Α	AUTOMOBILE LIABILITY	Y	Y	MMT H08830472	1/1/2015	1/1/2016	COMBINED SINGLE LIMIT (Ea accident) s 1.00	00.00
	X ANY AUTO						BODILY INJURY (Per person) \$ XXX	XXXXX
	X ALLOWNED SCHEDULED AUTOS							XXXXX
	X HIRED AUTOS X NON-OWNED AUTOS	1					PROPERTY DAMAGE S XXX	XXXXX
	X MCS-90						s XXX	XXXXX
C	X UMBRELLA LIAB X OCCUR	Y	Y	XOO G2742305A	1/1/2015	1/1/2016	EACH OCCURRENCE \$ 15.0	000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE \$ 15.0	000.000
	DED RETENTION \$							XXXXX
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		Y	WLR C4814181A (AOS)	1/1/2015	1/1/2016	X PER STATUTE OTH-	
D	ANY PROPRIETOR/PARTNER/EXECUTIVE N	N/A		WLR C48141821 (CA & MA) SCF C48141833 (WI)	1/1/2015 1/1/2015	1/1/2016 1/1/2016	E L EACH ACCIDENT \$ 3.00	0.000
	(Mandatory in NH) If yes describe under			(11)	1,1,2013		E L DISEASE - EA EMPLOYEE \$ 3.00	0.000
	DESCRIPTION OF OPERATIONS below						EL DISEASE - POLICY LIMIT S 3.00	0.000
Α	EXCESS AUTO LIABILITY	Y	Y	XSA H08830460	1/1/2015	1/1/2016	COMBINED SINGLE LIMIT \$9,000,000 (EACH ACCIDENT)	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
BLANKET WAIVER OF SUBROGATION IS GRANTED IN FAVOR OF CERTIFICATE HOLDER ON ALL POLICIES WHERE AND TO THE EXTENT REQUIRED BY WRITTEN CONTRACT WHERE PERMISSIBLE BY LAW. CERTIFICATE HOLDER IS NAMED AS AN ADDITIONAL INSURED (EXCEPT FOR WORKERS' COMPTEL) WHERE AND TO THE EXTENT REQUIRED BY WRITTEN CONTRACT.

	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
11039160	AUTHORIZED REPRESENTATIVE
CITY OF NEW PORT RICHEY 5919 MAIN STREET NEW PORT RICHEY FL 34652	
	O-7Kelly

CANCELLATION

ACORD 25 (2014/01)

CERTIFICATE HOLDER

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