

Rec'd 10/25/19
OK #8026915



2020 SPECIAL WASTE HAULING PERMIT APPLICATION

Business Name: Waste Pro of Florida, Inc. DBA J.D. Parker & Sons

Owner's Name: Waste Pro of Florida

Business Location: 6724 U.S. Hwy. 19, New Port Richey, FL 34652

Mailing Address: P.O. Box 997, New Port Richey, FL 34656-0997

Telephone Number: (727) 845-1024

Emergency Number: (727) 271-5052 or (727) 946-2742

Branch locations: N/A

If a Corporation, the names and addresses of Officers:

John Jennings, Owner/Founder & CEO

Sean Jennings, President & Secretary

Mailing address of Corporation: 2101 W SR 434, 3rd floor
Longwood, FL 32779

Manager's Mailing Address: P.O. Box 997,

New Port Richey, FL 34656-997

Manager's e-mail Address: jdarker@wasteprousa.com

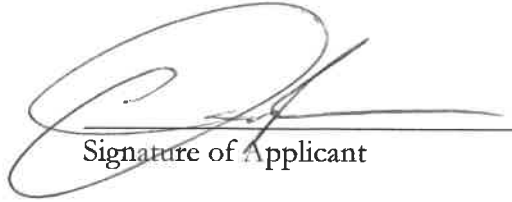
Full description of each vehicle and all equipment to be used for collections:

ATTACHED

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 all employees who will be working 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

Dave Parker

Print Name of Applicant

10/23/19

Date

Attachments: Ordinance No. 2017-2111
Resolution No. 2017-02

J. D. Parker & Sons, Inc.
Residential Waste Disposal
6724 U.S. Hwy. 19, New Port Richey, FL 34652
Phone: 727-845-1024

October 24, 2019

The following information is supplied for the application of our New Port Richey city waste disposal permit:

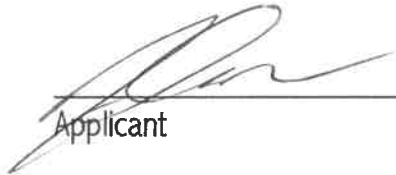
1. Enclosed is letter from Pasco County approving our use of proper disposal sites.
2. The following employees are working within city limits:

Jon Parker (49), 4711 Dumont St., NPR -	Administrative
Jamey Parker (46), 4306 Onorio St., NPR -	Driver
Charles Holman (53), 8235 Autumn Oak Dr., Port Richey -	Driver
James Perkins (69), 5947 Delaware Ave., NPR -	Driver
Louis Taylor (42), 12909 King Manor Dr., Hudson -	Driver
Anthony Smith Jr. (26), 4240 Courier Lane, Holiday -	Driver
Dave Terry (42), 13195 Precept Way, Hudson -	Driver
David Velez (40), 9001 Ledgestone Lane, PR -	Driver
Clarence Brewster (31), 7202 Lofty Dr., PR -	Driver
Evan Lehouillier (27), 9424 Hidden Ln., Unit 2, Hudson -	Driver
Travis Lewis (29), 6743 Old Main St., NPR -	Driver
Joseph Rivera (63), 11520 Kerridale Ave., Spring Hill -	Driver
Steven Gourlay, (27), 6307 Sutherland Ave., NPR -	Driver
Thomas Sartell (62), 4049 Cardoon Dr., NPR -	Driver
Greg Hammond (47), 6338 Indiana Ave., NPR -	Driver
Adam Bailey (20), 5936 High St., New Port Richey	Loader
James Nowlin (28), 7901 Empire Ct., NPR -	Loader
Christopher Pagan (23), 8331 Wilkens St., PR -	Loader
Daniel Stecker (28), 6123 Georgia Ave., NPR -	Loader
Harley Williams (24), 6938 Betty Lou Ct., NPR -	Loader
Freddie Winthrop (66), 5319 Avery Rd., NPR -	Loader
Tymere Carter (24), 5067 Forest Hills, Holiday -	Loader
Joseph Melville (24), 7041 Castanea Dr.	Loader
Donna Parker, 8815 Greenleaf Ct., P.R. -	Administrative
Stacy Parker, 4711 Dumont St., NPR -	Administrative
Sandy Brown, 8811 Dusty Lane, NPR -	Office
Donna Garcia, 12909 Laketree Ln., Hudson	Office

3. We are currently servicing approximately 2378 city residential customers with curbside refuse & recycling service & 83 commercial curbside accts. & 2 dumpster accts. (1- 2 yd. & 1 - 6 yd.)
4. The rate we offer for our service is \$50.43 residential & \$50.43 commercial bag & can service & dumpsters (2 yd. dumped once per week @ \$34 mo. & 6 yd. dumped 3 times per week @ \$187.00 mo.)
5. Garbage, trash, or refuse will be picked up Mon. & Thurs, & recyclables picked up every Thursday.
6. The equipment used is specifically the type for refuse collection.
7. Enclosed are copies of necessary certificates of insurance with the proper coverage required.

Collection of garbage, trash, and refuse shall be available for each account at a frequency of no less than two (2) times per week, at intervals of not less than three (3) calendar days between collections and once per week recyclable pick up.

All collection equipment is of a type manufactured for the collection of refuse.

	<u>10/23/19</u>
Applicant	Date



October 17, 2019

To Whom It May Concern:

Please accept this correspondence as acknowledgement that J.D. Parker and Sons, Inc. is licensed by Pasco County Government to operate for municipal solid waste service in Pasco County, Florida, from January 1, 2019 through December 31, 2028.

Sincerely,

A handwritten signature in black ink, appearing to read "Justin Grant", is written over a faint, circular official stamp.

Justin Grant
Public Infrastructure
Fiscal and Business Administration Director

JG/jmc

PUBLIC INFRASTRUCTURE FISCAL AND BUSINESS ADMINISTRATION DEPT.

813.235.6196 | Utilities Administration Bldg. | 19420 Central Blvd. | Land O' Lakes, FL 34637-7006



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/20/2016

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).

PRODUCER CGB Insurance, LLC 2531 Green Forest Lane #101 Lutz FL 33558	CONTACT NAME: Kraig Blancher PHONE (A/C, No. Ext): (813) 749-7948 FAX (A/C, No): (813) 200-2120 E-MAIL ADDRESS: kraig@cgbinsurance.com
INSURED JD Parker & Sons Co, Inc. 6724 US Highway 19 New Port Richey FL 34652	INSURER(S) AFFORDING COVERAGE INSURER A: Willis INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 2016-2017

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 SUBR INSD / 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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		01-IX-086479130-4	1/8/2016	1/8/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		01-CA-019047157-4	1/8/2016	1/8/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured/Underinsured \$ 20,000
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	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 type="checkbox"/> N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER**CANCELLATION**

griskoa@cityofnewportriche City of New Port Richey Amanda Grisko 6132 Pine Hill Rd Port Richey, FL 34668	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 Kraig Blancher/BRIIT <i>Kraig A. Blancher</i>
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CERTIFICATE OF LIABILITY INSURANCE

Date
10/20/2016

Producer: Plymouth Insurance Agency
2739 U.S. Highway 19 N.
Holiday, FL 34691
(727) 938-5562

This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

Insured: South East Personnel Leasing, Inc. & Subsidiaries
2739 U.S. Highway 19 N.
Holiday, FL 34691

Insurers Affording Coverage		NAIC #
Insurer A:	Lion Insurance Company	11075
Insurer B:		
Insurer C:		
Insurer D:		
Insurer E:		

Coverages

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. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits	
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence	\$
						Damage to rented premises (EA occurrence)	\$
						Med Exp	\$
						Personal Adv Injury	\$
						General Aggregate	\$
						Products - Comp/Op Agg	\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$
						Bodily Injury (Per Person)	\$
						Bodily Injury (Per Accident)	\$
						Property Damage (Per Accident)	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made Deductible				Each Occurrence	
						Aggregate	
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? NO If Yes, describe under special provisions below.	WC 71949	01/01/2016	01/01/2017	<input checked="" type="checkbox"/> WC Statutory Limits E.L. Each Accident	\$1,000,000
						E.L. Disease - Ea Employee	\$1,000,000
						E.L. Disease - Policy Limits	\$1,000,000

Other

Lion Insurance Company is A.M. Best Company rated A- (Excellent). AMB # 12616

Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions:

Client ID: 80-65-153

Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company":

J.D. Parker & Sons, Inc.

Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s), while working in: FL

Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity.

A list of the active employee(s) leased to the Client Company can be obtained by faxing a request to (727) 937-2138 or by calling (727) 938-5562.

Project Name:

ISSUE 10-20-16 (KR)

Begin Date 12/28/2009

CERTIFICATE HOLDER

CITY OF NEW PORT RICHEY

6132 PINE HILL RD.

PORT RICHEY, FL 34688

CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

John H. Parker

Permit No. 50



MUNICIPAL SOLID WASTE COLLECTION PERMIT

THIS PERMIT ENTITLES J.D. PARKER & SONS, INC. TO OPERATE A REFUSE COLLECTION BUSINESS IN THE UNINCORPORATED AREAS OF PASCO COUNTY, FROM JANUARY 1, 2019 THROUGH DECEMBER 31, 2028, PROVIDED THE FOLLOWING STIPULATIONS ARE ADHERED TO:

1. LICENSEE SHALL CHANGE THE DESIGNATED DISPOSAL SITE, IF NECESSARY, TO MEET THE REQUIREMENTS OF ANY SUBSEQUENT FLOW CONTROL ORDINANCE OR SPECIAL ACT ENACTED FOR PASCO COUNTY.
2. LICENSEE SHALL PROVIDE THEIR CUSTOMERS AND PASCO COUNTY WITH DETAILED INFORMATION PROVIDING JUSTIFICATION FOR ANY COLLECTION CHARGE INCREASES.
3. LICENSEE SHALL ABIDE BY ADDITIONAL CONDITIONS, IF ANY, AS STATED IN THE ATTACHED BOARD OF COUNTY COMMISSIONS APPROVED MEMORANDUM.
4. THIS LICENSE SHALL BE SUBJECT TO ANY MODIFICATIONS OF THE LICENSURE REQUIREMENTS AS APPROVED BY THE BOARD OF COUNTY COMMISSIONERS FROM TIME TO TIME.
DATED THIS 31st OF DECEMBER, 2018.

PC00015100

PUBLIC INFRASTRUCTURE
ADMINISTRATION AND
SUPPORT SERVICES

PASCO COUNTY, FLORIDA
JUSTIN GRANT, PUBLIC
INFRASTRUCTURE
ADMINISTRATION AND
SUPPORT SERVICES INTERIM
DIRECTOR