



NEW PORT RICHEY FLORIDA

2022 SPECIAL WASTE HAULING PERMIT APPLICATION

Business Name: Republic Services of Florida, Limited Partnership

Owner's Name: publicly traded

Business Location: 8608 Arcola Ave. Hudson, FL 34667

Mailing Address: 8608 Arcola Ave. Hudson, FL 34667

Telephone Number: 727-233-3892

Emergency Number: 248-212-5738, Terrance Dotson, Division Manager

Branch locations: 8608 Arcola Ave. Hudson, FL 34667

If a Corporation, the names and addresses of Officers: Attached

(Continue on separate sheet, if necessary)

Mailing address of Corporation: 18500 N. Allied Way, Phoenix, AZ 85054

Manager's Mailing Address: 8608 Arcola Ave. Hudson, FL 34667

Manager's e-mail Address: TDotson@republicservices.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). **ATTACHED**
2. Name, address, age and exact duties of all employees who will be working within the city limits. **ATTACHED**
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. **ATTACHED**

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. **ATTACHED**
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. **ATTACHED**
6. A statement by applicant that all collection equipment shall be of a type generally manufactured for the collection of refuse. **ATTACHED**
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." **ATTACHED**
8. A permit fee of \$500.00 payable to the City of New Port Richey, Florida.



Signature of Applicant

Terrance Dotson, Division Manager
Print Name of Applicant

11/22/21
Date

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



November 22, 2021

5210 West Linebaugh Avenue
Tampa, FL 33624

City of New Port Richey
5919 Main Street
New Port Richey, FL 34652

RE: 2022 Special Waste Hauling Permit Application

Application Item - 3

Republic Services of Florida, Limited Partnership/Seaside Sanitation states that we service 4 industrial customers, 270 commercial customers, and 0 residential customers.

Thank you for your assistance,

A handwritten signature in blue ink, appearing to read "Terrance Dotson", with a long horizontal flourish extending to the right.

Terrance Dotson
(248)212-5738
Division Manager
Republic Services of Florida, LP



November 22, 2021

5210 West Linebaugh Avenue
Tampa, FL 33624

City of New Port Richey
5919 Main Street
New Port Richey, FL 34652

RE: 2022 Special Waste Hauling Permit Application

Application Item - 4

Republic Services of Florida, Limited Partnership/Seaside Sanitation states that any change in rates will be filed with the City Clerk at least 30 days prior to effective date of change. As of November 2021, Pasco County no longer caps commercial rates.

Thank you for your assistance,

A handwritten signature in black ink, appearing to read "Terrance Dotson".

Terrance Dotson
(248)212-5738
Division Manager
Republic Services of Florida, LP



November 22, 2021

5210 West Linebaugh Avenue
Tampa, FL 33624

City of New Port Richey
5919 Main Street
New Port Richey, FL 34652

RE: 2022 Special Waste Hauling Permit Application

Application Item - 5

Republic Services of Florida, Limited Partnership/Seaside Sanitation states that collection of garbage 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.

Thank you for your assistance,

A handwritten signature in black ink, appearing to read "Terrance Dotson".

Terrance Dotson
(248)212-5738
Division Manager
Republic Services of Florida, LP



November 22, 2021

5210 West Linebaugh Avenue
Tampa, FL 33624

City of New Port Richey
5919 Main Street
New Port Richey, FL 34652

RE: 2022 Special Waste Hauling Permit Application

Application Item - 6

Republic Services of Florida, Limited Partnership/Seaside Sanitation states that all collection equipment used to service customers within the City of New Port Richey shall be of a type of the generally manufactured for the collection of refuse.

Thank you for your assistance,

A handwritten signature in blue ink, appearing to read "Terrance Dotson", with a long horizontal flourish extending to the right.

Terrance Dotson
(248)212-5738
Division Manager
Republic Services of Florida, LP

Florida Department of State

DIVISION OF CORPORATIONS



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Foreign Limited Partnership

REPUBLIC SERVICES OF FLORIDA, LIMITED PARTNERSHIP

Filing Information

Document Number B99000000467
FEI/EIN Number 65-0965470
Date Filed 12/27/1999
State DE
Status ACTIVE
Last Event CONTRIBUTION CHANGE
Event Date Filed 05/09/2005
Event Effective Date NONE

Principal Address

18500 North Allied Way
 Phoenix, AZ 85054

Changed: 04/25/2021

Mailing Address

18500 North Allied Way
 Phoenix, AZ 85054

Changed: 04/25/2021

Registered Agent Name & Address

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

General Partner Detail

Name & Address

Document Number F99000006661

REPUBLIC SERVICES OF FLORIDA GP, INC.
 18500 North Allied Way
 Phoenix, AZ 85054

Annual Reports

Report Year	Filed Date
2019	04/18/2019

2020 04/27/2020
 2021 04/25/2021

Document Images

04/25/2021 -- ANNUAL REPORT	View image in PDF format
04/27/2020 -- ANNUAL REPORT	View image in PDF format
04/18/2019 -- ANNUAL REPORT	View image in PDF format
04/12/2018 -- ANNUAL REPORT	View image in PDF format
04/20/2017 -- ANNUAL REPORT	View image in PDF format
04/12/2016 -- ANNUAL REPORT	View image in PDF format
04/23/2015 -- ANNUAL REPORT	View image in PDF format
04/16/2014 -- ANNUAL REPORT	View image in PDF format
04/04/2013 -- ANNUAL REPORT	View image in PDF format
04/24/2012 -- ANNUAL REPORT	View image in PDF format
04/02/2011 -- ANNUAL REPORT	View image in PDF format
04/08/2010 -- ANNUAL REPORT	View image in PDF format
04/11/2009 -- ANNUAL REPORT	View image in PDF format
04/28/2008 -- ANNUAL REPORT	View image in PDF format
04/16/2007 -- ANNUAL REPORT	View image in PDF format
02/27/2006 -- ANNUAL REPORT	View image in PDF format
05/09/2005 -- ANNUAL REPORT	View image in PDF format
05/09/2005 -- Contribution Change	View image in PDF format
02/09/2004 -- ANNUAL REPORT	View image in PDF format
03/20/2003 -- ANNUAL REPORT	View image in PDF format
03/08/2002 -- ANNUAL REPORT	View image in PDF format
10/08/2001 -- Merger	View image in PDF format
03/12/2001 -- ANNUAL REPORT	View image in PDF format
07/06/2000 -- ANNUAL REPORT	View image in PDF format
05/19/2000 -- Merger	View image in PDF format
03/02/2000 -- Merger	View image in PDF format
03/01/2000 -- Merger	View image in PDF format
12/28/1999 -- Merger	View image in PDF format
12/27/1999 -- Foreign LP	View image in PDF format



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Foreign Profit Corporation
REPUBLIC SERVICES, INC.

Filing Information

Document Number	F98000003900
FEI/EIN Number	65-0716904
Date Filed	07/09/1998
State	DE
Status	ACTIVE

Principal Address

18500 North Allied Way
Phoenix, AZ 85054

Changed: 04/18/2021

Mailing Address

18500 North Allied Way
Phoenix, AZ 85054

Changed: 04/18/2021

Registered Agent Name & Address

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Officer/Director Detail

Name & Address

Title Director

Volpe, Sandra M.
18500 North Allied Way
Phoenix, AZ 85054

Title Director

Pegula, Kim S.
18500 North Allied Way
Phoenix, AZ 85054

Title Director

Snee, James P.
18500 North Allied Way
Phoenix, AZ 85054

Title Director

Weymouth, Katharine B.
18500 North Allied Way
Phoenix, AZ 85054

Title Director

Duffy, Michael A.
18500 North Allied Way
Phoenix, AZ 85054

Title CEO

Slager, Donald W.
18500 North Allied Way
Phoenix, AZ 85054

Title President

Ark, Jon Vander
18500 North Allied Way
Phoenix, AZ 85054

Title Executive Vice President, Chief Administrative Officer

Hughes, Jeffrey A.
18500 North Allied Way
Phoenix, AZ 85054

Title Executive Vice President, COO

Stuart, Timothy E.
18500 North Allied Way
Phoenix, AZ 85054

Title Executive Vice President, Chief Development Officer

Bales, Brian A.
18500 North Allied Way
Phoenix, AZ 85054

Title Executive Vice President, CFO

DelGhiaccio, Brian M.
18500 North Allied Way
Phoenix, AZ 85054

Title Treasurer

DelGhiaccio, Brian M.
18500 North Allied Way
Phoenix, AZ 85054

Title Executive Vice President, Chief Legal Officer, Chief Ethics and Compliance Officer

Ellingsen, Catharine D.
18500 North Allied Way
Phoenix, AZ 85054

Title Secretary

Ellingsen, Catharine D.
18500 North Allied Way
Phoenix, AZ 85054

Title Senior Vice President

Wilhoit, Adrienne W.
18500 North Allied Way
Phoenix, AZ 85054

Title Senior Vice President, Business Transformation

Giandinoto, Nicole
18500 North Allied Way
Phoenix, AZ 85054

Title VP, Tax

Focazio, Lawrence D.
18500 North Allied Way
Phoenix, AZ 85054

Title VP, Chief Accounting Officer

Goebel, Brian A.
18500 North Allied Way
Phoenix, AZ 85054

Title VP

Nickerson, John B.
18500 North Allied Way
Phoenix, AZ 85054

Title VP

Thomson, Jennifer L.

18500 North Allied Way
Phoenix, AZ 85054

Title Assistant Secretary

Schuler, Eileen B.
18500 North Allied Way
Phoenix, AZ 85054

Title Assistant Secretary

Wilhoit, Adrienne W.
18500 North Allied Way
Phoenix, AZ 85054

Title Assistant Secretary

Nickerson, John B.
18500 North Allied Way
Phoenix, AZ 85054

Title Assistant Secretary

Thomson, Jennifer L.
18500 North Allied Way
Phoenix, AZ 85054

Title Assistant Treasurer

Boyd, Calvin R.
18500 North Allied Way
Phoenix, AZ 85054

Title Chairman of the Board

Kadre, Manue
18500 North Allied Way
Phoenix, AZ 85054

Title Director

Slager, Donald W.
18500 North Allied Way
Phoenix, AZ 85054

Title Director

Larson, Michael
18500 North Allied Way
Phoenix, AZ 85054

Title Director

Collins, Tomago
 18500 North Allied Way
 Phoenix, AZ 85054

Title Director

Kadre, Manuel
 18500 North Allied Way
 Phoenix, AZ 85054

Title Director

Handley, Thomas W.
 18500 North Allied Way
 Phoenix, AZ 85054

Title Director

Kirk, Jennifer M.
 18500 North Allied Way
 Phoenix, AZ 85054

Annual Reports

Report Year	Filed Date
2019	04/18/2019
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01/27/2000 -- ANNUAL REPORT	View image in PDF format
02/25/1999 -- ANNUAL REPORT	View image in PDF format
07/09/1998 -- Foreign Profit	View image in PDF format

Florida Department of State, Division of Corporations

**Pasco County Commercial Collection Permit
Vehicle Identification**

Company Name:	Republic Services of Florida, Limited Partnership dba Seaside Sanitaion
Contact Person:	Terrance Dotson
Telephone No.:	(727)2333892
Date:	11/17/2020
Email:	tdotsonm@republicservices.com

	Company Unit No.	Make	Year	Vehicle ID No.	Transponder No.	License No.
1.	1236	MCNEILUS	2008	1M2AV02049M002235	8000000299	
2.	1254	HEIL	2009	1M2AVO2C89M004487	8000000273	
3.	1255	HEIL	2016	1M2AVO2COGM015691	8000000847	
4.	1256	HEIL	2016	1M2AV02C2GM015692	8000000488	
5.	1257	HEIL	2016	1M2AVO2C4GM015693	8000000489	
6.	1258	HEIL	2017	1M2AV02C4HM017512	8000000503	
7.	1259	HEIL	2017	1M2AV02C6HM017513	8000000500	
8.	2002	MCNEILUS	2014	1M2AV02C8EM011739	8000000568	
9.	2082	MCNEILUS	2006	1M2A007C97M011279	8000000557	
10.	2083	MCNEILUS	2014	1M2AVO2CXEM011421	8000000265	
11.	2084	MCNEILUS	2014	1M2AVO2COEM011203	8000000508	
12.	2095	MCNEILUS	2011	1M2AVO2C2BM007407	8000000458	
13.	2096	MCNEILUS	2011	1M2AV02C4BM007408	NO PUCK	
14.	2097	MCNEILUS	2011	1M2AV02C6BM007409	8000000544	
15.	2327	MCNEILUS	2009	1M2AVO2C19M004170	8000000272	
16.	2328	MCNEILUS	2009	1M2AVO2C39M004171	8000000505	
17.	2329	GALBREATH	2009	1M2AV02C59M004172	8000000506	
18.	3001	GALBREATH	2017	1M2AX13C1HM039207	8000000501	
19.	3002	GALBREATH	2017	1M2AX13C9HM039214	8000000502	
20.	3090	GALBREATH	2000	1M2P267C0YM047606	8000000490	
21.						
22.						
23.						
24.						
25.						
26.						

PASCO COUNTY BUSINESS TAX RECEIPT

Issued pursuant and subject to Florida Statutes and Pasco County Ordinances. Issuance does not certify compliance with zoning or other laws. This receipt must be posted conspicuously in place of business.

2021

Expires September 30th



ACCOUNT #:: 00229

SIC CODE: 4212.02

MIKE FASANO
TAX COLLECTOR
PASCO COUNTY FLORIDA

TYPE OF BUSINESS
GARBAGE COLLECTION (RENEWAL)
STATE LICENSE #

SEASIDE SANITATION

8608 ARCOLA AVE
HUDSON, FL 34667-3637

OWNER/QUALIFYING AGENT
SEASIDE SANITATION

LOCATION ADDRESS:
8608 ARCOLA AVE
HUDSON, FL 34667-3637

DATE	RECEIPT	AMOUNT
07/17/2020	20-0-084291	93.75

Dear Business Owner:

Your 2021 Pasco County Business Tax Receipt is printed above. Please detach the receipt and display it in a place that is visible to the public and available for inspection.

The Pasco County Business Tax Receipt is in addition to any other license or certificate that may be required by law and does not signify compliance with zoning, health, or regulatory requirements. The Pasco County Business Tax Receipt is non-regulatory and is not meant to be a certification of the holder's ability to perform the service for which it is registered.

Business Tax Receipts expire September 30th. Annual renewals are mailed in June to the address of record at that time. Please contact our office if there are any changes to your business name, ownership, physical address, or closing of your business.

Thank you for allowing us to serve you!

MIKE FASANO
PASCO COUNTY TAX COLLECTOR

EAST PASCO GOVERNMENT CENTER
DADE CITY

WEST PASCO GOVERNMENT CENTER
NEW PORT RICHEY

TAX COLLECTOR BUILDING
GULF HARBORS

CENTRAL PASCO GOVERNMENT CENTER
LAND O'LAKES

COMPARK 75 BUSINESS PARK
WESLEY CHAPEL

CALL CENTER: MONDAY - FRIDAY 8:30 AM - 5:00 PM (352) 521-4338 • (727) 847-8032 • (813) 235-6076

First Name	Last Name	Job Title	Length of Service
Richard	Walker	Driver - CDL (B)	3.00
Craig	Vogel	Behind the Wheel Instructor	6.50
Brian	Archer	Relief Driver - CDL (B)	3.75
Kenneth	Germer	Driver - CDL (B)	28.08
Wilfredo	Cay Rojas	Behind the Wheel Instructor	3.08
Eric	Vigo	Driver - CDL (B)	7.08
Robert	Sundean	Driver - CDL (B)	5.16
Mark	Villalpando	Driver - CDL (B)	8.41
Cody	Schroyer	Driver - CDL (B)	4.75
Chris	Berge	Container Driver CDL B	9.16
Rafael	Garcia	Residential Helper I	5.33
Randy	Johnson	Behind the Wheel Instructor	22.66
Marvin	Sanchez	Driver - CDL (B)	8.16
Herbert	Martinez	Driver - CDL (B)	14.08
Brian	Funderburke	Driver - CDL (B)	2.58
Fernando	Ramos	Driver - CDL (B)	5.41
Ernesto	Garcia	Driver - CDL (B)	7.66
Susie	Da Silva	Driver - CDL (B)	7.08
Kris	Hatch	Driver - CDL (B)	3.08
Christophers	Berge	Residential Helper I	2.75
Thomas	Kocab	Driver - CDL (B)	2.33
Adam	Loughner	Residential Helper I	2.33
Mark	Lambert	Relief Driver - CDL (B)	1.91
Fayad	Alli	Driver - CDL (B)	1.91
James	McGroary	Driver - CDL (B)	7.50
Denise	Carter	Driver - CDL (B)	8.91
Craig	Byerley	Relief Driver - CDL (B)	8.08
David	Logsted	Driver - CDL (B)	6.58
Jeremy	Devos	Driver - CDL (B)	5.50
Dustin	Smiley	Residential Helper I	4.33
Jerome	Entler	Residential Helper I	3.83
John	Rostron	Driver - CDL (B)	3.33
Floyd	Mayes	Driver - CDL (B)	3.08
Anthony	Martinez	Driver - CDL (B)	3.00
Joshua	Zarett	Residential Helper I	2.16
Allen	Rogers	Driver - CDL (B)	8.83
John	Medeiros	Driver - CDL (B)	8.83
Jason	Karas	Driver - CDL (B)	7.25
Jose	Morales	Driver - CDL (B)	7.16
Anthony	Prailow	Residential Helper I	7.16
Steven	Guilherme	Driver - CDL (B)	7.08
Jonathan	Womack	Driver - CDL (B)	5.25
Michael	Staton	Driver - CDL (B)	4.00
Aaron	Santiago	Driver - CDL (B)	3.50
Maciej	Chowaniak	Driver - CDL (B)	2.66
Cornelius	Masterson	Driver - CDL (B)	2.25

Gregory	Crew	Relief Driver - CDL (B)	1.50
Luis	Basquit	Driver - CDL (B)	8.41
Johnathan	Carter	Relief Driver - CDL (B)	8.41
Andrew	Wheelock	Driver - CDL (B)	5.41
Emanuel	Dudley	Driver - CDL (B)	3.66
Jose	Mercado	Residential Helper I	3.25
Anthony	Martinez	Driver - CDL (B)	2.91
Johnny	Arzon	Driver - CDL (B)	2.83
Anthony	Castano	Driver - CDL (B)	2.83
Roger	Beam	Relief Driver - CDL (B)	2.50
Courtney	Turner	Relief Driver - CDL (B)	2.33
Maurice	Green	Driver - CDL (B)	2.08
Bernabe	Mojica	Residential Helper I	2.08
Juan	Candelaria	Driver - CDL (B)	1.58
Ricardo	Sierra	Driver - CDL (B)	1.58
Noel	Diaz	Driver - CDL (B)	1.58
Jose	Ramirez	Driver - CDL (B)	1.50
Tyler	Schweibinz	Driver - CDL (B)	1.33
Carlos	Dennis	Residential Helper I	1.33
Thomas	Gossman	Driver - CDL (B)	1.25
Peter	Gigintzis	Driver - CDL (B)	1.16
Shane	Gardner	Driver - CDL (B)	1.16
David	Roberts	Driver - CDL (B)	1.16
Christopher	Bickelhaupt	Driver - CDL (B)	1.08
Deangelo	President	Driver - CDL (B)	1.16
James	OConnor	Residential Helper I	1.16
Michael	Lawless	Driver - CDL (B)	1.08
Jacob	Widla	Driver - CDL (B)	1.16
Walter	Desthers	Driver - CDL (B)	1.08
Danny	Beam	Residential Helper I	1.08
Pedro	Quinonez	Driver - CDL (B)	1.08
Jesus	Diaz	Driver - CDL (B)	0.83
Carl	Parson	Driver - CDL (B)	0.75
Fred	Cassagnol	Residential Helper I	0.75
Jose	Hernandez	Driver - CDL (B)	0.75
Jose	Anaya	Driver - CDL (B)	0.66
Jock	Sanders	Driver - CDL (B)	0.58
Devin Lee	Brown	Driver - CDL (B)	0.58
Peter	Ortiz	Driver - CDL (B)	0.58
Edith	Desamour	Driver - CDL (B)	0.41
Cordez	Gatheright	Driver - CDL (B)	0.33
Jomil	Camacho	Driver - CDL (B)	0.16
Sergio	Gomez	Driver - CDL (B)	0.16
Derious	Wilcox	Driver - CDL (B)	0.16
Jason	Gonzalez	Driver - CDL (B)	0.16
Joseph	Colasante	Driver - CDL (B)	0.08
Keith	Makosiej	Driver - CDL (B)	0.08

James	Seyfried	Driver Trainee	0.00
Rolando	Nunez	Driver - CDL (B)	0.00
Tony	Williams	Driver Trainee	0.00
Jonathan	Caraballo	Driver - CDL (B)	5.41
Sofia	Martinez	Driver - CDL (B)	0.16
Shane	Mitchell	Maintenance Shop Technician A	5.91
Zachary	Neblock	Maintenance Shop Technician A	8.33
William	Lynch	Fleet Maintenance Supervisor	7.16
Eloy	Reyna	Maintenance Shop Technician A	7.08
Jason	Cashman	Maintenance Shop Technician C	8.58
Dakota	Hatch	Maintenance Shop Clerk	0.91
Justin	Bracke	Maintenance Shop Laborer	0.58
John	Taylor	Container Shop Welder	9.00
Jannine	Mitchell	Ops Supervisor Hauling	20.91
Alfonso	Clark	Ops Supervisor Hauling	2.33
Kenneth	Mack	Ops Supervisor Hauling	14.16
Warren	Fakles	Account Executive	2.58
Victor	Martinez	Construction Account Manager	2.25
Lynn	Henderson	Associate Account Manager	0.75
Terrance	Dotson	Division Manager Hauling	7.66



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/29/2021

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 CANNON COCHRAN MANAGEMENT SERVICES, INC. 17015 N. SCOTTSDALE RD SCOTTSDALE, AZ 85255	CONTACT NAME:	
	PHONE (A/C No.Ext):	FAX (A/C No.Ext):
INSURED REPUBLIC SERVICES, INC. 18500 N. ALLIED WAY PHOENIX, AZ 85054	E-MAIL ADDRESS:certificateteam@ccmsi.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: ACE American Insurance Co.	NAIC # 22667
	INSURER B: Indemnity Insurance Co of North America	43575
	INSURER C: ACE Fire Underwriters Insurance Co.	20702
	INSURER D: Illinois Union Insurance Company	27960
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER: 1977790** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			HDO G72482074	06/30/2021	06/30/2022	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 5,000,000 MED EXP (Any one person) PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS -COMP/OP AGG \$ 5,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			ISA H25549752	06/30/2021	06/30/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE AGGREGATE
B A C A D	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	N/A	WLR C67824064 AOS WLR C67824027 CA/MA/OR SCF C67824106 - WI WCU C67824143 - OH XS TNS C68990592 - TX NSXS	06/30/2021 06/30/2021 06/30/2021 06/30/2021 06/30/2021	06/30/2022 06/30/2022 06/30/2022 06/30/2022 06/30/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 3,000,000 E.L. DISEASE -EA EMPLOYEE \$ 3,000,000 E.L. DISEASE -POLICY LIMIT \$ 3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Division Number: 3757 - Named Insured Includes: Republic Services of Florida, Limited Partnership - Dba: Seaside Sanitation

CERTIFICATE HOLDER CITY OF NEW PORT RICHEY, FL 5919 Main Street New Port Richey, FL 34652-2715 United States	CANCELLATION 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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ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED	
POLICY NUMBER See First Page		REPUBLIC SERVICES, INC. 18500 N. ALLIED WAY PHOENIX, AZ 85054	
CARRIER See First Page	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

CERTIFICATE NUMBER: 1977790

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.

FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

The following provisions apply when required by written contract. As used below, the term certificate holder also includes any person or organization that the insured has become obligated to include as a result of an executed contract or agreement.

GENERAL LIABILITY:

Certificate holder is Additional Insured including on-going and completed operations when required by written contract.
 Coverage is primary and non-contributory when required by written contract.
 Waiver of Subrogation in favor of the certificate holder is included when required by written contract.

AUTO LIABILITY:

Certificate holder is Additional Insured when required by written contract.
 Coverage is primary and non-contributory when required by written contract.
 Waiver of Subrogation in favor of the certificate holder is included when required by written contract.

WORKERS COMPENSATION AND EMPLOYERS LIABILITY:

Waiver of Subrogation in favor of the certificate holder is included when required by written contract where allowed by state law.

Stop gap coverage for ND, WA and WY is covered under policy no. WLR C67824064 and stop gap coverage for OH is covered under policy no. WCU C67824143, as noted on page 1 of this certificate.

TEXAS EXCESS INDEMNITY AND EMPLOYERS LIABILITY:

Insured is a registered non-subscriber to the Texas Workers Compensation Act. Insured has filed an approved Indemnity Plan with the Texas Department of Insurance which offers an alternative in benefits to employees rather than the traditional Workers Compensation Insurance in Texas. The excess policy (#TNS C68990592) shown on this certificate provides excess Indemnity and Employers Liability coverage for the approved Indemnity Plan.

Contractual Liability is included in the General Liability and Automobile Liability coverage forms. The General Liability and Automobile Liability policies do not contain endorsements excluding Contractual Liability.

Separation of Insured (Cross Liability) coverage is provided to the Additional Insured, when required by written contract, per the Conditions of the Commercial General Liability Coverage form and the Automobile Liability Coverage form.