



**Planning and Zoning Administration**

Sherburne County Government Center  
13880 Business Center  
Suite 100

Elk River, MN 55330-4668  
(763) 765-4459  
1-800-438-0578

# 2021 Solid Waste Hauler License Application

Pursuant to Section 4.0 of the Sherburne County Solid Waste Management Ordinance, no person shall may collect, transport, or dispose of solid waste generated within the County except in full compliance with the County's solid waste management ordinance after having obtained a license to do. Licenses are required for mixed municipal solid waste (MSW), construction and demolition debris (C&D), and/or industrial solid waste (ISW). Pursuant to Section 3.5 Sherburne County Solid Waste Management Ordinance, any use of land for solid waste management within the County Shall comply with applicable Zoning requirements of the County Zoning Ordinance, or the requirements of applicable municipal land use ordinances. No license shall be granted unless all necessary permits and zoning approvals have first been issued by the County or municipality, as applicable.

**Contingent upon approval of this application, Hauler Licenses shall be from: February 1<sup>st</sup> 2021 through January 31<sup>st</sup> 2022.**

Check if either a New License, or if a Renewal License:

**NEW LICENSE:**

To obtain a Hauler License, haulers must submit this completed application to Stephanie Reynolds, Solid Waste Environmental Specialist. If you have questions filling out this application, please call 763-765-4459.

**RENEWAL LICENSE:**

Hauler License renewal applications will be sent to those that are licensed during the previous year, and the applicant shall submit a completed application NO LATER than January 15<sup>th</sup> to Stephanie Reynolds, Environmental Specialist. If you have questions filling out this application, please call 763-765-4459.

Please Note: You must submit a copy of your current bond, current proof of insurance, and most recent copy of a vehicle inspection report (you can attach these at the bottom of this application or email them to [stephanie.reynolds@co.sherburne.mn.us](mailto:stephanie.reynolds@co.sherburne.mn.us)). You must also submit a check for the hauler application fee (calculation below at the end of page 7). You will not be considered licensed if any of these items are missing.

**This section completed by Sherburne County Zoning staff:**

Date received: \_\_\_\_\_ Fees received: \_\_\_\_\_ Check number: \_\_\_\_\_

Hauler Bond (*Submitted or On-File*)  Yes or  No

Automotive & General Liability Insurance  Yes or  No

Date application approved: \_\_\_\_\_ By: \_\_\_\_\_

**I. LICENSEE INFORMATION**

|   |                      |
|---|----------------------|
| 1. Licensee Name ( <i>Last, First, Middle</i> )   | 2. Title:            |
|   | 3. Phone #:          |
|   | 4. Fax #:            |
|   | 5. E-mail:           |
| 6. Legal Business Name:   | 7. Business Phone #: |
|   | 8. Business Fax #:   |
|   | 9. MN Tax ID #:      |
| 10. Contact Person for this Application<br>( <i>Last, First, Middle</i> ):  | 11. Title:           |
|   | 12. Phone #:         |
|   | 13. Fax #:           |
|   | 14. E-mail:          |
| 15. Business Address: ( <i>Address, City, State, Zip Code</i> )   |                      |
| 16. Local Mailing Address: ( <i>if different than Business Address</i> )  |                      |
| 17. Do you conduct business and/or advertise under a name other than the legal business name above?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |                      |
| If yes, provide the assumed name(s) and indicate if registered with MN Sec. Of  |                      |
| State's Office: _____   |                      |

DBA (*Doing Business As*): \_\_\_\_\_

Registered?  YES  NO

If not registered, explain: \_\_\_\_\_

---

18. Business Type:

Sole proprietor  Partnership  LLC  C Corp.  S Corp.  Other: \_\_\_\_\_

---

19. Does the business have a website?

YES - Website address is: \_\_\_\_\_  NO

**II. VEHICLE INFORMATION**

**A. Provide the following for the vehicles and equipment to be used for Collection.**

|     | Vehicle Make | Vehicle Model | Rated Capacity (cu. Yd) | License Plate Number | Type | Number of Axles |
|-----|--------------|---------------|-------------------------|----------------------|------|-----------------|
| 1)  |              |               |                         |                      |      |                 |
| 2)  |              |               |                         |                      |      |                 |
| 3)  |              |               |                         |                      |      |                 |
| 4)  |              |               |                         |                      |      |                 |
| 5)  |              |               |                         |                      |      |                 |
| 6)  |              |               |                         |                      |      |                 |
| 7)  |              |               |                         |                      |      |                 |
| 8)  |              |               |                         |                      |      |                 |
| 9)  |              |               |                         |                      |      |                 |
| 10) |              |               |                         |                      |      |                 |

*Attach Additional Pages as Necessary on the Last Page of this Application*

**B. Provide the location(s) where vehicles and equipment will be stored:**

|   |
|---|
| 1. VEHICLES - Primary storage location (Business Name, Address, City)                                       |
| 2. VEHICLES - Secondary storage location (Business Name, Address, City)                                     |
| 3. EQUIPMENT - (roll off boxes, containers, etc)- Primary storage location (Business Name, Address, City)   |
| 4. EQUIPMENT - (roll off boxes, containers, etc)- Secondary storage location (Business Name, Address, City) |

### III. VEHICLE INSPECTION REPORTS

Provide the most recent annual Commercial Vehicle Inspection Reports for each vehicle required to have them. Check one and complete:

Commercial Vehicle Inspection Reports have been provided with application form. (attach on the last page)

I don't have Commercial Vehicle Inspection Reports for my vehicles because:

(explain)\_\_\_\_\_

### IV. TYPES OF SOLID WASTE TO BE COLLECTED AND TRANSPORTED

*(Check each waste type for which you will be providing services during this licensing year):*

Mixed Municipal Solid Waste (MSW)

Do you offer recycling to all residential, commercial and industrial customers?  Yes  No

Construction and Demolition Waste (C&D)

Industrial Solid Waste (including asbestos and ash)

**RECYCLABLE MATERIALS** *(Indicated below how recyclable materials collected are handled (please check all that apply):*

Delivered to Transfer Station *(list permit #, name, and location):* \_\_\_\_\_

Delivered to Materials Recovery Facility (MRF) *(list permit #, name, and location):* \_\_\_\_\_

Sent directly to market.

Delivered to a Recycling Center. *(list permit #, name, and location):* \_\_\_\_\_

Other. *Describe:* \_\_\_\_\_

**SOURCE SEPARATED ORGANICS** *(Indicate below on how source separated organics are handled (please check all that apply):*

I do not collect this waste type.

Delivered to a Transfer Station *(list permit #, name, and location):* \_\_\_\_\_

Delivered to a Compost Facility. *(list permit #, name, and location):* \_\_\_\_\_

Other. *Describe:* \_\_\_\_\_

## V. WORKERS COMPENSATION INSURANCE COVERAGE

MN § 176.182 requires that the Licensee provide the Licensing Agency with information concerning Worker's Compensation Insurance Coverage.

Name of Insurance Company: \_\_\_\_\_  
(Not the Insurance Agent)

Policy Number: \_\_\_\_\_ Date of Coverage: \_\_\_\_\_

(OR)

I am not required to have Worker's Compensation Insurance Coverage because (please indicate below):

I have no employees covered by the law (**submit a copy of your permit to self-insure**)

Other (please specify): \_\_\_\_\_

## VI. AUTOMOTIVE & GENERAL LIABILITY INSURANCE COVERAGE

Provide Sherburne County with a Certificate of Insurance for current automotive and general liability policies in compliance with the County's minimum requirements, as outlined in the Sherburne County Solid Waste Management Ordinance Section 4.5.

### General Liability

- \$1,000,000 for each occurrence
- \$2,000,000 aggregate

### Automotive Liability

- \$1,500,000 per accident

### **Please check one:**

- Certificate of Insurance included with application (attach on the last page):

(or)

- Current Certificate of Insurance on file with Sherburne County:

## VII. BOND REQUIREMENT

Pursuant to Section 3.9 of the Sherburne County Solid Waste Management Ordinance, a **\$10,000** performance bond shall be required prior to the issuance of any license to engage in a solid waste management activity.

**Please check one:**

- Bond included with application (attach on the last page):

(or)

- Current Bond on file with Sherburne County:

## VIII. MUNICIPAL SOLID WASTE (MSW) REPORTING REQUIRED

Pursuant to Section 4.3 of the Sherburne County Solid Waste Management Ordinance, ALL HAULERS shall keep records and report annually to the Department information relating to the types and quantities of municipal solid waste (MSW) collected, number of residential and non-residential accounts, total amount of MSW that was delivered, deposited, processed or marketed by facility.

### **SHERBURNE COUNTY SERVICE AREA**

***Townships of:*** Baldwin, Big Lake, Blue Hill, Livonia, Orrock, Becker, Clear Lake, Haven, Palmer, Santiago

***Cities of:*** Big Lake, Elk River, Zimmerman, and that portion of Princeton that is in Sherburne County, Becker, Clear Lake, and that portion of St. Cloud that is in Sherburne County

### Document weight of **MSW** collected by each month in 2020

#### a) Residential Accounts

|                 | January | February | March | April | May | June | July | August | September | October | November | December |
|-----------------|---------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|----------|
| Weight/<br>Tons |         |          |       |       |     |      |      |        |           |         |          |          |

I. Total weight of **Residential MSW** collected in 2020: \_\_\_\_\_

II. Number of **Residential Accounts** in 2020: \_\_\_\_\_

#### b) Non-Residential Accounts (Commercial, Industrial, Other)

|                 | January | February | March | April | May | June | July | August | September | October | November | December |
|-----------------|---------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|----------|
| Weight/<br>Tons |         |          |       |       |     |      |      |        |           |         |          |          |

I. Total weight of **Non-Residential MSW** collected in 2020: \_\_\_\_\_

II. Number of **Non-Residential Accounts** in 2020: \_\_\_\_\_

c) **List the Solid Waste Facilities and the amount of MSW delivered, deposited, processed, or marketed during 2020:**

| Solid Waste Facility | Amount of Waste |
|----------------------|-----------------|
| A)                   |                 |
| B)                   |                 |
| C)                   |                 |

**D) Recycling Materials –**

Pursuant to Section 4.7 (A) of the Sherburne County Solid Waste Ordinance, haulers pursuant to Section 4.0 of this Ordinance shall provide recycling services to all residential, commercial and industrial customers in Sherburne County.

Pursuant to Section 4.7 (B) of the Sherburne County Solid Waste Ordinance, at a minimum, the following materials shall be collected: aluminum and steel cans, newspaper, clear, brown and green glass, plastics, corrugated cardboard and office paper.

Pursuant to Section 4.7 (C) of the Sherburne County Solid Waste Ordinance, this section shall apply to all persons seeking a license under the provisions of this Ordinance to collect and transport municipal solid waste, at the point of generation or that transfer or otherwise transport solid waste to a disposal or processing facility.

| Material                     | Total Amount Collected (By Tonnage) |  |
|------------------------------|-------------------------------------|--|
|                              | <i>Tons (Residential Accounts)</i>  | <i>Tons (Non-Residential Accounts)</i> |
| Paper                        |                                     |  |
| Metal                        |                                     |  |
| Glass                        |                                     |  |
| Plastic                      |                                     |  |
| Organics                     |                                     |  |
| Appliances                   |                                     |  |
| Vehicle Batteries            |                                     |  |
| Tires                        |                                     |  |
| Electronics                  |                                     |  |
| Other Items<br>(Please list) |                                     |  |
| •                            |                                     |  |
| •                            |                                     |  |
| •                            |                                     |  |
| <b>COMMINGLED</b>            |                                     |  |

7. Does your hauling company report MSW, C & D, and/or recyclables to the MPCA annually?

Yes       No

**IX. HAULER APPLICATION FEES**

- a) Application Base Fee: **\$200**
- b) Vehicles used for Solid Waste Collection: 25 times \_\_\_\_\_/per vehicle  
*(Solid Waste includes MSW, C&D, and ISW)*

**X. CERTIFICATION AND SIGNATURES**

I hereby apply for a 2021 Sherburne County Solid Waste License to collect and transport solid waste within Sherburne County during a period commencing on February 1, 2021 and ending January 31, 2022.

I certify that the information provided in this License Application and any attachment is correct and complete. I further certify that I shall comply with the Sherburne County Solid Waste Management Ordinance. I understand that failure to comply with the Sherburne County Solid Waste Management Ordinance may result in revocation of this license and/or legal actions through the County Attorney's Office. I also certify that I am compliant with all Sherburne County Ordinances.

APPLICANT'S SIGNATURE \_\_\_\_\_

TITLE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

*Note that applicant must be a managerial level employee with control over or responsibility for the hauling operation, or an owner, officer, director, or majority and controlling shareholder, or partner, or sole proprietor.*

*Also Note: you must mail in your application fee to the address below after filling out your license application*

Below you can attach a copy of your bond, proof of insurance, and your most recent vehicle inspection report. You can also email a copy of all three to [stephanie.reynolds@co.sherburne.mn.us](mailto:stephanie.reynolds@co.sherburne.mn.us) or mail it to:

Sherburne County Planning and Zoning  
Attn: Stephanie Reynolds  
13880 Business Center Dr. NW Suite 100  
Elk River MN 55330