



SOLID WASTE HAULER LICENSE APPLICATION

February 1, 2023 – January 31, 2024

APPLICATIONS ARE DUE ON OR BEFORE JANUARY 15, 2023

The collection, transportation, or disposal of any solid waste generated within the County is prohibited except when conducted within full compliance with the County's Solid Waste Management Ordinance after having obtained a license. Any use of land for solid waste management within the County shall comply with the Solid Waste Management Ordinance and Zoning Ordinance. No license shall be granted unless all necessary permits and zoning approvals have first been issued by the County or municipality, as applicable.

Sherburne County Service area:

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

Cities: Big Lake, Elk River, Zimmerman, a portion of Princeton, Becker, Clear Lake, a portion of St. Cloud

I. LICENSEE INFORMATION

New License

Renewal License

| | |
|---|---|
| Legal Business Name: | DBA (<i>Doing Business As</i>): |
| | Business Address: |
| | Mailing Address (<i>if different than Business Address</i>): |
| | Phone #: |
| | MN Tax ID #: |
| | Business Registered? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | Business Type: <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> C Corp. <input type="checkbox"/> S Corp. <input type="checkbox"/> Other: _____ |
| Business Contact (<i>Last, First Middle</i>): | Position Title: |
| | Phone #: |
| | E-mail: |

II. VEHICLE INFORMATION

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

| | Vehicle Make | Vehicle Model | Vehicle Type | License Plate # | Rated Capacity (cu. yd) | # of Axles | Commercial Vehicle Inspection required (Y or N) |
|---|--------------|---------------|--------------|-----------------|-------------------------|------------|---|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| 5 | | | | | | | |

Attach additional pages as necessary to the application

Vehicle and equipment (roll off boxes, containers, etc.) storage locations:

| | |
|-----------|--|
| Vehicle | Primary location (Business Name, Address, City): |
| | Secondary location (Business Name, Address, City): |
| Equipment | Primary location (Business Name, Address, City): |
| | Secondary location (Business Name, Address, City): |

Provide the most recent Commercial Vehicle Inspection Reports for each vehicle required:

- Commercial Vehicle Inspection Reports included with application
- Commercial Vehicle Inspection Reports are not required for my vehicles

III. HAULER APPLICATION FEES

Application Base Fee: \$200

Number of vehicles used for all Solid Waste collection: _____ x \$25 per vehicle

TOTAL HAULER FEE: _____

Payment accepted via check or credit card by calling 763-765-4460. Credit cards will include a 2.35% processing fee. Hauler Fees will NOT be processed until the hauler application is approved

Check may be sent out to:

Sherburne County Planning and Zoning
 Attn: Solid Waste Environmental Specialist
 13880 Business Center Dr. NW Suite 100
 Elk River MN 55330

IV. WORKERS COMPENSATION INSURANCE COVERAGE

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

| | |
|--|--|
| Insurance Company (<i>not insurance agent</i>) | |
| Policy number | |
| Date of coverage | |

I am not required to have Worker's Compensation Insurance Coverage because:

I have *NO* employees required by law to cover

Other: _____

V. INSURANCE COVERAGE REQUIREMENT

General Liability

\$1,000,000 for each occurrence

\$2,000,000 aggregate

Automotive Liability

\$1,500,000 per accident

Certificate of Insurance included with application

Current Certificate of Insurance on file with Sherburne County

VI. BOND REQUIREMENT (\$10,000)

Bond included with application

Current Bond on file with Sherburne County

VII. TYPES OF SOLID WASTE TO BE COLLECTED AND TRANSPORTED

Check each type for which you will be providing services during this licensing year.

Mixed Municipal Solid Waste (MSW)

Yes No Recycling services offered to all Sherburne County residential, commercial and industrial customers? Pursuant to Section 4.7 (A) of the Solid Waste Ordinance, haulers shall provide recycling services to all residential, commercial, and industrial customers in Sherburne County.

Yes No Was MSW collected during 2022? If so, complete Section VIII Reporting Required of this application.

Construction and Demolition Waste (C&D)

Industrial Solid Waste (includes asbestos and ash)

Recyclable materials

Yes No Was MSW collected during 2022? If so, complete Section VIII Reporting Required of this application.

Indicate below how Recyclable materials collected are handled.

Delivered to Transfer Station (MPCA permit #) _____

Delivered to Materials Recovery Facility (MRF) (MPCA permit #) _____

Delivered to a Recycling Center. (MPCA permit #) _____

Sent directly to market

Other: _____

Source Separated Organics (SSO)

Yes No Were SSO collected during 2022? If so, complete Section VIII Reporting Required of this application.

Indicate below how SSO collected are handled.

Delivered to a Transfer Station (MPCA permit #) _____

Delivered to a Compost Facility (MPCA permit #) _____

Other: _____

Yard Waste

Yes No Was Yard Waste collected during 2022? If so, complete Section VIII Reporting Required of this application.

Indicate below how Yard Waste collected is handled.

Delivered to a Transfer Station (MPCA permit #) _____

Delivered to a Compost Facility (MPCA permit #) _____

Other: _____

VIII. 2022 MSW AND RECYCLABLE MATERIAL REPORTING REQUIRED

Yes No MSW and recyclable materials are reported annually to the MPCA.

Complete the following for MSW reporting.

RESIDENTIAL ACCOUNTS

| JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEPT | OCT | NOV | DEC | Total MSW (TONS) |
|-----|-----|-----|-----|-----|-----|-----|-----|------|-----|-----|-----|------------------|
| | | | | | | | | | | | | |

Number of Residential accounts: _____

COMMERCIAL ACCOUNTS

| JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEPT | OCT | NOV | DEC | Total MSW (TONS) |
|-----|-----|-----|-----|-----|-----|-----|-----|------|-----|-----|-----|------------------|
| | | | | | | | | | | | | |

Number of Commercial accounts: _____

Solid Waste Facilities in which MSW is delivered, deposited, processed, or marketed.

| Solid Waste Facility (Name, Address) | Amount of Waste (TONS) |
|--------------------------------------|------------------------|
| | |
| | |
| | |

Yes or No Did you enter your recyclable materials collected by weight information into ReTRAC (<https://connect.re-trac.com/>)

If you checked "No" you are required to fill out the "recyclable materials" table below.

Complete the following reporting for recyclable materials collected by weight.

| Recyclable Material | Residential (TONS) | Commercial (TONS) |
|---------------------------------------|--------------------|-------------------|
| Commingled Total (Tons) | | |
| Mixed Paper | | |
| Cardboard/ Boxboard | | |
| Ferrous Metal | | |
| Non-Ferrous Metal | | |
| Mixed Glass | | |
| Mixed Plastic | | |
| Organics (Food to Livestock) | | |
| Organics (Food waste to SSO Facility) | | |
| Organics (Yard waste) | | |

| | | |
|-------------------|--|--|
| Appliances | | |
| Vehicle Batteries | | |
| Tires | | |
| Electronics | | |

IX. CERTIFICATION AND SIGNATURES

I hereby apply for a 2022 Sherburne County Solid Waste License to collect and transport solid waste within Sherburne County during a period commencing on February 1, 2023 and ending January 31, 2024.

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: 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.

The application and all attached documentation may be emailed to SolidWaste@co.sherburne.mn.us or mailed to:

Sherburne County Planning and Zoning
 Attn: Solid Waste Hauler Coordinator
 13880 Business Center Dr. NW Suite 100
 Elk River MN 55330

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: _____