#### (X) Action FROM (DEPT/ DIVISION): Community Development/Planning Department PROGRAM: Solid Waste Advisory Committee SUBJECT: Solid Waste Franchise Renewals Background: On April 18, 2023 the SWAC met ) INFORMATIONAL and voted to approve recommendation of the (X) ACTION REQUESTED: following franchise renewals to the Board of Review Solid Waste Franchise Renewal Commissioners for final approval; Pendleton applications and vote yea/nay to renew the Sanitary, Humbert's Refuse, Sanitary Disposal, franchise for another year. Adopt Order Nos. BCC2024-011; BCC2024-012; BCC2024-013; Eastern Or Waste and Quality Compost. All BCC2024-014; BCC2024-015; BCC2024-016; requirements of renewal have been satisfied. BCC2024-017: BCC2024-018 ATTACHMENTS: 1. Franchise renewal applications and supporting documentation from Humbert's Refuse, Pendleton Sanitary, Sanitary Disposal and Eastern Or Waste. 2. Excerpt of minutes from April 18, 2023 SWAC meeting 3. Proposed Orders Submitted By: Gina Miller \*\*\*\*\*\*\*\*\*\*\*\*\*For Internal Use Only\*\*\*\*\*\*\*\*\* Checkoffs: ) Exec. Asst. To be notified of Meeting: X ) Dept. Head (copy) Mike McHenry, Gina Miller ) Human Resources (copy) ) Budget (copy) ) Fiscal

) Discussion only

AGENDA ITEM FOR ADMINISTRATIVE MEETING

Needed at Meeting:

Mike McHenry, Gina Miller

Scheduled for meeting on: February 7, 2024	_
Action taken:	
****************	
follow-up:	

X ) Legal (copy) ) (Other – List:



## **UMATILLA COUNTY**

216 SE 4<sup>TH</sup> ST. PENDLETON, OR 97801 RECEIVED

MAR 1 0 2023

UMATILLA COUNTY PLANNING DEPARTMENT

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

(V) D	ISPOSAL SITE COLLECTION SITE						
** * ** *	** * ** * ** * ** * ** * ** * ** * **						
Company name:	Pendleton Sanitary Service, Inc						
Owner name:	Michael R McHenry						
Address:	5500 NW Rieth Road						
Phone:	541-276-1271						
Email:	mike@pendletonsanitaryservice.com						
□ copy of <u>cu</u> □ if applicable □ Annual Fra • Col	ck list ise holders must submit this form with the following documents attached for reviews rent Certificate of Insurance le, attach report of any changes to your Franchise operation/business unchise fees paid form (attached) lection (2% of gross receipts to be paid quarterly) posal site (\$100 Annual fee)						

## << ALL APPLICATIONS MUST BE RECEIVED BY MARCH 31, 2023 >>

ALL COLLECTION FRANCHISE FEES MUST BE PAID IN FULL THROUGH DECEMBER 2022

		For officia	al use only
Umatilla Cou	nty Solid Waste C Approve <u>X</u>	ommittee re Deny	commendation to Board of CommissionersDate:04/18/23
Comments: Une	posal franchis mot numous approval vo	aon to approve	e: Dan Wysocki 2nd: Ashley Priard Ation (Mile MeHenry)
Umatilla Cou	nty Board of Com	missioners c	decision:
			_ Date:
Comments:			



DATE (MM/DD/YYYY) 03/28/2023

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).

_	nis certificate does not confer rights to	the	certif	icate holder in lieu of such	n endorsement(s).					
	DUCER				CONTACT Kylee Ev					
Wheatland Insurance Center Inc					PHONE (A/C, No, Ext): (541) 276-7441 FAX (A/C, No): (541) 276-7688					
1	Box 1127				E-MAIL ADDRESS: kylee.ev	ans@wheatlan	dins.com			
229	SW First					NSURER(S) AFFO	RDING COVERAGE		NAIC#	
Per	ndleton			OR 97801	INSURER A: Employ	ers Mutual Cas	ualty Co.		21415	
INSU	RED				INSURER B : SAIF -	Service Center			36196	
Pendleton Sanitary Services, Inc					INSURER C :					
	P O Box 1405				INSURER D					
					INSURER E :					
	Pendleton			OR 97801	INSURER F:					
CO	VERAGES CEF	TIFIC	ATE	NUMBER: 22/23			REVISION NUMBER:			
IN CI EX	HIS IS TO CERTIFY THAT THE POLICIES OF IDICATED. NOTWITHSTANDING ANY REQUENTIFICATE MAY BE ISSUED OR MAY PERT KCLUSIONS AND CONDITIONS OF SUCH PO	IREME AIN, T OLICIE	ENT, TI HE IN: S. LIM	ERM OR CONDITION OF ANY SURANCE AFFORDED BY THE 11TS SHOWN MAY HAVE BEEN	CONTRACT OR OTHE POLICIES DESCRIBE REDUCED BY PAID O	R DOCUMENT ED HEREIN IS S CLAIMS.	WITH RESPECT TO WHICH T	THIS		
INSR LTR		INSD	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	rs		
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE DAMAGE TO RENTED	- U	00,000	
	CLAIMS-MADE OCCUR						PREMISES (Ea occurrence)	\$ 500,	,000	
							MED EXP (Any one person)	\$ 10,0	00	
Α				5X48168	06/01/2022	06/01/2023	PERSONAL & ADV INJURY	\$ 1,00	0,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,00	0,000	
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,00	0,000	
	OTHER:							\$		
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,00	0,000	
	X ANY AUTO						BODILY INJURY (Per person)	\$		
Α	OWNED SCHEDULED AUTOS			5X48168	06/01/2022	06/01/2023	BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
							Medical payments	\$ 5,00	0	
	✓ UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$ 3,00	0,000	
Α	EXCESS LIAB CLAIMS-MADE		5X48168		06/01/2022	06/01/2023	AGGREGATE	\$		
	DED X RETENTION \$ 10,000							\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						➤ PER STATUTE OTH-			
В	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A		412728	04/01/2023	04/01/2024	E.L. EACH ACCIDENT	<sub>\$</sub> 500,	000	
_	(Mandatory in NH)	,		112720	04/01/2023	04/01/2024	E.L. DISEASE - EA EMPLOYEE	\$ 500,	000	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 500,	000	
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (AC	ORD 1	01, Additional Remarks Schedule, r	may be attached if more s	pace is required)				
								3.63		
CER	TIFICATE HOLDER				CANCELLATION					
							SCRIBED POLICIES BE CAN , NOTICE WILL BE DELIVER		BEFORE	

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brack selpt

ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Umatilla County Board of Commissioners

216 SE 4th St

Pendleton

OR 97801



UMATILLA COUNTY 216 SE 4<sup>TH</sup> ST. PENDLETON, OR 97801

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

	DISPOSAL SITE COLLECTION SITE
** * ** *	** * ** * ** * ** * ** * * * * * * * * *
Company name:	Querry Congosi
Owner name:	Tra-is trussen
Address:	84812 Ny 339
Phone:	509 946 90004 6275
Email:	Innuis Trunque Horman.com
<ul><li>copy of <u>cu</u></li><li>if applicate</li><li>Annual Fr</li><li>Co</li></ul>	hise holders must submit this form with the following documents attached for review arrent Certificate of Insurance ole, attach report of any changes to your Franchise operation/business ranchise fees paid form (attached) ollection (2% of gross receipts to be paid quarterly) sposal site (\$100 Annual fee)

<< ALL APPLICATIONS MUST BE RECEIVED BY MARCH 31, 2023 >> ALL COLLECTION FRANCHISE FEES MUST BE PAID IN FULL THROUGH DECEMBER 2022

			l use only	
	Approve X	_ Deny	commendation to Board Date: <u>04/18/23</u>	
Comments: Collection	Fanchise Motions approved 1	n to approve:	Dave Faux Lid! Don Wy	sveki
Umatilla County E	Soard of Com	missioners d	ecision:	
		_ Deny		<del></del>
Comments:				



UMATILLA COUNTY 216 SE 4<sup>TH</sup> ST. PENDLETON, OR 97801

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

(V) D	ISPOSAL SITE COLLECTION SITE								
** * ** *	** * ** * ** * ** * ** * ** * * ** * **								
Company name:	HUMBERT REFUSE								
Owner name:	SANFORD & SON LLC								
Address:	P.O. BOX 727, ATHENA OR 97813								
Phone:	541-938-4188								
Email:	HUMBERTREFUSE@OUTLOOK.COM								
<ul><li>copy of <u>cu</u></li><li>if applicable</li><li>Annual Fra</li><li>Col</li></ul>	ise holders must submit this form with the following documents attached for review:  rrent Certificate of Insurance le, attach report of any changes to your Franchise operation/business unchise fees paid form (attached) lection (2% of gross receipts to be paid quarterly) posal site (\$100 Annual fee)								

## << ALL APPLICATIONS MUST BE RECEIVED BY MARCH 31, 2023 >> ALL COLLECTION FRANCHISE FEES MUST BE PAID IN FULL THROUGH DECEMBER 2022

		For officia	al use only	
Umatilla Cou	nty Solid Waste C Approve <u>X</u>	ommittee re Deny	commendation to E Date: 04/18/2	loard of Commissioner
Comments: M	etion to amore la	in wisour	Dia: Make Mithenery	unanimous vote to
indum to appr	rove: Klaus Hochna	2nd: Dave Fau	uy unanimous apprinx	(Disposal)
	nty Board of Com			
Omatina Cour			점점 경기에 가면 하면 하면 등록하면 하다 과 회에서 하다는 데 그렇게 되는데 그렇게 없는데 없다면 하다 하다.	
	Approve	_ Deny	_ Date:	



DATE (MM/DD/YYYY) 08/03/2022

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			CONTACT Sandra Johnston				
Wheatland Insurance Center Inc			PHONE (541) 566-3761 FAX (A/C, No. Ext): (541) 276-7688				
PO Box 329			E-MAIL sjohnston@wici.net				
			INS	NAIC#			
337 E. Main		OR 97813		National Ins			
Athena		J., 01010	INSURER A :	ervice Center		36196	
INSURED	hort Dat	1100	CNIA Cur				
Sanford & Son LLC, DBA: Hum	peri 1781	noc	MOUNTA	556			
PO Box 727			INSURER D:				
		DD 07040	INSURER E :				
Athena		OR 97813	INSURER F :		DEVISION NUMBER.		
COVERAGES CER	TIFICA	TE NUMBER: CL228327897			REVISION NUMBER:	IOD	
THIS IS TO CERTIFY THAT THE POLICIES OF INDICATED. NOTWITHSTANDING ANY REQUIREMENTS OF MAY PERSENTED THE MAY BE ISSUED OR MAY PERSENT OF SUCH PROPERTY OF SUCH	REMEN	T <sub>E</sub> TERM OR CONDITION OF ANY FINSURANCE AFFORDED BY THE	E POLICIES DESCRIBEI REDUCED BY PAID CL	D HEREIN IS SU AIMS.	VIIII (CEC) EC		
INSR   TOTAL OF INCUIDANCE	INSD V	UBRI	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		
COMMERCIAL GENERAL LIABILITY	IIV3D V	1,5315 1,152115			EACH OCCURRENCE	\$ 1,000,000	
					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
CLAIMS-MADE OCCUR					MED EXP (Any one person)	\$ 5,000	
		CPP 1214963 03	07/01/2022	07/01/2023	PERSONAL & ADV INJURY	s 1,000,000	
A		1			GENERAL AGGREGATE	\$ 2,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$ 2,000,000	
POLICY JECT LOC					FROM GOVERNO AGO	\$	
OTHER:	++				COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
AUTOMOBILE LIABILITY			07/01/2022		(Ea accident)  BODILY INJURY (Per person)	\$	
ANY AUTO OWNED SCHEDULED		ODD 4244062 02		07/01/2023	BODILY INJURY (Per accident)	\$	
AUTOS ONLY AUTOS		CPP 1214963 03	0770172022	3770 172020	PROPERTY DAMAGE	\$	
HIRED AUTOS ONLY NON-OWNED AUTOS ONLY					(Per accident) Uninsured motorist	\$ 1,000,000	
					COLUMN IN A SUITAN MILIT	1,000,000	
WIMBRELLA LIAB OCCUR			6=10.110.000	07/04/0000	EACH OCCURRENCE	9	
A EXCESS LIAB CLAIMS-MADI		UMB 1036535 03	07/01/2022	07/01/2023	AGGREGATE	\$	
DED X RETENTION \$ 10,000					PER OTH-	\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER OTH- STATUTE ER	500,000	
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A	100031162	05/01/2022	05/01/2023	E.L. EACH ACCIDENT	\$ 500,000	
(Mandatory in NH)	1.,,,	100001108			E.L. DISEASE - EA EMPLOYEE	\$ 500,000	
If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 500,000	
C Bond - Hwy Use		65388065	03/27/2021	03/27/2024			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LEG /ACC	DD 101 Additional Demarks Schodule	may he attached if more s	pace is required)		1	
	LES (ACC	UNI, Additional Remarks Schedule	i may be attached it more s	hess is tadellar)			
3 <b>-</b> 2							
			Dental on a marketing				
CERTIFICATE HOLDER			CANCELLATION				
			1	THE ABOVE D	ESCRIBED POLICIES BE CA	NCELLED BEFORE	
				DATE THEREO	F, NOTICE WILL BE DELIVE		



Company name:

#### **UMATILLA COUNTY**

216 SE 4<sup>TH</sup> ST. PENDLETON, OR 97801

**COLLECTION SITE** 

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

DISPOSAL SITE

Sanitary Disposal

Address:	8144 NE HWY 395Hermiston Or 97838
Phone:	
i none.	503-572-0259
Email:	KevinMi@wcnx.org
o c	ing Franchise holders must submit this form with the following documents attached for review: opy of current Certificate of Insurance applicable, attach report of any changes to your Franchise operation/business annual Franchise fees paid form (attached)  Collection (2% of gross receipts to be paid quarterly)  Disposal site (\$100 Annual fee)

Approve X Deny \_\_ Date: 04/18/23

Comments: Collection Franchise motion to approve: Klaus Hochna Ind: Mike McHenry ananomous approve vote

Disposed Franchise motion to approve: Jan Wysocki Ind: Dave Feny ananomous approve vote

Umatilla County Board of Commissioners decision:

Approve \_\_ Deny \_\_ Date:

Comments:

For official use only

Umatilla County Solid Waste Committee recommendation to Board of Commissioners:



DATE (MM/DD/YYYY) 7/22/2022

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.

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_	if SUBROGATION IS WAIVED, subje this certificate does not confer rights	ct to	the to	erms and conditions of the tificate holder in lieu of s	uch endorsemen	t(s).	require an endorsemen	nt. A si	tatement on		
	oducer dgewood Partners Insurance Cente				CONTACT NAME: Certifica	ate Unit					
59	909 Peachtree Dunwoody Road	er			(A/C, No. Ext): 404-781-1700 FAX						
S	uite 800				E-MAIL ADDRESS: Certific	ate@enicbroke	ers com				
A1	tlanta GA 30328										
					INSURER(S) AFFORDING COVERAGE INSURER A : ACE American Insurance Company				NAIC#		
INS	URED						ualty Insurance Company		22667		
W	aste Connections of Oregon, Inc.				Toperty & Cas	ually insurance Company		20699			
J Tr	Waterway Square Place, Suite 110 ne Woodlands, TX 77380				INSURER C :						
"	ie vvoodiands, 1X 77360				INSURER D :						
					INSURER E :						
CC	OVERAGES CE	DTIE	CAT	C MUMADED GARAGES	INSURER F :						
	THIS IS TO CERTIFY THAT THE POLICIE	S OF	INCH	E NUMBER: 2125648193			REVISION NUMBER:				
Ë	CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PER	TAIN	THE INSURANCE AFFORDS	OF ANY CONTRAC	OR OTHER	DOCUMENT WITH RESPE	OT TO	AU HOLL THE		
INSF	TYPE OF INSURANCE	ADD	LSUBR	LEWIS CONTROL	POLICY EFF (MM/DD/YYY						
Α	X COMMERCIAL GENERAL LIABILITY	Y	WYD	HDO G72949882	8/1/2022	8/1/2023	Trace A victor was recommended.				
	CLAIMS-MADE X OCCUR				0,1,2022	5,172025	DAMAGE TO RENTED	\$ 2,000,			
	S S S S S S S S S S S S S S S S S S S	1	A i				PREMISES (Ea occurrence)	\$ 100,00			
							MED EXP (Any one person)	\$ 10,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:	ľ				1	PERSONAL & ADV INJURY	\$ 2,000,000			
	V PRO						GENERAL AGGREGATE	\$5,000,000			
							PRODUCTS - COMP/OP AGG	\$ 2,000,	000		
Α	OTHER: AUTOMOBILE LIABILITY	Y		IOA HOTETANA			COMPINED CINCLE LINE	\$			
	X ANY AUTO	, Y		ISA H25570832	8/1/2022	8/1/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 5,000,	000		
	OWNED SCHEDULED						BODILY INJURY (Per person)	\$			
	AUTOS ONLY AUTOS NON-OWNED	10					BODILY INJURY (Per accident)	\$			
	AUTOS ONLY AUTOS ONLY	ľ.	1 1				PROPERTY DAMAGE (Per accident)	\$			
_								\$			
В	X UMBRELLA LIAB X OCCUR			XEU G27614620 008	8/1/2022	8/1/2023	EACH OCCURRENCE	\$4,000,0	000		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 4,000,0			
	DED RETENTIONS							s			
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WLR C68919939 (AOS)	8/1/2022	8/1/2023	X PER OTH-	,			
	ANYPROPRIETOR/PARTNER/EXECUTIVE						E.L. EACH ACCIDENT	s 1 500 f	100		
-	(Mandatory In NH)	N/A				1	E.L. DISEASE - EA EMPLOYEE	\$ 1,500,000			
	If yes, describe under DESCRIPTION OF OPERATIONS below					1 1	-00/A-1-1				
							E.L. DISEASE - POLICY LIMIT	\$ 1,500,0	00		
RE:	RIPTION OF OPERATIONS / LOCATIONS / VEHICL eral Liability-Medical Payments applies Sanitary Disposal hauling operation and red with respect to General Liability and	only trar	when	required by written contract				an addil	tional		
ER	TIFICATE HOLDER				CANCELLATION						
	Umatilla County Attn: Gina Miller				SHOULD ANY OF THE EXPIRATION ACCORDANCE WI	N DATE THE	SCRIBED POLICIES BE CA REOF, NOTICE WILL BI PROVISIONS.	NCELLEI E DELIV	D BEFORE ERED IN		
	216 SE. 4th St. Pendleton OR 97801			AUTHORIZED REPRESENTATIVE Buinds M Agun							



## **UMATILLA COUNTY**

216 SE 4<sup>TH</sup> ST. PENDLETON, OR 97801

**COLLECTION SITE** 

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

DISPOSAL SITE

** * ** *	** * ** * ** * ** * * * * * * * * * * *
Company name:	Eastern Oregon Waste Management LLC
Owner name:	Jimmy Doherty
Address:	166 NW Birch Pilot Rock Or
Phone:	541-443-6131
Email:	jimmydoherty@yahoo.com
<ul><li>copy of <u>cur</u></li><li>if applicable</li><li>Annual Fra</li><li>Coll</li></ul>	ck list ise holders must submit this form with the following documents attached for review trent Certificate of Insurance le, attach report of any changes to your Franchise operation/business anchise fees paid form (attached) lection (2% of gross receipts to be paid quarterly) posal site (\$100 Annual fee)

## << ALL APPLICATIONS MUST BE RECEIVED BY MARCH 31, 2023 >> ALL COLLECTION FRANCHISE FEES MUST BE PAID IN FULL THROUGH DECEMBER 2022

		For officia	al use only
Umatilla Coun	ty Solid Waste C Approve <u>×</u>	ommittee re	commendation to Board of Commissioners Date:_ ०५/१४/23
Comments: Colle	ation franchise mot	ion to approve	2: Klaus Hoehna 2 nd; Don Wysicki
Umatilla Coun	ty Board of Com	missioners d	lecision:
	그림을 하다면서 얼마를 보다면 하다면 사람이 되었다.	_ Deny	
	Approve	_ Deliy	_ Date:



DATE (MM/DD/YYYY) 04/18/2023

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.

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this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).										
PRODUCER				CONTACT Kylee Evans						
Wh	eatland Insurance Center Inc				PHONE (A/C, No, Ext): (541) 276-7441 (A/C, No): (541) 276-7688					
РО	Box 1127				E-MAIL Isulas avans@wheatlandins.nom					
229	SW First				ADDRESS:					NAIG #
	ndleton			OR 97801	1110110	Faralassa	ers Mutual Cas			NAIC # 21415
	INSURED			INSURE		no mataar oad	udity 501	-	21410	
	Eastern Oregon Waste Mgmt LL	C			INSURE					
	PO Box O	.0			INSURE					
	650 NE 4th St.				INSURE	RD:				
				0.0.0.000	INSURE	RE:				
	Pilot Rock			OR 97868	INSURE	RF:				
COVERAGES CERTIFICATE NUMBER: 23/24 Certs REVISION NUMBER:										
C	HIS IS TO CERTIFY THAT THE POLICIES OF I DICATED. NOTWITHSTANDING ANY REQUI ERTIFICATE MAY BE ISSUED OR MAY PERTA	REME AIN, T	NT, TE	ERM OR CONDITION OF ANY I SURANCE AFFORDED BY THE	CONTRA	ACT OR OTHER IES DESCRIBE	R DOCUMENT \ D HEREIN IS S	WITH RESPECT TO WHICH T	HIS	
INSR	KCLUSIONS AND CONDITIONS OF SUCH PO		S. LIM	ITS SHOWN MAY HAVE BEEN	REDUC	ED BY PAID CI				
LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER		(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000	
	CLAIMS-MADE X OCCUR			Y				PREMISES (Ea occurrence)	\$ 500,0	
								MED EXP (Any one person)	\$ 10,00	
Α		Υ		5X46738		05/01/2023	05/01/2024	PERSONAL & ADV INJURY	\$ 1,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,000	0,000
	OTHER:							Data Comp / Cyber	\$ 100,0	000
	AUTOMOBILE LIABILITY							GOMBINED SINGLE LIMIT (Es accident)	\$ 1,000	0,000
	ANYAUTO							BODILY INJURY (Per person)	\$	
Α	OWNED SCHEDULED AUTOS	NLY AUTOS SATOTOS		5X46738		05/01/2023	05/01/2024	BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
	AUTOS CIVET							Uninsured motorist	\$ 1,000	0,000
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	s	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$							AGGREGATE	\$	
	WORKERS COMPENSATION							PER OTH-	2	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE									
	OFFICER/MEMBER EXCLUDED?	N/A	1 1					E.L. EACH ACCIDENT	\$	
	If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$	
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
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CERTIFICATE HOLDER				CANC	ELLATION					
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	210 SE 4111 St			ľ	AUTHOR	RIZED REPRESEN	ITATIVE			
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Pendleton				OR 97801	Lylee Essand					



UMATILLA COUNTY 216 SE 4<sup>TH</sup> ST. PENDLETON, OR 97801

COLLECTION SITE

RECEIVED MAR 1 0 2023 UMATILLA COUNTY

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

**DISPOSAL SITE** 

** * ** *	** * ** * ** * ** * ** * ** * ** * **						
Company name:	Pendleton Sanitary Service, Inc						
Owner name:	Michael R McHenry						
Address: 5500 NW Rieth Road							
Phone:	hone: 541-276-1271						
Email:	mike@pendletonsanitaryservice.com						
□ copy of cur □ if applicabl □ Annual Fra • Col	ise holders must submit this form with the following documents attached for review:  rrent Certificate of Insurance le, attach report of any changes to your Franchise operation/business unchise fees paid form (attached) lection (2% of gross receipts to be paid quarterly) posal site (\$100 Annual fee)						

## << ALL APPLICATIONS MUST BE RECEIVED BY MARCH 31, 2023 >> ALL COLLECTION FRANCHISE FEES MUST BE PAID IN FULL THROUGH DECEMBER 2022

For offic	cial usė only
Umatilla County Solid Waste Committee i	recommendation to Board of Commissioners:Date: 04/18/23
Comments: Collection franchise motion to app unanimous oble to approve 1	nove: Dave Faux 2rd: Don Wysoda abstention (Mike McHenry)
Umatilla County Board of Commissioners	s decision:
Approve Deny _	Date:
Comments:	



DATE (MM/DD/YYYY) 05/25/2022

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(les) 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 ileu of such endorsement(s). CONTACT NAME: Kylee Evans Wheatland Insurance Center Inc PHONE (A/C, No, Ext): E-MAIL (541) 276-7441 FAX (A/C, No): (541) 276-7688 PO Box 1127 kylee@wici.net ADDRESS: 229 SW First INSURER(S) AFFORDING COVERAGE NAIC # Pendieton OR 97801 INSURER A : Employers Mutual Casualty Co. 21415 INSURED SAIF - Service Center 36196 INSURER B: Pendleton Sanitary Services, Inc. INSURER C: P O Box 1405 INSURER D : INSURER E : Pendleton OR 97801 INSURER F 22-23 AI COVERAGES **CERTIFICATE NUMBER: 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, ADDL SUBR INSF LTR TYPE OF INSURANCE POLICY NUMBER LIMITS COMMERCIAL GENERAL LIABILITY 1.000 000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ CLAIMS-MADE X OCCUR 500,000 s 10,000 MED EXP (Any one person) \$ 5X48168 06/01/2022 06/01/2023 1,000,000 PERSONAL & ADV INJURY 2,000,000 GEN'LAGGREGATE LIMIT APPLIES PER: **GENERAL AGGREGATE** PRO-JECT 2,000,000 POLICY PRODUCTS - COMP/OP AGG Employee Benefits-Each \$ 1,000,000 OTHER: COMDINED-SINGLE LIMIT (Ea accident) **AUTOMOBILE LIABILITY** \$ 1,000,000 ANY AUTO BODILY INJURY (Per person) OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS Α 5X48168 06/01/2022 06/01/2023 BODILY INJURY (Per accident) 5 NON-OWNED AUTOS ONLY PROPERTY DAMAGE Medical payments \$ 5,000 UMBRELLA LIAB 3,000,000 OCCUR **EACH OCCURRENCE** EXCESS LIAB Α 5X48168 06/01/2022 06/01/2023 CLAIMS-MADE AGGREGATE DED | RETENTION \$ 10,000 WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) 500,000 E.L. EACH ACCIDENT 412728 N N/A 04/01/2022 04/01/2023

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

CERTIFICATE HOLDER	CANCELLATION					
INFORMATION CERTIFICATE OF COVERAGE	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  Karen Lipson					

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E.L. DISEASE - EA EMPLOYEE

E.L. DISEASE - POLICY LIMIT

500,000

500,000

If yes, describe under DESCRIPTION OF OPERATIONS below



#### **UMATILLA COUNTY**

216 SE 4<sup>TH</sup> ST. PENDLETON, OR 97801

**COLLECTION SITE** 

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

** * ** *	** * ** * ** * ** * ** * ** * ** * **					
Company name:	HUMBERT REFUSE					
Owner name: SANFORD & SON LLC						
Address: P.O. BOX 727, ATHENA OR 97813						
Phone: 541-938-4188						
Email: HUMBERTREFUSE@OUTLOOK.COM						

#### Renewal Check list

Existing Franchise holders must submit this form with the following documents attached for review:

• copy of <u>current</u> Certificate of Insurance

DISPOSAL SITE

- if applicable, attach report of any changes to your Franchise operation/business
- □ Annual Franchise fees paid form (attached)
  - Collection (2% of gross receipts to be paid quarterly)
  - Disposal site (\$100 Annual fee)

# << ALL APPLICATIONS MUST BE RECEIVED BY MARCH 31, 2023 >> ALL COLLECTION FRANCHISE FEES MUST BE PAID IN FULL THROUGH DECEMBER 2022

	For official i	use only	
Umatilla County Solid Waste C Approve X	ommittee rec	ommendation to Board of Commissioner Date: 04/18/23	s:
Comments:			4
			70
Umatilla County Board of Com	missioners de	ecision:	
Approve	_ Deny	Date:	
Comments:			



DATE (MM/DD/YYYY) 08/03/2022

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/ice) must have ADDITIONAL INSURED are

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MADRIESS   MASING   MADRIESS   MASING   MADRIESS   MA	WH	neatland Insurance Center Inc				PHONE (541) 566-3761 FAX (541) 276-7688					276-7688	
MAURER   M	PO Box 329					E-MAIL	siohnstor			(A/C, No):	11138	
Majure   M	337	337 E. Main					.00.		200200			
MISURED   Sanford & Son LLC, DBA: Humbert Refuse   PO Box 727   MISURER E: SAIF - Service Center   Sanford & Son LLC, DBA: Humbert Refuse   PO Box 727   MISURER E: SAIF - Service Center   Sanford & Son LLC, DBA: Humbert Refuse   PO Box 727   MISURER E: SAIF - Service Center   Sanford & Son LLC, DBA: Humbert Refuse   PO Box 727   MISURER E: SAIF - Service Center   Sanford & Son LLC, DBA: Humbert Refuse   PO Box 727   MISURER E: SAIF - Service Center   Sanford & Son LLC, DBA: Humbert Refuse   Sanford & Sanfor	Ath	Athena OR 97813					1A/= =4 =		RDING COVERAGE		_	NAIC#
Sanford & Son LLC, DBA: Humbert Refuse PO Box 727  Athena OR 97813  COVERAGE: Albena OR 97813  COVERAGE:  Albena OR 97813  COVERAGE:  MBURER c:	_						OAIE O					20400
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Bond - Hwy Use 65388065 03/27/2021 03/27/2024  DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)		If yes, describe under DESCRIPTION OF OPERATIONS below							On areasonana arranta		N. San	And the second s
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Toura Jerkins



# UMATILLA COUNTY 216 SE 4<sup>TH</sup> ST.

PENDLETON, OR 97801

COLLECTION SITE

## 2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION

Company name:	Sanitary Disposal
Owner name:	Waste Connection of Oregon
Address:	8144 NE HWY 395Hermislon Or 97838
Phone:	503-572-0259
Email:	KevinMi@wcnx.org
	Check list
	ranchise holders must submit this form with the following documents attached for review:

u if applicable, attach report of any changes to your Franchise operation/business

- ☐ Annual Franchise fees paid form (attached) Collection (2% of gross receipts to be paid quarterly)
  - (\$100 Annual fee) Disposal site

DISPOSAL SITE

<< ALL APPLICATIONS MUST BE RECEIVED BY MARCH 31, 2023 >> ALL COLLECTION FRANCHISE FEES MUST BE PAID IN FULL THROUGH DECEMBER 2022

	r)	For official use	e only
	Approve X	Deny	nmendation to Board of Commissioners:
Comments: College Desposed Franchi	tion Franchise motion to approve;	Approve: Klaus Don Wysocki	Hochna Ind: Mille Mitterry menimous approve vote
Umatilla Cour	ity Board of Commi		
	Approve	Deny	Date:



DATE (MM/DD/YYYY) 7/22/2022

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

L	this certificate does not confer rights	ct to	the t he ce	terms and conditions of t rtificate holder in lieu of s	the po	licy, certain production in the contract of th	policies may	y require an endorseme	ent. A statement or		
	RODUCER				CONTACT Certificate Unit						
5	dgewood Partners Insurance Cente 909 Peachtree Dunwoody Road	er			PHONE (A/C, No, Ext): 404-781-1700 FAX (A/C, No):						
S	uite 800				(A/C, No, Ext): 404-761-1700 (A/C, No): E-MAIL ADDRESS: certificate@epicbrokers.com						
A	tlanta GA 30328				NDDR		-	- Control of the cont	1000000		
L					INCUE		The second secon	ORDING COVERAGE	NAIC # 22667		
	SURED				INSURER A: ACE American Insurance Company INSURER B: ACE Property & Casualty Insurance Company						
N N	/aste Connections of Oregon, Inc.						operty & Cas	sually insurance Company	20699		
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(	THIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	S OF EQUI	INSU REME	RANCE LISTED BELOW HA ENT, TERM OR CONDITION THE INSURANCE AFEORD	OF AN	THE BOLIGIE	OR OTHER	DOCUMENT WITH RESPI			
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A	X COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICY NUMBER HDO G72949882		POLICY EFF (MM/DD/YYYY)		LIMI	TS		
	CLAIMS-MADE X OCCUR	1		HDO G72949882		8/1/2022	8/1/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 2,000,000		
		1						MED EXP (Any one person)	\$ 10,000		
								PERSONAL & ADV INJURY	\$2,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$5,000,000		
	X POLICY PRO-							PRODUCTS - COMP/OP AGG	\$ 2,000,000		
_	OTHER:							\$			
Α	AUTOMOBILE LIABILITY	Y		ISA H25570832	8/1/2022	8/1/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 5,000,000			
	X ANY AUTO OWNED SCHEDULED							BODILY INJURY (Per person)	\$		
	AUTOS ONLY AUTOS NON-OWNED							BODILY INJURY (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
_	N								\$		
В	X UMBRELLA LIAB X OCCUR		1	XEU G27614620 008		8/1/2022	8/1/2023	EACH OCCURRENCE	\$4,000,000		
	EXCESS LIAB CLAIMS-MADE	1						AGGREGATE	\$4,000,000		
	DED RETENTION \$ WORKERS COMPENSATION								\$		
Α	AND EMPLOYERS' LIABILITY	WLR C68919939 (AOS)			8/1/2022	8/1/2022	8/1/2023	X PER OTH-			
	OFFICER/MEMBER EXCLUDED?	N/A				- 13		E.L. EACH ACCIDENT	\$ 1,500,000		
- 1	(Mandatory in NH) If yes, describe under					10		E.L. DISEASE - EA EMPLOYEE			
-	DESCRIPTION OF OPERATIONS below	_	_					E.L. DISEASE - POLICY LIMIT	\$ 1,500,000		
- 1			- 1								
- 1					- 1	- 0					
	DIDTION OF ODER ATIONS										
RE:	RIPTION OF OPERATIONS / LOCATIONS / VEHICL eral Liability-Medical Payments applies of Sanitary Disposal hauling operation and red with respect to General Liability and	trans	efor et	required by written contract					an additional		
ER'	TIFICATE HOLDER				ALIOP	TILATION					
-11					ANGE	LLATION					
Umatilla County Attn: Gina Miller					ACCO	EXPIRATION RDANCE WITH	THE POLICY	SCRIBED POLICIES BE CA REOF, NOTICE WILL BI PROVISIONS.	NCELLED BEFORE E DELIVERED IN		
	216 SE. 4th St. Pendleton OR 97801			A	UTHORIZ	ED REPRESENT	ATIVE				
	rendieton OK 9/807				Burnde M Agree						

Gas) truck for their roll-offs. They continue to work on the infrastructure for this project.

**PSSI:** Ms. Hodson presented the report, and stated they have begun to move cardboard as prices have gone up enough to make it worthwhile. They are scheduled to move around 300 tons of this product. They recently mailed out around 5,700 spring clean up coupons to their customers and they have had 118-yard coupons equaling 21 tons and 451 solid waste coupons equaling 95 tons turned in. This is a 2% increase in response over 2022. Their city rate increase of 3.5% went into effect April 1, 2023. PSSI will have 3-4 long time employees retiring by the end of this year, and so they have been back filling these positions. They also recently lost their shop foreman and lead mechanic, so that position is also open. In response to a question from Mr. Doherty, Ms. Hodson stated that the current price per ton for cardboard is \$65.

Sanitary Disposal: Mr. Miracle advised the committee that their baler had been broke down for the last month, so they have a lot of that material backing up. Their tip floor has been full for the last 2 days as they lost two transfer trucks and there was a problem at Finley Butte, so they asked BDI to assist them with their overflow. Mr. Miracle stated that their hog fuel grinder is broke down and the parts are at least 3 weeks out, so material for that process is also piling up. They received a new cart order, so they are building a better inventory of both sizes that they use. They received 40 carts, but since Amazon utilizes 15 carts at each site, they will still need more. Sanitary Disposal/Waste Connections has been reorganizing their office staff infrastructure to provide better service and has a new phone system to this end. They have 3 cities (Echo, Irrigon and city of Umatilla) doing community clean-ups this weekend, and they will each use 5 boxes which make it challenging when they all want to do this activity on the same day. They recently provided training for their staff with a program called 901T, where retired law enforcement officers come in and train the staff to protect themselves in different situations while on the job. He says this is an excellent program and highly recommends Sanitary Disposal is also recruiting for a maintenance manager and mechanic for it. their Hermiston office. A brief discussion followed on how much in materials they were backed up due to equipment failure.

#### FRANCHISE RENEWALS

Ms. Miller reported that all franchises had successfully submitted their franchise renewal applications, insurance documents, associated fees and collection franchise fees are all up to date through December 2022. Based on this, all franchises are eligible for renewal under the terms of Chapter 50 in the Umatilla County Code of Ordinances. Following are the votes by the Committee on each franchise to be approved by the Solid Waste Advisory Committee and forwarded to the Board of Commissioners for final approval;

Quality Compost Collection Franchise Motion to approve by Mr. Faux and seconded by Mr. Wysocki: unanimous approval Humbert's Collection Franchise

Motion to approve by Mr. Wysocki and seconded by Mr. McHenry: unanimous approval Humbert's Disposal Franchise

Motion to approve by Mr. Hoehna and seconded by Mr. Faux: unanimous approval

Sanitary Disposal Collection Franchise

Motion to approve by Mr. Hoehna and seconded by Mr. McHenry: unanimous approval Sanitary Disposal's Disposal Franchise

Motion to approve by Mr. Wysocki and seconded by Mr. Faux: unanimous approval

Eastern Oregon Waste Management Collection Franchise

Motion to approve by Mr. Hoehna and seconded by Mr. Wysocki: unanimous approval

Pendleton Sanitary Disposal Franchise

Motion to approve by Mr. Wysocki and seconded by Ms. Picard: unanimous approval with one abstention by Mr. McHenry

Pendleton Sanitary Collection Franchise

Motion to approve by Mr. Faux and seconded by Mr. Wysocki: unanimous approval with one abstention by Mr. McHenry

All approved applications for franchise renewals will now go before the Board of Commissioners for final approval. This is scheduled for the May 10<sup>th</sup> public meeting.

### RATE INCREASE REQUESTS

Pendleton Sanitary: Mr. McHenry read aloud his letter to the committee requesting a 3.5% rate increase for the PSSI franchise (see attached). Ms. Miller handed out a paper that states the standards from the Chapter 50 Ordinance for a franchise to be considered for a rate increase (see attached). Mr. McHenry discussed each point from this paper and how it was satisfied and addressed in his letter and rate increase application. Wysocki asked why the Board of Commissioners wouldn't vote on the Sanitary Disposal rate increase proposal the first time it was presented. Ms. Miller explained that the Sanitary Disposal rate increase percentage was larger than most, and with 2 newer Commissioners, they wanted to completely vet out the details before approving the The Commissioners did vote to approve the Sanitary Disposal rate increase request after they were able to meet with Mr. Miracle and Mr. McHenry to ask questions and get a better understanding of what goes on behind the scenes in operation of a waste franchise. Mr. McHenry stated that the fuel cost alone this past year was up 66% over previous years, thus making it more difficult for collection franchises to turn a profit and resulting in more frequent rate increases. Discussion followed about the nature of some of the proposed rate increases and what the charge meant, and Mr. McHenry explained them. Mr. McHenry said that the tonnage fees were left off the rate charge comparison of current and proposed rates, and he said that they would submit a corrected rate sheet by the end of business today. Mr. Hoehna called for a motion from the floor. McHenry stated that the charges to be added to the amended rate sheet will be \$71 per ton for disposal and \$10.15 a day for demurrage after the 7<sup>th</sup> day. Mr. Faux moved to

#### STATE OF OREGON

In the Matter of Granting	)	
Solid Waste Disposal Franchise	)	Order No. BCC2024-011
to Pendleton Sanitary Service,	)	
Inc.	)	

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Pendleton Sanitary Service, Inc. has submitted an application for a disposal franchise for providing such service within its service boundaries;

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the disposal franchise application;

- 1. That the applicant is qualified in providing the type of service proposed.
- That the size and location of the proposed disposal site is suited geographically and topographically to the proposed service.
- 3. That the disposal site and method are acceptable to the Board of Commissioners.
- 4. That the applicant has available equipment, facilities, and personnel sufficient to comply with the solid waste ordinance and all applicable state and federal laws and regulations.
- 5. That the applicant has insurance equal to that required by Section 50.057.
- 6. That the applicant will comply with all applicable federal and state laws and regulations and with the solid waste ordinance in operating the disposal site;
- 7. That the franchise is necessary for the public health, welfare and convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Pendleton Sanitary Service, Inc. for a solid waste disposal franchise for the site described in the application is approved, and a franchise is granted for a ten year period to expire on June 30, 2033.

DATED this 7<sup>th</sup> day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair

Celinda A. Timmons, Commissioner

Daniel N. Dorran, Commissioner

ATTEST:

Records Officer

OFFICE OF COUNTY RECORDS

#### STATE OF OREGON

In the Matter of Granting	)	
Solid Waste Disposal Franchise	)	Order No. BCC2024-012
to Quality Compost, LLC	)	

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Quality Compost, LLC has submitted an application for a disposal franchise for providing such service within its service boundaries:

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the disposal franchise application;

- 1. That the applicant is qualified in providing the type of service proposed.
- 2. That the size and location of the proposed disposal site is suited geographically and topographically to the proposed service.
- 3. That the disposal site and method are acceptable to the Board of Commissioners.
- 4. That the applicant has available equipment, facilities, and personnel sufficient to comply with the solid waste ordinance and all applicable state and federal laws and regulations.
- 5. That the applicant has insurance equal to that required by Section 50.057.
- 6. That the applicant will comply with all applicable federal and state laws and regulations and with the solid waste ordinance in operating the disposal site, and the franchise is conditioned on compliance with land use regulations and state environmental regulations;
- 7. That the franchise is necessary for the public convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Quality Compost, LLC for a solid waste disposal franchise for the site described in the application is approved, and a franchise is granted for a ten year period to expire on June 30, 2033, subject to the following contingencies and conditions:

- 1. That applicant is in compliance with all federal, state and local laws, including, but not limited to:
  - A. Compliance with all terms and conditions of the conditional use permit for the use of the property by applicant for a composting facility.
  - B. Compliance by applicant of a General Composting Permit from the State of Oregon Department of Environmental Quality.
- 2. Quality Compost LLC cannot be accessible to the public for disposal purposes at any time.
- 3. Quality Compost LLC can never charge for disposal of any material and cannot accept any monetary or other compensation for material delivered to it for use as supplemental feedstocks or for any other purpose.

DATED this 7<sup>th</sup> day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair
Celinda A. Timmons, Commissioner
Daniel N. Dorran, Commissioner
ATTEST:
OFFICE OF COUNTY RECORDS

Order No. BCC2024-012 - Page 2 of 2

Records Officer

#### STATE OF OREGON

In the Matter of Granting	)	
Solid Waste Disposal Franchise	)	Order No. BCC2024-013
to Sanford & Son LLC dba	)	
Humbert Refuse	)	

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Sanford & Son LLC doing business as Humbert Refuse submitted an application for a disposal franchise for providing such service within its service boundaries;

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the disposal franchise application;

- 1. That the applicant is qualified in providing the type of service proposed.
- 2. That the size and location of the proposed disposal site is suited geographically and topographically to the proposed service.
- 3. That the disposal site and method are acceptable to the Board of Commissioners.
- 4. That the applicant has available equipment, facilities, and personnel sufficient to comply with the solid waste ordinance and all applicable state and federal laws and regulations.
- 5. That the applicant has insurance equal to that required by Section 50.057.
- 6. That the applicant will comply with all applicable federal and state laws and regulations and with the solid waste ordinance in operating the disposal site;
- 7. That the franchise is necessary for the public health, welfare and convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Sanford & Son LLC doing business as Humbert Refuse for a solid waste disposal franchise for the site described in the application is approved, and a franchise is granted for a ten year period to expire on June 30, 2033.

DATED this 7th day of February, 20	12
UMATILLA COUNTY BOARD OF COMMISSIONERS	
John M. Shafer, Chair	-
Celinda A. Timmons, Commissioner	-
Daniel N. Dorran, Commissioner	-
ATTEST: OFFICE OF COUNTY RECORDS	
Records Officer	=

#### STATE OF OREGON

In the Matter of Granting	)	
Solid Waste Disposal Franchise	)	Order No. BCC2024-014
to Waste Connections of Oregon,	)	
Inc. dba Sanitary Disposal	)	

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Waste Connections of Oregon, Inc. doing business as Sanitary Disposal submitted an application for a disposal franchise for providing such service within its service boundaries;

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the disposal franchise application;

- 1. That the applicant is qualified in providing the type of service proposed.
- 2. That the size and location of the proposed disposal site is suited geographically and topographically to the proposed service.
- 3. That the disposal site and method are acceptable to the Board of Commissioners.
- 4. That the applicant has available equipment, facilities, and personnel sufficient to comply with the solid waste ordinance and all applicable state and federal laws and regulations.
- 5. That the applicant has insurance equal to that required by Section 50.057.
- 6. That the applicant will comply with all applicable federal and state laws and regulations and with the solid waste ordinance in operating the disposal site;
- 7. That the franchise is necessary for the public health, welfare and convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Waste Connections of Oregon, Inc. doing business as Sanitary Disposal Transfer Station for a solid waste disposal franchise for the site described in the application is approved, and a franchise is granted for a ten year period to expire on June 30, 2033.

DATED this 7<sup>th</sup> day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair

Celinda A. Timmons, Commissioner

Daniel N. Dorran, Commissioner

ATTEST:
OFFICE OF COUNTY RECORDS

Records Officer

#### STATE OF OREGON

In the Matter of Granting	)		
Solid Waste Collection	)	Order No. BCC2024-01	5
Franchise to Eastern Oregon	)		
Waste Management LLC	)		

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Eastern Oregon Waste Management LLC submitted an application for a collection franchise for providing such service within the Pilot Rock area service boundaries;

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the collection franchise application;

- 1. That the applicant is qualified in providing the type of service proposed;
- 2. That the defined service area has not been franchised to another operator;
- 3. That the applicant will provide adequate service to the area to be served;
- 4. That the applicant has available collection vehicles, equipment, facilities and personnel sufficient to meet the requirements of law;
- 5. That the applicant's equipment is so constructed and will be so operated in performing service as to prevent the contents from escaping onto public highways;
- 6. That the applicant is qualified to and will handle safely hazardous waste as may be necessary;
- 7. That the applicant will use disposal sites authorized by the Board of Commissioners;
- 8. That the applicant will have in force the amount of liability insurance required by Section 50.041;
- 9. That the applicant will comply with the terms of Chapter

50 and all federal and state laws and regulations applicable to the operation of the franchise;

10. That the franchise is necessary for the public health, welfare, and convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Eastern Oregon Waste Management LLC for a solid waste collection franchise in the area described in the application is approved, and a franchise is granted for a ten year period to expire on June 30, 2033.

DATED this 7<sup>th</sup> day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair

Celinda A. Timmons, Commissioner

Daniel N. Dorran, Commissioner

ATTEST:
OFFICE OF COUNTY RECORDS

#### STATE OF OREGON

In the Matter of Granting	)		
Solid Waste Collection	)	Order No.	BCC2024-016
Franchise to Pendleton	)		
Sanitary Service, Inc.	)		

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Pendleton Sanitary Service, Inc. has submitted an application for a collection franchise for providing such service within its service boundaries;

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the collection franchise application;

- 1. That the applicant is qualified in providing the type of service proposed;
- 2. That the defined service area has not been franchised to another operator;
- 3. That the applicant will provide adequate service to the area to be served;
- 4. That the applicant has available collection vehicles, equipment, facilities and personnel sufficient to meet the requirements of law;
- 5. That the applicant's equipment is so constructed and will be so operated in performing service as to prevent the contents from escaping onto public highways;
- 6. That the applicant is qualified to and will handle safely hazardous waste as may be necessary;
- 7. That the applicant will use disposal sites authorized by the Board of Commissioners;
- 8. That the applicant has in force the amount of liability insurance required by Section 50.041.

- 9. That the applicant will comply with the terms of Chapter 50 and all federal and state laws and regulations applicable to the operation of the franchise.
- 10. That the franchise is necessary for the public health, welfare, and convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Pendleton Sanitary Service, Inc. for a solid waste collection franchise in the area described in the application is approved, and a franchise is granted for a ten year period to expire on June 30, 2033.

DATED this 7<sup>th</sup> day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair

Celinda A. Timmons, Commissioner

Daniel N. Dorran, Commissioner

ATTEST:
OFFICE OF COUNTY RECORDS

#### STATE OF OREGON

In the Matter of Granting	)	
Solid Waste Collection	)	Order No. BCC2024-017
Franchise to Sanford & Son LLC	)	
dba Humbert Refuse	)	

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Sanford & Son LLC doing business as Humbert Refuse submitted an application for a collection franchise for providing such service within Zone 1 - Northeast area;

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the collection franchise application;

- 1. That the applicant is qualified in providing the type of service proposed;
- 2. That the defined service area has not been franchised to another operator;
- 3. That the applicant will provide adequate service to the area to be served;
- 4. That the applicant has available collection vehicles, equipment, facilities and personnel sufficient to meet the requirements of law;
- 5. That the applicant's equipment is so constructed and will be so operated in performing service as to prevent the contents from escaping onto public highways;
- 6. That the applicant is qualified to and will handle safely hazardous waste as may be necessary;
- 7. That the applicant will use disposal sites authorized by the Board of Commissioners;
- 8. That the applicant will have in force the amount of liability insurance required by Section 50.041;

- 9. That the applicant will comply with the terms of Chapter 50 and all federal and state laws and regulations applicable to the operation of the franchise;
- 10. That the franchise is necessary for the public health, welfare, and convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Sanford & Son LLC doing business as Humbert Refuse for a solid waste collection franchise in the area described in the application is approved, and a franchise is granted for a ten year period to expire on June 30, 2033.

DATED this 7<sup>th</sup> day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair

Celinda A. Timmons, Commissioner

Daniel N. Dorran, Commissioner

ATTEST:
OFFICE OF COUNTY RECORDS

#### STATE OF OREGON

In the Matter of Granting	)			
Solid Waste Collection	)	Order 1	No.	BCC2024-018
Franchise to Waste Connections	)			
of Oregon, Inc. dba Sanitary	)			
Disposal	)			

WHEREAS the Board of Commissioners adopted a Solid Waste Ordinance, codified at Chapter 50, Umatilla County Code of Ordinances, for the regulation and the control of solid waste in Umatilla County;

WHEREAS pursuant to Section 50.020, a franchise issued by Umatilla County is necessary for the collection, transportation and disposal of any solid waste for compensation;

WHEREAS Waste Connections of Oregon, Inc. doing business as Sanitary Disposal submitted an application for a collection franchise for providing such service within Zone 1 - Northwest area;

WHEREAS the Umatilla County Solid Waste Committee recommends to the Board of Commissioners approval of the collection franchise application;

- 1. That the applicant is qualified in providing the type of service proposed;
- 2. That the defined service area has not been franchised to another operator;
- 3. That the applicant will provide adequate service to the area to be served;
- 4. That the applicant has available collection vehicles, equipment, facilities and personnel sufficient to meet the requirements of law;
- 5. That the applicant's equipment is so constructed and will be so operated in performing service as to prevent the contents from escaping onto public highways;
- 6. That the applicant is qualified to and will handle safely hazardous waste as may be necessary;
- 7. That the applicant will use disposal sites authorized by the Board of Commissioners;

- 8. That the applicant will have in force the amount of liability insurance required by Section 50.041;
- 9. That the applicant will comply with the terms of Chapter 50 and all federal and state laws and regulations applicable to the operation of the franchise;
- 10. That the franchise is necessary for the public health, welfare, and convenience.

NOW THEREFORE the Board of Commissioners orders that the application of Waste Connections of Oregon, Inc. doing business as Sanitary Disposal for a solid waste collection franchise in the area described in the application is approved, and a franchise is granted for a franchise is granted for a ten year period to expire on June 30, 2033.

DATED this 7<sup>th</sup> day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair

Celinda A. Timmons, Commissioner

Daniel N. Dorran, Commissioner

ATTEST:
OFFICE OF COUNTY RECORDS

Order No. BCC2024-018 - Page 2 of 2

Records Officer