

FROM (DEPT/ DIVISION): Community Development/Planning Department

PROGRAM: Solid Waste Advisory Committee

SUBJECT: Solid Waste Franchise Renewals

| | |
|--|---|
| <p>Background: On April 18, 2023 the SWAC met and voted to approve recommendation of the following franchise renewals to the Board of Commissioners for final approval; Pendleton Sanitary, Humbert’s Refuse, Sanitary Disposal, Eastern Or Waste and Quality Compost. All requirements of renewal have been satisfied.</p> | <p>() INFORMATIONAL (X) <u>ACTION REQUESTED:</u> Review Solid Waste Franchise Renewal applications and vote yea/nay to renew the franchise for another year. Adopt Order Nos. BCC2024-011; BCC2024-012; BCC2024-013; BCC2024-014; BCC2024-015; BCC2024-016; BCC2024-017; BCC2024-018</p> |
|--|---|

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.
- (X) Dept. Head (copy)
- () Human Resources (copy)
- () Budget (copy)
- () Fiscal
- (X) Legal (copy)
- () (Other – List:

To be notified of Meeting:
Mike McHenry, Gina Miller

Needed at Meeting:
Mike McHenry, Gina Miller

PLEASE RETURN THIS FORM AND ATTACHMENTS TO OFFICE MANAGER

Scheduled for meeting on: _____ February 7, 2024 _____

Action taken:

Follow-up:



UMATILLA COUNTY
 216 SE 4TH ST.
 PENDLETON, OR 97801

RECEIVED
 MAR 10 2023
 UMATILLA COUNTY
 PLANNING DEPARTMENT

2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION



DISPOSAL 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

Renewal Check list

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

- copy of current Certificate of Insurance
- 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 use only

Umatilla County Solid Waste Committee recommendation to Board of Commissioners:

Approve X Deny _____ Date: 04/18/23

Comments: Approval franchise motion to approve: Don Wysocki 2nd: Ashley P. said
Unanimous approval vote 1 abstention (Mike McHenry)

Umatilla County Board of Commissioners decision:

Approve _____ Deny _____ Date: _____

Comments: _____



UMATILLA COUNTY
216 SE 4TH ST.
PENDLETON, OR 97801

2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION



DISPOSAL SITE



COLLECTION SITE

** * ** * ** * ** * ** * ** * ** * ** * ** * ** * ** * ** * ** * ** * ** *

Company name: Quantity Compost
 Owner name: Travis Trawick
 Address: 84812 Hwy 339
 Phone: 509 956 9000 6275
 Email: TravisTrawick@hotmail.com

Renewal Check list

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

- copy of current Certificate of Insurance
- 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)

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

For official use only

Umatilla County Solid Waste Committee recommendation to Board of Commissioners:

Approve X Deny Date: 04/18/23

Comments: Collection Franchise motion to approve: Dave Faup 2nd: Don Wyszocki
unanimous approval vote

Umatilla County Board of Commissioners decision:

Approve Deny Date:

Comments: _____



UMATILLA COUNTY
 216 SE 4TH ST.
 PENDLETON, OR 97801

2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION



DISPOSAL 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

Renewal Check list

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

- copy of current Certificate of Insurance
- 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 use only

Umatilla County Solid Waste Committee recommendation to Board of Commissioners:

Approve X Deny _____ Date: 04/18/23

Comments: Motion to approve: Don Wyszoki 2nd: Mike McHenry unanimous vote to approve (collection)
motion to approve: Klaus Hochna 2nd: Dave Faury unanimous approve (Disposal)

Umatilla County Board of Commissioners decision:

Approve _____ Deny _____ Date: _____

Comments: _____



CERTIFICATE OF LIABILITY INSURANCE

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. 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 Edgewood Partners Insurance Center 5909 Peachtree Dunwoody Road Suite 800 Atlanta GA 30328 | CONTACT NAME: Certificate Unit PHONE (A/C, No, Ext): 404-781-1700 E-MAIL ADDRESS: certificate@epicbrokers.com | FAX (A/C, No): |
| | INSURER(S) AFFORDING COVERAGE | |
| INSURED Waste Connections of Oregon, Inc. 3 Waterway Square Place, Suite 110 The Woodlands, TX 77380 | INSURER A : ACE American Insurance Company | NAIC # 22667 |
| | INSURER B : ACE Property & Casualty Insurance Company | 20699 |
| | INSURER C : | |
| | INSURER D : | |
| | INSURER E : | |
| | INSURER F : | |

COVERAGES

CERTIFICATE NUMBER: 2125648193

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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | Y | | HDO G72949882 | 8/1/2022 | 8/1/2023 | EACH OCCURRENCE | \$ 2,000,000 |
| | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 100,000 |
| | | | | | | | MED EXP (Any one person) | \$ 10,000 |
| | | | | | | | PERSONAL & ADV INJURY | \$ 2,000,000 |
| | | | | | | | GENERAL AGGREGATE | \$ 5,000,000 |
| | | | | | | | PRODUCTS - COMP/OP AGG | \$ 2,000,000 |
| | | | | | | | | \$ |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | Y | | ISA H25570832 | 8/1/2022 | 8/1/2023 | COMBINED SINGLE LIMIT (Ea accident) | \$ 5,000,000 |
| | | | | | | | BODILY INJURY (Per person) | \$ |
| | | | | | | | BODILY INJURY (Per accident) | \$ |
| | | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | | | | | | | \$ |
| B | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ | | | XEU G27614620 008 | 8/1/2022 | 8/1/2023 | EACH OCCURRENCE | \$ 4,000,000 |
| | | | | | | | AGGREGATE | \$ 4,000,000 |
| | | | | | | | | \$ |
| A | 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 C68919939 (AOS) | 8/1/2022 | 8/1/2023 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER | |
| | | | | | | | E.L. EACH ACCIDENT | \$ 1,500,000 |
| | | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ 1,500,000 |
| | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 1,500,000 |

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

General Liability-Medical Payments applies only when required by written contract.

RE: Sanitary Disposal hauling operation and transfer station in Hermiston, OR. Umatilla County, to the extent required by written contract, is an additional insured with respect to General Liability and Auto Liability.

CERTIFICATE HOLDER**CANCELLATION**

Umatilla County
 Attn: Gina Miller
 216 SE. 4th St.
 Pendleton OR 97801

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

Berinde M. Ogden



UMATILLA COUNTY
 216 SE 4TH ST.
 PENDLETON, OR 97801

2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION



DISPOSAL SITE



COLLECTION 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

Renewal Check list

- Existing Franchise holders must submit this form with the following documents attached for review:
- copy of current Certificate of Insurance
 - 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 use only

Umatilla County Solid Waste Committee recommendation to Board of Commissioners:

Approve X Deny _____ Date: 04/18/23

Comments: Collection franchise motion to approve; Klaus Hoehna 2nd; Don Wyszcki
unanimous vote to approve

Umatilla County Board of Commissioners decision:

Approve _____ Deny _____ Date: _____

Comments: _____



CERTIFICATE OF LIABILITY INSURANCE

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.

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 Wheatland Insurance Center Inc PO Box 1127 229 SW First Pendleton OR 97801 | | CONTACT NAME: Kylee Evans PHONE (A/C, No, Ext): (541) 276-7441 E-MAIL ADDRESS: kylee.evans@wheatlandins.com | | FAX (A/C, No): (541) 276-7688 | |
| INSURED Eastern Oregon Waste Mgmt LLC PO Box O 650 NE 4th St. Pilot Rock OR 97868 | | INSURER(S) AFFORDING COVERAGE INSURER A: Employers Mutual Casualty Co. | | | NAIC # 21415 |
| | | INSURER B: | | | |
| | | INSURER C: | | | |
| | | INSURER D: | | | |
| | | INSURER E: | | | |
| | | INSURER F: | | | |

COVERAGES**CERTIFICATE NUMBER:** 23/24 Certs**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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: | Y | | 5X46738 | 05/01/2023 | 05/01/2024 | EACH OCCURRENCE | \$ 1,000,000 |
| | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 500,000 |
| | | | | | | | MED EXP (Any one person) | \$ 10,000 |
| | | | | | | | PERSONAL & ADV INJURY | \$ 1,000,000 |
| | | | | | | | GENERAL AGGREGATE | \$ 2,000,000 |
| | | | | | | | PRODUCTS - COMP/OP AGG | \$ 2,000,000 |
| | | | | | | | Data Comp / Cyber | \$ 100,000 |
| A | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | 5X46738 | 05/01/2023 | 05/01/2024 | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,000,000 |
| | | | | | | | BODILY INJURY (Per person) | \$ |
| | | | | | | | BODILY INJURY (Per accident) | \$ |
| | | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | | | | | | Uninsured motorist | \$ 1,000,000 |
| | UMBRELLA LIAB EXCESS LIAB DED RETENTION \$ | | | | | | COMBINED SINGLE LIMIT EACH OCCURRENCE | \$ |
| | | | | | | | AGGREGATE | \$ |
| | | | | | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N | N/A | | | | PER STATUTE | OTHER |
| | | | | | | | E.L. EACH ACCIDENT | \$ |
| | | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ |
| | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ |

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

Umatilla County Board of Commissioners is listed as Additional Insured per form CG7578.

CERTIFICATE HOLDER**CANCELLATION**

| | |
|---|---|
| Umatilla County Board of Commissioners 216 SE 4th St Pendleton OR 97801 | 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 <i>Kylee Evans</i> |
|---|---|

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UMATILLA COUNTY
 216 SE 4TH ST.
 PENDLETON, OR 97801

RECEIVED
 MAR 10 2023
 UMATILLA COUNTY
 PLANNING DEPARTMENT

2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION



DISPOSAL 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

Renewal Check list

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

- copy of current Certificate of Insurance
- 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 use only

Umatilla County Solid Waste Committee recommendation to Board of Commissioners:

Approve X Deny Date: 04/18/23

Comments: Collection franchise motion to approve: Dave Faux 2nd: Don Wyszocki
unanimous vote to approve 1 abstention (Mike McHenry)

Umatilla County Board of Commissioners decision:

Approve Deny Date:

Comments: _____



CERTIFICATE OF LIABILITY INSURANCE

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(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 Wheatland Insurance Center Inc PO Box 1127 229 SW First Pendleton OR 97801 | | CONTACT NAME: Kylee Evans PHONE (A/C, No, Ext): (541) 276-7441 E-MAIL ADDRESS: kylee@wici.net FAX (A/C, No): (541) 276-7688 | |
| INSURED Pendleton Sanitary Services, Inc P O Box 1405 Pendleton OR 97801 | | INSURER(S) AFFORDING COVERAGE INSURER A: Employers Mutual Casualty Co. INSURER B: SAIF - Service Center INSURER C: INSURER D: INSURER E: INSURER F: | |
| | | NAIC # 21415 38196 | |

COVERAGES

CERTIFICATE NUMBER: 22-23 AI

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"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | 5X48168 | 06/01/2022 | 06/01/2023 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Employee Benefits-Each \$ 1,000,000 |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | 5X48168 | 06/01/2022 | 06/01/2023 | COMBINED-SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 5,000 |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE | | | 5X48168 | 06/01/2022 | 06/01/2023 | EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ \$ |
| B | 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 | 412728 | 04/01/2022 | 04/01/2023 | PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000 |

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

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UMATILLA COUNTY
 216 SE 4TH ST.
 PENDLETON, OR 97801

2023 SOLID WASTE FRANCHISE RENEWAL APPLICATION



DISPOSAL 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

Renewal Check list

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

- copy of current Certificate of Insurance
- 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 use only

Umatilla County Solid Waste Committee recommendation to Board of Commissioners:
 Approve X Deny _____ Date: 04/18/23

Comments: _____

Umatilla County Board of Commissioners decision:
 Approve _____ Deny _____ Date: _____

Comments: _____



CERTIFICATE OF LIABILITY INSURANCE

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.

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| | | | |
|---|---|---------------------------------------|---------------|
| PRODUCER Wheatland Insurance Center Inc PO Box 329 337 E. Main Athena OR 97813 | CONTACT NAME: Sandra Johnston PHONE (A/C, No., Ext): (541) 566-3761 E-MAIL ADDRESS: sjohnston@wici.net | FAX (A/C, No.): (541) 276-7688 | |
| | INSURER(S) AFFORDING COVERAGE | | NAIC # |
| INSURED Sanford & Son LLC, DBA: Humbert Refuse PO Box 727 Athena OR 97813 | INSURER A: Western National Ins | | 36196 |
| | INSURER B: SAIF - Service Center | | |
| | INSURER C: CNA Surety | | |
| | INSURER D: | | |
| | INSURER E: | | |
| | INSURER F: | | |

COVERAGES

CERTIFICATE NUMBER: CL228327897

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 | ADDITIONAL INSURED | SUBROGATION WAIVED | 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 OTHER: | | | CPP 1214963 03 | 07/01/2022 | 07/01/2023 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| A | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | | | CPP 1214963 03 | 07/01/2022 | 07/01/2023 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist \$ 1,000,000 |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> RETENTION \$ 10,000 | | | UMB 1036535 03 | 07/01/2022 | 07/01/2023 | EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ |
| B | 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 Y | N/A | 100031162 | 05/01/2022 | 05/01/2023 | PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000 |
| C | 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)

CERTIFICATE HOLDER**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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CERTIFICATE OF LIABILITY INSURANCE

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. 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 Edgewood Partners Insurance Center 5909 Peachtree Dunwoody Road Suite 800 Atlanta GA 30328 | CONTACT NAME: Certificate Unit PHONE (A/C, No, Ext): 404-781-1700 E-MAIL ADDRESS: certificate@epicbrokers.com | FAX (A/C, No): |
| | INSURER(S) AFFORDING COVERAGE | |
| INSURED Waste Connections of Oregon, Inc. 3 Waterway Square Place, Suite 110 The Woodlands, TX 77380 | INSURER A: ACE American Insurance Company | NAIC # 22667 |
| | INSURER B: ACE Property & Casualty Insurance Company | 20699 |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |
| INSURER F: | | |

COVERAGES

CERTIFICATE NUMBER: 2125648193

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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | Y | | HDO G72949882 | 8/1/2022 | 8/1/2023 | EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$ |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | Y | | ISA H25570832 | 8/1/2022 | 8/1/2023 | COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| B | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | | XEU G27614620 008 | 8/1/2022 | 8/1/2023 | EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 \$ |
| A | <input checked="" type="checkbox"/> 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 C68919939 (AOS) | 8/1/2022 | 8/1/2023 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,500,000 E.L. DISEASE - EA EMPLOYEE \$ 1,500,000 E.L. DISEASE - POLICY LIMIT \$ 1,500,000 |

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

General Liability-Medical Payments applies only when required by written contract.

RE: Sanitary Disposal hauling operation and transfer station in Hermiston, OR. Umatilla County, to the extent required by written contract, is an additional insured with respect to General Liability and Auto Liability.

CERTIFICATE HOLDER**CANCELLATION**

Umatilla County
 Attn: Gina Miller
 216 SE. 4th St.
 Pendleton OR 97801

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

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 it. Sanitary Disposal is also recruiting for a maintenance manager and mechanic for 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 10th 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. Mr. 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 request. 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. Mr. 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 7th day. Mr. Faux moved to

THE BOARD OF COMMISSIONERS OF UMATILLA COUNTY

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;

WHEREAS the Board of Commissioners finds that:

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 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 7th 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

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 7th 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

Order No. BCC2024-012 - Page 2 of 2

THE BOARD OF COMMISSIONERS OF UMATILLA COUNTY

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;

WHEREAS the Board of Commissioners finds that:

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, 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

THE BOARD OF COMMISSIONERS OF UMATILLA COUNTY

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;

WHEREAS the Board of Commissioners finds that:

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 7th 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

THE BOARD OF COMMISSIONERS OF UMATILLA COUNTY

STATE OF OREGON

In the Matter of Granting)
Solid Waste Collection) Order No. BCC2024-015
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;

WHEREAS the Board of Commissioners finds that:

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 7th 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

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 7th 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

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 7th 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

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 7th day of February, 2024.

UMATILLA COUNTY BOARD OF COMMISSIONERS

John M. Shafer, Chair

Celinda A. Timmons, Commissioner

Daniel N. Dorrان, Commissioner

ATTEST:
OFFICE OF COUNTY RECORDS

Records Officer