



2024 WASTE HAULER LICENSE **APPLICATION INFORMATION**

Please include the following information that is required for licensing, with your completed waste hauler application and fee. Please note the application has been revised and we will not accept previous years' applications. All applications must be received by **April 1st** and fees are *non-refundable*.

Insurance	Bonds (Only required for Special Waste)	Personal Property Receipt
<ul style="list-style-type: none"> • Include a current certificate of insurance. • Insurance must show a minimum of \$1,000,000 coverage per occurrence for Automotive Liability & General Liability. Workers' Comp required if business has >5 employees. • Our address on North Hanley Road must be listed as the certificate holder with a 30-day notice of any cancellations. • Insurance must be <u>maintained throughout</u> the license year 	<ul style="list-style-type: none"> • Include a new bond or proof that you have a bond in place. • Proof can be a continuation certificate or payment receipt for the bond premium issued by the surety company. • Bond must be in the amount of \$1,000 per licensed vehicle. • ATTENTION: Bond riders to increase or decrease bond amounts must include notarized Acknowledgement forms and Power of Attorney. • Bond forms can be downloaded from our website. 	<ul style="list-style-type: none"> • If your business is located in Saint Louis County, you must include copy of your paid personal property tax. • This requirement does not apply to businesses located outside of Saint Louis County. • Information on obtaining your personal property tax receipts can be found online at: http://revenue.stlouisco.com/Collection/ppInfo/

MISSOURI SECRETARY OF STATE REGISTRATION AND PROOF OF 'GOOD STANDING' or 'ACTIVE' STATUS
<ul style="list-style-type: none"> • Please submit proof of good standing and/or active status with the Missouri Secretary of State's Office. You can register online and obtain proof at: https://bsd.sos.mo.gov/search

To download or print additional forms and applications, please visit us on our website at www.stlouiscountymo.gov



SAINT LOUIS COUNTY
Public Health

2024 WASTE HAULER LICENSE APPLICATION

License applications **must be received by April 1**
to ensure timely processing.

Application fee is non-refundable.

Please remit payment to:

St. Louis County
Department of Public Health
Waste Management Program
6121 North Hanley Road
Berkeley, MO 63134
(314) 615-4034 (PH) (314) 615-4001
(TTY) (314) 615-4008 (FAX)
www.slmw.com

CompanyID No.

FOR OFFICE USE ONLY

Date Paid _____	<u>Licensing</u>	Trucks	Y/N
Cash/Check # _____	SW		Y/N
Amount Paid _____	Cont		Y/N

Decal #'s

Truck Beg: _____	Cont Beg: _____
Truck End: _____	Cont End: _____
Total # of Trucks: _____	Total # of Cont.: _____
SW Truck Beg: _____	St. Louis County Y/N
SW Truck End: _____	Personal Property Y/N
Total # of SW Trucks: _____	Stickers Receipt Y/N

INSTRUCTIONS: Please read each section carefully and complete fully. Along with your completed application and payment, please include a copy of your paid personal property tax receipt, Certificate of Insurance, and any bond information, if applicable. Specific insurance requirements can be found in the Waste Hauler License Instructions found on our website, in Section 607.240 of the St. Louis County Waste Management Code, or by calling us at (314) 615-4034.

IMPORTANT: APPLICATIONS WILL BE RETURNED IF NOT COMPLETED IN FULL.

License Fees

\$25.00 per Regular Vehicle License (hauling solid waste such as residential, municipal & demolition/construction waste)

\$25.00 per Special Waste Vehicle License allows you to haul the same as a regular license **and** sewage, contaminated soils, medical waste, etc. In addition to the license fee per vehicle, this requires a bond of \$1,000.00 **per** vehicle licensed as to haul special waste. For example, five (5) trucks licensed as special waste = a bond for \$5,000.

\$15.00 per Mobile Waste Container License

Fee for 1st time (original) vehicle license sticker received **after** September 30th of the current licensing year is **\$12.50 per vehicle/\$7.50 per container.**

Company Contact Information

APPLICATION FOR LICENSE YEAR: _____ (License Year is from April 15th to April 14th.)

OWNER NAME: _____

OWNER ADDRESS: _____

OPERATOR NAME: _____

OPERATOR ADDRESS: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

COMPANY CONTACT INFORMATION (OPTIONAL): (This information will be provided for public inquiries and posted on our website)

Customer Service Phone Number (_____) Company Website _____

CONTACT PERSON: (To be used in the event of emergency response and regulatory situations)

PHONE: (_____) CELL PHONE: (_____) FAX: (_____) _____

EMAIL ADDRESS: _____

2024 WASTE HAULER LICENSE APPLICATION

Company ID No.
For Office Use Only:

In accordance with St. Louis County Waste Management Code, Chapter 607, any person transporting municipal solid waste, demolition/construction waste, or special waste in St. Louis County more than 5 times per year is required to license each waste hauling vehicle and mobile waste container. Vehicles and containers used to transport hazardous or infectious waste only are exempt from licensing by St. Louis County if already licensed under applicable state and federal regulations.

Waste Vehicles

TRUCK ID (All vehicles must be labeled with a unique identifying number)	STATE PLATE NO.	ISSUING STATE	FEE (\$25.00 Ea.)

(If you have additional vehicles to list use the Waste Vehicle License Addendum on Page 5) **Vehicle Fee Total** _____

Special Waste Vehicles

(Requires a \$1,000.00 Bond per Vehicle)

SPECIAL WASTE TRUCK ID (All vehicles must be labeled with a unique identifying number)	STATE PLATE NO.	ISSUING STATE	FEE (\$25.00 Ea.)

(If you have additional vehicles to list use the Waste Vehicles Addendum on Page 5) **Special Waste Vehicle Fee Total** _____

If you are licensing trucks as special waste (hauling sewage, contaminated soils, medical waste, etc), you **must** include a bond in the amount of \$1000.00 **per vehicle**. If you have a bond on file you must submit the bond certification form (included **and** also can be found on our website) and proof of payment for the bond premium.

Mobile Containers

CONTAINER ID (All containers must be labeled with a unique identifying number)	Check Box if Container is used for Special Waste	FEE (\$15.00 Ea.)

(If you have additional containers to list use the Container License Addendum on Page 6) **Container Fee Total** _____

Total Fees Due (vehicles + special waste vehicles + container) _____

2024 WASTE HAULER LICENSE APPLICATION

Company ID No. _____

For Office Use Only: _____

SERVICE

WHAT AREAS DO YOU SERVE? PLEASE CHECK ALL THAT APPLY:

- Outside limits of St. Louis County YES NO
- Within Unincorporated St. Louis County YES NO
- Within Municipalities in St. Louis County YES NO

DEPOSIT

PLEASE MARK THE FACILITIES WHERE YOU DEPOSIT COLLECTED WASTE & RECOVERABLES

(Trash, recycling, bulky items, yard waste, etc.) Please add any additional facilities under 'Other' if they are not listed below:

- | | |
|--|---|
| <input type="checkbox"/> BRIDGETON TRANSFER STATION | <input type="checkbox"/> O'FALLON TRANSFER STATION |
| <input type="checkbox"/> F.W. TRANSFER STATION (VALLEY PARK) | <input type="checkbox"/> ROCK HILL DEMO LANDFILL |
| <input type="checkbox"/> IESI MO CHAMP LANDFILL | <input type="checkbox"/> ST. LOUIS COMPOSTING: Please Specify _____ |
| MERAMEC VALLEY WPF | <input type="checkbox"/> CITY OF ST LOUIS TRANSFER: Please Circle: <u>North</u> or <u>South</u> |
| <input checked="" type="checkbox"/> ROXANALANDFILL | <input type="checkbox"/> ST. PETER'S WASTE PROCESSING FACILITY |
| <input type="checkbox"/> MILAM LANDFILL | <input type="checkbox"/> ROUTE 66 WASTE PROCESSING FACILITY |
| <input type="checkbox"/> MSD: Please Specify: _____ | <input type="checkbox"/> Other: Please Specify _____ |
| <input type="checkbox"/> Other: Please Specify: _____ | |
| <input type="checkbox"/> Other: Please Specify: _____ | |

TYPE OF HAULING

PLEASE CHECK ALL TYPES OF WASTE HAULED:

- RESIDENTIAL HOUSEHOLD GARBAGE/RECYCLING (providing weekly service):**
 (Must also complete form: Waste Hauler Recovered Material Plan)
- Curbside service for 1 & 2 Family Dwellings Weekly Dumpster Service for 1 & 2 Family Dwellings
 Family Dwellings
- COMMERCIAL SOLID WASTE:** Customer count _____ Percentage located in St. Louis County? _____ %
- Regular trash/garbage from businesses, institutions, etc Roofing waste from residences & businesses
 Construction/demolition waste from residences and businesses Multi-family Dwellings
- COMMERCIAL RECYCLING:** Customer count _____ Percentage located in St. Louis County? _____ %
- Single Stream from businesses, institutions, etc. Sorted from businesses, institution, etc.
- SPECIAL WASTE:**
 (Must include a bond in amount of \$1000 **per** vehicle or form: Bond Certification form if bond is on file)
- Sewage (or any wastes transported to a sewage treatment facility)
 Misc. (i.e., contaminated soils, sludges, grease traps, fly ash, industrial type wastes, etc.)
 Treated medical waste (i.e., infectious waste rendered non-infectious via an approved process)

CERTIFICATION

I certify that I am authorized to obligate that the above listed company and that all vehicles/containers stated in this application comply with all pertinent licensing provisions of the St. Louis County Waste Management Code, Chapter 607, SLCRO.

Printed Name of Authorized Company Representative

Title

Signature of Authorized Company Representative

Date



SAINT LOUIS COUNTY
Public Health

WASTE HAULER
VEHICLE LICENSE APPLICATION
ADDENDUM FOR ADDITIONAL VEHICLES

CompanyID No. _____
For Office Use Only: _____

Company Name: _____

VEHICLEID <i>(All Vehicles must be Labeled with a Unique Identification Number/Fleet Number)</i>	LICENSEPLATE NUMBER	LICENSING STATE	Checkif used for specialwaste*	FEE (\$25.00 Per Vehicle)

*Special Waste Haulers must also submit a bond in the amount of \$1,000 per licensed special waste vehicle Fee Total _____

CERTIFICATION

I certify that I am authorized to obligate that the above listed company and all vehicles listed in this application comply with all pertinent provisions of the St. Louis County Waste Management Code, Chapter 607, SLCRO.

Printed Name of Authorized Company Representative

Title

Signature of Authorized Company Representative

Date



SAINT LOUIS COUNTY
Public Health

**WASTE HAULER
CONTAINER LICENSE APPLICATION
ADDENDUM FOR ADDITIONAL CONTAINERS**

CompanyID No.
For Office Use Only:

Company Name: _____

<u>CONTAINER ID</u> <i>(All Containers must be Labeled with a Unique Identification Number/Fleet Number)</i>	Check Box If Used For Special Waste*	FEE (\$15.00 per container)

*Special Waste Haulers must also license vehicles as Special Waste. Fee Total _____

CERTIFICATION

I certify that I am authorized to obligate that the above listed company and all containers listed in this application comply with all pertinent provisions of the St. Louis County Waste Management Code, Chapter 607, SLCRO.

Printed Name of Authorized Company Representative	Title
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Signature of Authorized Company Representative	Date
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