

### **Louisiana Public Service Commission**

Located at 602 North Fifth Street; Baton Rouge, LA 70802 Mailing Address PO Box 91154; Baton Rouge, LA 70821 Transportation Division: (888) 342-5717

## APPLICATION TO AMEND WASTE CONTRACT CARRIER PERMITS

Procedure and related information for making application to the Louisiana Public Service Commission to amend contract carrier permits of waste by motor vehicle for disposal for disposal pursuant to General Order dated January 23, 2018. No motor carrier shall operate as a contract carrier without having first obtained from the Commission a permit, which shall be issued only after a written application, is made, filed and approved.

#### **APPLICATIONS - PROCESS**

Applications to amend Contract Carrier Permits shall be subject to General Order dated January 23, 2018 and shall be limited to a maximum of 5 contracts. Application must be filed in the Commission's office, Galvez Building, 602 N. 5<sup>th</sup> St., Baton Rouge, Louisiana 70802. (Mailing address is P.O. Box 91154, Baton Rouge, Louisiana 70821-9154.)

The original notarized application must be submitted in **TRIPLICATE** (original and 2 copies) and be accompanied by the following: (**NOTE**: Any application that does not provide the minimum requirements as listed below will be **REJECTED**.)

Application Filing Fee must be remitted in the amount of \$150.00 NON-REFUNDABLE
A copy of the Secretary of State Certificate and Articles of Incorporation or Formation from the State of origin or existence.
A copy of the Louisiana Secretary of State's Certificate of Good Standing.
The company's operating structure, names of regulatory contacts, bookkeepers, CPA, dispatchers, or other employees anticipated to be involved with the transportation and disposal of waste.
Financial income statements and balance sheets for the company for the last two complete years. For a newly formed company, a detailed statement from the owner(s) outlining the financial ability to operate all transportation functions authorized by the applied for authority. All financials should be marked as <b>CONFIDENTIAL</b>
A complete list of equipment anticipated to be used if the Permit is granted.
A letter or Acord Certificate from an insurance company (or agent) authorized to do business in Louisiana, stating such company will write the required insurance coverage as currently exist in the event Permit is granted.
A complete copy of the company's safety manual either by printed hard copy or on a USB Flash Drive ONLY.
Copies of permits required by any and all other state and federal agencies for the transportation and disposal of waste or a detailed list of those required permits in which the applicant has applied for, including a detailed compliance history under any jurisdiction the Applicant is currently subject to for each regulatory agency's jurisdiction

\*\*The original notarized application and accompanied documents must be submitted in TRIPLICATE\*\*

Once the completed application has been received by the Commission, it will go through the application process as follows:

- Staff will review the application to ensure that the applicant has submitted evidence to demonstrate the following to the Commission:
  - 1. Applicant holds, or is capable of acquiring, an **insurance** policy providing coverage of two hundred fifty thousand dollars for injury or death per person or five hundred thousand dollars per occurrence, and ten thousand dollars property damage;
  - 2. Applicant has the **financial ability** to provide the transportation of waste for disposal in a safe and efficient manner;
  - 3. Applicant holds, or is capable of acquiring, **all of the necessary authorizations** required by any and all regulatory authorities for the transportation of waste for disposal;
  - 4. Applicant holds, or is capable of acquiring for use, **equipment and man power** to provide transportation services in a safe and efficient manner; and
  - 5. Applicant has in place, or is capable of establishing, a **safety program** necessary for the safe and efficient transportation of waste for disposal.
- Once the Staff has accepted the application, it will be docketed, acknowledgment of application will be sent via email
  or US Postal Mail to applicant or applicant's legal counsel and application will be published in the official bulletin for
  25 days where any party may intervene and conduct discovery regarding any issue that is relevant to the subject matter
  of the docketed proceeding, as long as the requested information is not privileged.
- Upon completion of publication, the application shall be assigned to the Administrative Hearings Division for the setting of a status conference(s) and hearing on the merits.
- Once the application hearing has been heard by the Administrative Law Judge (ALJ) an order will be issued by the Commission informing the applicant as to the status of their application.
- If the application is approved, a letter of compliance will be sent to the applicant advising of compliance filings required prior to the issuance of the certificate as outlined in the General Information section of this packet. Upon completion of these requirements, the authorized permit will be issued and forwarded to the applicant.

#### **GENERAL INFORMATION**

#### 1. INSURANCE

The commission shall require the following policies of insurance:

Public liability and property damage insurance on trucks operated by common carriers, providing coverage of (\$250,000.00) TWO HUNDRED FIFTY THOUSAND DOLLARS for injury or death to any one person not to exceed (\$500,000.00) FIVE HUNDRED THOUSAND DOLLARS per occurrence, and (\$10,000.00) TEN THOUSAND DOLLARS property damage; (\$510,000.00) FIVE HUNDRED TEN THOUSAND single/combined. These insurance policies shall be written by companies qualified to do business in this state.

The required proof of insurance shall be the filing of a Form E, Bodily Injury and Property Damage Certificate of Insurance, by the Insurance Underwriter of the policy, which must be received thirty (30) days from the date of the compliance letter. <u>The name and address</u> on the Form E and name and address on the application for authority must match exactly.

#### 2. REGISTRATION OF VEHICLES

Carriers will be required to submit a "Vehicle Registration Form T-44" and remit a fee of \$10 per vehicle as part of compliance approval and annually thereafter.

#### 3. CONTRACTS (RATES, FARES AND CHARGES)

The contracts under which the carrier operates under must show the services to be rendered and the basis for computation of rates and be filed with and approved by the Commission. No contract carrier shall operate under more than (5) FIVE contracts. Contracts must contain the following information:

- 1. Complete name and address of both parties to the contract;
- 2. Work to be performed and the specific rate(s) to be charged under the contract;
- 3. A specified term of no less than ninety (90) days; and
- 4. Execution (signed) by all parties to the contract

#### 4. MERGER OF DUPLICATE OPERATING RIGHTS

No motor carrier shall be permitted to hold more than one certificate or permit granting the same authority in the same territory or over the same route. When a motor carrier holding operating authority acquires by purchase or leases another similar authority, the two shall be merged into one and both authorities reissued to the carrier as one. Should a certificate holder acquire additional rights which overlap the rights already held by him to some extent, that portion of the rights which overlap his original rights shall be merged into the original grant of authority.

#### 5. SUSPENSION OF AUTHORITY OR CHANGES TO COMPANY INFORMATION

<u>Suspension</u> - If a carrier's business will be dormant for a short period of time, they may request a suspension of authority in writing. The letter must give detail as to why the business is dormant, before the LPSC will consider granting such a request.

<u>Changes To Company Information</u> - If a carrier's company information, such as name, address, contact information or any other relevant information changes, <u>it is the CARRIERS responsibility to make those changes with the Commission in writing</u> using the proper forms which may be obtained by contacting the LPSC's main office.

#### 6. ANNUAL REPORTS AND INSPECTION AND SUPERVISION FEE (ISF) QUARTERLY REPORTS

All intrastate carriers subject to regulation by the LPSC are **REQUIRED** to file Annual Reports with the Transportation Division as stated in the Commission's General Order No. 2, dated July 1, 1921. Furthermore, motor carriers under the jurisdiction of the LPSC are also **ASSESSED** Inspection and Supervision fees which are collected by the Department of Revenue pursuant to La. R.S. 45: 1177-1179. More detailed information will be provided with your Contract Carrier Permit.

#### 7. OWNER/OPERATOR LEASES

Any utilization of owner/operators by a permitted contract carrier will require the carrier place on file, prior to transportation and for duration of the lease period, a statement that owner/operators vehicle(s) is covered by and operating under the carrier's insurance. This statement must contain the owner/operators name, address and description of covered vehicles. The lease must be in writing, properly executed in quadruplicate. One copy is to be held by lessor, one by lessee, one must be immediately filed with the LPSC (along with a filing fee of \$10.00 per owner/operator lease), and one carried in the vehicle. (Link to Website "Intrastate Leasing Rules") <a href="https://lpsc.louisiana.gov/regs3\_motor.aspx">http://lpsc.louisiana.gov/regs3\_motor.aspx</a>).

#### LOUISIANA PUBLIC SERVICE COMMISSION



PO Box 91154; Baton Rouge, LA 70821 (888) 342-5717 or (225) 342-4439

# WASTE BY MOTOR VEHICLE APPLICATION

Applicant desires to secure from the Louisiana Public Service Commission a Contract Carrier Permit authorizing applicant to operate as a **CONTRACT CARRIER OF WASTE BY MOTOR VEHICLE.** 

## **BUSINESS ENTITY- APPLICANT INFORMATION**

SECTION 1

Business Entity Name:							
DBA: (Including any doing business as "dba" name)							
Business Entit	cy's Authorized Represent	tative:					
Business Addr	ress:						
City:				State:		ZIP Code:	
Mailing Addre	SS:						
City:				State:		ZIP Code:	
Telephone # (	Include Area Code)	Fax # (Include Are	ea Code)	I	Cell # (Inclu	de Area Code)	
Email Address:							
FEIN #:		OR	SS#				
Compan		NY TAX REPORTI				anch voor	
Company's Tax reporting year is on a CALENDAR basis reporting January 01 to December 31 each year.  Company's Tax reporting year is on a FISCAL basis reporting from to							
	Co	OMPANY OWNER	SHIP AND	-		, Duj	
Check	Louisiana Domestic Corp	oration			Date of Inco	orporation	
one	Louisiana Domestic Limit	ted Liability Compar	ny (LLC)		Date of Formation		
box	<b>box</b> Louisiana Domestic Partnership			Date of Formation			
	Louisiana Limited Liabili	-		Date of Formation			
Foreign* Corporation in the State of			Date of Incorporation				
Foreign* Limited Liability Company (LLC) in the State of			<u></u>				
Foreign* Partnership in the State of Date of Formation							
MUST attach copies of the company's Secretary of State Certificate & Articles of Incorporation or Formation from your state of origin or existence. *Foreign Entities must also register with the Louisiana Secretary of State's Office (La. SOS), submit copies of the paperwork filed with the La. SOS along with a copy of the Certificate of Good Standing issued by the La. SOS.							

BUSINESS ENTITY- APPLICANT INFORMATION SECTION 1 (Continued from Page 1)				
List Names of Officers and/or Members and percenta	ge of ownership or number of shares below and check one be	ox to indicate title.		
Name Title (Corporations list President, Vice President, Secretary, Treasurer and LLC companies list Members) Ownership percenta				

## REPRESENTATION OF APPLICANT

If Applicant is represented by legal counsel or if this application is being filed by legal counsel please provide the following:

LEGAL COUNSEL'S NAME:				
FIDNA NIANAF				
FIRM NAME:				
Mailing Address:				
City		State:		ZIP Code:
City:		State:		ZIP Code:
Telephone # (Include Area Code)	Fax # (Include Area Code)		Cell # (Incl	ude Area Code)
Email Address:	L			
Linan Address.				

# AUTHORITY TYPE SECTION 3

(Please check all types of waste you desire to acquire in this application below)

Non-hazardous oilfield wastes (i.e. Exploration & Production wastes as defined by RS 45:162) Non-hazardous industrial solid waste (as defined by RS 45:162) Hazardous waste (as defined by RS 45:162)

## **GEOGRAPHICAL LOCATION**

SECTION 4

Mark this box if you are seeking authority
STATEWIDE

OR applicant desires to transport waste as outlined in Section 3 originating in the following parishes:

Acadia	Allen	Ascension	Assumption
Avoyelles	Beauregard	Bienville	Bossier
Caddo	Calcasieu	Caldwell	Cameron
Catahoula	Claiborne	Concordia	DeSoto
East Baton Rouge	East Carroll	East Feliciana	Evangeline
Franklin	Grant	Iberia	Iberville
Jackson	Jefferson	Jefferson Davis	Lafayette
Lafourche	LaSalle	Lincoln	Livingston
Madison	Morehouse	Natchitoches	Orleans
Ouachita	Plaquemines	Pointe Coupee	Rapides
Red River	Richland	Sabine	St. Bernard
St. Charles	St. Helena	St. James	St. John the Baptist
St. Landry	St. Martin	St. Mary	St. Tammany
Tangipahoa	Tensas	Terrebonne	Union
Vermilion	Vernon	Washington	Webster
West Baton Rouge	West Carroll	West Feliciana	Winn

## **EQUIPMENT**

SECTION 5

Applicant proposes to commence operations with the following equipment: (If additional space is needed, attach a separate sheet listing each vehicle)					
Year	Make	Model	Туре		
(Ex. 2016)	(Ex. Peterbuilt)	(Ex. Tractor or Trailer)	(Ex. Vacuum, dump, roll-off, flat bed etc)		

## **TERMINALS AND SERVICE OF PROCESS**

SECTION 6

Please check one				
Applicant is located outside of Louisiana and understands, if authority is granted a LOUISIANA TERMINAL in which operations shall commence, must be established prior to issuance of the permit.				
Applicant proposes to commence operations from the following LOUISIANA TERMINAL/LOCATION(S) as listed below: (If applicant has additional Louisiana terminals or locations, attach a separate sheet listing each location)				
LOUISIANA TERMINAL/LOCATION address:				
City:	State:	ZIP Code:		

## TERMINALS AND SERVICE OF PROCESS

SECTION 6 (Continued)

OUT OF STATE CARRIERS MUST LIST AGENT FOR SERVICE OF PROCESS BELOW Any carrier domiciled outside of Louisiana and providing the intrastate transportation of waste for disposal in Louisiana shall register the company's name, address and telephone number with the Louisiana secretary of state and the Louisiana Public Service Commission. Service of process with respect to all civil, criminal, or administrative proceedings brought before any court or administrative agency located in the state may be served on the registered agent as filed with the Louisiana secretary of state by any means provided by the applicable rules or procedure for that court or agency providing service of process.

Agent For Service Of Process Name						
Mailing Address:						
City:	State	:	ZIP Code:			
VERIFICATION SECTION 7						
STATE OF	PARISH	I/COUNT	TY OF			
BEFORE ME, the undersigned authority	/ <b>,</b>		(Applicant)			
who represents						
			pose and say that he/she is the APPLICANT in			
the above application; that he/she desire	es to secure from	the Louisi	siana Public Service Commission a Contract			
Carrier Permit, authorizing the applicant	to operate as a car	rier of W	Waste as stated; and that he/she has read same			
and is familiar with the contents thereo	f and that facts as	stated the	nerein are true and correct, and to the best of			
his/her knowledge. FURTHERMORE, A	APPLICANT agree	es to comp	ply with all provisions of law and the rules and			
regulations of the Louisiana Public Servi	ce Commission res	specting th	the operation of public service motor vehicles,			
and to file with the Commission a contra	cts with no more th	nan 5 shipp	ppers which shows the services to be rendered			
and the basis for computation of rates, sc	hedules and other	required d	data; and to file such evidence of insurance or			
bonds as required by law and by the rul	es and regulations	of the Lo	ouisiana Public Service Commission prior to			
commencement of operations. And unde with the Louisiana Department of Rever			n contained in this application may be shared ion and Supervision Fees.			
SWORN TO AND SUBSCRIBED before me this day of, 20						
PRINTED NAME OF <b>APPLI</b>	CANT	PRIN	NTED NAME OF <b>NOTARY PUBLIC</b>			
SIGNATURE OF APPLICANT SIGNATURE OF NOTARY PUBLIC (Including Notary Seal & Number)						
LPSC OFFICE USE ONLY						
Accepted by Staff			Date			

DOCKET#

PUBLISHED IN BULLETIN #

ON

Date