

RECYCLING SUPPLEMENT

(Include Acord application)

APPLICANT INFORMATION:								
Applicant's Name: Mailing Address:			Location Add	dress:				
1.	Is applicant properly lice	nsed where	required by law?	Yes 🗌 No	o License Number	:		
2.	Number of active owners/officers/partners: Number of Employees:							
3.	Estimated annual: Payroll (excl. owner) \$Receipts \$ Subs Cos					s Costs \$		
4.	List percentage of operations under the following							
	Aluminum	%	Oil Collections	%	Chemicals		%	
	Batteries	%	Paper/Newspaper	%	Glass		%	
	Cardboard/Chipboard	%	Plastics	%	Hazardous Materials		%	
	Styrofoam	%	Scrap Metal/Wire	%	Tires		%	
	Please detail all "yes" ar	nswers to the	e following questions b	elow.				
5.	Any guard dogs on prem	nises?				🗌 Yes	🗌 No	
6.	. Is premises fully fenced?						🗌 No	
7.	7. Are there fire safety precautions in place?						🗌 No	
8.	B. Does applicant own or operate a landfill or dump?							
9.	9. Does applicant use any process other than bailing, crushing, or shredding? \Box Ye							
10.	10. Does applicant have a smelting or foundry exposure?							
11.	11. Does applicant haul refuse or garbage for others?							
12. Does applicant provide receptacles for collection of materials?							🗌 No	
13.	13. Does applicant engage in any salvage operations?							
14.	14. Does applicant store any LPG, chemicals, or other flammable liquids on premises?							
15. Any security/watchman on duty?							🗌 No	
If yes, please indicate how many: Employed Subcontracted Armed Unarr								

16. How does applicant dispose of acids, chemicals, or hazardous materials?							
17. EPA approved site?	🗌 Yes 🗌 No						
Details:							

Attach a copy of the applicant's contract and last Workers Compensation audit.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature

Producer's Signature

Date