

621 Woodland Square Loop SE Lacey, WA 98503 P.O. Box 47250

Olympia, WA 98504-7250 Phone: 360-664-1222

Email: transportation@utc.wa.gov

SOLID WASTE COLLECTION COMPANY UNDER CHAPTER RCW 81.77.040

This application packet contains the following information:

- Application Form
- Sample Standard Tariff Format
- WAC 480-70 Rules Relating to Solid Waste Collection Companies
- "Your Guide to Achieving a Satisfactory Safety Rating"

You may not begin operations as a solid waste collection company until the Utilities and Transportation Commission (the commission) issues you a solid waste certificate, granting you the authority to operate. Applications are subject to public notice and protest, and may be set for a hearing.

Insurance Requirements

You must file and maintain Public Liability and Property Damage Insurance (Form E) with the commission covering each vehicle operating under your requested solid waste certificate in the state of Washington. The commission must be shown as the certificate holder.

Per WAC 480-70-181, insurance or bond minimum limits are:

Vehicles less than 10,000 GVWR	\$300,000 combined single limit of public liability	
Vehicles less than 10,000 GV VVN	and property damage insurance – Form E	
Vahialas 10 000 CVWB and mars	\$750,000 combined single limit of public liability and	
Vehicles 10,000 GVWR and more	property damage insurance – Form E	
Transport quantities of biomedical waste not subject	\$1,000,000 combined single limit of public liability and	
to federal regulation	property damage insurance – Form E	
Transport quantities of hazardous or biomedical waste	The federal minimum combined single limit	
that are subject to federal regulation	coverage (see Title 49 CFR Part 387.301 & 303)	

The commission has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1243 or The Washington Relay Service at 7-1-1 or 1-800-833-8384.

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FILING YOUR APPLICATION			
Select one of the following:			
Scan/PDF your application to efileapp.utc.wa.gov and pay online at payments.utc.wa.gov, or,			
Mail your application with your check or money order to the following address:			
UTC, PO Box 47250, Olympia, WA 98504-7250			
ACH on-line (no service fee) or credit card on-line at payments.utc.wa.gov (2.5% or minimum of \$3.95 is charged			
by Official Payments for credit card processing).			

DO NOT EMAIL YOUR CREDIT CARD INFORMATION



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SOLID WASTE COLLECTION COMPANY CERTIFICATE APPLICATION

FOR OFFICIAL USE ONLY					
Date Filed:	Comp	mpany:			Docket #:
Receipt ID:		Payment ID:		Amount Paid:	
111-0268	111-0268-227-02		111-0268-032-20		

Type of Solid Waste Authority Requested - only one type per application is allowed	Fee	
Permanent Authority – check the appropriate box below and complete entire application		
and submit a proposed tariff as outlined in the standard tariff form (WAC 480-70-091).		
□ New certificate		
☐ Extension of certificate: Certificate G-		
☐ Transfer of authority: Certificate G- Complete Attachment B	\$200	
☐ Lease of authority: Certificate G- Complete Attachment B		
☐ Reinstatement of canceled authority: Certificate G-		
(must be filed within 30 days of cancellation). Include a statement justifying the		
reinstatement and complete sections 1, 2, and 8.		
Temporary Authority – Complete this application and check appropriate type (WAC 480-70-131).		
☐ New temporary authority – complete <i>Attachment A.</i>		
☐ Temporary authority to operate pending a commission decision on a concurrently filed		
certificate application.	\$25	
☐ Expedited temporary authority – to meet an immediate or urgent need for a period of not		
more than 30 days – complete Attachment A.		
Name Change (There can be no change in ownership) – Check the appropriate box(s)		
below (WAC 480-70-121) and complete section one of this application and Attachment C.		
Change of corporate name		
Change of trade name	\$35	
Addition or new trade name		
☐ Change of surname of an individual owner or partner		
Mortgage including requests for permission to mortgage or otherwise encumber a		
certificate (WAC 480-70-116).	\$35	
☐ Complete Attachment D		

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Section 1 – Business Information				
Legal Name: International Resource Management, inc.				
Trade Name(s), if applicable: Waste	Trade Name(s), if applicable: WasteXpress			
Physical Address: 11615 N Lombar	d Portland, OR	97203		
Mailing Address: PO Box 267 Van	couver, WA 98	666		
Telephone Number(s): 503-224-320	16	Email Address: jer o	emy@wastex.com	
USDOT#: 881002 If you do no	t have a USDOT nu	ımber, go on-line at w	ww.fmcsca.dot.gov/online-registration	
to apply or call 360-596-3812 for assista	nce.			
Is your business registered with the	Department of R	evenue? No	Yes	
Business License/UBI#: 602640857				
	Туре о	of Business		
Individual Partnership Corporation Other (LP, LLP, LLC) State of Incorporation Washington			**************************************	
List the name, title and percentage o	f all partner's sha	are or stock distribut	ion for major stockholders:	
Name	Title		Stock Distribution/% of Shares	
Arthur Marx	Owner		75	
Jeremy Komp	President		25	
*SUBMIT AS ATTACHMENT IF MORE SPACE IS REQUIRE	FD			
	WAR THE	try Questionnaire		
1. Do you currently hold, or have y	ou ever held a sc	olid waste certificate	? No Yes	
If yes, please indicate your certificate number: G-				
2. Have you ever applied for and been denied a certificate to transport solid waste? No Yes				
If yes, please explain:				



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Section 9 - Declaration of Applicant				
Initial <i>JK</i>	I understand that filing this application <u>does not</u> in itself constitute authority to collection company.	operate as a solid waste		
JK	As the applicant for a solid waste collections company certificate, I understand the responsibilities of a solid waste collection company, and I am in compliance with all local, state, and federal regulations governing business in the state of Washington.			
JK	I certify under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.			
JK	I certify that I am the applicant, or I am authorized to execute and file this document on behalf of the applicant.			
Nam	Name: Jeremy Komp Date: 12/28/2022			
	Section 10 – Additional Required Attachments Attachment A – Tomperary Cartificate or Expedited Tomperary Authority Supp	ort Statement		
Attachment A – Temporary Certificate or Expedited Temporary Authority Support Statement				

Attachment B - Joint Application for Transfer or Lease of Certificated Authority Attachment C - Change of Corporate/Individual Name Attachment D - Permission to Mortgage a Certificate



Solid Waste Permit - ATTACHMENT C

CHANGE OF CORPORATE/INDIVIDUAL NAME

This application is for name change only and **must not** involve a change in ownership, management, or control of the solid waste certificate authority. A company must file a name change application to:

- · Change a corporation's name;
- · Change or add a trade name;
- Change the surname of an individual owner or partner to reflect a change resulting from marriage or other legal action.

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NOTE: You <i>may not</i> advertise to operate	te under the changed name until a certif	ficate is issued in the new
name. Current Name on Cert ficate: I	nternational Resource Manager	nent, Inc.
Current Trade Name (if applicable): Wa	steXpress	
Mailing Address: PO Box 267 Vanc	ouver, WA 98666	
Physical Address: 11615 N Lombard	Portland, OR 97203	
Phone Number: 503-224-3206	Fax Number:	
Contact Name: Jeremy Komp	Email address: jeremy@w	astex.com
	Type of Business	
Individual Partnership C	orporation Other (LP, LLP, LLC)	State of Incorporation Washington
List the name, title and percentage of a	Il partner's share or stock distribution fo	or major stockholders:
Name	Title	Stock Distribution/% of Shares
Arthur Marx	Owner	75
Jeremy Komp	President	25
I request the name on solid waste certi	ificate G- 069470 be changed to	:
New Name: WasteXpress Environ	imental LLC	
New Tradename (if applicable): Waste	Xpress	
UBI Number: 602640857		
DOT Number: 881002		
You must file a new tariff using the sam	ne rate levels as currently on file, or adop	pt the current tariff in the new name. To
file a new tariff, use the standard tariff	format (www.utc.wa.gov) or you must s	eek approval to use an alternate form.
Indicate which option you will us	e: 🗸 Adopt 🔃 File a New Tariff	
I certify that this information is true an the applicant and that all information		ute and file this document on behalf of
Jeremy Komp		12/28/2022
Name and Title of Applicant		Date