SOLID WASTE COMPANIES

Class A

Annual Intrastate Gross Operating Revenue More Than \$5 Million

Class B

Annual Intrastate Gross Operating Revenue Less Than \$5 Million

2021 ANNUAL REPORT

Report Year Ended: December 31, 2021

Registered Name of Business on file	with Commission					
ED's Disposal, Inc.	dba: N/A					
Official Physical Address	Cert	ificate Number				
2021 N Commercial Ave.	N/A					
City		State	ZIP Code			
Pasco		WA	99301			
Official Email Address		<u> </u>				
office@basindisposal.com						
Official Mailing Address X If same as above						
PO Box 3850						
City		State	Zip Code			
Pasco		WA	99302			
Telephone 509-547-2476	Fax 509-54	7-8617				
Official Email Address office@basin	disposal.com					
Company Website www.basindi	sposal.com					
NOTE: If any information listed above ha	• • •	ust immediately i	nform the UTC.			
Inquiries concerning	this Annual Report sho	ould be addresse	d to:			
Name: Darrick Diet	rich					
Title: President						
Address: PO Box 385	Address: PO Box 3850					

REPORT MUST BE RECEIVED NO LATER THAN: May 1, 2022

City: Pasco State: WA

Telephone: 509-547-2476

Email: office@basindisposal.com

NOTE: If May 1 falls on a weekend, unless you are filing your report and making your payment electronically, you **must** make sure your report and payment reaches the UTC offices the business day **before** May 1.



Zip Code: 99302

Ownership

Instructions:

- List the first name (or Company Name), last name (or State of Registration), title, and percentage of all owners **holding directly or indirectly five percent or greater** of voting securities of the Company.
- Group all owners holding less than five percent as 'Other Owners'.
- Represent Percentage in decimal form (e.g., 80% is entered as 0.8000).

First Name (or Company)	Last Name (or State Registered)	Ownership	
Darrick	Dietrich	President	1.0000
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
Sum of Other Owne	-		

Industry Specific Information

USDOT Number

If you need to locate your USDOT number, go to

U.S. Department of Transportation Federal Motor Carrier Safety Administration

USDOT No. 532594

Insurance Information					
List current insurance information					
Insurance Company Policy No. Company Phone No.					
Alaska National Insurance Company	20G AS 11815, 20G LU 11815	1-800-231-1363			
Travelers	105661078	1-888-401-5529			
Alaska National Insurance Company	20G PS 11815, 21G IA 11815	1-800-231-1363			

Emergency Contact Information					
List the Name and Contact Information for the Safety Director and Claims Manager.					
Title Name Principal Business Address Phone No.					
Safety Director	Jasen Markee	2021 N. Commercial Ave. Pasco, WA 99301	(509) 547-2476		
Claims Manager Francisco Alcala 2021 N. Commercial Ave. Pasco, WA 99301 (509) 544-7709					

Does the company understand and acknowledge the responsibilities under Washington Administrative Code (WAC) 480-70-386? To review the requirements, go to the websites below

WAC 480-70-386

Please type Yes or No: Yes

The UTC may receive a consumer complaint against your company. The UTC will send the complaint to your company for a response. Please enter your company's contact information for any UTC referred consumer complaints.						
Name Title Address Email Phone						
Customer Service Department	N/A	PO Box 3850, Pasco, WA 99302	customerservice@basindisposal.com	509-547-2476		
N/A	N/A	N/A	N/A	N/A		
N/A	N/A	N/A	N/A	N/A		
N/A	N/A	N/A	N/A	N/A		

Vehicle and Mileage Information

Vehicle Information

Instructions

- Indicate the number of drivers and vehicles used in UTC-regulated operations.
- Do not leave fields blank if not applicable, enter 0.

Drivers employed	9
Total vehicles operated	9
Total vehicles owned	4
Total vehicles leased	5
Total vehicles under 10,000 lbs. (gvw rating)	0

Total Operating Miles

Instructions

- Report all miles driven by company vehicles.
- Intrastate miles are all miles driven where both the start and end points were within Washington.
- Interstate miles are all miles driven where the start and/or end point of the trip were outside Washington.
- Do not leave fields blank if not applicable, enter 0.

UTC-Regulated Intrastate Miles	83,564	
Interstate Miles	0	

Recordable Intrastate and Interstate Accidents

Instructions

- Report only accidents that meet one or more of the three criteria below.

<u>Here is how this schedule should be completed.</u> For recordable accidents, the accident should include a fatality, an injury, or disabling damage. The number of recordable accidents *is not* a total of the other categories.

Example: An accident that includes a fatality, an injury to a person requiring immediate treatment away from the scene, as well as disabling damage to a vehicle requiring it to be towed from the scene, you would enter 1 for each of those columns. It would still be recorded as 1 recordable accident, not 3.

For more information about your company's recordable accidents, please visit the Safety Measurement System by clicking the link below, enter your U.S. DOT number and click the Crash Indicator link.

- Do not leave fields blank - if not applicable, enter 0.

Safety Measurement System (dot.gov)	Click here to also review 49 Code of Federal Regulations (eCFR) §390.5 Definitions.		
Recordable Accidents	UTC-Regulated Intrastate	Interstate	
A fatality	0	0	
An injury to a person requiring immediate treatment away from the scene of the accident	0	0	
Disabling damage to a vehicle, requiring it to be towed from the accident scene	0	0	
Number of recordable accidents	0	0	

SCHEDULE 2 PROPERTY TRANSPORTATION VEHICLE LISTINGS

- Complete for **UTC-regulated** operations
- All fields must be completed. Extra lines may be left blank.
- For comment section you may enter any comment you believe is needed for that particular vehicle example: sold, damaged, no longer in service, used occassionally, etc. For additional vehicles, extend the Line Number in same format until all data is represented.

Line No.	Year	Make	Model	State of Registration	License No.	VIN	Company Unit Number	Any Comment about vehicle (Can leave blank if no comment needed)
1	2007	Peterbilt	320	WA	B13343C	1NPZL00X57D717470	8	
2	2018	Peterbilt	320	WA	C09369N	3BPDL70X8JF160838	151	
3	2021	Peterbilt	520	WA	C39428V	3BPDL20X4MF110204	32	
4	2013	Peterbilt	320	WA	C39419V	3BPZL70X0DF187946	125	
5	2019	Peterbilt	520	WA	C09742N	3BPDL20X6KF104790	30	
6	2009	Peterbilt	320	WA	B82863U	3BPZL00X69F719117	112	
7	2010	Peterbilt	320	WA	C39417V	3BPZL00X6AF719980	114	
8	2020	Peterbilt	520	WA	C57541T	3BPDL20X6LF109022	31	
9	2018	Peterbilt	567	WA	C93077G	1NPCL40X4JD466669	146	
10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
11	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
12	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
13	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
14	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
15	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
16	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
18	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
19	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
20	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
21	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
22	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
23	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
25	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

Fuel Consumption Statistics

- If company had a fuel surcharge, list revenues from surcharge.
- All fields must be completed. Do not leave blank if field is not applicable, enter 0.
- If listing other fuels, expand the cell to meet needs. Text wrap is permissible.

	Fuel Surcharge revenu	Fuel Surcharge revenue; regulated business:			
	Column 1	Column 1 Column 2			
Fuel Type	Total Annual Gallon Figury alents Total Annual Dollars T		Total Regulated Fuel Expense		
Diesel	35,072	\$114,120.36	\$43,365.74		
Unleaded Gasoline	0	\$0.00	\$0.00		
Compressed Natural Gas (CNG)	32,807	\$118,394.28	\$44,989.83		
Propane	0	\$0.00	\$0.00		
Other (specify in Footnote)	721	-\$4,103.16	-\$1,559.20		
Total Annual Purchases	68,599.77	\$228,411.48	\$86,796.36		
		Net Fuel Expense	-\$86,796.36		

Schedule 3 Footnotes (add lines as needed):				
Other - DEF, Fuel tax credits, and Vendor discounts				

Total Company Employee Classification and Compensation

- -Indicate the number of employees and total wages paid in each category.
- Do not leave fields blank if not applicable, enter 0.

Line No.	Employee Classification	Number of Employees	Salary / Wages
1	Drivers and Helpers	10	\$451,539.97
2	Mechanics and Service	1	\$66,013.08
3	Disposal and Transfer	0	\$0.00
4	Office and Administration	2	\$45,300.01
5	Officers and Directors	0	\$0.00
6	Other (specify in Footnote)	0	\$0.00
7	Totals	13	\$562,853.06

	Schedule 4 Footnotes:
Line 6 - Allocated Wages	

SCHEDULE 5 Total Company Solid Waste Operating Property

(As of December 31, 2021)

- Do not leave fields blank if not applicable, enter 0.
- Classify regulated and non-regulated fixed assets and reserves into the categories listed below, including those related to disposal and transfer station facilities.

Line	Acct. #	Fixed Assets	Balance End of Year
(L)	(a)	(b)	(c)
1	1211 La	and	\$0
2	1212 St	ructures	\$0
3	1222 S c	olid Waste Collection Equipment	\$2,168,451
4	1224 Bi	ns, Containers, Toters, Drop Boxes, etc.	\$1,385,383
5	1226 Dis	sposal/Landfill/Transfer Station Facilities and Equipment	\$0
6	1230 Se	ervice Cars and Equipment	\$0
7	1240 Sh	nop and Garage Equipment	\$0
9	1250 Of	ffice Furniture and Fixtures	\$4,725
10	1270 Le	easehold Improvements	\$0
11	1280 Ot	ther Solid Waste Operating Property (specify in Footnote)	\$0
12	7	Total Fixed Assets	\$3,558,559
Line	Acct. #	Accumulated Depreciation	Balance End of Year
(L)	(a)	(b)	(c)
13	1213 St	ructures	\$0
14	1223 S c	olid Waste Collection Equipment	(\$891,069)
15	1225 B i	ns, Containers, Toters, Drop Boxes, etc.	(\$635,865)
16	1227 Dis	sposal/Landfill/Transfer Station Facilities and Equipment	\$0
17	1231 Se	ervice Cars and Equipment	\$0
18	1241 S h	nop and Garage Equipment	\$0
19	1251 Of	ffice Furniture and Fixtures	(\$3,574)
20	1271 Le	easehold Improvements	\$0
21	1281 Ot	ther Solid Waste Operating Property (specify in Footnote)	\$0
22	7	Total Accumulated Depreciation	(\$1,530,508)

Schedule 5 Footnotes (add lines as needed):		
N/A		
N/A N/A		
N/A		

Balance Sheet - Assets - Total Company

(As of December 31, 2021)

- Do not leave fields blank if not applicable, enter 0.
- Schedule 6, Line 27 must equal Schedule 7, Line 28

Line	Account Name	Balance End of Year
(L)	(a)	(b)
	Current Assets:	
1	Cash and Working Funds	\$332,632
2	Special Deposits	\$3,181
3	Temporary Cash Investments	\$0
4	Notes Receivable	\$0
5	Receivables from Affiliated Companies	\$301,100
6	Accounts Receivable	\$281,103
7	Less: Allowance for Uncollectables	(\$20,000)
8	Net Accounts Receivable	\$261,103
9	Prepayments	\$86,882
10	Materials and Supplies	\$0
11	Other Current Assets (specify in Footnote)*	\$877
12	Total Current Assets	\$985,776
	Tangible Property:	
13	Solid Waste Operating Property (Schedule 5, Line 12)	\$3,558,559
14	Less: Accumulated Depreciation (Schedule 5, Line 22)	\$1,530,508
15	Net Solid Waste Operating Property	\$2,028,050
16	Total Net Tangible Property	\$2,028,050
	Intangible Property:	
17	Organization, Franchises, and Permits	\$0
18	Less: Accumulated Amortization - Credit	\$0
19	Other Intangible Property	\$0
20	Less: Accumulated Amortization - Credit	\$0
21	Total Net Intangible Property	
	Other Assets and Deferred Items:	
22	Investment and Advances	\$47,683
23	Undistributed Earnings from Subsidiaries	\$0
24	Deferred Debits	\$0
25	Other Assets and Deferred Items: (specify in Footnote)	\$0
26	Total Other Assets and Deferred Items	\$47,683
27	Total Assets (add lines 12, 16, 21 and 26)	\$3,061,509

Schedule 6 Footnotes:
Line 11 - Construction in Progress, Capital in Progress, and Fleet in Progress
Line 19 - None
Line 25 - None

Balance Sheet - Liabilities and Equity - Total Company (As of December 31, 2021)

- Do not leave fields blank if not applicable, enter 0.
 Schedule 6, Line 27 must equal Schedule 7, Line 28.

Line	Account Name	Balance End of Year
(L)	(a)	(b)
	Current Liabilities:	
1	Notes Payable	\$0
2	Payables to Affiliated Companies	\$30,567
3	Accounts Payable	\$79,024
4	Salaries and Wages Payable	\$32,512
5	Accrued Taxes	\$101,127
6	Current Portion of Long Term Debt (Equipment and Other)	\$0
7	Other Current Liabilities (specify in Footnote)	\$14,267
8	Total Current Liabilities	\$257,497
	Long Term Debt After 1 Year:	
9	Equipment Obligations	\$0
10	Other Long Term Debt (specify in Footnote)	\$779,286
11	Unamortized Premium / Discount of Debt - (net)	\$0
12	Total Long Term Debt After 1 Year	\$779,286
	Deferred Credits and Other Items:	
13	Deferred Credits	\$81,149
14	Other Credits (specify in Footnote)	\$0
15	Total Deferred and Other Credits	\$81,149
16	Total Liabilities (Add Lines 8, 12, and 15)	\$1,117,932
	Shareholder's and Proprietor's Equity:	·
17	Capital Stock	
18	Capital Stock	\$300
19	Paid in Capital in Excess of Par	\$198,000
20	Other Capital (specify in Footnote)	\$0
21	Total Capital Stock	\$198,300
22	Proprietor's Equity	
23	Sole Proprietor's Capital	(\$1,557,724)
24	Partnership Capital	\$0
25	Total Proprietor's Capital	(\$1,557,724)
26	Retained Earnings	\$3,303,002
27	Total Equity (Add Lines 21 and 26 or 25)	\$1,943,578
28	Total Liabilities and Equity (Line 16 plus Line 27)	\$3,061,509

Schedule 7 Footnotes:		
Line 7 - Prepayment refund, Refunds payable, Medical Insurance premiums (self insured), Life insurance premiums,		
WUTC registration fee, and Purchase order accruals.		
Line 10 - None		
Line 14 - None		
Line 20 - None		

SCHEDULE 8 Revenues

(For the Year Ended December 31, 2021)

Instructions

Classify revenues for the year into the categories listed below. **Do NOT leave fields blank.** If a field is not applicable, enter 0.

Line	Account Name	Regulated Revenue	Non-Regulated Revenue	Total Company Solid Waste Revenue
(L)	(a)	(b)	(c)	(d)
	Garbage C	ollection		
1	Residential Garbage	\$1,305,650	\$1,589,432	\$2,895,082
2	Commercial Collection	\$369,434	\$460,947	\$830,381
3	Drop Box / Compactor Collection	\$168,630	\$145,918	\$314,548
4	Drop Box / Com. Pass Thru Disposal	\$79,824	\$136,192	\$216,016
5	Other Garbage Collection (specify in Footnote)	\$6,450	\$15,660	\$22,110
Recycling, Yard Waste, Organics and Medical			l Waste	
6	Residential Recycling Collection	\$0	\$0	\$0
7	Multi-Family Recycling Collection	\$0	\$0	\$0
8	Sale of Recycle Commodities	\$0	\$4,373	\$4,373
9	Recycling Credits to Customers - (debits)/credits	\$0	\$0	\$0
10	Yard Waste/Organics Collection	\$0	\$0	\$0
11	Medical Waste Collection	\$0	\$0	\$0
12	Other Revenue (specify in Footnote)	\$0	\$7,792	\$7,792
13	Total Solid Waste Operating Revenue	\$1,929,988	\$2,360,313	\$4,290,301

Schedule 8 Footnotes:		
Line 5 - Other Fees		
Line 12 - Other Recycling Fees, Commercial Recycling Collection, Industrial Recycling Hauling		

SCHEDULE 9 Customers

(As of December 31, 2021)

- Provide the requested information for each customer classification as of year-end.
- Do not leave fields blank if a field is not applicable, enter 0.

Line	Customer Classification	Number of Regulated Customers	Number of Non- Regulated Customers	Total Solid Waste Customers
(L)	(a)	(b)	(c)	(d)
	Garbage C	ollection		
1	Residential Collection	3,652	6,249	9,901
2	Commercial Collection	258	211	469
3	Drop Box and Compactors	19	26	45
4	Other Garbage Collection (specify in Footnote)	0	0	0
5	Total Customers	3,929	6,486	10,415
	Recycling, Yard Waste, Organics, and Medical Waste			
6	Residential Recycling	0	0	0
7	Multi-Family Recycling	0	0	0
8	Yard Waste/Organics Collection	0	0	0
9	Medical Waste Collection	0	0	0
10	Other Customers (specify in Footnote)	0	6	6

Schedule 9 Footnotes:		
Line 10 - Commercial Recycling and Industrial Recycling		

SCHEDULE 10 INCOME STATEMENT

(For calendar year ended December 31, 2021)

	Account Name	Total Company
	Revenues	
1	Solid Waste Operating Revenues (Sch 8, Line 13, Column d)	\$4,290,30
2 (Grants / Debt Forgiveness	\$
3 (Other (specify in Footnote)	\$
4	Total Revenues (Line 1 thru Line 3)	\$4,290,30
	Expenses	
5 E	Employee Salaries	\$562,85
6 E	Employee Benefits	\$185,85
7	Truck Operating Costs	\$228,41
8 F	Repair and Maintenance	\$156,75
9 I	Insurance and Safety	\$24,88
10	Disposal and Processing	\$1,384,99
11	Depreciation	\$273,14
12	Selling and Advertising	\$10,87
13	Office and Administration	\$55,15
14	Management Fees	\$6,39
15	Taxes and Licenses	\$110,14
16 F	Rents	\$48,17
17	Other Expenses (specify in Footnote)	\$7,69
18	Total Expenses before Other Items (add Lines 5 through 17)	\$3,055,33
19	Net Income before Other Items (Line 4 minus Line 18)	\$1,234,96
	Other Income and Expenses	
20	Other Income/(Loss) (specify in Footnote)	\$1,36
21 I	Interest, Dividends, and Other Investment Income/(Loss)	\$
22	Distrib./Undistrib. Income/(Loss) from Subsidiaries	\$
23 I	Interest Expense	(\$5,65
24	Other Deductions (specify in Footnote)	\$
25	Total Other Income and Expenses (add Lines 20 through 25)	\$4,28
26	Net Income before Federal Income Taxes (Line 19 plus Line 25)	\$1,230,67
27 F	Federal Income Taxes	\$
28	Net Income (Loss) (Line 26 minus Line 27)	\$1,230,67
	Schedule 10 Footnotes:	

SCHEDULE 11 **Regulated Recycle Program**

(For calendar year ended December 31, 2021)

Instructions

- All fields must be completed. Do not leave fields blank if field is not applicable, enter 0. List tonnage and Revenue and Expense for each commodity category.
- If another commodity recycling program is offered, enter commodity category in "Other:"

REGULATED **RESIDENTIAL** Recycling Program Summary

REGULATED RESIDENTIAL Recycling Flogram Summary							
Commodity	Annual Tonnage	Commodity Revenue	Commodity Expense				
Mixed Paper	0	\$0	\$0				
Cardboard	0	\$0	\$0				
Plastic	0	\$0	\$0				
Metal	0	\$0	\$0				
Glass	0	\$0	\$0				
Commingle	0	\$0	\$0				
Contamination	0	\$0	\$0				
Other:	0	\$0	\$0				
Other:	0	\$0	\$0				
Total:	0	\$0	\$0				

REGULATED MULTI-FAMILY Recycling Program Summary							
Commodity	Annual Tonnage	Commodity Revenue	Commodity Expense				
Mixed Paper	0	\$0	\$0				
Cardboard	0	\$0	\$0				
Plastic	0	\$0	\$0				
Metal	0	\$0	\$0				
Glass	0	\$0	\$0				
Commingle	0	\$0	\$0				
Contamination	0	\$0	\$0				
Other:	0	\$0	\$0				
Other:	0	\$0	\$0				
Total:	0	\$0	\$0				

SCHEDULE 12 Yard Waste/Organics Program Instructions

- Complete this schedule if Yard Waste/Organic services are offered by company. If service is not offered, complete first line as "Not Applicable" in Disposal Site Name.
- Add additional lines as necessary to list all facilities and sites.
- Do not abbreviate Disposal Site Name.

	ot abbreviate Bioposar ette Name.	End of Vo	ar Di	sposal Fee		
Line No.	Disposal Site Name	USD (\$)	ai Di	Unit Type (From drop down list)	No. of Units	Total Disposal Fees
	Total of Yard Waste and Organics					
1	Not Applicable		per			
2			per			
3			per			
4			per			
5			per			
6			per			
7			per			
8			per			
9			per			
10			per			
11			per			
12			per			
13			per			
14			per			
15			per			
16			per			
17			per			
18			per			
19			per			
20			per			
21			per			
22			per			
23			per			
24			per			
25			per			
26			per			
27			per			

SCHEDULE 13 Garbage Disposal Fees

- Total Pass Through Disposal Expenses should equal Total Pass Through Revenue in Schedule 10.
 Add additional lines as necessary to list all facilities and sites.
 Do not abbreviate Disposal Site Name.

		End of Yea	ar M Fe	SW Disposal e	Residential & Commercial		Pass Through		
Line No. (L)	Site Name	USD (\$)		Unit Type (From drop down list)	No. of Units (b)	\$ Expense (c)	No. of Units (d)	\$ Expense (f)	Total Disposal Fees
	Total of Garbage Disposal Fees								\$1,379,496
1	BDI Transfer Station	\$53.26	per	Ton	21,845	1,163,480.53	4,056	\$216,016	\$1,379,496
2	N/A	N/A	per						
3	N/A	N/A	per						
4	N/A	N/A	per						
5	N/A	N/A	per						
6	N/A	N/A	per						
7	N/A	N/A	per						
8	N/A	N/A	per						
9	N/A	N/A	per						
10	N/A	N/A	per						
11	N/A	N/A	per						
12	N/A	N/A	per						
13	N/A	N/A	per						
14	N/A	N/A	per						
15	N/A	N/A	per						
16	N/A	N/A	per						
17	N/A	N/A	per						
18	N/A	N/A	per						
19	N/A	N/A	per						
20	N/A	N/A	per						
21	N/A	N/A	per						
22	N/A	N/A	per						

SCHEDULE 14 Medical Waste Disposal and Processing Expenses Instructions

- Add additional lines as necessary to list all facilities and sites. Do not abbreviate Disposal Site Name.

Line No.	Site Name	Tons	Processing Expense	Disposal Expense	Total Expense
	Total of Medical Waste Disposal and Pro	cessing			
1	Not Applicable	-	\$0.00	\$0.00	
2	Not Applicable	-	\$0.00	\$0.00	
3	Not Applicable	-	\$0.00	\$0.00	
4	Not Applicable	-	\$0.00	\$0.00	
5	Not Applicable	-	\$0.00	\$0.00	
6	Not Applicable	-	\$0.00	\$0.00	
7	Not Applicable	-	\$0.00	\$0.00	
8	Not Applicable	-	\$0.00	\$0.00	
9	Not Applicable	-	\$0.00	\$0.00	
10	Not Applicable	-	\$0.00	\$0.00	
11	Not Applicable	-	\$0.00	\$0.00	
12	Not Applicable	-	\$0.00	\$0.00	
13	Not Applicable	-	\$0.00	\$0.00	
14	Not Applicable	-	\$0.00	\$0.00	
15	Not Applicable	-	\$0.00	\$0.00	
16	Not Applicable	-	\$0.00	\$0.00	
17	Not Applicable	-	\$0.00	\$0.00	
18	Not Applicable	-	\$0.00	\$0.00	
19	Not Applicable	-	\$0.00	\$0.00	
20	Not Applicable	-	\$0.00	\$0.00	
21	Not Applicable	-	\$0.00	\$0.00	
22	Not Applicable	-	\$0.00	\$0.00	
23	Not Applicable	-	\$0.00	\$0.00	
24	Not Applicable	-	\$0.00	\$0.00	
25	Not Applicable	-	\$0.00	\$0.00	
26	Not Applicable	-	\$0.00	\$0.00	
27	Not Applicable	-	\$0.00	\$0.00	
28	Not Applicable	-	\$0.00	\$0.00	
29	Not Applicable	-	\$0.00	\$0.00	
30	Not Applicable	-	\$0.00	\$0.00	

SCHEDULE 15 Other Disposal and Processing Expenses Instructions

- Add additional lines as necessary to list all facilities and sites.

 Do not abbreviate Disposal Site Name.

Line No.	Site Name	Tons	Disposal Expense	Processing Expense	Total Expense
	Total of Other Disposal and Processing				\$5,502.95
1	Basin Recycling	83	\$1,083.44	\$4,419.51	\$5,502.95
2	N/A				
3	N/A				
4	N/A				
5	N/A				
6	N/A				
7	N/A				
8	N/A				
9	N/A				
10	N/A				
11	N/A				
12	N/A				
13	N/A				
14	N/A				
15	N/A				
16	N/A				
17	N/A				
18	N/A				
19	N/A				
20	N/A				
21	N/A				
22	N/A				
23	N/A				
24	N/A				
25	N/A				
26	N/A				
27	N/A				
28	N/A				
29	N/A				
30	N/A				

SCHEDULE 16 Contracted Cities

- List all Washington jurisdictions that have contracted the company for one or more services.
- List cities in alphabetical order.
- Do not abbreviate city names.
- Indicate the services provided.
- Add additional lines as necessary to list all facilities and sites. Extra line may be left blank.

Line No.	City	Solid Waste	Recycle	Yard Waste
	Example City	Χ	Χ	Χ
1	Benton City	Х	N/A	N/A
2	West Richland	Х	N/A	N/A
3	N/A	N/A	N/A	N/A
4	N/A	N/A	N/A	N/A
5	N/A	N/A	N/A	N/A
6	N/A	N/A	N/A	N/A
7	N/A	N/A	N/A	N/A
8	N/A	N/A	N/A	N/A
9	N/A	N/A	N/A	N/A
10	N/A	N/A	N/A	N/A
11	N/A	N/A	N/A	N/A
12	N/A	N/A	N/A	N/A
13	N/A	N/A	N/A	N/A
14	N/A	N/A	N/A	N/A
15	N/A	N/A	N/A	N/A
16	N/A	N/A	N/A	N/A
17	N/A	N/A	N/A	N/A
18	N/A	N/A	N/A	N/A
19	N/A	N/A	N/A	N/A
20	N/A	N/A	N/A	N/A
21	N/A	N/A	N/A	N/A
22	N/A	N/A	N/A	N/A
23	N/A	N/A	N/A	N/A
24	N/A	N/A	N/A	N/A
25	N/A	N/A	N/A	N/A
26	N/A	N/A	N/A	N/A
27	N/A	N/A	N/A	N/A
28	N/A	N/A	N/A	N/A
29	N/A	N/A	N/A	N/A

REGULATORY FEE CALCULATION SCHEDULE Due May 1, 2022

Company Name	е				Ann	ual Report Year
ED's Disposal	, Inc. dba N/A					2021
and pay fees on that reverence for the preceding *Note: Gross Washington on the contracts on file at the	81.77.080 Regulatory Fees, the enue. Every company subject to g year and pay to the UTC a feet on intrastate operating revenue to Commission. The revenues sons for uncollectibles, unbillable	regulation shall file wi e as instructed below. (regulated revenue) is subject to the commissi	th the UTC a s defined as all on's regulatory	revenue collected for rees are gross Wash	showing it the year fi nington int	s gross intrastate rom rates under tariffs, rastate operating
deductions from Revenue	•					•
		Regulatory Fee Ca		ı		
	ate Operating Revenue** (Fro					1,929,987.57
2 If Line 1 is under \$2	2,000 enter \$0, otherwise am	ount from Line 1 x 0	.51%	\$1,929,987.57 x	0.0051	\$9,842.94
	um regulatory fee is \$20. T n gross intrastate operating		ee is waived	for any solid wast	e collect	tion company with
				Agency Use Only		001-111-0268-227-01
	Late	Fees and Interes	t Calculation	ons		
3 Late Fees on Regul	latory Fees being paid after	May 1				
Ba Late fees on Regula	atory Fees owed (Line 2 x 2º	%)		x	0.02	
4 Interest on Regulate	ory Fees being paid after Ma	y 31				
a Number of months	past May 31 x Amount from	Line 2 x 1%	x	x	0.01	
5 Total Late Fees and	d Interest owed (Line 3a plus	Line 4a)				
6 Total Regulatory, La	ate, and Interest Fees Due (ine 2 plus Line 5)				\$9,842.94
				Agency Use Only		001-111-0268-227-11
				Agency Ose Only		001-111-0200-221-11
		COMMISSION U	SE ONLY			
Reception #:		001-111	-0268-227-01			
Reference:	AR2021		-0268-227-01			-
Payment ID:	MIZOZI		-0268-032-20			-
			-0268-032-20 ()
		30111 111	Total Paid:			

	PREPARER INFORI	MATION					
'X' if Preparer same as Cover:	N/A						
Person who prepared report:	Maura Valencia						
Title:	Senior Accountant						
If different; Company Name:							
Telephone:	509-542-4955						
Principal Business Address:	2021 N Commercial Ave.						
City: Pasco State: WA Zip: 99301							
	COMPANY INFORMATION						
Washington Unified Busine	ess Identifier (UBI) No.:	600	0-455-214				
If you do not know your UBI No.	contact Secretary of State's C	Office Office					
Business Structure (please	enter the appropriate designation	n):	Corporation				
Please enter: Individual/Sole Pro	oprietor, Partnership, LP, LLP, LLC	, Corporation, or Nonpro	fit Corporation				
Date First Organized or Regu	lated:	1999					
	Accounting Records I	nformation					
Method of Accounting: Enter	Cash or Accrual Accrual						
X if address is same as cover:	X if address is same as cover: X						
Location of Books & Records:	Location of Books & Records: N/A						
	City: N/A State: N/A Zip: N/A						
	CERTIFICATION	DN					

I have examined this report and to the best of my knowledge and belief, all statements of fact are accurate, the financial statements, for the period from January 1, 2021 to December 31, 2021, contained in this report, correctly reflect the business affairs of the respondent.

(PLEASE VERIFY THAT ALL SCHEDULES ARE ACCURATE AND COMPLETE BEFORE SIGNING)

You may electronically sign by typing your signature in block.

Date 04/29/2022

Name	Ruth Franz					
Title		Chief Financial Officer				
Company	Ed's Disposal, Inc.					
Street Address		2021 N Commercial Ave				
City	Pasco	Pasco Stat WA Zip Co 99301				
Telephone	509-547-2476					
Email		office@	basindis	oosal.com		