SECRETARY OF STATE
STATE OF MONTANA

CERTIFICATE OF EXISTENCE

I, **Bob Brown**, Secretary of State of the State of Montana, do hereby certify that

SURE-WAY SYSTEMS, INC.

Duly filed its Articles of Incorporation in this office on **10/11/1983**, and on that date was created a body politic and corporate.

I further certify that all fees reflected in the records of the Secretary of State have been paid by said corporation and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said corporation and my records indicate the corporation is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this **December 17, 2003.**

BOB BROWN
Secretary of State

Certified File Number: D-057496

EXHIBIT_____(GC 3)

Selecting, Evaluating, and Using Sharps Disposal Containers

U.S. Department of Health and Human Services
Public Health Service
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health
Atlanta, Georgia

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DHHS (NIOSH) Publication No. 97-111

FOREWORD

The Occupational Safety and Health Act of 1970 created the National Institute for Occupational Safety and Health (NIOSH). NIOSH is charged with identifying the causes of work-related diseases and injuries, evaluating the hazards of new technologies and work practices, creating ways to control hazards, and recommending occupational safety and health standards.

Occupational exposure to bloodborne pathogens (including the hepatitis B and C viruses [HBV and HCV] and the human immunodeficiency virus [HIV]) poses a significant risk to workers in the health care industry and related occupations. The primary route of exposure to bloodborne pathogens is accidental percutaneous injury caused by needlesticks (puncturing of the skin by a needle or similar sharp object). In the United States, approximately 800,000 needlestick injuries occur in hospitals annually—an average of one injury every 10 seconds. Studies have shown that many of these injuries occur after a sharp (needle or other sharp object) is used; as many as one-third of all sharps injuries have been reported to have occurred during disposal activities.

This document presents a comprehensive framework for selecting sharps disposal containers and evaluating their efficacy as part of an overall needlestick injury prevention plan. The correct and consistent use of rigid sharps disposal containers in the health care environment has been demonstrated to reduce needlestick injuries. This document reviews the Occupational Safety and Health Administration (OSHA) bloodborne pathogens standard and recommends containers on the basis of a site-specific hazard analysis. The document also establishes criteria and provides tools for evaluating the performance of sharps disposal containers.

No single container type meets the disposal containment needs for every facility, but this document establishes a basis for selecting sharps disposal containers that will decrease the risk of percutaneous sharps injury. Each day, thousands of dedicated men and women in health care and related industries risk their well-being to protect and improve the health of others. We must work together to ensure that their jobs are performed in a safe and healthful environment. This document is a valuable tool and an important part of a comprehensive strategy to reduce injury and illness in health care workers.

Linda Rosenstock, M.D., M.P.H.
Director, National Institute for Occupational Safety and Health
Centers for Disease Control and Prevention

ABSTRACT

Occupational transmission of human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV) has been well documented. The risk of infection with HIV following one needlestick exposure is approximately 0.3% and ranges from 6% to 30% for HBV and from 5% to 10% for HCV. The passage of the Occupational Safety and Health Administration's (OSHA's) bloodborne pathogens standard (29 CFR* 1910.1030) has increased compliance and awareness of prevention strategies. No single sharps disposal container design meets all the disposal containment needs for all health care settings or for an entire hospital. Container selection should be based on a comprehensive site-specific hazard analysis.

The safety performance criteria for sharps disposal containers are divided into four areas. First, containers should remain functional during their entire use. They should be durable, leak resistant, and puncture resistant under all normal environmental conditions. Second, containers must be accessible to workers who use, maintain, or dispose of sharp devices. This criterion includes sufficient number, sufficient container volume, and safe access to the disposal opening on individual containers. Other important factors include convenient placement and (if necessary) portability of containers within the workplace. Third, containers should be visible to the workers who must use them. Container fill status and warning labels are also important visibility criteria. Fourth, container designs should accommodate the user, the facility, and the environment. Although engineering controls such as needleless IV systems and "safety" needles will reduce injuries, proper selection and use of sharps disposal containers are still important. Prevention strategies include implementing engineering controls, using personal protective equipment, training employees, and involving occupational health professionals and workers.

* Code of Federal Regulations

CONTENTS

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PUBLIC HEALTH SUMMARY

What are the hazards?

Workers in the health care industry and related occupations are at risk of occupational exposure to bloodborne pathogens, including human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and other potentially infectious agents.

How do these hazards occur?

The primary route of occupational exposure to bloodborne pathogens is accidental percutaneous (through the skin) injury. Health care workers handle sharp devices and equipment such as hypodermic and suture needles, intravenous blood collection devices, phlebotomy devices, and scalpels. Of the 800,000 needlestick injuries (NSIs) estimated to occur in the hospital setting annually, the greatest number occur to health care workers with the most involvement in direct patient care. Nursing staff and phlebotomists sustain the highest percentage of reported NSIs.

Hospital NSI studies have shown that many of these injuries occur after the device is used and during disposal activities. As many as one-third of all sharps injuries have been reported to be related to the disposal process. The factors most often related to sharps injuries include the following:

- Inadequate design or inappropriate placement of the sharps disposal container
- Overfilling of sharps disposal containers
- Inappropriate sharps disposal practices by the user during patient care

How can these hazards be avoided?

The use of safer needle-bearing products, worker education and training, other measures for preventing sharps injuries, and compliance with standard precautions for preventing exposure to bloodborne pathogens should be part of an overall strategy for preventing NSIs.

Important elements of an overall prevention strategy include the following:

- Engineering controls (an example is the use of safer needle-bearing products)
- Organizational controls (examples are the elimination of unnecessary sharps and training in the use of sharps disposal containers)
- Surveillance of NSIs to assess their frequency and circumstances

The routine use of rigid sharps disposal containers in the health care environment has been demonstrated to reduce NSIs. This document presents a framework for selecting disposable and reusable sharps disposal containers and evaluating their efficacy as part of an NSI prevention plan.

Section I (A) of this document addresses four major criteria for evaluating the performance of sharps disposal containers.

1. Functionality: Containers should remain functional during their entire usage (i.e., they should be durable, closable, leak resistant on their sides and bottom, and puncture resistant until final disposal).

2. Accessibility: Containers should be accessible to workers who use, maintain, or dispose of sharp devices. Convenient placement should also be considered, along with portability of containers within the workplace, if necessary.

3. Visibility: The following should be plainly visible to the workers who use the containers: the container, the degree to which it is full, the proper warning labels, and the color coding of the container.

4. Accommodation: Containers should be accommodating or convenient for the user and the facility and should be environmentally sound (e.g., free of heavy metals and composed of recycled materials). Accommodation also includes ease of storage, assembly, and operation.

Appendix D contains a questionnaire designed to

evaluate container performance based on these four performance criteria. This questionnaire should help product evaluation committees, facility management, and health care workers select and evaluate sharps disposal containers.

Section II (B) of this document presents requirements of the Occupational Safety and Health Administration (OSHA) and recommendations of the National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC), concerning sharps disposal container selection and implementation. OSHA's bloodborne pathogens standard is reviewed to establish minimum design performance elements. Recommendations are made for reprocessing reusable sharps disposal containers.

NIOSH recommends selecting a container or combination of containers that are based on a site-specific hazard analysis and have the following components:

- Assessment of workplace hazards (biological, physical, chemical, and radiological containment needs)
- Assessment of size and types of sharps to be disposed of
- Assessment of the volume of sharps to be disposed of at each point of use
- Assessment of frequency of sharps disposal container emptying and mounting bracket servicing by maintenance staff
- Compliance with Federal, State, and local regulations
- Security requirements
- Container transport or mobility needs
- Clinician and procedural variability and movement
- Laboratory equipment variability and movement
- Environmental and disposal constraints
- Cost considerations
- Continued evaluation of medical device technology, including ongoing changes in equipment design and barrier materials

Appendix C presents a decision logic outlining appropriate criteria and priorities for selecting a sharps disposal container. This decision logic can be used alone or in conjunction with the performance evaluation questionnaire (Appendix D) to frame the selection process.

Sharps disposal containers that are functional, accessible, secure from patient and visitor tampering (if necessary), visible, and convenient to use will decrease the risk of percutaneous sharps injury. There is no single container type that meets the disposal containment needs for an entire facility. The diversity of health care settings and procedures makes selecting a single container impossible.

Where can I get more information?

The references and related reading list at the end of this document provide a useful inventory of published reports and literature. If you have any questions about obtaining equipment described here, contact your local biohazard safety/waste equipment supplier or call NIOSH.

1-800-35-NIOSH
(800-356-4674)

SELECTING, EVALUATING, AND USING SHARPS DISPOSAL CONTAINERS

I—INTRODUCTION

The Occupational Safety and Health Administration (OSHA) estimates that more than 5.6 million workers in health care and related occupations are at risk of occupational exposure to bloodborne pathogens, including human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and other potentially infectious agents.[1] Occupational transmission of bloodborne pathogens (including HBV, HCV, and HIV) has been well documented.[2–11] Ongoing surveillance of needlestick injuries (NSIs) and other sharps-related injuries indicate that occupational bloodborne pathogen exposure remains an important public health concern.

The primary route of occupational exposure to bloodborne pathogens is percutaneous injury (i.e., NSI). Health care workers (HCWs) handle sharp devices and equipment such as hypodermic and suture needles, intravenous blood collection devices, phlebotomy devices, and scalpels.

As many as 800,000 NSIs are estimated to occur in the hospital setting annually.[12,13] However, the true incidence of sharps injuries is unknown because many injuries go unreported in both health care and public safety settings. Centers for Disease Control and Prevention (CDC) studies have estimated that the rate of seroconversion following occupational parenteral exposure to infected blood is approximately 6% to 30% for HBV exposures, 5% to 10% for HCV exposures,[3–5] and 0.3% for HIV exposures.[9,14] Other CDC surveillance data on NSIs indicate that 86% of reported occupational HIV exposures result from hollow-bore needles.[14]

NSIs occur most often to HCWs with the greatest involvement in direct patient care. Nursing staff and phlebotomists sustain the highest percentage of reported injuries.[15–20] Other HCWs are at risk of injury from specific types of sharps—for example, surgeons (scalpels and suture needles), dental workers (dental burs), and housekeepers and laundry workers (discarded or lost needles in waste and laundry). The use of safer needle-bearing products and other measures for preventing sharps injuries should be part of an overall strategy to prevent NSIs.[21,22] Compliance with standard precautions for prevention of exposure to bloodborne pathogens should be part of this overall strategy.[23] Moreover, surveillance of NSIs is an integral part of sharps injury prevention and control. Accurate assessment of the frequency and circumstances of these injuries is necessary to direct prevention efforts.

Hospital NSI studies have shown that many of these injuries occur after the device is used and during disposal activities.[15,16,24] As many as one-third of all sharps injuries have been estimated to be related to the disposal process. These injuries have most often been related to a number of factors, including inappropriate sharps disposal practices by the user, inadequate sharps disposal container design, inappropriate sharps disposal container placement,* and overfilling of sharps disposal containers.

The correct and consistent use of rigid sharps disposal containers in the health care environment has been demonstrated to reduce the number of NSIs.[25] Studies indicate that placement of disposal boxes in all patient and treatment rooms decreases the frequency of sharps injury.[15,16,18,25] Investigators have concluded that appropriately placed sharps disposal containers reduce NSIs related to recapping of sharps by as much as 80%.[18] Cost-benefit studies show that when the increased costs of materials management are compared with the decrease in injury compensation costs, sharps disposal containers are cost effective—even when both direct and indirect costs (medical evaluation and followup, treatment costs, and lost workdays) of injury reduction are considered.[24]

In addition to engineering controls such as the use of rigid sharps disposal containers, organizational controls are a vital part of an overall prevention strategy. These include the elimination of unnecessary sharps, changes in device-handling procedures, worker education and training, and placement of sharps disposal containers where sharps are used.

* See Appendix F for an OSHA hazard information bulletin regarding sharps disposal containers with needle removal features.

The purpose of this document is to provide a framework for selecting sharps disposal containers and evaluating their efficacy as part of an overall NSI prevention plan. Both disposable and reusable sharps disposal containers are included. The plan is intended for use by infection control practitioners, purchasers, and others who are responsible for the selection process.

II—SHARPS DISPOSAL CONTAINERS

A. Performance Criteria

Focus group studies (Appendix A) suggest that there are four major criteria for sharps disposal container safety performance: functionality, accessibility, visibility, and accommodation. More detailed descriptions of these criteria follow:

- Functionality: Containers should remain functional during their entire usage. They should be durable, closable, leak resistant on their sides and bottoms, and puncture resistant until final disposal. A sufficient number of sharps disposal containers should be provided. Individual containers should have adequate volume and safe access to the disposal opening (inlet).

- Accessibility: Containers should be accessible to workers who use, maintain, or dispose of sharp devices. Containers should be conveniently placed and (if necessary) portable within the workplace.

- Visibility: Containers should be plainly visible to the workers who use them. Workers should be able to see the degree to which the container is full, proper warning labels, and color coding.

- Accommodation: Container designs should be accommodating or convenient for the user and the facility, and they should be environmentally sound (e.g., free of heavy metals and composed of recycled materials). Accommodation also includes ease of storage and assembly and simplicity of operation.

1. Functional criteria

Sharps disposal containers should be of sufficient thickness or construction design to be durable, leak resistant, and puncture resistant under normal use and stresses imposed during storage, handling, installation, use, closure, and transport within the user facility before final disposal.* Durability and puncture resistance should remain unaffected by moderate variation in temperatures during storage and use.† Brackets and locking mechanisms used for installation should also be durable.

Barrier material performance. Sharps disposal container material should be resistant to chemical or liquid permeation or degradation, punctures, tearing, abrasion, and laceration.

Closure mechanisms. Closure mechanisms should be designed to minimize exposure to contents and injury to the hand during engagement of the closure mechanism or during transport within the user facility before final disposal. Once activated, the final closure mechanism of a sharps disposal container should be resistant to manual opening.

Stability. Containers (including those designed to be kicked or wheeled) should be stable when placed on a horizontal surface and when used as described in the product labeling. Some manufacturers provide trays, holders, or enclosures to stabilize their containers in certain applications. The use of these items should also be detailed in the labeling.

Size and shape. Where workers handle sharp devices, a sufficient quantity of sharps disposal containers should be available in the appropriate size and shape. Sharps disposal containers should be of sufficient size to accommodate the largest sharp used at the workstation it serves. Containers should also be shaped to accommodate the partic-

* No requirements exist for sharps disposal containers to meet Department of Transportation (DOT) certification for shipping containers. Sharps disposal containers are generally placed within DOT-certified containers before shipping to a final disposal site.

† Caution must be exercised when handling sharps disposal containers at extremes of temperature—such as those encountered by home health care providers when transporting sharps disposal containers in their cars. Sharps disposal containers are not typically designed for high- and low-temperature conditions.

ular type of sharp that requires disposal. At a minimum, one sharps disposal container should be provided at each worksite where sharps are predictably generated or located.

Sharps disposal containers should also be of sufficient size to accommodate the volume of sharps typically generated at the site between maintenance operations. Providing sharps disposal containers of sufficient size will minimize the possibility of overfilling the container, which would compromise its safe operation.

Mounting brackets. Mounting brackets for sharps disposal containers should be rugged and provide for ease of servicing and decontamination.

2. Accessibility criteria

Disposal opening or access mechanism. Sharps disposal containers should be designed to permit safe disposal of sharps. They should be simple and easy to operate. The disposal opening should prevent spills of the contents (objects or liquid) while in use in the intended upright position, during the closure and sealing process, and during transportation within the user facility before final disposal. The design should also minimize any catching or snagging of sharps during insertion into the sharps disposal container. The disposal opening should be identifiable and accessible by the user and should facilitate one-handed disposal.

Security may be a concern in some areas of facilities using sharps disposal containers. For instance, to prevent children and others from putting their hands into the containers, the facility should consider selecting containers with guards that prevent hands or fingers from entering the containers. Where safety features are added to restrict child access, these features should not interfere with the worker's vision of the inlet opening. Injury to visitors may also be a problem.[26] Sharps disposal container options that accommodate these concerns should be available within the facility.

Handles. For some designs, handles may facilitate safe handling of the sharps disposal container. If present, they should be sufficiently sturdy to avoid breaking when the sharps disposal container is in use or during transportation before final disposal. If handles are present, they should be placed so that the user's hands are not close to the disposal opening when the handles are used, and they should be positioned above the full-fill level.

General location and placement. Proper sharps disposal container location and placement should ensure that containers are readily visible and within easy horizontal reach of the user. Placement of containers should be in compliance with any existing State or local regulations or site-specific certification or accreditation licensing requirements. Where containers are fixed to walls or other permanent sites, the vertical height should allow the worker to view the opening or access of the container.

Sharps disposal containers should be placed with no furniture or other obstacles between the site of use and the container. Injuries may result if sharps disposal containers are located in awkward, unsafe locations. These unsafe locations may force workers to make unnecessary movements while holding a sharp and accessing the container. Placement of the sharps disposal container outside the patient room also increases the possibility of injury. Examples of inappropriate installation include placement in the corners of rooms; on the backs of room doors; under cabinets; on the insides of cabinet doors; under sinks; in areas where people might sit or lie beneath the container; near light switches, room environmental controls, or utility system access ways; near mail boxes; or where the container is subject to impact and dislodgement by pedestrian traffic, moving equipment, gurneys, wheelchairs, or swinging doors. Standard operating procedures and practices should be developed to allow the worker to dispose of the device as soon as possible after use—preferably without needing to put the device down and pick it up again.

Special situations may require innovative sharps disposal container placement and security approaches. Examples of these special situations

include pediatric and geriatric wards and mental health or correctional facilities. If necessary, in areas with high patient or visitor traffic, sharps disposal containers should be mounted in a lockable fixture. In the emergency room, sharps disposal containers may need to be mounted on wheels to facilitate the movement of gurneys and monitoring equipment. In some situations, it may be appropriate to mount sharps disposal containers directly on gurneys to facilitate their use. Although some pediatric facilities mount sharps disposal containers high on walls to prevent access by children, such placement should not be so high that it impairs safe access by workers.

Installation height. Installation of a container at an appropriate height for the user may reduce sharps-related injuries. Sharps disposal containers should be placed within arm's reach and below eye level at their point of use. For certain types of permanently fixed, wall-mounted containers, an ergonomically acceptable range of installation height can be calculated (Appendix B). Standard anthropometric tables should be used to determine the normal range of human physical variation. Fixture heights are commonly designed to accommodate 95% of the adult population. The following criteria should be used to determine the optimal range for fixed installation height: (1) users should have a clear, unobstructed view of the container inlet opening, (2) the container should be located within arm's reach, and (3) the fixture height should be below the eye level of 95% of adult female workers. These requirements yield an optimal installation range of 56 to 52 inches at a standing workstation, and 42 to 38 inches for a seated workstation. The upper and lower ranges for the installation height are calculated by allowing for the reach behavior of workers. For a complete explanation of calculating optimal installation height, see Appendix B.

Other ergonomic alternatives include (1) using an extension arm on a fixed-height installation at a seated workstation to bring the sharps disposal container closer to the work surface, (2) providing height-adjustable chairs that allow the worker to view the entire top surface of a container at a seated workstation, and (3) using bracketing and mounting systems designed to allow user adjustment of the container (Appendix B).

3. Visibility criteria

To reduce the chance of percutaneous injury, sharps disposal containers should be visible and recognizable. Safe disposal of sharps requires clear vision of both the sharp device and the container. The disposal opening or access mechanism and current fill status should be visible to the user before sharps are placed in the container.

Sharps disposal containers should carry a hazard warning labeling. Such labels and device colors should imply danger. Either the device color or a warning label should be visible to the user to warn of a potential hazard before sharps are placed in the container. The current fill status of the container should be easily observable by the user before sharps are placed in the container. Sufficient illumination is needed at the container to determine whether any sharp object is protruding from the container or whether the container is grossly soiled at holding points or on opening mechanisms. Container fill status should be obvious under lighting conditions at the installation location. Safety features, security measures, and aesthetics should not distort recognition of the container, fill status, warning labels, or the disposal opening or access.

OSHA's bloodborne pathogens standard [29 CFR 1910.1030, section (g)(1)(I)(C)] contains very specific requirements about the labeling of containers for contaminated sharps: "These labels shall be fluorescent orange or orange-red or predominantly so, with lettering or symbols in a contrasting color." The standard also requires that the biohazard symbol and the word *Biohazard* be displayed; note, however, that "[R]ed bags or red containers may be substituted for labels" in section (g)(1)(I)(E).

4. Accommodation criteria

Sharps disposal container designs should be accommodating to the user, the facility, and the

environment. Accommodation is a measurement of ease of storage and assembly, minimal worker training requirements, ease of operation, and flexibility in design. Container design should promote one-handed disposal. Design and product finish should minimize sharp surfaces or cross-infection hazards. Special aesthetic, operational, or safety features should not hide or impede free access to the device, the inlet, or the closure process. Users should be able to assemble containers easily, if required. Mounting systems should be safe, durable, stable, cleanable, and (where appropriate) lockable. Placement in and removal from mounting systems should be simple and uncomplicated and should not compromise safety and security. To ensure proper fit and functioning of the container mounting system, mounting systems should be used only for the sharps disposal containers for which they were designed. Modifying mounting systems to accommodate containers for which they were not designed is not a safe or effective practice.

Containers should be designed so that they are simple to use. Manufacturers of sharps disposal containers should provide recommended user training information, which could include the following:

1. Assembly instructions
2. Safety considerations
3. Maintenance criteria for reusable containers
4. Optimum storage conditions
5. Warranty information
6. Decontamination recommendations (for reusable containers and their holders)
7. Container retirement considerations (for re-usable containers and their holders)
8. Bilingual or multilingual material, where needed
9. Sharps disposal container disposal considerations
10. Information for periodic in-service retraining, if required

B. Existing Standards

Existing Federal standards for sharps disposal containers are outlined here. Published sources for other standards are listed in Appendix E.

Sharps disposal containers are regulated as class II medical devices by the Food and Drug Administration (FDA) [21 CFR 860.3].* OSHA's bloodborne pathogens standard establishes minimum design performance elements for sharps disposal containers [29 CFR 1910.1030(d)(4)(iii)(A)]. The standard requires that contaminated sharps "be discarded immediately or as soon as feasible in containers that are:

(i) Closable;
(*ii*) Puncture resistant;
(*iii*) Leakproof on sides and bottom; and
(*iv*) Labeled or color-coded in accordance with paragraph (g)(1)(i) of the standard."

Paragraph (g)(1)(i)(A) of the standard requires that warning labels "be affixed to containers of regulated waste, refrigerators and freezers containing blood or other potentially infectious material; and other containers used to store, transport, or ship blood or other potentially infectious materials. . . ."

Paragraph (d)(4)(iii)(A)(2) further states that "during use, containers for contaminated sharps shall be:

(*i*) Easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found (e.g., laundries);

(*ii*) Maintained upright throughout use; and

(*iii*) Replaced routinely and not be allowed to overfill."

When containers of contaminated sharps are being

* FDA identifies three classes of medical devices. Class I devices (e.g., tongue depressors) are subject only to general regulatory controls and receive little Agency oversight. Class II devices (e.g., infant incubators) are subject to special controls, such as performance standards, to ensure their safe and effective use. Class III devices (e.g., implantable pacemakers) are generally life-sustaining or life-supporting and are implanted in the body; they present an unreasonable risk of illness or injury.

moved from the area of use, paragraph (d)(4)(iii)(A)(*3*) requires that they be:

> "(*i*) Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping;
>
> (*ii*) Placed in a secondary container if leakage is possible. The second container shall be:
>
> (*A*) Closable;
>
> (*B*) Constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping. . . ."

Finally, the standard states in paragraph (d)(4)(iii)(A)(*4*) that "[R]eusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury."

Since most sharps disposal containers are designed to be autoclavable, steam ports and air spaces between nestable parts are located on the upper portion of containers. Steam ports allow steam to penetrate to the contents of the container during sterilization procedures. These openings may allow fluid leakage or needle-tip protrusion to occur if the container is placed on its side or overturned. The OSHA standard addresses this concern by further requiring that during handling, storage, and shipment, containers be maintained upright throughout their use, routinely replaced, and not overfilled [29 CFR 1910.1030 (d)-(4)(iii)(A)(*2*)].

C. Recommended Strategy for Selecting and Using Sharps Disposal Containers

The following strategy for selecting and using sharps disposal containers should be implemented as part of an overall NSI prevention plan.

Selection of a container or combination of containers should be based on a site-specific hazard analysis. Components of a site-specific hazard analysis should include the following:

- Assessment of workplace hazards (biological, physical, chemical, and radiological hazard containment needs)
- Assessment of size and type of sharps to be disposed of
- Assessment of the volume of sharps to be disposed of at each point of use
- Assessment of the frequency of sharps disposal container emptying and mounting bracket servicing by maintenance staff
- Compliance with Federal, State, and local regulations
- Security requirements
- Container transport or mobility needs
- Clinician and procedural variability and movement
- Laboratory equipment variability and movement
- Environmental and disposal constraints
- Economic considerations
- Continued evaluation of medical device technology, including ongoing changes in equipment design and barrier materials

An individual or a group should be assigned the responsibility for regular monitoring and maintenance of sharps disposal containers. The designee(s) should frequently and routinely monitor fill levels of containers and be responsible for changing containers before they are overfilled.

Each time a reusable sharps disposal container is returned to service after reprocessing, the user facility should confirm that it meets its original performance elements. In addition, reusable sharps disposal containers should be rendered free of infectious organisms and infectious material each time they are reprocessed and before they are returned to service.

A flow chart describing a decision logic for selecting a sharps disposal container is presented in Appendix C (Figure 2).

This decision logic can be used alone or in conjunction with the performance evaluation questionnaire in Appendix D. Based on the four performance criteria, the questionnaire is designed to assign appropriate criteria and priorities to each step and can be used to frame the selection process. The questionnaire should assist product evaluation committees, facility management, and individual

HCWs with proactive sharps disposal container selection and evaluation. Although it is not possible to provide precise guidelines for evaluating questionnaire scores, the lower the score, the better the sharps disposal container (i.e., the highest score would be 44 points and the lowest would be 220 points). A priority or value must be assigned to a criterion on a case-by-case basis. It may be useful to compare the model of sharps disposal container currently in use with the replacement models under consideration by using the questionnaire scoring system.

Before a new sharps disposal container is introduced, worker training should be conducted to address the proper use of sharps disposal containers. All workers who might come into contact with sharps should be included in this training (e.g., maintenance and laundry service staff). Where appropriate, multilingual educational materials should be developed.

For optimal protective value, the sharps disposal container must be readily available, of sufficient size and capacity, replaced when full, and used by workers. No single container type meets the disposal containment needs for an entire facility. The diversity of health care settings and procedures makes selecting a single container impossible.

III—CONCLUDING REMARKS

Sharps disposal containers that are functional, accessible, secure from patient or visitor tampering (if necessary), visible, and convenient to use will decrease the risk of percutaneous sharps injury. For optimal protective value, the container must be readily available and of sufficient size and capacity. Sharps disposal container use should be part of an institutional process that

- supports surveillance of sharps injury,
- eliminates unnecessary sharps,
- promotes worker education and training in the proper use of sharps disposal containers and safety devices,
- immunizes HCWs at risk of exposure to HBV, and
- advocates compliance with standard precautions.

Products that meet all of the performance criteria identified in this document may not exist. To develop and disseminate products that meet these criteria, manufacturers and end users should work together to design and modify containers.

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APPENDIX A—FOCUS GROUP INPUT

NIOSH initiated several cooperative agreements to conduct research on sharps disposal containers with the Educational Resource Centers (ERCs) during fiscal years 1992–94. These research agreements provided the environments necessary to study interrelated ergonomic, behavioral, and selection/evaluation variables associated with sharps disposal containers in a variety of health care settings.

Input from focus groups was used to develop this document. Experts or users were recruited to supply information to estimate the likelihood of a situation or event based on their experience. Focus groups were used to obtain user input about sharps disposal container design, safety, and management. Studies conducted by NIOSH ERCs selected health care workers considered at risk of exposure to HIV in a variety of health care settings. The evaluation criteria (identified in the performance evaluation questionnaire of this document) were developed, in part, using focus groups. The use of focus groups provided a rapid and relatively inexpensive measurement tool to identify worker perceptions, beliefs, and attitudes regarding the performance of sharps disposal containers.

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APPENDIX B—DETERMINING SHARPS DISPOSAL CONTAINER INSTALLATION HEIGHT USING STANDARD ERGONOMICS MEASUREMENTS

Architects, ergonomists, and interior designers use standard anthropometric tables to determine the normal range of human physical variation. Fixture heights (i.e., the distance from the floor to the opening of the sharps disposal container) are commonly designed to accommodate 95% of the adult population. An ergonomically acceptable range for fixed installations (i.e., containers located in permanent, wall-mounted holding brackets) can be calculated to facilitate the reduction of sharps-related injuries and standardize the container height location within the health care facility. HCWs should be able to comfortably view the entire inlet opening of the disposal container, and containers should be located within arm's reach. Neck and eye fatigue is most effectively reduced when objects to be viewed are slightly below eye level (i.e., 0 to 15 degrees below eye level).

Installation heights vary, depending on whether the installation is designed to be a standing workstation or seated workstation. Maximum and minimum heights for both design situations can be calculated by establishing the eye-level height for each design (standing or sitting), the maximum thumb tip reach (MTTR)* of the target adult female population and the drop in inches based on an angle of 15 degrees. The basic formula is as follows:

$$\text{fixture height} = (\text{eye-level height}) - (\text{tangent } 15^\circ)(\text{MTTR})$$

However, in observations of workers using fixed, wall-mounted containers, nearly all workers bent their elbows and wrists when approaching sharps disposal containers to dispose of used sharps and actually stood closer to the container rather than extending their arms to their maximum reach. On the basis of these data, the calculation can be enhanced to accommodate actual behavior. The upper and lower ranges for the installation height can be modified by allowing for the reach behavior of workers. Thus the middle 50% distance of the MTTR was used to adjust for human behavior and provide for a more functional installation height range.

If eye level equals 57 inches and the modified MTTR is used,

$$\text{fixture height} = 57 \text{ inches} - (.2679)(18.7 \text{ inches})$$
$$\text{and}$$
$$\text{fixture height} = 57 \text{ inches} - (.2679)(3.7 \text{ inches})$$

Therefore,

$$\text{fixture height} = 57 \text{ inches} - 5 \text{ inches} = 52 \text{ inches}$$
$$\text{and}$$
$$\text{fixture height} = 57 \text{ inches} - 1 \text{ inch} = 56 \text{ inches}$$

The optimal installation heights for fixed, wall-mounted sharps disposal containers are

Standing workstation:[†,‡]
52 to 56 inches above the standing surface of the user (Figure 1)

Seated workstation:[§]
38 to 42 inches above the floor on which the chair rests

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* MTTR, the distance from the tip of the thumb to the shoulder.

† All standard measurements were taken from tables contained in J. Panero and M. Zelnick's *Human Dimension and Interior Space*, 1979, pages 98 and 102.

‡ Standing eye level includes a 1-inch shoe heel thickness and a 56.3-inch eye height.

§ Seated eye level includes a 0.25-inch clothing thickness, 1-inch chair seat thickness, 14.9-inch popliteal height, and 27.4-inch erect sitting eye height.

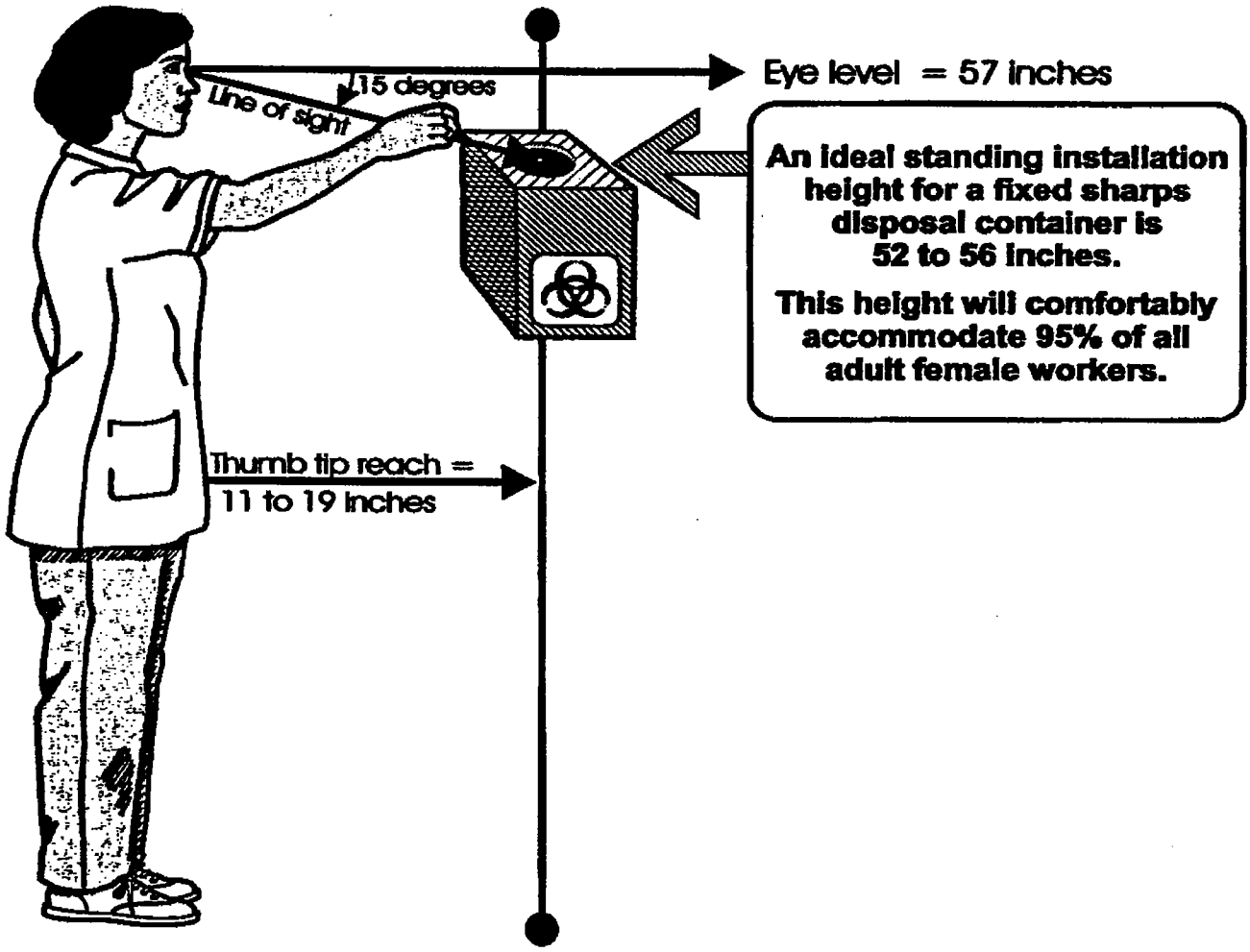

Figure 1. Ergonomic installation height for a wall-mounted work station.

APPENDIX C—DECISION LOGIC FOR SELECTING SHARPS DISPOSAL CONTAINERS

NIOSH has developed a decision logic to present appropriate criteria and priorities for selecting a sharps disposal container (Figure 2). This decision logic can be used to frame the selection process.

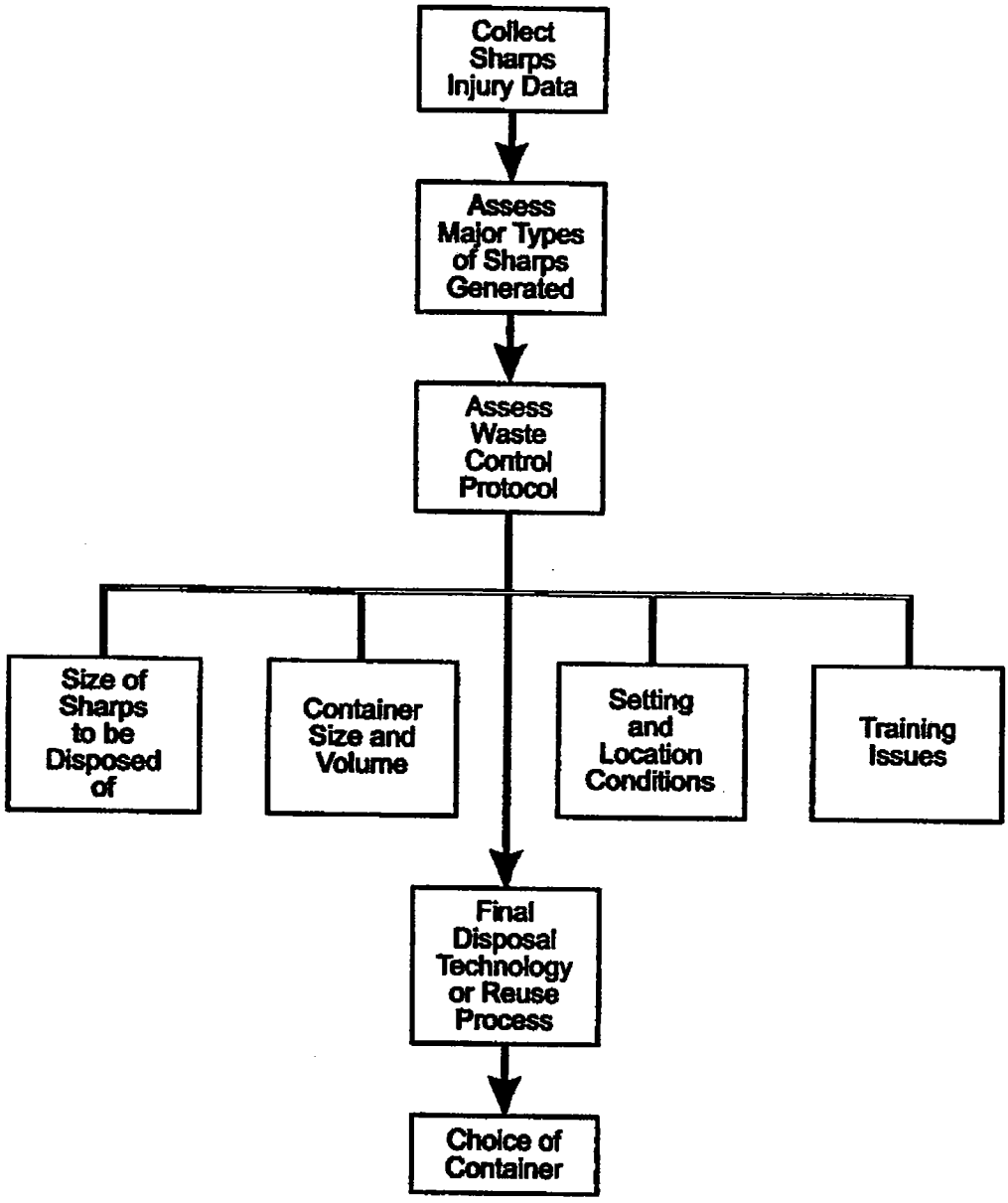

Figure 2. Decision logic for sharps disposal container selection.

APPENDIX D—QUESTIONNAIRE FOR EVALUATING SHARPS DISPOSAL CONTAINER PERFORMANCE

The decision logic may be followed by a questionnaire designed to evaluate container performance based on each of the four performance criteria (functionality, accessibility, visibility, and accommodation). The questionnaire should assist product evaluation committees, facility management, and individual HCWs in proactive sharps disposal container selection and evaluation. Users of this questionnaire should be aware that the ideal product may not exist and that this evaluation tool was constructed on the basis of common product designs available at the time.

Product evaluators should inspect and operate sharps disposal container mechanisms in side-by-side comparisons. Representative sharps (syringes, IV sets, blades, pipettes, etc.) should be on hand in sufficient numbers to test the ease of use and the intended function of candidate products. Actual use conditions should be simulated, if possible. Before inserting test sharps, attempt to reopen sealed containers and attempt to spill or remove contents from unsealed containers if this is a functional requirement of the location of intended use. Evaluation facilitators should provide product manufacturer literature and visual instructions; they should also demonstrate proper operation of each container.

The waste management system represents a considerable investment for health care operations. Sharps disposal containers should be economical to acquire, store, assemble, use, and dispose of. Low unit prices do not always result in lowest overall costs. Total cost for the employer is best measured as a function of wear life, unit cost, capacity utilization, labor cost, capital investment, employee training, installation cost, disposal cost, savings in employee injury costs, employee task confidence, and compliance with standard precautions and 29 CFR 1910.1030 (OSHA's bloodborne pathogens standard). Moreover, evaluation of cost is an ongoing process that may be a driving force in deciding when new sharps disposal containers are required or relocation of existing sharps disposal containers is more appropriate.

At this time, there is no quantitative score that indicates a container is sufficient for a particular purpose. Although it is not possible to provide precise guidelines for evaluating a particular score from the questionnaire, the lower the score from the questionnaire, the better the sharps disposal container (the highest score would be 44 points and the lowest score would be 220 points). The application of priority or value to a criterion must be done on a case-by-case basis. It may be useful to submit the currently used sharps disposal container to the questionnaire scoring system to compare it with the replacement models under consideration.

QUESTIONNAIRE FOR EVALUATING SHARPS DISPOSAL CONTAINER PERFORMANCE

The following product selection questionnaire was developed by the Centers for Disease Control and Prevention's National Institute for Occupational Safety and Health in conjunction with NIOSH Educational Resource Centers; The Johns Hopkins University, Baltimore; the University of Texas, Houston; the University of California, Berkeley; and the Mount Sinai School of Medicine, New York City.

INSTRUCTIONS:

Product evaluators should inspect and operate containers to be evaluated in side-by-side comparisons. Representative sharps (syringes, IV sets, blades, biopsy needles, pipettes, etc.) should be used to test candidate products. Actual use conditions should be simulated, if possible. Prior to inserting test sharps, attempt to reopen sealed containers and attempt to spill or remove contents from unsealed containers if this is a functional requirement. Evaluation facilitators should provide product manufacturer literature and visual instructions and should demonstrate proper operation of each of the containers. Use of this guideline requires knowledge that the ideal product may not exist and that this evaluation tool was based on common product designs available at the time.

FUNCTIONALITY

PLEASE CIRCLE YOUR RESPONSE

	agree ..... disagree				
Container is stable when placed on horizontal surface and when used as described in the product labeling for use in trays, holders, or enclosures ...	1	2	3	4	5
Container provides for puncture, leak, and impact resistance	1	2	3	4	5
Container, labels, warning devices, and brackets are durable	1	2	3	4	5
Container is autoclavable, if necessary	1	2	3	4	5
Container is available in various sizes and capacities	1	2	3	4	5
Container is available with auxiliary safety features (e.g., restricted access to sharps in the container), if required	1	2	3	4	5
Closure mechanism will not allow needlestick injury	1	2	3	4	5
Closure mechanism provides secure seal	1	2	3	4	5
Design minimizes needle-tip flipback	1	2	3	4	5
Design promotes clinical performance (e.g., will not compromise sterile field or increase injury or infection control hazards)	1	2	3	4	5

	agree				disagree
Design resists easy reopening after sealing for final disposal or autoclaving	1	2	3	4	5
Inlet design defeats waste removal when open	1	2	3	4	5
Inlet design prevents spillage of contents (physical or liquid) while sharps disposal container is in use in the intended upright position	1	2	3	4	5
Containers designed to be reopenable have removable lids design with tight closure that facilitates ease of removal with grip safety and comfort	1	2	3	4	5
Mounting brackets are rugged and designed for ease of service and decontamination	1	2	3	4	5

ACCESSIBILITY

	agree				disagree
Container available in various opening sizes and shapes	1	2	3	4	5
Containers are supplied in sufficient quantity	1	2	3	4	5
Container has an entanglement-free opening/access way	1	2	3	4	5
Container opening/access way and current fill status visible to user prior to placing sharps into container	1	2	3	4	5
Internal design/molding of container does not impede ease of use	1	2	3	4	5
Handles, if present, located above full-fill level	1	2	3	4	5
Handles, if present, facilitate safe vertical transport and are located away from opening/access way and potentially soiled surfaces	1	2	3	4	5
Fixed locations place container within arm's reach of point of waste generation	1	2	3	4	5
Fixed locations allow for installation of the container below horizontal vision level	1	2	3	4	5
If necessary, in high patient or visitor traffic areas, container should provide for security against tampering	1	2	3	4	5

VISIBILITY

	agree				disagree
Color or warning label implies danger	1	2	3	4	5
A warning indicator (i.e., color or warning label) is readily visible to the user prior to user placing sharps into container	1	2	3	4	5
Overfill level provided and current fill status is readily visible to the user prior to use placing sharps into container	1	2	3	4	5
Sharps disposal container complies with OSHA requirements	1	2	3	4	5
Disposal opening/access way is visible prior to user placing sharps into container	1	2	3	4	5
Security, mounting, aesthetic, and safety features do not distort visibility of the opening/access way or fill status indicator	1	2	3	4	5

ACCOMMODATION

	agree				disagree
No sharp edges in construction or materials	1	2	3	4	5
Safety features do not impede free access	1	2	3	4	5
Promotes patient and user satisfaction (i.e., aesthetic to extent possible)	1	2	3	4	5
Is simple to operate	1	2	3	4	5
Any emissions from final disposal comply with pollution regulations	1	2	3	4	5
Easy to assemble, if required	1	2	3	4	5
Components of containers that require assembly are easy to store prior to use	1	2	3	4	5
Use allows one-handed disposal	1	2	3	4	5
Product available in special designs for environments with specific needs (e.g., laboratories, emergency rooms, emergency medical services, pediatrics, correctional facilities)	1	2	3	4	5
Mounting system durable, secure, safe, cleanable, and, where appropriate, lockable	1	2	3	4	5
Mounting systems allow height adjustments	1	2	3	4	5
Design promotes task confidence	1	2	3	4	5
Cost effectiveness	1	2	3	4	5

OTHER COMMENTS

What design or performance requirements are missing from the product you evaluated that are really needed to safely or more comfortably conduct your job or sharps-related task?

Additional Evaluator Concerns and Comments:

APPENDIX E—RECOMMENDED READING

Regulation and Standards

1. OSHA. Occupational exposure to bloodborne pathogens: final rule (OSHA 29 CFR 1910.1030). Federal Register 1991;56:64175–82.

2. American Society for Testing and Materials (ASTM). Performance standard specification for puncture resistance of containers for discarded medical needles and other sharps. ASTM Task Force F04.65.01 (in preparation).

3. Canadian Standards Association (CSA). Evaluation of single use medical waste sharps containers for biohazardous and cytotoxic waste. CSA; CAN/CSA-Z316.6 (in preparation).

4. British Standards Institution (BSI). BS 7320:1990: Specifications for sharps containers. London: BSI, 1990.

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Performance Evaluation

1. ECRI. Health devices: sharps disposal containers. ECRI, Plymouth Meeting, PA 1993;22:359–413.

2. American Hospital Association Needlestick Workgroup. Implementing safer needle devices. American Hospital Association, Division of Quality Resources Infection Control. Chicago, IL: December 1992.

Focus Group/End User Assessment Methods

1. Krueger RA. Focus groups: a practical guide for applied research. Newbury Park, CA: Sage Publications, 1988.

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3. Stewart D, Shadasani PN. Focus groups: theory and practice. Newbury Park, CA: Sage Publications, 1990.

NIOSH ERC Research Publications

1. Decker JA, Deitchman S, Buchta T. Health Hazard Evaluation Report No. 91-342-2271.

APPENDIX F—OSHA HAZARD INFORMATION BULLETIN: SHARPS DISPOSAL CONTAINERS WITH NEEDLE REMOVAL FEATURES

MEMORANDUM FOR: LEO CAREY
Director
Office of Field Programs

FROM: PATRICIA K. CLARK
Director
Directorate of Technical Support

SUBJECT: Hazard Information Bulletin*—Sharps Disposal Containers with Needle Removal Features

The purpose of this bulletin is to alert field personnel to the possible safety and health risks that may arise with the use of some sharps disposal containers that incorporate an "unwinder" mechanism to accomplish needle removal. Unwinders are used to separate needles from syringes or phlebotomy needles from blood collection (e.g., Vacutainer®) apparatus.

In general, sharps containers used for discarding contaminated needles must be closable, puncture-resistant, leakproof on the sides and bottom, and appropriately labeled or color coded (1910.1030 (d)(4)(A)(1)). Additionally, the Occupational Exposure to Bloodborne Pathogens Standard (1910.1030) prohibits needle removal unless the employer can demonstrate that no alternative is feasible or that such action is required by a specific medical procedure. Needle removal must be accomplished through the use of a mechanical device or a properly performed one-handed technique (1910.1030 (d)(2)(vii)(D)). Sharps containers which have well designed unwinders may be used.

However, it has recently come to our attention that some sharps containers do not have well designed unwinders and, therefore, do not meet the intent of the engineering and work practice controls provision of the standard. The design of some of these needle unwinders can cause needlestick injuries when the container becomes overfilled, or when the unwinder fails to properly secure the needle during the removal process.

As stated in OSHA Instruction CPL 2-2.44C, "Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens Standard," needle removal devices should not create additional hazards. The design of the sharps container and the location of the unwinder must allow the needle removal to be accomplished in a safe one-handed manner. In addition to the above mentioned safety characteristics, evaluation of such sharps containers should also consider the following safety features:

1. The sharps container should be designed so that it is easily and safely determined when the container needs to be emptied; this avoids overfilling and reduces the risk of injury.

2. The sharps container with an unwinder should be stabilized (secured to a wall, table, or tray) to prevent slipping during use.

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* The Directorate of Technical Support issues *Hazard Information Bulletins* (*HIBs*) in accordance with OSHA Instruction CPL 2.65 to provide relevant information regarding unrecognized or misunderstood health hazards and inadequacies of materials, devices, techniques, and safety engineering controls. *HIBs* are initiated on the basis of information provided by the field staff, studies, reports and concerns expressed by safety and health professionals, employers, and the public. Information is compiled on the basis of a thorough evaluation of available facts and literature and in coordination with appropriate parties.

3. The design of the unwinder must allow the employee to use the unwinder with a one-handed technique; that is, the employee must not be required to secure the needle with one hand while it is being unwound by the other hand.

4. The unwinder should be designed so that the needles do not slip or slide within the unwinder during the needle removal process; the unwinder should provide a secure capture that prevents movement of the needle while it is removed.

OSHA recommends that procedures requiring needle removal be carefully evaluated to determine the feasibility of equipment redesign or changes in work practices.

Please distribute this bulletin to all Area Offices, State Plan States, Consultation Projects, and appropriate local labor and industry associations.

EXHIBIT_____(GC4)

WASHINGTON UTC UTILITIES AND TRANSPORTATION COMMISSION

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE TO OPERATE AS A SOLID WASTE COLLECTION COMPANY UNDER CHAPTER 81.77 RCW

1300 South Evergreen Park Drive SW
P.O. Box 47250
Olympia, WA 98504-7250

PHONE 360-664-1222
FAX 360-586-1181
TTY 360-586-8203 TTY TOLL FREE 1-887-210-5963
WEBSITE: www.wutc.wa.gov
The UTC has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1133.

Type of Solid Waste Authority Requested	Fee Required
☐ Expedited Temporary Authority (to meet an urgent need for up to thirty days) - Complete entire application and Attachment A (WAC 480-70-136)	$ 25
☐ Temporary Authority (to meet an immediate or urgent need) – Complete entire application and Attachment A	$ 25
New Permanent Authority (including extension of authority)– (check appropriate box below) Complete entire application and submit a proposed tariff as outlined in the standard tariff form X New Certificate ☐ Extension of Existing Certificate No. G-_____	$200
Permanent Authority to Transfer (WAC 480-70-090) (check appropriate box below) – Complete entire application and Attachments B ☐ All of Certificate No. G-_____ ☐ Portion of Certificate No. G-_____	$200
☐ Reinstatement of Cancelled Certificate (must be filed within 30 days of cancellation) –Include a statement justifying the reinstatement and complete sections 1, 2 and 8	$200
☐ Name Change – does not include changes resulting in change in ownership – Complete section 1 and Attachment C	$ 35
☐ Mortgage of Certificate – Complete section 1 and Attachment D	$ 35
Lease of Authority – Complete entire application and Attachment B ☐ All of Certificate ☐ Portion of Certificate No. G -_____	$200

SECTION 1 – APPLICATION INFORMATION

Name of Applicant: Sure-Way Systems, Inc.		
Trade Name(s) (if applicable): Sure-Way Systems, Inc.		
Phone Number: (406) 846-2033	Fax Number: (406)846-7842	E-Mail:garywayyn@aol.com
Business Address Street 210 Missouri	Mailing address (if different from Business Address) Street: P.O. Box 899	
City: Deer Lodge	City: Deer Lodge	
State/Zip Montana 59722	State/Zip: Montana, 59722	

FOR OFFICIAL USE ONLY			
Date Filed: 11-29-04	Staff Assigned: Cbo	Motcar: 43384	Permit Issued G-
Tariff:	Insurance:	Contract:	DOL/SOS:
Application: GA-079331	RMS Docket #: TG-042089	Related App ID:	Map:
Text approved for docket	Reception #: 0009033	227-02: 200.00	032-05:

A 164690

Type of business structure:

☐ Individual ☐ Partnership X Corporation ☐ Other(LP, LLP, LLC)_____ UBI No._____

List the name, title, and percentage of partner's share or stock distribution for major stockholders:

Name	Title	Stock Distribution or Percentage of Shares
Gary Chilcott (Dawn Chilcott wife)	President/C.E.O.	44.35%
Dudley Chilcott	Vice-President	21.43%
William and Kim Lawrence		15.56%
Ken Cooke		9.67%
Bruce Collins		

ıry must

s the

SOLID WASTE COLLECTION consisting of [redacted] biomedical waste in Adams, Asotin, Benton, Columbia, Franklin, Garfield, Grant, Klickitat, Lincoln, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman and Yakima Counties.

perate

ille.

State below the conditions that justify the granting of this application. If you are applying for temporary certificate authority, be sure your statement addresses and supports the question of "immediate and urgent need."
Sure-Way Systems, Inc. has found that the medical waste generator in the Eastern half of the state would like an alternative to meet their current medical waste needs. Throughout discussions we have found that there is a need of generators to remove more than just medical waste. They would like a one stop shop that could perform the services of confidential document destruction and Amalgam separation. Currently, they must ship this waste out of state via the postal service. We can provide these services and can do it at a discount to what they are currently paying. We also offer a re-usable sharps container program that allows the generator to discontinue purchasing sharps containers. This alone saves individual hospitals thousands of dollars every year.

Do you currently hold, or have you ever held, a solid waste certificate?

X No ☐ Yes If yes, please indicate your certificate number: G-_____

Have you ever applied for and been denied a certificate to transport solid waste?

X No ☐ Yes If yes, please explain: _____

Please tell us about your experience and knowledge of transportation or solid waste, including motor carrier driver and equipment safety requirements.
Sure-Way Systems has been in the business of transportation and disposal of Biomedical waste and confidential documents since 1990. Sure-Way, currently operates in over 10 states across the country including, Idaho, Utah, Alabama, Florida, North and South Dakota, Minnesota, Wyoming and Montana. Each Driver is required to have at least 5 years of driving experience, meet DOT licensing requirements and complete the companies' drivers training and review process. Drivers are thoroughly trained in the proper practices and techniques to safely; handle, load, secure, document, and transport medical waste. Each Driver and Truck are trained and equipped with safety and cleanup spill kits. Sure-Way has worked hard for and enjoyed a clean transportation record and intends to continue providing safe reliable service throughout the states it serves.

Have you been cited for violation of state laws or Commission rules?

X No ☐ Yes If yes, please explain: Sure-Way Systems understands that their once was a company with similar name that operated in Washington. Our company has had no relations with that company or any of its principals Sure-Way was started in Montana and has grown from there.

OLD PAGE

SECTION 3 – RATES AND TARIFFS

Is this application to operate under a contract?

☐ No ☒ Yes If yes, submit the original or a duplicate original of each contract under which service will be performed. The contract must contain all the elements stated in WAC 480-70-146.

We will operate under contract but at this time we do not have any contracts. In the future we intend to operate under contract and will file them as they are executed. You will find an attached Tariff.

If this application is for temporary authority, a new certificate, or extension of existing certificated authority, you must attach two copies of your proposed tariff using either the standard tariff format included in this package, or an approved alternate format. All tariffs submitted must comply with the provisions of WAC 480-70-226 through WAC 480-70-351.

If this application is a transfer or a lease of authority from an existing certificate, you must either file a new tariff at the same rate levels as on file, or you must adopt the current certificate holder's tariff. To file a new tariff, use the standard tariff format attached to this application or an approved alternate format. Indicate which option you will use:

☐ Adopt

☒ File a new tariff

SECTION 4 – FINANCIAL STATEMENT

You may attach a Balance Sheet, Profit and Loss Statement, or business plan if available.

ASSETS		LIABILITIES	
Cash in Bank	$ Attached	Salaries/Wages Payable	$ Attached
Notes Receivable	$ Attached	Accounts Payable	$ Attached
Accounts Receivable	$ Attached	Notes Payable	$ Attached
Investments	$ Attached	Mortgages Payable	$ Attached
Other Current Assets	$ Attached	Contracts and Bonds Payable	$ Attached
Prepaid Expenses	$ Attached	TOTAL LIABILITIES	$ Attached
Land and Buildings	$ Attached	NET WORTH	
Trucks and Trailers	$ Attached	Preferred Stock	$ Attached
Office Furniture	$ Attached	Common Stock	$ Attached
Other Equipment	$ Attached	Retained Earnings	$ Attached
Other Assets	$ Attached	Capital	$ Attached
TOTAL ASSETS	$ Attached	TOTAL LIABILITIES AND NET WORTH	$ Attached

SECTION 5 – EQUIPMENT LIST

Describe the equipment that will be used (attach additional sheets if necessary). Vehicles must pass inspection and be issued a valid Commercial Vehicle Safety Alliance inspection decal before your application may be granted.

Year	Make	License Number	Vehicle ID Number	Gross Vehicle Weight	Type of vehicle
1999	Freightliner FL70		1FV6HLBAOXHA20150	26,000	BOBTAIL Box Van

SECTION 6 – SAFETY AND OPERATIONS

In each of the categories show below, list the person and position responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSR) and Washington State laws and rules. Please refer to the WAC rules, Fact Sheets, and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements that may apply to your specific operations.

SAFETY RESPONSIBILITIES

COMMERCIAL DRIVERS LICENSE (CDL) REQUIREMENTS (Title 49, Code of Federal Regulations Part 383) Any driver who operates a vehicle that meets the definition of a commercial motor vehicle must have a valid CDL.

Name: Dudley Chilcott	Position: Dudley Chilcott

DRIVER QUALIFICATION REQUIREMENTS (Title 49, Code of Federal Regulations Part 391) Driver's must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.

Name: Dudley Chilcott	Position: VP Operations

DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.

Name: Dudley Chilcott	Position: VP Operations

CONTROLLED SUBSTANCES AND ALCOHOL TESTING (Part 382) All persons who drive commercial vehicles requiring a CDL must be in a Controlled Substance and Alcohol Testing program that complies with the FMCSR in 49 CFR Part 382 and 49 CFR Part 40.

Each company will have in place a system for complying with FMCSR governing alcohol and controlled substances testing requirements (49 CFR Part 382 and 49 CFR Part 40).

Name: Dudley Chilcott	Position: VP Operations

INSPECTION, REPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396) Every motor carrier shall systematically inspect, repair, and maintain all motor vehicles subject to its control.

Name: Dudley Chilcott	Position: VP Operations

OPERATIONAL RESPONSIBILITIES

List the person and/or position responsible for understanding and complying with the requirements of each category shown below.

TARIFF RATES AND CHARGES (WAC 480-70-226 through WAC 480-70-351) Companies must file with the Commission a tariff showing all rates and charges it will charge its customers, together with rules that govern how rates and charges will be assessed.

Name: Cory Miller	Position: Regional MGR

ANNUAL REPORTS and REGULATORY FEES (WAC 480-70-071 & 076) Companies must annually file a report of their financial operations and pay regulatory fees.

Name: Cory Miller	Position: Regional MGR

BIOMEDICAL WASTE (WAC 480-70-426 through 476) Companies that transport biomedical waste must handle and transport that waste according to the appropriate requirements of the federal hazardous materials regulations (49 CFR Parts 170-189) and the additional requirements in these rules.

Name: Cory Miller	Position: Regional MGR

CUSTOMER SERVICE –Person responsible for customer service complaints, customer notice requirements, and compliance with county solid waste plans.

Name: Cory Miller	Position: Regional MGR

STATE OF WASHINGTON – general laws, rules and regulations: Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies. Please state the name and position of the person in your organization who will be responsible for ensuring compliance with the laws of the state of Washington, such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, Unified Business Identifier (UBI number), fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Transportation (over-size or over-weight permits); Department of Revenue and Internal Revenue Service (taxes); and Employment Security.

Name: Cory Miller	Position: Regional MGR

Replacement

SECTION 7 – HEARING INFORMATION

If the Commission assigns this application for formal hearing, estimate the number of witnesses you will present and the amount of time you will need for your presentation.	
Number of witnesses: 5	Amount of time: Approximately One Hour
Will an attorney be representing you? If yes, complete the following:	
Attorney's name: to be determined	Attorney's phone number:
Attorney's address:	Fax Number:
Street	E-mail:
City, State, Zip	

TYPE OF PAYMENT:

☐ Check ☐ Money Order X AMEX ☐ Discover ☐ MasterCard ☐ Visa

Credit Card Information:

Expiration Date: 03/05

Amount: $200.00

Ref # 164690

SECTION 8 – DECLARTION OF APPLICANT:

I understand that filing this application **does not** in itself constitute authority to operate as a solid waste collection company.

As the applicant for a solid waste collection 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.

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.

I certify that I am authorized to execute and file this document.

Printed name of applicant: Gary Chilcott

Signature of Applicant: Gary Chilcott

Date, County, State: 11/24/2004 Powell County Montana

Replaced

SECTION 7 – HEARING INFORMATION

If the Commission assigns this application for formal hearing, estimate the number of witnesses you will present and the amount of time you will need for your presentation.	
Number of witnesses: 5	Amount of time: Approximately One Hour
Will an attorney be representing you? If yes, complete the following:	
Attorney's name: **to be determined**	Attorney's phone number:
Attorney's address: Street	Fax Number: E-mail:
City, State, Zip	

TYPE OF PAYMENT:

☐ Check ☐ Money Order X AMEX ☐ Discover ☐ MasterCard ☐ Visa

Credit Card Information:

Expiration Date: 03/05

Amount: $200.00

Ref. # 164690

SECTION 8 – DECLARTION OF APPLICANT:

I understand that filing this application **does not** in itself constitute authority to operate as a solid waste collection company.

As the applicant for a solid waste collection 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.

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.

I certify that I am authorized to execute and file this document.

Printed name of applicant: _____

Signature of Applicant: _____

Date, County, State: _____

INQR UTL024P1 MASTER LICENSE SERVICE 12/15/04
BUSINESS ENTITY INQUIRY 14:00:42

UBI: 602 450 139 001 0001 State of Inc: MT Loc Status:
Type: PROFIT CORPORATION Date of Inc: 12 13 2004 Corp Status:

Owner Name: SURE -WAY SYSTEMS, INC.

Reg. Agent: KEN COOK
Reg. Address: 11611 S BALTIMORE RD
SPOKANE WA 99223

Exp. Date: 12 31 2005
Total Shares authzd:
Total Shares issued:

Firm Name : SURE-WAY SYSTEMS, INC.
Loc: 210 MISSOURI ST
DEER LODGE MT 59722

Mail: PO BOX 899
DEER LODGE MT 59722

Phone: (406) 846-2033
RFI: No NSF: No
RFP: No Withhold: No
TRANSFER: ____ {Press <ENTER> for Endorsements List}

Registered Tradenames for this UBI? Yes
Location First Activity: 01 20 2005
Last License Issue: 12 07 2004

Enter-PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10--PF11--PF12
GLIST APLST UBIQ SERV TRDU INQA INQR MMEN

CORPORATIONS DIVISION - REGISTRATION DATA SEARCH

SURE -WAY SYSTEMS, INC.

UBI Number	602 450 139
Category	Regular Corporation
Profit/Nonprofit	Profit
Active/Inactive	Active
State of Incorporation	MT
Date of Incorporation	12/13/2004
License Expiration Date	12/31/2005
Registered Agent Information	
Agent Name	KEN COOK
Address	11611 S BALTIMORE RD
City	SPOKANE
State	WA
ZIP	99223
Special Address Information	
Address	
City	
State	
Zip	

« Return to Search List

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/19/04

PRODUCER
Montana Int'l. Inc (Btte C.L.)
P.O. Box 3089
3475 Monroe
Butte, MT 59701-0638

Attachment "A"

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
Western States Medical Waste Group Inc.
P.O. Box 899
Deer Lodge, MT 59722

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Gulf Underwriters Insurance Company	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC	002829263	04/11/04	04/11/05	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$1,000,000 $50,000 $5,000 $1,000,000 $2,000,000 $2,000,000
		AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $
		GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EA ACC AGG	$ $ $
		EXCESS/UMBRELLA LIABILITY OCCUR CLAIMS MADE DEDUCTIBLE RETENTION $				EACH OCCURRENCE AGGREGATE	$ $
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ $ $
A		OTHER Site Pollution	GU2825686	04/16/02	04/16/05	$1,000,000	

RECEIVED
NOV 29 2004
WASH. UT. & TP. COMM

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Thomas J. Downey

ATTACHMENT "B"

Sure-Way Systems
Balance Sheet (UNAUDITED)
For Management Purposes Only

	December 31, 2003
ASSETS	
Current Assets	
Cash	($12,147)
Accounts Receivable (net of Allowance)	$288,872
Other Receivables	$31,155
Deposits on Reserve	$1,225
Total Current Assets	$309,105
Property, Plant & Equipment	$1,734,855
Other Long-Term Assets	
Plant Startup Costs	$292,967
Fixed Assets-Escrow	$201,731
Other Investments	$167,069
Deferred Tax Asset	$11,674
Other Long-Term Assets	$52,947
Total Other Assets	$726,388
Total Assets	$2,770,348
LIABILITIES & OWNER'S EQUITY	
Current Liabilities	
Accounts Payable	$303,192
Current Portion of Capital Leases	$35,088
Taxes Payable	$28,629
Interest Payable	$11,559
Current Portion Long-Term Debt	$553,261
Deferred Taxes Payable	$158,686
Other Current Liabilities	$16,574
Total Current Liabilities	$1,106,988
Long-Term Liabilities	
Escrow Payable (GE Capital)	$99,298
Notes Payable-Noncurrent	$702,887
Total Long-Term Liabilities	$802,184
Total Liabilities	$1,909,173
Owner's Equity	
Common Stock	$997,903
Retained Earnings	($158,919)
Treasury Stock	($72,027)
Subscription/Treasury Stock	($183,523)
Net Income	$277,743
Total Equity	$861,176
Total Liabilities & Owner's Equity	$2,770,348

Sure-Way Systems
Income Statement (UNAUDITED)
For Management Purposes Only

	December 31, 2003 Year to Date
Total Revenues	$3,234,065
Cost of Sales	$169,336
Labor	$1,322,307
Materials & Supplies	$121,348
Maintenance	$103,247
Transportation	$211,194
Disposal	$208,946
Insurance	$68,975
Licensing and Permitting	$18,948
DD&A	$280,419
Communications	$41,965
Legal and Professional	$56,454
Travel	$65,139
Utilities	$53,010
Other	$30,317
Other Taxes	$21,986
Postage	$13,700
Rent or Lease	$67,988
Total COGS, Operating, and SG&A Expenses	$2,855,277
Income Before Financing Costs	$378,788
Financing	$101,045
Pre-Tax Income	$277,743
Income Tax Expense	$0
Net Profit	$277,743

ATTACHMENT C

Tariff No. 1

of

Sure-Way Systems, Inc.

Certificate Number G- New Application

NAMING RATES FOR THE COLLECTION, TRANSPORTATION, AND DISPOSAL OF SOLID WASTE, CONSISTING OF BIOHAZARDOUS OR BIOMEDICAL WASTES
IN THE FOLLOWING DESCRIBED TERRITORY:
THE COUNTIES OF ADAMS, ASOTIN, BENTON, COLUMBIA, FRANKLIN, GARFIELD, GRANT, KLICKITAT, LINCOLN, PEND OREILLE, SPOKANE, STEVENS, WALLA WALLA, WHITMAN, AND YAKIMA.

Name of person issuing tariff: Gary Chilcott

Mailing address of issuing agent: P.O. BOX 899

City, State/Zip Code: DEER LODGE, MONTANA 59722

Telephone number, including area code: 406-846-7902

FAX number, if any: 406-846-7842

E-mail address, if any: GARYWAYYN@AOL.COM

Official UTC requests for information regarding consumer questions and/or complaints should be referred to the following company representative:

Name: Cory J. Miller

Title: Regional Manager

Phone: 406-240-7530

E-Mail:coryjmiller_1999@yahoo.com

Fax: 406-846-7842

Issue date: Effective date:

(For Official Use Only)

Docket No. TG- _____ Date: _____ By: _____

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

CHECK SHEET

All pages contained in this tariff are listed below in consecutive order. The pages in the tariff and/or any supplements to the tariff listed on this page have issue dates that are the same as, or are before, the issue date of this page. "O" in the revision column indicates an original page.

Page Number	Current Revision	Page Number	Current Revision	Page Number	Current Revision
Title Page	O				
Check sheet	O				
Item Index	O				
Subject Index	O				
Taxes Sheet	O				
6	O				
7	O				
8	O				
9	O				
10	O				
11	O				
12	O				
13	O				
14	O				
15	O				
16	O				
17	O				
18	O				
19	O				

Issued by:

Issue date: Effective date:

(For Official Use Only)

Docket No. TG-_____ Date: _____ By:_____

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Index of Items in This Tariff

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 5 – Application of Rates – Taxes

In addition to the rates shown in the remainder of the tariff, the following taxes apply:

Entity imposing tax:	Ordinance number:	Amount of tax:	Application (Commodities and territory)
City of Spokane	C-30113	17.0%	On total bill of waste generators located within the City Limits of Spokane (Chapter 8.1 Utility Taxes)

Issued by:

Issue date: Effective date:

(For Official Use Only)

Docket No. TG-_____ Date: _____ By:_____

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 10 – Application of Rates – General

The rates contained in this tariff cover the utilization by a medical waste generator of Sure-Way Systems transportation service and medical waste management and disposal program.

Unless otherwise specified, the rates include the following:

1. Use of Sure-Way's unique containers
2. Medical waste tracking and documentation
3. Transportation, treatment, and disposal of Biohazardous or Biomedical waste
4. Proprietary reusable sharps containers and disposal service

Unless provided herein, rates contained in this tariff apply to the transportation of Biohazardous or Biomedical waste, as defined in WAC 480-70-041, in tubs, boxes or other containers provided by Sure-Way Systems, Inc.

Item 15 – Holiday Pickup – Regularly Scheduled Service

When a pickup is missed due to the company's observance of a holiday, the company will provide service, at no additional cost to the customer, on an alternate day.

A list of the holidays the company observes is shown in Item 60.

For application of rates in this tariff, the company defines alternate day to mean the following:

The most appropriate day preceding or following the regularly scheduled pick-up date.

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 17 - Refunds

Credit due the customer. When there has been a transaction that results in a credit due the customer, the following apply:

(a) If the amount due is five dollars or less, an adjustment will be made to the customer's account. The adjustment must be shown on the next regular bill.

(b) If the amount due is more than five dollars, the customer may accept an account adjustment or may request a refund.

- If the customer elects to have an account adjustment made, the adjustment must show on the next regular billing.
- If the customer elects to receive a refund, the company must issue a check within thirty days of the request.

Overcharges. Once a company becomes aware that it has overcharged a customer, it must provide a refund or an account adjustment credit to the customer. The customer must be given a choice as to which option is preferred. The refund or credit must be the amount overcharged in the three years before the date of discovery.

- If the customer elects to have an account adjustment made, the adjustment must show on the next regular billing.
- If the customer elects to receive a refund, the company must issue a check within thirty days of the request.

Prepayments. If a customer has paid service fees in advance, service is discontinued during the pre-billed period, and the customer is due a refund, the following apply:

(a) A company must honor all requests for refunds of the unused portion of prepayments.

(b) If the customer provides a forwarding address to the company or one can be obtained from the Post Office, the company must issue a refund check no more than thirty days following the customer's request.

(c) If the customer cannot be located or did not provide a forwarding address and the U.S. Post Office cannot furnish a forwarding address, the amount may be presumed to be abandoned and is subject to the Uniform Unclaimed Property Act after one year.

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 18 – Billing, Advance Billing, and Payment Delinquency Dates

Billing period. SWS will bill customers for previous services rendered. Bills will be sent on a specified date each month.

Advance billing and payment delinquency dates,
Accounts become delinquent 21 days after mail date of the bill.

Late charges. Customers with past due accounts after the delinquency dates specified above will be charged a late fee of 1% on outstanding balances that are unpaid at the time of the next regular billing date. The minimum charge per month is $5.00.

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 20 – Definitions

Company Specific Definitions:

Sure-Way Systems (SWS) Sharps Disposal Program is the program SWS offers to its customers to provide them with FDA and DOT accepted sharps containers for disposal of the sharps portion of their medical waste. This service reduces the facilities waste volume to the landfill and their costs to buy and pay for the disposal of disposable sharps containers.

Gross Pathological Waste refers to pathological waste that is easily recognizable as a human body part like arms, feet, legs, or hands. Small pieces of tissue from labs do not fit this definition and do not need special packaging.

Sharps waste refers to all potentially infectious materials that could cause a puncture if broken or in their natural state like syringes, glass products, and certain hard plastic products that could break and cause a puncture or abrasion to the skin while handling the product as defined by OSHA and NIOSH.

Maximum Weights

The maximum weight allowed per container is:

Container Size	Maximum Weight
Small Box (10 gal)	20 Pounds
Small/Medium Box (20 gal)	30 Pounds
Medium/Large Tub (32 gal)	55 Pounds
Large Tub (48 gal)	65 Pounds

Replacement Costs

Customers will be charged for containers lost on their behalf, charges will be as follows:

Container Size	Replacement Cost
Small Box (10 gal)	$5.00
Small/Medium Box (20 gal)	$5.00
Medium/Large Tub (32 gal)	$35.00
Large Tub (48 gal)	$40.00

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 30 – Limitations of Service (continued on next page)

General Limitations of Service

1. Sure-Way Systems will not knowingly accept shipments including containers which are not properly packaged or identified as REQUIRED by the Department of Transportation.

2. Sure-Way Systems may refuse to accept shipments not immediately available for pickup at designated pickup areas adjacent to a loading dock or otherwise immediately accessible to Sure-Way Systems vehicles.

3. All manifesting paperwork must be properly completed by the generator, verified, appropriately signed, and available at the time of pickup.

4. Sure-Way Systems may refuse to pickup materials from points where the designated pickup area is obstructed at the time of pickup.

5. Rates include normal wear and tear on reusable containers. Reusable containers provided to the generator for the storage of biomedical waste shall remain the property of Sure-Way Systems unless otherwise purchased by the generator. Charges for the replacement of containers lost by the generator are shown in Item 20.

6. Sure Way Systems reserves the right to modify its container sizes in the future provided that the rate per gallon equivalent remains the same and unless and until rate changes per gallon are approved by the Washington Utilities and Transportation Commission.

7. Sure-Way Systems will not knowingly accept containers for shipment unless they have sealed bag liners other than sharps containers.

8. The generator shall not tender and Sure-Way Systems shall not knowingly accept for shipment any container which:
   a. is not sealed and properly labeled;
   b. is punctured or materially damaged;
   c. is overfilled or overweight;
   d. contains anything other than biomedical waste; or
   e. contains radioactive materials as defined by the U.S. Nuclear Regulatory Commission.

In the event that Sure-Way Systems accepts a container described in this paragraph 8, Item 70 shall apply.

9. Sure-Way Systems shall not knowingly accept for transportation any shipment which does not meet packing, labeling and handling requirements imposed or required by law.

Refusal of service. A solid waste collection company may refuse to:

- Pick up materials from points where it is hazardous, unsafe, or dangerous to persons, property, or equipment to operate vehicles due to the conditions of streets, alleys, or roads.
- Drive into private property when, in the company's judgment, driveways or roads are improperly constructed or maintained, do not have adequate turn-arounds, or have other unsafe conditions.
- Enter private property to pick up material while an animal considered or feared to be vicious is loose. The customer will be required to confine the animal on pickup days.

Schedules. A company's schedule will meet reasonable requirements and will comply with local service level ordinances.

Missed pickups due to weather or road conditions. Pickup of materials may be missed due to weather or road conditions. If the accumulated material is collected on the next scheduled or available pickup date, the company is not obligated to extend credit for the missed pickup. The customer will not be charged for overfilled receptacles if the amount of extra material does not exceed the amount that would have reasonably been expected to accumulate due to missed pickups.

Due care. Other than to offer reasonable care, the company assumes no responsibility for articles left on or near waste receptacles.

Liability for damage. When a customer requests that a company provide service and damage occurs to the customer's driveway due to reasons not in the control of the company, the company will assume no responsibility for the damage.

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 40 – Material Requiring Special Equipment, Precautions, or Disposal

Transportation of solid waste requiring special equipment or precautions in handling or disposal will be subject to time rates named in Item 160, or to other specific rates contained in this tariff.

Companies must make every effort to be aware of the commodities that require special handling at the disposal sites named in the company's tariffs. The company shall maintain a list of those commodities and make it available for public inspection at the company's office.

Item 45 – Material Requiring Special Testing and/or Analysis

When a solid waste collection company or disposal facility determines that testing and/or analysis of solid waste is required to determine whether dangerous or prohibited substances are present, the actual cost for such testing and/or analysis will be paid by the customer. The company must provide the customer with a copy of any bill or invoice for costs incurred for testing and/or analysis and also must retain a copy in the company's file for at least three years. Those costs shall be passed through to the customer without markup.

Item 50 – Returned Check Charges

Returned check charge. If a customer pays with a check, and the customer's bank refuses to honor that check, the customer will be assessed a returned check charge in the amount of $30.

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 51 – Restart Fees

There will be no reinstatement fees charged to a customer if the customer chooses to discontinue service and then reinstate service at a future date.

Item 52 – Redelivery Fees

There will be no redelivery fees charged to a customer if the customer chooses to discontinue service and then reinstate service at a future date.

Item 55 – Over-sized or Over-weight Cans or Units

The company reserves the right to reject pickup of any receptacle (box, or tub), if upon reasonable inspection the receptacle exceeds the size and weight limits shown in Item 20. The company will refuse to pickup receptacles that are not properly packaged to meet (DOT) Department Of Transportation packaging requirements.

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 60 – Overtime Periods

Companies will assess additional charges when providing services, at customer request, during overtime periods. Overtime periods include Saturdays, Sundays, and the following holidays:

Christmas	December 25	New Years	January 1
Easter	Dates vary	Independence Day	July 4
Thanksgiving	Dates vary		

Time is to be recorded to the nearest increment of 15 minutes from the time the company's vehicle leaves the terminal until the time it returns to the terminal.

No additional charge will be assessed to customers for overtime or holiday work performed solely for the company's convenience.

Charge per hour $30

Minimum Charge $90

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 100 – Rates Biohazardous, Chemotherapy, and minor pathological and biomedical waste (continued on next page)

Rates in this item apply:

(1) To Biohazardous, Chemotherapy, minor pathological and biomedical waste (not sharps waste in SWS reusable sharps containers or Gross Pathological waste). This includes hospitals, surgical centers, mortuaries, assisted living facilities, laboratories, doctor and dentist offices, and any other place that generates Biohazardous or Biomedical waste.

Rate Schedule for Biomedical Waste except Gross Pathological Waste.

Container Quantity	Small Box (10 Gal)	Small/Medium Box (20 Gal)	Medium/Large Tub (32 Gal)	Large Tub (48 Gal)
1	22.20	33.40	51.52	75.67
2	16.38	31.98	47.36	58.32
3	15.88	27.49	39.04	48.20
4	15.68	24.85	34.24	41.45
5	14.79	21.59	30.72	38.08
6	13.49	19.76	27.84	35.19
7	12.79	18.34	26.56	32.78
8	12.19	17.52	25.28	31.33
9	11.19	16.50	23.36	29.88
10	10.59	15.68	22.72	28.44
11	10.39	15.28	21.76	26.99
12	9.69	14.67	21.12	25.55
13	9.49	14.26	20.48	24.58
14	8.99	13.64	19.84	23.14
15	8.79	13.44	19.20	22.17
16	8.59	13.03	18.88	18.32
17	8.29	12.63	17.92	17.83
18	7.99	12.43	17.60	17.35
19	7.69	12.22	16.96	16.39
20	7.59	11.82	16.64	15.91
21	7.49	11.41	16.00	15.91
22	7.39	11.20	15.68	15.91
23	7.29	11.00	15.01	15.91
24	7.19	10.79	13.76	15.91
25	7.09	10.38	13.28	15.91
26	6.99	10.18	13.12	15.91
27	6.89	9.98	12.80	15.91
28	6.79	9.58	12.32	15.91
29	6.69	9.37	12.00	15.91

Issued by:

Issue date: Effective date:

(For Official Use Only)

Docket No. TG- _____ Date: _____ By: _____

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Container Quantity	Small Box (10 Gal)	Small/Medium Box (20 Gal)	Medium/Large Tub (32 Gal)	Large Tub (48 Gal)
30	6.59	9.37	10.88	15.91
31	6.49	9.37	10.56	13.75
32	6.39	9.37	10.56	13.75
33	6.29	9.37	10.56	13.75
34	6.19	9.37	10.56	13.75
35	6.09	9.37	10.56	13.75
36	5.99	9.37	10.56	13.75
37	5.89	9.37	10.56	13.75
38	5.89	9.37	10.56	13.75
39	5.87	8.55	10.56	13.75
40	5.85	8.55	10.56	13.75
41	5.79	8.55	10.56	13.75
42	5.69	8.55	10.56	13.75
43	5.65	8.55	10.56	13.75
44	5.59	8.55	10.56	13.75
45	5.49	8.55	10.56	13.75
46	5.45	8.55	10.56	13.75
47	5.39	8.55	10.56	13.75
48	5.35	8.55	10.56	13.75
49	5.29	8.55	10.56	13.75
50	5.19	8.55	10.56	13.75
51	5.09	8.55	10.56	13.75
52	5.00	8.55	9.12	13.75
53	4.95	8.55	9.12	13.75
54	4.90	8.55	9.12	13.75
55	4.80	8.55	9.12	13.75
56	4.75	8.55	9.12	13.75
57	4.70	8.55	9.12	13.75
58	4.60	8.55	9.12	13.75
59	4.10	8.15	9.12	13.75
60 +	4.10	8.15	9.12	13.75

Note 1. Rates to be charged shall be based upon the total number of containers per pickup. Rates stated in this Item are in addition to charges specified in Items 50, 51, 52, 55 and 60.
Note 2. A minimum of $22.00 will be charged per scheduled pickup.
Note 3. Rates will be reduced $0.02 per gallon if generator chooses to use both the med-waste disposal program and the reusable sharps container disposal service.
Note 4. A stop charge of $30.00 will be levied for any stop that does not generate $100.00 in total medical waste charges.

Issued by:

Issue date: Effective date:

(For Official Use Only)

Docket No. TG-_____ Date: _____ By:_____

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 105 Rates for Gross Pathological Waste Disposal

Gross pathological waste must be frozen at the time of pickup and identified as "Gross Pathological Waste" by the generator.

Rates for Gross Pathological Waste will be as follows:

Container Size	Rate
Medium/Large (32 Gal)	$35.00
Large (48 Gal)	$50.00

Item 110 Rates for the collection and transportation of Biomedical Waste in, and processing of, Reusable Sharps Containers – Prices Per Gallon

Type of Service	**Price Per Gallon**
Premium Service	$1.10 per gallon, price calculated using rate multiplied by rated size of container.
Economy Service	$0.90 per gallon, price calculated using rate multiplied by rated size of container.

Item 115 Rates for the collection, transportation and destruction of confidential documents

Size	**Price Per Pound**
From 0-100 pounds	$0.25
From 101-500 pounds	$0.20
From 501-1000 pounds	$0.18
Greater than 1001 pounds	$0.15

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 120 Rates for the collection, transportation, and processing of Amalgam

A charge of $36 will be levied for every 1 pint increment of amalgam collected for recycling.

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 230 – Disposal Fees

Charges in this item apply when other items in the tariff specifically refer to this item.

Disposal site (name or location)	Type of Material	Fees for disposal
Great Falls Landfill	All	$ 54.00 per ton
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per
		$ per

State whether fees are per yard, per ton, etc. Include charges assessed for special commodities (tires, appliances, asbestos, etc.) or special conditions at each specific disposal site. Attach additional sheets as necessary.

Issued by:

Issue date: Effective date:

(For Official Use Only)

Docket No. TG- _____ Date: _____ By: _____

Company Name/Permit Number: Sure-Way Systems, Inc.
Registered Trade Name: Sure-Way Systems, Inc

Item 300 – List of Abbreviations and Symbols Used in This Tariff

(A) Denotes increases.

(R) Denotes decreases.

(C) Denotes changes in wording, resulting in neither increases or decreases.

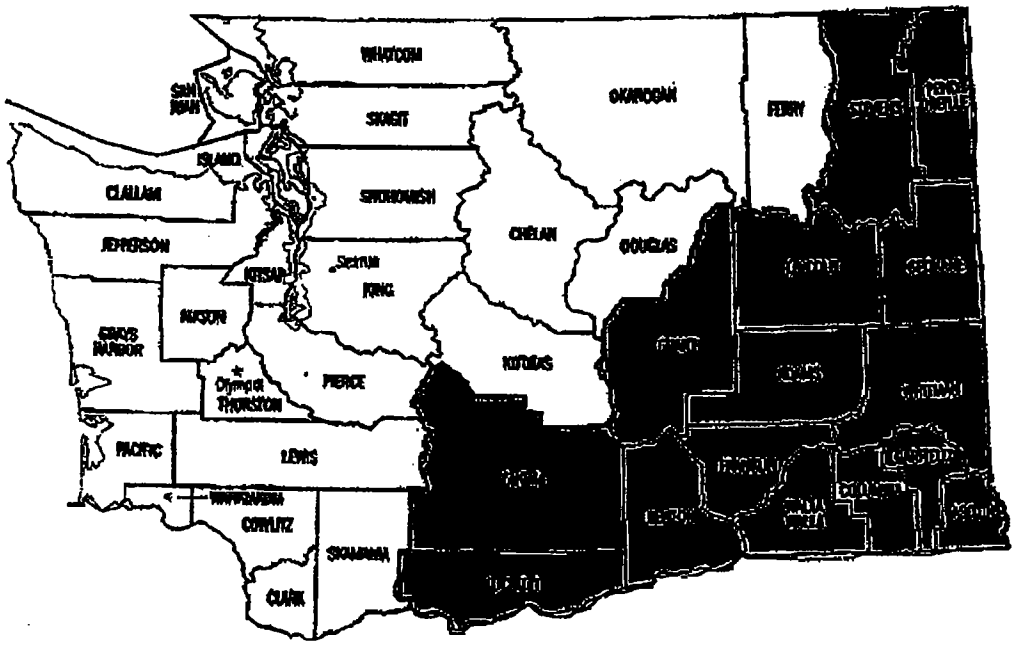
(N) Denotes new rates, services, or rules

*** Denotes that material previously shown has been deleted.

Yd. or yd. are abbreviations for yard

Cu. or cu. are abbreviations for cubic.

Sure-Way Systems, Inc
Map of Proposed Waste Authority Area (Black Counties)



GA-079331

Sure-Way Systems, Inc

Washington Utilities and Transportation Commission
1300 S. Evergreen Park Drive S.W.
P.O. Box 47250
Olympia, WA 98504-7250

Dear Commissioners;

In the following pages you will find our application for a Class G Waste Haulers permit.

Sure-Way Systems, Inc. was founded in Deer Lodge, MT in 1990. For the past 14 years we have been collecting, transporting, and processing waste from Florida to Hawaii and would like the opportunity to do business in Washington. Over the years we have accumulated an outstanding record with all agencies that regulate the many facets of our business.

It has come to our attention through discussions with waste generators in the area that there had been a company operating in Washington with the same or similar name. It is also our understanding that they did not run their business as directed. We were not or have ever been, associated with this company.

In recent discussions with waste generators in eastern Washington we have found that our services would exceed current services offered by Stericycle, the major hauler for most generators. It is our experience that customers need other services besides the hauling of medical waste. That is why we have grown to offer confidential document destruction and Amalgam separation services to these customers. These services allow customers to save money on stop charges that would otherwise be levied numerous times by a plethora of companies. Our goal is to consolidate these services and provide customers a significant savings on their current disposal costs.

We are making this move into Washington to get back the waste that we were processing for Stericycle up until the fall of 2003. The capacity generated by eastern Washington customers is capacity that we have processed in the past and are confident that we can handle in the future.

Your staff has been incredibly helpful and has assisted us with answers to many of our questions. We look forward to working with you through this permitting process.

Sincerely,

Gary Chilcott

Gary Chilcott
President/CEO

Attachment A: Proof of Insurance
Attachment B: Financial Statements
Attachment C: Tariff

APPLICANT STATEMENT
(To be completed by the individual requesting operating authority)

RECEIVED
DEC 15 2004
WASH. UT. & TP. COMM

Applicant Name: Sure-Way Systems, Inc	Application Docket No.:

THE APPLICATION What authority are you applying for? Include any amendments.

The Authority to haul and dispose of all Biomedical and Biohazardous waste in Eastern WA.

SUPPORT STATEMENT
(To be completed by the individual or business/organization supporting the request for operating authority)

THE TRANSPORTATION NEED Briefly describe the transportation service that you need and that the application could provide to you or your business/organization if this request for operating authority is granted. We use/need medical waste disposal services. While our "basic" needs are met with present service we always do comparison shopping to get the most service for the best price. We are unable to do that presently and would like to. Peers in other states have this ability.

Are your transportation needs being met now? Yes ___ No X If not, explain problems you have experienced We are currently paying for supplies that in other states that have competing companies do not have to pay for supplies. We believe that there is sufficient business available for 2 competing companies thereby providing the consumer with better service at a more affordable price.

If the request is denied, would it have any affect on you or your business/organization:
Yes X No ___ If yes, please explain. Yes we are paying too much for less service than what we could get if there were competing companies. We would continue to pay for supplies that may be provided by a competitor. Bottom line regulate the service not limit the competition.

VERIFICATION
(To be completed by the individual or business/organization supporting the request for operating authority)

Name and Title: Georgette Wendt, Clinic Administrator
Business/Organization: Valley Young People's Clinic
Street/Mailing Address: 1414 N. Vercler Bld #1
City, State, Zip Code: Spokane Valley, WA 99216
Telephone Number: 509 928 6383 Fax Number: 509 926 9420

I understand that this information is being given as the basis for a grant of operating authority by the Washington Utilities and Transportation Commission, an agency of the state of Washington. I certify or declare under penalty of perjury under the laws of the state of Washington that the information contained in this statement is true and correct.

Georgette Wendt	Georgette Wendt	121009
PRINT NAME	SIGNATURE	DATE

EXHIBIT_____ (GC5)

Sure-Way Systems, Inc

To : Washington Utilities & Transportation Commission (WUTC)

From: Sure-Way Systems, Inc (SWS) Doc. # TG-042089 Application # GA079331

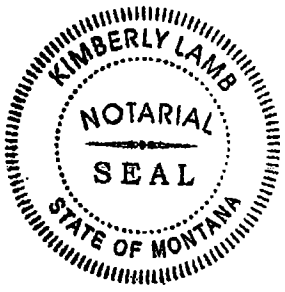
RE: Elimination of 3 countries to be served under this application

Sure-Way Systems, Inc. requests that the Washington Utilities and Transportation Commission modify our application #GA079331 to eliminate the following counties under consideration for our services **Grant County, Adams County, Whitman County.** By doing this SWS have been assured that the Washington Refuse and Recycling Association will drop its protest of our application.

Dated January 21, 2005

Gary Chilcott

Gary Chilcott Pres. CEO
Sure-Way Systems, Inc.
208 Missouri Ave.
Deer Lodge, Montana
59722



Kimberly Lamb
Notary Public for the State of Montana
Residing at Deer Lodge
My commission expires: 11/23/2008