

## COUNCIL WORKSHOP ITEM

**ITEM:** Class A Scavenger License Renewal  
**DATE:** December 3, 2003  
**PREPARED BY:** Michael Baker, Assistant to the Village Manager  
Coey Kuhl, Admin Tech II  
**PURPOSE:** Authorize Scavenger License Renewal

### DISCUSSION:

Scavenger licenses are to be renewed annually according to the Municipal Code. The “Class A” license renewal requires approval by Council. The current holder of the “Class A” license is BFI, which is currently under contract with the Village until March 31, 2005 to provide residential refuse and yard waste disposal services. As required, BFI has submitted the completed application form for 2004, along with the required \$300 fee.

“Class B” scavengers have the same application requirements as the “Class A” licensee, except the “Class B” licenses are approved administratively by the Village Manager, following notification to the Village Council. “Class B” scavengers submitting renewal applications for the coming year include:

<u>Name</u>	<u>Address</u>
• Waste Management Metro	3800 S. Laramie / Cicero, Il. 60650
• Crown Recycling & Groot Waste	2500 Landmeier Rd. / Elk Grove Village, Il. 60007
• ARC Disposal	4152 May St. / Hillside, Il. 60162
• Disposal Management Systems	420 Cutters Mill Lane / Schaumburg, Il. 60194
• K.Hoving Inc.	2N551 Powis Rd. / West Chicago, Il. 60185
• Onyx Waste	605 Northwest Ave. / Northlake, Il. 60164
• Waste Box Inc.	7553 S. Madison / Burr Ridge, Il. 60527
• GCS	P.O.Box 106 / Westmont, Il. 60559

All of the “Class B” scavengers have submitted the required application materials. Unless there are specific objections to any of the licensees, their applications will be processed and approved by the Village Manager.

### ATTACHMENT:

BFI Scavenger License Application

### RECOMMENDATION:

Staff recommends that this item, to authorize renewal of the “Class A” scavenger license for BFI Disposal Services for the calendar year 2004, be placed on the active agenda for the Council Meeting of December 9, 2003.

VILLAGE OF DOWNERS GROVE, ILLINOIS

Scavenger License Application, 2004

Please print or type

1. FORM OF BUSINESS (Check one):

X Corporation \_\_\_ Individual Owner \_\_\_ Partnership

2. OWNER OF BUSINESS: BFI

Address 5050 W LAKE MELOSE PARK IL 60160  
(street) (city) (state) (zip)

Phone No. 7083457050

If Corporation, name of registered agent (on file with the Secretary of State's office in the state of incorporation):

Allead Waste Industries

Address 15880 Greenway Valley Loop Suite 100  
(street) (city) (state) (zip)  
Scottsdale AZ 85260

Phone No. 602 6272700

3. DOING BUSINESS AS: BFI Div 551

Address same as above  
(street) (city) (state) (zip)

Phone No. 7083457050 Number of staff in the office \_\_\_\_\_

Hours of Business 7:00-5:00pm Effective date of establishment 1968

24-hour emergency phone number \_\_\_\_\_

4. MANAGER OF BUSINESS: STEVE Wagner  
(first) (middle) (last)

Address \_\_\_\_\_  
(street) (city) (state) (zip)

5. CERTIFICATE OF INSURANCE REQUIRED

Each Person Each Occurrence

Personal Injury - \$500,000 \$1,000,000

Insurance Co. Wells of Arizona Property Damage - \$100,000

Policy No. on file Expiration Date \_\_\_\_\_

Attach Certificate of Insurance

An applicant with a self-insurance program may satisfy the requirement of this section by submitting to the Village Clerk a statement from the administrator of such program that the applicant can satisfy claims in the amounts set forth above.

6. **EQUIPMENT:** Complete required form titled, "List of Applicant's Equipment."

7. **DISPOSAL:** State the method of collection and places of disposal of refuse collected in the Village:

Curbside/Commercial Containers  
Congress Development Streetside

State the method of collection and places of disposal of landscape waste collected in the Village:

Curbside/Commercial  
London Lakes, Plainfield St

State the method of collection and places of deposit of recyclables collected in the Village:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. **FINANCIAL STATEMENTS:** Attach financial statements prepared by a Certified Public Accountant or copies of Federal income tax returns for the two-year period prior to this application (2001 and 2002).

9. **REFERENCES:** Attach evidence of satisfactory service in the scavenger and recycling business through letters of reference from administrators of other municipalities or from significant private customers served by the applicant in the three years prior to this application.

10. **VERIFICATION OF ABILITY TO SERVE MULTI-FAMILY STRUCTURES:**

(see attached checklist for exemptions from submitting this item)

- Number of multi-family structures currently, or proposed to be, provided with recycling collection, and the number of units in each of those structures.
- Total amount of recycling capacity required to serve each of those structures, based upon the following formula:
- $9.0 \text{ gallons (number of units)} = \text{base weekly recycling capacity.}$
- Types and sizes of recycling containers provided by the applicant.
- Number of pickups per week necessary to meet the base weekly recycling capacity at each structure.
- List of proposed processors or purchasers of the recyclables collected.

11. License Fee - \$300

**NAME OF PERSON SUBMITTING THIS APPLICATION:**

STEVE Vogrin  
(first) (middle) (last)

Address 5050 W Lake St Melrose Park, IL  
(street) (city) (state) (zip) 60160

Phone No. 7083457050 Date of Birth \_\_\_\_\_

Drivers License No. V26578768180 Social Security # 6125168

Relationship to Business General manager

The applicant certifies that neither applicant nor any owner; any officer, director or 5% shareholder (if owner is a corporation); or any partner (if owner is a partnership) have been convicted of a felony based upon his/her conduct or involvement in the business or similar activity applied for within the past ten years; or any felony involving the use of a deadly weapon, traffic in narcotic drugs, or violence against another person within the past five years; or of a misdemeanor or licensing violation, based upon his/her conduct or involvement in such business or activity or related or similar business or activity, within the past two years.

The applicant is aware of and agrees to the provisions of Downers Grove Village Code Sec. 8-67.1 which require the firm to make available recycling service to owners of multi-family structures served by the firm, currently or during the term of this license.

**13. SIGNATURE OF PERSON SUBMITTING THIS APPLICATION**

Steve Vogrin Date 11/3/03

Return this application to:  
Coey Kuhl  
VILLAGE OF DOWNERS GROVE  
801 Burlington  
Downers Grove, IL 60515

NOTE: The information requested in this application is required by Village ordinance. Failure to respond to all questions will delay or negate the licensing process.

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**FOR OFFICE USE ONLY:**

License issued (date) \_\_\_\_\_ License No. \_\_\_\_\_

Cashier's Receipt No. \_\_\_\_\_ Date Paid \_\_\_\_\_

\$300 Fee Paid \_\_\_\_\_

Checklist for submittal of **Scavenger License Application, 2004:**

- \_\_\_\_\_ Pages 1-3 of application form completely filled out and signed by applicant.
- \_\_\_\_\_ Attach certificate of insurance
- \_\_\_\_\_ Attach form titled "List of Applicant's Equipment"
- \_\_\_\_\_ Attach financial statements prepared by a CPA or copies of Federal income tax returns for years 2001 and 2002 (currently licensed scavengers need only submit 2002 if 2001 was submitted last year).
- \_\_\_\_\_ Attach at least three (3) references (if not a currently licensed scavenger)
- \_\_\_\_\_ Attach Verification of Ability to Serve Multifamily Structures  
NOTE: This Verification is not required if:
  - 1) the applicant is a current licensee which has been serving multi-family structures and has been submitting quarterly reports to the Village in the year prior to this application.  
or
  - 2) the applicant does not intend to provide service to structures for refuse, landscape waste, or recycling service during 2004. Applicant must submit a letter stating the intent to exclude multi-family from their services in 2004.
- \_\_\_\_\_ \$300 check for license fee.


<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b> Page 1 of 3		DATE 12/20/2002
PRODUCER 877-559-6769  Willis North America, Inc. - Regional Cert Center 11201 N. Tatum Boulevard Suite 300 Phoenix, AZ 85028	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.	
<b>INSURERS AFFORDING COVERAGE</b>		
INSURED Allied Waste Industries, Inc. (Named Insd. Cont. Below) 15880 N. Greenway-Hayden Loop, Suite 100 Scottsdale, AZ 85260	INSURER A: American Home Assurance Company 19380-004 INSURER B: Illinois National Ins. Co. 23817-002 INSURER C: American Home Assurance Company 19380-005 INSURER D: National Union Fire Ins. Co. of Pittsburg 19445-001 INSURER E: Ins. Co. of the State of PA 19429-004	

**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	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	GL6125687	1/1/2003	1/1/2004	EACH OCCURRENCE \$ 2,500,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$ 100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$
					PERSONAL & ADV INJURY \$ 2,500,000
					GENERAL AGGREGATE \$ 10,000,000
					PRODUCTS - COMP/OP AGG \$ 5,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC
A A B C	AUTOMOBILE LIABILITY	CA5349665	1/1/2003	1/1/2004	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000
	<input checked="" type="checkbox"/> ANY AUTO	CA5349666	1/1/2003	1/1/2004	
	<input type="checkbox"/> ALL OWNED AUTOS	CA5349668	1/1/2003	1/1/2004	BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS	CA5349667	1/1/2003	1/1/2004	BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
D	EXCESS LIABILITY	BE2859962	1/1/2003	1/1/2004	EACH OCCURRENCE \$ 5,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 5,000,000
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
A B A E	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC3322785	1/1/2003	1/1/2004	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	THE PROPRIETOR/	WC3322787	1/1/2003	1/1/2004	E.L. EACH ACCIDENT \$ 1,000,000
	PARTNERS/EXECUTIVE	WC3322786	1/1/2003	1/1/2004	E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
	ARE: INCLUDED	WC3322789	1/1/2003	1/1/2004	E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	OTHER				

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

<b>CERTIFICATE HOLDER</b>  Village of Downers Grove 801 Burlington Downers Grove, IL 60515	<b>ADDITIONAL INSURED; INSURER LETTER:</b>	<b>CANCELLATION</b> Non-Payment Statutory SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> 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 
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<b>Willis</b>		<b>CERTIFICATE OF LIABILITY INSURANCE</b> Page 2 of 3		DATE 12/20/2002
<b>PRODUCER</b> 877-559-6769 Willis North America, Inc. - Regional Cert Center 11201 N. Tatum Boulevard Suite 300 Phoenix, AZ 85028		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.		
		<b>INSURERS AFFORDING COVERAGE</b>		
<b>INSURED</b> Allied Waste Industries, Inc. (Named Insd. Cont. Below) 15880 N. Greenway-Hayden Loop, Suite 100 Scottsdale, AZ 85260		INSURERA: American Home Assurance Company	19380-004	
		INSURERB: Illinois National Ins. Co.	23817-002	
		INSURERC: American Home Assurance Company	19380-005	
		INSURERD: National Union Fire Ins. Co. of Pittsburg	19445-001	
		INSURERE: Ins. Co. of the State of PA	19429-004	

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

NAMED INSURED INCLUDES - BFI WASTE SYSTEMS OF NORTH AMERICA, INC.

Workers Compensation - Additional Policy:

Insurance Company	Policy #	Eff./Exp. Dates
American Home Assurance	WC3322788	01/01/03 - 01/01/04

Employers Liability (Stop Gap) coverage for Monopolistic States is included:

- \$1,000,000 Each Accident
- \$1,000,000 Disease - Policy Limit
- \$1,000,000 Disease - Limit Each Employee

RE: All operations of the Named Insured

Certificate holder is an additional insured, except for Workers' Compensation, if required by written contract.

**IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

**DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.