

VILLAGE OF DOWNERS GROVE
Report for the Village
12/19/2023

SUBJECT:	SUBMITTED BY:
2024 Class A Scavenger License	Mike Baker Deputy Village Manager

SYNOPSIS

A motion is requested authorizing issuance of a 2024 Class A-Scavenger License to Allied Waste Services of North America, LLC.

STRATEGIC PLAN ALIGNMENT

The goals for 2023-2025 include *Exceptional Municipal Services*.

FISCAL IMPACT

N/A

RECOMMENDATION

Staff recommends approval on the December 19, 2023 Consent Agenda.

BACKGROUND

The Municipal Code requires that the Village Council annually approve a Class-A Scavenger License for the Village's designed contractual waste hauler. Allied Waste Services currently holds a Class A-License. Allied Waste was approved for a 3-year contract extension with the Village at the August 16, 2022 Village Council meeting. The contract extension term is April 1, 2023 through March 31, 2026. All other haulers operating in the Village must obtain a Class-B License, which allows the license-holder to provide services other than weekly single-family residential solid waste collection. Renewal of a Class-B license requires approval by the Village Manager, following notification to the Village Council.

ATTACHMENTS

Class-A Scavenger License Application

VILLAGE OF DOWNERS GROVE

COUNCIL ACTION SUMMARY

INITIATED: Village Attorney DATE: December 19, 2023
(Name)

RECOMMENDATION FROM: N/A FILE REF: _____
(Board or Department)

NATURE OF ACTION:

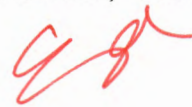
STEPS NEEDED TO IMPLEMENT ACTION:

Ordinance

Motion to approve and Authorize Issuance of a 2024 Class "A" Scavenger License for Allied Waste Services of North America, LLC.

Resolution

Motion



Other

SUMMARY OF ITEM:

Application has been made by Allied Waste Services of North America, LLC for a Class "A" Scavenger License. Finding that Allied complies with the applicable requirements of the Municipal Code, adoption of this motion will approve and authorize issuance of a Class "A" Scavenger License to Allied Waste Services of North America, LLC for 2024. This license allows Allied to serve all premises within the Village. Allied is currently under contract with the Village to provide single-family scavenger, recycling and yard waste services through March, 2026.

RECORD OF ACTION TAKEN:

VILLAGE OF DOWNERS GROVE, ILLINOIS
Class A Scavenger License Application, 2024

Please print or type

1. FORM OF BUSINESS (Check one):

Corporation Individual Owner Partnership

2. OWNER OF BUSINESS:

Allied Waste Services of North America
 Address 18500 Allied Way
(street)
 Address Phoenix AZ 85054
(city) (state) (zip)
 Phone No. (480) 627-2700

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

Allied Waste Services of North America, LLC
 Address 18500 n. allied way.
(street)
 Address Phoenix AZ 85054
(city) (state) (zip)
 Phone No. _____

3. DOING BUSINESS AS:

Republic Services of Melrose Park
 Address 5050 N Lake St. Melrose Park IL 60160
(street) (city) (state) (zip)
 Phone No. (708) 345-7050 Number of staff in the office 3
 Hours of Business 6am - 5pm Effective date of establishment 25+ years
 24-hour emergency phone number (708) 897-3217 - Matthew Norman

4. MANAGER OF BUSINESS:

Robert Greco
(first) (middle) (last)
 Address 2101 S. Busse Rd. Mount Prospect IL 60056
(street) (city) (state) (zip)

5. CERTIFICATE OF INSURANCE REQUIRED

	<u>Each Person</u>	<u>Each Occurrence</u>
Personal Injury -	\$500,000	\$1,000,000
Insurance Co. <u>Cannon Cochran</u>	Property Damage -	\$100,000
Policy No. <u>See attachment</u>	Expiration Date	<u>06.30</u>

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:

front/side/rear load, Roll off
Northlake and McCook transfer station

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

front/rear load
Northlake / McCook transfer station

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

front/rear load
Northlake / McCook transfer station

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 (2022 and 2021).

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 gallons (number of units) = 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 - \$4,275

NAME OF PERSON SUBMITTING THIS APPLICATION:

Amise White
(first) (middle) (last)

Address 2101 S Busse Rd. Mount Prospect IL 60056
(street) (city) (state) (zip)

Phone No. (847) 378-2373 Date of Birth _____

Drivers License No. _____

Relationship to Business Operations Clerk

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

[Signature] Date 12.05.2023



Return this application to:
Rosa Berardi
VILLAGE OF DOWNERS GROVE
801 Burlington Avenue
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:

BL #16 (Republic Services, d/b/a Allied Waste Services)

License issued (date) _____ License No. _____

Cashier's Receipt No. _____ Date Paid _____

\$4,275 Fee Paid _____

AGENCY CUSTOMER ID: _____
 LOC #: _____


ADDITIONAL REMARKS SCHEDULE

Page 2 of 2

AGENCY	NAMED INSURED
POLICY NUMBER See First Page	REPUBLIC SERVICES, INC. 18500 N. ALLIED WAY PHOENIX, AZ 85054
CARRIER See First Page	NAIC CODE
EFFECTIVE DATE:	

ADDITIONAL REMARKS
CERTIFICATE NUMBER: 2332496

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.

 FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

The following provisions apply when required by written contract. As used below, the term certificate holder also includes any person or organization that the insured has become obligated to include as a result of an executed contract or agreement.

GENERAL LIABILITY:

Certificate holder is Additional Insured including on-going and completed operations when required by written contract.
 Coverage is primary and non-contributory when required by written contract.
 Waiver of Subrogation in favor of the certificate holder is included when required by written contract.

AUTO LIABILITY:

Certificate holder is Additional Insured when required by written contract.
 Coverage is primary and non-contributory when required by written contract.
 Waiver of Subrogation in favor of the certificate holder is included when required by written contract.

WORKERS COMPENSATION AND EMPLOYERS LIABILITY:

Waiver of Subrogation in favor of the certificate holder is included when required by written contract where allowed by state law.

Stop gap coverage for ND and WA is covered under policy no. WLR C50710397 and stop gap coverage for OH is covered under policy no. WCU C50710555, as noted on page 1 of this certificate.

TEXAS EXCESS INDEMNITY AND EMPLOYERS LIABILITY:

Insured is a registered non-subscriber to the Texas Workers Compensation Act. Insured has filed an approved Indemnity Plan with the Texas Department of Insurance which offers an alternative in benefits to employees rather than the traditional Workers' Compensation Insurance in Texas. The excess policy (TNS C66934172) shown on this certificate provides excess indemnity and Employers Liability coverage for the approved Indemnity Plan.

Contractual Liability is included in the General Liability and Automobile Liability coverage forms. The General Liability and Automobile Liability policies do not contain endorsements excluding Contractual Liability.

Separation of Insured (Cross Liability) coverage is provided to the Additional Insured, when required by written contract, per the Conditions of the Commercial General Liability Coverage form and the Automobile Liability Coverage form.