

**July 1, 2024 – June 30, 2026**  
**REGIONAL MIXED MUNICIPAL SOLID WASTE**  
**COLLECTION OR TRANSPORTATION LICENSE**  
**APPLICATION**

**BASE COUNTY:**

**Washington**

**NOTE TO APPLICANT:** Please print in black ink or type all requested information. Be sure to complete all sections of the application. An Instruction sheet is included to aid in completing this form. Information contained in this application becomes part of the county's official records upon receipt and may be released to others to the extent authorized by the Minnesota Data Practices Act, Minnesota Statutes Chapter 13.

**INCOMPLETE APPLICATIONS WILL BE RETURNED AND NOT CREDITED AS BEING RECEIVED**

<p><b>1. OPERATING COUNTY(-IES).</b> Application is hereby made for a Regional Mixed Municipal Solid Waste ("MSW") Collection and Transportation "Base License," and for an "Operating License," in the following county/counties. Check the box of the county/counties you currently operate in. <i>(See Instructions sheet.)</i></p> <p><b>Anoka</b> <input type="checkbox"/>    <b>Carver</b> <input type="checkbox"/>    <b>Dakota</b> <input type="checkbox"/>    <b>Hennepin</b> <input type="checkbox"/>    <b>Ramsey</b> <input type="checkbox"/>    <b>Scott</b> <input type="checkbox"/>    <b>Washington</b> <input type="checkbox"/></p>																		
<p><b>2. BUSINESS NAME:</b></p>		<p><b>4. BUSINESS STATUS:</b></p> <p>Other: _____</p>																
<p><b>3. LICENSEE NAME:</b></p>																		
<p><b>5. BUSINESS ADDRESS</b>          (Number, Street, City, State, Zip Code):</p>																		
<p><b>6. OFFICIAL MAILING ADDRESS</b>  <i>If different than Business Address in #5 -</i>          (Number, Street, City, State, Zip Code):</p>																		
<p><b>7. BUSINESS LOCATION.</b> If different than business address in #5, location where vehicle(s), containers, and business records are maintained. List the location with majority of vehicles first. If more than two (2) locations, attach additional information on a separate sheet.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">Item (vehicle, containers, records, etc.)</th> <th>Address (Street no., City, Zip Code)</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> </tbody> </table>			Item (vehicle, containers, records, etc.)	Address (Street no., City, Zip Code)														
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<p><b>8. CONTACT PERSON RESPONSIBLE FOR COMPANY OPERATIONS:</b></p>	<p><b>9. TITLE:</b></p>	<p><b>10. CONTACT INFORMATION:</b>          Phone Number:          Cell Number:          Email:</p>																
<p><b>11. OWNER INFORMATION.</b> If a partnership or individually-owned; use additional sheets if necessary.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:33%;">Name</th> <th style="width:33%;">Address</th> <th style="width:33%;">Phone No.</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			Name	Address	Phone No.													
Name	Address	Phone No.																
<p><b>12. OFFICER INFORMATION.</b> If a corporation, list all corporate officers, regardless of title, in the table below.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">Name</th> <th style="width:25%;">Title</th> <th style="width:25%;">Address</th> <th style="width:25%;">Phone No.</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			Name	Title	Address	Phone No.												
Name	Title	Address	Phone No.															

**13. WORKER'S COMPENSATION INSURANCE.** Minnesota Statutes 176.182 requires that you provide the county with acceptable evidence of compliance with the worker's compensation insurance law. Complete either Part A or Part B below. The county will not issue a license without this information.

Part A. Insurance company name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone number: \_\_\_\_\_  
 Policy number: \_\_\_\_\_  
 Effective dates: \_\_\_\_\_

Part B. Worker's compensation insurance is not required because (check appropriate box):

I have no employees.

I have employees who are not required to be covered by the workers compensation law (spouse, parents, children and certain farm employees).

I am self-insured. Provide self-insurance permit number: \_\_\_\_\_

**14. LIABILITY INSURANCE.** Submit along with this application a certificate of insurance which provides the limits set forth in Minnesota Statutes Chapter 466:

- a. Commercial General Liability in the amount of \$1,500,000 per occurrence, \$2,000,000 aggregate.
- b. Auto Liability in the amount of \$1,500,000 per occurrence, combined single limit. The policy shall cover owned, hired, and non-owned vehicles.

Complete the information in the table below:

Name of insurance company	
Name of insurance agent	
Phone number	
Email address	
Policy term: from _____ (day/month/year) to _____ (day/month/year)	

**The certificate of insurance must name the Regional Hauler Licensing Board, and Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington Counties as additional insureds.**

All policies and certificates shall be endorsed to require that the insurer provide at least sixty (60) day written notice to the County prior to the effective date of policy cancellation, non-renewal, or material adverse change in the coverage terms. The hauler shall maintain insurance in compliance with this section throughout the two-year term of this license.

**Please see Instructions for complete insurance liability coverage limits and certificate requirements.**

**15. TOTAL NUMBER OF ACCOUNTS BY COUNTY.** Enter the number of accounts, by type, as indicated.

COUNTY	Number of Accounts		COUNTY	Number of Accounts	
	Residential	Non-Residential		Residential	Non-Residential
Anoka			Ramsey		
Carver			Scott		
Dakota			Washington		
Hennepin			Other: _____		

**16. MSW BY COUNTY.** Of the total MSW you collect annually, enter the percent that comes from each county.

Anoka	%	Dakota	%	Ramsey	%	Washington	%
Carver	%	Hennepin	%	Scott	%	Other: _____	%



<b>26. TYPE OF SERVICE.</b> Select <b>Yes</b> or <b>No</b> which type(s) of service(s) you offer as part of your business:			
MSW (in any amount or frequency)		Construction/demolition	
Recycling (traditional and/or organics)		Transfer (haul <b>ONLY</b> transfer station waste)	
<b>SERVICE SUB-TYPE.</b>			
Non-residential collection		Public entity/governmental	
Residential collection		Self-hauler (haul <b>ONLY</b> your own	
One-time clean-outs		Other:)	
<b>27. LICENSE FEE.</b> The Regional Mixed Municipal Solid Waste Collection and Transportation License fee is <b>\$100.00 per vehicle</b> , payable to the county in which your company is based. Calculate the fee as follows:			
a. Number of vehicles from table on page 3: _____	x \$100.00 per vehicle	=	\$ _____
c. Late application fee (if applicable; see Instructions sheet)		=	\$ _____
d. <b>Total fee remitted</b> (add lines a + b)		=	\$ _____
<b>28. APPLICATION CERTIFICATION:</b> I hereby certify that I am authorized by law, and if applicable, I am authorized by all necessary board action, to sign this application on behalf of the licensee, intending this application for license to be a legally binding obligation of the licensee. Further, I hereby certify that I have read, understand and will comply with all applicable local, state, and federal laws, rules, and regulations and the requirements of all applicable ordinances. I further certify that the information provided on this license application, and any and all attachments, is correct and complete to the best of my knowledge.			
a. _____ Printed name		c. _____ Title	
b. _____ Signature		d. _____ Date	
<b>29. APPENDIX A (attached): Recycling Services Provided.</b> This information is collected to assure accuracy in counties' educational outreach to residents and businesses. Please indicate with a check mark in the Residential and Non-residential columns which materials you accept for recycling and organics collection. Respond, where applicable, to the additional questions or add any comments.			
<b>30. APPENDIX B (attached): Recycling/Organics Services Offered to Non-Residential Customers.</b> Pursuant to Minnesota Statute, Section 115A.151, commercial building owners that contract for 4 cubic yards or more per week of MSW collection must provide recycling for at least three types of material. The counties are committed to identifying ways to assist businesses in meeting this requirement. The counties intend to use answers provided in this appendix to consider what services businesses are already receiving and to work with haulers to provide additional services that businesses may need.			

**APPENDIX A - Recycling Services Provided**

1. Do you offer recycling collection services to residential and/or non-residential customers? Check all that apply:  
Residential  // Non-Residential
2. Do you offer organics diversion services to residential and/or non-residential customers? Check all that apply:  
Residential  // Non-Residential  // Non-Residential required by ordinance
3. Do you collect residential recycling weekly or bi-weekly? Check all that apply: No  // Yes - Weekly   
// Yes - Bi-weekly

If yes to question 3, please indicate below which materials you collect for recycling and/or organics diversion. This information will be used for regional outreach purposes.

Material for Recycling and Organics Diversion		Account Type (check: x)		Additional Information or Comments
		Residential	Non-Residential	
Organic Waste	Organics/source-separated food waste			
	Yard Waste			
	Co-mingled yard waste and organics/source-separated food waste			
Cardboard and paper	Corrugated cardboard/OCC			
	Cereal, cracker, cake mix boxes			
	Refrigerated food boxes (Pop & beer cases)			
	Frozen food boxes			
	Pizza boxes from delivery			
	Paper towel/toilet paper rolls (empty core)			
	Mail, newspaper, office/school papers, magazines/catalogs			
	Paperback books and phone books			Hardcover also accepted?
	Paper egg cartons			
Shredded paper			Describe prep:	
Cartons	Milk cartons			Select accepted:
	Juice cartons			Select accepted:
	Soup, broth & wine cartons			Select accepted:
Plastics	Bottles: beverage & food, shampoo, soap, lotion, dishwashing liquid			Select accepted:
	Disposable beverage cups			Select accepted:
	Food product cups (eg. yogurt & fruit)			
	Jugs: milk, juice & detergent			Select accepted:
	Tubs: cottage cheese & margarine			
	Containers: produce, deli & take out			
	Plastic toys			
	Rigid plastic packaging/ Clear packaging from toys & electronics			
	Microwavable food trays			
	Plastic bags/ film/ wrap			
Styrofoam (expanded polystyrene foam)				
Glass	Bottles (food & beverage)			Select accepted:
	Jars (food & beverage)			Select accepted:
Metal	Aluminum, tin & steel cans (food & beverage)			
	Aluminum foil			
	Aluminum trays/pie pans			
	Empty aerosol cans			
	Empty paint cans			
	Scrap metal			If size limit, please describe:
Other	Clothes & linens			

**APPENDIX B: Recycling/Organics Services Offered to Non-Residential Customers**

Service	Recyclables		Organics		Comments:
	Check One Answer (Yes or No)		Check One Answer (Yes or No)		
Single Sort	Yes	No	Yes	No	
Multiple Sort	Yes	No	Yes	No	
Provide interior containers	Yes	No	Yes	No	
Provide Labels	Yes	No	Yes	No	
Label carts, dumpsters, and compactors with signage in compliance with county ordinance	Yes	No	Yes	No	
Help place with businesses containers adjacent to SW receptacles	Yes	No	Yes	No	
Provide written information and education	Yes	No	Yes	No	
Help develop a company-wide recycling/organics management plan	Yes	No	Yes	No	
Audit the company's waste stream	Yes	No	Yes	No	
Right size garbage dumpsters after adding recycling/organics service	Yes	No	Yes	No	
Share market revenues	Yes	No	Yes	No	
Offer onsite technical assistance	Yes	No	Yes	No	
Weigh individual recycling/organics containers	Yes	No	Yes	No	

Business Name \_\_\_\_\_

## WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION

*Please type or print clearly.*

Pursuant to Minn. Stat. § 176.182, the information on this form must be collected **ANNUALLY** for the Commissioner of the Minnesota Department of Labor and Industry. Pursuant to Minn. Stat. § 13.04, subd. 2 and Public Law 93-579 § 7, you are informed that:

- Incomplete or falsely reported information may be cause to deny the issuance, or renewal of your license;
- The Department will supply it only to authorized agencies; and
- Failing to supply this information, or supplying false information, may result in a \$2,000 penalty assessed by the Commissioner of the Department of Labor and Industry.

Complete the required fields below and return with your **LICENSE APPLICATION** or **LICENSE RENEWAL**.

1. **Business or Applicant Name:** Name of the Company or individual owner of the business.

2. **Workers' Compensation Insurance Company Name and Address:**

3. **Workers' Compensation Policy Number:**

4. **Policy Effective Date:**

5. **Policy Expiration Date:**

Check here if you do not need Workers' Compensation Insurance Coverage  
Reason:



## MINNESOTA TAX IDENTIFICATION NUMBER INFORMATION

*Please type or print clearly*

Pursuant to Minn. Stat. § 270C.72, the information on this form must be collected **ANNUALLY** for the Commissioner of the Minnesota Department of Revenue. This form includes a Social Security number, which is classified as private data under the Minnesota Government Data Practices Act. Pursuant to Minn. Stat. § 13.04, subd. 2 and Public Law 93-579 § 7, you are informed that:

- This information may be used to deny the issuance or renewal of your license if you owe the Minnesota Department of revenue delinquent taxes, penalties or interest;
- The Department will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Act, the Department of Revenue is allowed to supply this information to the Internal Revenue Service; and
- Failing to supply this information may jeopardize or delay the issuance of your license or processing of your renewal application.

**Complete the required fields below and return with your LICENSE APPLICATION or LICENSE RENEWAL.**

1. **Applicant Name:** Name of the Company or individual owner of the business.

2. **MN Tax ID Number:** Print the Tax ID number of the Company

3. **Applicant's Social Security Number:** Complete if the business has not been issued a MN Tax ID Number.

4. **Business Name:** Name of the Company, should be the same Name as on the License.

5. **Business Physical Address:** Include Street address, City, MN and Zip Code.

**LINE-BY-LINE INSTRUCTIONS FOR COMPLETING  
THE 2024 - 2026 REGIONAL MIXED MUNICIPAL SOLID WASTE  
COLLECTION AND TRANSPORTATION (HAULER) LICENSE  
APPLICATION *Applications are due on or before April 30, 2024***

**INTRODUCTION**

You must apply for and receive a Regional License to offer mixed municipal solid waste (“MSW”) collection and transportation services in Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington Counties. All companies must be licensed and display a license decal on all trucks to collect and transport MSW in the 7-county regional area. Most Counties require, if you deliver MSW to their transfer station or landfill, your vehicles must be licensed and have a county assigned number that is readily visible and legible to avoid any delays and/or rejection at the scale house. The MSW license year will run from July 1, 2024 – June 30, 2026. **YOU DO NOT NEED A REGIONAL MSW LICENSE IF YOU ARE HAULING ONLY NON-MSW MATERIALS, SUCH AS CONSTRUCTION WASTE OR DEMOLITION DEBRIS.**

**LINE**

**NO.      INSTRUCTIONS**

1.     Base & Operating County(-ies). Indicate with a check mark only those counties in which you intend to offer MSW collection and transportation services. Your business address (Line 5 of the application) will determine your Base County. Please submit your application to your Base County, which will issue your Base License. If you check a box for any other “Operating County,” your Base County will provide a copy of the application to that county, which will then issue to you a Regional Operating License. If you need to add an Operating License for another county in the region at a later date, please contact your Base County first. There is no charge to add an Operating County license.

***Note: Hennepin, Ramsey and Washington Counties require all MSW haulers licensed in their counties to collect, report, and remit to the counties a hauler-collected service charge. These requirements apply even if you do not provide MSW services in these counties.***

2.     Business Name. Print the name of the company you will be doing business as. This is the same name that all vehicles used by the hauler—and all containers owned by the hauler—are to be identified by.

3.     Licensee Name. Print the name of the person(s) or entity legally responsible for the operation of this business. If the business is a corporation, the licensee is the corporation.

4.     Business Status. Indicate with a check mark the ownership status that describes the legal status of the licensee (i.e. licensee a corporation, partnership, individually owned, government agency or other type, such as cooperative or association). If you check “Other,” please include an explanation.

5.     Business Address. Print the full address (including post office box, if applicable, City, and Zip Code) used by your business.

6.     Official Mailing Address. If different than the Business Address, print the full address to which official notices should be mailed and to which correspondence should be sent. The County(-ies) will use this address for contacting you in connection with the license application.

7. Business Location. Identify all locations (street address, city, and state) where vehicles and equipment are kept and serviced and where business records are maintained. Attach additional sheets if necessary
8. Contact Person. Print the full name (first name, middle initial, and last name) of the person knowledgeable about, and responsible for, the day-to-day business activities of the company, and who you want the County to contact regarding this license and/or business operations.
9. Title. Print the job title or position of the Contact Person identified in Line 9.
10. Contact Information. Print the complete telephone number and FAX number, including area code, of the contact person identified in Line 8. Include an e-mail address or company web site, if available.
11. Owner Information. If the licensee, as set forth in Lines 3 & 4, is an individual, partnership, or other entity, complete Line 11 but not Line 12. If the business is a partnership, individually owned, or other entity, print the full name(s) (first name, middle initial, and last name), address(-es), and telephone number(s) of the owner(s). Attach additional sheets if necessary.
12. Names of Officers. If the licensee, as set forth in Lines 3 & 4 is a corporation, complete Line 12 but not Line 11. If the business is incorporated or other type such as a cooperative under the laws of Minnesota or any other state, print the full name(s) (first name, middle initial, and last name), address(-es), and telephone number(s) of all officers. Attach additional sheets if necessary.
13. Workers Compensation Insurance. If you have employees who are paid or otherwise compensated, supply the name of your workers compensation insurance company, address, policy number, and the policy's effective dates. If you do not have workers compensation insurance, check one of the reasons listed. If you are self-insured, supply your self-insurance permit number.
14. Liability Insurance. Submit with your application a certificate of insurance that complies with the minimum requirements listed. Contact your insurance agent immediately to get this certificate, and provide them with a copy of the language in Line 14 so that a correct certificate can be prepared. The certificate must name the Regional Hauler Licensing Board, and Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington Counties, as additional insureds. Be sure that the insured entity is the same as the licensee shown in Line 3. Also, note that all vehicles you may use in the course of business must be fully insured.
15. Total Number of Accounts by County. Indicate the total number of residential and non-residential accounts that you service for each county.
16. MSW by County. Enter the percent of your total annual MSW weight or volume you collect in each county. If you collect from a county outside the six-county metro area, please note the county name(s) and the percent of your total annual collection that comes from each county(-ies). The total must add up to 100 percent.

**Vehicle Information Lines 17-25**

17. License Plate Number. This is the number on the license plate assigned to the vehicle by the state in which the vehicle is registered.
18. Year. This is the year the vehicle was manufactured.
19. Make. This is the manufacturer of the vehicle (e.g., Ford, Mack, International).
20. Model. This is the particular style of vehicle.
21. Vehicle Type. Enter one of the following codes: RL = rear loader, FL = front/top loader, SL = side loader, RO = roll-off, O = other.
22. Capacity. This is the volume of solid waste, in cubic yards, that the vehicle was designed to hold when fully loaded. For roll-off vehicles, indicate "NA."
23. Fleet Number. This is the number that your company has assigned its vehicle(s).
24. ID number. This is the identification number assigned to the vehicle by a disposal facility (e.g., RRT Newport) or a government entity (Hennepin County). Enter all of the ID numbers assigned to the vehicle. Enter only one ID number on a line. If more than one ID number has been assigned to the same vehicle, enter these ID numbers in their space on subsequent lines. If you don't have facility ID numbers assigned, enter "NA."
25. Number of Axles. Indicate the number of drive axles for each waste hauling vehicle to be licensed.
26. Type of Service & Service Sub-Type. Indicate by circling "Yes" or "No" the service(s) your waste hauling business offers, including:

<b>Type of Service</b>	<b>Description of Service</b>
MSW (in any amount or frequency)	Waste removal of MSW as a regularly scheduled or on-call service, in any amount.
Recycling (traditional and/or organics)	Waste removal of traditional recycling (single-sort, multiple-sort, single stream, etc.) and/or source-separated organics
Construction/Demolition (On-call)	Waste removal and disposal of construction waste and demolition debris, including roofing shingles, sheetrock/wall board, concrete, lumber and other wood waste, etc.
Transfer	Hauling waste from a transfer station directly to a disposal facility, typically using semi-trailers. This does not include waste generated by transfer station activities.
<b>SERVICE SUB-TYPE</b>	
Non-Residential Collection	Waste removal provided to non-residential customers.
Residential Collection	Waste removal provided on a routine scheduled basis, (i.e. weekly or biweekly).

Public Entity/Governmental	Waste removal provided to Schools, City, County, Regional, or State Government offices/facilities, etc.
One-time clean outs	Waste removal during house, garage, apartment clean outs.
Self-Hauler	Collection and disposal of only that MSW and other waste generated by your own business activities.
Other	Describe on dotted line.

27. The Regional License Fee. Enter the license fee data as follows:

Line 27a: Enter the total number of MSW vehicles to be licensed as identified on page 3 of the application, then multiply that number by **\$100.00**, and enter the amount on Line 27a.

Line 27b: Late Application Fee. If the application is postmarked **after** the due date of **April 30, 2024**, or if the application is received by the County after that date, you must submit a late application fee. The late fee amount is calculated as follows:

- If the application is received between one (1) and seven (7) calendar days after the due date, the late fee is be equal to **25% of the license fee**;
- If the application is received between eight (8) and 30 calendar days after the due date, the late fee is equal to **50% of the license fee**; and
- If the application is received between more than 30 calendar days after the due date, the late fee is equal to **100% of the license fee**.

If a late fee is due, enter the appropriate amount in the Line 27b.

Line 27c: Total Fee Remitted. Add the amounts on Lines 27a and 27b, and enter the total on Line 27c. **You must submit a check for this amount, payable to your Base County, with your completed application.**

28. License Application Certification. The license application must be signed by the owner(s) if a sole proprietorship or partnership, or by an officer of the corporation if it is a corporation. The full name (first name, middle initial, and last name) of the individual must be printed in item "a." The signature of the individual named in item "a" must be entered in item "b." The title of the individual named in item "a" must be printed in item "c." The date the application is completed must be entered in item "d."

Hauling Services. There are recycling requirements in place within all of the counties included in this regional hauling license. **Hennepin County** requires that certain businesses collect and recycle wasted food and food scraps (organics recycling). As a hauler that provides trash service it may also be asked to provide recycling and organics recycling for composting service. It is expected that your businesses assist to the best of its ability to ensure these services are provided when requested or allowed in the event your business does not provide these services.

29. Appendix A: Recycling Services Provided. This information was collected last year to assure accuracy in educational outreach by the counties with residents and businesses. For an example of how this information was used, please review <https://www.co.dakota.mn.us/Environment/RecyclingWasteReduction/Residents/Documents/ResidentialRecyclingItemsAccepted.pdf>. Please indicate with a check mark in the

Residential and Non-Residential columns which materials you accept for recycling and organics collection. Respond, where applicable, to the additional questions or add any comments.

30. Appendix B: Pursuant to Minnesota Statute, Section 115A.151, as of January 1, 2016, commercial building owners that contract for 4 cubic yards or more per week of mixed municipal solid waste collection must implement recycling for at least three types of material. The Counties are committed to identifying ways to assist businesses in meeting this requirement. The Counties intend to utilize answers provided in Appendix B to consider what services businesses are already receiving and work with haulers to provide additional services that may be needed by businesses.

### **License Application Checklist**

Please be sure you have provided all information necessary to complete your hauler license application, including:

- Proof of Worker's Compensation Insurance (Line 13);
- Insurance certificate (see Line 14);
- A check made out to the licensing Base County (Line 27c);
- The Application Certification, signed by an owner or officer (Line 28);
- A completed ***Regional MSW Hauler License Application Information form***

**To avoid a late fee, you must submit a COMPLETE license application and payment to your Base County on or before April 30, 2024.**

Submit your completed license application and payment to:

(Base County Contact info and mailing address here)

If you have any questions about completing the hauler license application, contact:

# Metro County Regional Hauler Licensing Program

## County-Specific Solid Waste and Recycling Requirements and Resources

### Anoka

- For information on solid waste and recycling requirements for haulers in Anoka County, please visit the [Solid Waste page](#) on the county website or contact:
  - Tom Olson: 763-324-4243; [tom.olson@co.anoka.mn.us](mailto:tom.olson@co.anoka.mn.us)

### Carver

- For information on solid waste and recycling requirements for haulers in Carver County, please visit [www.co.carver.mn.us](http://www.co.carver.mn.us), or contact:
  - Matt Steele: 952-361-1808; [msteele@co.carver.mn.us](mailto:msteele@co.carver.mn.us)

### Dakota

- For information about solid waste and recycling requirements for haulers in Dakota County, please visit the following web sites:
  - [Waste hauler information](#)
  - [Business recycling information](#)
  - [Business organic recycling information](#)
- For information about the new requirements for haulers and recycling, please visit the following web sites:
  - [New requirements for businesses and organizations](#)
  - [New requirements for multi-unit properties](#)
  - [New requirements for schools](#)

For more information, contact Chee Yang: 952-891-7158; [chee.yang@co.dakota.mn.us](mailto:chee.yang@co.dakota.mn.us)

### Hennepin

- For information on solid waste and recycling requirements for haulers in Hennepin County, please visit the following web sites:
  - [Waste hauler information](#)
  - [Business recycling information](#)
  - [Business organic recycling information](#)
- For solid waste questions:
  - Haulers hotline (612) 348-7813 – [Haulers@Hennepin.us](mailto:Haulers@Hennepin.us)
  - Enrique Vinas (612) 348-4919 – [enrique.vinas@Hennepin.us](mailto:enrique.vinas@Hennepin.us)
  - Celeste Gilbertson (612) 348-9907 – [celeste.gilbertson@Hennepin.us](mailto:celeste.gilbertson@Hennepin.us)
- For recycling questions:
  - Josh Suckow (612) 281-8343 – [joshua.suckow@Hennepin.us](mailto:joshua.suckow@Hennepin.us)
  - Business recycling (612) 543-9298 – [businessrecycling@Hennepin.us](mailto:businessrecycling@Hennepin.us)

## **Ramsey and Washington Counties**

- Waste Designation (“flow control”) requirement. Ramsey and Washington counties’ solid waste ordinances require any trash collected in the either county be delivered to the Ramsey/Washington Recycling & Energy Center in Newport, or to another authorized facility. For more information about waste designation in the two counties, visit the [Ramsey/Washington Recycling & Energy website](#).
- County Environmental Charge (CEC). Ramsey and Washington counties’ solid waste ordinances require licensed haulers to bill, collect, report, and remit the CEC of trash customers in each county. There are specific requirements for billing the CEC and retaining adequate records; and county staff provide haulers with report forms, which must be submitted regularly (e.g., monthly).

For more information about grants for starting or improving recycling/organics service for businesses in the two counties, visit [Biz Recycling](#).

For more information about the CEC, solid waste and recycling requirements for haulers in Ramsey County, please visit the [Waste Hauler page](#) on the county website, or contact Ahmet Baysal at [Ahmet.baysal@ramseycounty.us](mailto:Ahmet.baysal@ramseycounty.us) or 651-470-4731.

For more information about the CEC, solid waste and recycling requirements for haulers in Washington County, please visit the [Solid Waste Regulation page](#) on the county website, or contact Jenna Venem at [jenna.venem@co.washington.mn.us](mailto:jenna.venem@co.washington.mn.us), or 651-430-6768; or Tyler Dale at [tyler.dale@co.washington.mn.us](mailto:tyler.dale@co.washington.mn.us), or 651-430-6741; or Allison Spears at [allison.spears@co.washington.mn.us](mailto:allison.spears@co.washington.mn.us), or 651-430-6742.

## **Scott**

- Recycling and reporting requirements specific to haulers required by the Scott County Solid Waste Management Ordinance NO. 2- Sections 8.00, 8.01, and 8.02 can be found in the Scott County Solid Waste Ordinance found at [ordinance](#).
- For general recycling, organics, or solid waste information please visit <https://www.scottcountymn.gov/709/Solid-Waste-Management>
- For more information about Solid Waste and Recycling requirements for Haulers in Scott County, please contact Nick Reishus at [nreishus@co.scott.mn.us](mailto:nreishus@co.scott.mn.us) or call 952-496-8707.