

City of Jacksonville, Florida

Donna Deegan, Mayor

Office of Administrative Services Solid Waste Division 1031 Superior Street Jacksonville, FL 32254 (904) 630-CITY www.jacksonville.gov

MEMORANDUM

FROM:

TO: Mayor's Budget Review Committee (MBRC)

THRU: Richard Reichard Office of Administrative Services Manager

Will Williams, MBA, Will Williams, MBA,

Division Chief

SUBJECT: Non-Residential Solid Waste Collection and Transportation Franchise Application

Capital Waste Services, LLC; DBA CWS - Jax Hauling

DATE: May 9, 2025

In accordance with Jacksonville Municipal Code Section 380.605, attached is an application for a non-residential solid waste collection and transportation franchise submitted by Capital Waste Services, LLC; dba CWS – Jax Hauling. The Office of Administrative Services, Solid Waste Division has coordinated a review of the information submitted by the applicant. The application was submitted with the appropriate fee of \$1,500. The Solid Waste Division respectfully requests MBRC approval to submit legislation authorizing the approval of the applicant to operate as a non-residential solid waste collection and transportation franchise.

Attachments: Franchise Application



City of Jacksonville, Florida

Donna Deegan, Mayor

Office of Administrative Services 214 N. Hogan Street, 5th Floor Jacksonville, FL 32202 (904) 630-CITY www.jacksonville.gov

A NEW DAY.

May 9, 2025

The Honorable Randy White City Council President and Members of the City Council 117 West Duval Street, Suite 425 Jacksonville, Florida 32202

RE: Application for Non-Residential Solid Waste Collection and Transportation Franchise Application from Capital Waste Services, LLC; DBA CWS – Jax Hauling

Dear President White and Members of City Council:

In accordance with Jacksonville Municipal Code, Sections 380.605 transmitted herewith is an application for a Non-Residential Solid Waste Collection and Transportation Franchise application from Capital Waste Services, LLC.

The Office of Administrative Services, Solid Waste Division has coordinated a review of the information submitted by the applicant, inspection of its facility and Jacksonville office location in addition to conducting telephone interviews with the applicant to discuss its existing and proposed operations and maintenance plan for expansion into Duval County and their business plan and marketing strategies to accomplish this expansion. The application was submitted with the appropriate fee of \$1,500.

Experience and Potential Significant Amount of Duval County Business – Capital Waste Services, LLC. dba CWS – Jax Hauling is a subsidiary of Capital Waste Services. The applicant has experience collecting, hauling and disposing various types of debris. Based upon skills and work ethic the applicant is certain the professional relationships built over the years with top management in Jacksonville which will garner business. Capital Waste Services has successfully implemented waste management solutions in Virginia, Georgia, Tenessee and North and South Carolinas.

Financial Resources

The applicant certifies that it has the financial resources to perform its duties and obligations as a franchise. The applicant has generated over \$2 million in revenue since February 2024 in construction & demolition in Jacksonville. The owner has submitted a balance sheet with stockholder equity in excess of \$297 million. The applicant's certificate of insurance has been reviewed by Risk Management staff and meets the specified insurance requirements.

Disposal Methods, Quantities, and Facilities

The applicant proposes to landfill all Class I franchised waste it collects at the City's Trail Ridge Landfill and estimates it will collect an estimated \$390,000.00 in gross receipts per year.

May 9, 2025 The Honorable Randy White City Council President and Members of the City Council Page 2 of 2

Capital Waste Services, LLC's corporate headquarter is located at 1450 Bluff Road, Columbia, SC 29201. Their Duval County records can be examined at their local office at 8747 W. Beaver Street, Jacksonville, FL 32220.

Evidence of Safety and Reliability and Sanitation

The applicant is set to begin operations with eight vehicles. Managers and drivers are required to have Smith-System Driving Tranining Certifiation. The fleet maintenance program has a rigorous preventative maintenance program to maintain the highest standards of fleet quality. Vehicles have 3rd Eye, which is an advanced safety software program to enhance driver awareness and improve safety on the road.

Background Information

The applicant has certified that it has not been adjudicated in default on any government contracts or bids and that there are no unsatisfied final money judgments against it.

Based upon the information received and reviewed, the Department recommends that the City Council grant a franchise for a Non-Residential Solid Waste Collection and Transportation Franchise to Capital Waste Services, LLC dba CWS – Jax Hauling based upon the following conditions:

- 1. execution of a franchise agreement as specified in Section 380.605(a) (6)
- 2. submission of a payment bond, as specified in Section 380.608(f)
- 3. execution of an indemnification agreement, as specified in Section 380.608(h)

If there are any questions regarding this matter please contact Will Williams at 904-255-7512.

Sincerely,

Richard Reichard

Office of Administrative Services Manager



DEPARTMENT OF PUBLIC WORKS SOLID WASTE DIVISION CITY OF JACKSONVILLE, FLORIDA

ANNUAL APPLICATION FOR NON-RESIDENTIAL SOLID WASTE COLLECTION & TRANSPORTATION FRANCHISE

Please Type or Print				resuponted	2/26/25
1. Application Type:		2. Applica			
X Initial Renew	al Transfer	1/6/2025			9/51
3. Full Name and Business Addre	ess of Applicant:	4. Contact	Person/Mailing	Address:	
Capital Waste Services, LLC dba CWS	- JAX Hauling	Capital Wast	e Services, LLC		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
8747 W Beaver St		1450 Bluff Ro	i		
Jacksonville, FL 32220		Columbia, SC			: 29201
		Email: holle	y.pate@capwastese	ervices.com	
5. Business Phone: (904) 781-39	16	6. City of J Account 3		ipational License #:	
Business Fax: ()				.00.111	
Days & Hours of Operation:	Mon - Fri: 7am - 5pm	Expiration	Date: 9/30/2025	Federal ID#: 32-04	476669
7. A. Date of business organization	n:	B. Date of	commencement of	of service in Duval Co	unty:
**		·			
October 2015		Immediate			
8. Type of Organization:					
o. Type of Organization.					
Corporation	Limited Liability Company	/ Assoc	iation F	irm	
Individual Proprietorship Joint Stock Association Partnership Other (if checked explain on reverse side)					
9. Provide the requested inform owning an interest. (If more					all parties
INDIVIDUAL PROPRIETO	ORSHIP FIR	кМ		ASSOCIATION	
Full Name (Last, First, Middle)	Address	·	Position	Social Socovity #	Date of Birth
(Last, First, Wildle)	Address		Position	Social Security #	DIFTH
		· · · · · · · · · · · · · · · · · · ·			
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9. Continued PARTNERSHIP - for	all parties owning an inter	est. (Attach a copy of partner	ship agreement with all an	rendments.)
Full Name (Last, First, Middle)	Address	Position	Social Security #	Date of Birth
,,,				
	`			

9. Continued PUBLICLY-OWNED CO	ORPORATION on a nationally terly Securities and Exchange C	recognized stock excha commission 10K Report	nge. Attach the cor	poration's n	10st
ALL OTHER CORPORA	ATIONS (list all the Directors, (ock held by each stockholder)	Officers, and Stockholde	ers of the corporation	on and the	
Full Name (Last, First, Middle)	Address	Position	Social Security	Date of Birth	% of Stock Owned
			7 10 10 10 10 10 10 10 10 10 10 10 10 10		
TANGE TO THE TANGE					
				-	

10. If applicant is a partly or w entity must be provided.	holly-owned subsidiary of anot	ther business entity,	the following information	on for the pa	ırent
Parent Entity's Full Name: Companies Address: 1450 Bluff Rd, Componention or Organies Extent of Entity's Ownership in Parent Entity's Type of Organiz If an Individual Proprietorship, If a Partnership, for each partnership, for each direct	Columbia SC 29201 nization: Delaware Applicant: 100% zation: Corporation for the owner provide: er provide:	vning 5% or more o	f the outstanding shares	nrovide: c	on affected
Full Name (Last, First, Middle)	Address	Position	Social Security	Date of Birth	% of Stock
Parker, Matthew	3912 Kilbourne Rd, Columbia SC 29205	CEO			
Yorston, Brian	1625 Aztec Ln, Mt Pleasant, SC 29466	coo	,	1	
Minihan, Don	4 Nottingham PL, Boynton, FL 33426	CFO			
			A MARIE PORTON		

 12. Provide evidence that applicant has potential for a significant amount of business within the City. (Label Attachment as Item #12) 13. Provide an insurance certification or binder meeting requirements of Section 380.608 (g). (Label Attachment as Item #13)
14. Provide certification that applicant has never been adjudicated in default on any government contracts or bids. (Label Attachment as Item #14)
15. Identify disposal facilities to be used by the applicant and provide evidence that each is permitted or approved by the proper Federal and State Authorities and those of the County and Municipality where such facility is located. A copy of the permit for each disposal facility must be attached. (Label Attachment as Item #15)
16. Certify whether there are no unsatisfied final money judgments against the applicant. (Label Attachment as Item #16)
17. Certify whether the applicant has the financial resources to perform its duties and obligations as a franchise under this part. Attach most recent audited financial statements. (Label Attachment as Item #17)
18. Provide evidence of the safety, reliability and sanitation of the applicant's proposed collection and transportation service, including containers to be placed at customer's service location, if such are to be provided by the applicant. (Label Attachment as Item #18)
19. Section 380.608 (b) (2) (ii) of the Ordinance Code allows audit or inspection of franchisee's fiscal books and records and tax returns by City Auditors with reasonable notice. Provide the Jacksonville location of applicant's books and records. 8747 W Beaver St, Jacksonville, FL 32220
O. Provide the description (Type & Quantity) of the equipment to be used in removal, transportation and disposal of solid waste. Number of Vehicles which will need decals:
/EHICLE LIST: See attached ♥ /EAR MAKE/MODEL TYPE TAG# VEHICLE VIN DECAL# (For Division Use Only)
(For Division Use Only)

Iruck Number	Year Make	Туре	Tag #	VIN Number
13104	2011 Kenworth	Grapple	P8002I	1NKDX4TX1BJ291326
13108	2018 Hino	Hook Rolloff	P80061	5PVNV8JVXJ4S57693
13109	2018 Hino	Hook Rolloff	P80071	5PVNV8JV5J4S58217
13110	2019 Mack	Rolloff	P8008I	1M2GR2GC8KM001226
13111	2019 Mack	Rolloff	P80091	1M2GR2GC1KM001228
13112	2019 Volvo	Rolloff	P8010I	4V5KC9EG9KN906440
13121	2023 Mack	Rolloff	P3899J	1M2GR2GC7PM032412
13127	2024 Autocar	Frontload	DD36FC	5VCACLEF6RC243255

20. Continued			
Location of equipment/vehicles to be used:	THE STATE OF THE S		***************************************
			EALS - 1444
OTHER EQUIPMENT LIST: See attached			
DESCRIPTION	ТҮРЕ	QUANTITY	(For Division Use Only)
<u> </u>			
ocation of all disposal facilities to be used: Disposal Facility & Contact Person		Address	
Frail Ridge Landfill	5110 US-301 S, Jacks		
	_		
180-11			1990-01-d-12
And the second of the second o	_		
2. Provide an estimate of gross receipts, as defined in t	he ordinance, for the next 12 month	25.	

NON-RESIDENTIAL SOLID WASTE COLLECTION & TRANSPORTATION FRANCHISE AFFIDAVIT

23. THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

In compliance with City of Jacksonville Municipal Code,	Matthew Parker	,
	Type or Print Name	
being first duly sworn, state that I am the duly authorized re	epresentative of the applicant named below:	
- •		
Capital Waste Services, LLC of	dba CWS - JAX Hauling	
(Type or Print Name	of Applicant)	

submitting this application, and as such, have full authority to execute this Non-Residential Solid Waste Collection & Transportation Franchise affidavit.

The above name Affiant understands and certifies that the named applicant will comply with the following:

- A. The Non-Residential Solid Waste Collection & Transportation Franchise is to assure that solid waste is collected in a safe manner, it is necessary to limit such collection and grant such privilege to persons or companies who demonstrate that they are capable of doing so in a manner deemed by the City to be responsible, sound and consistent with the sanitation and environmental practices and policies established by the City.
- B. The insurance requirements in Section 380.608 (g) of the ordinance code shall not be construed as imposing on the City of Jacksonville or the Department of Public Works, or any official or employee of the City, any liability or responsibility for injury to any person or property damaged by the franchisee.
- C. Any changes to insurance policy must be communicated in writing to the City of Jacksonville's Risk Management Division thirty (30) days prior to taking effect.
- D. The applicant agrees to abide by all applicable rules promulgated by the Department and in accordance with all City/County, State and Federal laws.
- E. No franchisee under this section shall materially diminish or change the quantity or type of equipment used or methodology for collection, transportation or disposal of non-residential solid waste nor the location of disposal facilities described in this application, without first reporting such changes to the Department of Public Works, Solid Waste Division.
- F. Dispose of all waste required to be disposed of in a Class I Landfill subject to the franchise at the Trail Ridge Landfill.
- G. Any change of information included in the application and/or any operational changes shall be reported in the first monthly report submitted after the change occurs.
- H. Any misrepresentation of information provided in the application shall be cause for suspension or revocation of the franchise.
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Solid Waste Division

- I. The franchisee shall deliver to the Department of Public Works, Solid Waste Division, a certified true and correct monthly report of gross receipts generated during the previous month from accounts within the City on or before the last day of each month along with a check made payable to the City in the amount of 17% of the franchisee's previous month's gross receipts. Gross receipts are defined as: "the entire amount of the fees (including the fair market value of bartered services) collected by the franchisee, for nonresidential solid waste collection, removal and disposal except (i) fees collected by the franchisee for the collection, transportation, sale or other disposition of exempt waste; (ii) income from equipment sales, maintenance and repair; and, (iii) state sales taxes and the franchise fee itself." By definition, the following fees are considered gross receipts: administrative, delivery, environmental, fuel, late, lease, paper invoice and rental fees. (Report Form will be provided by the Department).
- J. The franchisee shall submit annual audited financial statements in accordance with 380.608 (b) (2) (i) by an independent certified public accountant licensed to do business in the state.
- K. If the franchisee becomes insolvent or files a petition of voluntary or involuntary bankruptcy, its franchise shall terminate no later than the date of filing of the bankruptcy petition.
- L. The applicant agrees to comply with all the terms and conditions of Part 6, Chapter 380 of the Jacksonville Municipal Code.

I attest that the information stated herein is true and accurate.

Matthew Parker

(Type or Print Title of Affiant)

(Type or Print Address of Applicant/Business)

Capital Waste Services, LLC dba CWS - JAX Hauling

(Type or Print Name of Applicant)

Sworn to and subscribed before me, this 35th

_day of February

TERRI R. CARRAWAY
Notary Public-State of South Carolina
My Commission Expires
September 02, 2030

Herri G. Lavrauru

NOTARY PUBLIC, State of Florida at Large

24. Attach a cashiers check in the amount of \$1,500.00 made payable to the Tax Collector, City of Jacksonville, c/o Department of Public Works, Solid Waste Division, 1031 Superior Street, Jacksonville, Florida 32254

Non-Refundable Franchise Application Fee = \$1,500.00

The Department will notify an applicant of any deficiencies in its application; and, the applicant will then have fifteen (15) day within which to provide the requested supplemental information. If the applicant fails to provide the requested information within the time prescribed, the application will be deemed insufficient and denied without further Council action.

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