

GWINNETT COUNTY SOLID WASTE APPLICATION CHECKLIST 2026 APPLICATION FORMS

<u>Item</u>	<u>Form</u>	<u>Description</u>
SW-001		Application for Solid Authorization
SW-002		Service Agreement for Authorization to Provide Commercial Solid Waste and Commercial Recovered Materials and/or Construction or Demolition Waste Collection Services
SW-003		<p>*Corporations must attest with corporate seal.</p> <p>*Limited liability companies (LLC) must attest with company seal.</p> <p>*Proprietorship or LLC must include notarized letter of proof that the signer is</p> <p>*an authorized officer of said company.</p>
SW-004		OSHA/DOT/CDL Affidavit
SW-005		<p>Applicant Qualifications Affidavit</p> <p>*Affidavit must be signed by all individuals with 20% or more ownership.</p> <p>Vehicles Code of Ethics Affidavit</p> <p>E-Verify Affidavit and County Map</p>

ATTACHMENTS

Insurance Certificates

*Refer to section VIII, A, vii 1- 17 of the Solid Waste Ordinance for requirements.

Certificate of incorporation, if a corporation;
 Certificate of organization, if a limited liability company;
 or Partnership agreement, if a partnership

Notification of Permit by Rule issued by the Georgia Department of Natural
 Resources, Environmental Protection Division

Disposal Assurance Letter from landfill owner or operator

Please deliver completed applications to:
 Gwinnett County Department of Support Services
 Attn: Solid Waste Management
 75 Langley Dr
 Lawrenceville, GA 30046-2475

****Two signed originals are required for all forms****

Gwinnett County
Commercial and/or Construction or Demolition (C&D)
Waste Service Provider
Application for Authorization



Section 1 - Service Provider Type
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- ☐ Commercial Service Provider
- ☐ C&D Service Provider

Section II - Entity Type

<input type="checkbox"/> Sole Proprietorship (Individual)	<input type="checkbox"/> Sub-S Corporation
<input type="checkbox"/> Limited Liability Company Date LLC Formed: _____	<input type="checkbox"/> Corporation State of Incorporation _____ Date of Incorporation _____
<input type="checkbox"/> Partnership (Attach Partnership Agreement) Date Formed: _____ List Partners and Ownership Percentage: 1. _____ 2. _____ 3. _____ 4. _____ (Attach additional sheet if required.)	<input type="checkbox"/> Limited Liability Partnership (Attach Partnership Agreement) Date Formed: _____ List Partners and Ownership Percentage: 1. _____ 2. _____ 3. _____ 4. _____ (Attach additional sheet if required.)

Section 1II – Service Provider Information

Business Legal Name (enter owner's name if sole proprietorship)	Business Trade Name (DBA)	Federal Employer Identification Number
Business Street Address	City	County
Business Telephone Number	Business Fax Number	Business E-mail Address
Licensed for Business in Gwinnett County? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Section 1II – Corporate Information

Name of Corporation	Date of Incorporation	Place of Incorporation
Parent Corporation (if applicable)	Number of Shares of Capital Stock Authorized	Number of Shares of Outstanding Stock
List Officers, Directors and/or Principal Shareholders holding 20% or more of the Stock:		
Name	Position	% Ownership
Is the Corporation owned by a Parent Corporation or held by a Holding Company? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details of corporate relationship:		
Registered Agent Information		
Name	Mailing Address	City
State	Zip Code	Phone Number
Fax Number	E-Mail Address	

Section 1V – Limited Liability Company Information

Name of LLC	Date of Organization	Name of Managing Member
List Any Member or Other Legal Entity Owning 20% or more of the LLC:		
Name	% Ownership	

Section V – Projected Annual Gross Revenue

\$_____

Section VI – Proof of Insurance and Insurance Certifications

Proof of Insurance and Insurance Certificates as required by the Gwinnett County Solid Waste Collection and Disposal Service Ordinance is required to be submitted as a part of this application.

Applicant certifiesthat statutory worker' compensation insurance is in effect and will remain in effect throughout theperiod of County	Signature:
Applicant certifies that umbrella insurance is in effect and will remain in effect throughout the period of County authorization.	Signature:
Applicant certifiesthat umbrella insurance is in effect and will remain in effect throughout theperiod of County authorization.	Signature:
Applicant certifies that umbrella insurance is in effect and will remain in effect throughout the period of County authorization.	Signature:

All comprehensive general liability, vehicle liability and umbrella liability policies shall list Gwinnett County Board of County Commissioners as additional insured and shall provide thirty (30) days notice of cancellation to the County.

Section VII – Vehicles

Applicant will use only vehicles which comply with the requirements of Rule 391-3-4-.06 of Chapter 391-3-4 (Solid Waste Management) of the Rules of the Georgia Department of Natural Resources, Environmental Protection Division.

Applicant Vehicle Inventory		
Vehicles Owned and to be used for Solid Waste Collection Operations Please specify: Make/model/year/type (front-end loader, rear-loader, roll-off, etc.)	Vehicles leased and to be used for Solid Waste Collection Operations Make/model/year/type (front-end loader, rear-loader, roll-off, etc.)	Containers to be used for solid Waste Collection Operations
Please attach additional sheet if necessary.		

Section VIII – References

List four Georgia counties/municipalities in which this business has received written authorization to provide collection and disposal of solid waste. Please note if authorization is for commercial, residential or both.

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Section IX – Affirmation

Before signing this statement, check all answers and explanations to see that you have answered all questions fully and correctly. This application is to be executed under oath and subject to the penalties of false swearing, and it includes all attached sheets submitted herewith.

STATE OF GEORGIA, COUNTY

I, _____, DO SOLEMNLY SWEAR, SUBJECT TO THE PENALTIES OF FALSE SWEARING, THAT THE STATEMENTS AND ANSWERS MADE BY ME AS THE APPLICANT IN THE FOREGOING APPLICATION ARE TRUE AND CORRECT.

SIGNATURE

TITLE

I HEREBY CERTIFY THAT _____ SIGNED HIS/HER NAME TO THE FOREGOING APPLICATION STATING TO ME THAT HE/SHE KNEW AND UNDERSTOOD ALL STATEMENTS AND ANSWERS MADE ARE TRUE AND CORRECT.

THIS ____ DAY OF _____, 20__ .

NOTARY PUBLIC

DATE

(S E A L)

**AUTHORIZATION TO PROVIDE COMMERCIAL SOLID
WASTE AND COMMERCIAL RECOVERED MATERIALS AND/OR CONSTRUCTION OR
DEMOLITION WASTE COLLECTION SERVICES**

GWINNETT COUNTY, GEORGIA

DATE:

Pursuant to the provisions of the "Gwinnett County Solid Waste Collection and Disposal Services Ordinance" (hereinafter the "Ordinance"), enacted by vote of the Gwinnett County Board of Commissioners on June 16, 2020, appearing on the minutes of said Board, and upon application by _____ (hereinafter "Service Provider"), being approved by the Director of the Department of Support Services, or designee., Gwinnett County, Georgia, a subdivision of the State of Georgia (hereinafter "Gwinnett County") and Service Provider agree as follows:

1. Gwinnett County hereby grants to Service Provider a non-exclusive service authorization to operate a commercial and/or construction or demolition solid waste collection service within unincorporated Gwinnett County.
2. Service Provider agrees to conform to all requirements of the Ordinance prior to engaging in commercial and/or construction or demolition solid waste handling in Gwinnett County.
3. This service authorization shall be valid from January 1, 2026 until December 31, 2026 unless otherwise sooner terminated by mutual agreement, by court order, by the terms of the Ordinance, or by lawful action of the Board of Commissioners of Gwinnett County.
4. Service Provider agrees to provide collection services at times compatible with the Unified Development Ordinance of Gwinnett County, Georgia, as amended, which may limit collection times for commercial establishments and businesses as a condition of zoning.
5. Service Provider herewith provides proof of insurance as required by the Ordinance.
6. On file is a true and correct copy of the Solid Waste Handling Permit obtained by Service Provider from the Director of the Environmental Protection Division of the Georgia Department of Natural Resources.
7. Service Provider agrees, at its sole cost and expense, to fully indemnify, defend and hold harmless the County, its officers, boards, commissions, employees and agents against any and all claims, suits, actions, liability and judgments from third parties for damages which may be the result of willful, negligent or tortuous conduct or operations arising out of the business of collection, transportation and disposal of solid waste, whether or not the action or omission complained of is authorized, allowed or prohibited by the Ordinance. This indemnity includes, without limitation, attorney's fees, witness fees and court costs and also includes the reasonable value of any services rendered by any officers, employees or agents of Gwinnett County.

8. Service Provider has provided proof acceptable to the the Director of the Department of Support Services, or designee. that Service Provider will maintain an adequate number of vehicles meeting the requirement of the Ordinance with adequate liability insurance coverage.

a. All vehicles and containers used for collection operations shall comply with the requirements of Rule 391-3-4-.06 of chapter 391-3-4 (Solid Waste Management) of the Rules of the Georgia Department of Natural Resources, Environmental Protection Division, and must be compactor-type trucks, covered or enclosed vehicles. All vehicles must be constructed to be substantially leak proof, constructed of durable metal, easily cleanable and able to prevent litter from escaping during movement of the vehicle.

b. Vehicles and containers shall meet all requirements of the Georgia Department of Transportation for highway safety and local ordinances governing weight and size for the streets that must be traveled for pickup. All vehicles shall be subject to unannounced inspection by county officials for compliance with environmental and highway safety standards.

c. All vehicles shall have, in letters at least six inches high and conspicuously placed in three places on the vehicle, the name and telephone number of the Service Provider.

d. Service Providers shall provide an adequate number of vehicles for regular collection services. Nothing in this authorization shall prohibit service providers from sharing backup vehicles with other service providers provided that such sharing is adequately covered by insurance.

e. Vehicles used exclusively for collecting and transporting recovered materials shall be exempt from this authorization except that an adequate cover shall be used to prevent litter from escaping during movement.

9. Service Provider agrees to submit to the Director of the Department of Support Services, or designee, upon forms provided by Gwinnett County, those reports required in the Ordinance.

10. Service Provider shall maintain a list detailing each customer complaint received. Said list shall reveal all complaints for the last three years and shall contain the following information:

a. Name of customer;

b. Date and time of complaint;

c. Description of complaint;

d. Name of employee of Service Provider receiving complaint; and

e. A description of the complaint resolution and comments.

11. As to any customer complaint forwarded to the Service Provider by Gwinnett County or its employees, the same information shall be kept and the same procedures followed as if said complaint had been received directly from customer. In the event that a customer complains that solid waste has not been collected from a residence as scheduled, Service Provider shall collect and remove said solid waste within twenty-four hours of the date of receipt of the complaint.

12. Service Provider agrees to collect and dispose of solid waste in compliance with all county ordinances, state laws and regulations, and all federal laws and regulations pertaining to the collection and disposal of solid waste. Service Provider further agrees to become familiar with and abide by all applicable rules and regulations contained in the Ordinance, which are incorporated herein by reference and made a part of this service authorization.

13. Service Provider agrees to offer recovered material recycling services to its clients.

14. Service Provider agrees that if the County's regulatory fee of three percent (3%) of gross revenues, per quarter, required by the Ordinance is not paid within thirty (30) days following the close of each calendar quarter, a late charge of penalty of 18% will be applied to the unpaid principle on all delinquent amounts until paid in full. Failure to timely pay fees may result in a revocation of the service authorization..

15. Nothing in this authorization shall require Service Provider to collect materials deemed toxic to humans, or any acid, explosive material, inflammable liquid or dangerous or corrosive material of any kind.

16. This authorization is to be construed consistent with the Gwinnett County Solid Waste Collection and Disposal Services Ordinance. To the extent this authorization cannot be construed consistent with the Ordinance, the parties agree that this authorization shall be amended to the extent necessary to comply with the Ordinance. The parties agree to execute any and all amendments necessary to amend this authorization consistent with the Gwinnett County Solid Waste Collection and Disposal Services Ordinance as amended prior to or subsequent to the effective date of this authorization which amendments are consistent with this authorization.

17. This authorization may be terminated by Service Provider or Gwinnett County pursuant to the Ordinance or as otherwise legally permitted.

This Agreement is effective on the 1st day of January, 2026.

ATTEST:

TITLE:

SIGNATURE OF SERVICE PROVIDER:

TITLE:

(CORPORATE SEAL)

GWINNETT COUNTY BOARD OF COMMISSIONERS

NICOLE L. HENDRICKSON, CHAIRWOMAN

ATTEST:

TINA KING/COUNTY CLERK

APPROVED AS TO FORM:

Gwinnett County Staff Attorney

**AFFIDAVIT****OSHA / DOT / CDL**

In accordance with the Gwinnett County Solid Waste Collection and Disposal Services Ordinance, I certify and affirm that all solid waste collection and disposal equipment meets minimum OSHA safety and health standards. Additionally, I certify and affirm that all heavy equipment drivers possess a current Commercial Drivers License (CDL) and all trucks are registered with the Georgia DOT.

SIGNATURE

TITLE

BUSINESS NAME

DATE

NOTARY PUBLIC

DATE**(SEAL)**

**AFFIDAVIT****APPLICANT QUALIFICATIONS**

In accordance with the requirements of the Gwinnett County Solid Waste Collection and Disposal Services Ordinance, I hereby acknowledge, certify, and affirm;

No solid waste collection and disposal service authorization shall be granted to any person who is not a citizen of the United States or an alien lawfully admitted for permanent residence.

Additionally; The applicant and owner or operator, if different than applicant, for a solid waste collection and disposal authorization or, in the case of a corporation, partnership, or association, an officer, director, manager, or shareholder of twenty percent (20%) or more of stock or financial interest in said corporation, partnership or association:

- (1) has not intentionally misrepresented or concealed any material fact in the application submitted for solid waste collection and disposal service;
- (2) is not attempting to obtain the solid waste collection and disposal authorization by misrepresentation or concealment;
- (3) has not been finally convicted in the State of Georgia or any federal court of any felony within three (3) years immediately preceding the application for a solid waste collection and disposal authorization;
- (4) has not been convicted of any violations of any environmental laws punishable as a felony in any state or federal court within three (3) years preceding the application for a solid waste collection and disposal authorization;
- (5) has not knowingly, willfully, and consistently violated the prohibitions specified in O.C.G.A. § 12-8-30.7;
- (6) has not been adjudicated in contempt of any court order enforcing any federal environmental laws or any environmental laws of the State of Georgia.

OWNER / DIRECTOR / MANAGER / SHAREHOLDER

% OWNERSHIP

OWNER / DIRECTOR / MANAGER / SHAREHOLDER

% OWNERSHIP

OWNER / DIRECTOR / MANAGER / SHAREHOLDER

% OWNERSHIP

OWNER / DIRECTOR / MANAGER / SHAREHOLDER

% OWNERSHIP

OWNER / DIRECTOR / MANAGER / SHAREHOLDER

% OWNERSHIP

NOTARY PUBLIC

DATE

(S E A L)

**AFFIDAVIT****VEHICLES**

In accordance with the Gwinnett County Solid Waste Collection and Disposal Services Ordinance, I hereby acknowledge, certify, and affirm;

- (1) All vehicles and containers used for collection operations shall comply with the requirements of Rule 391-3-4-.06 of chapter 391-3-4 (Solid Waste Management) of the Rules of the Georgia Department of Natural Resources, Environmental Protection Division, and must be compactor-type trucks, covered or enclosed vehicles. All vehicles must be constructed to be substantially leak proof, constructed of durable metal, easily cleanable and able to prevent litter from escaping during movement of the vehicle.
- (2) Vehicles and containers shall meet all requirements of the Georgia Department of Transportation for highway safety and local ordinances governing weight and size for the streets that must be traveled for pickup. All vehicles shall be subject to unannounced inspection by county officials for compliance with environmental and highway safety standards.
- (3) All vehicles shall have, in letters at least six inches high and conspicuously placed in three places on the vehicle, the name and telephone number of the service provider.
- (4) Service providers shall provide an adequate number of vehicles for regular collection services. Nothing in the Ordinance shall prohibit service providers from sharing backup vehicles with other service providers provided that such sharing is adequately covered by insurance.

SIGNATURE

PRINT NAME

TITLE

BUSINESS NAME

DATE

NOTARY PUBLIC

DATE

(SEAL)



Bid # & Description _____

CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. _____
Company Submitting Bid/Proposal

2. Please select one of the following:
- ☐ No information to disclose (*complete only section 4 below*)
 - ☐ Disclosed information below (*complete section 3 & section 4 below*)

3. If additional space is required, please attach list:

Gwinnett County Elected Official Name

Gwinnett County Elected Official Name

Gwinnett County Elected Official Name

Gwinnett County Elected Official Name

4. BY: _____
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Printed Name of Authorized Officer or Agent

_____ day of _____, 20____

Title of Authorized Officer or Agent of Contractor

Notary Public

(seal)

Note: See Gwinnett County Code of Ethics Ordinance EO2011, Sec. 54-33. The ordinance will be available to view in its' entirety at **GwinnettCounty.com**



Solicitation Name & No. _____

CONTRACTOR AFFIDAVIT AND AGREEMENT
(THIS FORM SHOULD BE FULLY COMPLETED AND RETURNED WITH YOUR SUBMITTAL)

By executing this affidavit, the undersigned contractor verifies its compliance with The Illegal Immigration Reform Enhancements for 2013, stating affirmatively that the individual, firm, or corporation which is contracting with the Gwinnett County Board of Commissioners has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security] to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act, in accordance with the applicability provisions and deadlines established therein.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services or the performance of labor pursuant to this contract with the Gwinnett County Board of Commissioners, contractor will secure from such subcontractor(s) similar verification of compliance with the Illegal Immigration Reform and Enforcement Act on the Subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the Gwinnett County Board of Commissioners at the time the subcontractor(s) is retained to perform such service.

E-Verify * User Identification Number

Date Registered

Legal Company Name

Street Address

City/State/Zip Code

BY: _____
Authorized Officer or Agent
(Contractor Signature)

Date

Title of Authorized Officer or Agent of Contractor

Printed Name of Authorized Officer or Agent

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE

____ DAY OF _____, 20____

Notary Public

My Commission Expires: _____

* As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is "E-Verify" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

For Gwinnett County Use Only:

Document ID # _____

Issue Date: _____

Initials: _____

GWINNETT COUNTY MUNICIPALITIES

