



Solid Waste Facility License Application

Application packet for a new license, license renewals, change of authorization requests, or change in ownership for facilities that:

- Process non-putrescible (dry) waste
- Reload solid waste
- Compost or reload yard debris

Issued June 2016

Metro
600 NE Grand Ave.
Portland, OR 97232-2736
503-797-1835

Solid Waste Facility License Application



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600 NE Grand Ave.
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INSTRUCTIONS

1. Complete Parts 1 and 2 of application.
2. Verify information is accurate and application is complete.
3. Sign page 14 of application.
4. Include application fee payment
5. Submit application and payment to:
Metro
Solid Waste Compliance and Cleanup
600 NE Grand Avenue
Portland, OR 97232-2736
Tel: (503) 797-1835
Fax: (503) 813-7544
SWCC@oregonmetro.gov

Metro use only

DATE RECEIVED: FEB 28 '18 RCVD

DATE DEEMED COMPLETE BY METRO:

PART 1 – Standard License Application Information

1. Type of Application (please check one)	
<input type="checkbox"/>	New license
<input checked="" type="checkbox"/>	Renewal of an existing license
<input type="checkbox"/>	Change of authorization to an existing license (other than a renewal) Please describe the proposed change below in Section 3.
<input type="checkbox"/>	Transfer of ownership or control of an existing license

2. Type of facility (please check one)	
<input type="checkbox"/>	Non-putrescible (dry) waste material recovery facility
<input type="checkbox"/>	Source-separated food waste reload facility
<input checked="" type="checkbox"/>	Yard debris reload facility
<input type="checkbox"/>	Other solid waste reload facility
<input type="checkbox"/>	Yard debris composting facility

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3. If seeking a change of authorization to an existing license, please explain the proposed change below (attach additional pages if necessary). Complete all remaining sections of this form as they pertain to the request.

4. Applicant (Licensee)

Facility Name:	Best Buy In Town Inc.
Company Name:	Best Buy In Town Inc.
Street Address:	2200 NE Cornelius Pass Rd.
City/State/Zip:	Hillsboro Oregon 97124
Mailing Address:	4975 SW 65 Ave
City/State/Zip:	Portland Oregon 97221
Contact Person:	Tim Perri, or Joel Perri
Phone Number:	503.860.5150 503.679.5544
Fax Number:	NONE
E-mail Address:	(1st) timperri@gmail.com (2nd) joelperribbit@gmail.com

5. Applicant's Owner or Parent Company (provide information for all owners)

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Name:	Tim Perri + Joel Perri	
Mailing Address:	4975 SW 65 Ave	
City/State/Zip:	Portland Oregon 97221	
Phone Number:	503.860.5150 Tim	503.679.5514 Joel
Fax Number:	None	
E-mail Address:	timperri@gmail.com	joelperibbitt@gmail.com

6. Site Operator (if different from Applicant)	
Company Name:	Same
Contact Person:	Tim Perri, Joel Perri, Morris Shubin
Street Address:	Same
Mailing Address:	Same
City/State/Zip:	Same
Phone Number:	Same
Fax Number:	None
E-mail Address:	Same

7. Site Description			
Tax Lot(s):	Section:	Township:	Range:
see attach property tax statements			

8. Land Use		
Present Land Use Zone:	Industrial	
Is proposed use permitted outright?	<input checked="" type="checkbox"/> Yes If yes, attach a copy of the <i>Land Use Compatibility Statement</i> (see Attachment E).	<input type="checkbox"/> No
Is a conditional use permit necessary for the facility?	<input type="checkbox"/> Yes If yes, attach a copy of the <i>Conditional Use Permit</i>	<input checked="" type="checkbox"/> No
Are there any land use issues presently pending with the site?	<input type="checkbox"/> Yes If yes, please explain the land use issues below.	<input checked="" type="checkbox"/> No
Description of the pending land use issues identified above:	none	

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Are any permits required from the Oregon Department of Environmental Quality (DEQ)?	<input type="checkbox"/> Yes If yes, please list all DEQ permits below and attach copies with this application (see Attachment G).	<input checked="" type="checkbox"/> No
Listing of all required DEQ permits:	NONE	
Are any other local permits or building codes required?	<input checked="" type="checkbox"/> Yes <i>city of Hillsboro Business License.</i> If yes, please list all other required permits below and attach copies with this application (see Attachment H).	<input type="checkbox"/> No
Listing of other required permits:	none	

9. Land Owner		
Is the applicant the sole owner of the property on which the facility is located?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No If no, please complete this section with additional pages if necessary and attach a completed <i>Property Use Consent Form</i> (see Attachment F).
Property Owner:	Tim Perri	
Mailing Address:	4975 SW 65 Ave	
City/State/Zip:	Portland Or. 97221	
Phone Number:	503.860.5150	

10. Public/Commercial Operations		
Will the facility be open to the public (e.g., non-commercial self-haul customers)?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Will the facility be open to non-affiliated commercial solid waste collectors?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Will the facility accept waste from outside the boundary of Metro?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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11. Operating Hours and Traffic Volume			
	Public (non-commercial self-haul)	Commercial Affiliated	Commercial Non-Affiliated
Operating Hours	mon-Sat 7am - 6pm Sunday 9am - 3pm		
Estimated Vehicles Per Day	60 to 155 (average 110)	3-15 (average 7)	1-6 (average 3)

12. Inbound Waste/Feedstock by Generator <i>yard debris - green waste (2017)</i>			
Identify the expected annual tonnage amount of waste/feedstock that the facility will receive and recover from the following types of generators.			
Generator	Tons Received	Tons Recovered	Tons Residual
Agricultural: <i>2017 = 687 tons</i> → <i>We may increase 10% per year</i>		Same	NA
Commercial:			
Industrial: <i>2017 = 4398 tons</i> → <i>we estimate about the same or slight decrease</i>		Same	NA
Residential: <i>2017 = 8658 tons</i> → <i>may increase 5-10% per year</i>		Same	NA
TOTAL TONS: <i>13,743</i>	<i>13743</i>	<i>13743</i>	

13. Inbound Waste/Feedstock by Type					
Identify the types of waste/feedstock and annual tonnage amounts of each that the applicant expects to receive at the facility. Also, identify how the applicant will manage each waste stream, the expected tip fees that the applicant will be post at the facility, and estimate of typical length of time required to process each waste stream (attach additional pages if necessary).					
Waste/Feedstock Type	Accepted at Facility	Expected Annual Tonnage Amount	Type of Activity to be Performed on Waste	Expected Tip Fee (per Ton)	Estimate the maximum and typical lengths of time required to process each day's receipt of each waste/feedstock type
Source-Separated Wood: <i>2017 803 tons</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>800 ~ tons</i>	<i>(Screened) Reduced 1st Reload</i>	<i>\$30/ton</i>	<i>1-7 business days</i>

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Source-Separated Yard Debris: <i>2017 = 13,743 tons</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>13-15,000 tons</i>	<i>Reload (some screened or reduced)</i>	<i>\$9-14.00/yard</i>	<i>1-6 business days</i>
Source-Separated Residential Food Waste Mixed with Yard Debris:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Source-Separated Commercial and other Food Waste:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Inerts <i>2017 = 6,560 tons</i> (e.g., rock, fill, dirt, soil, concrete, etc.):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>6,500-7,500 tons</i>	<i>Reload (some screened)</i>	<i>\$25-45/yard</i>	<i>2-25 days (no odor) (inerts)</i>
Non-putrescible (dry) waste:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Source-Separated Recyclables:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Special Wastes (please specify):	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Petroleum Contaminated Soil:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Putrescible (wet) waste:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other Waste/Feedstocks (please specify):	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other Waste/Feedstocks (please specify):	<input type="checkbox"/> Yes <input type="checkbox"/> No				

14. Outbound Waste, Products, and By-Products

List the expected destination and amount of each type of outbound solid waste, products or by-products that the applicant expects to transport from the facility (attach additional pages if necessary).

Destination Site (Name and address)	Waste/Product/By-Product Type	Expected Annual Tonnage	Purpose of Delivery*
<i>Grimms Fuel 18850 SW Cople Rd Tualatin, OR 97062</i>	<i>Source Separated Yard debris</i>	<i>13,000 to 15,000</i>	<i>To be composted + purchased for mixing soils for sale!</i>

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~ Approximately - Hopefully

Beaver Bark	source seperated yard debris if available	approximately - hopefully ~ 1000 to 5000 (if available)	To be composted + purchased for resale
Trails End Recovery 2060 SE Airport Ln. Warrenton, OR	wood waste or yard debris	~ 1000 - 6000 (if available)	wood waste = hogged fuel market yard debris = compost for resale
S+H Recycling 1045 N 4th, Cornelius, OR	Source seperated Yard debris	~ 1000 - 8000 (if available)	To be composted & purchased for resale

*For example: disposal, recovery, land reclamation, beneficial use, etc

15. Subcontractors		
Provide the name, address and function of all subcontractors involved in the facility operations:		
NAME	ADDRESS	FUNCTION
(None at this time)		

PART 2 – Standard Attachments to License Application (License application continued)

- Metro requires the following attachments (Attachments A– I) for new applications in order for Metro to deem a license application complete. The applicant must clearly label each attachment.
- Application submittals such as facility design, building plans, site plans and specifications must be prepared, as appropriate, by persons licensed in engineering, architecture, landscape design, traffic engineering, air quality control, and design of structures.
- An applicant seeking to renew an existing license without substantive changes to the current authorization may defer to previously submitted documents if Metro has the most current version of all attachments (Attachments A- I) on file, unless otherwise directed by Metro staff. The date of the document on file with Metro is required for each deferred attachment. To confirm that Metro has current documentation on file, please contact Metro's Solid Waste Compliance & Cleanup Division at (503) 797-1835 or via email at SWCC@oregonmetro.gov.

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ATTACHMENT A: SITE PLAN

The applicant must submit a facility site plan that includes scaled maps and drawings showing the location of the facility at an appropriate scale, and no smaller than one inch equals 30 feet. Applicant must provide the following information on the site plan:

- (1) The location of the facility on a tax lot map. *Please see Aerial Photo Map with labels*
- (2) Boundaries of the facility and property including all tax lots. *See attached map and property tax statements*
- (3) All buildings on the property (existing and proposed) and other pertinent information with respect to the operation of the facility, to include:
 - a) scale and scale house location
 - b) fencing and gates
 - c) access roads
 - d) paved areas
 - e) vegetative buffer zones and berms
 - f) sorting line and other major materials recovery equipment
- (4) All exterior stockpile footprints, material types stored outside, and the maximum height of each exterior material stockpile.
- (5) Identify water sources for fire suppression.
- (6) Identify on-site traffic flow patterns.
- (7) Facility signage. Facility signs must:
 - a) display all of the information required by Metro
 - b) be posted at all public entrances to the facility; and
 - c) conform with local government signage regulations.
- (8) All receiving, processing, reload and storage areas, as applicable, for solid waste, source-separated recyclable materials, yard debris, recovered materials, product/by-products, waste residuals, exterior stockpiles, hazardous waste, and other materials.
- (9) Load checking areas (as applicable).
- (10) Storage areas for the temporary containment of prohibited waste that the facility inadvertently receives, while awaiting proper removal or disposal of the prohibited waste. The facility must cover and enclose the containment areas and construct them in a manner to prevent leaking and contamination.
- (11) The location of all commercial and residential structures within a one mile radius of the facility, identified on a map or aerial photograph.
- (12) The prevailing wind direction, by season, identified on a map or aerial photograph. (Compost facility only).

FACILITY RENEWAL APPLICANTS ONLY:

☐ By checking this box, I certify that to the best of my knowledge, the Site Plan on file with Metro dated *** is the most current and accurate version of this document.

** Please see the attached Site Plan - Aerial Photo with Labels*

ATTACHMENT B: FACILITY DESIGN PLAN

The applicant must submit a facility design plan that addresses the following:

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(1) All solid waste facility license applicants must submit a written description of the following:

- a) Facility overview.
- b) Facility design and technology.
- c) Buildings and major equipment (existing and proposed).
- d) Construction timeline (as applicable).
- e) Types of wastes to be processed.
- f) Residuals management.

(2) A compost facility must submit a written description of the following (in addition to the items listed above in subsection 1):

- a) Feedstock receiving procedures.
- b) Feedstock pretreatment and contaminant removal procedures and equipment (as applicable).
- c) Feedstock processing details and methods. Dewatering and liquids management (as applicable).
- d) Pathogen reduction / control procedures (as applicable).
- e) Monitoring, quality control and testing.

(3) Dust, odor, airborne debris and litter.

- a) Submit a proposed design or existing design plan that identifies the location of all areas for load checking, receiving/tipping, mixing, processing, reloading, and storage for all materials.
 - o **Compost facility only:** Also, provide locations for compost/curing piles/windrows, aeration systems including bio-filters or enclosed structures to prevent odors from being detected offsite.
- b) Describe control measures to prevent odors, fugitive dust, airborne debris and litter. Describe how the facility design will provide for shrouding and dust prevention for the receiving area, processing area, storage area, reload area, and all waste processing equipment and all conveyor transfer points where dust is generated.

(4) Fire prevention.

Submit proof of compliance with local and state fire codes.

(5) Adequate vehicle accommodation.

Provide documentation to demonstrate that the facility will provide adequate on-site areas at the facility's entrance, scales, loading and unloading points and exit points to allow safe queuing off the public roads and right-of-way given the number and types of vehicles expected to use the facility during peak times.

(6) Water contaminated by solid waste and solid waste leachate.

Submit a DEQ (or equivalent) approved plan with pollution control measures to protect surface and ground waters, including runoff collection and discharge and equipment cleaning and washdown water.

FACILITY RENEWAL APPLICANTS ONLY:

☒ By checking this box, I certify that to the best of my knowledge, the Facility Design Plan on file with Metro dated is the most current and accurate version of this document.

please see the attached Facility Design Plan - Aerial photo with labels

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ATTACHMENT C: OPERATING PLAN

The applicant must submit an operating plan for review and approval by Metro. This section lists the procedures that the applicant must include in the required facility operating plan. The applicant must submit a proposed facility operating plan with the completed license application subject to any additional elements as required in the license - if one is approved and issued. The operating plan must include, at a minimum a detailed description of:

- (1) Types of solid wastes the facility will accept.
- (2) How the facility will further recycling or material recovery processing within the Metro region (as applicable). The description should address each of the following:
 - a) How you will distinguish and manage loads of incoming source-separated recyclables from other materials.
 - b) The steps you will take to recover materials from solid waste. Include the material recovery methods and equipment to be used on site (e.g. sorting lines, hand picking, magnets, etc.).
 - c) How you will manage the materials and wastes and the type of equipment that you will use (from delivery to reload and transport to a processing or disposal facility).
 - d) The general markets for the material recovered at the facility.
 - e) The methods you will use for measuring and keeping records of materials received, recovered from processing, and solid waste disposed - consistent with Metro's reporting requirements.
- (3) Procedures for inspecting loads including:
 - a) Procedures for inspecting incoming loads for the presence of prohibited or unauthorized wastes.
 - b) A set of objective criteria for accepting and rejecting loads.
 - c) An asbestos testing protocol for all material that appears as if it may contain asbestos.
- (4) Procedures for processing and storage of loads including:
 - a) Processing of all authorized solid wastes.
 - b) Reloading and transfer of authorized solid wastes.
 - c) Managing stockpiles.
 - d) Storing authorized solid wastes
 - e) Minimizing storage times and avoiding delay in processing and managing of all authorized solid wastes and recovered materials.
- (5) Procedures for rejecting or managing prohibited wastes. The operating plan must describe procedures for rejecting, managing, reloading and transporting to an appropriate facility or disposal site any prohibited or unauthorized wastes discovered at the facility. The plan must include procedures for managing:
 - a) Hazardous wastes.
 - b) Other prohibited solid wastes (e.g., putrescible (wet) waste, special waste, asbestos).
 - c) Procedures and methods for notifying generators not to place hazardous wastes or other prohibited wastes in drop boxes or other collection containers destined for the facility.

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(6) Procedures for odor prevention. The operating plan must establish procedures for preventing all objectionable odors from being detected off the premises of the facility. The plan must include:

- a) A management plan that the facility will use to monitor and manage all objectionable odors of any derivation including malodorous loads delivered to the facility.
- b) Procedures for receiving and recording odor complaints, immediately investigating any odor complaints to determine the cause of odor emissions, and promptly remedying any odor problem at the facility.

(7) Procedures for emergencies. The operating plan must describe procedures that the facility will follow in case of fire or other emergency.

(8) Procedures for preventing and controlling nuisances, including noise, vectors, dust, litter, and odors. Include a description of how the facility will encourage delivery of waste in covered loads.

(9) Procedures for fire prevention, protection, and control measures used at the facility.

*** FACILITY RENEWAL APPLICANTS ONLY:**

☐ By checking this box, I certify that to the best of my knowledge, the Operating Plan on file with Metro dated _____ is the most current and accurate version of this document.

** Please See attached updated plan.*

ATTACHMENT D: INSURANCE

The applicant must submit proof of the following types of insurance, covering the applicant, its employees, and agents:

(1) The most recently approved ISO (Insurance Services Office) Commercial General Liability policy, or its equivalent, written on an occurrence basis. The policy must include coverage for bodily injury, property damage, personal injury, death, contractual liability, premises and products/completed operations. All insurance coverage must be a minimum of \$1,000,000 per occurrence and \$1,000,000 aggregate.

(2) Automobile bodily injury and property damage liability insurance must be a minimum of \$1,000,000 per occurrence and \$1,000,000 aggregate.

(3) The insurance must name Metro, its elected officials, departments, employees, and agents as ADDITIONAL INSURED on the Commercial General Liability and automobile insurance policies.

(4) Certification of Workers' Compensation insurance including employer's liability. If the applicant or licensee has no employees and will perform the work without the assistance of others, you may attach a certificate to that effect in lieu of the certificate showing current Workers' Compensation.

FACILITY RENEWAL APPLICANTS ONLY:

☒ By checking this box, I certify that to the best of my knowledge, the Insurance on file with Metro dated *** _____ is the most current and accurate version of this document.

** See attached copy*

ATTACHMENT E: LAND USE COMPATIBILITY STATEMENT (LUCS)

The applicant must submit the following information:

A copy of a completed Metro LUCS or DEQ LUCS. The Metro LUCS is available at www.oregonmetro.gov/solidwasteforms.

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FACILITY RENEWAL APPLICANTS ONLY:

☐ By checking this box, I certify that to the best of my knowledge, the LUCS on file with Metro dated * is the most current and accurate version of this document.

* Please see attached LUCS

ATTACHMENT F: PROPERTY USE CONSENT FORM

The applicant must submit the following information:

If required in Part 1, section 9, of this application. The Property Use Consent Form is available at www.oregonmetro.gov/solidwasteforms.

FACILITY RENEWAL APPLICANTS ONLY:

☒ By checking this box, I certify that to the best of my knowledge, the Property Use Consent Form on file with Metro dated * is the most current and accurate version of this document.

Please see attached.

ATTACHMENT G: DEQ PERMIT APPLICATIONS AND INFORMATION

The applicant must submit the following information:

A copy of all applications for necessary DEQ permits and any other information required by or submitted to DEQ, including closure plans, financial assurance for the costs of closure of the facility, and conditional use permit or land use compatibility statement, if applicable.

FACILITY RENEWAL APPLICANTS ONLY:

☒ By checking this box, I certify that to the best of my knowledge, the DEQ permit or applications on file with Metro dated * is the most current and accurate version of this document.

* Please see attached DEQ letter

ATTACHMENT H: OTHER REQUIRED PERMITS

The applicant must submit the following information:

A copy of any required permit, license or franchise that a governing body or agency (whether federal, state, county, city or other) has granted or issued to the applicant (not including materials required by Attachment G). If the governing body or agency has not yet issued the required permit, license or franchise, the applicant must provide a copy of the application it submitted. Metro may also request copies of correspondence pertaining to any required permit, license or franchise.

FACILITY RENEWAL APPLICANTS ONLY:

☒ By checking this box, I certify that to the best of my knowledge, all other required permits on file with Metro dated * are the most current and accurate version of these documents. * please see attached.

ATTACHMENT I: CLOSURE PLAN AND FINANCIAL ASSURANCE

The applicant must submit the following information:

- (1) If DEQ requires a closure plan and financial assurance, the applicant must include copies of these documents with the application per Attachment G.
- (2) If DEQ does **not** require a closure plan for the facility, attach a closure document describing closure protocol and associated costs. Closure means those activities associated with restoring the site to its condition before the applicant engaged in the licensable activity. Closure may include, but is not limited to, removal of all on-site solid waste stockpiles

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accumulated after Metro issued a Metro Solid Waste Facility License. The closure plan is the written protocol that specifies the activities required to properly close the facility and cease further solid waste activities.

- (3) If DEQ does **not** require any financial assurance for the costs of closure of the facility, applicant must attach proof of financial assurance for the costs of closure of the facility. Cost of closure means the costs associated with restoring the site to its condition before the applicant engaged in the licensable activity.

These costs may include but are not limited to:

- a) The cost to load and transport accumulated solid waste stockpiles to an authorized disposal site or recycling facility;
- b) The cost to "tip" the waste at an authorized landfill or recycling facility; and
- c) Other related costs such as site grading or additional disposal costs associated with restoring the site.

Examples of acceptable forms of financial assurance include, but are not limited to, the following: surety bond, irrevocable letter of credit, closure insurance, escrow account.

If the DEQ does not issue a permit or require financial assurance, then Metro may waive the requirement for financial assurance if the applicant demonstrates that the cost to implement the closure plan will be less than \$10,000.

FACILITY RENEWAL APPLICANTS ONLY:

☒ By checking this box, I certify that to the best of my knowledge, the closure plan on file with Metro dated * is the most current and accurate version of this document.

** Please see attached plan - same as previous / always.*

PUBLIC NOTICE AND CONFIDENTIAL INFORMATION

This application and all of the supporting documentation that the applicant provides is subject to Metro's public notice procedures. Metro will notify and provide the public with an opportunity to review and comment on the proposed application. The public notice may include, but is not limited to, posting the complete application on Metro's website.

The applicant may identify as confidential any reports, books, records, maps, plans, income tax returns, financial statements, contracts and other similar written materials of the applicant that are directly related to the proposed application and that are submitted to or reviewed by Metro. The applicant must prominently mark any information that it claims confidential with the mark "CONFIDENTIAL" before submitting the information to Metro. Subject to the limitations and requirements of ORS Chapter 192 (public records law) and other applicable laws, Metro will treat as confidential any information so marked and will make a good faith effort to not disclose that information unless Metro's refusal to disclose the information would be contrary to applicable Oregon law.

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Within five days of Metro's receipt of a request for disclosure of information identified by the applicant (or licensee) as confidential, Metro will provide the applicant (or licensee) written notice of the request. The applicant (or licensee) will have three days within which time to respond in writing to the request before Metro determines, at its sole discretion, whether to disclose any requested information. The applicant (or licensee) must pay any costs incurred by Metro as a result of Metro's efforts to remove or redact any confidential information from documents that Metro produces in response to a public records request. These conditions do not limit the use of any information submitted to or reviewed by Metro for regulatory purposes or in any enforcement proceeding. In addition, Metro may share any confidential information with representatives of other governmental agencies provided that, consistent with Oregon law, those representatives agree to continue to treat the information as confidential and make good faith efforts to not disclose the information.

APPLICANT CERTIFICATION

An authorized agent of the applicant must sign this application. Metro will not accept an application without a signature.

I certify that the information contained in this application is true and correct to the best of my knowledge. I agree to notify Metro within 10 days of any change in the information submitted as a part of this application.

SIGNATURE OF AUTHORIZED AGENT Tim Perri

TITLE President

PRINT NAME Tim Perri

DATE 2-23-18 PHONE 503-860-5150

EMAIL timperri@gmail.com

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MAIL THIS APPLICATION TO:

Metro

Regional Environmental Management

600 N.E. Grand avenue

Portland, OR 97232-2736

LICENSE APPLICATION FORM

YARD DEBRIS RELOAD FACILITY

Note: This form is only for yard debris reload facilities. This form can be used for Composting or other processing operations. A separate form for processing facilities is Available from Metro.

Date of Application: 2-23-2018 updated....(please note that I combined and updated the old license info from the License 12-29-97 and 5-15-14 that Hila sent me with the most current information.)

PART 1

1. NAME OF FACILITY: Best Buy In Town Inc.

Facility Address: 2200 NE Cornelius Pass rd. Hillsboro OR, 97124

2. PROSPECTIVE LICENSEE

Public Agency: Private:

Name of Licensee: Best Buy In Town Inc.

Mailing Address: 4975 SW 65 Portland OR 97221

Phone Number: TimPerri 503-860-5150, Home 503-244-1705 JoelPerri 503-679-5514
Office 645-6665

3. OWNER(S) OF PROPERTY

Name: Timothy and Anne Perri

Mailing Address: 4975 SW 65 AVE Portland OR 97221

Phone Number: 503-860-5150 503-679-5514

4. SUBCONTRACTOR(S)

Name, address and function of any prospective licensee's facility operation subcontractors:

N/A

5. SITE LEGAL DESCRIPTION

(Include tax lot(s) descriptions, Section, Township and Range):

IN226DC- 600 AND IN 226DC-00700- COMBINED (with
attached property tax statements-property I.D.)

SECTION TOWNSHIP RANGE

6. ZONING

Present Land Use Zone: Industrial

Restrictions: N/A

7. Is a conditional use permit necessary for the facility?

YES NO X

If required, has the permit been obtained?

YES NO

8. PUBLIC HEARING(S)

Date(s) and nature of Public Hearing(s) held or to be held, if any:

N/A

9. PERMITS ISSUED OR APPLIED FOR

List name and number of all permits (i.e., DEQ Solid Waste Disposal Permit, Conditional Use Permit, National Pollution Discharge Elimination System Permit, Etc.), plus name, Address, and contact person at the agency responsible for issuing the permit(s).

Permit(s) Applied for: N/A

Permit(s) Received:

10. ESTIMATED QUANTITY OF YARD DEBRIS TO BE ACCEPTED

Annually: 50-70,000 cubic yards Daily: (varies 150- 400 cubic yds

Annually: 13000-15000 tons (optional) Daily: N/A tons (optional)

11. PUBLIC/COMMERCIAL OPERATIONS

Will the facility be open to the public? Yes X No

Will the facility be open to commercial solid
Waste collectors? Yes ☒ No ☐

12. OPERATING HOURS AND TRAFFIC VOLUME

<u>OPERATING HOURS</u>	<u>PUBLIC</u>	<u>COMMERCIAL</u>
<u>Hours Per Day- March 15th- Dec 1st, Mon-Sat</u>	<u>7:00-6pm</u>	<u>7:00-6pm</u>
<u>Sun</u>	<u>9:00am-3:00pm</u>	
<u>Days Per Week- (Dec - March 14th closed sunday's)</u>	<u>6-7</u>	<u>6-7</u>
<u>Estimated Vehicles Per Day- 60 to 155</u>	<u>Combined</u>	

13. Does the owner/operator of this facility own, operate, maintain, have a proprietary
Interest in, or is the owner financially associated with or subcontracting the operation
Of the facility to any individual, partnership or corporation involved in the business of
Collecting residential, commercial, industrial or demolition refuse within the boundary
of Metro?

Yes ☐ No ☒

14. Will the facility be open to solid waste collection companies who collect outside the
Boundary of Metro?

Yes ☒ No ☐

15. Yard debris delivered to this facility is reloaded for transport to the following facility or
Facilities:

Grimms, Tualatin, Washington County
Beaver Bark, Scappoose, Columbia County
Trails End Recovery, 2060 SE Airport In. Warrenton, Or.
S&H Recycling, 1045 N 4th, Cornelius, Or.

PART 2

GENERAL FACILITY DESIGN PLAN

1. Describe any barriers that the facility has (or will have) to prevent unauthorized entry and

Dumping (fencing, gates, locks) Please see the attached aerial photo with labels.

Best Buy Delivery Trucks or Loaders are parked across the entrances
After business hours to prevent unauthorized entry and dumping.

2. Are there all weather access roads to the site?

Yes X No

3. Does (or will) the facility have scales?

Yes X No

4. Does the facility have signs (at entrance, directing traffic flow, public information)?

Yes X No

Please describe the location(s) and type of sign(s):

The signs at the entrances to our business
and lot direct customers to our office
"Stop at office first"

5. What is the estimated capacity (cubic yards) of the facility storage area(s) for incoming
Yard debris waiting to be reloaded and transported off site?

1700 yds maximum

6. Please describe how you handle, store and remove hazardous or other non-permitted or
Non-compostable wastes delivered to the facility.

We oversee the unloading of the vehicles each load is pushed up or loaded out by our lot
attendant. Prior to being pushed up the garbage plastic, metal etc. is removed and thrown
into our trash dumpster.

PART 3

GENERAL OPERATION PLAN

1. Describe your methods of measuring and keeping records of incoming yard debris.

We calculate the cubic feet of the vehicle and convert it to cubic yards i.e. - 27 cubic ft = 1cu. yd. A standard size 8' long pickup box bed, water level full is charged at 2.5 yds of yard debris.

2. How often are the facility grounds cleaned of litter?

Several times per day all day.

3. Describe how you encourage delivery of yard debris in covered loads.

We ask our customers to bring us covered loads. We also encourage it with signs.

4. Describe how you control the types of materials you receive, and methods for removing, recovering and disposing of non-compostables.

- a) We only accept yard debris (green waste and christmas trees) or wood waste separate from the green waste held in the wood waste bin....We view the incoming loads in order to accurately scale the loads.
- b) As the debris is unloaded or dumped we push it up into a pile, any visible garbage is removed by hand and thrown in our garbage dumpster prior to the reloading process.

5. Where do you dispose of non-compostable wastes?

In our garbage dumpster

6. What is the maximum length of time required to reload (for off-site transport) each day's Receipt of:

- a) Yard debris ? 1-7 business days
- b) Grass clippings? 1-3 business days- (priority is given to grass)

7. Describe how you control the following:

a) Noise (from machinery and equipment):

All equipment is muffled. The area is bermed on south and west sides with a 10'-12' tall concrete wall with a bark dust pile 10'-25' in front of it on the (east side) all side are obscured and the front is obscured by the warehouse building and concrete wall and bins. The West Berm is planted with 15-25' evergreen photinia and bamboo hedges.

b) Vectors (insects, birds, rodents):

The regular and constant pushing and reloading minimize any vector concern, with frequent rotation of the material and the regular emptying of the yard debris drop off area as it is cleared and hauled away.

c) Dust:

Dust is controlled with sprinklers as needed during the dry season and sweeping as needed during precipitation. We enforce a "No Dust" Speed Limit - "walking speed only". If we were to receive a dust complaint: A) We record the date, time, wind direction, name, phone number of the complainer promptly. Tim or Joel Perri will call them right away.

d) Litter:

Litter is regularly, constantly picked up and removed throughout each and every day. Clean litter free compost is our goal.

8. Describe the fire prevention, protection and control measures used at the facility.

A water outlet for hose hook up is within 70ft of the yard debris drop off area and another outlet is within 150 ft (IRR) sprinkler can reach the area also.

9. Does (or will the facility have legible sign(s) at public entrances including:

Name of facility? Yes ☒ No ☐

Name of the operator? Yes ☒ No ☐

Hours of operation? Yes ☒ No ☐

List of materials that will and will not be accepted? Yes ☒ No ☐

Schedule of charges? Yes ☒ No ☐

Phone number in case of emergency? Yes ☒ No ☐

PART 4

ODOR MINIMIZATION PLAN

1. Generally describe how you handle loads of bad smelling yard debris and grass clippings?

When a load of bad smelling yard or grass is brought in. We reload it immediately if we are reloading semi-trucks at that time or if not, then we cover the stinky load with fresh yard debris quickly, temporarily until the next semi-truck arrives for reloading at which time the bad smelling material is quickly reloaded and hauled away. Example: About 9 months ago

We refused to accept golf course grass from Garbarino drop boxes because of the offensive odor of anaerobic grass and because garbarino could not guaranteed us fresh grass only.

2. Describe your procedures for receiving, recording and remedying odor complaints or odor Problems at the facility.

We attempt to listen and record the complaint with name, phone #, address, description of concerns, wind direction, time, date. We try to direct any concerns 1st to Tim Perri president 503 860-5150 if not immediately available then to Morris Shubin, manager 503 884-2935 or Joel Perri, manager 503 679-5514. We take appropriate action as soon as we are aware of a concern.

3. Describe your methods for minimizing and controlling odor at the facility.

Our best efforts are expended towards reloading yard waste out going from our facility as rapidly as possible which is key to avoiding all nuisance concerns, i.e. anaerobic, decomposition odors and vectors.

4. Describe your procedures for avoiding delay in reload and off-site transport of yard debris During all weather conditions.

We have our own fleet of semi-trucks to haul off yard debris, etc. and if our fleet is not available then: our contractor who hauls off our yard debris has a fleet of conveyor, "live floor" chip trucks and trailers that we can employ.

LICENSE APPLICANT

I hereby certify that the information contained in this application is true and correct to the best of my knowledge. I agree to notify Metro within 10 days of any change in the information Submitted as a part of this application.

Signature and title of person completing this application:

SIGNATURE: Timothy Perri  TITLE: President

UPDATED: 2-23-2018 PHONE: 503-860-5150

Also Email to Hila - 2-24-18

Original with City of Hillsboro signature

Land Use Compatibility Statement (LUCS)

Solid waste application supplemental form



Metro

600 NE Grand Ave.
Portland, OR 97232
503-797-1835

SUBMIT THIS FORM TO:

Metro
Solid Waste Compliance and Cleanup
600 NE Grand Avenue
Portland, OR 97232-2736
Tel: (503) 797-1835
Fax: (503) 813-7544
SWCC@oregonmetro.gov

Metro use only

FEB 23 10 RCVD

DATE RECEIVED:

DATE DEEMED COMPLETE BY METRO:

METRO Land Use Compatibility Statement (LUCS)

WHAT IS A LUCS? A Land Use Compatibility Statement is the document that Metro relies on to determine that an application to Metro for a solid waste facility license or franchise is compatible with the applicant's local land use approval.

WHEN IS A LUCS REQUIRED? A completed LUCS should accompany each application for a new Metro solid waste facility license, or franchise and any application for a change of authorization to add new activities to an existing license or franchise.

HOW TO COMPLETE A LUCS: The applicant must fill out Section 1 of the form and then submit the form to the local city or county planning office where Section 2 is completed. The local planning office will determine if the facility meets local land use requirements concerning planning and zoning. The applicant then submits the LUCS to Metro as part of its license or franchise application.

WHERE TO GET HELP: Questions on the Metro LUCS can be directed to Metro Solid Waste Compliance and Cleanup Division staff responsible for processing the Metro license or franchise application at (503) 797-1835.

SECTION 1: To be completed by the applicant:

1. Applicant Information		
Facility Name:	Best Buy In Town	
Company Name:	Best Buy In Town (Landscape Supply)	
Location Address:	Mailing Address:	
2200 NE Cornelius Pass rd. Hillsboro, Oregon 97124	4975 SW 65 AVE Portland OR 97221	
Contact Person:	Tim Perri 503 860 5150 or Joel Perri 503-679 5514	
Phone Number: Tim 503-860-5150 Joel 503-679 5514	Fax Number:	E-mail: timperri@gmail.com Joelperribbitt@gmail.com
2. Site Description		

Land Use Compatibility Statement (LUCS)

Solid waste application supplemental form



Metro

600 NE Grand Ave.
Portland, OR 97232
503-797-1835

Tax Lot(s): Please see attached Washington County Property tax statements & aerial photo	Section:	Township:	Range:
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3. Description of the type of facility, the solid wastes to be accepted and the activities to be undertaken

A. Check all the proposed solid wastes to be accepted in the left column "Proposed waste streams". In the "Activity code" column to the right, insert the letter(s) of all the proposed activities from the list of codes (a-g) corresponding to each waste stream:

Proposed waste streams	Activity code(s)	Proposed activities and codes:
<input type="checkbox"/> Putrescible mixed solid waste (i.e. residential garbage)	<input type="checkbox"/>	a) Material recovery (source separated)
<input type="checkbox"/> Food waste (source separated vegetative or non-vegetative)	<input type="checkbox"/>	b) Material recovery (mixed dry waste)
<input checked="" type="checkbox"/> Yard debris	<input checked="" type="checkbox"/>	c) Composting
<input checked="" type="checkbox"/> Wood waste (clean wood waste)	<input checked="" type="checkbox"/>	d) Reload / transfer
<input checked="" type="checkbox"/> Wood waste (painted or treated)	<input type="checkbox"/>	e) Chipping & grinding
<input type="checkbox"/> Non-putrescible mixed solid waste (dry mixed waste)	<input type="checkbox"/>	f) Other (explain in detail)
<input checked="" type="checkbox"/> Other (explain in detail)	<input type="checkbox"/>	g) NA (not applicable)

B. Description of proposed solid wastes to be accepted and proposed waste-related activities. Please describe in detail the activity you plan to perform on each waste you accept. Add additional pages if necessary. (Since 1989) We accept all materials listed above for recycling. We Reload & haul off all materials to the proper Recycler, such as Grimm's for yard debris and West Side Rock Quarry for "other" Rock, concrete, fill dirt, etc.

4. This land use approval is being sought in conjunction with application to Metro for (check all that apply)

New <input type="checkbox"/>	Amended <input type="checkbox"/>	License <input checked="" type="checkbox"/> ^{Renewal}	Franchise <input type="checkbox"/>
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SECTION 2: To be completed by a city or county planning official:

1. Name of city or county that has land use jurisdiction
City of Hillsboro

2. The proposed facility is located (check all that apply)			
<input checked="" type="checkbox"/>	Inside city limits	<input type="checkbox"/>	Inside UGB
<input type="checkbox"/>	Outside city limits	<input type="checkbox"/>	Outside UGB

Land Use Compatibility Statement (LUCS)

Solid waste application supplemental form



Metro

600 NE Grand Ave.
Portland, OR 97232
503-797-1835

3. Consistency with local comprehensive plan and zoning ordinance

- ☐ This facility is not regulated by the local comprehensive plan and zoning ordinance.
- ☒ This facility has been reviewed and is consistent with the local comprehensive plan and zoning ordinance.
- ☐ This facility has been reviewed and is not consistent with the local comprehensive plan and zoning ordinance.
- ☐ Consistency of this facility with the local comprehensive plan and zoning ordinance cannot be determined until the following local approval(s) are obtained:
- | | |
|---|---|
| <input type="checkbox"/> Conditional Use Approval | <input type="checkbox"/> Development Permit |
| <input type="checkbox"/> Plan Amendment | <input type="checkbox"/> Zone Change |
| <input type="checkbox"/> Other | |

An application has been made for the local approvals checked above:

Yes

☐

No

☐

Local Government Planning Official - Reviewer Information:

Signature:

Melinda Sue Gross

Print Name:

Melinda Sue Gross

Title:

Planning Technician

Date:

2/13/2018

Telephone Number:

503 681-6241

E-Mail:

melinda.gross@hillsboro-oregon.gov



Oregon

Theodore Kulongoski, Governor

Department of Environmental Quality
Northwest Region Portland Office
2020 SW 4th Avenue, Suite 400
Portland, OR 97201-4987
(503) 229-5263
FAX (503) 229-6945
TTY (503) 229-5471

September 9, 2008

Tim Perri
Best Buy in Town
2200 NW Cornelius Pass Rd
Hillsboro, OR 97124

Re: Best Buy in Town
Washington County
Permit Determination and Operating Guidelines

Dear Tim Perri:

In the spring of 2008, Oregon Department of Environmental Quality (DEQ) inspectors visited your yard debris reloading operation and others in the Northwest Region of the state. The purpose of the visits was to identify potential environmental risks of these operations and to determine whether a DEQ solid waste permit is required for facilities accepting yard debris for transfer to a permitted composting facility or other permitted disposal facility.

At this time, DEQ has determined that a permit is not required for your yard debris reloading facility provided that you meet the following conditions:

- Remove yard debris from the site within one week after acceptance. DEQ recommends daily or near daily removal of yard debris in order to prevent breakdown of the materials which causes odor, water quality impacts and could provide sustenance for vectors such as rodents and flies.
- Control storm water on site so that it does not create adverse environmental impacts. If you are not currently operating under a storm water permit and storm water discharges from your site into a creek, ditch, river, or other surface or ground water body, please contact our Storm Water Engineer, Dennis Jurries at 503-229-5937 to determine whether you need a storm water permit.
- Store and handle yard debris to prevent contamination of finished compost products for sale on site. Yard debris can contain pathogens such as e-coli that can impact the health of the compost you are selling to your customers. DEQ recommends that your yard debris collection area not be directly adjacent to your finished compost storage so that storm water cannot flow off of the yard debris pile and into the compost. Additionally care should be taken to wash shared equipment such as loaders.

DEQ plans to inspect yard debris reloading facilities periodically to determine whether these conditions are achieved. Sites where DEQ has determined that a permit is not necessary are still required by OAR 340 Division 93 to comply with all other provisions of OAR Chapter 340 Division 93-97 and other applicable regulations pertaining to solid waste management. The rules are available online at <http://www.deq.state.or.us/regulations/rulesandlaws.htm>. Inspections will be unannounced and may result



in violations and enforcement actions. DEQ will visit facilities for which we have documented complaints from the public more frequently. Yard debris reloading operations which are collocated or operated in conjunction with a permitted solid waste facility such as a transfer station, material recovery facility or permitted compost operation will be covered under that facility's permit and operations plan.

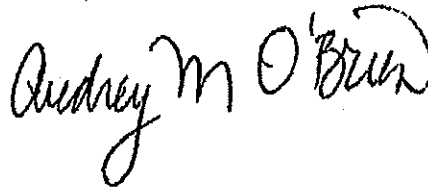
You may be aware that DEQ is revising rules for compost facilities. The final rules may contain new or different requirements for yard debris reloading facilities. If you are interested in following DEQ's progress or participating in the public process regarding the rule changes, you can visit our web site at the following link: <http://www.deq.state.or.us/lq/sw/compost/rulemaking.htm> and sign up to receive email updates on DEQ's compost rule-making effort.

Additionally, DEQ may reassess the decision not to permit yard debris reloading facilities at any time in the future. According to OAR 340-093-0050(3)(f) and ORS 459.215 DEQ can require that facilities with potential adverse environmental impacts obtain a permit.

If you have any questions please call Amanda Romero at our Northwest Region office (503) 229-5478, or you may e-mail her at romero.amanda@deq.state.or.us. You may also call me at (503) 229-5072 or email me at obrien.audrey@deq.state.or.us.

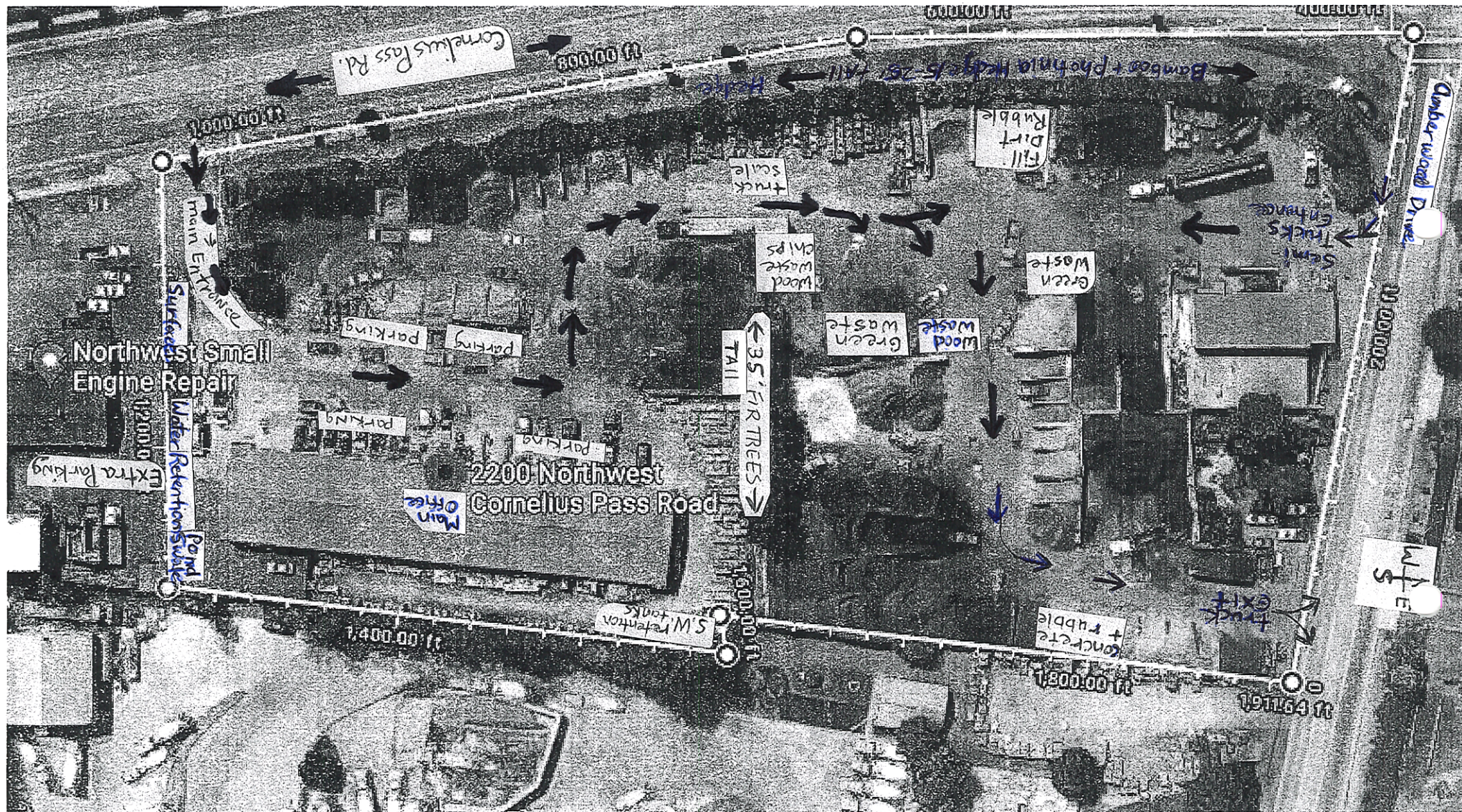
Thank you for your continued efforts to protect Oregon's air, water and land for future generations.

Sincerely,



Audrey O'Brien
Manager, NWR Environmental Partnerships

cc: Stephanie Rawson, DEQ NWR Solid Waste (e-mail)
Dennis Jurries, DEQ NWR Storm Water (e-mail)
Lissa Druback, DEQ ER Solid Waste Manager (e-mail)
Brian Fuller, DEQ WR Solid Waste Manager (e-mail)
Roy Brower, Metro (e-mail)
Loretta Pickerell, DEQ HQ Solid Waste Manager (e-mail)





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/15/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER
Brown & Brown Northwest
2701 NW Vaughn St., Suite 340

Portland OR 97210

INSURED
Best Buy In Town, Inc.
4975 SW 65th Avenue

Portland OR 97221

CONTACT NAME: Gary Haggerty

PHONE (A/C No. Ext): (503) 274-6511

FAX (A/C No.): (503) 274-6524

E-MAIL: ghaggerty@bbnw.com

ADDRESS:

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Employers Mutual Casualty Company

21415

INSURER B: EMCASCO Insurance Company

21407

INSURER C:

INSURER D:

INSURER E:

INSURER F:

COVERAGES

CERTIFICATE NUMBER: CL1791552387

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X	5D3658918	9/23/2017	9/23/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Premises/Operations \$ 1,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		5E3658918	9/23/2017	9/23/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist combined \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		5J3658918	9/23/2017	9/23/2018	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is included as additional insured as respects general liability on a primary & noncontributory basis where required by written contract.

CERTIFICATE HOLDER

(503) 813-7544

barb.leslie@oregonmetro.go

Oregon Metro
600 NE Grand Ave
Portland, OR 97232-2736

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Gary Haggerty/GARYHA

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ACORD 25 (2014/01)
INS025 (201401)

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HILLSBORO FIRE DEPARTMENT

FIRE PREVENTION DIVISION

4455 NE CENTURY BLVD
HILLSBORO, OR 97124
(503)615-6746 FAX (503)615-6745



DATE: 1/3/2018

FIRE INSPECTION NOTICE

FIRST INSPECTION: 1/3/2018

LAST INSPECTION: 12/5/2017

ADDRESS: 2200 NW CORNELIUS PASS RD

DESCRIPTION: SHELL

CITY: HILLSBORO

STATE: OR ZIP CODE: 97124

OCCUPANCY: M

☐ MIXED

Business Name(s)

Phone

Fax

BEST BUY IN TOWN LANDSCAPE

NOTICE: 18-96836-1

ACTIVITY DESCRIPTION: MAINTENANCE INSPECTION

INSPECTION TYPE: MERCANTILE(M) - MAINTENANCE INSPECTIONS

TIME 1.3

COMMENTS: Did a walk through inspection with Morris and found the following issue:

Presently there is flammable product such as aerosol cans being stored in a regular storage cabinet. Flammables shall be in a cabinet with a self closing and self latching door.

Summary of Fire and Life Safety Deficiencies Entered or Corrected on Notice Record Date:

#	DATE ENTRY	VIOLATION DESCRIPTION	DATE CORRECTED
1	01/03/18	PROVIDE A FLAMMABLE STORAGE CABINET FOR THE STORAGE OF FLAMMABLES SUCH AS THINNERS, AND SPRAY PAINTS. ENSURE THAT THE DOORS ARE SELF CLOSING AND SELF LATCHING.	

YOUR ATTENTION IS CALLED TO THE FOLLOWING UNCORRECTED ITEM(S) AND/OR FIRE AND LIFE SAFETY DEFICIENCIES(S):

DATE CORRECTION REQUIRED / Referenced Code Section and Description

- | | | |
|---|----------------------|---|
| 1 | 01/03/18 | PROVIDE A FLAMMABLE STORAGE CABINET FOR THE STORAGE OF FLAMMABLES SUCH AS THINNERS, AND SPRAY PAINTS. ENSURE THAT THE DOORS ARE SELF CLOSING AND SELF LATCHING. |
| | 5704.3.2, 1.3-OFC-14 | Doors. Doors shall be well fitted, self closing and equipped with a three point latch. |

Failure to correct the above conditions will make you liable to prosecution. Should fire result from such conditions you may be liable for damages to persons or property under provisions of ORS 479.190 and the Oregon Fire Code as adopted.

☒ RE-INSPECTION WILL OCCUR IN 30 DAYS.

INSPECTED BY: LISA HUMPHREYS
Deputy Fire Marshal

PRESENTED TO: TIM PERRIN

timperrin@gmail.com



Tim Perri <timperri@gmail.com>

RE: Fire Inspection/Report (MAINTENANCE INSPECTION) - 2200 NW CORNELIUS PASS RD - BEST BUY IN TOWN LANDSCAPE - Dated 1/24/2018

2 messages

Morris S <morris@bestbuyintown.biz>

Wed, Jan 24, 2018 at 1:27 PM

To: Lisa Humphreys <Lisa.Humphreys@hillsboro-oregon.gov>

Cc: Tim Perri <timperri@gmail.com>, Joel Perri <joelperribbit@gmail.com>, mikewbbitt@gmail.com

Thank You, Lisa
Morris

-----Original Message-----

From: Lisa Humphreys [mailto:Lisa.Humphreys@hillsboro-oregon.gov]

Sent: Wednesday, January 24, 2018 1:18 PM

To: timperin@gmail.com; Morris@bestbuyintown.biz

Subject: Fire Inspection/Report (MAINTENANCE INSPECTION) - 2200 NW CORNELIUS PASS RD - BEST BUY IN TOWN LANDSCAPE - Dated 1/24/2018

Thank you for taking care of this deficiency so quickly.

Lisa

Joel Perri <joelperribbit@gmail.com>

Fri, Feb 23, 2018 at 3:53 PM

To: Tim Perri <timperri@gmail.com>

[Quoted text hidden]