



Orange County Government

Orange County
Administration Center
201 S Rosalind Ave.
Orlando, FL 32802-1393

Legislation Text

File #: 25-674, **Version:** 1

Interoffice Memorandum

DATE: April 16, 2025

TO: Mayor Jerry L. Demings and County Commissioners

THROUGH: N/A

FROM: Ed Torres, M.S., P.E., LEED AP, Director, Utilities

CONTACT: David Gregory, Manager, Solid Waste Division

PHONE: 407-254-9622

DIVISION: Solid Waste Division

ACTION REQUESTED:

Approval of commercial refuse license for SJP Enterprises, LLC dba Prince Containers to provide solid waste hauling services to commercial generators in Orange County for a five-year term. All Districts. (Solid Waste Division)

PROJECT: N/A

PURPOSE: The Solid Waste Division has received a commercial refuse license application from SJP Enterprises, LLC dba Prince Containers, to provide solid waste hauling services to multi-family, construction and demolition, and other commercial generators in Orange County.

Section 32-178 of the Orange County Code requires that the applicant

- Provide ownership information and corporate fictitious name
- Purchase and maintain required insurance
- Demonstrate the service capability of vehicles and equipment

Staff has reviewed the application and supporting documentation and determined that SJP Enterprises, LLC dba Prince Containers meets the criteria stipulated in Section 32-178 of the Orange County Code. Staff recommends approval of the application and award of a license to provide commercial solid waste collection and transport service in unincorporated Orange County for a period of five years.

BUDGET: N/A

SJP Enterprises, LLC dba Prince Containers
(NAME OF COMPANY)

CHECKLIST FOR A COMMERCIAL REFUSE LICENSE

The following is a list of documentation included in this package:

- ☒ Application for commercial hauler license

Service information to include the following data:

- ☒ Area(s) of Orange County to be serviced
- ☒ Number of employees
- ☒ Number of commercial vehicles to be used in the business
- ☒ Truck numbers and tare weights of each vehicle
- ☒ Vehicle registration(s)

Certificate of Insurance issued to Orange County showing:

- ☒ Orange County shall be named as an additional insured & certificate holder on all liability policies.
- ☒ General Liability – in an amount not less than \$1,000,000 per occurrence
- ☒ Workers' Compensation as required by Florida Statue Chapter 440.
- ☒ Pollution Legal Liability including coverage for bodily injury and property damage as well as cleanup and defense costs with limits of not less than \$1,000,000 per loss.
- ☒ Vehicle Insurance – in an amount not less than \$1,000,000 per accident.

Orange County Local Business Tax Receipt

- ☒ (formerly called Occupational License)

License Fee:

- ☐ \$ 25.00 3 or less employees
- ☐ \$200.00 4 to 10 employees
- ☒ \$350.00 11 or more employees

APPLICATION FOR COMMERCIAL REFUSE LICENSE COUNTY OF ORANGE, FLORIDA

Please Check the Services Your Company Provides:

- ☒ Multifamily - Collection of solid waste from residential dwellings and mobile home parks not under the franchise system.
- ☒ Construction & Demolition - Collection of Construction and Demolition debris only.
- ☒ Other Commercial - Collection and/or processing of solid waste from commercial generators not covered under (1) or (2) above.

UNDER THE PROVISIONS of Orange County's Code of Ordinances, Chapter 32 Solid Waste, Article IV Collection and Disposal and all regulations related thereto, the following information is required.

COMPANY NAME: SJP Enterprises, LLC/DBA Prince Containers
(Please Include FULL legal name, including LLC, Inc etc)

TRADE / D.B.A. NAME: Prince Containers

MAILING ADDRESS: 200 South F. Street - Haines City, FL 33844

OFFICE PHONE NUMBER: 863-422-5207 Fax Number:

COMPANY WEBSITE:

CONTACT NAME(S): Chad Roy

CONTACT PHONE: 321-299-4083

E-MAIL ADDRESS: Chadroy@princecontainers.com

(Additional Commercial Hauler License Contacts / Email Addresses listed here or on a separate sheet)

EMERGENCY NUMBER: 321-299-4083

NUMBER OF EMPLOYEES: 11

LOCATION OF EQUIPMENT:

ADDRESS: 200 South F Street

CITY / STATE / ZIP: Haines City FL 33844

HOURS OF OPERATION: 4AM - 5PM

DAYS OF OPERATION: M-S

APPLICATION FOR COMMERCIAL REFUSE LICENSE

COUNTY OF ORANGE, FLORIDA

If a joint venture or partnership, list the names of all partners and their permanent addresses. If a corporation, list the names and permanent address of corporate officers, and their percentage of participation in the space below; if more space is required, attach a separate sheet.

	Name	Office Held	Permanent Address	% Owned
a.	<u>Ian Peince</u>	<u>Owner/President</u>	<u>2135 West Lake Hamilton Drive</u> <u>Winter Haven, Fl. 33881</u>	<u>100%</u>
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____
d.	_____	_____	_____	_____
e.	_____	_____	_____	_____

I certify that the aforesaid company is capable of rendering adequate commercial refuse collection service in accordance with the provisions of the County's Code of Ordinances, Chapter 32 Solid Waste, Article IV Collection and Disposal and all regulations related thereto.

YES ☒

NO ☐

I certify that the aforesaid company owns or has under its control, in good mechanical repair and condition, sufficient equipment to adequately conduct the business of commercial refuse collection and all such equipment meets the requirements of the County's Code of Ordinances, Chapter 32 Solid Waste, Article IV Collection and Disposal and all regulations related thereto.

YES ☒

NO ☐

I have read, understand and am willing to comply with the provisions of the County's Solid Waste Collection and Disposal Ordinance and all applicable rules and regulations.

[Signature]

Signature of Authorized Representative

12/26/2024

Date

President/owner

Title

Home Address

2135 West Lake Hamilton Drive

City / State / Zip

Winter Haven, Fl. 33881

APPLICATION FOR COMMERCIAL REFUSE LICENSE
COUNTY OF ORANGE, FLORIDA

AFFIDAVIT

(to be attested before a Notary Public or other
officer authorized to administer oaths)

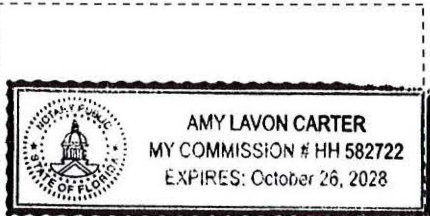
STATE OF FLORIDA

COUNTY OF POUL

Personally appeared before me, an officer duly qualified to administer an oath in the City of _____, State of FLORIDA, known to me to be the person herein described and subscribing hereto, and on oath deposes and says that the statements made are true and correct.

Signature of Applicant [Signature]

Sworn to and subscribed before me, this 26th day of December, 2021



[Signature]
(Notary Public)

Amy Lavon Carter

My Commission Expires: October 26, 2028

Notary Seal Above

NAME OF COMPANY

Please complete the following and return with the application:

- 11

- ♦ Number of employees: 10

- ♦ Number of commercial vehicles to be used in the business: _____

- ♦ Truck numbers, tag numbers and tare weights of each vehicle:

[illegible]

Tax Collector Scott Randolph**Local Business Tax Receipt****Orange County, Florida****2025****EXPIRES SEPTEMBER 30, 2025**

3100-1251638

3100 DEBRIS REMOVAL

\$30.00

6 EMPLOYEE(S)

TOTAL TAX \$ 30.00
PREVIOUSLY PAID \$ 30.00
TOTAL DUE \$ 0.00

SJP ENTERPRISES LLC

SJP ENTERPRISES LLC
200 SOUTH F ST
HAINES CITY, FL 33844

MOBILE FROM POLK COUNTY -
X - OUT OF COUNTY - 00000
POLK COUNTY

Paid 30.00

02/28/2025

Tax Collector Scott Randolph**Local Business Tax Receipt****Orange County, Florida**

This local Business Tax Receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

2025**EXPIRES SEPTEMBER 30, 2025**

3100-1251638

3100 DEBRIS REMOVAL

\$30.00

6 EMPLOYEE(S)

TOTAL TAX \$ 30.00
PREVIOUSLY PAID \$ 30.00
TOTAL DUE \$ 0.00



SJP ENTERPRISES LLC

MOBILE FROM POLK COUNTY -
X - OUT OF COUNTY - 00000
POLK COUNTY

SJP ENTERPRISES LLC
200 SOUTH F ST
HAINES CITY, FL 33844

Paid \$ 30.00

02/28/2025

This receipt is official when validated by the Tax Collector.

Orange County Code requires this local Business Tax Receipt to be displayed conspicuously at the place of business in public view. It is subject to inspection by all duly authorized officers of the County.

For Your Information: What You Need To Know About Tangible Personal Property

Every individual or firm doing business and located in Polk County is also subject to the tangible personal property requirement.

An initial tangible personal property tax return is required to be filed with the Polk County Property Appraiser's Office by April 1st of the year after the business opens. The initial return is required if the business owns or leases any personal property, without regard to the value of that personal property. In subsequent years, however, no return is required unless the combined value of all business equipment is more than 25,000 dollars.

To file an initial tangible personal property tax return or for additional information, visit Polk County Property Appraiser's Office website, polkpa.org.

POLK COUNTY LOCAL BUSINESS TAX RECEIPT

ACCOUNT NO. 261553

CLASS: A

EXPIRES:

09/30/2025

OWNER NAME

LOCATION

IAN B PRINCE

200 SOUTH F STREET
HAINES CITY

BUSINESS NAME AND MAILING ADDRESS

SJP ENTERPRISES, LLC / PRINCE
CONTAINERS
SJP ENTERPRISES LLC
200 SOUTH F STREET
HAINES CITY, FL 33844

CODE

ACTIVITY TYPE

810000

LTD OTHER SERVICES

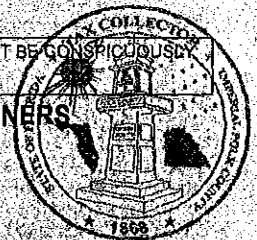
OFFICE OF JOE G. TEDDER, CFC * TAX COLLECTOR

THIS POLK COUNTY LOCAL BUSINESS TAX RECEIPT MUST BE CONSPICUOUSLY
DISPLAYED AT THE BUSINESS LOCATION

PAID - 3122837 02/12/2025 LLM

TAX 31.50

SJP ENTERPRISES, LLC / PRINCE CONTAINERS





PRINLAN-01

MCISH1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/3/2025

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 have ADDITIONAL INSURED provisions or 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 Mulling Insurance Agency, Inc. P.O. Box 308 Auburndale, FL 33823	CONTACT NAME: Judy Wagner, AAI, AU, AIS, PIAM, PWCAM, CPIW		
	PHONE (A/C, No, Ext): (863) 967-4454	FAX (A/C, No): (863) 967-7592	
	E-MAIL ADDRESS: judyw@mullinginsurance.com		
INSURED Prince And Sons, Inc., SJP Enterprises, LLC DbA Prince Containers 200 F Street South Haines City, FL 33844	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Zurich Insurance Company		40142
	INSURER B: Ascot Specialty Insurance Company		45055
	INSURER C: Southern Owners Insurance Co.		10190
	INSURER D: Certain Underwriters at Lloyds of London		
	INSURER E:		
INSURER F:			

COVERAGES

CERTIFICATE NUMBER:

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 INSD	SUBR 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 checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:	X		GLO 2578686-01	3/1/2025	3/1/2026	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BAP 2578687-01	3/1/2025	3/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$ 10,000
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ 0			ESXS2510003865-02	3/1/2025	3/1/2026	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC 2578685-01	3/1/2025	3/1/2026	<input checked="" type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	Leased/Rented EQ			72425304	8/1/2024	8/1/2025	Limit 200,000
C	Installation Floater			72425304	8/1/2024	8/1/2025	Limit 25,000
D	Pollution Liability			CPL01150001	2/6/2025	2/6/2025	Limit 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Orange County is included as additional insured with respect to General Liability.

CERTIFICATE HOLDER

CANCELLATION

Orange County
201 S. Rosalind Ave
Orlando, FL 32801

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

FLORIDA VEHICLE REGISTRATION

CO/AGY 5 / 9

T# 2063349307
B# 72145

TRK#3

PLATE **P4362J** DECAL **20358456** Expires **Midnight Wed 12/31/2025**

YR/MK	2025/FRHT	BODY	TK	COLOR	WHI	Reg. Tax	1,341.10	Class Code	41
VIN				TITLE	155100851	Init. Reg.		Tax Months	12
Plate Type	TUR	NET WT	39000	GVW	80000	County Fee	3.00	Back Tax Mos	
DL/FEID						Mail Fee		Credit Class	
Date Issued	12/30/2024	Plate Issued	6/8/2024			Sales Tax		Credit Months	
						Voluntary Fees			
						Grand Total	1344.10		

SJP ENTERPRISES LLC
200 SOUTH F STREET
HAINES CITY, FL 33844

IMPORTANT INFORMATION

1. The Florida license plate must remain with the registrant upon sale of vehicle.
2. The registration must be delivered to a Tax Collector or Tag Agent for transfer to a replacement vehicle.
3. Your registration must be updated to your new address within 30 days of moving.
4. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.
5. I understand that my driver license and registrations will be suspended immediately if the insurer denies the insurance information submitted for this registration.

TUR - TRUCKS WITH TWO PLATES

FLORIDA VEHICLE REGISTRATION

CO/AGY 5 / 9

T# 2063326559
B# 72145

TRK#1

PLATE **P6705I** DECAL **20355231** Expires **Midnight Wed 12/31/2025**

YR/MK	2024/FRHT	BODY	TK	COLOR	WHI	Reg. Tax	1,341.10	Class Code	41
VIN				TITLE	153686908	Init. Reg.		Tax Months	12
Plate Type	TUR	NET WT	39000	GVW	80000	County Fee	3.00	Back Tax Mos	
DL/FEID						Mail Fee		Credit Class	
Date Issued	12/30/2024	Plate Issued	2/5/2024			Sales Tax		Credit Months	
						Voluntary Fees			
						Grand Total	1344.10		

PRINCE AND SONS INC
200 F ST SOUTH
HAINES CITY, FL 33844

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TUR - TRUCKS WITH TWO PLATES

FLORIDA VEHICLE REGISTRATION

B# 846220

PLATE **P2197K** DECAL **20619752** Expires **Midnight Wed 12/31/2025**

YR/MK	2025/FRHT	BODY	TK	COLOR	WHI	Reg. Tax	1,258.94	Class Code	41
VIN	[REDACTED]			TITLE	167571014	Init. Reg.		Tax Months	11
Plate Type	TUR	NET WT	39000	GVW	80000	County Fee	3.00	Back Tax Mos	
DL/FEID	[REDACTED]					Mail Fee		Credit Class	
Date Issued	1/7/2025	Plate Issued	1/7/2025			Sales Tax		Credit Months	
						Voluntary Fees			
						Grand Total	1261.94		

*TRUCK #5
SJP*

**SJP ENTERPRISES LLC
200 SOUTH F STREET
HAINES CITY, FL 33844**

IMPORTANT INFORMATION

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TUR - TRUCKS WITH TWO PLATES PLATE ISSUED X