



**TWO
RIVERS**
WISCONSIN

**PUBLIC WORKS
Engineering Division**

1717 E. Park Street
P.O. BOX 87
Two Rivers, WI 54241-0087



August 24, 2026

TOSS 'N HAUL LLC
SCOTT MARTENS
1618 FIRE LANE DR
GREEN BAY, WI 54311

Dear Provider,

The City of Two Rivers **requires** an operating license for all commercial refuse/recycling haulers doing business within the City. Section 5-6-24, "Commercial Refuse/Recycling Haulers," of the Municipal Code is enclosed for your information.

If you wish to continue conducting business within the City of Two Rivers during the period from **July 1, 2026 - June 30, 2027**, please return a completed application, current Letter of Credit and current Certificate of Liability Insurance to me with the application fee (made payable to: The City of Two Rivers) by **AS SOON AS POSSIBLE**.

City Council action is required on all applications received and will be discussed at the regular Council Meeting on September 8, 2026.

Ordinance reporting requirements include City customers served along with refuse and recycling tonnage collected within the City limits. The means and methods you plan to use to comply with this requirement shall be included with your application.

If you have any questions or comments regarding the information contained in this letter, please feel free to contact me at 920-793-5539.

Sincerely,

Sue Reilly

Sue Reilly
Administrative Assistant
Public Works/Engineering
City of Two Rivers
susrei@two-rivers.org

Enclosures



www.two-rivers.org



920.793.5539



Each applicant shall be required to furnish a letter of credit in the amount of \$5,000 from an acceptable responsible financial institution to be executed on a form prepared by the City of Two Rivers.

Letter of Credit Furnished 9/2/26
Date

Insurance:

Certificate of liability insurance with limits of at least \$25,000/\$100,000/\$300,000 on each licensed vehicle must be provided by the applicant and filed with the Director of Public Works.

Certificate of Liability Furnished 8/31/26
Date

City Department approval as required by Section 5-6-24(a) of the Municipal Code.

Approved by: _____
Director of Public Works Date

Approved by: _____
City Manager Date

License shall not be issued until the above requirements are met and same has been granted by the City Council. This completed application form, approved by the Two Rivers City Council, and signed by the Director of Public Works and City Manager, will function as the valid Garbage Hauler's License.

Date License Fee Received: 8/31/26

Receipt Number: 2.000101982



**APPLICATION FOR
COMMERCIAL GARBAGE HAULER'S LICENSE
CITY OF TWO RIVERS WISCONSIN**

(I) (We), the undersigned, hereby apply to the City of Two Rivers for a COMMERCIAL GARBAGE HAULER'S LICENSE as provided in Section 5-6-24(a) of the Municipal Code, for the period of **July 1, 2026 to June 30, 2027**. The fee is \$30.00 per year for each vehicle used in said business and shall be paid in advance.

DESCRIPTION OF VEHICLES SOUGHT TO BE LICENSED

MAKE	YEAR - MODEL	WISCONSIN LICENSE NO. FOR 2026 - 2027	IDENTIFICATION NO.
FORD	2008 F550	FB52474	1F0AF57R80EB50503
FORD	2001 F650	GD 98800	3FDNF65431MA13633

Dated 8/25/2026

Toss N Haul LLC
(Name of Firm or Corporation)

Amount of Fee: \$ 60⁰⁰

SCOTT MARTENS
(Individual Completing Form)

920 334-4487
(Telephone Number)

1681 FIRE LANE DR Suite A
(Mailing Address) ~~54311~~

info@tossnhaulllc.com
(E-mail Address)

GREEN BAY WI 54311
(City, State, Zip Code)

www.tossnhaulllc.com
(Website Address)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/24/2026

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 Alliance Insurance Centers LLC 3138 Market Street Green Bay WI 54304	CONTACT NAME: Nadine Sanders PHONE (A/C, No, Ext): (920) 330-9000 E-MAIL ADDRESS: nsanders@allianceinsurancecenters.com FAX (A/C, No): (920) 330-9001																					
INSURED Toss N Haul LLC 829 Floral Dr Green Bay WI 54311	<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>Secura Insurance</td><td>22543</td></tr><tr><td>INSURER B:</td><td></td><td></td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Secura Insurance	22543	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER D:																						
INSURER E:																						
INSURER F:																						

COVERAGES**CERTIFICATE NUMBER:** 2026**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	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:			CP3456556	03/01/2026	03/01/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 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
	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY			A3456557	03/01/2026	03/01/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	☐ UMBRELLA LIAB ☐ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	☒ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC3456558	03/01/2026	03/01/2027	☒ PER STATUTE ☐ OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFICATE HOLDER**CANCELLATION**City of Two Rivers
PO Box 87

Two Rivers

WI 54241

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

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630 Main Street
Luxemburg, WI 54217

IRREVOCABLE STANDBY LETTER OF CREDIT

ISSUER:
Bank of Luxembourg
Loan Operations; PO Box 440
Luxemburg, Wisconsin 54217
(920)845-2345
<https://www.bankofluxemburg.com/>

ISSUE DATE: September 2, 2026
LETTER OF CREDIT NUMBER: 22100032-20

BENEFICIARY:
CITY OF TWO RIVERS
1717 E PARK ST
TWO RIVERS, WI 54241

Bank of Luxembourg ("Issuer") hereby issues this Irrevocable Standby Letter of Credit ("Credit") in favor of CITY OF TWO RIVERS ("Beneficiary"), at the request and for the account of TOSS N HAUL LLC, ("Applicant"), up to the maximum amount of Five Thousand and 00/100 Dollars (\$5,000.00). This Credit shall expire on September 2, 2027 ("Expiration Date").

Issuer will honor Beneficiary's demand for payment of an amount available under this Credit at sight upon presentation of a draft drawn on Issuer, provided that such draft is made and presented to Issuer in compliance with the terms and conditions set forth in this Credit.

A draft must bear upon its face the statement "Drawn under Bank of Luxembourg Irrevocable Standby Letter Of Credit No. 22100032-20, dated September 2, 2026."

Drafts must be presented to Issuer at Issuer's address set forth above (or such other address or by such other means as Issuer may provide to Beneficiary in writing) during Issuer's regular business hours on or before the Expiration Date.

Partial and multiple drawings are not permitted under this Credit.

This Credit is not transferable. Any successor or assignee of the Beneficiary will not constitute a transferee of Credit.

This Credit shall be governed by and construed in accordance with the laws of the State of Wisconsin.

The Uniform Customs and Practice for Documentary Credits ("UCP") as most recently published by the International Chamber of Commerce ("ICC") is incorporated herein by reference and shall apply to the Credit. The UCP shall prevail in the case of a conflict between the UCP and the laws of the State of Wisconsin.

Bank of Luxembourg


Greg Malingowski (Sep 1, 2026 21:21:45 CDT)

By: Greg Malingowski
Its: AVP of Commercial Lending

Date

