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**CLASS A & B
SOLID WASTE COLLECTION COMPANIES
ANNUAL REPORT**

RMAW

RECEIVED
APR 30 2008
WASH. UT. & TP. COMM

****Not Confidential****

CAC

M7732 / 6000166
NOOKSACK VALLEY DISPOSAL, INC.
PO BOX 267
LYNDEN, WA 98264

ENTERED IN COMPUTER
MAY 01 2008
Correct name and address, if different than shown



WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION
for the
YEAR ENDED DECEMBER 31, 2007

TYPE OF PAYMENT <i>(DO NOT SEND CASH IN THE MAIL)</i>	<u>For Commission Use Only</u>
<input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> AMEX <input checked="" type="checkbox"/> Visa <input type="checkbox"/> MasterCard	Payment ID #: <u>V02585B</u>
Credit Card Number: _____	Expiration Date Month/Year ____/____

CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the information is true, valid and correct, that I am authorized to execute on behalf of the company, and that I agree to pay the above total amount according to the card issue agreement.

Name (Printed): <u>Calvin Den Hartog</u>	Title: <u>General Manager</u>
Signature: <u><i>Calvin Den Hartog</i></u>	Date: <u>4-28-08</u>

<u>For Commission Use Only</u>			
Reception Number: <u>0008857</u>	001-111-02-68-227-11: _____	Ref. No. <u>AR-2007</u>	
001-111-02-68-227-01: <u>4220.62</u>	001-111-02-68-032-05: _____		

Original form to be mailed to the Washington Utilities and Transportation Commission
Web Site: www.utc.wa.gov

Do not remove, rearrange or deface the contents of this Report in any way. If you need copies, please contact the Records Center Staff at 4-1234.

7250

CERTIFICATION

I certify that I, Calvin Den Hartog, the responsible official for San Juan Sanitation (company) have examined the attached report; that to the best of my knowledge, information, and belief all statements of fact contained in said report are true, and said report is a correct statement of the business and affairs of the above-named respondent (company) in respect to each and every matter set forth therein during the period from January 1, 2007 to December 31, 2007, inclusive.

Name (Printed): Calvin Den Hartog
Signature: Calvin Den Hartog

Title: General Manager
Date: 4-28-08

SOLID WASTE ANNUAL REPORT

Schedule 1 - Identification, Organization, and Control

1. Full and exact name of respondent making this report:

Nooksack Valley Disposal, Inc.

Garbage Certificate No. G-166

Doing Business As _____

2. Annual Report/ Accounting Contact Person:

Calvin Den Hartog

(name)

General Manager

(title)

P.O. Box 267

(mailing address)

Lynden, WA 98264

(city, state, ZIP)

250 Birch Bay-Lynden Road

(physical address)

Lynden, WA 98264

(city, state, ZIP)

(360) 354-3400

(telephone)

(360) 354-3288

(fax)

(E-Mail)

www.nvd-inc.com

(web site)

3. Washington Unified Business Identifier (UBI) No.:

(Contact Washington Department of Licensing at (360) 664-1400 for information.)

600-053-456

United States Department of Transportation (DOT) No.: _____

4. Type of Business Structure:

S-Corp.

(Proprietorship, Partnership, S-Corp., C-Corp., LLC, LLP, etc.)

5a. List the name, title, and percentage of partner's share or stock distribution of 5 major stockholders:

Name(s)	Title	Partner's Share or Stock Distribution
<u>Dan Leidecker</u>	<u>President</u>	<u>99.6%</u>
<u>Michael Leidecker</u>	<u>Vice-President</u>	<u>0.2%</u>
<u>Stephanie Leidecker</u>	<u>Sec. -Treas.</u>	<u>0.2%</u>

5b. Total Stockholders at year's end:

3

6. Names, titles, and addresses of officers:

Name	Title	Address
<u>Dan Leidecker</u>	<u>President</u>	<u>P.O. Box 267, Lynden WA 98264</u>
<u>Michael Leidecker</u>	<u>Vice-President</u>	<u>P.O. Box 267, Lynden WA 98264</u>
<u>Stephanie Leidecker</u>	<u>Sec. -Treas.</u>	<u>P.O. Box 267, Lynden WA 98264</u>

Schedule 2

Insurance, Safety, and Accident Information

Current Insurance Company: General Fire and Casualty

Policy Number: RM00542-03

Operations Officer: Calvin Den Hartog
(Name)

Telephone Number: (360) 354-3400

Safety Officer: Steve Roberts
(Name)

Telephone Number: (360) 354-3400

Customer Service Officer: Calvin Den Hartog
(Name)

Telephone Number: (360) 354-3400

Number of commercial motor vehicles operated during the year: 13

Number of commercial vehicle drivers employed during the year: 12

Number of recordable (see note) accidents during the year: 0

Total cost of recordable accidents (net of insurance): 0

Total miles operated during the year: 195,234

Note: A recordable accident is defined as an occurrence involving a commercial motor vehicle on a public road in intrastate or interstate commerce which results in one or more of the following:

1. A fatality
2. Injury to a person requiring treatment away from the scene of the accident, or
3. Disabling damage to a vehicle requiring it to be towed from the accident scene.

