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

RMA

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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>VO2585B</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.

Schedule 3A - Comparative Balance Sheet- Total Company

Instructions: Complete this Balance Sheet in accordance with the beginning and end-of-year ledger figures as reflected in your books of account.

Line No.	Account Name (a)	Balance at Beginning of Year (b)	Balance at End of Year (c)
Current Assets:			
1	Cash & Working Funds	216,015	218,381
2	Special Deposits		
3	Temporary Cash Investments		
4	Notes Receivable		
5	Receivables from Affiliated Companies		
6	Accounts Receivable	360,906	351,556
7	less: Allowance for Uncollectables	4,130	4,130
8	Net Accounts Receivable	356,776	347,426
9	Prepayments	25,514	28,561
10	Material & Supplies		
11	Other Current Assets	0	32,500
12	Total Current Assets:	<u>598,305</u>	<u>626,868</u>
Tangible Property:			
13	Solid Waste Operating Property (Sched. 3C, Line 13)	3,210,200	3,345,653
14	less: Accumulated Depreciation (Sched. 3C, Line 25)	1,929,488	2,064,036
15	Net Solid Waste Operating Property	1,280,712	1,281,617
16	Non-Operating Property		
17	less: Accumulated Depreciation		
18	Net Non-Operating Property		
19	Total Net Tangible Property		
Intangible Property:			
20	Organization, Franchises, & Permits	122	98
21	Accumulated Amortization - Cr.		
22	Other Intangible Property		
23	Accumulated Amortization - Cr.		
24	Total Net Intangible Property		
Other Assets & Deferred Items:			
25	Investments & Advances		
26	Undistributed Earnings from Subsidiaries		
27	Deferred Debits		
28	Other Assets		
29	Total Other Assets & Deferred Items		
30	Total Assets (Lines 12, 19, 24, & 29)	<u>1,879,139</u>	<u>1,908,583</u>

Schedule 3B - Comparative Balance Sheet- Total Company

Instructions: Complete this Balance Sheet in accordance with the beginning and end-of-year ledger figures as reflected in your books of account.

Line No.	Account Names (a)	Balance at Beginning of Year (b)	Balance at End of Year (c)
Current Liabilities:			
1	Notes Payable		
2	Payables to Affiliated Companies		
3	Accounts Payable	127,763	108,952
4	Salaries & Wages Payable	14,636	19,345
5	Accrued Taxes	66,543	66,328
6	Current Portion of Long Term Debt (Equip. & Other)		
7	Other Current Liabilities	55,522	55,935
8	Total Current Liabilities	264,464	250,560
Long Term Debt Due After 1 Year:			
9	Equipment Obligations		
10	Other Long Term Debt		
11	Unamortized Premium/Discount on Debt - (net)		
12	Total Long Term Debt Due After 1 Year		
Deferred Credits & Other Items:			
13	Deferred Credits		
14	Other Credits		
15	Total Deferred & Other Credits		
16	Total Liabilities (Lines 8, 12, & 15)	264,464	250,560
Shareholder's & Proprietor's Equity:			
17	Capital Stock:		
18	Capital Stock	1,000	1,000
19	Paid in Capital in Excess of Par	127	127
20	Other Capital		
21	Total Capital Stock	1,127	1,127
22	Proprietor's Capital:		
23	Sole Proprietor's Capital		
24	Partnership Capital		
25	Total Proprietor's Capital		
26	Retained Earnings	1,613,548	1,656,896
27	Total Equity (Lines 21 & 26, or 25)	1,614,675	1,658,023
28	Total Liabilities & Equity (Lines 16 & 27)	1,879,139	1,908,583

Schedule 3C: Total Company Solid Waste Operating Property

Instructions: Classify regulated and non-regulated fixed assets and reserves in your books of account, including those related to disposal and transfer station facilities, into the below-listed categories. Non-operating related items should be excluded from this schedule and instead shown in total in Schedule 3A, Lines 16 - 18.

Line No.	Acct.	Fixed Assets	Balance at Beginning of Year	Balance at at Close of Year
	(a)	(b)	(c)	(d)
1	1211	Land	17,588	17,588
2	1212	Structures	228,641	231,741
3	1222	Solid Waste Collection Equipment	1,743,799	1,770,474
4	1224	Bins, Containers, Toters, Drop Boxes, etc.	1,089,601	1,192,583
5	1226	Disposal/ Landfill/ Transfer Station		
6		Facilities and Equipment		
7	1230	Service Cars & Equipment		
8	1240	Shop & Garage Equipment	36,627	36,627
9	1250	Office Furniture & Fixtures	64,117	66,813
10	1270	Leasehold Improvements	29,827	29,827
11	1280	Other Solid Waste Operating Property		
12		Total	3,210,200	3,345,653

Line No.	Acct.	Accumulated Depreciation	Balance at Beginning of Year	Balance at at Close of Year
	(a)	(b)	(c)	(d)
13	1213	Structures	153,735	165,692
14	1223	Solid Waste Collection Equipment	907,098	967,077
15	1225	Bins, Containers, Toters, Drop Boxes, etc.	760,501	819,489
16	1227	Disposal/ Landfill/ Transfer Station		
17		Facilities and Equipment		
18	1231	Service Cars & Equipment		
19	1241	Shop & Garage Equipment	36,627	36,627
20	1251	Office Furniture & Fixtures	58,922	60,557
21	1271	Leasehold Improvements	12,605	14,594
22	1281	Other Solid Waste Operating Property		
23		Total	1,929,488	2,064,036

Schedule 4A - Sole Proprietor's Capital
 Schedule 4B - Partnership Capital
 (Mark which one applies)

Instructions: **Non-Incorporated Companies** show the requested information concerning the items included in their **Proprietor or Partner Equity Accounts** during the year.

Line No.	Description (a)	Total (b)
1	Balance at Beginning of Year	_____
2	Net Income (Loss) from Current Period	_____
3	Additional Investments During Year	_____
4	Other Credits & Additions (Specify)	_____
5	_____	_____
6	_____	_____
7	Withdrawals & Disbursements	_____
8	Other Debits & Reductions (Specify)	_____
9	_____	_____
10	_____	_____
11	Balance at Year End	=====

Schedule 4C - Corporate Retained Earnings

Instructions: **Corporations** show the requested information concerning the items included in their **Retained Earnings Account** during the year.

Line No.	Description (a)	Total (b)
12	Balance at Beginning of Year	1,613,548
13	Net Income (Loss) from Current Period	352,343
14	Dividend Appropriations	308,995
15	Other Debits & Reductions (Specify)	_____
16	_____	_____
17	_____	_____
18	Other Credits and Additions (Specify)	_____
19	_____	_____
19	_____	_____
20	_____	_____
21	Balance at Year End	=====1,656,896=====

Schedule 5 - Income Statement

Instructions: Complete this Total Company Income Statement in accordance with the year-end accumulated figures as reflected in your books of account.

Line	Account (a)	Total Company (b)
Revenues:		
1	Solid Waste Operating Revenues (Line 12d, Schedule 6A)	\$ 3,396,900
2	Other	\$ -
3	Total Revenue	<u>\$ 3,396,900</u>
Expenses:		
4	Driver Wages & Benefits	\$ 637,678
5	Truck Operating Costs	\$ 169,822
6	Repair & Maintenance	\$ 208,708
7	Insurance & Safety	\$ 32,544
8	Disposal & Processing	\$ 1,177,218
9	Depreciation	\$ 182,815
10	Selling & Advertising	\$ 6,428
11	Office & Administration	\$ 234,978
12	Management Fees	\$ 200,111
13	Taxes & Licenses	\$ 165,260
14	Rents	
15	Other Expenses	\$ 39,912
16	Total Expenses before Other Items	(add lines 4 thru 15) <u>\$ 3,055,474</u>
17	Net Income before Other Items	(line 3 minus line 16) <u>\$ 341,426</u>
Other Income & Expense		
18	Other Income/ (Loss)	\$ 6,627
19	Interest, Dividends, & Other Investment Income/ (Loss)	\$ 4,290
20	Distrib./Undistrib. Income/ (Loss) from Subsidiaries	
21	Interest Expense	
22	Other Deductions	
23	Extraordinary Items (Net)	
24	Total Other Income & Expense	(add lines 18 thru 23) <u>\$ 10,917</u>
25	Net Income before Federal Income Taxes	(line 17 & line 24) <u>\$ 352,343</u>
26	Federal Income Taxes	
27	Net Income/ (Loss)	(line 25 minus line 26) <u>\$ 352,343</u>

Schedule 6A - Revenues

Instructions: Classify revenues reflected in your books of account for the year into the below-listed categories.

Line No.	Account	Regulated Revenue	Non-Regulated Revenue	Total Company Solid Waste Revenue
	(a)	(b)	(c)	(d)
Garbage Collection				
1	Residential Collection	399,142	590,764	989,906
2	Commercial Collection	368,953	963,454	1,332,407
3	Drop Box/Compactor Collection	93,085		93,085
4	Drop Box/Comp. Pass Thru Disposal	88,387	178,294	266,681
5	Other Garbage Collection			
Recycling, Yard Waste, and Medical Waste				
6	Residential Recycling Collection	91,744	187,440	279,184
7	Multi-Family Recycling Collection			
8	Sale of Recycle Commodities	13,843	60,319	74,162
9	Yardwaste Collection		86,208	86,208
10	Medical Waste Collection			
11	Other Revenue		275,267	275,267
12	Total Solid Waste Operating Revenue	1,055,154	2,341,746	3,396,900

Schedule 6B - Customers

Instructions: Provide the requested information for each customer classification as of year end.

Line No.	Customer Classification	Number of Regulated Customers	Number of Non-Regulated Customers	Total Solid Waste Customers
	(a)	(b)	(c)	(d)
Garbage Collection				
13	Residential Collection	2,264	3,942	6,206
14	Commercial Collection	408	572	980
15	Drop Box & Compactors	23		23
16	Other Garbage Collection			
Recycling, Yard Waste, and Medical Waste				
17	Residential Recycling	2,264	3,942	6,206
18	Multi-Family Recycling			
19	Yardwaste Collection		1,155	1,155
20	Medical Waste Collection			
21	Other Customers			

SCHEDULE 7: Regulated Recycle and Yard Waste Programs

Attach additional sheets if necessary.

7A: Summarize your Regulated RESIDENTIAL Recycle program separately by commodity.

	<u>Commodities</u>	<u>Annual Tonnage</u>	<u>Commodity Revenue</u>
	Newspaper	103.33	\$4,960
	Mixed Paper	92.59	\$3,218
	Cardboard	42.34	\$1,651
	Glass	93.7	(\$2,752)
	Scrap Metal	0	\$0
	Plastic	18.76	\$688
	Aluminum Cans	5.24	\$6,078
	Tin Cans	17.01	\$0
Total		372.97	\$13,843

7B: Summarize your Regulated MULTI-FAMILY Recycle program separately by commodity.

	<u>Commodities</u>	<u>Annual Tonnage</u>	<u>Commodity Revenue</u>
Total			

7C: Summarize your Regulated Residential YARDWASTE program:

Yardwaste
Annual Tonnage: _____

Schedule 8
City Contracts

Instructions: List each city the respondent has had a contract with any time during the reporting year.
Place an "X" in each customer classification to which the contract applies. Attach additional sheets if necessary.

Line No.	City (a)	Residential Garbage (b)	Residential Recycling (c)	Residential Multi-Family Recycling (d)	Residential Yardwaste (e)	Commercial Garbage (f)	Dropbox & Compactors Garbage (g)	Total Contract Revenue (h)
1	Lynden	x	x	x	x	x	x	
2	Everson	x	x	x	x	x	x	
3	Nooksack	x	x	x	x	x	x	
4	Sumas	x	x	x	x	x	x	
5								
6								
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34								
35								
36	Total City Contract Revenue Column (h):							

Schedule 9A - Garbage Disposal Fees

Instructions: If the respondent does not have the exact number of tons/yds. by category, make a reasonable estimate. Attach additional sheets as necessary. Total Pass Through Expense here should equal Total Pass Through Revenue in Schedule 6A.

Line No.	Residential & Commercial			Pass Through			Total Disposal Fees
	Unit Type	No. of Units	\$ Expense	Unit Type	No. of Units	\$ Expense	\$
	(a)	(b)	(c)	(d)	(e)	(f)	(g) = (c) + (f)
Site A (Specify):			Recycling and Disposal Services			Basic MSW Disp. Fee \$ <u>76.85</u> per <u>ton</u> (Unit)	
1	Tons	11,328.15	\$ 870,568	Tons	3,470.15	\$ 266,681	\$ 1,137,249
2	Loose Yds.			Loose Yds.			
3	Compact Yds.			Compact Yds.			
4	Other			Other			
Site B (Specify):				Basic MSW Disp. Fee \$ _____ per _____ (Unit)			
5	Tons			Tons			
6	Loose Yds.			Loose Yds.			
7	Compact Yds.			Compact Yds.			
8	Other			Other			
Site C (Specify):				Basic MSW Disp. Fee \$ _____ per _____ (Unit)			
9	Tons			Tons			
10	Loose Yds.			Loose Yds.			
11	Compact Yds.			Compact Yds.			
12	Other			Other			
Site D (Specify):				Basic MSW Disp. Fee \$ _____ per _____ (Unit)			
13	Tons			Tons			
14	Loose Yds.			Loose Yds.			
15	Compact Yds.			Compact Yds.			
16	Other			Other			
Site E (Specify):				Basic MSW Disp. Fee \$ _____ per _____ (Unit)			
17	Tons			Tons			
18	Loose Yds.			Loose Yds.			
19	Compact Yds.			Compact Yds.			
20	Other			Other			
21	Sub Total This Page		\$ 870,568		\$ 266,681		\$ 1,137,249

Schedule 9B - Other Disposal and Processing

Instructions: If the respondent does not have the exact number of tons/yds. by category, make a reasonable estimate.
 Attach additional sheets as necessary.

Line No.	Category	Processing / Disposal Site	No. of Units		Disposal/ Processing \$ Expense	
			Tons (c)	Yds. (d)		
	(a)	(b)	(c)	(d)	(e)	
22	Residential Recycling					
23						
24						
25						
26						
27	Multi-Family Recycling					
28						
29						
30						
31						
32	Other Recycling					
33						
34						
35						
36						
37	Yard Waste	S&W Products	1,332.30		\$ 39,969	
38						
39						
40						
41						
42	Medical Waste					
43						
44						
45						
46						
47	Other Disposal/Processing					
48						
49						
50						
51						
52	Total All Disposal and Processing - Sched. 9B, Lines 22 (e) through Line 51 (e) + Sched. 9A, Line 21 (g)					\$ 1,177,218

Schedule 10
Total Company Employee Classification and Compensation

Line No.	<u>Employee Classification</u>	Number of <u>Employees</u>	<u>Salary/Wages</u>
1.	Drivers and Helpers	<u>12</u>	<u>\$481,183</u>
2.	Mechanics and Service	<u>1</u>	<u>\$73,952</u>
3.	Disposal and Transfer		
4.	Office and Administration	<u>4</u>	<u>\$176,545</u>
5.	Officers and Directors	<u>3</u>	<u>\$200,111</u>
6.	Other		
6.	Totals	<u>20</u>	<u>\$931,791</u>

REGULATORY FEE CALCULATION SCHEDULE

Company Name: **Nooksack Valley Disposal, Inc.**

Annual Report Year 2007

In accordance with RCW 81.77.080 "Regulatory Fees", the Commission requires Solid Waste companies to file reports of gross intrastate operating revenue and pay fees on that revenue. Every company subject to regulation shall file with the Commission a statement under oath showing its gross intrastate operating revenue from operations for the preceding year and pay to the Commission a fee as instructed below.

1	Total Gross Intrastate Operating Revenue **				\$3,396,900
2	Less Non Fee-Paying Revenue (from line 15 below)				\$2,341,746
3	Balance-Adjusted Gross Intrastate Operating Revenue (subtract line 2 from 1)				\$1,055,154
4	Regulatory Fee Calculations:				
4a	If line 3 is UNDER \$2,000, Enter ZERO (Filing ZERO indicates schedule is complete)				\$
4b	If line 3 is BETWEEN \$2,000 and \$5,000-minimum fee due is \$20.00 (Filing BETWEEN \$2,000 and \$5,000 indicates schedule is complete. If filing after May 1st go to Line 6)				\$
4c	If line 3 is OVER \$5,000-enter amount from line 3	\$1,055,154	x .40 % (.0040)	=	\$4,220.62
5	Total Regulatory Fees owed (add lines 4a, 4b, and 4c)				\$4,220.62
				Agency Use Only	227:01
Complete Lines 6 through 9 if filing after May 1st					
6	Penalties on Regulatory Fees filed after May 1st				
6a	Total Penalties on Regulatory Fees owed - enter amount from line 5	\$	x 2 % (.02)	=	\$
7	Interest on Regulatory Fees filed after May 1st				
7a	Amount from line 5 _____ x Number of months past May _____ x 1% (.01) =				\$
8	Total Penalties and Interest owed (add lines 6a and 7a)				\$
				Agency Use Only	227:11
9	Total Regulatory, Penalty and Interest Fees Due (add lines 5 and 8)				\$4,220.62

** Note: Gross Washington intrastate operating revenue is defined as all revenue collected for the year from rates under tariffs on file at the Washington Utilities and Transportation Commission. The revenues subject to the Commission's regulatory fees are gross Washington intrastate operating revenues before deductions for uncollectibles, unbillables, subscriber/aggregator commissions or the payment of site charges and state and federal taxes, i.e. "Gross Revenues" means before any deductions from Revenue Receipts.

NON FEE-PAYING REVENUE

Description	Amount
10. Contract with Lynden, Everson, Nooksack and Sumas	\$2,006,160
11. Drop Box Facility	\$258,426
12. Commercial Recycling	\$77,160
13	
14	
15 Total Non Fee-Paying Revenue	\$2,341,746