

DRAFT

COMMERCIAL COLLECTION SERVICE FRANCHISE APPLICATION CHECK-LIST

Applicant: Brogan Clyne

Date: Feb 23, 2023

Status	Brief Description of Application Requirements
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Identity of the applicant, to include its principals, partners, and management. Section 4-1 C. (2)(a)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Evidence the entity is authorized to do business with the State of Florida and in good standing with the Department of State. Section 4-1 C. (2)(a)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Information regarding the experience and qualifications of the applicant and its personnel with regard to Solid Waste collection. Section 4-1 C. (2)(b)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Information about the applicant's (including its principals, partners, and officers) involvement as a subject or as a part in any litigation, criminal proceedings, or agency enforcement cases. Section 4-1 C. (2)(c)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	List of all vehicles, equipment and other physical assets [by make, model, capacity, size, type and VIN] the applicant will use to collect and transport Solid Waste when providing Commercial Collection service within Polk County. Section 4-1 C. (2)(d)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	List identifying the frequency of Commercial Collection Service applicant provides to its customers with the identification number, size, capacity, and type of each dumpster, roll cart, roll-off Container and compactor that the applicant will use to collect Commercial Solid Waste within the County. Section 4-1 C. (2)(e)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Applicant's acknowledgment and consent the County has the right to inspect the applicant's vehicles, Containers, compactors and other equipment at any time. Section 4-1 C. (2)(f)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Original Certificates of Insurance evidencing current compliance with CGL coverage (NLT \$2M per occurrence) and State statutory workers' comp. coverage (or waiver). Section 4-1 C. (2)(g)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Evidence the applicant has obtained all permits and licenses required by law or ordinance to provide Commercial Collection Service within the County. Section 4-1 C. (2)(h)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Delivery of Sworn affidavit confirming: (i) no unsatisfied judgments pending against the applicant; (ii) no liens of record filed by the IRS or State against the applicant; (iii) applicant will comply with all Ord. requirements and all applicable laws. Section 4-1 C. (2)(i)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Delivery of written indemnity of County from any loss which may result from the applicant, its employees, subcontractors, agents, failure to perform in compliance with the terms of the franchise or the Ordinance. Section 4-1 C. (2)(j)
<input checked="" type="checkbox"/> Met; <input type="checkbox"/> Not Met	Delivery of applicable Commercial Franchise application fee. Section 4-1 C. (5)

DRAFT


2/23/23

Applicant info:

Roggen Clyne Development, Inc.
2840 Security Lane
Lakeland, FL 33803
863-666-1999

Kyle Clyne – President
Stacey Clyne – Sec/treas



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation

ROGGEN CLYNE DEVELOPMENT, INC.

Filing Information

Document Number P22000062631
FEI/EIN Number NONE
Date Filed 08/08/2022
State FL
Status ACTIVE

Principal Address

2720 COVENTRY AVE
LAKELAND, FL 33803

Mailing Address

2720 COVENTRY AVE
LAKELAND, FL 33803

Registered Agent Name & Address

MILLER, THEODORE R
2323 S. FLORIDA AVENUE
LAKELAND, FL 33803

Officer/Director Detail

Name & Address

Title P

CLYNE, KYLE T
2720 COVENTRY AVE
LAKELAND, FL 33803

Title SEC

CLYNE, STACEY L
2720 COVENTRY AVE
LAKELAND, FL 33803

Annual Reports

No Annual Reports Filed

Document Images

[08/08/2022 -- Domestic Profit](#) [View image in PDF format](#)

Florida Department of State, Division of Corporation



Receipt #

1301928

Date:

12/21/2022 12:41 pm

Time:

12:41:14

Location:

TAX DEPT

Cashier:

HLG

Items Paid

Type	Tax Year / Item	Description/ Account	Amount
Business Tax	2022	251223	31.50
		Item Total	31.50

Payments

Method	Payee	Account/Check #	Amount
CHECK	ROGGEN CLYNE DEVELOPMENT	1502	31.50
		Payment Total	31.50

Change Due

0.00

Balance

0.00

****End****



2840 Security Lane
Lakeland, FL 33803

Ph: (863)-666-1999
Fax: (863)-666-1666

January 30, 2023

Terri J Phillips
Division Fiscal Coordinator
Polk County Waste & Recycling Division
10 Environmental Loop South
Winter Haven, Florida 33880

Re: Personnel

Terri,

Roggen Clyne Development, Inc. was formed in August 2022. We purchased Roggen Enterprises of Polk County, Inc. on December 23, 2022. We are a commercial site company involved in land clearing, earth moving, underground utilities, and road construction. The roll off container division was added to help facilitate the collection, removal, and transporting of the solid waste generated from land clearing and demolition activities. Subsequently by natural extension, the roll-off container service was provided to the General Contractors we are under contract with. We have 3 drivers who are familiar with the rules and policies of the landfill. They are experienced CDL drivers with years of experience.

Sincerely,

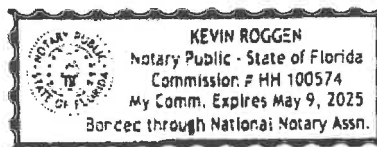
A handwritten signature in blue ink, appearing to read 'Kyle Clyne', is written over a light blue horizontal line.

Kyle Clyne
President
Roggen Clyne Development, Inc.

County: Polk
State: Florida

Sworn to (or affirmed) and subscribed before me by means of physical presence this 30th day of January, 2023, by Kyle Clyne, President of Roggen Clyne Development, Inc. who is personally known to me.

A handwritten signature in black ink, appearing to read 'Kevin Roggen', is written over a light blue horizontal line.





2840 Security Lane
Lakeland, FL 33803

Ph: (863)-666-1999
Fax: (863)-666-1666

January 30, 2023

Terri J Phillips
Division Fiscal Coordinator
Polk County Waste & Recycling Division
10 Environmental Loop South
Winter Haven, Florida 33880

Re: Non-Exclusive Commercial Franchise

Terri,

Please be advised that pursuant to Section C, Subsection 2c, subparagraph (i) through (v) of the Application Form to obtain a Non-Exclusive Commercial Franchise for the purpose of collecting, remove, and transporting commercial solid waste Polk County and landfill privileges we offer the following statement:

Roggen Clyne Development, Inc. is currently not in any litigation nor any of its principals or officers are involved in any other litigation, criminal proceedings, or agency enforcement cases.

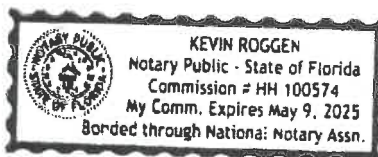
Sincerely,



Kyle Clyne
President
Roggen Clyne Development, Inc.

County: Polk
State: Florida

Sworn to (or affirmed) and subscribed before me by means of physical presence this 30th day of January, 2023, by Kyle Clyne, President of Roggen Clyne Development, Inc. who is personally known to me.



POLK COUNTY WASTE & RECYCLING
NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL VEHICLE LIST

FRANCHISEE _____ **Roggen Clyne Development**

FOR YEAR 2023

OFFICE USE ONLY

DATE RECEIVED _____

DATE TO AUDITING _____

ACCEPTED _____

[illegible]

Dumpster Customers:

Rodda Construction – as needed

Semco Construction – as needed

Trimcor Apartment Constructors – as needed

Register Construction – as needed

**POLK COUNTY WASTE & RECYCLING
NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL CONTAINER LIST**

FRANCHISEE Roggen Clyne Development

FOR YEAR 2023

OFFICE USE ONLY

DATE RECEIVED

DATE TO AUDITING

ACCEPTED

[illegible]

AFFIDAVIT SUPPORTING RENEWAL OF NONEXCLUSIVE FRANCHISE TO COLLECT,
REMOVE, AND TRANSPORT COMMERCIAL SOLID WASTE
WITHIN POLK COUNTY

STATE OF FLORIDA
COUNTY OF Polk

Before me, the undersigned notary public authorized to administer oaths, personally appeared Kyle Clyne who, first being duly sworn, on oath deposes and states, as follows:

- 1) He is President, a Florida corporation.
- 2) He has personal knowledge of the facts stated in this Affidavit and that all such facts are true and correct.
- 3) There are no unsatisfied judgments entered against Roggen Clyne Development, Inc.
- 4) There are no liens of record filed by the Internal Revenue Service against Roggen Clyne Development, Inc.
- 5) There are no liens of record filed by the State of Florida, or any agency or subdivision thereof, against Roggen Clyne Development, Inc.
- 6) Roggen Clyne Development, Inc. acknowledges and consents that the County shall have the right to inspect Roggen Clyne Development, Inc. vehicles, containers, compactors, and other equipment at any time.
- 7) During the time of the existing Commercial Franchise, Roggen Clyne Development, Inc. has complied with all of the requirements stated in the Polk County Ordinance 13-069 and with all other applicable laws, and if awarded a renewal term 1 Year will continue to comply with the same.

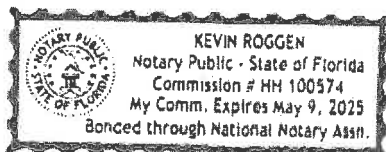
Further the affiant sayeth not.

Dated the 26th day of January, 2023


Sworn Person Signature

Kyle Clyne President
Printed Name and Title of Sworn Person

The foregoing instrument was sworn (or affirmed) and subscribed before me this 26th day of January, 2023, by Kyle Clyne, who is either ☒ personally known to me; or ☐ has produced _____ as identification.



(AFFIX NOTORIAL SEAL)


Notary Public Signature

Kevin Roggen
Printed Name of Notary Public
HH 100574 May 9, 2025

Notary Commission Number/Expiration



ROGGENT-01

DIBJO1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/26/2023

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: Joshua Dibling PHONE (A/C, No, Ext): (863) 967-4454 FAX (A/C, No): (863) 967-7592 E-MAIL ADDRESS: joshd@mullinginsurance.com																					
INSURED Roggen Clyne Development Inc 2840 Security Lane Lakeland, FL 33803-7333	<table border="1"><thead><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A:</td><td>Addison Insurance Company</td><td>10324</td></tr><tr><td>INSURER B:</td><td>The Cincinnati Insurance Company</td><td>10677</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></tbody></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Addison Insurance Company	10324	INSURER B:	The Cincinnati Insurance Company	10677	INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER D:																						
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 SUBR INSD WYD	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 type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:		85325447	9/18/2022	9/18/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		85325447	9/18/2022	9/18/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$ 10,000
B	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0		EXS 0665168	9/18/2022	9/18/2023	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 Aggregate \$ 3,000,000
	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 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 \$
A	Inland Marine Policy		85325447	9/18/2022	9/18/2023	Rented/Leased Equip 250,000

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

CERTIFICATE HOLDER

CANCELLATION

Polk County Waste & Recycling
10 Environmental Loop South
Winter Haven, FL 33880

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

INDEMNITY

WHEREAS, THE UNDERSIGNED Kyle Clyne
(the "Undersigned"), is the President of Roggen Clyne Development, Inc.
(the "Contractor" "), a Florida Corporation ,

WHEREAS, the Company , is herewith submitting an application to Polk County, a political subdivision of the State of Florida, (the "County") for the grant, renewal, or modification of a non-exclusive commercial franchise (a "Commercial Franchise") to collect, remove and transport commercial solid waste within the geographic areas of Polk County; and

WHEREAS, the Commercial Franchise application process is described in Polk County Ordinance 13-069 (the "Ordinance") and requires, among other matters, that an applicant indemnify the County from and against any loss which may result from the applicant, its employees, subcontractors, and agents, failure to perform in accordance with the terms of the awarded Commercial Franchise and the terms of the Ordinance; and

WHEREAS, the Undersigned is duly authorized to execute this instrument by and on behalf of the Company

NOW, THEREFORE, in consideration of the benefits accruing to the Company and for other good and valuable consideration, the Undersigned, by and on behalf of the Company does hereby forever release, indemnify, keep, save, and hold harmless the County, its commissioners, officers, officials, and employees, from and against any and all damages, losses, penalties, liabilities, costs and expenses of any kind or nature whatsoever that is proximately caused by, incident to, resulting from, arising out of, or occurring in connection with, directly or indirectly, Roggen Clyne Development, Inc. , its employees, subcontractors, or agents, failure to perform in compliance with the terms of the Commercial Franchise or failure to perform in compliance with the terms of the Ordinance.

IN WITNESS WHEREOF, the Undersigned has executed this instrument by and on behalf of the Company this 26th day of January , 20 23 .

ATTEST:

By: 

Kevin Roggen, Operations manager

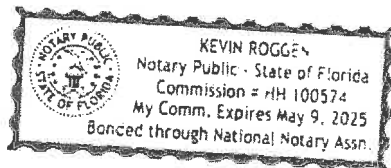
[Printed Name, Title]

a 
By: 

Kyle Clyne, President

[Printed Name, Title]

SEAL



ROGGEN CLYNE DEVELOPMENT INC.

LAKELAND, FL 33803

5019

Polk County Waste & Recycling
Environmental Loop S
Winter Haven, FL 33880

Check: 5019
Date: 1/30/2023
Vendor: PLKWSTRS

<u>Invoice</u>	<u>P.O. Num.</u>	<u>Invoice Amt</u>	<u>Prior Balance</u>	<u>Retention</u>	<u>Discount</u>	<u>Amt. Paid</u>
10-23		500.00	500.00	0.00	0.00	500.0
franchise app fee		500.00	500.00	0.00	0.00	500.0



ROGGEN CLYNE
2840 SECURITY LANE
LAKELAND, FL 33803

BANK OF CENTRAL FLORIDA
LAKELAND, FL 33813

5019

53-1625/631



5019

1/30/2023 *****500.00*****

THE SUM OF FIVE HUNDRED DOLLARS AND NO CENTS

PAY
TO THE
ORDER
OF


Polk County Waste & Recycling
10 Environmental Loop S
Winter Haven, FL 33880

110005019110 10631162511 1500034417110

Photo Safe Deposit

Details on Back

DEPARTMENT OF Waste & Recycling, POLK COUNTY FLORIDA No 86972
RECEIVED FROM Roggen Clyne Development Inc Date 2/13 20 23
FUND COST CENTER ACCOUNT PROJECT
FOR: Franchise Renewal \$ 500.00
\$
\$
\$
\$
CASH ☐ BY: Juanita Cobb
CHECK ☒ 5019 TOTAL \$500.00
REVISED 05/12

 **ROGGEN CLYNE DEVELOPMENT INC.**
2840 SECURITY LANE
LAKELAND, FL 33803


BANK OF CENTRAL FLORIDA
LAKELAND, FL 33813

CHECK ARMOR
FRAUD PROTECTION

5019
63-1626/631

5019

DATE 1/30/2023 AMOUNT 500.00

THE SUM OF FIVE HUNDRED DOLLARS AND NO CENTS *****
PAY TO THE ORDER OF
Polk County Waste & Recycling
10 Environmental Loop S
Winter Haven, FL 33880

AUTHORIZED SIGNATURE
⑈005019⑈ ⑆063116261⑆ 1500034417⑈

ROGGEN CLYNE DEVELOPMENT INC. LAKELAND, FL 33803 5019

Polk County Waste & Recycling
Environmental Loop S
Winter Haven, FL 33880

RECEIVED
2023 FEB 13 PM 3:30
POLK COUNTY WASTE & RECYCLING

Check: 5019
Date: 1/30/2023
Vendor: PLKWSTRS

Invoice Amt	Prior Balance	Retention	Discount	Amt. Paid
500.00	500.00	0.00	0.00	500.00
500.00	500.00	0.00	0.00	500.00

voice 30-23 franchise app fee
NECF Renewal