DRAFT

COMMERCIAL COLLECTION SERVICE FRANCHISE APPLICATION CHECK-LIST

Applicant: Tri-County Sweeping Date: ~~09.29.25~~ 10.2.25

Status	Brief Description of Application Requirements
☑ Met; **1.** ☐ Not	Identity of the applicant, to include its principals, partners, and management. Section 4-1 C. (2)(a)
☑ Met; **2.** ☐ 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)
☑ Met; **3.** ☐ 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)
☑ Met; **4.** ☐ 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) **MUST BE NOTARIZED**
☑ Met; **5.** ☐ 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)
☑ Met; **6.** ☐ 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)
☑ Met; **7.** ☐ 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)
☑ Met; **8.** ☐ 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)
☑ Met; **9.** ☐ 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)
☑ Met **10.** ☐ 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) **MUST BE NOTARIZED**
☑ Met; **11.** ☐ 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) **MUST BE NOTARIZED**
☑ Met **12.** ☐ Not Met	Delivery of applicable Commercial Franchise application fee. Section 4-1 C. (5)

October 2, 2025

To Whom It May Concern:

As of the date of the correspindence stated above, Tri County Sweeping Services, Inc. as well as it's Managing member / Andrew Chehata has never and is currently not incolved in any tyoe of litigation, criminal proceedings, judgements, and or liens including the Internal Revenue Service and all state and or federal government litigation, or civil suits, or agency enformance cases.

Tri County Sweeping Services, Inc. has been in the Property Maintence business for 31 years. Tri County Sweeping Services, Inc. started servicing the Poke County for 3 years.

I, Andrew chehata, MGR\Owner of Tri County Sweeping Services do attest the above statement to be true and correct.

By: _____

Print Name Andrew Chehata

State Florida County Broward

The foregoing instrument was acknowledged before me this 2nd day of october 2025 Personally Know or Produced identification

_____
Notary Public Signature

Yamile Gonzalez
Printed Name of Notary Public

HH 235389 / 6/29/2026
Notary Commission Number/Expiration

YAMILE GONZALEZ NOTARY PUBLIC MY COMMISSION EXPIRES 6-29-2026 STATE OF FLORIDA COMMISSION NUMBER HH 235389

(AFFIX NOTORIAL SEAL)

4900 SW 51st Street Davie, FL 33314
Phone (954) 797-0101 Fax (954) 797-7988 Web:Tricountysweeping.com

DIVISION OF CORPORATIONS

Sunbiz.org Division of Corporations

Detail by Entity Name

Florida Profit Corporation
TRI-COUNTY SWEEPING SERVICES, INC.

Filing Information

Document Number	P94000019189
FEI/EIN Number	65-0477678
Date Filed	03/11/1994
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	10/08/2021
Event Effective Date	NONE

Principal Address

4900 SW 51ST STREET
DAVIE, FL 33314

Changed: 01/29/2002

Mailing Address

PO BOX 292457
DAVIE, FL 33329

Changed: 03/25/2007

Registered Agent Name & Address

Chehata, Ray C, President
4900 Sw 51st Street
Davie, FL 33314

Name Changed: 07/15/2022

Address Changed: 07/15/2022

Officer/Director Detail

Name & Address

Title PSD

CHEHATA, RAY G
4900 SW 51ST STREET
DAVIE, FL 33314

Title VPTD

CHEHATA, ANDREW M
4900 SW 51ST STREET
DAVIE, FL 33314

Annual Reports

Report Year	Filed Date
2023	03/08/2023
2024	01/29/2024
2025	04/16/2025

Document Images

04/16/2025 -- ANNUAL REPORT	View image in PDF format
01/29/2024 -- ANNUAL REPORT	View image in PDF format
03/08/2023 -- ANNUAL REPORT	View image in PDF format
07/15/2022 -- ANNUAL REPORT	View image in PDF format
10/06/2021 -- Amendment	View image in PDF format
01/30/2021 -- ANNUAL REPORT	View image in PDF format
01/19/2020 -- ANNUAL REPORT	View image in PDF format
02/08/2019 -- ANNUAL REPORT	View image in PDF format
01/14/2018 -- ANNUAL REPORT	View image in PDF format
01/07/2017 -- ANNUAL REPORT	View image in PDF format
01/24/2016 -- ANNUAL REPORT	View image in PDF format
01/29/2015 -- ANNUAL REPORT	View image in PDF format
03/20/2014 -- ANNUAL REPORT	View image in PDF format
02/06/2013 -- ANNUAL REPORT	View image in PDF format
02/09/2012 -- ANNUAL REPORT	View image in PDF format
01/10/2011 -- ANNUAL REPORT	View image in PDF format
01/08/2010 -- ANNUAL REPORT	View image in PDF format
04/08/2009 -- ANNUAL REPORT	View image in PDF format
01/08/2008 -- ANNUAL REPORT	View image in PDF format
03/25/2007 -- ANNUAL REPORT	View image in PDF format
01/06/2006 -- ANNUAL REPORT	View image in PDF format
03/09/2005 -- ANNUAL REPORT	View image in PDF format
03/02/2004 -- ANNUAL REPORT	View image in PDF format
06/13/2003 -- Amendment	View image in PDF format
01/02/2003 -- ANNUAL REPORT	View image in PDF format
01/29/2002 -- ANNUAL REPORT	View image in PDF format
03/02/2001 -- ANNUAL REPORT	View image in PDF format
02/26/2000 -- ANNUAL REPORT	View image in PDF format
11/15/1999 -- REINSTATEMENT	View image in PDF format

09/16/1998 -- ANNUAL REPORT	View image in PDF format
01/21/1997 -- ANNUAL REPORT	View image in PDF format
06/01/1995 -- ANNUAL REPORT	View image in PDF format

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 10/02/2025

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	CONTACT NAME:	
Brown & Brown Insurance Services, Inc. 1201 W Cypress Creek Rd Suite 130 Fort Lauderdale FL 33309	PHONE (A/C, No, Ext): (954) 776-2222	FAX (A/C, No): (954) 776-4446
	E-MAIL ADDRESS: 053.certs@bbrown.com	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
Tri-County Sweeping Services, Inc. 4900 SW 51st Street Davie FL 33314	INSURER A: FCCI Insurance Company	10178
	INSURER B: National Trust Insurance Company	20141
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL2411890779 **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	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [X] PRO-JECT [ ] LOC [ ] OTHER:			GL10009710600	11/10/2024	11/10/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG [ ]	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $
A	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [X] SCHEDULED AUTOS [X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			CA10009710000	11/10/2024	11/10/2025	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) [ ]	$ 1,000,000 $ $ $ $
B	[X] UMBRELLA LIAB [X] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [X] RETENTION $ 10,000			UMB10009711300	11/10/2024	11/10/2025	EACH OCCURRENCE AGGREGATE [ ]	$ 2,000,000 $ 2,000,000 $
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WCO10009710700	11/10/2024	11/10/2025	[X] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 1,000,000 $ 1,000,000 $ 1,000,000

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

Umbrella does not go over the Auto

CERTIFICATE HOLDER

Polk County Solid Waste Division
10 Environmental Loop S
Winter Haven FL 33880

CANCELLATION

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

POLK COUNTY WASTE & RECYCLING

NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL VEHICLE LIST

FRANCHISEE Tri-County Sweeping Services, Inc.

FOR YEAR 2025

OFFICE USE ONLY

DATE RECEIVED _____

DATE TO AUDITING _____

ACCEPTED _____

VEHICLE MAKE	VEHICLE MODEL	YEAR	TYPE (RO, REL, FEL, ASL, ETC.)	CAPACITY (CU YD)	VEHICLE SIZE (GVW)	VEHICLE IDENTIFICATION NUMBER
Chevrolet	Pick up	2024			4828	3GCPABEK7RG380464
Down	Trailer	2024			2170	1XNBD1025R3105382
Ford	F150	2023			5355	1FTFW1ED6PFA47695

REVISED 08/2014

POLK COUNTY WASTE & RECYCLING

NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL CONTAINER LIST

FRANCHISEE _____

FOR YEAR _____

OFFICE USE ONLY

DATE RECEIVED _____

DATE TO AUDITING _____

ACCEPTED _____

CUSTOMER NAME	CONTAINER TYPE/SIZE				CAPACITY (CU YD)	COLLECTION FREQUENCY		CONTAINER IDENTIFICATION NUMBER
	DUMPSTER	COMPACTOR	ROLL OFF	OTHER		ON CALL	DAYS/WK	
Tri County Sweeping Services, Inc.	We do not use container. We use our own dump trucks.				On Call when customers ask for the pickup, of their bulk trash on property			

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 Andrew Chehata who, first being duly sworn, on oath deposes and states, as follows:

1) He is Vice President, a S 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 Tri-County Sweeping Services

4) There are no liens of record filed by the Internal Revenue Service against Tri-County Sweeping Services

5) There are no liens of record filed by the State of Florida, or any agency or subdivision thereof, against Tri-County Sweeping Services.

6) Andrew Chehata acknowledges and consents that the County shall have the right to inspect All vehicles, containers, compactors, and other equipment at any time.

7) During the time of the existing Commercial Franchise, Tri-County Sweeping 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 11th day of September, 2025

Sworn Person Signature

Andrew Chehata
Printed Name and Title of Sworn Person

The foregoing instrument was sworn (or affirmed) and subscribed before me this 11th day of September, 2025, by Andrew Chehata, who is either X personally known to me; or ☐ has produced _____ as identification.

YAMILE GONZALEZ NOTARY PUBLIC MY COMMISSION EXPIRES 6-29-2026 STATE OF FLORIDA COMMISSION NUMBER HH 235389

(AFFIX NOTARIAL SEAL)

Notary Public Signature

Yamile Gonzalez
Printed Name of Notary Public

HH 235389 6/29/2026
Notary Commission Number/Expiration

INDEMNITY

WHEREAS, THE UNDERSIGNED Andrew Chehata (the "Undersigned"), is the VP of Tri-County Sweeping Services (the "_____"), a _____,

WHEREAS, the VP, 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 Tri-County Sweeping Services

NOW, THEREFORE, in consideration of the benefits accruing to the Tri-County Sweeping Services and for other good and valuable consideration, the Undersigned, by and on behalf of the Tri-County Sweeping Services 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, Tri-County Sweeping Services, 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 _____ this 11th day of September, 2025.

ATTEST:

By: Yamile Gonzalez

Yamile Gonzalez

[Printed Name, Title]

Tri-County Sweeping Services

a _____

By: Andrew Chehata VP

[Printed Name, Title]

SEAL

YAMILE GONZALEZ NOTARY PUBLIC MY COMMISSION EXPIRES 6-29-2026 STATE OF FLORIDA COMMISSION NUMBER HH 235389

POLK COUNTY LOCAL BUSINESS TAX RECEIPT

ACCOUNT NO. 257074 **CLASS: A** **EXPIRES: 09/30/2026**

OWNER NAME	LOCATION
ANDREW MICHAEL CHEHATA	

BUSINESS NAME AND MAILING ADDRESS

TRI-COUNTY SWEEPING SERVICES INC
TRI-COUNTY SERVICES
PO BOX 292457
DAVIE, FL 33329-2457

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 - 3540027 09/24/2025 OPY **OLP 31.50** **TRI-COUNTY SWEEPING SERVICES INC**

Zimmerman, Debra

From: Yamile Gonzalez <ygonzalez@trisweep.com>
Sent: Monday, October 6, 2025 11:06 AM
To: Zimmerman, Debra
Subject: [EXTERNAL]: RE: Non Exclusive Franchise

Good Morning
We use our trucks to pick up customers bulk trash from their property. Our trucks are the pickup trucks and a trailer attached we call them our dump trucks.

From: Zimmerman, Debra <debrazimmerman@polk-county.net>
Sent: Friday, October 3, 2025 2:26 PM
To: Yamile Gonzalez <ygonzalez@trisweep.com>
Subject: Non Exclusive Franchise

Good afternoon,

Please see notes from Attorney below:

In Tri-County Sweeping's application it notes that Tri-County Sweeping uses dump trucks rather than containers to list, or whether it uses other vehicles which have not been included on the vehicle list. This question could be add

Debbie Zimmerman
Accounts Receivable Coordinator
Polk County Solid Waste Division
10 Environmental Loop S
Winter Haven, FL 33880
Office (863) 284-4363 ext: 214
debrazimmerman@polk-county.net

Thank you for your payment

Confirmation #	182974588
Date	Tuesday, September 23, 2025, 1:30:10 PM US Eastern Time
Total Amount	$773.15
Paid with	account ending in 1033
Customer Information	David Chehata David@trisweep.com (954) 797-0101

Transaction Details

Bill Type	Details		Amount
License Renewal	**Company Name:** Tri County Sweeping Services Inc.		$750.00
	Ticket or Invoice Number:	Tri County Sweeping Services Inc.	

Sub Total	$750.00
Convenience Fee	$23.15
Total	**$773.15**

CONVENIENCE FEE

Your agency has partnered with a third party service provider to provide you with convenient online payment services via credit card debit card or electronic check payments. IN ORDER TO USE THIS SERVICE YOU MAY HAVE TO PAY A NON-REFUNDABLE CONVENIENCE FEE IN ADDITION TO THE AMOUNT(S) OWED TO YOUR PAYEE. Please note that the service provider (not your Payee) will appear as the merchant of record next to your payment on your bank or credit card statement.

ACCESSIBILITY

This service is accessible through the Internet. In order to use this service you will need a personal computer access to the Internet with an Internet service provider and a web browser which supports this service.