

STATEMENT OF AUTHORITY

- 1. This Statement of Authority relates to an entity named: STERICYCLE, INC.
2. The type of entity is a:

- Corporation
Nonprofit Corporation
Limited Liability Company
General partnership
Limited partnership
Registered limited liability partnership
Business trust
Trust
Registered limited liability limited partnership
Limited partnership association
Unincorporated nonprofit association
Government or governmental subdivision or agency
Other

3. The entity is formed under the laws of: ILLINOIS

4. The mailing address for the entity is: PO BOX 1450, Chicago, Illinois 60690

5. The name and position of each person authorized to execute licenses, and/or instruments conveying, encumbering, or otherwise affecting title to real property on behalf of the entity is:
Jonas Harrison, District Manager

6. (Optional) The authority of the foregoing person(s) to bind the entity is
not limited limited as follows:

7. (Optional) Other matters concerning the manner in which the entity deals with interest in real property.

8. This Statement of Authority is executed on behalf of the entity pursuant to the provisions of Section 38-30-172, C.R.S.

Executed this 9 day of April, 2026.

By: [Signature]

STATE OF Colorado)
County of El Paso) ss.

The foregoing instrument was acknowledged before me this 9 day of April, 2026 by Jonas Harrison as District Manager of Waste Management of Colorado, Inc.
Witness my hand and official seal.



[Signature]
Notary Public
My Commission Expires: 11/13/2029



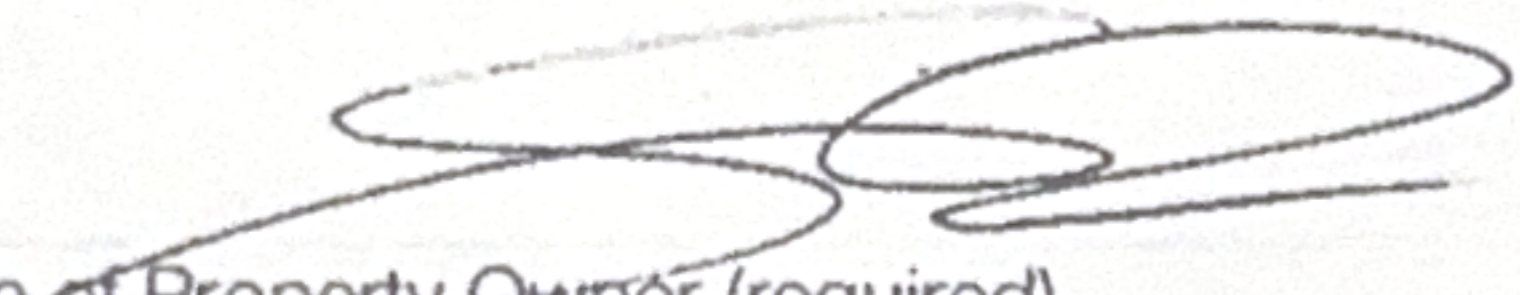
COLORADO SPRINGS PLANNING

Land Use Review

General Owner and Applicant Acknowledgement

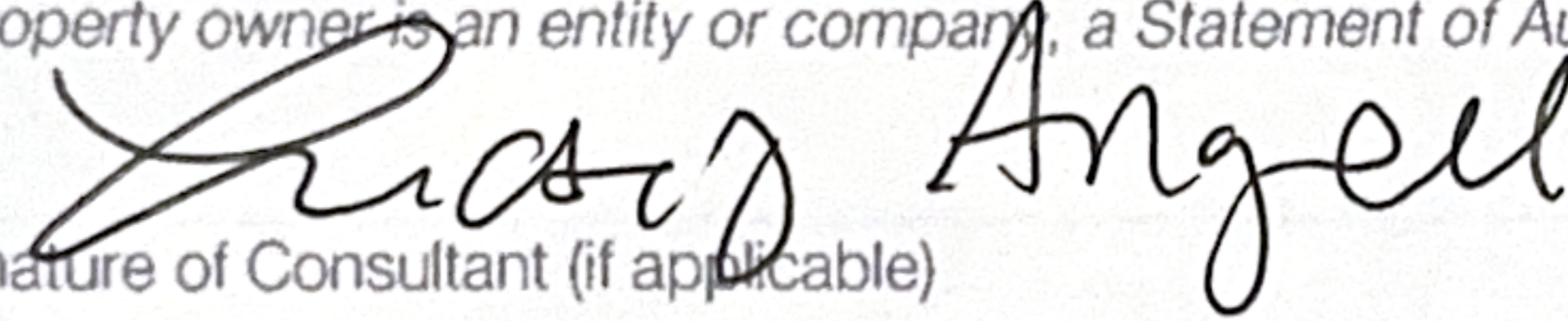
General Owner and Applicant Acknowledgement

The signature(s) hereby certify that the statements made by myself and constituting part of this application are true and correct. I am fully aware that any misrepresentation of any information on this application may be grounds for denial of this application. I agree that if this request is approved, it is issued on the representations made in this submittal, and any approval or subsequently issued building permit(s) or other type of permit(s) may be revoked without notice if there is a breach of representations or conditions of approval. The applicant/owner by his or her signature understands and agrees that he or she is responsible for the completion of all on-site and off-site improvements as shown and approved on the final plan (including landscaping, paving, lighting, etc.) prior to receiving a Certificate of Occupancy.


Signature of Property Owner (required)

If property owner is an entity or company, a Statement of Authority must be provided.

4/9/26
Date


Signature of Consultant (if applicable)

4/10/26
Date

Signature of Developer (if applicable)

Date

Contact Information

Waste Management of Colorado, Inc.

Property Owner

jharri30@wm.com

Property Owner - Email

Civil & Environmental Consultants, Inc.

Consultant

langell@cecinc.com

Consultant - Email

Developer

Developer - Email

Jonas Harrison

Property Owner - Contact Person

505-701-1016

Property Owner - Phone Number

Lindsey Angell

Consultant - Contact Person

916-503-0030

Consultant - Phone Number

Developer - Contact Person

Developer - Phone Number