

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 South Evergreen Park Drive SW, PO Box 47250
 Olympia Washington 98504-7250
 Phone: (360) 664-1222
 Fax (360) 586-1181

RECEIVED

JAN 11 2005

WASH. UT. & TP. COMM

APPLICATION FOR CHARTER BUS/EXCURSION SERVICE CERTIFICATE

Fee: \$150.00

111 0268 232 01	CID	43450	CHA	79347
111 0268 232 02 \$ 150.00	DATE	1/11/05	SAFETY INSP	Yes per Tom
111 0268 232 03			INS/BOND	Yes McVaugh
111 0268 0009278	Docket #	TE-050054	Reg #	US - Yes

THIS APPLICATION IS FOR:

(Check One Only) CHARTER BUS CERTIFICATE EXCURSION SERVICE CERTIFICATE ES-183

NAME OF APPLICANT Sea Tac Motor Coaches, LLC

D/B/A Sea Tac Motor Coaches, LLC

MAILING ADDRESS P.O. Box 38 PHYSICAL ADDRESS 2724 MERIDIAN E.
PUYALLUP WA 98371 EDGEMOND WA 98371

BUSINESS TELEPHONE NUMBER (253) 435-0025 FAX NUMBER (253) 848-7210

UBI # 602 459 032 E-MAIL _____

IF APPLICANT IS A CORPORATION, LIST NAME, TITLES, AND PERCENTAGE OF STOCK OF PRINCIPAL SHAREHOLDERS. IF APPLICANT IS A PARTNERSHIP, LIST NAMES, ADDRESSES, AND PERCENTAGE OF INTEREST OF ALL PERSONS HAVING AN EQUITY IN THE BUSINESSES:
CORBY MBUN 34% FERRY MCCLURE

IF APPLICANT HOLDS ANY OTHER CERTIFICATE OR PERMIT WITH THE COMMISSION, LIST PERMIT NUMBERS:

EQUIPMENT LIST:

LICENSE NUMBER	YEAR AND MAKE OF VEHICLE	SERIAL NUMBER (VEHICLE IDENTIFICATION NUMBER)	SEATING CAPACITY
57416 PR	1997 INTL	IHVBEABM2VH462157	25

DESCRIBE OPERATIONS (Territory) THE ELEVEN
WESTERN STATES

SAFETY COMPLIANCE REVIEW AND QUESTIONNAIRE:

GENERAL

	YES	NO	N/A
Do you have a copy of the laws and rules relating to passenger charter and excursion service carriers?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you been cited within the last three years by the Commission for violations of it rules or laws?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If Yes, explain: _____

Are you familiar with the state motor carrier safety rules?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will management review the carrier's compliance status on a periodic basis?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTIFICATION AND REPORTING OF ACCIDENTS

	YES	NO	N/A
Are you familiar with the Commission accident reporting rule?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you take any action against drivers involved in preventable accidents?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 391 - QUALIFICATION OF DRIVERS

	YES	NO	N/A
Do you have written hiring policies/procedures that are being followed when hiring new drivers?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are oral interviews conducted with new drivers to verify information submitted on their applications?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you have a system established to ensure drivers' medical certificates remain current?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you verify that physicians completing medical certifications are knowledgeable about the instructions for performing and recording driver physical examinations?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you review the results of the health history and physical examination?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you have a system established that will ensure drivers' operating licenses remain current?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you have a system established that will ensure drivers' annual reviews and annual record of violations remain current?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you comply with the road test provisions of Section 391.31?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you maintain and produce complete driver qualification files on drivers?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 392 - DRIVING OF MOTOR VEHICLES

	YES	NO	N/A
Do you have established procedures concerning the use of alcohol and drugs?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a policy for monitoring speed?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 395 - HOURS OF SERVICE OF DRIVERS

	YES	NO	N/A
Can you explain the hours of service limitations, i.e., 10, 15, 60 in 7, 70 in 8?.....	<u>X</u>	_____	_____
Will you file records of duty status in systematic manner?.....	<u>X</u>	_____	_____
Will drivers be required to complete recaps of their records of duty status?.....	<u>X</u>	_____	_____
Will dispatchers be aware of drivers' hours of service prior to trip?.....	<u>X</u>	_____	_____
Will other independent records be compared to drivers records of duty status for accuracy?.....	<u>X</u>	_____	_____
Will you have a system for recording hours of duty status on 100 mile radius drivers?.....	<u>X</u>	_____	_____
Will you have a disciplinary policy for noncompliance with Part 395?.....	<u>X</u>	_____	_____

PART 396 - INSPECTION, REPAIR AND MAINTENANCE

	YES	NO	N/A
Will you have written procedures explaining a systematic, periodic maintenance program?.....	<u>X</u>	_____	_____
Will you periodically review maintenance records for all equipment?.....	<u>X</u>	_____	_____
Will you comply with the vehicle inspection procedure?.....	<u>X</u>	_____	_____
Will you train drivers to perform pre-trip inspections?.....	<u>X</u>	_____	_____
Will you maintain the prior three months vehicle inspection reports on a vehicle?.....	<u>X</u>	_____	_____
Will you maintain a complete maintenance file on all vehicles?.....	<u>X</u>	_____	_____

THE UNDERSIGNED APPLICANT REQUESTS THAT THE WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION MAKE ITS ORDER GRANTING A CERTIFICATE TO OPERATE AS A CHARTER PARTY OR EXCURSION SERVICE CARRIER AS PROVIDED FOR IN RCW 81.70 AND WAC 480-40

Dated at: Edgewood, Washington, 1/8/05
(City or Town) (Month/Day/Year)

Corey Melin
(Name of applicant)

By: Corey Melin
(Signature)

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/8/05 Edgewood, WA
(Date and Place)

Corey Melin
(Signature)