**DRIVER/VEHICLE EXAMINATION REPORT**

**Exh. TC-3**
Docket TV-220321

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**Washington State Patrol**
Commercial Vehicle Enforcement Section
PO BOX 42614
Olympia, WA 98504-2614
360-596-3815 safetynet@wsp.wa.gov

---

**SUPERHEROES MOVING AND STORAGE LLC**
4630 16TH ST E STE B6
FIFE, WA, 98424

**USDOT#:** 03373649  
**Phone#:** (253)328-1012  
**MC/MX#:**  
**Fax#:**

---

**State#:**

**Location:** 4630 16TH STREET EAST B6

**Highway:** FIFE

**County:** PIERCE, WA

**Driver:**

**License#:**

**Date of Birth:**

**CoDriver:**

**License#:**

**Date of Birth:**

**Shipper:** NONE

**Bill of Lading:** NONE

**Cargo:** EMPTY

---

**VEHICLE IDENTIFICATION**

<table>
<thead>
<tr>
<th>Unit</th>
<th>Type</th>
<th>Make</th>
<th>Year</th>
<th>State</th>
<th>Plate #</th>
<th>Equipment ID</th>
<th>VIN</th>
<th>GVWR</th>
<th>CVSA #</th>
<th>CVSA issued #</th>
<th>OOS Sticker</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>TR</td>
<td>MITS</td>
<td>2014</td>
<td>WA</td>
<td>C92303U</td>
<td>3</td>
<td>JL6CRK1A1EK000355</td>
<td>17,995</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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**BRAKE ADJUSTMENTS**

<table>
<thead>
<tr>
<th>Axle #</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Chamber** DISC DISC

---

**VIOLATIONS**

<table>
<thead>
<tr>
<th>Viol Code</th>
<th>Section</th>
<th>Unit</th>
<th>OOS</th>
<th>Citation #</th>
<th>Verify</th>
<th>Crash</th>
<th>Violations Discovered</th>
</tr>
</thead>
<tbody>
<tr>
<td>393.95A</td>
<td>393.95(a)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>No/discharged/unsecured fire extinguisher: NO FIRE EXTINGUISHER IN TRUCK AT THE TIME OF INSPECTION,</td>
</tr>
<tr>
<td>396.17C</td>
<td>396.17(c)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Operating a CMV without proof of a periodic inspection: NO ANNUAL INSPECTION CONDUCTED</td>
</tr>
<tr>
<td>393.9</td>
<td>393.9(a)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Inoperable Required Lamp: 1 OUT OF 3 FRONT CENTER ID LAMPS INOPERATIVE AT THE TIME OF INSPECTION</td>
</tr>
<tr>
<td>393.76</td>
<td>393.76</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Windshield wipers inoperative/defective: WIPER FLUID AT THE TIME OF INSPECTION INOPERATIVE - DID NOT DISPENSE.</td>
</tr>
<tr>
<td>390.21A</td>
<td>390.21(a)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Not marked in accordance with regulations: UTC PERMIT NUMBER NOT DISPLAYED ON BOTH THE RIGHT AND LEFT SIDE OF THE VEHICLE AS REQUIRED.</td>
</tr>
<tr>
<td>393.95F</td>
<td>393.95(f)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>No / insufficient warning devices: MISSING 3 OPERABLE SAFETY TRIANGLES AT THE TIME OF INSPECTION. (THE TWO TRIANGLES PRESENTED WERE BROKEN AND INOPERABLE.)</td>
</tr>
<tr>
<td>396.3A1</td>
<td>396.3(a)(1)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Inspection, repair and maintenance of parts &amp; accessories: ENGINE LIGHT ON DASH STAYS ILLUMINATED - POSSIBLE MALFUNCTION DETECTED.</td>
</tr>
</tbody>
</table>

**HazMat:** No HM Transported.

**Placard:** No

**Cargo Tank:**

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**Special Checks:** No Data for Special Checks

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The undersigned certifies that all violations noted on this report have been corrected and action has been taken to insure compliance with all applicable Federal and State regulations.

Signature Of Motor Carrier: ____________________________  Title: ____________________________  Date: ____________________________

---

**Report Prepared By:** TRACY COBLE  
**Badge #:** WAX825  
**Copy Received By:**
**DRIVER/VEHICLE EXAMINATION REPORT**

Washington State Patrol  
Commercial Vehicle Enforcement Section  
PO BOX 42614  
Olympia, WA 98504-2614  
360-596-3815 safetynet@wsp.wa.gov

Superheroes Moving and Storage LLC  
4630 16th St E Ste B6  
Fife, WA 98424  
USDOT#: 03373649  
Phone#: (253)328-1012  
MC/MX#:  
Fax#:  
State#:  
Location: 4630 16th Street East B6  
Highway: FIFE  
County: PIERCE, WA  
MilePost:  
Origin: FIFE, WA  
Destination: FIFE, WA  
Shipper: NONE  
Bill of Lading: NONE  
Cargo: EMPTY  

**VEHICLE IDENTIFICATION**

<table>
<thead>
<tr>
<th>Unit</th>
<th>Type</th>
<th>Make</th>
<th>Year</th>
<th>State</th>
<th>Plate #</th>
<th>Equipment ID</th>
<th>VIN</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>TR</td>
<td>INTL</td>
<td>2014</td>
<td>WA</td>
<td>C32432U</td>
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<td>020954</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

**BRAKE ADJUSTMENTS**

<table>
<thead>
<tr>
<th>Axle #</th>
<th>Right</th>
<th>Left</th>
<th>Chamber</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1/8</td>
<td>1/8</td>
<td>C-20</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>L-30</td>
</tr>
</tbody>
</table>

**VIOLATIONS**

<table>
<thead>
<tr>
<th>Vio Code</th>
<th>Section</th>
<th>Unit</th>
<th>OOS</th>
<th>Citation #</th>
<th>Verify</th>
<th>Crash</th>
<th>Violations Discovered</th>
</tr>
</thead>
</table>
| 390.21A  | 390.21(a) | 1 | N | N | N | Not marked in accordance with regulations: UTC PERMIT NUMBER NOT DISPLAYED ON BOTH THE RIGHT AND LEFT SIDE OF THE VEHICLE.  
| 393.60C  | 393.60(c) | 1 | N | N | N | Damaged or discolored windshield: DRIVERS SIDE WINDSHIELD CRACKED IN MULTIPLE LOCATIONS (SPIDER WEB) INTERSECTING CRACKS FROM TOP TO BOTTOM AND FLOATING TO PASSENGER SIDE.  
| 393.95F  | 393.95(f) | 1 | N | N | N | No / insufficient warning devices: NO SAFETY TRIANGLES AT THE TIME OF INSPECTION.  
| 393.9    | 393.9(a) | 1 | N | N | N | Inoperable Required Lamp: LEFT SIDE UPPER OUTER CLEARANCE LAMP INOPERATIVE AT THE TIME OF INSPECTION.  
| 393.9H   | 393.9(a) | 1 | Y | U | N | Inoperable head lams: SINGLE VEHICLE WITH BOTH HEAD LAMPS INOPERATIVE ON LOW BEAM. (HIGH BEAM WORKS ONLY ON THE RIGHT SIDE).  
| 393.75A3 | 393.75(a)(3) | 1 | Y | U | N | Tire-flat and/or audible air leak: LEFT SIDE INSIDE TIRE FLAT - NO READING. SHOWN OWNER (RYAN DOHERTY) CAN SHAKE TIRE ON RIM BY HAND. (AXLED)  
| 396.17C  | 396.17(c) | 1 | N | N | N | Operating a CMV without proof of a periodic inspection: NO ANNUAL INSPECTION CONDUCTED ON VEHICLE.  
| 393.95A  | 393.95(a) | 1 | N | N | N | No/discharged/unscrewed fire extinguisher: NO FIRE EXTINGUISHER IN THE TRUCK AT THE TIME OF INSPECTION.  
| 393.45D  | 393.45(d) | 1 | N | N | N | Brake connections with leaks or constrictions: LEFT SIDE AXLE 1 BRAKE HOSE LEAKING AT A PROPER CONNECTION. FAILED AIR TEST.  
| 396.3A1BL | 396.3(a)(1) | 1 | Y | U | N | Brake system pressure loss: FAILED AIR LOSS RATE TEST (RESEVOIR TWO), LOST PRESSURE AND WOULD NOT MAINTAIN OR BUILD.  

Report Prepared By: TRACY COBILE  
Badge #: WAX825  
Copy Received By:  
Page 1 of 2  
03373649 WA WAU013000127
SUPERHEROES MOVING AND STORAGE LLC
4630 16TH ST E STE B6
FIFE, WA 98424

USDOT#: 03373649
MC/MX#: Phone#: (253)328-1012
Fax#: State: 

State:

Location: 4630 16TH STREET EAST B6
Highway: FIFE
County: PIERCE, WA

HazMat: No HM Transported.

MilePost: Shipper: NONE
Origin: FIFE, WA
Destination: FIFE, WA

Bill of Lading: NONE
Cargo: EMPTY

Placard: No Cargo Tank:

Special Checks: No Data for Special Checks.

Violations marked as out of service (OOS) must be repaired before vehicle(s) can be operated. If OOS for brake adjustment, all brakes must be within proper adjustment before vehicle(s) can be operated.

I certify that repairs were made.

Signature Of Repairer X __________________________ Facility: ______________ Date: ____________________

The undersigned certifies that all violations noted on this report have been corrected and action has been taken to insure compliance with all applicable Federal and State regulations.

Signature Of Motor Carrier X __________________________ Title: ______________ Date: ____________________

Report Prepared By:
TRACY COBILE

Copy Received By: X __________________________

03373649 WA WAU013000127
DRIVER/VEHICLE EXAMINATION REPORT

Driver:
License#: State:
Date of Birth:
CoDriver:
License#: State:
Date of Birth:
Shipper: NONE
Bill of Lading: NONE
Cargo: EMPTY

VEHICLE IDENTIFICATION

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<th>Unit</th>
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<tbody>
<tr>
<td>1</td>
<td>TR</td>
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<td>2015</td>
<td>WA</td>
<td>C68688K</td>
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<td>25,999</td>
<td>020953</td>
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</tr>
</tbody>
</table>

BRAKE ADJUSTMENTS

3/17/2022 REVISED COPY EMAIL TO CARRIER TO SIGN & RETURN
396.17(c) added.

VIOLATIONS

<table>
<thead>
<tr>
<th>Violation Code</th>
<th>Section</th>
<th>Unit</th>
<th>OOS</th>
<th>Citation #</th>
<th>Verify</th>
<th>Crash</th>
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</thead>
<tbody>
<tr>
<td>390.21A</td>
<td>✓ 390.21(a)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Not marked in accordance with regulations: UTC PERMIT NUMBER NOT DISPLAYED ON BOTH THE RIGHT AND LEFT SIDE OF VEHICLE AT THE TIME OF INSPECTION.</td>
</tr>
<tr>
<td>396.3A</td>
<td>✓ 396.3(a)(1)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Inspection, repair and maintenance of parts &amp; accessories: ENGINE LIGHT ON DASH STAYS ILLUMINATED ON THE DASH DISPLAY INDICATING A POSSIBLE MALFUNCTION.</td>
</tr>
<tr>
<td>393.95A</td>
<td>✓ 393.95(a)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>No/discharged/unsecured fire extinguisher: NO FIRE EXTINGUISHER IN THE TRUCK AT THE TIME OF THE INSPECTION.</td>
</tr>
<tr>
<td>393.95F</td>
<td>✓ 393.95(f)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>No / insufficient warning devices: 2 OF 3 SAFETY TRIANGLES MISSING AT THE TIME OF THE INSPECTION.</td>
</tr>
<tr>
<td>393.9</td>
<td>✓ 393.9(a)</td>
<td>1</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Inoperable Required Lamp: RIGHT SIDE UPPER OUTER CLEARANCE LAMP INOP/MISSING/DAMAGED.</td>
</tr>
<tr>
<td>393.47A</td>
<td>✓ 393.47(a)</td>
<td>1</td>
<td>Y</td>
<td>U</td>
<td>N</td>
<td>N</td>
<td>Inadequate brakes for safe stopping - Brake Lining condition: AXLE 1 LEFT SIDE BRAKE LININGS CRACKED EXCEEDING 1 1/2 INCHES IN LENGTH. MULTIPLE CRACKS FOUND.</td>
</tr>
<tr>
<td>393.45D</td>
<td>✓ 393.45(d)</td>
<td>1</td>
<td>Y</td>
<td>U</td>
<td>N</td>
<td>N</td>
<td>Brake connections with leaks or constrictions: AXLE 1 LEFT FRONT BRAKE HOSE APPLIED AIR LEAK FROM HOSE OTHER THAN A PROPER CONNECTION (TO THE BRAKE CHAMBER). AIR LOSS RATE TEST OK.</td>
</tr>
</tbody>
</table>

HazMat: No HM Transported.
Placard: No
Cargo Tank: 

Special Checks: No Data for Special Checks.
I certify that repairs were made.

Signature Of Repairer: x________________________
Facility:________________________
Date:________________________

The undersigned certifies that all violations noted on this report have been corrected and action has been taken to insure compliance with all applicable Federal and State regulations.

Signature Of Motor Carrier: x________________________
Title:________________________
Date:________________________

Verbal warning on passenger side windshield - crack/chip starting to craze & spread.