UTILITIES AND TRANSPORTATION COMMISSION

Completed Activity Report Motor Carrier Safety

Upload? Yes No	
1. Investigator(s): Grimm	2. Assignment No.:109200
3. Current Date: October 7, 2009	4. Date of Activity: October 6, 2009
5. Carrier Name: LIONSPRIDE SERVICE LLC	V
6. Permit: <u>THG63586</u>	7. Industry Code:207
8. MOTCAR No.: 1D 5500	
9. DOT No.: USDOT 1532551	10. MC No.:
 11. Destination Check Attached is a copy of the Destination Check Number of buses inspected: # of 9-15 passenge Number of vehicle inspections: Level 1 Describe any special emphasis placed on the de 	Level 2 Level 3 Level 5 stination check and the results: access at the next destination check:
12. Safety Complaint Attach a copy of the Individual Safety Comp What activity did staff complete for this safety Compliance review Technical assistance Number of vehicle inspections: Level Unannounced terminal visit Other (please explain):	complaint: 1 Level 2 Level 5

17 Part B Violations:

Part	Violations	Part	Violations	Part	Violations
382/40		383		387	
390		391	1	392	
395		396		397	

	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT	TRA
Inspections									1		
Defective Vehicles									0	,	
OOS Vehicles									0		
Location	 	 	-						Term		
Level	-	+	 	 					5		

19. Vehic	MC	MB 1-15	MB 16+	SB 1-8	SB 9-15	SB 16+	VAN 1-8	VAN 9-15	TRK	TT.	TRA
Brakes					<u> </u>						
Steering									ļ		
Lights .											
Tires, wheels, rims									<u> </u>	-	
Horn											
Windshield and Wipers											
Mirrors								ļ	<u> </u>	ļ	
Emergency Equip, Exits											
Coupling Devices											
Frame										ļ	
Suspension									ļ	ļ	ļ ——
Exhaust					}			ļ	<u> </u>	ļ	
Other	1	1								<u> </u>	<u> </u>

20. Driver Inspection	Violations:		
	Medical Waiver	Hours of Service	Drivers License
Medical Card	ividati waver		

21. Relevant carrier history, if any:
22. Findings: This is a provisional intrastate household goods carrier. The company should be considered for approval based on management being conversant in the safety regulations and substantial compliance with the FMCSRs. Carrier could anticipate a satisfactory safety rating based on FMCSA criteria.
23. Recommended Action: Recommend approval for permanent authority based on these results. No further action.
Notify the company in writing of the findings by providing a copy of the CR, vehicle inspection report, safety audit or other similar document. Require the company to submit a compliance plan in response to the 15-day letter requirement. Recheck – Compliance review (Date:
 ☐ Send the company a compliance letter. Require a response: ☐ Yes ☐ No ☐ Issue administrative penalties in the amount of \$ ☐ Issue a complaint. ☐ Stop company operations.
24. Is this carrier considered a high risk carrier as a result of this activity? Carrier accident ratio is higher than aggregate ratio. Carrier had an out-of-service ratio 25% or higher at the last vehicle inspection. Carrier had a defect ratio 75% or higher at the last vehicle inspection. Carrier received more than one conditional or unsatisfactory compliance review rating in mothan one of the last four compliance reviews (or less than four if four are not completed). Other (please explain):
25. Additional Comments: This provisional household goods carrier should be considered for permane authority based on findings during the safety compliance review. Submitted for further review by supervisory personnel and senior management. See attached safety compliance review report with comments.

Mr.
Investigator's signature
Initial review by: Date: 10-12.09
Reviewer's recommendation: / gree with recommendation to iscue
Carrier to update MCS-150-abla horspide sustainable Shapping
Carrier to update Mes 150 - abla horspide sustainable Shipping
Final review by: Date: 10/2/09
Reviewer's recommendation: Agree with recommendation:
Approved for perm authority. Close & fale
Thanks Bruce. To the
tran.
Date closed:
CC: Minn
Company name Linspride Service Assignment # 109200
Company name Myspide server Assignment # 10/200
Staff Assigned <u>Mumin</u>

		CUIN	CTON	HTH ITIES	& TRANSPORTA	ATION	COMMISSION - MOTO	R CARRIER SA	AFETY
	US DO			I. LIONSDI	PIDE SERVICES I	LLC			
			Oper	ating (DB/	A):LIONSPRIDE S	SUSTAL	NABLE MOVING & DEL	IVERY	
IC/MX #:	<u></u>			THG6358		ral Tax	ID: 11-3785054 (EIN)		
				view (CR)					
cope:		cipal (, ,	Location of Review	iew/Au	dit: Company facility in t	he U. S.	Territory:
peration				Intrastate		. 			
	Carrier:	N/A	<u>state</u>	Non-HM	Business: Other	•			
	hipper:	N/A		N/A	Gross Revenue:	:	for yea	ar ending:	
	o Tank:		N/A						
ompany		1 Add	roce.						
9331 NE			201						
Portland,	OR 972	20					•		
Contact		•	an Ne				- 500 006 2020		
Phone n	umbers:	(1) 5	03-98	0-4489	(2)		Fax 503-296-2029		
E-Mail A	ddress:								
Company	/ Mailing	Addı	ess:			:	·		
9331 NE	Colfax S	St Ste	201						
Portland,	OR 972	20					·		
Carrier C	lassifica	tion							
	er: Intrast					•			
Cargo Cl	assificat	ion							
	eral Freig			Hou	sehold Goods		•		
Does ca	arrier tra	nspor	t plac	ardable qu	antities of HM?	No			
	M Permit					N/A			
Driver Ir	formation	on							
			nter	Intra	Average trip le	eased	drivers/month: 0		
	100 Mile			1			Total Drivers: 1		
•	100 Mile	-		·			CDL Drivers: 0		
Equipme	### ##################################		0	wned Ter	m Leased Trip Le	eased		Owned Ter	m Leased Trip Leased

Truck

Power units used in the U.S.: 1

Percentage of time used in the U.S.: 100



U.S. DOT #:

State #: THG63586

Review Date: 10/06/2009

Part A

QUESTIONS regarding this report or the Federal Motor Carrier Safety
Regulations should be addressed to: Washington Utilities & Transportation Commission

P.O. Box 47250 Olympia WA 98504-7250 Phone: 360-798-8724 E-mail: bgrimm@wutc.wa.gov

This report will be used to assess your safety compliance.

Person(s) Interviewed

Name: Pan A Nesbitt

Title: Member

Title:

Name:



U.S. DOT #:

State #: THG63586

Review Date: 10/06/2009

Part B Violations

L		1		Drivers/V	ehicles
·	Primary: 391.51(b)(3)	Discovered	Checked		Checked
STATE	CFR Equivalent: 391.51(b)(3)	1	11	1	

Failing to maintain road test certificate in driver's qualification file, or copy of license or certificate the motor carrier accepted as equivalent.

Example

Pan Nesbitt, 09-09-09

Safety Fitness Rating Information:	
Total Miles Operated	5,000
Recordable Accidents	0
Recordable Accidents/Million Miles	0.00

OOS Vehicle (CR): 0

Number of Vehicle Inspected (CR): 1

OOS Vehicle (MCMIS): 0 Number of Vehicles Inspected (MCMIS): 0

i			
Rating Factors		Acute	Critical
	S	0	. 0
	S	0	0
į.	S	0	0
	S	0	0
	N	′ 0	0
Factor 6:	S	-	-
	Rating Factors Factor 1: Factor 2: Factor 3: Factor 4: Factor 5: Factor 6:	Factor 1: S Factor 2: S Factor 3: S Factor 4: S Factor 5: N	Factor 1: S 0 Factor 2: S 0 Factor 3: S 0 Factor 4: S 0 Factor 5: N 0

Null Null



U.S. DOT#:

State #: THG63586

Review Date: 10/06/2009

Part B Requirements and/or Recommendations

- 1. Ensure that each driver qualification file is complete. At a minimum, it should contain a DOT type employment application, background investigation including an initial copy of the driving record, medical certification, and road test or CDL equivalent. Drivers who have been employed at least twelve months should have a current violation list, abstract of driving record and a documented annual review of driving record in file. See 49 CFR Part 391 for more information.
- 2. Ensure that drivers comply with the federal and state hours of service standard found in 49 CFR Part 395. Property carrying drivers are restricted to 11 hours driving and 14 hours on duty following 10 consecutive hours off duty. Instruct drivers in how to comply with these rules as well as the 34 hour reset and 60/70 hour on duty restriction. Monitor hours of service records to prevent violations. Appropriate hours of service standards are important to addressing a major facotr identified in many vehicle crashes—fatigue.
- 3. Ensure that maintenance files properly identify each vehicle with year, make, serial number and tire size. This requirement positively ties the vehicle to that file. The written maintenance record should include date and type of inspection or repair that was performed. Preventive maintenance showed be performed on a regular based on time, mileage, hours operated or other means that may be specified by the manufacturer.
- 4. "Under the Administrative Procedure Act (RCW 34.05) (Laws of 2009, ch. 358), the commission will waive any fines, civil penalties, or administrative sanctions for first-time paperwork violations by a small business, with certain exceptions. One of those exceptions provides that any violation of a substantially similar paperwork requirement (as described in Part B on this form) may result in the imposition of a fine, civil penalty or other administrative sanction. The company will not be entitled to a second waiver of penalties for "first-time" paperwork violations. For additional information on this policy, contact David Pratt, Assistant Director of Transportation Safety 360-664-1100 dpratt@utc.wa.gov.
- 5. Conduct periodic internal reviews of your driver qualification, hours of service control, maintenance, accident analysis/reporting, training, and other safety systems to ensure continued compliance with the FMCSR.



Legal: LIONSPRIDE SERVICES LLC US DOT# Operating (DBA): LIONSPRIDE SUSTAINABLE MOVING & DELIVERY Federal Tax ID: 11-3785054 (EIN) State #: THG63586 Review Type: Compliance Review (CR) - Receipt Location of Review/Audit: Company facility in the U. S. Territory: Principal Office Scope: Interstate Intrastate Operation Types Non-HM Business: Other N/A Carrier: for year ending: **Gross Revenue:** N/A N/A Shipper: Cargo Tank: N/A **Company Physical Address:** 9331 NE Colfax St Ste 201 Portland, OR 97220 **Contact Name:** Pan Nesbitt Fax 503-296-2029 Phone numbers: (1) 503-980-4489 (2) E-Mail Address: Company Mailing Address: 9331 NE Colfax St Ste 201 Portland, OR 97220 **Report Summary** # of Pages Report 2 Part A - General Part B - Violations 1 Part B - Recommendations 1 Review/Audit Receipt Page 5 **Total Pages** Disclaimer: By signing below, I acknowledge that I have received a copy of this review/audit and agree with the total number of pages indicated (above) for each document. My signature does not imply agreement with the findings of the review/audit, however they have been discussed in detail with me. QUESTIONS regarding this report or the Federal Motor Carrier Safety Regulations should be addressed to: Washington Utilities & Transportation Commission P.O. Box 47250 Olympia WA 98504-7250 Phone: 360-798-8724 E-mail: bgrimm@wutc.wa.gov This report will be used to assess your safety compliance. Person(s) Interviewed Title: Member Name: Pan A Nesbitt Title: Name: Code: WA0540 Date: 10/6/2009 Title: 772pm Reported By: Title: rijunek Received By: Capri 6.7.0.20

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10/6/2009 3:26:02 PM

WASHINGTON UTILITIES & TRANSPORTATION COMMISSION - MOTOR CARRIER SAFETY



U.S. DOT#:

State #: THG63586

Review Date: 10/06/2009

Part C

Reason for Review: Other

Intra HHG

Planned Action:

Compliance Monitoring

Safestat Category:

Parts Reviewed Certification:

180 178 171 172 173 177 397 398 399 396 395 387 390 391 392 393 382 383 325

Prior Reviews

Prior Prosecutions

Unsat/Unfit Information

Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule:

Not Applicable

Corporate Contact: Pan A Nesbitt

Corporate Contact Title: Member

Special Study Information:

Remarks:

The carrier was requested to produce the following information at least 48 hours before this compliance review was scheduled:

- * Verification of public liability and property damage insurance, cargo insurance
- * Crash information
- * Driver qualification files
- * Hours of service records
- * Inspection, repair and maintenance records including annual (periodic) inspections

The company maintains supporting documents consisting of bills of lading, daily trip records, roadside inspection reports, and other data.

Pan Nesbitt and office staff are responsible for the supporting documents. They are located at the carrier's principal place of business or other authorized location. Files are maintained by driver, trip or date depending upon the type of record.

Records of duty status could be compared to various supporting documents by checking time, date and location of specific vehicles or drivers.

The international sampling method was used in conducting the compliance review.

The single employed driver has a valid driver's license.

An inspection was conducted on the one owned commercial motor

Inspections used to determine the out of service rate were found on the carrier profile or were taken from actual inspections conducted.

There were no acute violations.

The compliance review was initiated because this is a provisional intrastate residential household goods carrier based in Oregon. The scope of this review was Washington intrastate in nature. The carrier is a new entrant in the federal program. Oregon Department of Transportation will be conducting the safety audit in October 2009 as agent for FMCSA.



U.S. DOT #:

State #: THG63586

Review Date: 10/06/2009

Part C

The carrier also operates interstate and within the Portland OR-Vancouver WA commercial zone. Unified Carrier Registration is current for 2009.

Form E is filed by American Zurich Insurance Company. That carrier also underwrites appropriate levels of cargo insurance.

The carrier does not operate any other motor carriers nor is there a relationship with another carrier.

This carrier was not difficult to locate and management was cooperative. There is substantial compliance with the safety effort although this is a start up operation intrastate with few hauls under the Washington household goods permit.

Verified by:

Yes No **Upload Authorized:** Date: Authorized by: Failure Code: Yes No Uploaded: Date:

DRIVER/VEHICLE EXAMINATION REPORT Report Number: WAU005000058

Inspection Date: 10/06/2009

P.O. Box 42614 Dlympia WA 98504-2614 Phone 360-596-3819 Fax 360-596-3828			·	nspection	e: 03:17 PM End n Level: V - Termi ction Type: None	Time: 03:30 PM nal
IONSPRIDE SERVICES LLO 1331 NE COLFAX ST. STE 2 PORTLAND, OR 97220	201	80.4489	Driver: License#: Date of Birt CoDriver:	h: .		State:
AC/MX#: 676481 State#: THG63586	Phone#: (503)9 Fax#:	MilePost	License#: Date of Birt			State:
.ocation: TERMINAL lighway: >ounty: CLARK, WA		Origin: Destinati		Bill C Carg	of Lading: o:	
VEHICLE IDENTIFICATION	·	-) (IN)	GVWR	CVSA # CVSA Issu	ıed # OOS Sticker
Unit Type Make Year State 1 TR ISU 2000 OR	<u>Plate #</u> T559272	Company # 1	<u>VIN</u> JALC4B148Y7004278	14,500	112925	
BRAKE ADJUSTMENTS						
Axle # 1 2 Right N/A N/A Left N/A N/A						
Chamber HYDR HYDR						•
VIOLATIONS: No Violations	•				Placard: No C	argo Tank:
HazMat: No HM Transported						
Special Checks: No Data fo	r Special Checks.		L to efficient to oddress	indicated hel	ow only if violations/neces	ssary corrections are noted
MOTOR CARRIER: Please sign this ce	rtification and return wi	thin fifteen (15) days fro	om date of inspection, to address	, maioatoa oo.		
MAIL TO: Washington State Patrol Commercial Vehicle Enforcement Secti P.O. Box 42614 Olympia WA 98504-2614	on					
or FAX 360-596-3828			· .•			h Motor Corrier Safety and
or FAX 360-596-3828 The undersigned verifies that all violatic Hazardous Materials Regulations insofaregulations noted for each day of nonco	al as tiles are abbincani	have been corrected a e to motor carriers and		ire compliance to comply will	· _	iolations under the
Signature Of Repairer X:			Facility:			
DRIVER: This report must be furnished	to the Motor Carrier w	hose name is listed on	this report.	DEDORT	·	
THE FOLLOWING MUST BE MET ON			CTIONS ARE NOTED ON THIS	REPORT.		
VEHICLE REPAIR: All noted defects at	nd violations must be co	orrected or repaired.				•
Signature Of Motor Carrier X:			Title:		[Date:
					•	
•						
			,			

Report Prepared By:
Grimm's
X

VASHINGTON STATE PATROL

Badge #: Copy J540

Copy Received By:

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