



**APPLICATION FOR CERTIFICATE OF PUBLIC
CONVENIENCE TO OPERATE AS A SOLID WASTE
COLLECTION COMPANY UNDER CHAPTER 81.77 RCW**

1300 South Evergreen Park Drive SW
P.O. Box 47250
Olympia, WA 98504-7250

TOLL FREE 1-888-606-9566 PHONE 360-664-1222
FAX 360-586-1181 or 360-586-1118
TTY 360-586-8203 TTY TOLL FREE 1-887-210-5963
WEBSITE: www.wutc.wa.gov

The UTC has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1133.

Type of Solid Waste Authority Requested	Fee Required
<ul style="list-style-type: none"> • <u>Expedited Temporary Authority</u> (to meet an urgent need for up to thirty days) - Complete entire application and Attachment A (WAC 480-70-136) 	\$ 25
<ul style="list-style-type: none"> • <u>Temporary Authority</u> (to meet an immediate or urgent need) - Complete entire application and Attachment A 	\$ 25
<u>New Permanent Authority</u> (including extension of authority)- (check appropriate box below) Complete entire application and submit a proposed tariff as outlined in the standard tariff form <ul style="list-style-type: none"> • New Certificate • Extension of Existing Certificate No. G-_____ 	\$200
<u>Permanent Authority to Transfer</u> (WAC 480-70-090) (check appropriate box below) - Complete entire application and Attachments B <ul style="list-style-type: none"> • All of Certificate No. G- <u>191</u> • Portion of Certificate No. G-_____ 	\$200
<ul style="list-style-type: none"> • <u>Reinstatement of Cancelled Certificate</u> (must be filed within 30 days of cancellation) -Include a statement justifying the reinstatement and complete sections 1, 2 and 8 	\$200
<ul style="list-style-type: none"> • <u>Name Change</u> - does not include changes resulting in change in ownership - Complete section 1 and Attachment C 	\$ 35
<ul style="list-style-type: none"> • <u>Mortgage of Certificate</u> - Complete section 1 and Attachment D 	\$ 35
<u>Lease of Authority</u> - Complete entire application and Attachment B <ul style="list-style-type: none"> • All of Certificate • Portion of Certificate No. G - _____ 	\$200

RECEIVED
JUL 25 2003
WASH. UT. & TP. COMM.

SECTION 1 - APPLICATION INFORMATION UBI # 600 482 917 ^{VOX}

Name of Applicant: <u>TOM H COURTNEY</u>	
Trade Name(s) (if applicable): <u>STEHEKIN MAINTENANCE AND MACHINERY</u>	
Phone Number: <u>509 682 2493</u>	Fax Number: () <u>SAME</u> E-Mail:
Business Address Street <u>1228 W WOODIN AVE</u>	Mailing address (if different from Business Address) Street <u>PO BOX 2638</u>
City <u>CHELAN</u>	City <u>Chelan, WA</u>
State/Zip <u>WA. 98816</u>	State/Zip <u>Chelan, WA 98816</u>

FOR OFFICIAL USE ONLY			
Date Filed: <u>7/25/03</u>	Staff Assigned: <u>TS</u>	Motcar: <u>41598</u>	Permit Issued G- <u>191</u>
Tariff: <u>Not Needed for Bonnie</u>	Insurance:	Contract: <u>TS</u>	DOL/SOS: <u>TS</u>
Application: <u>GA-79206</u>	RMS Docket #: <u>031916</u>	Related App ID:	Map: <u>Not Needed for Bonnie</u>
Text approved for docket	Reception #: <u>0000500</u>	227-02: <u>20.00</u>	032-05:

Old Motcar: 4799

SECTION 2 - BUSINESS INFORMATION

Type of business structure:

Individual

Partnership

Corporation

Other(LP, LLP, LLC)

UBI No.

List the name, title, and percentage of partner's share or stock distribution for major stockholders:

Name	Title	Stock Distribution or Percentage of Shares
TOM COURTNEY	OWNER	100 %
JIM COURTNEY	OWNER	0 %

Indicate below the commodity to be hauled and the territory in which you wish to operate. PLEASE NOTE Territory must be described using boundaries such as streets, avenues, roads, highways, townships, ranges, city limits, county boundaries or other geographic descriptions. In addition to describing the territory, you must file a map that meets the requirements of WAC 480-70-056 and clearly shows the described territory.

Haul GARBAGE AND REFUSE Both COMPACTED AND LOOSE FROM UNITED STATES NATIONAL PARK SERVICE COLLECTION SITE IN STEHEKIN TO LANDFILL SITES IN CHELAN COUNTY

State below the conditions that justify the granting of this application. If you are applying for temporary certificate authority, be sure your statement addresses and supports the question of "immediate and urgent need."

GRANTING OF THIS APPLICATION WOULD FORMALIZE THE BUSSINESS STATUS BETWEEN THE EXISTING PERMIT AND THE CURRENT BUSINESS REGISTRATION AND LICENSE WITH THE STATE OF WASHINGTON

Do you currently hold, or have you ever held, a solid waste certificate?

No Yes If yes, please indicate your certificate number: G-191

Have you ever applied for and been denied a certificate to transport solid waste?

No Yes If yes, please explain:

Please tell us about your experience and knowledge of transportation or solid waste, including motor carrier driver and equipment safety requirements.

Have you been cited for violation of state laws or Commission rules?

No Yes If yes, please explain:

SECTION 6 – SAFETY AND OPERATIONS

In each of the categories show below, list the person and position responsible for understanding and complying with the Federal Motor Carrier Safety Regulations (FMCSR) and Washington State laws and rules. Please refer to the WAC rules, Fact Sheets, and publication "Your Guide to Achieving a Satisfactory Safety Rating" for assistance with requirements that may apply to your specific operations.

SAFETY RESPONSIBILITIES

COMMERCIAL DRIVERS LICENSE (CDL) REQUIREMENTS (Title 49, Code of Federal Regulations Part 383) Any driver who operates a vehicle that meets the definition of a commercial motor vehicle, as defined in Part 383, must have a valid CDL.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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DRIVER QUALIFICATION REQUIREMENTS (Title 49, Code of Federal Regulations Part 391) Driver's must meet minimum qualification requirements and each company must maintain driver qualification files for each driver.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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DRIVERS HOURS OF SERVICE (Title 49, Code of Federal Regulations Part 395) Drivers must maintain logs and each company must maintain true and accurate hours of service records for each driver.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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CONTROLLED SUBSTANCES AND ALCOHOL TESTING (Part 382) All persons who drive commercial vehicles requiring a CDL must be in a Controlled Substance and Alcohol Testing program that complies with the FMCSR in 49 CFR Part 382 and 49 CFR Part 40.

Each company will have in place a system for complying with FMCSR governing alcohol and controlled substances testing requirements (49 CFR Part 382 and 49 CFR Part 40).

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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INSPECTION, REPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396) Every motor carrier shall systematically inspect, repair, and maintain all motor vehicles subject to its control.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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OPERATIONAL RESPONSIBILITIES

List the person and/or position responsible for understanding and complying with the requirements of each category shown below.

TARIFF RATES AND CHARGES (WAC 480-70-226 through WAC 480-70-351) Companies must file with the Commission a tariff showing all rates and charges it will charge its customers, together with rules that govern how rates and charges will be assessed.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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ANNUAL REPORTS and REGULATORY FEES (WAC 480-70-071 & 076) Companies must annually file a report of their financial operations and pay regulatory fees.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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BIOMEDICAL WASTE (WAC 480-70-426 through 476) Companies that transport biomedical waste must handle and transport that waste according to the appropriate requirements of the federal hazardous materials regulations (49 CFR Parts 170-189) and the additional requirements in these rules.

Name:	Position:
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CUSTOMER SERVICE –Person responsible for customer service complaints, customer notice requirements, and compliance with county solid waste plans.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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STATE OF WASHINGTON – general laws, rules and regulations: Individuals and companies doing business in the state of Washington must comply with the regulations of local, state, and federal agencies. Please state the name and position of the person in your organization who will be responsible for ensuring compliance with the laws of the state of Washington, such as, but not limited to: Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, Unified Business Identifier (UBI number), fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Transportation (over-size or over-weight permits); Department of Revenue and Internal Revenue Service (taxes); and Employment Security.

Name: <u>TOM COURTNEY</u>	Position: <u>OWNER</u>
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SECTION 7 – HEARING INFORMATION

If the Commission assigns this application for formal hearing, estimate the number of witnesses you will present and the amount of time you will need for your presentation.	
Number of witnesses:	Amount of time:
Will an attorney be representing you? If yes, complete the following:	
Attorney's name:	Attorney's phone number:
Attorney's address:	Fax Number:
Street	E-mail:
City, State, Zip	

TYPE OF PAYMENT:

<input checked="" type="radio"/> Check	<input type="radio"/> Money Order	<input type="radio"/> AMEX	<input type="radio"/> Discover	<input type="radio"/> MasterCard	<input type="radio"/> Visa																				
Credit Card Information:																									
<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>																									
Expiration Date: _____ Amount: <u>200.00</u>																									

SECTION 8 – DECLARATION OF APPLICANT:

I understand that filing this application **does not** in itself constitute authority to operate as a solid waste collection company.

As the applicant for a solid waste collection company certificate, I understand the responsibilities of a solid waste collection company, and I am in compliance with all local, state, and federal regulations governing business in the state of Washington.

I certify under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

I certify that I am authorized to execute and file this document.

Printed name of applicant: Tom H Courtney

Signature of Applicant: Tom Courtney

Date, County, State: 7-22-03 / CHELAN WA.

ATTACHMENT B

JOINT APPLICATION FOR TRANSFER OR LEASE OF CERTIFICATED AUTHORITY

This attachment must be completed when filing a joint application for permission to transfer or lease rights under Certificate of Public Convenience and Necessity.

Certificate Number G- 191

Check appropriate box:

- Transfer All* Transfer Portion* Lease All** Lease Portion**

COURTNEY, THOMAS AND JAMES
Current Name on Certificate (Seller/Lessor)

TOM AND JIM'S TRANSPORTATION
Current Trade Name on Certificate (Seller/Lessor)

P.O. Box 64 509 682 2493
Address (Seller/Lessor) Phone Number

Fax: NONE E-mail: NONE

- Have all fines and /or penalties been paid? No Yes
Has the closing annual report been filed? No Yes

- Does the buyer/lessee agree to begin service as soon as the Commission authorizes the transfer or lease?
 Yes
 No, if not, then when? _____

- If the commission assigns this application for formal hearing, does both the seller/lessor and the buyer/lessee agree to be present at the hearing?
 Yes
 No

Both the seller/ lessor and the buyer/lessee certify that this application is not made for the purpose of hindering, delaying or defrauding creditors.

This application must include a map and copy of the certificated authority to be transferred/leased. If applying for permission to transfer or lease a portion of the certificated authority, then the application must include a map and description of both the portion to be transferred/leased and the portion to be retained by the existing certificate holder.

We, as applicants, hereby jointly declare and affirm that all information is true to the best of our knowledge.

James Court
Seller's/Lessor's Signature

7/21/03 CHELAN WA.
Date, County, State

Tom Courtney
Buyer's/Lessee's Signature

7-21-08 CHELAN WA.
Date, County, State

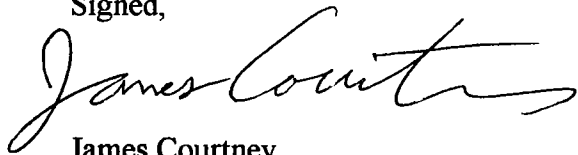
*If this application is for transfer, please attach a copy of the sales or other agreement to sell.

**If this application is to lease, please attach a copy of the executed lease agreement.

To Whom It May Concern:

Whereas: It is necessary to have a valid contract with the USDI National Park Service to provide garbage and refuse collection and transportation service, and Tom H. Courtney, Stehekin Maintenance and Machinery is currently under contract to provide this service, I find Certificate No. G 191, with WUTC of no value and hereby transfer any rights there may be to Tom H. Courtney.

Signed,

A handwritten signature in cursive script that reads "James Courtney". The signature is written in black ink and is positioned above the printed name.

James Courtney
July 21, 2003



Certificate No. G 191

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

Certificate of Public Convenience and Necessity
for the Operation of a
Garbage and Refuse Collection Company

Order M. V. G. No. 973

THIS IS TO CERTIFY: That

Courtney, Thomas & James G-191
Tom & Jim's Transportation
P O Box 64
Stehekin WA 98852 D-3

is authorized to operate motor vehicles as a GARBAGE AND REFUSE COLLECTION COMPANY in the transportation of commodities and in the territory described herein. This certificate is issued pursuant to and subject to the restrictions of Chapter 295 of the Laws of 1961 and acts amendatory thereof and supplemental thereto and the rules and regulations of the Washington Utilities and Transportation Commission adopted thereunder.

GARBAGE AND REFUSE COLLECTION SERVICE consisting of compacted and packaged solid waste from Stehekin to landfill sites in Chelan County under contract with the UNITED STATES NATIONAL PARK SERVICE.

M.V.G. No. 973

MAR 2 1979

Dated at Olympia, Washington, MAR 9 1979, 19.....

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

By *Thomas Hunter*

CLASS "B"

RECEIVED (\$1,000,000 and Under Regulated Intrastate Gross Operating Revenue)

MAY 01 2003

WASH. UT. & TP. COMM.

OR

CLASS "C"

(Specialized Carriers)

SOLID WASTE COLLECTION COMPANIES

ANNUAL REPORT

COURTNEY, THOMAS & JAMES STEHEKIN MAINTENANCE AND MACHINERY, PO BOX 64 STEHEKIN, WA 98852

Transfer

Individual s/b Tom Courtney dba Stehekin Maint- enance and machinery

ENTERED INTO COMPUTER

MAY 01 2003

** Need new insurance **

Full name and address of Company

Correct name and address, if different than shown

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION for the YEAR ENDED DECEMBER 31, 2002

-> OWNERS Brothers

Inquiries concerning this Annual Report should be addressed to:

NAME: Thomas Courtney TITLE: OWNER ADDRESS: PO Box 64 CITY: Stehekin STATE: WA ZIP: 98852 TELEPHONE: 509 689-2493 FAX: 509 689-2493 E-MAIL:

The company must notify the Commission, in writing, of any changes to the above information.

TYPE OF PAYMENT - DO NOT SEND CASH IN THE MAIL

X Check ___ Money Order ___ AMEX ___ Discover ___ Visa ___ MasterCard

For Commission Use Only

Credit Card Authorization #:

Credit Card Number:

Expiration Date Month/Year

CERTIFICATION: I, the undersigned, under penalty for false statement, certify, execute on behalf of the applicant, and that I agree to pay the above total amount

Name (Printed)

Signature

For Comm

Reception Number: 0019099 227-11:

227-01: 1.00 032-05:

Original to be mailed to the Washington Utilities and Transport Web Site: www.

250

6-191



Att: Iammy



United States Department of the Interior

NATIONAL PARK SERVICE

North Cascades National Park Service Complex
7280 Ranger Station Road
Marblemount WA 98267IN REPLY REFER TO:
S72

October 3, 2002

Stehekin Maintenance and Machinery
Attn: Tom Courtney
PO Box 64
Stehekin, WA 98852-0064

Reference: Contract #C9475005001, Garbage removal

Dear Mr. Courtney,

Effective today, contract number C9475005001 for solid waste collection and removal from Stehekin has been awarded to you for Option Year 3 (10/1/02 through 9/30/03). Enclosed are two copies of the contract modification, which authorizes expenditures of up to \$28,000. Please sign both and return one to me. All work must be performed in accordance with the terms, conditions, and specifications of the original contract.

I have requested the official the wage determination provided by the Department of Labor, pursuant to the Service Contract Act. In the meantime, I would like to e-mail you an unofficial rate for your use, since to print it would take 20 pages. Please provide me with an e-mail address. If the wage rates increase your costs for this work, FAR clause 52.222-44 "Fair Labor Standards Act and the Service Contract Act - Price Adjustment" applies.

Thank you for providing me with the fax of your current insurance certificates. I am concerned that neither certificate lists the Insured as Stehekin Maintenance and Machinery and don't understand the difference(s) between the two policies. Please have Slaugenhaupt Agency mail the originals to me, showing Stehekin Maintenance as the Insured, and call me to explain the different policies.

If you have any questions regarding this letter, please contact me at 360/873-4590 x11. I am in the office between 8:30 am and 12:30 pm daily.

Sincerely,

Sarah J. Welch
Administrative Contracting Officer

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE

Page

1 of 2

2. AMENDMENT/MODIFICATION NO.
0005

3. EFFECTIVE DATE
10/03/2002

4. REQUISITION/PURCHASE REQ. NO.

5. PROJECT NO. (If applicable)

6. ISSUED BY:
PWR - NOCA North Cascades NPS Complex
7280 Ranger Station Road,
Marblemount, WA 98267-9702

CODE 9475

7. ADMINISTERED BY (If other than item 6)

CODE

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and Zip Code)

Stehakin Maintenance & Machin
PO Box 64
Stehakin, WA 98852-0064

9A. AMENDMENT OF SOLICITATION NO

9B. DATED (SEE ITEM 11)

(X) 10A. MODIFICATION OF CONTRACT/ORDER NO. C9475005001

(X) 10B. DATED (SEE ITEM 13)
10/01/1999

CODE

FACILITY CODE

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers is extended, is not extended.

Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:

- (a) By completing items 8 and 15, and returning _____ copies of the amendment;
 - (b) By acknowledging receipt of this amendment on each copy of the offer submitted;
 - (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers.
- FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)

2003 - - - 9476 - - 252Z - - MZB - - - 3000 - - - - - \$28,000.00

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

- CHECK ONE
- A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
 - B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
 - C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
By mutual agreement, pursuant to FAR 52.217-9, Option to extend the term of the contract
 - D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor is not, is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

The government hereby exercises its option for garbage collection and disposal services for the period 10/1/02 to 9/30/03. The schedule prices have been modified from the original due to increased prices at the Chelan county transfer station, and are as follows:

Boxed refuse: \$55.05/cy
Loose trash: \$46.76/cy
Recyclables: \$25.47/cy

Except as provided herein, all terms and conditions of the document referenced in item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15. NAME AND TITLE OF SIGNER (Type or print)
JOHN COURTNEY
CONTRACTOR/OFFEROR
John Courtney
(Signature of person authorized to sign)

15C. DATE SIGNED
10-15-02

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)
Sarah J. Welch
16B. United States of America
BY *Sarah J. Welch*
(Signature of Contracting Officer)

16C. DATE SIGNED
10/03/2002

NSN 7546-01-152-2070
PREVIOUS EDITION
UNUSABLE

Tom H. Courtney d/b/a Stehekin Maintenance and Machinery
GA-79206
Motcar: 41598
TG-031196

Application for authority to transfer all rights under Certificate No. G-191, standing in the name of Thomas and James Courtney d/b/a Tom & Jim's Transportation to Tom H. Courtney d/b/a Stehekin Maintenance and Machinery. The authority to be transferred is as follows:

GARBAGE AND REFUSE COLLECTION SERVICE consisting of compacted and packaged solid waste from Stehekin to landfill sites in Chelan County under contract with the UNITED STATES NATIONAL PARK SERVICE.