RECWASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

JAN 2 6 2004

1300 South Evergreen Park Drive SW, PO Box 47250

Olympia Washington 98504-7250

WASH. UT. & TP. COMM.

Phone: (360) 664-1222 Fax (360) 586-1181

APPLICATION FOR CHARTER BUS/EXCURSION SERVICE CERTIFICATE

	Fee: S	\$150.00	ES-182
111 0268 232 01	CID 4	/230 CHA	79248
111 0268 232 02 /50	D-00 DATE -	26-04 SAFET	
111 0268 232 03	ÒOO	05455 INS/BC	ND C
111 0268	Rogide	e - Dor	Ret # TE-040/0
			<u> </u>
THIS APPLICATION IS FO	R:		
(Check One Only) [] Ch	HARTER BUS CERTIFICATE	[X] EXCURSION SERV	/ICE CERTIFICATE
NAME OF APPLICANT SE	ATAC SHUTTLE, LLC		
D/B/A- WHIDBEY	CHARTER AND EXCURSION		
MAILING PO BOX 28	95	PHYSICAL 132	21 SW BARLOW ST
ADDRESS OAK HARB	OR, WA 98277	ADDRESS	K HARBOR, WA 98277
	,	OA.	KTIARDON, WA 30211
DI ISIMESS TELEDI IONE NUI	MPED (200) 070 4000		
BUSINESS TELEPHONE NUI		FAX NUMBER (360) 323-8894
UBI# 602 283 265	E-MAIL john@seatacshut	tle.com	
SHAREHOLDERS. IF APPLI	RATION, LIST NAME, TITLES, A CANT IS A PARTNERSHIP, LIS AN EQUITY IN THE BUSINESSI	T NAMES, ADDRESSES, AND	OF PRINCIPAL PERCENTAGE OF INTEREST
JOHN J. SOLIN, PRESIDENT MICHAEL C. LAUVER, VICE IF APPLICANT HOLDS ANY (C-1077	, 95% OF SHARES. PRESIDENT, 5% OF SHARES DTHER CERTIFICATE OR PER	MIT WITH THE COMMISSION,	LIST PERMIT NUMBERS:
EQUIPMENT LIST:			
LICENSE NUMBER	YEAR AND MAKE OF VEHICLE	SERIAL NUMBER (VEHICLE IDENTIFICATION NUMBER)	SEATING CAPACITY
A98573T	2003 DODGE SPRINTER	WD5WD642235467013	9 PAX
A98575T	2003 DODGE SPRINTER	WD5WD642235507391	9 PAX
······································			

DESCRIBE OPERATIONS (Territory) EXCURSION BUS SERVICE IN THE STATES OF WASHINGTON, IDAHO, OREGON AND PROVINCE OF BRITISH COLUMBIA .

SAFETY COMPLIANCE REVIEW AND QUESTIONNAIRE:

GENERAL

Do you have a copy of the laws and rules relating to passenger charter and excursion service carriers?	YES	NO	N/A
Have you been cited within the last three years by the Commission for violations of it rules or laws?.		_x_	
If Yes, explain:			
Are you familiar with the state motor carrier safety rules?	_x		
Will management review the carrier=s compliance status on a periodic basis?	_x		
NOTIFICATION AND REPORTING OF ACCIDENTS			
Are you familiar with the Commission accident reporting rule?	YES _X	NO	N/A
Will you take any action against drivers involved in preventable accidents?	_X		
PART 391 - QUALIFICATION OF DRIVERS	YES	NO	N/A
Do you have written hiring policies/procedures that are being followed when hiring new drivers?	_X		 .
Are oral interviews conducted with new drivers to verify information submitted on their applications?.	_X		
Will you have a system established to ensure drivers= medical certificates remain current?	_x_		
Will you verify that physicians completing medical certifications are knowledgeable about the instructions for performing and recording driver physical examinations?			
Will you review the results of the health history and physical examination?	x		
Will you have a system established that will ensure drivers= operating licenses remain current?	_x_		
Will you have a system established that will ensure drivers= annual reviews and annual record of violations remain current?	_x	·	
Will you comply with the road test provisions of Section 391.31?			
Can you maintain and produce complete driver qualification files on drivers?	_X		
PART 392 - DRIVING OF MOTOR VEHICLES	YES	NO	N/A
Do you have established procedures concerning the use of alcohol and drugs?	x_		
Do you have a policy for monitoring speed?	X		

PART 395 - HOURS OF SERVICE OF DRIVERS

	YE	S NO	N/A
Can you explain the hours of service limitations, i.e., 10, 15, 60 in 7, 70 in 8?	ر	<u> </u>	
Will you file records of duty status in systematic manner?	x	<u> </u>	
Will drivers be required to complete recaps of their records of duty status?	x	<u> </u>	
Will dispatchers be aware of drivers= hours of service prior to trip?	x		
Will other independent records be compared to drivers records of duty status for	accuracy?x	<u> </u>	
Will you have a system for recording hours of duty status on 100 mile radius drive	ers?x		
Will you have a disciplinary policy for noncompliance with Part 395?	ر	<u> </u>	
PART 396 - INSPECTION, REPAIR AND MAIN	ITENANCE		
, and the second se	YES	NO NO	N/A
Will you have written procedures explaining a systematic, periodic maintenance p	orogram?X_		
Will you periodically review maintenance records for all equipment?	X_	<u></u>	
Will you comply with the vehicle inspection procedure?	X_		
Will you train drivers to perform pre-trip inspections?	x_		
Will you maintain the prior three months vehicle inspection reports on a vehicle?.	x_		
Will you maintain a complete maintenance file on all vehicles?	x_		
THE UNDERSIGNED APPLICANT REQUESTS THAT THE WASHINGTO TRANSPORTATION COMMISSION MAKE ITS ORDER GRANTING A CI CHARTER PARTY OR EXCURSION SERVICE CARRIER AS PROVIDED	ERTIFICATE TO OPER	ATE AS	A C 480-40
	January 19, 2004 (Month/Day/Year)		
	SEATAC SHUTTLE, LL Name of applicant)	.C	
Ву:	Signature)		
I certify (or declare) under penalty of perjury under the laws of the state of and correct.	Washington that the for	egoing is	s true
Oak Harbor, Washington (Date and Place)	<u>-</u>		

Insurance form "E" on file under cert # C-1077 WUTC vehicle inspection complete, inspection report attached

Washington State Potrol	ASS16D#103331	Special Praise While HPRICIPA
UNIFORM DRIVER/V	EHICLE INSPECTION REP	1148029
PERSONNEL NO. DIST / DET	LEVEL: 1 2	3 5
DATE TIME (MILITARY) BEGUN OC	TIME (MILITARY)	HAZARDOUS MATERIALS
LOCATION: SR/MP LERMINAL	SCALEHOUSE NO. CNTY CODE REPORT	TABLE QTY? Y N HAZARDOUS WASTE? Y N ARD REQUIRED? Y N CARGO TANKS? Y N
CARRIER NAME (Include DBA when applicable)	HTTICE, LLC,	
ADDRESS O. BOX 2	STATE ZIP CODE INTERSTATE	E DOT NO. ICC NO.
OAK HARBOL	_ W4 98277 YES (NO DRIVER!	11001101
DATE OF BIRTH MED. CERT.	LICENSE NO. Y N SHIPPER NAME	STATE EXP. YEAR SHIPPING NO.
/ / WAIVER	Y N VEHICLE	
REGISTERED OWNER NAME/ADDRESS WUNIT TYPE YEAR/MAKE	CO. UNIT NO.	10 AS PBT RATE
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REAR SECTION	VENIEN UNIX DISCE VELOS (20P 700)	WIELL .

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HILD OWLY THE PRONT SECTION HAS A DEVELUE FROM

CONTROLL SECTION WENT ON DISCONNECT.

CVENER SECTION WENTS CROP TO

Which may not be operated until 0 / S defects noted above are repaired.

Driver may not drive until in compliance.

OFFICER SIGNATURE

JACONS

ONS

Companie

UNIT 4

NOIC NO.

Washington State Po	t ròl 17	^I SSIOD#/C	133	Special Profest	NG) ADV 11:54
UNIFORM DRI			•	RT.	.148030
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DATE OF BIRTH	MED. CERT. Y N		SE NO.		STATE EXP. YEAR PING NO.
	WAIVER Y N		LESSA		
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UNIT TYPE	B/ODE	co. UNIT NO.	Lic	ENSE NO. / VIN NO.	STATE
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1 . 2	3 4	E 6 7			
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CFR		VIOLATIONS	D	1 2 3	4 Unit #s Complied
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	CALLED CA.	- TANKET .	Nemiz Fre	NOW NEE	05 000 10
VSA-DECALS JUNION UN	NT 2	UNIT 3	UNIT 4	NOIC NO	
1162049 1	e operated until O / S	DRIVER SIGNATURE		NOIC NO.	
defects noted abo		OFFICER STENATURE	Maron	nlet	

SEATAC SHUTTLE, LLC FINANCIAL STATEMENT AS OF JANUARY 19, 2004

ASSETS		LIABILITIES		
Cash in Bank and on hand	\$15,000	Salaries/Wages Payable	\$2,500	
Notes Receivable	\$	Accounts Payable	\$1,000	
Accounts Receivable	\$	Notes Payable	\$70,000	
Investments	\$	Mortgages Payable	\$	
Other Current Assets	\$	Contracts and Bonds Payable	\$	
Prepaid Expenses	\$	Other	\$	
Land and Buildings		TOTAL LIABILITIES	\$	
Equipment (buses)	\$75,000	NET WORTH	·	
Office Furniture	\$2,000	Preferred Stock	\$	
Other Equipment	\$2,000	Common Stock	\$	
Other Assets-Letter of Credit	\$50,000	Retained Earnings	\$	
	\$	Capital	\$70,500	
TOTAL ASSETS	\$144,000	TOTAL LIABILITIES AND NET WORTH	\$144,000	