

# 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

## APPLICATION FOR CHARTER BUS/EXCURSION SERVICE CERTIFICATE

Fee: \$150.00

111 0268 232 01	CID	35496	CHA	79327
111 0268 232 02	DATE	11/16/04	SAFETY INSP	OK per Tom McVaugh
111 0268 232 03		0008932	INS/BOND	OK
111 0268		Reg fees - \$25		Docket # TE-042026

THIS APPLICATION IS FOR:

(Check One Only)  CHARTER BUS CERTIFICATE  EXCURSION SERVICE CERTIFICATE

NAME OF APPLICANT ROAD RUNNER EXPRESS INC. CH-465

D/B/A ROAD RUNNER EXPRESS INC. CHARTERS

MAILING ADDRESS PO Box 1572 PHYSICAL ADDRESS 111 STATESMAN  
WALLA WALLA WA WALLA WALLA WA  
99362 99362

BUSINESS TELEPHONE NUMBER <sup>509</sup> 386-4983 FAX NUMBER (509) 525-2219

UBI # 601 834 286 E-MAIL dalke@charter.net

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:

ROBERT STEVEN DALKE PRESIDENT 50%  
HEA-KYUNG DALKE SECRETARY 50%

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

CC 49050

EQUIPMENT LIST:

LICENSE NUMBER	YEAR AND MAKE OF VEHICLE	SERIAL NUMBER (VEHICLE IDENTIFICATION NUMBER)	SEATING CAPACITY
<u>OREGON A851535</u>	<u>2000</u>	<u>4U2ABFAC6Y0G19365</u>	<u>33</u>

VISA CARD #

EXPIRES

#172098

Decal # 055701 - passed inspection

DESCRIBE OPERATIONS (Territory) WASHINGTON STATE  
Oregon STATE

**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?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you file records of duty status in systematic manner?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will drivers be required to complete recaps of their records of duty status?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will dispatchers be aware of drivers' hours of service prior to trip?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will other independent records be compared to drivers records of duty status for accuracy?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you have a system for recording hours of duty status on 100 mile radius drivers?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will you have a disciplinary policy for noncompliance with Part 395?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART 396 - INSPECTION, REPAIR AND MAINTENANCE

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

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: WALLA WALLA, Washington, 11/16/04  
(City or Town) (Month/Day/Year)

ROBERT STEVEN DALKE  
(Name of applicant)

By: Robert Steven Dalke  
(Signature)

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

WALLA WALLA WA  
11-16-04  
(Date and Place)

Robert Steven Dalke  
(Signature)

STATE OF  
WASHINGTON**MASTER LICENSE SERVICE**  
PO Box 9004 • Olympia, WA 98507-9004 • (360) 864-1400  
**REGISTRATIONS AND LICENSES**

DOMESTIC PROFIT CORPORATION

Unified Business ID #: 601 834 286  
Business ID #: 1  
Location: 1  
Expires: 11-30-2005ROAD RUNNER EXPRESS, INC.  
ROAD RUNNER EXPRESS INC  
811 STATESMAN ST  
WALLA WALLA WA 99362 3454TAX REGISTRATION  
INDUSTRIAL INSURANCEMINOR WORK PERMIT  
UNEMPLOYMENT INSURANCE

## DUTIES OF MINORS:

Cleaning vehicles, checking fluid levels, checking tire pressure \*May not  
operate power tools, 16 to work above ground max. 10ft., no driving\*

## LICENSING RESTRICTIONS:

Minors employed in maintenance and repair work must be at least 16  
years of age. (not bicycles) WAC 296-125-033 (5) (A)

## REGISTERED TRADE NAMES:

ROAD RUNNER EXPRESS INC. CHARTERS

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for those licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

  
Director, Department of Licensing

FROM: Washington Utilities and Transportation Commission  
Transportation Operations  
PO Box 47250 Phone: (360) 664-1222  
Olympia, WA 98504-7250 Fax: (360) 586-1181

Date: 11-17-2004 Staff: Linda Elhardt

TO: CHA079327  
ROAD RUNNER EXPRESS INC.  
ROAD RUNNER EXPRESS CHARTERS  
P.O. BOX 1572  
WALLA WALLA, WA 99362

Return this document with the completed/corrected items listed below for prompt processing of your application for operating authority.

- rd*  
*11*
- You must remit regulatory fees for your vehicles. Please complete the form enclosed and return to our office with the correct payment.
  - Obtain a CVSA safety inspection of your vehicle (s) and remit a copy of the completed inspection form. You may contact Carolyn Caruso at (360) 664-1244 for an appointment.