

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 <u>35152</u>	CHA <u>CHA 079411</u>
111 0268 232 02 150.00	DATE <u>11-9-05</u>	SAFETY INSP <u>12-9-05 mlc</u>
111 0268 232 03	<u>0000627</u>	INS/BOND <u>tw</u>
111 0268		<u>TE-051724</u>

THIS APPLICATION IS FOR:

(Check One Only) CHARTER BUS CERTIFICATE EXCURSION SERVICE CERTIFICATE

CH-473

NAME OF APPLICANT HECKMAN MOTORS, INC.

D/B/A OLYMPIC BUS LINES

MAILING ADDRESS 111 EAST FRONT STREET PHYSICAL ADDRESS SAME
PORT ANGELES, WA 98362

BUSINESS TELEPHONE NUMBER (360) 417-0700 FAX NUMBER (360) 452-1460

UBI# 600016076 E-MAIL JACKHECKMAN@OLYPIA.WA.GOV

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:

JAMES C. HECKMAN 1139 MOONLIT PLACE TUCSON, AZ 85737 93%
JACK HECKMAN 117 E 13TH ST. PORT ANGELES, WA 98362 7%

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

C-992

EQUIPMENT LIST:

LICENSE NUMBER	YEAR AND MAKE OF VEHICLE	SERIAL NUMBER (VEHICLE IDENTIFICATION NUMBER)	SEATING CAPACITY
<u>A37369X</u>	<u>2000 FORD E350</u>	<u>1FBF31L5YHB48143</u>	<u>12</u>

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?.....	✓	___	___
Will you file records of duty status in systematic manner?.....	✓	___	___
Will drivers be required to complete recaps of their records of duty status?.....	✓	___	___
Will dispatchers be aware of drivers= hours of service prior to trip?.....	✓	___	___
Will other independent records be compared to drivers records of duty status for accuracy?.....	✓	___	___
Will you have a system for recording hours of duty status on 100 mile radius drivers?.....	✓	___	___
Will you have a disciplinary policy for noncompliance with Part 395?.....	✓	___	___

PART 396 - INSPECTION, REPAIR AND MAINTENANCE

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

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: PORT ANGELES, Washington, 11-8-05
(City or Town) (Month/Day/Year)

JACK HECKMAN
(Name of applicant)

By: [Signature] PRESIDENT
(Signature)

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

11-8-05
(Date and Place)

[Signature]
(Signature)

EMPIRE FIRE AND MARINE INSURANCE COMPANY- EMPIRE INDEMNITY INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

POLICY CHANGES (FORM B)

POLICY NO. SG0301285	POLICY CHANGES EFFECTIVE 06/20/2005	AUTHORIZED REPRESENTATIVE 0236-02
NAMED INSURED HECKMAN MOTORS INC OLYMPIC BUS LINES		COVERAGE PARTS AFFECTED

THE FOLLOWING SCHEDULED VAN HAS BEEN ADDED:
2000 FORD #1FBSS3115YHB48143

ORIG. PREM.	COVERAGE	PREMIUM
\$3,160.00		\$2,841
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
\$		\$
TOTAL		\$2,841

PREMIUM INCLUDED IN REVISED INSTALLMENTS

08/08/2005
Date Prepared

G-1
END. #

Signature of Authorized Representative

COMMERCIAL AUTO COVERAGE PART BUSINESS AUTO DECLARATIONS

03 12 93

CA 00

SB0301207
Renewal of Number*

Declarations

The
include

ONE

Coverage Part is effective the inception date of the policy unless another date is indicated below. (The following information is required only when this Coverage Part is issued subsequent to preparation of policy.)

Policy No.: SG0301285

Effective Date: 05/14/2005

Named Insured: HECKMAN MOTORS INC
OLYMPIC BUS LINES

Countersigned by: _____
Authorized Representative

Additional Premium:
(From endorsement date to
Policy Expiration)

Endorsement No.:

Form of Business: Individual Partnership Corporation Other _____

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

**ITEM TWO—SCHEDULE OF COVERAGES
AND COVERED AUTOS**

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos." "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	COVERED AUTOS <small>(Entry of one or more of the symbols from COVERED AUTOS Section of the Business Auto Coverage Form shows which autos are covered autos)</small>	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS	PREMIUM
LIABILITY	7	\$ 5,000,000	\$ 12,582
PERSONAL INJURY PROTECTION (P.I.P.)††		SEPARATELY STATED IN EACH P.I.P. END. MINUS \$ Deductible	\$
ADDED P.I.P. (or equivalent added No-fault cov.)		SEPARATELY STATED IN EACH ADDED P.I.P. ENDORSEMENT	\$
PROPERTY PROTECTION INSURANCE (P.P.I.) (Michigan only)		SEPARATELY STATED IN THE P.P.I. ENDORSEMENT MINUS \$ Deductible FOR EACH ACCIDENT	\$
AUTO MEDICAL PAYMENTS		\$	\$
UNINSURED MOTORISTS (UM)	6	\$ 60,000	\$ INCL
UNDERINSURED MOTORISTS (when not included in UM Cov.)	6	\$ 60,000	\$ INCL
P D A S I A C G E L	COMPREHENSIVE COVERAGE	ACTUAL CASH VALUE OR COST OF REPAIR, WHICHEVER IS LESS MINUS \$ Ded. FOR EACH COVERED AUTO, BUT NO DED. APPLIES TO LOSS CAUSED BY FIRE OR LIGHTNING. †††	\$
	SPECIFIED CAUSES OF LOSS COVERAGE	\$25 Deductible FOR EACH COVERED AUTO FOR LOSS CAUSED BY MISCHIEF OR VANDALISM†††	\$
	COLLISION COVERAGE	\$ Deductible FOR EACH COVERED AUTO†††	\$
	TOWING AND LABOR (Not Available in California)	for each disablement of a private passenger auto	\$

FORMS AND ENDORSEMENTS APPLYING TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT TIME OF ISSUE†:

CA0001(10/01), CA0041(3/03), CA0051(12/04), CA0135(8/03), CA2134(7/02), CA2146(12-IL0146(9/03), IL0198(7/02), UGU692ACW(8/04)	PREMIUM FOR ENDORSEMENTS	\$
	ESTIMATED TOTAL PREMIUM	\$ 12,582

ITEM THREE—SCHEDULE OF COVERED AUTOS YOU OWN ††(or equivalent No-fault cov.) †††See ITEM FOUR for hired or borrowed "autos."

Covered Auto No.	DESCRIPTION <small>Year Model; Trade Name; Body Type Serial Number (S); Vehicle Identification Number (VIN)</small>	PURCHASED			TERRITORY: Town & State Where the Covered Auto will be principally garaged
		Original Cost New	Actual Cost &	NEW (N) USED (U)	
1	1998 DODGE 2B5WB35Z4WK117562		2990	(U)	
2	1998 DODGE 2B5WB35Z4WK108179		2990	(U)	
3	2002 FORD 1FDXE74S22HA69709			(U)	
4					
5					

Covered Auto No.	CLASSIFICATION							Code	Except for towing all physical damage loss is payable to you and the loss payee named below as interests may appear at the time of the loss
	Radius of Operation (In Miles)	Business use s=service r=retail c=comm'l	Size GVW, GCW or Vehicle Seating Capacity	Age Group	Primary Rating Factor		Secondary Rating Factor		
					Liab.	Phy. Damage			
1	125	C							
2	125	C							
3	125	C							
4									
5									

*Entry optional if shown in Common Policy Declarations.

†Forms and Endorsements applicable to this Coverage Part omitted if shown elsewhere in the policy.

THESE DECLARATIONS AND THE COMMON POLICY DECLARATIONS, IF APPLICABLE, TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF, COMPLETE THE ABOVE NUMBERED POLICY.

11/08/05

Heckman Motors, Inc.
Balance Sheet
As of September 30, 2005

Sep 30, 05

ASSETS	
Current Assets	
Checking/Savings	
10200 · Cash in Drawers	
Parker Bank - Heckman, Brook	60.00
Driver Bank - Drake, Francis	40.00
Driver Bank - Hanson, Ronald	40.00
Cash Register - Airport \$250	250.00
Cash Register - Port Angeles275	275.00
Driver Bank - Heller, Bob	40.00
Driver Bank - Jacobson, Curtis	40.00
Parker Bank - Casey, Ron	80.00
Parker Bank - Gasper, Verne	90.00
Parker Bank - Gasper/Summer	250.00
Vending Machine Change	34.00
Total 10200 · Cash in Drawers	<u>1,199.00</u>
10250 · Petty Cash	
Bremerton \$600	600.00
Silverdale Ryder Bank \$600	600.00
Total 10250 · Petty Cash	<u>1,200.00</u>
10650 · Checking-U.S. Bank	114,881.53
10875 · Savings-IDS-Edward Jones	38,147.99
Total Checking/Savings	<u>155,428.52</u>
Accounts Receivable	
11200 · Credit Card Receivables	13,020.34
11300 · Accounts Receivable	60,751.11
Total Accounts Receivable	<u>73,771.45</u>
Other Current Assets	
24190 · Taylor, Marie - Purco Note	3,406.96
18200 · Empire Auto Insurance Deposit	6,946.00
18530 · Prepaid Silverdale Yellow Pages	92.70
14990 · Undeposited Funds	1,297.40
17100 · Gasoline Inventory	
Port Angeles	3,101.19
Total 17100 · Gasoline Inventory	<u>3,101.19</u>
17200 · Gift Shop Inventory	
Merchandise	8,507.84
Total 17200 · Gift Shop Inventory	<u>8,507.84</u>
17800 · Bremerton Moving Supplies	1,293.48
17900 · Port Angeles Moving Supplies	504.02
18100 · Prepaid Insurance-OBL Vans	-5,295.00
18300 · Prepaid Vehicle License-OBL	12,708.00
18500 · Prepaid Bremerton Yellow Pages	1,977.66
18510 · Prepaid PT Yellow Pages	84.65
18520 · Prepaid PA Yellow Pages	842.25
24110 · Heckman, Jack Short Term Loan	572.36
24160 · Stanley, Dannel Purco Note	12,550.27
24170 · Silvers, Judith Purco Note	2,467.09
Total Other Current Assets	<u>51,056.87</u>
Total Current Assets	<u>280,256.84</u>
Fixed Assets	
20220 · Bremerton Fixed Assets	11,000.00
20225 · Car Wash Garage-Wenatchee	34,800.00
20226 · Equipment-Wenatchee	1,150.00
20250 · KIOSK Buildings	8,868.97
20300 · Leasehold Improvements	
Capos Lot Paving	18,837.17
20300 · Leasehold Improvements - Other	20,211.23

11/08/05

Heckman Motors, Inc.
Balance Sheet
As of September 30, 2005

	Sep 30, 05
Total 20300 · Leasehold Improvements	39,048.40
20400 · Furniture and Fixtures	4,788.65
20500 · Office Equipment	10,410.49
20700 · Computer Software	
OBL Computer Software	
Grant \$ Received/OBL Software	-3,599.54
OBL Computer Software - Other	6,657.93
Total OBL Computer Software	3,058.39
20700 · Computer Software - Other	2,872.12
Total 20700 · Computer Software	5,930.51
20800 · Computer Hardware	
Accounting Computer	1,637.16
OBL Computer Hardware	
Grant \$ Received/OBL Hardware	-2,770.58
OBL Computer Hardware - Other	4,405.36
Total OBL Computer Hardware	1,634.78
20800 · Computer Hardware - Other	5,476.21
Total 20800 · Computer Hardware	8,748.15
20855 · Accumulated Depreciation	-93,219.97
21000 · Fleet-Vans	
Fleet-15 Passenger OBL Busses	
Grant \$ Received/14 Pass Busses	-99,331.99
Fleet-15 Passenger OBL Busses - Other	124,164.99
Total Fleet-15 Passenger OBL Busses	24,833.00
Bike Racks - 2 Existing Busses	
Grant \$ Received/Bike Racks	-1,069.47
Bike Racks - 2 Existing Busses - Other	2,210.70
Total Bike Racks - 2 Existing Busses	1,141.23
Fleet-20 Passenger OBL Bus	
Grant \$ Received/OBL Bus	-57,360.40
Fleet-20 Passenger OBL Bus - Other	71,697.67
Total Fleet-20 Passenger OBL Bus	14,337.27
21000 · Fleet-Vans - Other	12,762.80
Total 21000 · Fleet-Vans	53,074.30
21090 · Accum. Depreciation-Vans	-17,247.00
21100 · Fleet-Rental Vehicles	871,492.40
21190 · Accum. Depreciation-Rental	-232,255.00
21300 · Cargo Trailers	2,342.71
21301 · Accum Depr - Cargo Traile	-2,343.00
22000 · Coffee Company Equipment	
Coffee Company Sign	649.20
22000 · Coffee Company Equipment - Other	23,665.97
Total 22000 · Coffee Company Equipment	24,315.17
Total Fixed Assets	730,904.78
Other Assets	
28300 · Accum Amortization-Permit	-8,553.72
27100 · Franchise	37,000.00
27200 · Accum Amortization-Franchise	-10,774.78
28100 · Prop Shop Blue Sky	12,500.00
28200 · Transportation Permit-OBL	20,000.00
Total Other Assets	50,171.50
TOTAL ASSETS	1,061,333.12
LIABILITIES & EQUITY	
Liabilities	

11/08/05

Heckman Motors, Inc.
Balance Sheet
As of September 30, 2005

	<u>Sep 30, 05</u>
Current Liabilities	
Accounts Payable	
30100 · Accounts Payables	63,436.97
Total Accounts Payable	<u>63,436.97</u>
Other Current Liabilities	
30110 · Ryder BR Truck Deposits	513.90
30150 · Gift Certificates-Outstanding	15.25
30300 · Sales Tax Payable	11,895.43
30399 · Payroll Tax Liabilities	
30400 · Federal Withholding Payable	1,302.00
30410 · FICA Tax Payable	1,988.76
30415 · Medicare Tax Payable	465.12
30600 · FUTA Tax Payable	294.10
30700 · SUTA Tax Payable	4,086.26
30800 · Labor & Industries Payable	5,953.80
Total 30399 · Payroll Tax Liabilities	<u>14,090.04</u>
Total Other Current Liabilities	<u>26,514.62</u>
Total Current Liabilities	89,951.59
Long Term Liabilities	
36100 · U.S. Bank-Flooring	515,819.25
Total Long Term Liabilities	<u>515,819.25</u>
Total Liabilities	605,770.84
Equity	
39000 · Retained Earnings	494,556.15
50100 · Common Stock-Heckman Motors	33,300.00
50300 · Treasury Stock	-14,000.00
Net Income	-58,293.87
Total Equity	<u>455,562.28</u>
TOTAL LIABILITIES & EQUITY	<u><u>1,061,333.12</u></u>

UNIFORM DRIVER/VEHICLE INSPECTION REPORT

1224335

PERSONNEL NO. J526 DIST / DET LEVEL: 1 2 3 4 5 X

GENERAL HAZARDOUS MATERIALS DATE 12.08.05 TIME (MILITARY) 1300 FINISHED 1315 HAZARD CLASS / DIVISION NO. LOCATION: SR/MP TERMINAL SCALEHOUSE NO. CNTY CODE Q5 REPORTABLE QTY? Y N HAZARDOUS WASTE? Y N PLACARD REQUIRED? Y N CARGO TANKS? Y N

CARRIER CARRIER HECKMAN MOTORS, INC. db/a OLYMPIC BUS LINES ADDRESS 111 EAST FRONT ST.

CITY PORT ANGELES STATE WA ZIP CODE 98362 INTERSTATE YES NO DOT NO. ICC NO.

DRIVER DRIVER NAME LICENSE NO. STATE EXP. YEAR DATE OF BIRTH MED. CERT. Y N SHIPPER NAME SHIPPING NO. WAIVER Y N

VEHICLE REGISTERED OWNER NAME/ADDRESS SAME G.V.W. 12-PASS PBT RATE

Table with 5 columns: UNIT, TYPE, YEAR/MAKE, CO. UNIT NO., LICENSE NO. / VIN NO., STATE. Row 1: 1, VN 2004 FORD, # 11, A3T369X, WA

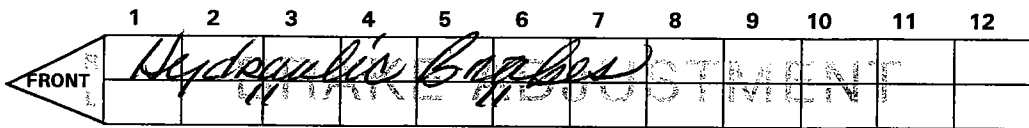


Table with columns: CFR, VIOLATIONS, D, 1, 2, 3, 4, Unit #s O/S, Complied. Row 1: 392.2 FAILED TO DISPLAY CERTIFICATE PERMIT NAME AND/OR DB/A ON BOTH SIDES.

CVSA DECALS UNIT 1 2388281 UNIT 2 UNIT 3 UNIT 4 NOIC NO.

DRIVER SIGNATURE [Signature] OFFICER SIGNATURE [Signature]

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

Date: 11-10-2005 Staff: KEN CHAPMAN

CHA079411
HECKMAN MOTORS, INC.
OLYMPIC BUS LINES
111 EAST FRONT ST.
PORT ANGELES, WA 98362

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

- X 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.