

TE-070923



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1-800-416-5289
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APPLICATION FOR CHARTER AND EXCURSION CARRIER SERVICE CERTIFICATE
Fee: \$200.00

111 0268 232 01 33.00	Company ID: 4537	CHA #:
111 0268 232 02 400.00	Date Filed: 7/10/07	Safety Inspection:
111 0268 232 03	Reg. Fees: <i>al</i>	Insurance:
111 0268	DOL:	SOS:
		Docket TE-

Name of Applicant: FOUR POINTS TOURS & EXCURSIONS LLC. *al*

Trade Name(s) (if applicable): _____

Mailing Address:

Physical Address:

Street 3719 S 253rd Pl Street 3719 S 253rd Pl
City KENT City KENT
State/Zip WA - 98032-5675 State/Zip WA 98032-5675

Phone Number: 253-941-5888 Fax Number: _____

UBI #: 602-724-540 *al* E-Mail: maribelanti@msn.com.

Type of business structure:

- Individual Partnership Corporation Other (LP, LLP, LLC)

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

Name: Title: Stock Distribution or Percentage of Shares:

MARIA BELANTI managing owner 50%

NICHOLAS PAPADINAD -u- 50%

List other certificates or permits held with the commission: _____

EQUIPMENT LIST

License Number	Year And Make Of Vehicle	Vehicle ID Number	Seating Capacity
B75060C	1997 GMC	1GJH639R8V1087092	14 + 1
B 75061C.	1997 GMC	1GJH639R3V1077116	14 + 1
	1998 FORD	1FDXE40S7WHK07256	14 + 1

SAFETY AND OPERATIONS

In each of the categories shown 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.

SAFETY RESPONSIBILITIES

COMMERCIAL DRIVER'S LICENSE (CDL) STANDARDS REQUIREMENTS AND PENALTIES (Title 49, Code of Federal Regulations Part 383) Any driver who operates a vehicle that meets the definition of a commercial motor vehicle must have a valid CDL.

Name: NICHOLAS PAPADIMAS Position: Managing owner

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: NICHOLAS PAPADIMAS Position: Managing owner

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: MARIA BELANTI Position: Managing owner

CONTROLLED SUBSTANCE AND ALCOHOL USE AND TESTING (Title 49, Code of Federal Regulations Part 382) All persons who drive commercial vehicles requiring a CDL must be in a Controlled Substance and Alcohol Use and Testing program that is in compliance with FMCSR in Title 49, Code of Federal Regulations Part 382 and Title 49, Code of Federal Regulations Part 40. Each company will have in place a system for complying with FMCSR governing alcohol use and controlled substances testing requirements (Title 49 Code of Federal Regulations Part 382 and Title 49 Code of Federal Regulations Part 40).

Name: MARIA BELANTI Position: Managing Owner

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: NICHOLAS PAPADIMAS Position: Managing Owner

SAFETY REGULATIONS, GENERAL (Title 49, Code of Federal Regulations Part 390)

Name: MARIA BELANTI Position: Managing Owner

DRIVING OF COMMERCIAL MOTOR VEHICLES (Title 49, Code of Federal Regulations Part 392)	
Name:	Position:
PARTS AND ACCESSORIES NECESSARY FOR SAFE OPERATION (Title 49, Code of Federal Regulations Part 393)	
Name: <u>MARIA BELANTI</u>	Position: <u>Managing Owner</u>
OPERATIONAL RESPONSIBILITIES	
List the person and position responsible for understanding and complying with the requirements of each category shown below.	
REGULATORY FEES Charter and excursion carriers must file an annual safety report and pay regulatory fees by December 31 of each year.	
Name: <u>MARIA BELANTI</u>	Position: <u>Managing Owner</u>
CUSTOMER SERVICE Person responsible for customer service complaints, and customer notice requirements.	
Name: <u>MARIA BELANTI</u>	Position: <u>Managing Owner</u>
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 such as, <u>but not limited to</u> : Department of Labor and Industries (industrial insurance, safety, prevailing wage); Department of Licensing (vehicle and drivers licenses, business licensing, fuel permits, fuel tax); Secretary of State (corporate registrations); Department of Revenue and Internal Revenue Service (taxes); and Employment Security.	
Name: <u>MARIA BELANTI</u>	Position: <u>MANAGING OWNER</u>



DECLARATION OF APPLICANT

I understand that filing this application does not in itself constitute authority to operate as a passenger charter and excursion carrier.

As the applicant for a passenger charter and excursion certificate, I understand the responsibilities of a charter and excursion carrier, 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: MARIA BELANTI NICHOLAS PAPADIMAS
 Signature of applicant:  
 Date, County, State: 05-09-07 05-09-07

FOUR POINTS TOURS & EXCURSIONS LLC
3719 S 253RD PL
KENT WA 98032

DETACH BEFORE POSTING



STATE OF
WASHINGTON

MASTER LICENSE SERVICE
PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400
REGISTRATIONS AND LICENSES

Domestic Limited Liability Company

Unified Business ID #: 602 724 540
Business ID #: 1
Location: 1

FOUR POINTS TOURS & EXCURSIONS LLC
3719 S 253RD PL
KENT WA 98032

UNEMPLOYMENT INSURANCE
INDUSTRIAL INSURANCE

TAX REGISTRATION

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

Elizabeth A. Vance
Director, Department of Licensing

UNITED STATES OF AMERICA

The State of



Washington

Secretary of State

I, **SAM REED**, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF FORMATION

to

FOUR POINTS TOURS & EXCURSIONS LLC

a/an WA Limited Liability Company. Charter documents are effective on the date indicated below.

Date: 5/9/2007

UBI Number: 602-724-540

APPID: 850719



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State