

REINSTATEMENT

TV-081289
Dismissed
10/11/08

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr SW, PO Box 47250
Olympia, WA 98504-7250
Telephone (360) 664-1222 - Fax (360) 586-1181
Intrastate Common Carrier Operating Authority

APPLICATION FOR PERMIT

(excluding Household Goods and Common Carrier Brokers)

FOR OFFICIAL USE ONLY

Reception Number: <u>0011675</u>	Safety: <u>00</u>	Carrier ID#: <u>411034</u>
111 0268 200 02 <u>100.00</u>	Insurance: <u>00</u>	Employee: <u>02</u>

TYPE OF APPLICATION (check one)

New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority
<input type="checkbox"/> \$275 GENERAL COMMODITIES ONLY	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS
<input type="checkbox"/> \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	<input type="checkbox"/> \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE
<input type="checkbox"/> \$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE	

<input checked="" type="checkbox"/> \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation)	For Commission Use Only Auth #: <u>00551A</u>
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TYPE OF PAYMENT

<input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Amex <input type="checkbox"/> Discover <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa	Expiration Date: <u>494</u>
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CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.

Name (printed): Mary Bauer Date: 7/10/08
Signature: Mary Bauer Title: Safety clerk

MOTOR CARRIER IDENTIFICATION

CC#: <u>57492</u>	US DOT# (if required): <u>178097</u>	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: <u>601-546-915</u> <i>not active</i>
APPLICANT NAME: <u>Action Carrier Inc</u>	PHONE#: <u>605-335-0789</u> <i>vt state</i>	
d/b/a:	FAX #:	
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) <u>PO Box 85530 Sioux Falls SD 57118-5530</u>		
(city, state, zip) <u>700 E 52nd St N, Sioux Falls SD 57107</u> <u>0664</u>		
PHYSICAL ADDRESS: (street address, if different)		

TYPE OF BUSINESS STRUCTURE

(check individual or complete partnership/corporation information)

INDIVIDUAL PARTNERSHIP CORPORATION - STATE OF INCORPORATION SD

NAME TITLE STOCK DISTRIBUTION OR PERCENTAGE OF SHARE
Michael Walsh Pres/owner 100%

TRANSFER OF PERMIT NUMBER

Complete this section if you are transferring an existing permit to a new owner. List name of current permit holder and permit number to be transferred. The current permit holder must sign below to authorize the transfer of the permit number.

NAME ON PERMIT: _____ PERMIT NUMBER: _____

Signature of current permit holder _____

Date _____

INSURANCE REQUIREMENTS (must check one)

(permit will not be issued until acceptable insurance is received)

The applicant WILL NOT HAUL hazardous materials in any quantity and WILL only operate vehicles less than 10,000 pounds gross weight rating - \$300,000 in Public Liability and Property Damage Insurance is required. You do not need to complete the Safety Fitness Survey.

The applicant WILL NOT HAUL hazardous materials in any quantity - \$750,000 in Public Liability and Property Damage Insurance is required. Complete and submit the Safety Fitness Survey - Section 1.

The applicant WILL HAUL hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance and submit the Safety Fitness Survey - Sections 1 and 2.

The applicant WILL HAUL hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. Complete and submit the Safety Fitness Survey - Sections 1 and 2.

EQUIPMENT LIST (Attach additional list if necessary)

UNIT#	LICENSE#	STATE	VIN#
<i>See attached</i>			

I, as applicant, understand that the filing of this application does not in itself constitute authority to operate and that no operations may be conducted until a permit is received from the Commission. I hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief.

Michael Walsh
Signature(s)

6/6/08
Date

ACTION CARRIER EQUIPMENT LIST AS OF 5/31/08

1:19 PM

UNIT	LICENSE	MAKE	VIN #
9417	PRO7295	KW	1XKADB9XRNS577385
9904	PRO7296	KW	J5420246L
9940	PR10381	KW	1XKADDR9X2XR820720
9941	PRO8365	KW	1XKADDR9X4XR820721
9943	PRO7563	KW	1XKADDR9X8XR820723
9944	PRO7300	KW	1XKADDR9XXXR820724
9945	PRO7301	KW	1XKADDR9X1XR820725
9947	PRO7303	KW	1XKADDR9X5XR820727
9948	PRO7304	KW	1XKADDR9X7XR820728
9950	PRO7305	KW	1XKADDR9X5XR820730
9954	PRO7309	KW	1XKADDR9X2XR820734
9956	PRO8377	KW	1XKADDR9X6XR820736
9960	PR10936	KW	1XKADDR9X8XR820740
9964	PRO7315	KW	1XKADDR9X5XR820744
9965	PRO7316	KW	1XKADDR9X7XR820745
9966	PRO7317	KW	1XKADDR9X9XR820746
18031	PRO8376	VOLVO	4V67DARH1XN783898
18039	PR65225	FRHT	1FUYYDDYB1VPB95061
18032	PR65222	VOLVO	4V4ND4JH1YN793494
18039	PRO7289	FRHT	1FUYYDDYB1VPB95061
18047	PRO7975	FRHT	1FUPCSEB2YPB59189
19811	PRO7290	FRHT	1FUVD5YB7SP643277
29814	PRO7291	FRHT	1FUVD5YB0SP643279
29815	PRO7292	FRHT	1FUVD5YB75P643280



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250
(360) 664-1160 • TTY (360) 586-8203

Action Carrier, Inc.
P O Box 85530
Sioux Falls SD 57118-5530

August 27, 2008

Notice of Deficient Application

Return this document with the completed/corrected items listed below for prompt processing of your application for operating authority. Your docket number is TV-081289. Your pending common carrier number is CC-057492.

- X FINAL NOTICE! Please note that this is your second and final notice. You must provide the required information by September 26, 2008 or your application will be dismissed.
- X Your Corporation is listed as not actively registered with the Washington Secretary of State. Before a permit can be issued, Action Carrier Inc. must be properly registered as an active corporation, you can contact the Secretary of State's office at 360-753-7115.

Who do I contact if I have questions?

You may call 360-664-1222 or e-mail us at transportation@utc.wa.gov. Our fax number is 360-586-1181.

Thank You.



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250
(360) 664-1160 • TTY (360) 586-8203

Action Carrier, Inc.
P O Box 85530
Sioux Falls SD 57118-5530

July 15, 2008

Notice of Deficient Application

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

- X Your Corporation status with the Secretary of State's office has been terminated. This must be active before we can issue your Common Carrier permit. You can reach the Secretary of State's office at 360-753-7115.

Who do I contact if I have questions?

You may call 360-664-1222 or e-mail us at transportation@utc.wa.gov. Our fax number is 360-586-1181.

Thank You.



Corporations Division

Corporations

Corporations Division - Registration Data Search

Neither the State of Washington nor any agency, officer, or employee of the State of Washington timeliness of any information in the Public Access System and shall not be liable for any losses c accuracy, reliability, or timeliness of such information. While every effort is made to ensure the ac may be incorrect or not current. Any person or entity who relies on information obtained from the

ACTION CARRIER, INC.

UBI Number	601546915
Category	REG
Profit/Nonprofit	Profit
Active/Inactive	Inactive
State Of Incorporation	SD
Date of Incorporation	05/09/1994
Expiration Date	05/31/2000
Dissolution Date	08/21/2000
Registered Agent Information	
Agent Name	SHARI KIDWELL
Address	3601 SE COLUMBIA WAY STE 105 BLDG 51
City	VANCOUVER
State	WA
ZIP	98661
Special Address Information	
Address	
City	
State	

FORM E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE

Authority #: 057492

Filed With **WA UTILITIES & TRANSPORTATION COMMISSION**
PO BOX 47250

Liability Limits: \$750,000

(hereinafter called Commission)

RECEIVED

N/R
Inactive

MAY 16 2008

This is to certify, that the **OLYMPIA WA 98504-7250**
 PROGRESSIVE CASUALTY INSURANCE COMPANY
PO BOX 94762 CLEVELAND, OH 44101-4101

WASH. UT. & TP. COMM

has **ACTION CARRIER INC**
issued to:

700 E 52ND STREET NORTH
 SIoux FALLS SD 57104-7104

a policy or policies of insurance effective from **02/20/2008 12:01 AM**, standard time at the address of the insured stated in said policy or policies and continuing until canceled as provided herein, which, by attachment of Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effected by the company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at **PO BOX 94762 CLEVELAND, OH 44101-4101**
this **8** day of **May**, **2008**

Insurance Company File No. **CSD 000 7083185-8**
(Policy Number)

William T. Combl

Authorized Company Representative

This form determined by the National Association of Regulatory Utility Commissioners and promulgated by the Interstate Commerce Commission pursuant to the provisions of Section 202(b) (2) of the Interstate Commerce Act (49 U.S.C., sec. 302(b) (2)).