

**BEFORE THE WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION**

**PROOF OF SERVICE**

**DOCKET NO. TV-090056**

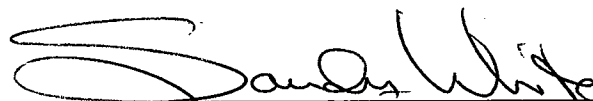
KNOW ALL PERSONS BY THESE PRESENTS That the undersigned, an employee of the Washington Utilities and Transportation Commission at Olympia, Washington, hereby certifies that a copy of the document referred to below was served on the parties of record in said proceeding in the following manner:

On the 12TH day of JANUARY, 2009, a true copy of CC PERMIT CERTIFICATE

in the above-entitled cause now pending before the Commission was enclosed in an envelope addressed to each of the parties of record as set forth below. Each envelope was addressed to the address shown in the official files attached hereto, sealed with the required first-class postage thereon, and deposited on said date in the United States mail in the City of Olympia, County of Thurston, State of Washington.

**PARTIES OF RECORD AND OTHERS RECEIVING NOTICE**

Mailed To:  
Rambo Transport LLC  
7834 Blaine Rd  
Blaine, WA 98230



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Sandra White, Customer Service Specialist I

**WASHINGTON STATE UTILITIES AND TRANSPORTATION COMMISSION**

**1300 S EVERGREEN PARK DRIVE SW, PO BOX 47250**

**OLYMPIA, WA 98504-7250**

**(360) 664-1222**

**This certificate authorizes the following operations under the provisions of RCW Title 81:**

Rambo Transport LLC  
7834 Blaine Rd  
Blaine, WA 98230

Permit No.  
CC-63469

General commodities in the state of Washington excluding household goods, hazardous materials and armored car service.

TV-090056

01-09-09

SERVICE DATE

JAN 12 2009

WASHINGTON UTILITIES AND TRANSPORTATION  
COMMISSION



By Colleen Smith  
for David W. Danner

PART - A

TV-090056

## 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: 111 0268 200 02	Safety: OK	Carrier ID#: 5372
0017056	Insurance: OK	Employee: OK TKC

## TYPE OF APPLICATION (check one)

New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority
<input checked="" 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 type="checkbox"/> \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation)	

For Commission Use Only:  
Auth #:

## TYPE OF PAYMENT

<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Amex	<input type="checkbox"/> Discover	<input checked="" type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	Expiration Date
						[REDACTED]

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): Dana Brady Date: 1-6-09

Signature: Dana Brady Title:

## MOTOR CARRIER IDENTIFICATION

CC#: <u>63469</u>	US DOT# (if required) <u>1830741</u>	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: <u>602-881-277</u>
APPLICANT NAME: <u>Rambo Transport LLC</u>		PHONE#: <u>360-441-0512</u>
d/b/a:		FAX #:
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) <u>7834 Blaine Rd</u>		
(city, state, zip) <u>Blaine WA 98230</u>		
PHYSICAL ADDRESS: (street address, if different)		

**TYPE OF BUSINESS STRUCTURE**

(check individual or complete partnership/corporation information)

INDIVIDUAL     PARTNERSHIP     <sup>LLC</sup> CORPORATION - STATE OF INCORPORATION WA

**NAME**                      **TITLE**                      **STOCK DISTRIBUTION OR PERCENTAGE OF SHARE**

Bupinder Singh - mbe/mgr                      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#
<u>102</u>	<u>21832 RP</u>	<u>WA</u>	<u>4V4NC9THX3N346555</u>

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.

Bupinder Singh By Anandhady POA  
Signature(s)

1-6-09  
Date

## PART - B

### SAFETY FITNESS SURVEY - SECTION 1 GENERAL SAFETY

**Instructions:** In each category shown below, list the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Regulations (FMCSR).

Copies of the FMCSR's are available from several vendors, these include, but are not limited to:

Washington Trucking Association, 930 S. 336th St., Suite B, Federal Way, WA 98003, (800) 732-9019 or (253) 838-1650  
 J. J. Keller & Associates, Inc. 3003 W. Breezewood Lane, Neenah, WI 54966 (877) 564-2333  
 Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, (503) 236-1183  
 US Government Printing Office, 732 N. Capital Street, NW, Washington, DC 20401 (866) 512-1800 or (202) 512-1800

#### Controlled Substances and Alcohol Testing (Part 382)

Name: Rupinder Singh Position: mgr - mgr

Any person who drives a commercial motor vehicle requiring a CDL must be in a Controlled Substance and Alcohol Testing program that complies with the FMCSR in 49 CFR Part 382 and 49 CFR Part 40.

Each company will have in place a system for complying with FMCSR governing alcohol and controlled substances testing requirements (49 CFR Part 382 and 49 CFR Part 40).

#### Commercial Drivers License (CDL) Requirements (Part 383)

Name: Rupinder Singh Position: mgr - mgr

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle **as described below** must have a valid CDL. The definition of a commercial motor vehicle is:

- < has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- < has a gross vehicle weight rating of 26,001 pounds or more; or
- < is designed to transport 16 or more passengers, including the driver; or
- < is of any size and is used to transport hazardous materials of an amount that requires placarding under HM regulations.

(Definition shown above applies in reference to this section and that of controlled substance testing.) Contact local Department of Licensing office for additional information

#### Driver Qualification Requirements (Part 391)

Name: Rupinder Singh Position: mgr - mgr

Each company must maintain a complete Driver Qualification File for each employee (whether permanent, casual, or intermittent) authorized to drive motor vehicle. To determine what information is required, review FMCSR Part 391.51

Owner/operators that work exclusively in intrastate commerce within Washington have limited exemptions that are found in WAC 480-14-370(7). Owners/operators that conduct any interstate operations must maintain a complete file on themselves and any casual or intermittent driver that they may use.

**Drivers Hours of Service (Part 395)**

Name: Rupender Singh Position: mbe mgr

Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle. If company's operations meet all requirements of the "100 air mile radius driver," a record of duty status is acceptable. A driver must complete a driver's daily log book when he/she exceeds the 100 air-mile radius or he/she exceeds 12 hours.

Note: Reference 49 CFR, Part 395.1(e) and WAC 480-14-380

**Vehicle Inspection, Repair, and Maintenance (Part 396)**

Name: Rupender Singh Position: mbe mgr

Part 396.11 requires that drivers prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day. Refer to Part 396.11 for a description of the required content of this report.

Each motor carrier must maintain certain required records for each vehicle that includes the following: (see Part 396.3(b)).

- < Identification of the vehicle
- < A means to indicate the nature and due date of various inspection and maintenance operations to be performed.
- < A record of inspections, repairs and maintenance indicating their date and nature.

All companies must comply with Part 396.17 dealing with Periodic inspections. Each motor carrier must inspect, or have inspected, all motor vehicles subject to its control at least once during the preceding 12 months.

***My signature below certifies that I understand my responsibility as a motor carrier and I will comply with all the safety requirements which apply to my operations.***

Rupender Singh By Dana Brady DA 1-6-09  
Signature of applicant Date

5372  
~~pending~~

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

Filed with **Washington Utilities and Transportation Commission** (hereinafter called Commission)

This is to certify, that the GREAT WEST CASUALTY COMPANY (hereinafter called Company)  
of PO BOX 277 SOUTH SIOUX CITY NE 68776

has issued to RAMBO TRANSPORT LLC of 7834 BAINE RD BLAINE WA 98230

a policy or policies of insurance effective from 1/8/09 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the 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 cancelled 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 2950 E GOLDSTONE DR, MERIDIAN, ID 83642

this 9TH day of JANUARY, 2009

Insurance Company File No. GWP59551A  
(Policy Number)

CATHY THOMSON  
(Authorized Company Representative)



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

Rambo Transport LLC  
7834 Blaine Rd  
Blaine WA 98230

January 8, 2009

**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 TV090056. Your pending common carrier permit number is CC063469.

- X  Obtain a Uniform Motor Carrier Certificate of Insurance (Form E) from your insurance company. The insurance must show your name EXACTLY as it is shown above.

**Who do I contact if I have questions?**

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

Thank You.



### POWER OF ATTORNEY

TO WHOM IT MAY CONCERN:

That, on the 17 day of November, 2008

AS: Individual Partnership Corporation  LLC  
Other

(NAME) Rambo Transport LLC - Rupinder Singh

(ADDRESS) 7834-Blaine Rd, Blaine WA 98230

Does hereby make constitute and appoint RIS COMPLIANCE SERVICES, And its duly authorized representatives (Dana Brady) \_\_\_\_\_ to act as attorney in fact for the following **limited special purposes:**

- To provide publicly listed telephone numbers & physical address for registration purposes.
- To obtain, complete and submit applications and fees for federal and state operating authority and single state registration of federal authority.
- To obtain, complete and submit applications for highway use tax permits, title transfer, license/pro-rate plates, passes and markets (both original and renewals).
- To prepare, sign, and submit documents and checks that may be necessary for \_\_\_\_\_
- To sign highway use tax bonds.
- To sign, complete and submit all other documents that may be required by various federal and state agencies in which the carrier can operate in the United States.
- To request IRS 2290 records for pro-rate purposes. Sign EIN applications to IRS

All correspondence and plates may be mailed to: RIS COMPLIANCE SERVICES  
841 N CENTRAL AVE #C232, KENT, WA 98032

This power of Attorney will be in effect beginning Nov. 17, 2008 and continuing until revoked.

Carrier/Account Rambo Transport LLC - Rupinder Singh

Signature and Title X Rupinder Singh

Signature and Title \_\_\_\_\_

NOTARY: State of Washington County King of, on this 17 day of November, 2008

Personally appeared before me Rupinder Singh

NOTARY OF STATE OF Washington COMMISSION EXPIRES 11/15/12

Notary Signature Jonam Weasly

