



1300 S. Evergreen Park Dr. SW P.O. Box 47250

Olympia, WA 98504-7250

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1-800-416-5289

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APPLICATION FOR CHARTER AND EXCURSION CARRIER SERVICE CERTIFICATE

Application Fee and Initial Regulatory Fees due at time of application: \$200 PLUS \$25 PER VEHICLE

Passenger Charter and Exc	eursion Carrier Services	Fe	ee Required
Application fee (Application for new certificate, to reinstate an existing certificate to a new owner or but		o transfer	\$200.00
Name Change (Application to change a company's corporated a new trade name, or change the surns		er)	\$ 35.00
Regulatory Fee (per vehicle)			\$ 25.00
3	TYPE OF PAYME	NT	
☐ Cash ☐ Check ☐ ☐☐ Credit Card Information (if applicable)	Money Order □ AMEX e)	□ MasterCard	□ Visa Exp Date Month/Year
Amount \$ 225 °			
CERTIFICATION: I, the undersign information is true and correct, the applicant, and that all information	at I am authorized to execute		
Cardholder's signature:		Date:	
01.7527 Namet EU	egant Wine Con	ntry Limou	isine VB/602
(For Commission Use Only) 111 0268 232 01 25.00	Company ID: 544	Pocket TE-	
111 0268 232 02 200.00	Date Filed: 3 2 09	Safety Inspection	on:
111 0268 232 03	Reg Fees:	Insurance:	
111 0268	DOL: O	SOS: OL)

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Name of	Applicant:	Cinda	Tucker	ElEgar	it W	ine (buntry
Trade N	ame(s) (if app	N () licable):	Elegant	ElEgar Wire Cou	ntru 1	Limou	sine
	Mailing Ad				J	cal Addro	
Street	1567021	c	ull d. Stre	et			
City	Prosser		City				
State/Zip	Wa.	99350					
Ī				Number: <u>509</u>	992-4	1086	
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Type of □ Indivi	business st dual	ructure: Partnersh	nip 🗆	Corporation	⋈ Oth	er (LP, LI	LP(LLC)
		percentage	of partner's s	hare or stock di	stribution	for major	
stockhold	lers:		· · · · · · · · · · · · · · · · · · ·				Distributions
Cinc	Name dy Tuc	ركا		Title Helle	er er		nge of Shares
	1300	<u></u>					
<u> </u>				•			<u> </u>
		• •					
List other	certificates or	permits he	ld with the co	mmission:		•	
		 		<u> </u>			
				EQUIPMEN sheets if necessary)			·
Licens	se Number		d Make Of	Vehicle ID N	lumber	Seating	g Capacity
	lined plates		. 1	IFDKE 20F		12	2
<u>XAI</u> A	<u> </u>			A94			
	1						•

SECTION 3 – 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). If you operate commercial motor vehicles, your drivers must have a valid CDL.
- **DRIVER QUALIFICATION REQUIREMENTS** (Title 49, Code of Federal Regulations Part 391). Each of your drivers must meet minimum qualification requirements. You must maintain driver qualification files for each driver.
- **DRIVERS HOURS OF SERVICE** (Title 49, Code of Federal Regulations Part 395). Each of your drivers must maintain hours of service logs. You must maintain true and accurate hours of service records for each driver.
- CONTROLLED SUBSTANCE AND ALCOHOL USE AND TESTING (Title 49, Code of Federal Regulations Part 382 and Part 40). If you operate commercial motor vehicles, your drivers must be in a Controlled Substance and Alcohol Use and Testing program. You must have a alcohol and controlled substances testing program.
- INSPECTION, REPAIR AND MAINTENANCE (Title 49, Code of Federal Regulations Part 396). You must systematically inspect, repair and maintain all motor vehicles.
- SAFETY REGULATIONS, GENERAL (Title 49, Code of Federal Regulations Part 390). You must follow safety regulations.
- **DRIVING COMMERCIAL MOTOR VEHICLES** (Title 49, Code of Federal Regulations Part 392). You must follow regulations for driving commercial motor vehicles.
- PARTS AND ACCESSORIES NECESSARY FOR SAFE OPERATION (Title 49, Code of Federal Regulations Part 393). You must maintain parts and accessories in safe condition.

of rederal Regulations Part 393). Tou must	maintain parts and accessories in safe condition.
Name: Cendy tucker	Position: DWW
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OPERATIONAL R	ESPONSIBILITIES
List the person and position responsible for unde	erstanding and complying with the requirements
of each category shown below.	
ANNUAL REPORTS AND REGULATORY	FEES. You must file an annual safety report and
pay regulatory fees by December 31 of each year	r
Name: Cindy tucker	Position: Owner
STATE OF WASHINGTON GENERAL LA	WS, RULES AND REGULATIONS. You must
comply with the regulations of local, state, and f	ederal agencies such as, but not limited to:
Department of Labor and Industries, Departmen	t of Licensing, Secretary of State, Department of
Revenue and Internal Revenue Service and Emp	loyment Security.
Name: Cendy tucker	Position: Gunu
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SECTION 4 – 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	Cindy	Tucker		
Signature of applicant	Cindy	Tull		
Date 2-27-09	. 0	County, State	Benton	Washington

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION P.O. BOX 47250 Olympia, WA 98504-7250

CHARTER AND EXCURSION REGULATORY FEE CALCULATION SCHEDULE

2 Total Regulatory Fees owed (enter amount from line 1) There is a minimum fee of \$25.00.	1	Total number of vehicles or	perated	4.1.	1	
	2		d (enter amount from	1	x 25.00 =	\$ 2500
There is a minimum fee of \$25.00.					<u> </u>	
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