PART – A

TU091482

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION 9~10~09

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)
	AL USE ONLY
Reception Number: 0019368 Safety: 10 - 9 - 00	Carrier ID#: 5718
111 0268 200 02 275.00 Insurance: 10/78	109 Form E Employee: KVE
TYPE OF APPLICATION O	ATION (check one)
New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority
\$275 GENERAL COMMODITIES ONLY	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE
\$275 GENERAL COMMODITIES, including ARMORDED CAR SERVICE	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS
\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE
\$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE	
\$100 REINSTATEMENT OF CANCELLED COMMO (Must be filed within 10 months of cancellation)	For Commission Use Only: Auth 689227
TYPE OF	PAYMENT
☐ Check ☐ Money Order ☐ Amex ☐ Discover 🛣	Mastercard ☐ Visa Expiration Date <u>03</u> <u>30</u> <u>2</u>
	2
CERTIFICATION: I, the undersigned, under penalty for false statement authorized to execute and file this document on behalf of the application.	ent, certify that the following information is true and correct, that I am int, and that all information on file is current and valid.
Name (printed): Jami DAUIS	Date: 918109
Signature: No Mul	Title: Transo Compliance mar
	RIDENTIFICATION
CC#: 6375\ US DOT#	✓ WA UNIFIED BUSINESS IDENTIFIER (UBI) #:
429269 131 35994	602-093-809
APPLICANT NAME:	PHONE#:
1950 Industrial DUASOUTCING	LP 360-423-0261
d/b/a: Philip Solvices North	FAX #: NOISSINGIA 3
BUSINESS (MAILING) ADDRESS:	HOWARO BIVIE
(street address, P.O. Box) 1804 Bocker	VAU 255 10 VH 0: 31
(city, state, zip)	- 1 440 0000
Kelso WA	98626 - 100000000000000000000000000000000000
PHYSICAL ADDRESS: (street address, if different)	CHARASH
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Date

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☐ INDIVIDUAL	- DAP	RTNERSHI	IP CORPOR (LP, LLP		OF INCOR	PORATION De lawale
NAME PSC JO	dustria	TITLE I, Inc		CK DISTRIBUTION	,—	CENTAGE OF SHARE
PSC LI)			000		
	nit number to	are transfe		ermit to a new ov	vner. List n	ame of <u>current</u> permit w to authorize the transfer
NAME ON PER	MIT:	· · · · · · · · · · · · · · · · · · ·			PERMIT N	UMBER:
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Signature of cu		(many arrangement and a second second	ngeriequire	MENTSTANGE.	heckonel	Date
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The applica NOT HAUL haza materials in any and WILL only ovehicles less that pounds gross we rating\$300,000 Liability and Proparage Insurant required. You do to complete the Fitness Survey.	ardous quantity perate an 10,000 eight in Public perty nce is o not need Safety	MOT HAN materials \$750,000 and Prop Insurance Complete Safety Fit Section 1		The applica HAUL hazardou materials requir \$1 million in Pu Liability and Pro Damage Insural submit the Safe Survey – Sectio 2.	ing ing ublic operty nce and ty Fitness ins 1 and	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.
	THE CONTRACTOR OF THE STATE OF	CONTRACTOR STREET	NIFUSTA (Attendin	additional list if	THE RESERVE OF THE PARTY OF THE	NOT THE REAL PROPERTY OF THE P
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Signature(s)

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

																ar		

Name: Holly	Dobart	Pos	ition: 🕥	Mer	vager	Substance
<u> </u>						Abuse Programs

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: Kathe Hodges Position: Facility Manager

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle <u>as described below</u> 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: Hathe Hodges Position: Factity manager

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: Mark Parcel Position: Transportation Supervisor									
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: Howard Lagrdorn Position: Mochanic									
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.									
Dani I ou									
Signature of applicant Date									

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SAFETY FITNESS SURVEY - SECTION 2 HAZARDOUS MATERIALS

	Complete the Following Questions.
1.	Name the person or position responsible for maintaining and understanding current hazardo material regulations.
2.	N Are drivers provided with a current copy of Emergency Response Information as required by Title 49 CFR, Part 172.600?
3.,	N Are drivers trained in the use of Emergency Response Information?
4.	N Is the Emergency Response Information carried in the vehicle?
5.	Name the person or position responsible for providing training to all employees handling hazardous materials as required by Title 49 CFR, Part 177.800 and 177.816.
6.	N Are you familiar with the accident reporting requirements of Title 49 CFR, Part 177, Subpart D?
7.	Who is responsible for completing hazardous materials shipping papers? Chslomers Shippers Per Calls
8.	Where are hazardous material shipping papers located during transportation? TOO COSO OCUPINO ORN CLOCK OF ANIVOY
9.	If you transport Radioactive Materials, name person or position that will be familiar with and provide training to employees for all transportation under CFR, Part 173, Subpart I - Radioactive Materials.
	NIA
1.0.	N Does your company have a US DOT Hazardous Materials permit? If so, attach a

copy to this application.

UNITED STATES OF AMERICA DEPARTMENT OF TRANSPORTATION PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION



HAZARDOUS MATERIALS CERTIFICATE OF REGISTRATION FOR REGISTRATION YEAR(S) 2009-2011

Registrant:

PSC INDUSTRIAL OUTSOURCING, LP DBA PHILIP SERVICES

NORTHWEST

Attn: TIFFANY LUSSIER

P O BOX 368

NEENAH, WI 54957

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 051909 551 072RS Issued: 05/19/2009 Expires: 06/30/2011

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

- (1) A copy of the registration statement filed with PHMSA; and
- (2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-62, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

PSC - CO 136 EQUIPMENT LIST TYPE OF VEHICLE T.S LIC

WW #

UNIT	ž	TYPE OF VEHICLE	T.S	LIC#	VIN#
0-62	8	FORD F450 CREWCAB UTILITY BED	OR	T551419	
0-65	8	FORD F450 UTILITY BED	OR.	T562450	1FDXW46F7YEE09624
3-22	91	VOLVO 28" GAP VAX	SR SR	YCSE786	
0-69	91	FORD F550 CREWCAB UTILITY BED	WA A	A20684B	1FUAW56F61EB/866/
0-91	93	Œ	WA A	A76971Y	2F I JW35GXFCAZ0091
5-14	87	FREIGHTLINER 70BBL VAC TRUCK	XX A	20530RP	1FUPYCYB2HP295919
5-21	08	DRAGON 130BBL	WA	6183UB	64149
5-23	8	INTERNATIONAL VAC TRUCK	WA	19835RP	1HTWGAAT88J050478
0-119	00	FORD F-350 FLATBED	WA	B00863K	1FDWF36R39EA15409
0-26	95	CHEVY 1 1/2 TON F/B	WA	A19989P	1GBKC34N6SJ102492
0-67	2	FORD F550 CREWCAB UTILITY BED	WA	B73059H	1FDAW56F91EA75825
0-68	2	FORD F550 CREWCAB UTILITY BED	WA	B73060H	1FDAW56F41EB78666
0-70	2	FORD F450 CREWCAB UTILITY BED	WA	B73061H	1FDXW46F41EB78669
0-99	8	FREIGHTLINER TRACTOR	WA	19847RP	1FUYSDYB3YPA50450
1-03	85	UTILITY 3 TANK TRAILER	WA	1765UT	1UYFS2451FA368505
	98	CUSCO CHEMICAL CIRCULATOR	WA	19834RP	1FDZS96T3WVA13601
1-15	8	PETERBILT TRACTOR (LEASED)	OR	YAFW949	1XPTD49X59D780929
5-17	93	INTERNATIONAL 70BBL	WA	19846RP	2HSFHDPR2PC062671
5-20	86	GDAN 120 BBL LIQ.VAC TRAILER	WA	8665SA	1W9TLM3N4G1021119
5-22	8	DRAGON 130BBL	WA	6182UB	64150
0-35	97	INTERNATIONAL 4700	WA	A184722	1HTSLAAM6VH490401
0-61	8	FORD F450 CREWCAB UTIL BED	WA	A41038T	1FDXW46F4YEC16914
0-66	8	FORD F450 UTILITY BED	WA	B99991D	1+UXW46+/YEE14628
0-07	66	FORD F450	WA	B15603A	1FDXW46P1GEC95142
0-10	8	GMC UTILITY VAN	WA	A57609X	1GDHG31R3Y11862/5
0-90	93	FORD 1 TON CREW CAB	WA	A76972Y	2FTJW35GOPCA12324
5-24	09	INTERNATIONAL LIQUID 70BBL	WA	21051KP	THTWGAA (59JU/5) 159

Form E UNIFORM MOTOR CARRIÈR BODILY INJURY AND PROPERTYRE C DAMAGE LIABILITY CERTIFICATE OF INSURANCE

		(Executed in Triplicate	e)	_	~ D
_{Filed with} Washingt	on Utilities and	Transportation	-/ Comminagainamerc	alled Commission)	15 2000
r ned with	(Name of Commis	ssion)		1/// 04 -	~ ZUUg
This is to certify, that the	ACE American	Insurance Compar	ıy	WASH. UT	& TP. COMM
,,		(Nam	e of Company)		a IP COMM
(hereinafter called Company) of	436 Walnut St	reet, Philadelph	nia , PA 1910	6	MIMINE
, , , , , , , , , , , , , , , , , , , ,			Address of Company)		
has issued to PSC Indust	rial Outsourcing				3626
-	(Name of Motor Carrier) Ph				
a policy or policies of insurance policies and continuing until ca Liability Insurance Endorsement obligations imposed upon such regulations promulgated in acco	ncelled as provided herein, t, has or have been amende motor carrier by the provis	which, by attachment of ed to provide automobile b	the Uniform Motor Codily injury and prope	Carrier Bodily Injury a erty damage liability in	nd Property Damage surance covering the
thereon.	e Company agrees to furni				
This certificate and the e cancellation may be effected by notice to commence to run from	endorsement described here the Company or the insure the date notice is actually re	ed giving thirty (30) days' ı	notice in writing to the	of the policy to which e State Commission,	n it is attached. Such such thirty (30) days'
Countersigned at 1 Bea	ver Valley Road,	Wilmington, DE	19803		
3 <u>-</u>	(Street Address)	(City)		(State)	(Zip Code)
this 9th	day of September	20	mark	1/-//-	4
Insurance Company File No	ISA H08250637				er
• • •	(Policy Number)	•	(Author	rized Company Represer	ntative)