



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

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or 1-800-416-5289 e-mail: Transportation@utc.wa.gov

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 Ex	cursion Carrier Servi	ces <u>Fee Required</u>
Application fee (Application for new certificate, to reinst an existing certificate to a new owner or	ate a previously canceled certifica business structure)	\$200.00
Name Change (Application to change a company's corp add a new trade name, or change the sur	orate name, change a trade name, name of an individual owner or pa	\$ 35.00 irtner)
Regulatory Fce (per vehicle)		\$ 25.00
	TYPE OF PAYM	DENT SENT
☐ Cash ☐ Check ☐ Credit Card Information (if applicable)	Money Order & AMEX	☐ MasterCard ☐ Visa Exp Date
Amount \$ 225 00 CERTIFICATION: I, the undersign information is true and correct, the applicant, and that all information	gned, under penalty for fals at I am authorized to execu	se statement, certify that the following
Cardholder's signature:		Date: ///3/09
0019565	-1001	2
(For Commission Use Only) 111 0268 232 01 25.00	Company ID: 5150	Docket TE- 091815
111 0268 232 02 200.00	Date Filed: 11-10	Safety Inspection:
11 0268 232 03 11 0268	Rcg Fees: ODD	Insurance:
		<u> </u>

SECTION I - APPLICANT INFORMATION				
Name of Applicant:_	DAVID	LOE	Dave's 1	arty Bus, L
Trade Name(s) (if ap	plicable): <u>Pavē</u>	's PAR	- Boto NO	stradename regist
Mailing A	ddress:		Phy	sical Address:
Street 15205	DATTON AUE N	Street		AV
City SHORELTA	V.E.	City	A	
State/Zip Wa 98	133	State/Zip	51/	
Phone Number: (206)	601-1800	Fax Numb	er: <u>N/A</u>	
UBI#: <u>602-912-</u>	781	E-Mail: d	aves party busi	@hotmail.com
Type of business s Individual List the name, title, and stockholders:	☐ Partnership	,	•	ther (LP, LLP, LLC) n for major
Name		<u>Ti</u>	<u>tle</u>	Stock Distributions or Percentage of Shares
DAVID LEE		DWNER		100%
		——————————————————————————————————————		
List other certificates o	r permits held with th	e commiss	ion:	
	SECTION (Attach additi	2 – EQU Onal sheets if	PMENT necessary)	
License Number	Year And Make C Vehicle		cle ID Number	Seating Capacity
739 YMP	1991 FORD	1FDK	E37G7MHA76123	
				'

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 mu	est maintain parts and accessories in safe condition.
Name: Davio Lee	Position: OWNER
	RESPONSIBILITIES
or each category snown below.	nderstanding and complying with the requirements
pay regulatory fees by December 31 of each y	Y FEES. You must file an annual safety report and car.
Name: Davig LEE	Position: OWNER
Department of Labor and Industries, Department Revenue and Internal Revenue Service and En	AWS, RULES AND REGULATIONS. You must a federal agencies such as, but not limited to:
Name: Davig Lee	Position: OWNER

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 <u>JAVIO</u>	LEE	
Signature of applicant	e e	
Date 11/13/2009	_County, State <u>K_tnG_</u>	WASHINGTON

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

CHARTER AND EXCURSION REGULATORY FEE CALCULATION SCHEDULE

Company Name	DAVES	PARTY	Bus		
					*

In accordance with RCW 81.70.350 "Regulatory Fees", the Commission requires Charter and Excursion companies to file reports of the number of vehicles operated by the company and pay the sum of \$25 for each vehicle operated. There is a minimum fee of \$25.

1 Total number of vehicles operated

1

2 Total Regulatory Fees owed (enter amount from line 1)

1 × 25.00 = \$ 25.00

There is a minimum fee of \$25.00.

(For Commission Use Only) 001-111-02-68-232-01	Docket TE-	Permit No:
Reception Number:		