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 Derkers)         FOR OFFICIAL USE ONLY         Reception Number: 0019692       Safety: 3 /3///d         Carrier DP#: 5 % [ 2]         111 0268 200 02       CTS.oco         Insurance: Boyrn E       Imr.(H)         Extension of Common Carrier Permit Authority, or Transfer of Existing Permit Number       Extension of Common Carrier Permit Authority, or Transfer of Existing Permit Number         \$275       GENERAL COMMODITIES, including ARMORED CAR SERVICE       \$100       GENERAL COMMODITIES, including ARMORED CAR SERVICE         \$275       GENERAL COMMODITIES, including HAZARDOUS MATERIALS       \$100       GENERAL COMMODITIES, including HAZARDOUS MATERIALS         \$275       GENERAL COMMODITIES, including HAZARDOUS MATERIALS       \$100       GENERAL COMMODITIES, including HAZARDOUS MATERIALS         \$275       GENERAL COMMODITIES, including HAZARDOUS MATERIALS       S100       GENERAL COMMODITIES, including HAZARDOUS MATERIALS         \$276       GENERAL COMMODITIES, including HAZARDOUS MATERIALS       S100       GENERAL COMMODITIES, including HAZARDOUS MATERIALS         \$276       GENERAL COMMODITIES, INCLUDING       S100       GENERAL COMMODITIES, including HAZARDOUS MATERIALS	WAS			TRAN	SPOR'		OMMISSION
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APPLICATION FOR PERMIT (excluding Household Goods and Common Carrier Brokers)         FOR OFFICIAL USE ONLY         Reception Number:       0019692       Safety:       3 (3////3       Carrier ID#:       5 (2 )         111 0268 200 02       2 (15.00)       Insurance:       Payret #       Imployee:         TYPE OF APPLICATION (Effeck one)         New Common Carrier Permit Authority, or Transfer of Existing Permit Number         \$275       GENERAL COMMODITIES, including       \$100       GENERAL COMMODITIES, including         \$275       GENERAL COMMODITIES, including       \$100       GENERAL COMMODITIES, including         \$275       GENERAL COMMODITIES, including       \$100       GENERAL COMMODITIES, including         #AZARDOUS MATERIALS       \$100       GENERAL COMMODITIES, including       HAZAROOUS MATERIALS         \$275       GENERAL COMMODITIES, including       \$100       GENERAL COMMODITIES, including       HAZAROUS MATERIALS         \$275       GENERAL COMMODITIES, including       \$100       GENERAL COMMORED CAR       Service         \$275       GENERAL COMMODITIES, including       \$100       GENERAL COMMORED CAR       Service         \$275       GENERAL COMMODITIES, including       The Commission Use Only:       Auth #         \$100       REINSTATEMEN							
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1111 0268 200 02 2-15.00       Insurance: Pown E 1 Mr Y Employee:         TYPEIOF APPLICATION (check one):         Extension of Common Carrier Permit Author         Transfer of Existing Permit Number       Extension of Common Carrier Permit Author         \$275 GENERAL COMMODITIES ONLY       \$100 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       \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE         \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE       \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE         \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE       \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation)       For Commission Use Only: Auth #:         \$275 CHERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE       Expiration Date         \$275 CHERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE       Expiration Date         \$275 CHERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE       Expiration Date         \$275 CHERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE       Expiration Date         \$276 CHERAL COMMODITIES, including HAZARDOUS MATERIALS and AR			· · · · · · · · · · · · · · · · · · ·	IAL US	E ONL		
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Image: Contract of the intervention of the control	HAZA	RDOUS MATERIALS ar	ES, INCLUDING				
Check 1 Money Order       CAmex Discover Mastercard Visa       Expiration Date         CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I a authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.         Name (printed):       KT K       CUMMINGS       Date: 12/16/09         Signature:       Title:       President         WOTOR CARRIER IDENTIFICATION       CC#:       US DOT# (if required)         06380(       661173       WA UNIFIED BUSINESS IDENTIFIER (UBI) #:         06380(       FAX #:       PHONE#:         Central Transport LLC       586-939-7000         d/b/a:       FAX #:         Central Transport       FAX #:         BUSINESS (MAILING) ADDRESS:       Stephens Road         (city, state, zip)       (city, state, zip)							
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authorized to execute and file this document on behalf of the applicant, and that all information on file is current and valid.          Name (printed):       KT K CUMMINGS       Date:       12/10/09         Signature:       Date:       12/10/09         Signature:       WOTOR CARRIER IDENTIFICATION         CC#:       US DOT# (if required)       WA UNIFIED BUSINESS IDENTIFIER (UBI) #:         06380(       661173       4002-978-1422       Per Call         APPLICANT NAME:       PHONE#:       586-939-7000         Chair       FAX #:       586-939-7000         d/b/a:       FAX #:       586-939-7000         BUSINESS (MAILING) ADDRESS:       (street address, P.O. Box) 12225 Stephens Road       FAX #:	Since the file state of the fi	STATEMENT OF C/ d within 10 months of c	cancellation) TYPE OF	PAYM	ENT		Auth #:
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06380(       661173       602-978-142       9ev Call         APPLICANT NAME:       PHONE#:       586-939-7000         Central Transport LLC       586-939-7000       FAX #:         Central Transport       FAX #:       586-939-7000         BUSINESS (MAILING) ADDRESS:       (city, state, zip)       (city, state, zip)	CERTIFICATION: I, the authorized to execute a Name (printed):	STATEMENT OF C/ d within 10 months of c Order undersigned, under p und file this document	cancellation) TYPE OF Amex ث Disco Disco Denalty for false statem on behalf of the applica	PAYM کی M over M Inent, certif ant, and th	ENT	following inform mation on file in 2/16/09	Auth #: Expiration Date ation is true and correct, that I a s current and valid.
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Complete this section if you holder and permit number to of the permit number.				st name of <u>current</u> permit below to authorize the transfer
NAME ON PERMIT:			PERMI1	NUMBER:
Signature of current permit	bolder			Date
	INSURANCE	STATE STATE AND A CONTRACTOR	MENTS (must check or ceptable insurance is reco	ne)
Image: Instrument of the state of the				
		rent waaren en en Konster, en ersteringe ster	additional list if necess	ALCONE, MANAGEMENT DE L'ALCONE ADDRESS DE LA CARACTERISTICA DE LA CARACTERISTICA DE LA CARACTERISTICA DE LA CAR
UNIT# LICEN	· ·	STATE		VIN#
See attached	1211			
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.				

•

Unit No	Lic No.	Lic State	VIN
	_		
6345	2JF343	Oklahoma	2FWJA3CV46AW47573
7314	2JG598	Oklahoma	2FWJA3CV87AW47609
7628	]2JG607	Oklahoma	2FWJA3CG17AX07358
7854	]2JU684	Oklahoma	2FWJA3CGX7AX07584
7893	2JW050	Oklahoma	2FWJA3CG57AX07623
8317	2LU525	Oklahoma	2FWJA3CV88AY78317
9107	2NT680	Oklahoma	4VG7BBRF4XN769018
9146	2EI800	Oklahoma	4VG7BBRF9XN772822
4908	2EZ452	Oklahoma	1HTMPAFN55H101262
7896	]2JW053	Oklahoma	2FWJA3CG07AX07626

WASHINGTON

## 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: KICK Cummings Position: President

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: Kirk Cummings Position: President

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: KIRK Cummings Position: President

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: KICK Cummings

Position: President

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: Kick Cummings

Position: President

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.

ature of applicant

Date

Please ask for technical assistance if you require information on any of these safety issues.

# As part of the Common Carrier permit application process, the Commission voluntarily provides technical assistance on any of the Safety Fitness requirements. The goal and mission of the Commission are to assist carriers in understanding the safety rules and regulations and what is necessary to have an adequate and effective safety program.

Technical Assistance

1250

Requesting additional information on any or all of the below listed sections <u>will not</u> result in your company being selected for a safety compliance audit. There is no additional charge for this service. Technical assistance may be in the form of a personal contact or telephone contact, depending on Commission employee availability.

If you want information on any of the safety requirements, check the appropriate box(es) below. Please include day and evening phone numbers and the name of the person to be contacted.

Place an "X" or check mark in the box in front	
of any subject on which	Subject/Topic Area
you wish assistance.	• • •
	Controlled Substances and Alcohol testing (Part 382)
	Commercial Driver's Licensing requirements (Part 383)
	Minimum Levels of Financial Responsibility (Insurance) (Part 387)
	Driver Qualification requirements (Part 391)
	Driving of Commercial Motor Vehicles (Part 392)
	Parts and Accessories Necessary for Safe Operation (Part 393)
	Hours of Service requirements (Part 395)
	Inspection, Repair, and Maintenance (Part 396)
Contact person:	
Day telephone number:	
Evening telephone number	• •

	PART - B
	SAFETY FITNESS SURVEY - SECTION 2 HAZARDOUS MATERIALS
	Applicants Applying to Transport <u>HAZARDOUS MATERIALS</u> must Complete the Following Questions.
1.	Name the person or position responsible for maintaining and understanding current hazardous material regulations.
2.	<ul> <li>N Are drivers provided with a current copy of Emergency Response Information as required by Title 49 CFR, Part 172.600?</li> </ul>
3.	N Are drivers trained in the use of Emergency Response Information?
4.	Y 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.	Y 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? ડિલ્લાપ્ટ
8.	Where are hazardous material shipping papers located during transportation?
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
10.	(Y) 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) 2009-2010

#### Registrant: CENTRAL TRANSPORT LLC D/B/A CENTRAL TRANSPORT Attn: WILLIAM BLAESS 12225 STEPHENS RD WARREN, MI 48089

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.

Re	eg. No: 051809 013 007R Issued: 05/20/2009 Expires: 06/30/2010				
	Reissued: 12/31/2009				
<u></u>	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:				
	<ol> <li>A copy of the registration statement filed with PHMSA; and</li> <li>This Certificate of Registration</li> </ol>				
	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				

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.

-available; upon request, to enforcement personnel.

Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATION OF INSURANCE
Filed with Washington Utilities & Transportation Commission (herein after called Agency)
This is to certify that the <u>National Union Fire Ins. Co. of Pittsburgh PA</u> (Name of Company) (herein after called Company) of <u>70 Pine Street</u> , New York, NY, 10270 (Home Address of Company)
(herein after called Company) of 70 Pine Street, New York, NY, 10270 (Home Address of Company)

(Name of Agency)	·¢	
This is to certify that the National Union Fire Ins. Co. of Pittsburgh PA		
(Name of Company)		
(herein after called Company) of 70 Pine Street , New York , NY , 10270		
(Home Address of Company)		

CENTRAL TRANSPOR has issued to INTERNATIONAL, INC. (Name of Motor Ca	of	12225 STEPHENS ROAD .WARREN .MI .48089 (Address of Motor Carrier)
A policy or policies of insurance effective from policy or policies and continuing until cancelled Damage Liability Insurance Endorsement, has covering the obligations imposed upon such more regulations promulgated in accordance therewi	as provided herein, wr or have been amended for carrier by the provisith.	12:01 A.M. standard time at the address of the insured stated in said hich by attachment of the Uniform Motor Carrier Bodily Injury and Property d to provide automobile bodily injury and property damage liability insurance isions of the motor carrier law of the State in which the Agency has jurisdiction of
		and all endorsements thereon.

Whenever requested, the Company agrees to furnish the Agency 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 effective by the Company or the insured giving thirty (30) days' notice in writing to the State Agency, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Agency.

8144 Walnut Hill Lane, 16th Floor	TX 75231 This <u>06th</u> day of <u>Jan</u> 20 <u>10</u>
Countersigned at <u>Dallas</u> (Address)	(Day) (Month) (Year)
Insurance Company File No. <u>CA 094-92-82</u>	Paul Stoker Stoker
(Policy No)	(Authorized Company Representative)

Underlying Limit :0.00

Liability Limit :1,000,000.00