

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

DETERMINATION OF NON-SIGNIFICANCE

DESCRIPTION OF PROPOSAL: Transportation of General Commodities in the State of Washington, including hazardous materials requiring one million dollars in Public Liability and Property Damage Insurance.

PROPONENT:

EVERETT N. STEPHENS  
CC-63782

TV-100078

Location of proposal, including street address, if any:

409 WEST CAMERON ST  
DAYTON, WASHINGTON 99328

Lead Agency: Washington Utilities and Transportation Commission

The lead agency for this proposal has determined that it does not have a probable significant adverse impact on the environment. An environmental impact statement (EIS) is not required under RCW 43.21C.030(2)(c). This decision was made after review of a completed environmental checklist and other information on file with the lead agency. This information is available to the public on request.

There is no comment period for this DNS.

Responsible official: Anne Solwick Phone: (360) 664-1290

Position/Title: Director, Regulatory Services

Address 1300 S Evergreen Park Drive SW  
PO Box 47250  
Olympia, WA 98504-7250

Date: April 13, 2010

Signature   
ANNE SOLWICK  
Director, Regulatory Services

PART - A

TY-100078

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

CR # 9009

(excluding Household Goods and Common Carrier Brokers)

FOR OFFICIAL USE ONLY

Reception Number: <b>0019720</b>	Safety: <b>4/12/10</b>	Carrier ID#: <b>5782</b>
111 0268 200 02 <b>100.00</b>	Insurance: <b>FORM E 1m/4</b>	Employee: <b>KWC</b>

TYPE OF APPLICATION (check one)

New Common Carrier Permit Authority, or Transfer of Existing Permit Number	Extension of Common Carrier Permit Authority
<input 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 checked="" 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

Check    Money Order    Amex    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 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): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

MOTOR CARRIER IDENTIFICATION

CC#: <b>63782</b>	US DOT# <b>1966050</b>	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: <b>602-968-848</b>
-------------------	------------------------	--

APPLICANT NAME: <b>Everett M Stephens</b>	PHONE#: <b>509-629-1290</b>
---	-----------------------------

d/b/a: <b>STEPHENS TRANSPORT</b>	FAX #: <b>509-382-1372</b>
----------------------------------	----------------------------

BUSINESS (MAILING) ADDRESS:  
(street address, P.O. Box) **402 W. CAMERON ST.**  
(city, state, zip) **DAYTON, WA. 99328**

PHYSICAL ADDRESS: (street address, if different) **Same as Above.**

**TYPE OF BUSINESS STRUCTURE**

(check individual or complete partnership/corporation information)

INDIVIDUAL     PARTNERSHIP     CORPORATION - STATE OF INCORPORATION \_\_\_\_\_  
(LP, LLP, LLC)

NAME                                TITLE                                STOCK DISTRIBUTION OR PERCENTAGE OF SHARE

\_\_\_\_\_  
\_\_\_\_\_

**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#
02	25392 RP	WA	1XKWB9X92J884452

*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.*

Everett N. Stephens  
Signature(s)

01-08-00  
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: EVERETT N. STEPHENS Position: OWNER

*Everett N. Stephens*  
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: Everett Neil Stephens Position: OWNER

*Everett Neil Stephens*  
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: Everett N. Stephens Position: OWNER

*Everett N. Stephens*  
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: Everett N. Stephens Position: OWNER

*Everett N. Stephens*

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: Everett N. Stephens Position: OWNER

*Everett N. Stephens*

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.***

*Everett N. Stephens*

Signature of applicant

01-08-10

Date

## PART - B

### SAFETY FITNESS SURVEY - SECTION 2 HAZARDOUS MATERIALS

Applicants Applying to Transport HAZARDOUS MATERIALS must  
Complete the Following Questions.

1. Name the person or position responsible for maintaining and understanding current hazardous material regulations.  
Everett N. Stephens Owner: Stephens Transport.
2.  Y  N Are drivers provided with a current copy of Emergency Response Information as required by Title 49 CFR, Part 172.600?
3.  Y  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.  
Everett N. Stephens (As TEMP. I.D.)
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?  
Shipper
8. Where are hazardous material shipping papers located during transportation?  
Drivers Door Pouch
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.  
None
10.  Y  N Does your company have a US DOT Hazardous Materials permit? If so, attach a copy to this application.

Per Carrier 1-21-010 See Attached