UTIC STATE AND TRANSPORTATION COMMISSION

1300 South Evergreen Park Drive SW PO Box 47250 Olympia, WA 98504-7250 Phane (NO) 604-7251 Fax (350) 586-1181

## COMMON CARRIER OF PROPERTY

(excluding Household Goods carriers and Brokers)

## APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE

FKE: \$50.00	
Application for Change of Name or Business Structure may be used ONLY in the following	
circumstances:	
<ul> <li>Changes of carrier's name, with no change in ownership or business structure.</li> <li>Change of business structure from individual to corporation to incorporate an individual's business when the individual is the majority stockholder or, by an individual to a partnership, when the individual is the majority partner or, from a corporation to a proprietorship of the majority shareholder or, by a partnership to a proprietorship of the majority partner.</li> <li>Change of name resulting from a change in business structure from a partnership to a corporation established to incorporate the partnership business, when the partners are the majority stockholders in the same proportionate ownership.</li> <li>Change of name resulting from a change in business structure from a corporation to another corporation where both corporations are wholly owned by the same stockholders in the same proportions.</li> </ul>	
TYPE OF PAYMENT	
Cash Check I Money Order DAMEX & MasterCard D Visa  Exp Date  Credit Card Information (if applicable)  Month/Year	M09066
AMOUNT \$ 50.00 COMPANY NAME: NOVEM JERSEN Trucking	3,40
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.	
Cardholder's signature: Date 2/11/10	
For Commission Use Only	
111-2068-200-02 Received date: ID: 5866	•
50.00 Insurance:	
, –	

Norm Jensen Trucking LLC

TY 100 286

Holder of Permit CC- 38466 asks the UTC for authority to change the name of or		
the business structure of the carrier named below under \$1.80 RCW and WAC 480-14 to:		
NEW BUSINESS INFORMATION		
New Name: Norm Jensen Trucking 4 Phone #: 509-697-8830		
Trade Name: Norm Jensen Trucking 14 Fax #: 5199 - 197- 8851		
Mailing Address: 377 Bales Rol Physical Address: (if different) Simo		
cet/P.O. Box Sant Stree! Same		
City, State Zip City, State Zip City, State Zip		
USDOT # 030296 (If you don't have one, you can apply online at www.fmcsa.dot.fov/online-registration or contact 360-596-3816 or 360-596-3803 for assistance.		
Unified Business Identifier Number (UBI): 602 - 903 - 603		
□ Individual □ Partnership ★ Corporation — State of Incorporation ₩★		
NAME Norman J. Jewson LLC	PERCENTANGE OF SHARES	
CURRENT BUSINESS INFORMATION M-8175		
Current Name: Norm Jersen Truck	ing Phone #: 509-697-8830	
Trace Name: Norm Jensen Truck	ng Fax #: 509-697-8851	
Mailing Address: 377 Baker K	Physical Address: Same	
Street/P.O. Box Same	Street Samp	
City, State Zip Selah, WA 9894	3 City, State Zip Same	
Midividual Dearthership De Corporation State of Incorporation		
NAME Norman J. Jensen Dune	PERCENTANGE OF SHARES	

CERTIFICATION: Carrier affirms that the change of name or business structure does not involve a change in ownership, management, or control of the operating authority. The undersigned applicant requests that the Commission enter an order granting its petition as provided in 81.80 RCW.

I certify or declare under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

Signature(s)

Date

RECEIVED

FEB 08 2010

WASH. UT. & TP. COMM

## Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

Filed with Washington Utilities and Transportation Commission (hereinafter called Commission)

This is to certify, that the NATIONAL INDEMNITY COMPANY (hereinafter called Company)

of 3024 HARNEY ST., OMAHA, NE. 68131

has issued to NORM JENSEN TRUCKING LEC of 377 BAKER RD. SELAH WA 98942

a policy or policies of insurance effective from 02/07/2010 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

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

Countersigned at SUEPRIOR UNDERWRITERS, PO BOX 97024, REDMOND, WA 98073,9724

this 5TH day of FEBRUARY, 2010

Insurance Company File No. 70TRS012718 (Policy Number)

Authorized Company Representative)