

TY100302

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 SW
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 Olympia, WA 98504-7250
 Phone (360) 664-1222
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 Web Site: www.wutc.wa.gov

RECEIVED

FEB 17 2010

WASH UT & T
COMMON CARRIER OF PROPERTY
 (excluding Household Goods carriers and Brokers)

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE
FEE: \$50.00

Application for Change of Name or Business Structure may be used ONLY in the following circumstances:

- Changes of carrier's name, with no change in ownership or business structure.
- 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.
- 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.
- 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.

TYPE OF PAYMENT

Cash Check Money Order

Credit Card Information (if applicable)

ate
 Month/Year

Amount \$ 50.⁰⁰ COMPANY NAME: Quigg Bros., INC.

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 2/16/2010

Auth:
 430989

For Commission Use Only

111-2068-200-02 50.00

Received date: 2/17/10

ID: 5874

Insurance: 2/24/10

0019853

Pending 5874

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

Filed with Washington Utilities & Transportation Commission (herein after called Agency)
(Name of Agency)

This is to certify that the Travelers Indemnity Company
(Name of Company)
(herein after called Company) of One Tower Square, Hartford, CT, 06183
(Home Address of Company)

has issued to QUIGG BROS., INC. of PO BOX 1707 ABERDEEN WA 98520
(Name of Motor Carrier) (Address of Motor Carrier)

A policy or policies of insurance effective from 02/23/2010 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 Agency has jurisdiction or regulations promulgated in accordance therewith.

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.

Countersigned at 4600 Fuller Drive Irving TX 75038 This 24th day of Feb 20 10
(Address) (Day) (Month) (Year)

Insurance Company File No. DT-810-528D9101-IND-09
(Policy No)

Debra Browning
(Authorized Company Representative)

Underlying Limit :0.00

Liability Limit :1,000,000.00