PART – A

TY-100506

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION RECEIVED 1300 S Evergreen Park Dr SW, PO Box 47250

Olympia, WA 98504-7250

MAR 3 1 2010

Telephone (360) 664-1222 - Fax (360) 586-1181

Intrastate Common Carrier Operating Authority						
WASH. UT. & TP. COMM APPLICATION (excluding Household Goods	I FOR PERMII and Common Carrier Brokers)					
FOR OFFICIAL USE ONLY						
Reception Number: 0020010 Safety: 572600	© Carrier ID#: 5920					
111 0268 200 02 275,00 Insurance: 5/26						
	ATION (check one)					
New Common Carrier Permit Authority, or Transfer of Existing Permit Number Extension of Common Carrier Permit Authority						
\$275, GENERAL COMMODITIES ONLY	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE					
\$27% 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					
\$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 #:						
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): Joseph W. Jaeger Date: 3/20/10						
Signature: MOTOR CARRIER	Title: [(e) (d e))					
COUL CITE DOT#	MA UNICION DUCINECO IDENTICIO (UDI) #					
57437 (all 52/96/7	601990661 Percay					
APPLICANT NAME: Per Cay I travy Haulers PHONE#: Joseph W. Jaeger Diggin It, INC 425. 228.0557						
d/b/a: Heavy Hauters Inc. FAX#:						
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) 25/1 Kennewick Ave. N.E.						
(city, state, zip) Renton, Wa. 98056.7287						
PHYSICAL ADDRESS: (street address, if different)						

	(check		PE OF BUSINE			on)	
□ INDIVIDUAL □ PARTNERSHIP χ CORPORATION – STATE OF INCORPORATION $\frac{\int}{\delta} \psi^{(k)}$							
NAME TITLE STOCK DISTRIBUTION OR PERCENTAGE OF SHARE P. To sept W Jacquer President 100%							
	State Share	TRA	ansfer of Pi	ERMITINUM		part of a first	
		transfe	rring an existing p	ermit to a new	owner. List na	ame of <u>current</u> permit	
holder and permit number to be transferred. The current permit holder must sign below to authorize the transfer of the permit number. NAMEON FERMIT: Heavy Howers Inc. PERMIT, NUMBER: CC 57437							
Joseph W. Jaeger President 3/20/10							
Signature of Co	U INS	JURAN	CE REQUIREN be issued until acc			' Date d):	
The applica NOT HAUL haz materials in any and WILL only ovehicles less that pounds gross wrating-\$300,000 Liability and Pro Damage Insurar required. You do complete the Fitness Survey.	ardous quantity pperate an 10,000 eight in Public perty nce is o not need Safety	The a OT HAU naterials in 750,000 and Propersurance omplete afety Fitrection 1.		HAUL hazard materials request materials request materials request materials request materials and Figure 1. The same of the sa	uiring Public Property rance and Ifety Fitness tions 1 and	☐ 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.	
UNIT#	EQU LICENSE		IT LIST (Attach STATE	additional list	-	interior in the second	
ONIT#	56371	<u>"</u>	Washinston	1 1 N K	VXROX	(XVR &44290	
2	8553N	11_	Washington	159C55447XL189		XL 18914-1	
			. 0				
	•		•			•	
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.							
Joseph	Signature	es (s)) (es.		3/20	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

Name: Joseph W. Jaegev Tes. Position: Ve Siclent 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: Joseph W. Jaiger Position: Tre Sedent
Any driver who operates a vehicle that meets the definition of a commercial motor vehicle <u>as described below</u> 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)
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: Joseph W. Jaeger 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: Joseph W. Jaeger Position: resident						
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.						
Signature of applicant Date						

TO:13605861181

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

(Executed in triplicate)

CC7231

GOD JR5

Filed with WASHINGTON UTILITIES AN	<u>D TRANSPORTATIO</u>	ON COMM.	(hereinafter called commission
(Name of	Commission)		
This is to certify, that theCORNHUSKER CASU	ALTY COMPANY		
	(Name of C	ompany)	
(hereinafter called company) of P+O+ BOX 2048	OMAHA, NE	68103-204	8
	(Home Office Addr	ess of Company)	
has issued to HEAVY HAULERS DIGGIN*IT,	INC.		
	(Name of Motor Carri	er)	
of 2511 KENNEWICK AVE			
	dress of Motor Carrier)		
RENTON	WA	98056	
a policy or policies of insurance effective from 05-19	-2010	. 12:01 a.i	m., standard time at the address of the
insured stated in said policy or policies and continuing until canceled as	provided herein, which, by attac	hment of the uniform n	notor carrier bodily injury and property
damage liability insurance endorsement, has or have been amended to primposed upon such motor carrier by the provisions of the motor carrier law	rovide automobile bodily injury an	d property damage liab	illity insurance covering the obligations
therewith.	Of this State in which the commiss	Sign nas junsuichon or i	aguiations promotgated in accordance
Whenever requested, the company agrees to furnish the commiss	ion a duplicate original of said po	licy or policies and all	endorsements thereon.
This certificate and the endorsement described herein may not be effected by the company or the insured giving thirty (30) days' notice in v	canceled without cancellation of	of the policy to which it	is attached. Such cancellation may be
notice is actually received in the office of the commission.	withing to the State commission, s	outh thirty (30) days no	A A
•			
	, NE 68103-204	PMAKE	V VA VA A
this 25 day of HAY . 2010		UUL	
		Authorized Company R	lepresentative)
Insurance Company File No. 10 WAA100149			
(Policy No.)			

This form determined by the National Association of Regulatory Utility Commissioners and promulgated by the Interstate Commerce Commission pursuant to the provision of Section 202(b) (2) of the Interstate Commerce Act (49 U.S.C., sec. 302(b) (2)).