



TV-100647

1300 South Evergreen Park Drive SW PO Box 47250 Olympia, WA 98504-7250 Phone (360) 664-1222 Fax (360) 586-1181 Web Site: www.wutc.wa.gov

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, AMEX, MasterCard, Visa. Credit Card Information (if applicable) Exp Date Month/Year

Amount \$ 50.00 COMPANY NAME:

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

For Commission Use Only

M 03 99 Z

111-2068-200-02 50.00 0020150

Received date:

ID: 5946

Insurance: 5/11/10

CH# 1364

TV-100647

Holder of Permit CC- 61387 asks the UTC for authority to change the name of or the business structure of the carrier named below under 81.80 RCW and WAC 480-14 to:

NEW BUSINESS INFORMATION

5946

New Name: Five J's Trucking Phone #: 360-786-8274
 Trade Name: JOHN A HURSEY Fax #: 360-786-8175
 Mailing Address: 4240 Physical Address: (if different)
 Street/P.O. Box Libby Rd NE Street
 City, State Zip Olympia WA 98506 City, State Zip
 USDOT # Y256657 (If you don't have one, you can apply online at www.fmcsa.dot.gov/online-registration or contact 360-596-3816 or 360-596-3803 for assistance.)
 Unified Business Identifier Number (UBI): 601 509 518

Individual Partnership Corporation – State of Incorporation _____
 (LP, LLP, LLC)

<u>NAME</u>	<u>TITLE</u>	<u>PERCENTAGE OF SHARES</u>
<u>John A Hursey</u>	<u>owner</u>	<u>100%</u>

OK
5/1/06

Per
call

m42844

CURRENT BUSINESS INFORMATION

Current Name: Coalition Construction LLC Phone #: 360-786-8274
 Trade Name: _____ Fax #: 360-786-8175
 Mailing Address: 4240 Physical Address:
 Street/P.O. Box Libby Rd NE Street
 City, State Zip Olympia WA 98506 City, State Zip

Individual Partnership Corporation – State of Incorporation _____

<u>NAME</u>	<u>TITLE</u>	<u>PERCENTAGE OF SHARES</u>
<u>John A Hursey</u>	<u>member</u>	<u>100%</u>

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.

John A Hursey
Signature(s)

4-21-2010
Date

Form E
**UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE**
(Executed in Triplicate)

Filed with WUTC (hereinafter called Commission)
(Name of Commission)

This is to certify, that the AMERICAN FOREST CASUALTY COMPANY, RISK RETENTION GROUP
(Name of Company)

(hereinafter called Company) of 1330 LADY STREET COLUMBIA, SC 29211
(Home Office Address of Company)

Has issued to John S. Hursey of 4240 Libby Road NE, Olympia, WA 98506
(Name of Motor Carrier) (Address of Motor Carrier)

a policy or policies of insurance effective from 02/01/2010_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 affect 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 1800 Second Street Suite 915 Sarasota, Florida 34236
(Street Address) (City) (State) (Zip Code)

This 29th day of April, 2010

Insurance Company File No. AFC083036
(Policy Number)

Jeanine Collins
(Authorized Company Representative)