PART A

TV# 10476

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

(excluding Household Goods and Common Carrier Brokers)				
FOR OFFICIAL USE ONLY				
Reception Number 025141	Safety: CWC		Carrier ID#:	5831
111 0268 200 02 775.00	Insurance: 7-17	3-10 E	Employee:	ruc
Т	YPE OF APPLICA	ATION (check o	ne)	
New Common Carrier Permit Authority, or Extension of Common			Common Cari	ier Permit Authority
Transfer of Existing Permit Number				
\$275 GENERAL COMMODITIES ONLY			ENERAL COMM	ODITIES, including ERVICE
\$275 GENERAL COMMODITII ARMORDED CAR SERVIC			ENERAL COMM	ODITIES, including ERIALS
\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS				MODITIES, including RIALS and ARMORED CAR
\$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 Common Auth				
	TYPE OF	PAYMENT		***
☐ Check ☐ Money Order		was.		
	And the second		makarik post o so Tido ca	Principle (AN)
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): Tai H.	Im	Date:6	-30-10	
Signature:Title:				
MOTOR CARRIER IDENTIFICATION				
CC#: 6398/ US DOT#	2050815		D BUSINESS ID 933 45	ENTIFIER (UBI) #:
APPLICANT NAME:	20000			$\frac{\mathcal{U}}{\mathcal{U}}$
APPLICANT NAME: PHONE#: 701 Hyyn Im 753-473-4300				
d/b/a: Green PC FAX#: 253-473-4301				
BUSINESS (MAILING) ADDRESS: 3627 S. 54th St.				
(city, state, zip) Tacoma	w	A, 9	9409	
PHYSICAL ADDRESS: (street address, if different)				
	4			

TYPE OF BUSINESS STRUCTURE					
(check individual or complete partnership/corporation information)					
INDIVIDUAL IN PARTNERSHIP IN CORPORATION (LP, LLP, LLC) STATE OF INCORPORATION					
NAME	TITLE	BEDCENTAG		CK DISTRIBUTION OR CENTAGE OF SHARE	
Tai In	n owner	<u> </u>	54+h st.	Tacoma	WK- 90409
		TRANSFER OF PI			
Complete this section if you are transferring an existing permit to a new owner. List name 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.					
NAME ON PER	RMIT:			PERMIT NUI	MBER:
Signature of c	urrent permit holder				Date
·		RANCE REQUIRENT III not be issued until a			d
quantity. You will only operate vehicles with a GVWR of less than 10,000 GVWR of 10,000 pounds operate vehicles with a GVWR of 10,000 pounds operate vehicles wi			hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.		
UNIT#	LICENSE#	STATE			N#
₹	n	WA	# THE CONTINUE TO 127		7473
	00061-R	WA,	1HTSD	1HTSDNGNOLH292673	
!					
	<u> </u>	<u>L</u> :	L		
Signature					
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.					
2n 20-10 -					
Signature(s) Date					

PART B

SAFETY FITNESS SURVEY FOR ALL APPLICANTS THAT OPERATE A VEHICLE OVER 10,000 GVWR

Companies applying to transport any commodity must complete this survey.

Instructions: In each category shown below, list the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Administration (FMCSA) regulations in the Code of Federal Regulations at 49 CFR. The requirement to comply with current FMCSR is mandated by the Washington State Patrol (WSP) in its rules. Washington Administrative Code (WAC) 446-65.

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, www.wtatrucking.com, (800) 732-9019 or (253) 838-1650.
- J. J. Keller & Associates, Inc., 3003 W. Breezewood Lane, Neenah, WI 54957, www.jjkeller.com, (877) 564-2333.
- Willamette Traffic Bureau, 16303 NE Cameron Blvd, Portland, OR 97230-5030, www.wtbtraffic.com, (503) 236-1183.
- US Government Printing Office, 732 N. Capital Street, NW, Washington, DC 20401, www.gpo.gov, (866) 512-1800.

4.	Controlled Substances and Alcohol Testing				
Name: -	J	Ta:	IM	Position: _	cuner
must hav hav his is	e a valid CE as a gross c eight rating as a gross v designed to	OL. The de ombined wo of more the chicle weight transport and is use	finition of a comme veight rating of 26, an 10,000 pounds ght rating of 26,00 16 or more passe ed to transport haz	ercial motor vehicle is 001 pounds that inclu ; or 1 pounds or more; or ngers, including the d	ides a towed unit with a gross vehicle
and alcol					ust participate in a controlled substance 2 and 49 CFR Part 40, and by the WSP
		Con	nmercial Drivers	s License (CDL) Re	equirements

Name: Tai Im Position: owner

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL, as required by the Washington State Department of Licensing. The definition of a commercial motor vehicle is a vehicle that:

- 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 hazardous materials regulations.

Driver Qualificatio	n Requirements			
Name: Tqi Im	Position: 6wher			
Each company must maintain a complete Driver Qualification File for each employee authorized to drive motor vehicles as required by FMCSR Part 391.51 and by the WSP in WAC 446-65-010. Owner/operators that work exclusively in intrastate commerce within Washington have limited exemptions. Owners/operators that conduct any interstate operations must maintain a complete file on themselves and any other driver that they may use.				
Drivers Hours	s of Service			
Name: Tai Im	Position: OWNEr			
Each company must maintain true and accurate hours of vehicle as required by the FMCSA in 49 CFR, Part 395.1	service records for each individual that drives a motor (e) and by the WSP in WAC 446-65-010.			
Vehicle Inspection, Rep	pair, and Maintenance			
Name: Tai Im	Position: Duner			
Each company must prepare a written "Driver Vehicle Inspection Report" on each vehicle used each day as required by the FMCSA in 49 CFR, Part 396.11 and by the WSP in WAC 446-65-010. In addition, each company must maintain certain required records for each vehicle that includes the following, as required by the FMCSA in 49 CFR, Part 396.3 and by the WSP in WAC 446-65-010: • Identification of the vehicle. • 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 conduct periodic inspections as required by the FMCSA in 49 CFR, Part 396.17 and by the WSP in WAC 446-65-010.				
Signa	ture			
My signature below certifies that I understand me comply with all the safety requirements which approximately appr				