REINSTATEMENT JU-101537

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

Reception Number: 111 0268 200 02 Insurance: 9 - 16 - 70 Employee: Property								
S275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE	FOR OFFICIAL USE ONLY							
TYPE OF APPLICATION (check one) New Common Carrier Permit Authority, or Transfer of Existing Permit Number \$275 GENERAL COMMODITIES ONLY \$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$	0026041	Carrier ID#: 9000						
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Transfer of Existing Permit Number \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$276 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$277 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$278 GENERAL COMMODITIES, including HAZARDOUS MATERIALS AND ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS AND ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS AND ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS AND ARMORED CAR SERVICE \$270 GENERAL COMMODITIES, including HAZARDOUS MATERIALS \$270 GENERAL COMMODITIES, including HAZARDOUS	TYPE OF APPLICATION (check one)							
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### HAZARDOUS MATERIALS and ARMORED CAR \$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE \$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT Check	ARMORDED CAR SERVICE	— Tita Office Commodified Wildling						
\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT (Must be filed within 10 months of cancellation) TYPE OF PAYMENT 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): TUPEA Date: 9/13/10 Signature: Title: OW MOTOR CARRIER IDENTIFICATION CC#:63699 US DOT# 1910639 WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 60294698 APPLICANT NAME: PHONE#: FRANCISCO RUERA FAX #: BUSINESS (MAILING) ADDRESS: O A CORRECT OF THE COMMON CARRIER IDENTIFIER (UBI) #: 589 531-3998 BUSINESS (MAILING) ADDRESS: O A CORRECT OF THE CARRIER IDENTIFIER (UBI) #: 589 531-3998	HAZARDOUS MATERIALS	HAZARDOUS MATERIALS and ARMORED CAR						
(Must be filed within 10 months of cancellation) TYPE OF PAYMENT 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): TRANCO CIVERA Date: 9/13/10 Signature: Title: Ow no. MOTOR CARRIER IDENTIFICATION CC#:63699 US DOT# 1910639 WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 602946988 APPLICANT NAME: PHONE#: 509 531-3998 d/b/a: FAX #: BUSINESS (MAILING) ADDRESS: O FAX #:	\$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR							
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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): + CHANACO LUERA Date: 9/13/10 Signature: Title: DW NO. MOTOR CARRIER IDENTIFICATION CC#-63699W US DOT# 1910639 WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 603-946-988 APPLICANT NAME: PHONE#: 509 53(-3998) d/b/a: FAX#: BUSINESS (MAILING) ADDRESS: O COMPANDED BUSINESS (MAILING) ADDRESS: O COMPANDED CORRECTED TO THE PROPERTY OF THE PR	Add M.							
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Name (printed): + RANGISCO LIVERA Date: 9/13/10 Title: OW MOTOR CARRIER IDENTIFICATION WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 602946988 PHONE#: FRANCISCO RIVERA BUSINESS (MAILING) ADDRESS: O COMPAND A	CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the following information is true and correct, that I am							
MOTOR CARRIER IDENTIFICATION CC#:63699 US DOT# 1910639 WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 60294698 APPLICANT NAME: PHONE#: 509 531-2998 d/b/a: FAX#: BUSINESS (MAILING) ADDRESS:	Name (printed): + (Associated) (1) Dental of the applicant, and that all information on file is current and valid.							
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HRANCISCO KLUERA (509) 531-2998 HRANCISCO RIVERA BUSINESS (MAILING) ADDRESS:		602946988						
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(street address, P.O. Box) (city state zip) 1/19 Old 1/15 A 22								
(city, state, zip) 1618 PWSCO, WAY 99301 Kennewick W4-99336								
PHYSICAL ADDRESS: (street address, if different)								
7 4 1 4 1								

TYPE OF BUSINESS STRUCTURE								
(check individual or complete partnership/corporation information)								
M INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION — STATE OF INCORPORATION								
NAME STOCK DISTRIBUTION OR PERCENTAGE OF SHARE								
Francisco	BUERA	^ -						
trancisco Kivera Owner 100%								
		TR	ANSFER OF P	FR	MIT NUMBER			
Complete this s	ection if you	are transf	erring an existing n	Am	it to a new owner. List no	and of courses and		
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	MIT;				PERMIT NU	JMRER:		
Signature of current permit holder Date								
INSURANCE REQUIREMENTS (must check one)								
(Permit will not be issued until acceptable insurance is received)								
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Liability and Pro	perty	Safety Fi	itness Survey—	Su	rvey – Sections 1 and	Fitness Survey -		
	Damage Insurance is Section 1. required. You do not need		1.	2.	•	Sections 1 and 2.		
to complete the				ł				
Fitness Survey.	Calcry					,		
	E	QUIPME	NT LIST (Attach	ado	litional list if necessary			
UNIT#	LICEN	SE#	STATE		VIN#			
l	B5469	50 K	WA		1XPCDB9X10D334262			
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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 normit is received from the o								
hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief								
Charles Color								
Signature(s) Date Date						0		
Date /								
		*						

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

Filed with the WASHINGTON UTILITIES & TRANSPORTATION COMMISSION-OPERATIONS DIVISION (hereinafter called Commission) of PO BOX 47250, OLYMPIA, WA 98504

This is to certify, that the United Financial Casualty Company (hereinafter called Company) of PO BOX 94739, CLEVELAND, OH 44101 has issued to FRANCISO RIVERA of PO BOX 83, PASCO, WA 99301-0000 a policy or policies of insurance effective from 09/08/2010 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 as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and property damage liability insurance covering the 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 attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice in writing to the State attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 6300 WILSON MILLS, MAYFIELD VILLAGE, OH 44143 this 8th day of September, 2010

Insurance Company File No. CA 07633188 (Policy Number)

(Authorized Company Representative

IRB3539B

MC1633a(08/99)