

PART A Replacement TV# 101994

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION
1300 S Evergreen Park Dr SW, PO Box 47250, Olympia, WA 98504-47250
Telephone (360) 664-1222 - Fax (360) 586-1181
Intrastate Common Carrier Operating Authority
APPLICATION FOR PERMIT
(excluding Household Goods and Common Carrier Brokers)

DEC 13 2010

#5039

WASH UT & TP COMM

RECEPTION NUMBER: 0029008			SAFETY: 12-15-10			CARRIER ID#: W42109		
111 0268 200 02 \$275			INSURANCE: Form E 12-22-10			EMPLOYEE: JVC		

New Common Carrier Permit Authority, or Transfer of Existing Permit Number		Extension of Common Carrier Permit Authority	
<input type="checkbox"/>	\$275 GENERAL COMMODITIES ONLY	<input type="checkbox"/>	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE
<input type="checkbox"/>	\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE	<input type="checkbox"/>	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS
<input checked="" type="checkbox"/>	\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	<input type="checkbox"/>	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE
<input type="checkbox"/>	\$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 #:

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): PATRICIA A Quick Date: 12-8-10

Signature: Patricia Quick Title: Sec

CC#: 64103	US DOT#: 1195015	WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 602-353-280
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APPLICANT NAME: Heller & Sons Transportation, Inc PHONE#: 541-567-6582

d/b/a: _____ FAX #: 541-567-0843

BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) P.O. BOX 66

(city, state, zip) Hermiston Oregon 97838

PHYSICAL ADDRESS: (street address, if different) 30 W Catherine Hermiston

Replacement

TYPE OF BUSINESS ENTITY

INDIVIDUAL PARTNERSHIP CORPORATION (LP, LLP, LLC)
STATE OF INCORPORATION Oregon

NAME	TITLE	ADDRESS	STOCK DISTRIBUTION OR PERCENTAGE OF SHARE
<u>James Heller</u>	<u>Pres</u>	<u>P.O. Box 166 Hermiston</u>	<u>50%</u>
<u>Michael Heller</u>	<u>V-Pres</u>	<u>P.O. Box 166 Hermiston</u>	<u>50%</u>

TRANSFER OF PERMIT NUMBER

Complete this section if you are transferring an existing permit to a new owner. List name of current 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 PERMIT: _____ PERMIT NUMBER: _____

Signature of current permit holder _____

Date _____

INSURANCE REQUIREMENTS

- You will not haul hazardous materials in any quantity. You will only operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability and Property Damage Insurance. You do not need to complete Part B.
- You will not haul hazardous materials in any quantity. You will operate vehicles with a GVWR of 10,000 pounds or more. You must obtain \$750,000 in Public Liability and Property Damage Insurance. You must complete Part B.
- You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.
- You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2. *Per call*

UNIT#	LICENSE#	STATE	VIN#
		<u>See attachment</u>	

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.

James H. Heller PRES
Signature(s)

12/8/10
Date

VEHICLE LIST

SMALL DELIVERY TRUCKS

V #	MAKE & YEAR	VIN #
23	1984 GMC	1GDJ6D1A2EV515850
27	1997 PETE	1XPFDT8X2VD420939
28	1995 FRHT	1FVHBMDA2SL659467
31	1995 FRHT	1FV6HLAAXSL863373
36	2005 FRHT	1FVACXCS85HN84789
39	2008 FRHT	1FVHA6CK08DZ04715
43	2008 FORD 550	1FDAF56RX8EE22793
44	1998 KW	1XKDDU9XXWJ790430

TANKERS & TRAILERS

12	1988 PETE	1XPCDB9X1JD265449
22	1996 WESTERN STAR	2WLPDCJK8TK943273
100	1978 BEALL	1BN1T2944FP14646R
25	2000 WESTERN STAR	2WLPCCJH2YK959998
160	1978 BEALL	TT9112
26	1997 KW	1NKDLB9X6VR734678
260	1996 ONMEN	OT4APT74003CA28770
32	2002 PETE	1NPGLB9X42D585140
320	2002 BEALL	1BN1T32482PO30007
35	2005 PETE	1NPFLBOX85D858304
350	2005 BEALL	1BN1T32485PO31002
38	2007 KW	1NKDX40X87R205667
300	2000 BEALL	1BN1T3245YPO29227
40	2008 KW	1NKDX40X08R223971
400	2008 BEALL	1BN1T324485032460
45	2000 KW	1NKDXBOX9YR867988
450	2001 HEIL	5HTAM334317F65567
46	2010 KW	1NKDX40X4AJ272191
460	2010 POLAR	1PMA23343A5008687

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, 830 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.

Name: James Heller Position: PRES.

Any driver who operates a vehicle that meets the definition of a commercial motor vehicle as described below must have a valid CDL. 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.

Any person who drives a commercial motor vehicle requiring a CDL must participate in a controlled substance and alcohol testing program as required by FMCSA in 49 CFR Part 382 and 49 CFR Part 40, and by the WSP in WAC 446-65-010.

Name: James Heller Position: PRES

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 Qualification Requirements

Name: James Heller Position: PRES

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.

Driver Hours of Service Requirements

Name: James Heller Position: PRES

Each company must maintain true and accurate hours of service records for each individual that drives a motor vehicle as required by the FMCSA in 49 CFR, Part 395.1(e) and by the WSP in WAC 446-65-010.

Vehicle Inspection Requirements

Name: James Heller Position: PRES

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.

Signature

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.

James Heller
Signature of applicant

12/8/10
Date

PART C - SECTION 1

SAFETY FITNESS SURVEY FOR HAZARDOUS MATERIALS APPLICANTS

Companies applying to transport hazardous materials must complete this survey.

1. Name the person or position responsible for maintaining and understanding current hazardous material regulations.

Jim HELLER

2. Are drivers provided with a current copy of Emergency Response Information as required by Title 49 CFR, Part 172.800? Yes No

3. Are drivers trained in the use of Emergency Response Information? Yes No

4. Is the Emergency Response Information carried in the vehicle? Yes No

5. Name the person or position responsible for providing training to all employees handling hazardous materials as required by Title 49 CFR, Part 177.800 and 177.816.

Jim HELLER

6. Are you familiar with accident reporting requirements in Title 49 CFR, Part 177, Subpart D? Yes No

7. Who is responsible for completing hazardous materials shipping papers?

Shipper

8. Where are hazardous material shipping papers located during transportation?

CAB OF TRANS. VEHICLE * WITHIN DRs Reach ^{Per cell}

9. If you transport Radioactive Materials, name person or position that will be familiar with and provide training to employees for all transportation under CFR, Part 173, Subpart I - Radioactive Materials.

RD

10. If you have a permit to haul hazardous materials on an interstate level, please attach a copy of your US Pipeline and Hazardous Materials Safety Administration (PHMSA) permit.

see attachment

My signature below certifies that I understand my responsibility as a transporter of hazardous materials and I will comply with all the safety requirements which apply to my operations.

Jim Heller

Signature of applicant

12/15/10

Date

**UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION**



**HAZARDOUS MATERIALS
CERTIFICATE OF REGISTRATION
FOR REGISTRATION YEAR(S) 2010-2012**

Registrant: HELLER & SONS TRANSPORTATION INC.
Attn: MICHAEL HELLER
PO BOX 66
HERMISTON, OR 97838

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 061610 553 008ST Issued: 06/16/2010 Expires: 06/30/2012

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

- (1) A copy of the registration statement filed with PHMSA; and
- (2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-62, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

PART C – SECTION 2

HAZARDOUS MATERIALS QUESTIONNAIRE

Companies applying to transport hazardous materials must complete the following questions.

1. Please indicate if you plan to transport:

- Petroleum or petroleum products in bulk in tank-type vehicles
- Radioactive substances
- Explosives
- Corrosives

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

2. As part of transporting any of these four materials, do you or your company intend to build, or have someone else build, install or otherwise create a new structure, or a new addition to an existing structure? Yes No

- If yes, does the proposed construction require a building permit by a city, county or other governmental agency? Yes No
- If yes, which governmental agency will issue the permit? _____
- If yes, please explain what you intend to build: _____

3. In granting an application for hazardous materials transportation, the commission is required to consider possible impacts such transportation may have on the environment. Please answer the following questions related to possible environmental impacts:

a. Do you understand you are required to comply with Washington State Patrol safety standards for hazardous materials transportation, as defined in WAC 446-65-010?

Yes No

b. Do you understand that you are required to comply with Washington State Patrol noise emission standards for commercial motor vehicles, as defined in WAC 446-65-010?

Yes No

c. Do you understand that in the case of a hazardous materials spill, you must immediately contact the local emergency services agency, such as the 911 operator?

Yes No

• If your answer to a, b, or c is no, please explain: _____

M42109
Pendur

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 American Guarantee & Liability Insurance
(Name of Company)
(herein after called Company) of 1400 American Lane, Schaumburg, IL, 60196
(Home Address of Company)

has issued to HELLER & SONS TRANSPORTATION, INC. of PO BOX 55, HERMISTON, OR, 97838
(Name of Motor Carrier) (Address of Motor Carrier)

A policy or policies of insurance effective from 10/01/2010 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 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 824 FRONT STREET
P.O. BOX 2020
CONWAY AR 72032 This 16th day of Dec 20 10
(Address) (Day) (Month) (Year)

Insurance Company File No. CPO9401928-02
(Policy No)

STEPHEN STRANGE
(Authorized Company Representative)

Underlying Limit : 0.00

Liability Limit : 1,000,000.00

Primary