V-102043

## REINSTATEMENT

### 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

as add

	N FOR PERMIT					
(excluding Household Goods and Common Carrier Brokers)						
Reception Number: 0029701 Safety:	AL USE ONLY					
	Carrier ID#: w 43 9 09					
111 0268 200 02 \$275. Insurance:	Employee:					
	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					
\$275 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 COMMO (Must be filed within 10 months of cancellation)	PON CARRIER PERMIT For Commission Use Only: Auth #: 5 14 84 5					
TYPE OF	PAYMENT					
☐ Check						
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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): Timothy (awler	Date: 12-21-10					
Signature: With Kun	Title: Own					
	RIDENTIFICATION					
CC#: US DOT# 139/9350	WA UNIFIED BUSINESS IDENTIFIER (UBI) #:					
APPLICANT NAME: Timothy Lawler	253-350-2995					
d/b/a: Lawlex Trucking	FAX#: NIA					
BUSINESS (MAILING) ADDRESS: (street address, P.O. Box)	174 Fnumelow, WA 98022					
(city, state, zip) 38916 264th Ac	Je SE#15 Enumclaw, WA					
PHYSICAL ADDRESS: (street address, if different)	98022					
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<u> </u>		TVP	<u>= 0</u> 1	FOIIGINE	22	STRUCTURE		
	(che						on)	
(check individual or complete partnership/corporation information)  INDIVIDUAL □ PARTNERSHIP □ CORPORATION – STATE OF INCORPORATION								
NAME		TITLE		STOC	K D	ISTRIBUTION OR PERC	ENTAGE OF SHARE	
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				<del></del>				
				•				
	<del></del>	TR/	NSF	ER OF P	-R	MIT NUMBER		
Complete this se	ection if you	are transfe	erring a	an existing pe	ermi	t to a new owner. List na	eme of current permit	
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	JMBER:	
Signature of cu	rrent nermit	holder					Date	
Olgitata. C 2.			CE	REQUIRE	ME	NTS (must check one)		
	(Perm	it will not	be iss	ued until ac	cep	table insurance is recei	<i>)</i> ived)	
The applica NOT HAUL haza materials in any and WILL only ovehicles less that pounds gross we rating—\$300,000 Liability and Pro Damage Insurar required. You do to complete the Fitness Survey.	ant WILL ardous quantity perate an 10,000 reight operty nce is to not need Safety	The applicant WILL NOT HAUL hazardous materials in any quantity \$750,000 in Public Liability and Property Damage Insurance is required. Complete and submit the Safety Fitness Survey— Section 1.		The applicant WILL HAUL hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance and submit the Safety Fitness Survey – Sections 1 and 2.		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.		
		QUIPME	NT LI	IST (Attach	add	litional list if necessary)	)	
UNIT#	LICEN			STATE			/IN#	
28			1	WA		IXP5DB9X7	ID547104	
			· .					
operate and the	at no operate and affirm	tions may	be co	onducted un ation contain	itil a	on does not in itself con permit is received from in this application is tru Date	n the Commission. I	
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### 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.

Controlled Substances	and Alcohol Testing
Name: IIMOTH/ FLAWLER	Position: OWNER JORELATOR

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.

Commercial Drivers Licens	se (CDL) Requirements
Name: TIMOTHY FLAWLEL	Position: OWNER/OPELA-IOR

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.

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 of Service	Driver Qualification Requirements
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 of Service	Name: TIMOTHY FLAWLER Position: OWNER OFFRATOR
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, Repair, and Maintenance  Name: TMDTHJ FLAWLEL  Position: Positi	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
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Vehicle Inspection, Repair, and Maintenance  Name: TIMD THA F LAWLEL Position: Positio	Name: TIMOTHY F LAWLER Position: OWNER/OPERATOR
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.	
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WSP in WAC 446-65-010.  Signature  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.  Indiana.	·
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.    Junty   Junty   1/9//	
comply with all the safety requirements which apply to my operations.  Limitly fallicle  1/9/1/	Signature
Signature of applicant  1/9/// Date	
	Signature of applicant  1/9/1/  Date

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

Filed with

**WASHINGTON UTILITIES & TRANSPORTATION COMM** 

(hereinafter called Commission)

This is to certify, that the

GREAT WEST CASUALTY COMPANY P.O. BOX 277 SO SIOUX CITY NE 68776

(hereinafter called Company)

has

TIMOTHY LAWLER
DBA LAWLER TRUCKING

issued to:

38916 264<sup>TH</sup> AVE SE #15 ENUMCLAW WA 98022

a policy or policies of insurance effective from 01/05/11 12:01 A.M, standard time at the address of the insured stated in said policy or policies and continuing until canceled 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 canceled 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 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 1100 WEST 29TH ST PO BOX 277 SOUTH SIOUX CITY NE 68776

this 5TH

day of JANUARY

JANUARY , 2

Insurance Company File No.

GWP84230A

375 (Policy Number)

Authorized Company Representative

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