

PART A

TV# 111247

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)

VISA

10-20

FOR OFFICIAL USE ONLY

Reception Number: 033158

Safety:

Carrier ID#: 4019

111 0268 200 02 275-

Insurance:

Employee:

New Common Carrier Permit Authority, or Transfer of Existing Permit Number

Extension of Common Carrier Permit Authority

- \$275 GENERAL COMMODITIES ONLY
- \$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE
- \$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS
- \$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)

- \$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE
- \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS
- \$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE

OSM

For Commission Use Only: Auth # 091400

- Check
- Money Order
- Amex

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): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

COMMON CARRIER IDENTIFICATION

CC# 64337 US DOT# 1546459 WA UNIFIED BUSINESS IDENTIFIER (UBI) #: 603126421 No Sec

APPLICANT NAME: KAT Transportation LLC PHONE#: 541-607-9331

d/b/a: \_\_\_\_\_ FAX #: 541-998-8282

BUSINESS (MAILING) ADDRESS: (street address, P.O. Box) PO Box 41450

(city, state, zip) Eugene OR 97404

PHYSICAL ADDRESS: (street address, if different)

**TYPE OF BUSINESS**  
(Check one box for type of business, partnership, or other information)

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

**NAME** Trista Jobe **TITLE** member **ADDRESS** Po Box 40785 Eugene, OR 97407 **STOCK DISTRIBUTION OR PERCENTAGE OF SHARE** 100 %

**TRANSFER OF PERMIT**

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 \_\_\_\_\_

- 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.

UNIT#	LICENSE#	STATE	VIN#
	<u>See Attached</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.

Trista Jobe  
Signature(s)

7-5-11  
Date

Vehicle List For KAT Transportation LLC

Unit# 16 PETERBILT YAGG911 OR VIN# 1XP9D29X3DP155080  
Unit# 17 PETERBILT YAFM252 OR VIN# 1XP5DB9X7HD214850  
UNIT# 24 KENWORTH YAGE829 OR VIN# 1XKADR9X7PJ584323  
UNIT# 25 FREIGHTLINER YAFM259 OR VIN# 1FUVDZYB8SH597736  
UNIT# 28 FREIGHTLINER YAFM383 OR VIN# 1FUYSYB5SP533649  
UNIT# 29 FREIGHTLINER YAFM384 OR VIN# 1FUYSYB6RP533640  
UNIT# 35 FREIGHTLINER YAFS052 OR VIN# 1FUPDSZB2TP691457  
UNIT# 36 FREIGHTLINER YAGE363 OR VIN# 1FUVDXYB4TP571940  
UNIT# 37 FREIGHTLINER YAGE676 OR VIN# 1FUPDSZB7XLA14677  
UNIT# 40 PETERBILT YAGP339 OR VIN# 1XP9D29X1FN184317

# 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) 838-1660.
- J. J. Keller & Associates, Inc., 3003 W. Brezewood 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: Jimma Kobe Position: Member

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: Jimma Kobe Position: Member

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.

Name: Justin Tobe Position: Member

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.

Name: Justin Tobe Position: Member

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.

Name: Justin Tobe Position: Member

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.

**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.**

Justin Tobe

7-5-11

Signature of applicant

Date



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250  
(360) 664-1160 • TTY (360) 586-8203

KAT Transportation LLC  
PO Box 41450  
Eugene OR 97404

October 4, 2011

**Notice of Deficient Application – TV-111247**

The following items either need to be completed and/or corrected for prompt processing of your application for common carrier permit CC-64337 operating authority:

- X FINAL NOTICE! Please note that this is your forth and final notice. You must provide the required information by October 19, 2011 or your application will be dismissed.
- X Your LLC is still not listed as registered yet with the Secretary of State's office. You may contact them at 360-725-0377 for assistance. If you have proof you are now registered please provide our office a copy of the document.

**Who do I contact if I have questions?**

You may call 360-664-1222 or e-mail us at [transportation@utc.wa.gov](mailto:transportation@utc.wa.gov). Our fax number is 360-586-1181.

Thank You.

  
Ken Chapman  
Transportation Specialist II

10-18-11 REVIEW NOT Registered

RECEIVED

4019

SEP 16 2011

WASH. UT. & TP. COMM

GRIFFIN UNDERWRITING SERVICES  
1980 112TH AVE. NE, STE. 210  
Bellevue, WA 98004

WASHINGTON UTILITIES & TRANSPORTATION  
COMMISSION  
P.O. Box 47250  
Olympia, WA 98504

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

Docket No.

Filed with WASHINGTON UTILITIES & TRANSPORTATION COMMISSION (hereinafter called Commission)  
(NAME OF COMMISSION)

This is to certify, that the ARGONAUT MIDWEST INSURANCE COMPANY  
(NAME OF COMPANY)

(hereinafter called Company) of 10101 REUNION PLACE, SUITE 500 San Antonio, TX 78216  
(HOME OFFICE ADDRESS OF THE COMPANY)

has issued to KAT TRANSPORTATIONS LLC  
(NAME OF THE MOTOR CARRIER)

of 91541 ALVADORE ROAD JUNCTION CITY, OR 97448  
(ADDRESS OF THE MOTOR CARRIER)

a policy or policies of insurance effective from 09/07/2011, 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 the notice is actually received in the office of the Commission.

Countersigned at 8450 East Crescent Parkway Greenwood Village CO 80111  
(Street Address) (City) (State) (Zip Code)

this 9TH day of September 2011

Insurance Company File No. MC8057707  
(Policy Number)

  
(Authorized Company Representative)

This form determined by the National Association of Railroad and Utilities 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)).

9/7/2012 12:00:00AM



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

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(360) 664-1160 • TTY (360) 586-8203

KAT Transportation LLC  
PO Box 41450  
Eugene OR 97404

September 8, 2011

**Notice of Deficient Application**

The following items either need to be completed and/or corrected for prompt processing of your application for operating authority:

- X FINAL NOTICE! Please note that this is your third and final notice. You must provide the required information by October 2, 2011 or your application will be dismissed.
  
- X Your LLC is still not registered with the Secretary of State. Please provide status of the registration. You may contact the Secretary of State's office at 360-725-0377.

**Who do I contact if I have questions?**

You may call 360-664-1222 or e-mail us at [transportation@utc.wa.gov](mailto:transportation@utc.wa.gov). Our fax number is 360-586-1181.

Thank You.





STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250  
(360) 664-1160 • TTY (360) 586-8203

KAT Transportation LLC  
PO Box 41450  
Eugene OR 97404

August 10, 2011

**Notice of Deficient Application – TV-111247**

The following items either need to be completed and/or corrected for prompt processing of your application for common carrier permit CC-64337 operating authority:

- X FINAL NOTICE! Please note that this is your second and final notice. You must provide the required information by September 11, 2011 or your application will be dismissed.
- X Your LLC is not listed as registered yet with the Secretary of State's office. You may contact them at 360-725-0377. Please advise if you are currently in the registration process.

**Who do I contact if I have questions?**

You may call 360-664-1222 or e-mail us at [transportation@utc.wa.gov](mailto:transportation@utc.wa.gov). Our fax number is 360-586-1181.

Thank You.

8/24 NOT Registered called was filed w/secst  
214-8971-TRACTING #  
8/30 No sec state, NO NEW FORM E  
9/8- Sec st Database Not yet listed called  
8/18



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250

(360) 664-1160 • TTY (360) 586-8203

KAT Transportation LLC  
PO Box 41450  
Eugene OR 97404

July 27, 2011

**Notice of Deficient Application – TV-111247**

The following items either need to be completed and/or corrected for prompt processing of your application for common carrier permit CC-64337 operating authority:

- X FINAL NOTICE! Please note that this is your second and final notice. You must provide the required information by September 11, 2011 or your application will be dismissed.
  
- X Your LLC is not listed as registered with the Washington Secretary of State's office. Please contact their office online at [www.sos.wa.gov](http://www.sos.wa.gov) or at 360-725-0377.

**Who do I contact if I have questions?**

You may call 360-664-1222 or e-mail us at [transportation@utc.wa.gov](mailto:transportation@utc.wa.gov). Our fax number is 360-586-1181.

Thank You.

8-4-11 NO sec state Reg  
8-10-11 NO sec state



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250

(360) 664-1160 • TTY (360) 586-8203

KAT Transportation LLC  
PO Box 41450  
Eugene OR 97404

July 11, 2011

**Notice of Deficient Application – TV-111247**

The following items either need to be completed and/or corrected for prompt processing of your application for operating authority:

- X Since you are a Limited Liability Company, you must be registered with the Secretary of State's office. They can be reached at 360-725-0377.
- X Obtain a Uniform Motor Carrier Certificate of Insurance (Form E) from your insurance company. The insurance must show your name EXACTLY as it is shown above.

**Who do I contact if I have questions?**

You may call 360-664-1222 or e-mail us at [transportation@utc.wa.gov](mailto:transportation@utc.wa.gov). Our fax number is 360-586-1181.

Thank You.

*Bindui 7-19-11 - Form E 7/20*

*→ NO sec state 7-19-11  
" " " 7-20*

*7-27 NO sec state*