PART A

TV# 111396

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						
CASH (excluding Household Goods and Common Carrier Brokers) FOR OFFICIAL USE ONLY						
Reception Number: 033366	Safety:	L USL ONL	Carrier ID#:			
111 0268 200 02 275	Insurance:		Emplovee:			
	YPE OF APPLICA	TION (check on				
New Common Carrier Permit		Extension of Co	mmon Carrier Permit Authority			
Transfer of Existing Pe	ermit Number					
\$275 GENERAL COMMODITI	AL COMMODITIES ONLY		\$600 GENERAL COMMODITIES, including ARMORED CAR SERVICE			
\$275 GENERAL COMMODITIES ARMORDED CAR SERVICE		GENERAL COMMODITIES, including HAZARDOUS MATERIALS				
\$275 GENERAL COMMODITIES HAZARDOUS MATERIALS		V / \ HA	NERAL COMMODITIES, including ZARDOUS MATERIALS and ARMORED CAR RVICE			
\$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 #:						
高级解析,多少于概念。[1] 图制	TYPE OF P	PAYMENT				
☐ Check ☐ Money Order ☐ Ame	x □ Discover □ N	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 (printeg): D UKAS+LKC	<u> </u>	Date:	28-11 r/nember			
Signature: Colla (Prashscl	en	Title: ()U)L)C	rluember			
	OTOR CARRIER					
CC#: 64361 JUS DOT#	1981301	WA UNIFIED	BUSINESS IDENTIFIER (UBI) #:			
APPLICANT NAME:			ONE#:			
OUTKASTLLC 3(0-581-9889 d/b/a: FAX#:						
d/b/a:		FA.	\ #.			
BUSINESS (MAILING) ADDRESS: P.O. BOX 243						
(city/state, zip) Elma, wh 98541						
PHYSICAL ADDRESS: (street address, if different) 30 Stamper Rd. Elma UA 985						
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transfer	of the permit	number.				
NAME ON PER	MIT:				PERMIT N	NUMBER:
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Signature of cu					ITC.	Date
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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: Any driver who operates a vehicle that meets the definition	Position: Olexer/Member
Any driver who operates a vehicle that meets the definition must have a valid CDL. The definition of a commercial mo	n of a commercial motor vehicle as described below otor 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: Andronale	Position: Ounes/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.

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Driver Qualification Requirements
Name: Im Sounder Position: Ouver Member
Each company must maintain a complete Driver Qualification File for each employee authorized to drive moto 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: In Cumber Position: Organ Member
Each company must maintain true and accurate hours of service records for each individual that drives a moto 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: In Country Position: Okner/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.
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.
In male 7-28-11
Signature of applicant Juju Oransolen Date